Self Reflection sheet for Heart Manual facilitators

This self-reflection guide is designed to be used after each session for your first three or four patients to help you consolidate your facilitation skills. You can also use this at any time to review your skills.

Date:		Facilitator's notes:
Step 1 **Build a rapport**	▪ Encourage active patient/family involvement ▪ Discuss your role as a facilitator and provide contact details ▪ Review patient and partner experience and normalise reaction to event/condition ▪ Consider emotional support needs of patient/family ▪ Provide rationale for HM and explain key components ▪ Tailor intervention to patients specific needs /beliefs /motivations/ barriers ▪ Empathic/non judgemental approach ▪ Use OARS techniques (Open questions, Affirmation, Reflective listening, Summaries) ▪ Collaborative decision making	
Step 2 **Think about CHD**	▪ Check understanding of condition and intervention ▪ Identify and address misconceptions ▪ Identify the most important issue for the patient /family /friend ▪ Assess patients current situation/individual needs ▪ Assess medication adherence and understanding of medication ▪ Assess clinical needs/psycho-social needs: baseline HAD ▪ Offer specific condition/event information and direct to Part 1 of the HM/use of visual aids ▪ Other questions/concerns? ▪ Discuss symptom management and ensure they know when and how to use GTN spray/call 999	
Step 3 **Think about risk factors**	▪ Assess patient/carer understanding of CHD and impact of self care behaviours ▪ Encourage patient to identify individual/relevant risk factors	

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Step 3 contd.	▪ Note accurate responses & reinforce the benefits of changes already made ▪ Signpost to relevant sections in the HM ▪ Ask patient if they have any risk factors they would like to address; help to prioritise ▪ Offer specific risk factor information directing to relevant sections in the HM ▪ Refer to specialist services e.g. smoking cessation if available	
Step 4 **Set goals and pace**	▪ Introduce the resources as outlined in guidance notes ▪ Assess readiness to change: importance and confidence scaling ▪ Identify/agree patient centred goals /priorities Discuss SMART goal-setting and how to deal with setbacks ▪ Identify previous level of activity ▪ In collaboration with the patient set initial activity goal ▪ Encourage patient to record progress in exercise record/walking record/activity record ▪ Go over principles of pacing and how to increase activity gradually ▪ Ensure understanding of moderate intensity exercise ▪ Encourage use of relaxation CD /stress-management techniques ▪ Signpost to relevant sections in the manual	
Step 5 **Sum it up**	▪ Summarise what has been discussed ▪ Ensure patient/family member know what goals have been agreed and how to record progress ▪ Ensure they know what to do if patient experiences chest pain/other symptoms ▪ Arrange for follow up visit/phone call to review progress and revise goals as necessary ▪ Reinforce positive behaviours ▪ Support self management and put plans in place for ongoing maintenance ▪ Highlight importance of not sharing the HM with others with cardiac conditions	