

# BRIDGING STRATEGY 2024-2025

## Introduction from The Chair of the Board of Trustees

The British Society for Heart Failure (BSH) is at a turning point. Having grown rapidly in the last few years, we are now working to strengthen our foundations, clarify our direction, respond to a rapidly evolving wider environment and recruit a new chief executive. There is much to do, and our people are exceptionally busy. Focusing on fewer, clearer objectives and working in a more planned and co-ordinated way are paramount to ensure we are successful in our endeavours, and better able to continue the vital work we do to support the hundreds of thousands of people who suffer, or will in the future suffer, from heart failure. This Bridging Strategy has been introduced to provide clarity of purpose and direction for the next 15 months. Over this period, we will recruit a new chief executive who will work with the Board of Trustees to develop a new, long-term strategic plan.

This is an exciting time for the BSH, with a (still relatively) new Government in place, who are working on a new 10-year health plan. Our influencing and awareness-raising work will be vital over this period, as we seek to ensure that heart failure is prominent in the Government's new health plans. Our ongoing 25in25 initiative, with an ambitious aim to reduce mortality from heart failure in the year after diagnosis by 25% in the next 25 years, is moving into its next stage, with 5 pilot sites recruited to trial a set of indicators, prior to development of a national dashboard for monitoring heart failure management. We also have much to do to get our house in order, notably implementation of the governance review that was completed for us by the National Council of Voluntary Organisations (NCVO) earlier in 2024. This will lead to the implementation of a more rigorous governance and leadership structure, ensuring we have a fit-for-the-future framework to take us forward for the next 25-years.

Much to do and as ever, we are both reliant upon and indebted to the many members of the BSH who devote huge amounts of their time to support the work of the Charity. We are similarly grateful and indebted to the small but highly talented staff team, who work tirelessly to support the Society. Thanks to you all and I commend this new Strategy to you.



**Dr Lisa Anderson**  
**Chair of the Board of Trustees**

## Our Belief

1 million people in the UK have heart failure and an estimated further 400,000 have undiagnosed heart failure, and numbers are on the rise. Heart failure takes 2% of the NHS budget, yet awareness and understanding across society are low. Improved awareness, earlier diagnosis and treatment, along with adequate heart failure trained personnel, could save thousands of lives each year, improve quality of life for people with heart failure, and ease pressure on the healthcare system.

## Our Vision

Heart failure is a national priority, NHS resourcing is significantly increased, policymakers, healthcare professionals and wider society are fully aware of the causes, impact and burden of heart failure, and undiagnosed and late diagnosis heart failure is dramatically reduced and appropriately treated.

## Our Mission

We drive up standards of heart failure care through well trained and resourced healthcare professionals, delaying or preventing the onset of heart failure, early identification and timely access to treatment, and improving patient outcomes.





## Our Purpose

- **Education and Research** – we lead the way in educating doctors, nurses and allied specialists working in hospitals and the community, to improve care for patients with heart failure. Our education work is always based on the best available research and evidence, and we support and promote research activity in multiple ways.
- **Membership** – we have 1,300 professionals from across the clinical community in membership. We equip healthcare professionals, including those most closely involved in caring for people with heart failure, with up-to-date specialist education and research, whilst providing opportunities for networking and other membership benefits.
- **Awareness** – we are committed to preventing avoidable heart failure deaths and improving the lives of people with heart failure through awareness and early intervention. Together, we can make heart failure a national priority through our work, research and education, with the aim of preserving life, increasing survival and improving quality of life for people living with heart failure. We work with other organisations in the health sector to further this ambition.
- **Influencing change** – through our professional standing, research and strategic engagement activity, we work to educate and inspire policymakers to do more to improve prevention, detection and treatment for heart failure patients. Our intention is to grow the network of heart failure specialists throughout the country so no one in need goes without the care they require.



## Our Values

- **Collaborative** – we work in partnership with clinicians, other health organisations, and with heart failure patients, recognising the benefit of an informed and collective voice.
- **Evidence-based** – our work, our policy and our campaigns are grounded in research, robust evidence and input from heart failure patients.
- **Professional and member-led** – we are a professional society of experts in heart failure who are committed to improving outcomes for people with heart failure. We are guided and led by our members, many of whom devote significant time to supporting the work of BSH.



BSH was established 27 years ago as a professional society for clinicians and associated professionals in the field of heart failure. Its aims were to promote research into heart failure and dissemination of the results of such research, to effect high quality heart failure care. The Charity has grown in the past 5 years under the leadership of the last Chief Executive, trebling in size, raising its profile and building a partnership behind its flagship project, 25in25.

Launched in 2023, 25in25 is a long-term, national research and quality improvement project, aiming to reduce mortality from heart failure in the year after diagnosis by 25% in the next 25 years. Work started with 5 pilot sites, with a short-term objective of developing and deploying a national dashboard for monitoring heart failure management. Longer-term goals are to improve heart failure detection, diagnosis, treatment and patient empowerment; and to create a database for those with and at risk of heart failure.

The NHS is in crisis, facing workforce challenges, huge waiting lists caused in part by a COVID backlog, and underfunding. The scale of the heart failure problem is enormous, with 2% of the NHS budget spent on heart failure, an estimated 1 million people in the UK having a heart failure diagnosis and further 400,000 undiagnosed. Furthermore, the prevalence of heart failure is expected to increase significantly over the coming years. Heart failure is poorly understood, and symptoms often go unrecognised, contributing to an increase in early death. Improved awareness, diagnosis and treatment could save thousands of lives each year.

With a new government, keen to change how the country is run and with ambitious plans for health care, it is likely the way the NHS is funded and run will change. Understanding how this impacts BSH and its members, and heart failure diagnosis and treatment, is a priority. There is also ongoing scrutiny and concern about funding from, and relationships with, pharmaceutical companies for patient groups and health sector charities. With 95% of BSH's income coming from pharmaceutical companies, reliance on this source is a risk.

There are many organisations in the heart health and heart failure space, with notable 'big names', like the British Heart Foundation, and many smaller charities. BSH has a good relationship with some of these organisations but needs to strengthen others. BSH must develop a more coherent approach to working with its network of partners and stakeholders, ensuring the whole is greater than the sum of its parts, drawing on this partnership to further mutual aims, particularly in the areas of influencing and awareness raising.

Guiding all our work is our **Belief** that 1 million people in the UK have heart failure and an estimated further 400,000 have undiagnosed heart failure, and these numbers are on the rise. Heart failure takes up 2% of the entire NHS budget, yet it is widely misunderstood across society and awareness is low. Improved awareness, earlier diagnosis and treatment, together with sufficient heart failure trained personnel, could save thousands of lives each year.

## Membership support



Equipping healthcare professionals with up-to-date specialist education and research, input to national curriculum, networking opportunities and membership benefits.

## Education and Research



Educating health professionals to prevent, better diagnose and treat heart failure, supported by evidence. Promotion of heart failure research and support for early career researchers.

## Influencing



Influencing change by engaging and motivating those in power to improve services and outcomes for heart failure patients.

## Building capacity



Developing our charity to progress our mission, through robust governance, strong finances, partnership working and effective people.

## Awareness raising



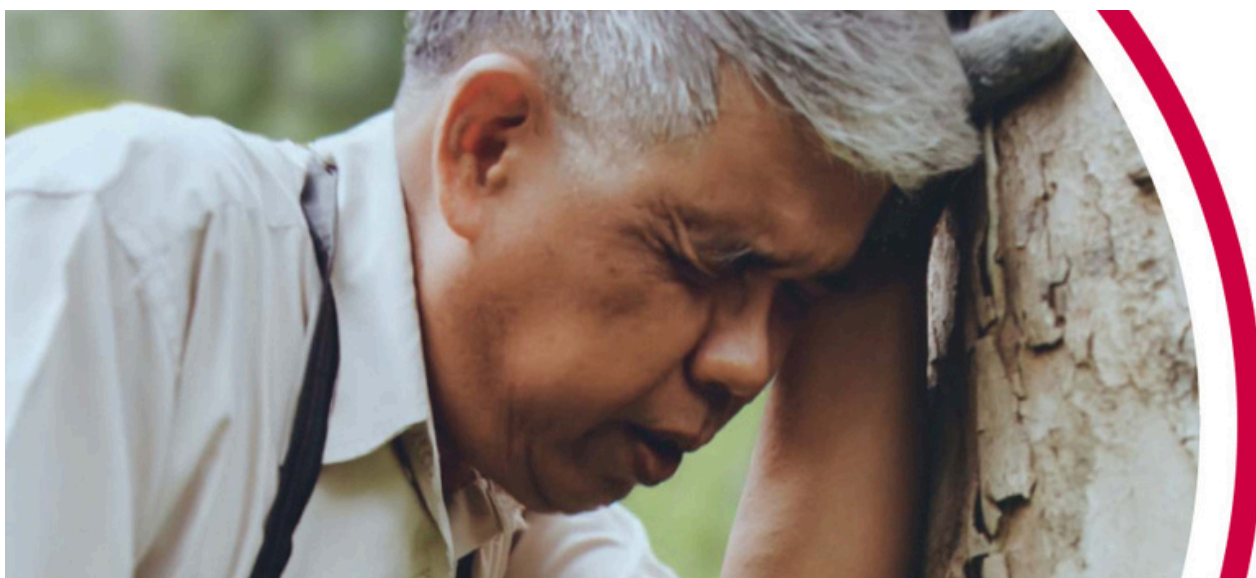
Preventing avoidable deaths from heart failure through awareness and early intervention and increased heart failure staff resource.

## Education and Research

We lead the way in educating doctors, nurses and allied specialists working in hospitals and the community, to improve care for patients with heart failure. Our education work is always based on the best available research and evidence, and we support and promote research activity in multiple ways.

Through education and research, we support health professionals prevent, better diagnose and care for heart failure patients. Our members are at the cutting edge of research into the causes, diagnosis and treatment of heart failure. This research informs clinical practice and NICE and ESC guidelines. Our education and training is for health professionals working in heart failure, but is also accessed by wider health workers, supporting better diagnosis and treatment. Our education work is structured around core activities over the course of the year, particularly our Annual Meeting and Multi-Disciplinary Training Conference. Over the next 18 months, we will build on recent work and initiatives, enhancing our educational offer.

Our **Vision** for the future is that heart failure is a national priority, resourcing in the NHS has increased significantly, society is widely aware of the symptoms of heart failure and undiagnosed and late diagnosis heart failure is dramatically reduced.

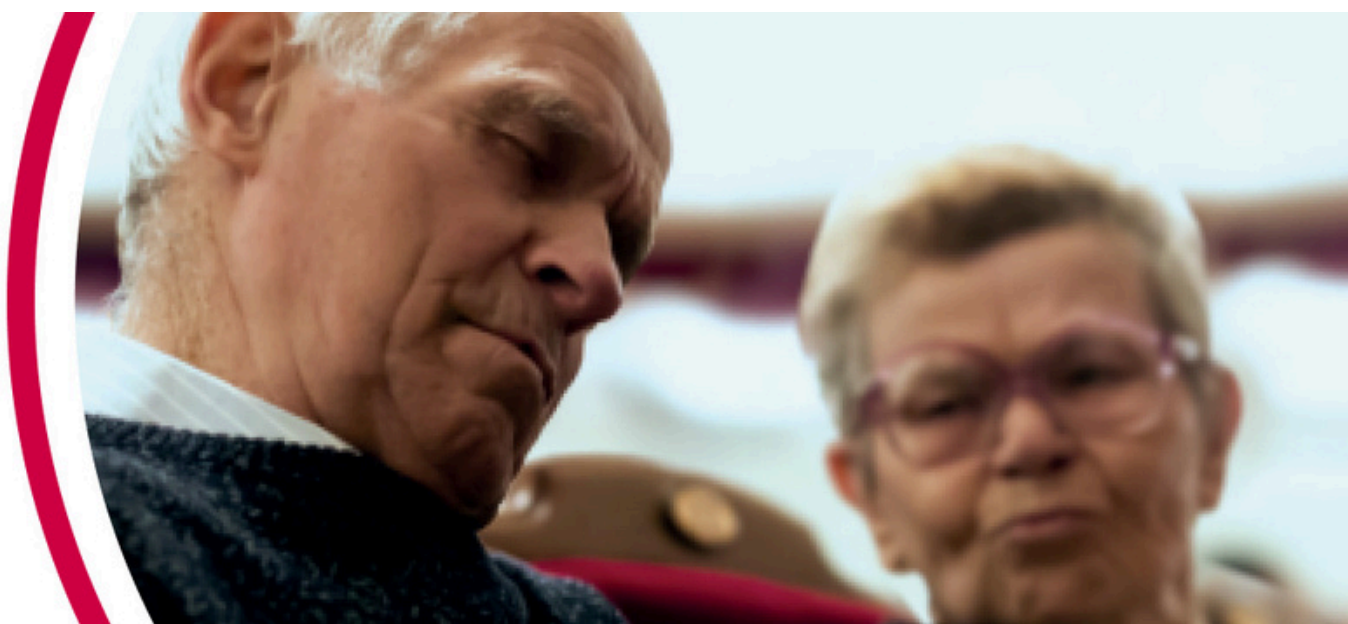


### Critical education and research activity:

- Our flagship educational and membership events will operate as normal. The Annual Meeting will take place in London in autumn each year and the Multi-Disciplinary Training (MDT) Conference will take place in spring.
- Building on the success of our Quality Improvement (QI) programme for nurses, trialled in 2023, we will launch another QI cohort in spring 2025. We will run the programme annually for the next 3 years, with the programme open to at least 10 delegates each year.



- We will continue to develop our online educational resources, including webinars, patient information and online materials. Our Education Committee will review the suite of online materials to ensure they are up-to-date and comprehensive.
- Our Patient Advisory Panel will play a critical role informing our education work, including as patient advisors on the program committees and roles in our two flagship events.
- The suite of cutting-edge e-learning modules that have been in development throughout 2023 and 2024 will be launched by the end of 2024.
- We will continue to promote, support and disseminate research, including through our Research Investigator Network and Early Investigator Award. We will continue to involve our Patient Advisory Panel in offering patient input to clinical trials and research.
- We will fund 7 Research Fellowships during 2024 and 2025, all supported by pharmaceutical partners. The research outputs from these fellowships will be presented at the Annual Meeting and disseminated via other media as appropriate.
- We will develop position statements, in collaboration with other professional societies, regarding national and international guidelines.
- Our 25in25 project, which aims to reduce death by heart failure in the first year after diagnosis by 25% in 25 years. The initiative is covered under the Awareness section below.



**5 new e-learning modules; 1,000 delegates at the Annual Meeting; 150 delegates at the MDT Conference; 7 Research Fellowships; 30 delegates involved in QI programme over next 3 years**



# Membership

We have 1,300 professionals from across the clinical community in membership. It is our aim to equip healthcare professionals, including those most closely involved in caring for people with heart failure, with up-to-date specialist education and research, whilst providing opportunities for networking and other membership benefits.

Heart failure professionals are scattered across the United Kingdom and working in a wide variety of roles, including as consultants, doctors, specialist nurses, physiologists and pharmacists. Working in a specialist field, such as heart failure, can be isolating and frustrating. We offer a family for heart failure professionals, providing support, guidance, professional development and networking opportunities. We recognise that some support is best provided at the UK level, other at a national, regional or local level. Health professionals are busy people and need easy access to membership support online. Barriers to entry, such as high membership fees, must also be kept to an absolute minimum. We will therefore work to ensure that membership of the BSH is accessible, affordable and inclusive.

Our **mission** is to drive up standards of heart failure care through well trained and resourced healthcare professionals, delaying or preventing the onset of heart failure, early identification and timely access to treatment, and improving patient outcomes.

## Critical membership support activity:

- Our online membership platform provides opportunities for online networking, discussion fora, and communication from and with BSH centrally. We will review our platform to ensure it is fit-for-purpose.
- We will introduce an annual survey of members, which we will use to better understand how we can meet our members' needs.
- We will review opportunities for regional networks.
- We will support the establishment of the new Welsh Heart Failure Society and review the demand for Scottish and Northern Irish versions.
- We will grow our membership to 1,400 by the end of 2025; as part of this objective, we will grow the number of medical students in membership through a targeted campaign in university medical schools. We will target pharmacists and physiologists, utilising the physiologists' training programme funded by Abbott to promote BSH membership.
- We will review our membership fee model, ensuring the range of prices is appropriate for the breadth of our membership and is as accessible as possible.
- We will consult members on the desirability of introducing different levels of membership, such as student, member, associate, fellow and companion.
- We will review other similar professional societies to identify best practice in membership support and confirm development opportunities for BSH.

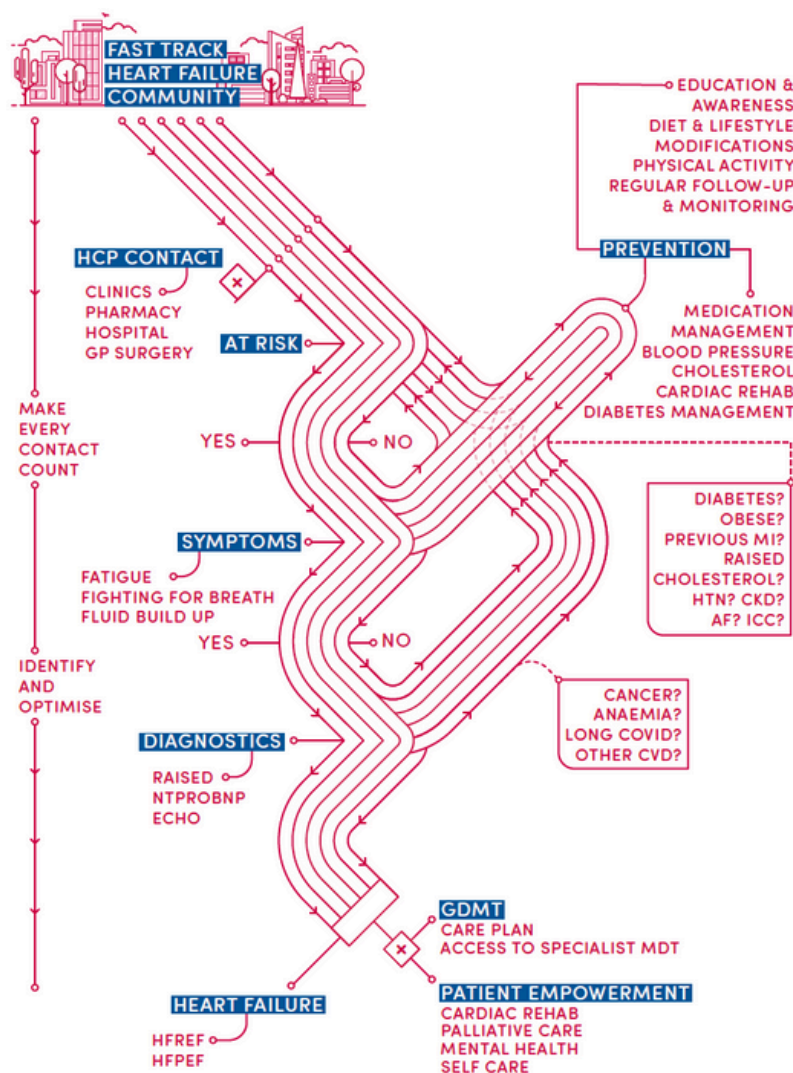
**Grow membership to 1,400; introduce annual membership survey; support establishment of Welsh HF Society; review our membership fee model; review our levels of membership.**

## Awareness

We are committed to preventing avoidable deaths due to heart failure through awareness and early intervention. Together, we can make heart failure a national priority through our work, research and education, with the aim of preserving life, increase survival and improve quality of life for people living with heart failure. We work with other organisations in the heart health sector to further this ambition.

We know that awareness amongst the public about heart failure, and its symptoms, is limited, and that this inhibits early diagnosis, thus leading to avoidable, and early deaths. By working with other health organisations, as well as through our own campaigns, events and initiatives, we aim to increase awareness and make heart failure a national priority. We also want to raise awareness amongst wider health professionals about the symptoms of heart failure, leading to earlier diagnosis and treatment. Our 25in25 campaign launched in 2023. We now have 5 active pilot sites working with external project partners to develop and deploy a national dashboard for monitoring heart failure management. Longer-term goals are to improve heart failure detection, diagnosis, treatment and patient empowerment; and create a database for those with and at risk of heart failure.

We are Collaborative, Evidence-based, Professional and member-led; these values shape our work and act as guiding principles for our behaviour and decision-making.



### Critical awareness raising activity:

- We will recruit a project manager for 25in25, review the project brief and project plan and confirm milestones and critical objectives for the next 18 months.
- We will deliver our commitments with the current 25in25 pilot sites and, following evaluation of outcomes from the first 5 pilot sites, confirm opportunities for 2 further pilot sites, in Jersey and Glasgow, to join the programme.
- We will hold one national event, in 2025, to bring together the sixty 25in25 partners, showcase learning and project developments and raise awareness about the project and heart failure generally.
- We will support our Patient Advisory Panel to spread the word about heart failure amongst the public, through attendance at conferences and events along-side our clinicians and staff, speaking engagements, and a variety of communication media.
- We will attend relevant events and conferences, showcasing our work, our 25in25 initiative, and increasing awareness about heart failure. Over the course of the year, we will tactically select up to 15 conferences and events to attend and will focus on local events that support the 25in25 pilot sites.
- We will utilise national and international heart health days and months, as well as other health-related dates, as communication opportunities to promote awareness about heart failure. Over the course of the year, we aim to run at least 5 awareness-raising communication campaigns.

**Launch 2 more 25in25 pilots; run a national 25in25 event; support our Patient Advisory Panel; attend up to 15 conferences and events; run at least 5 awareness-raising campaigns.**



The logo features the text '25IN 25' in a bold, red, distressed font. The '25' at the top is smaller and positioned to the left of the 'IN', while the '25' at the bottom is larger and positioned to the right of the 'IN'. A large, thick red arc curves from the bottom left towards the top right, framing the text.

**25IN  
25**

## Influencing Change

Through our professional standing, our research work and our strategic engagement activity, we work to educate and inspire those in power to do more to support our mission. Our intention is to grow the network of heart failure specialists throughout the country so no patient goes without the specialist heart failure care they require.

With a new government in place, one that has signalled its intent to take a longer-term approach to tackling health issues and to reviewing the way the NHS operates and is funded, the next 12 months is a rare opportunity to influence national heart failure policy. Our influencing change strategy will harness the collective power of the 25in25 collaboration to influence policymakers. We will emphasise the importance of early detection and intervention by engaging healthcare professionals across the broader multidisciplinary spectrum and health systems. Our influencing change work will always be backed up by research and evidence, which provide us with the professional standing to be credible to policy makers. Our Policy Committee will lead and co-ordinate our influencing change strategy and activity.

### Critical activity for influencing change:

- We will continue our programme of engaging policy makers to deliver the BSH objectives, in particular MPs involved in healthcare, members of the devolved governments, NHS and DHSC Executives, Government agencies, and local policymakers.
- We will engage with think tanks, including the Health Foundation, King's Fund, Nuffield Trust, and Institute for Public Policy Research, to encourage them to incorporate our policy position in work they are doing related to health and heart failure.
- We will continue discussions with the Health Minister to embed the 25in25 goals in the Government's health strategy.
- We will attend the Labour Party Conference in autumn 2024 and autumn 2025, using the event to learn about government policy and plans and to engage relevant MP's and wider policy makers.
- We will reaffirm our partnership with the wider group of healthcare stakeholders, drawing on the collective power of this partnership to further our influencing objectives.



**Engage policy makers to support BSH objectives; engage think tanks to support our policy position; engage Health Minister to embed 25in25 goals in health strategy; work collaboratively with external stakeholders.**



## Building Capacity

**We will build organisational capacity, ensuring we are well governed, resourced and funded, that we have the right leadership in place and that we work collaboratively with our stakeholders.**

We are a relatively young organisation, and one that has grown rapidly in the last few years, with all the associated challenges this can bring. We have an active group of volunteers from amongst our membership, who deliver a significant proportion of the Charity's work; these volunteers are supported by a very small staff team. Our governance is typical of a professional society, with the entire Board of Trustees elected from amongst the members. Whilst our funding has grown significantly in recent years, it comes almost entirely from pharmaceutical companies, posing several risks.

Over the next 18 months, we need to recruit a new chief executive to work with the Chair and Board to lead the organisation over the next few years. We must also review our people resource, ensuring we have the right balance of volunteers and paid staff to deliver our strategy and charitable purpose. The recent governance review, conducted by the National Council of Voluntary Organisations (NCVO) needs to be concluded and the confirmed changes implemented. We also need to review our financial model, identifying opportunities to diversify our income streams, and confirm our approach to working with other stakeholders in the heart health sector.

### Critical activity for building activity:

- We will conclude the NCVO Governance Review, confirm the changes to our governance required to ensure we are robustly governed and compliant with good practice, and implement such recommendations by the end of 2025.
- We will recruit a new chief executive, with an ambition to confirm the appointment by the end of 2025.
- We will complete a review of our people resource by mid-2025, including reviewing the balance of volunteers and staff, the staffing structure and the required resourcing to deliver the 25in25 project.
- We will complete a review of the funding model for BSH, identifying opportunities to diversify the Charity's funding, including through more traditional charity fundraising. The review will be completed by the end of 2025.
- We will improve our external stakeholder relationships, utilising the strength these partnerships bring to amplify our messaging, complement resources and build effectiveness.

**Implement the NCVO Governance Review; recruit a new chief executive; review our people resource; review our financial model; strengthen stakeholder relationships.**



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