Heart Failure (HF) Provider Network

Chronic Heart Failure QUERI

April 2012

Chronic Heart Failure

Heart failure is associated with high mortality and poor quality of life. Currently, heart failure affects nearly five million Americans, and hospital admissions for this condition have increased six-fold in the United States since 1970 (from 80,000 per year to more than 500,000) due, in part, to an aging population. Moreover, heart failure is the number one reason for discharge for Veterans treated within the VA health care system.

The Chronic Heart Failure Quality Enhancement Research Initiative (CHF-QUERI) utilizes the QUERI six-step process to improve the quality of care and health outcomes of Veterans with heart failure. The following goals have been identified for CHF-QUERI:

- · Improving early follow-up and reducing readmission,
- Increasing the use of life-prolonging treatment,
- · Increasing care that improves quality of life,
- · Empowering patients and caregivers for self-management, and
- Improving appropriateness of heart failure treatments and tests.

Heart Failure Provider Network

CHF-QUERI, with the help of Robert Jesse, M.D., Ph.D., Deputy Principal Under Secretary for Health and John Rumsfeld M.D., Ph.D., Acting Director National Cardiology Program, VA's Patient Care Services, has initiated the Heart Failure Provider Network (HF Network) — a network of VA providers interested in improving heart failure care throughout the VA healthcare system. Currently, more than 820 providers from 150 VA Medical Centers and VA healthcare systems are participating in this network, including facility and VISN leadership (15%), physicians (40%), nurses (28%), pharmacists (6%),

quality managers (4%), and others (7%).

Purpose

The HF Network is an important mechanism for the implementation of interventions that will improve the health and healthcare for Veterans with heart failure. Through its collaboration, the HF Network focuses on the following related activities:

- Share experiences with different heart failure care programs;
- Disseminate effective interventions, including implementation of quality improvement interventions;
- Collaborate on heart failure registries;
- Collaborate on research and implementation projects;
- Identify interested facilities for

- participation in multi-center health services research projects and other clinical trials; and
- Contribute to implementation research by understanding barriers and facilitators to implementation.

How Does the HF Provider Network Communicate?

Bi-monthly sessions are held with live meetings and conference calls. These sessions include announcements, discussion of new projects and trials, and description of one facility's heart failure program. In addition, there is an annual in-person meeting that is held at the Annual Meeting of the Heart Failure Society of America (for those Network members who are able to attend). The HF Network also communicates via e-mail and CHF-QUERI's SharePoint site.

Implementation Project Using HF Provider Network

CHF-QUERI has implemented several quality improvement initiatives through its HF Network. It has been facilitating the implementation of the VA Hospital-To-Home (VA H2H) initiative at all VA facilities. All facilities were provided toolkits, along with active support, such as web-based meetings, e-mails, consultations, and the participation of local opinion leaders. As of April 2012, 82 VA facilities are enrolled on the national H2H website. A total of 91 facilities have reported 529 projects aimed at improving heart failure care. These projects focus on medication management (29%), early followup after discharge (30%), symptom management (27%), as well as other

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areas (14%) important to improving care for Veterans with chronic heart failure. CHF-QUERI is gathering data to examine the impact of the VA H2H initiative on heart failure readmission and mortality rates among Veterans.

HF Provider Network Website

The website for the HF Network provides the schedule of sessions, along with topics, slides, and recordings of the presentations at these sessions. It also includes information with slides about successful HF programs focusing on key topics, as well as varying stages of the HF program. There also are patient education materials, caregiver materials, a VA HF list of experts, and an HF Assessment Tool for the patient.

Web-based HF Provider Toolkit

CHF-QUERI has developed a comprehensive webbased Heart Failure (HF) Toolkit for Providers through collaboration with the members of its Heart Failure Provider (HF) Network, as well as non-VA organizations. This toolkit focuses on several key areas in the management of heart

How Do I Learn More?

For more information about the HF Provider Network, contact:

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Web Resources

For more information about the QUERI program in general, and to link to all of the individual QUERI Centers, please go to

www.queri.research.va.gov

failure with links and downloadable documents. Key focus areas are mortality risk models, practice guidelines, clinical pathways, clinical algorithms, screening forms, admission and discharge order sets and instructions, best practices, and education materials for providers, patients, and caregivers.

What are the Network's Plans for the Future?

CHF-QUERI plans to continue implementing different types of interventions, including using local and expert opinion leaders, reminders, and nurse-based clinics.

Can Anyone Join?

The HF Provider Network for VA providers includes a mix of facility and VISN/region leadership, physicians, nurses, physician assistants, pharmacists, quality managers, researchers, and administrators. There is no limit to the number of people who may join from any VA facility. Interested persons from non-VA organizations are encouraged to review the materials and resources posted on the CHF-QUERI website.

The CHF-QUERI **Executive Committee**

Each QUERI Executive Committee is co-chaired by a research expert and a clinician. The Director for CHF-QUERI is Paul Heidenreich, M.D., M.S.; the Clinical Coordinator is **Barry Massie**, M.D., and the Implementation Research Coordinator is **Anju Sahay**, **Ph.D**. The Executive Committee consists of a multi-disciplinary team including: Anita Deswal, M.D.; Mark Dunlap, M.D.; Gregg Fonarow, M.D.; Jeffrey Frederick, B.M.E.; Elaine Furmaga, Pharm.D.; Glenn Graham, M.D., Ph.D.; Peter Groeneveld, M.D., M.P.H.; Robert L. Jesse, M.D., Ph.D.; Harlan Krumholz, M.D., M.P.H.; Marthe Moseley, Ph.D., R.N.; Ileana Pina, M.D.; Thomas Rector, Pharm.D., Ph.D.; Amy Rosen, Ph.D.; John Rumsfeld, M.D., Ph.D.; Roxanne Rusch, R.N.; John Spertus, M.D., M.P.H.; and Douglas Wholey, Ph.D., M.B.A.

