

CHF QUERI's VISN-level Facilitation for the VA Save 5 Million Lives Campaign

Abstract: Heart failure (HF) is a common chronic disease marked by frequent exacerbations often resulting in hospitalization and death. During recent years both nationally and within the VA reducing HF readmission rates is a matter of primary concern. CHF QUERI, too, has prioritized reducing readmission rates for HF patients within the VA. Since 2008 it has been targeting VA's 21 VISNs (regions) to facilitate the implementation of the national Save 5 Million Lives Campaign. Recently, the VISN contacts reported significant impact of the CHF QUERI in helping them reduce readmission rates for their heart failure patients.

Background on Save 5 Million Lives:

The Institute for Healthcare Improvement's (IHI) Save 5 Million Lives Campaign was a voluntary quality improvement initiative to protect patients from five million incidents of medical harm. Over a two year period from December 2006 – December 2008 IHI issued an invitation for campaign participants to publicly declare their hospital's aim(s) for a particular intervention or for their organization's hospital-wide efforts to reduce harm or mortality. Save 5 Million Lives Campaign was the forerunner to the IHI and the American College of Cardiology's (ACC) ongoing Hospital to Home (H2H) initiative with the goal is to reduce all-cause re-admission rates among patients discharged with heart failure by 20% by Dec 2012.

CHF QUERI's Efforts:

As stated in the Strategic Plan the CHF QUERI's primary goal is to reduce readmission rates for veterans with heart failure. Thus, early on the CHF QUERI took the initiative to facilitate the implementation of the Save 5 Million Lives Campaign at all the VA facilities. New projects were initiated by the CHF QUERI Center as well as by affiliated investigators to reduce readmission rates for heart failure. Simultaneously, through its Heart Failure (HF) Provider Network the Save 5 Million Lives Campaign was spread by presentations and discussions focusing on key area like starting/reinventing HF clinics, patient and caregiver education, developing a standard disease management protocol for HF for patients enrolled in the tele-health program, identification and follow-up up high-risk patients.

VHA's Efforts:

To assess and recognize the progress of the Save 5 Million Lives Campaign within the VA the "Save 5 Million Lives Conference – Success and Strategies" was organized by the VHA from August 18-20, 2009 in Denver, CO. Representatives from each facility and each VISN were invited to attend this conference. Recognizing the contributions of CHF QUERI's initiative and efforts in implementing the Save 5 Million Lives Campaign at the VA facilities Dr. Robert Jesse, Principal Deputy Under Secretary for Health asked the CHF QUERI to take leadership in presenting heart failure at this conference. Paul Heidenreich MD MS, Director and Anju Sahay PhD, Implementation Research Coordinator of the CHF QUERI, and selected members of the HF Network focused on the current status of heart failure care at the VA and best evidence-based practices (EBP) to improve the quality of care.

On Day 3 of the conference representatives from each VISN were asked to complete a commitment sheet by (1) identifying 3 specific and measurable goals to be accomplished within 90 days; (2) action plan; (3) anticipated outcomes; and (4) names of contact persons.

CHF QUERI's Follow-up Strategy:

In an effort to support the VISN contacts achieve their goals after the conference the CHF QUERI reviewed the commitment sheets completed by representatives from each of the 21

VISNs. Interestingly, 14 out of 21 VISNs included CHF as their selected goal. In October 2009 e-mails were sent to the contacts provided for each VISN providing the following resources to achieve their prioritized/not prioritized CHF goals:

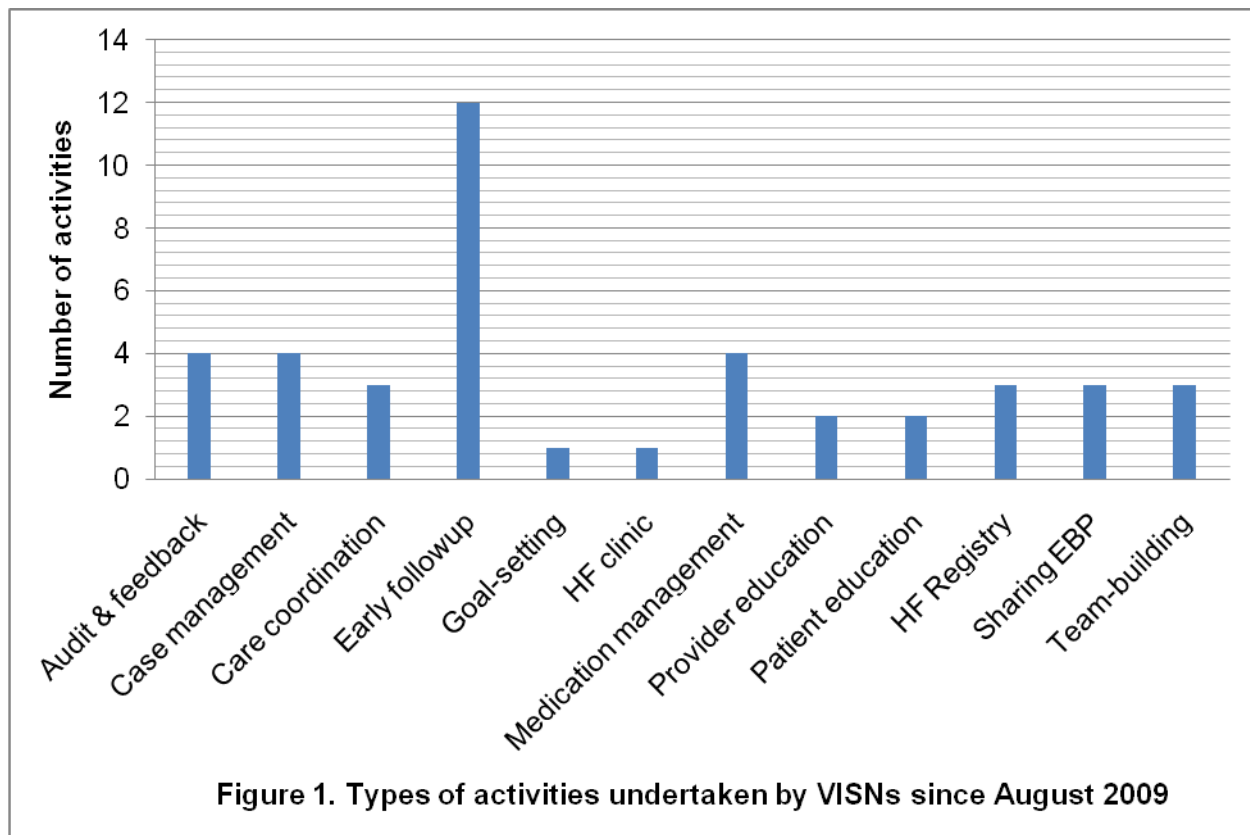
- 1) Information about the CHF QUERI's: <http://www.queri.research.va.gov/chf/default.cfm>
- 2) HF programs: http://www.queri.research.va.gov/chf/products/heart_failure_programs.cfm
- 3) Patient education materials:
http://www.queri.research.va.gov/chf/products/patient_education.cfm
- 4) Caregiver materials: <http://www.queri.research.va.gov/chf/products/caregiver.cfm>
- 5) HF assessment tool: <http://www.queri.research.va.gov/chf/products/tool-mhv.cfm>
- 6) VA HF Experts: <http://www.queri.research.va.gov/chf/products/experts.cfm>.
- 7) Invitation to join:
 - i. CHF QUERI's Heart Failure (HF) Provider Network:
<http://www.queri.research.va.gov/chf/networks/default.cfm> - attend bi-monthly web-based meetings, conference calls, e-mails, surveys focusing on EBP to improve the quality of HF care, successful HF programs and discussion about barriers, facilitators and lessons learnt
 - ii. Share/present/discuss ideas and materials through the SharePoint site:
<http://www.queri.research.va.gov/chf/networks/sharepoint.cfm>

CHF QUERI's Follow-up Data for the Different VISNs:

In October 2010 we sent out a survey to VISN contacts to gather follow-up data in terms of (1) rate their VISN's progress in achieving their CHF goals; (2) how helpful were the resources provided by the CHF QUERI to achieve their CHF goals; (3) how helpful were the HF Network's various activities including the VA H2H initiative to achieve the CHF goals; and (4) brief description of activities undertaken by the VISN since August 2009 to achieve the CHF goals. Based on attrition the survey was sent to contacts at 20 out of 21 VISNs.

With a response rate of 50% (10 VISNs) findings show that contacts for all the VISN reported moderate to excellent progress in achieving their goals to improve CHF. In terms of helpfulness of CHF QUERI's resources to achieve their CHF goals contacts for 7 VISNs (70%) reported that the resources were quite helpful. Regarding how helpful was their involvement in CHF QUERI's HF Network and it's facilitation in non-mandated QI initiatives like VA H2H to achieve their CHF goals, contacts for 5 VISNs (50%) reported quite or extremely helpful.

Since August 2009 these 10 VISNs reported undertaking a total of 42 activities to achieve their CHF goals (range 1-15). As depicted in Figure 1 these activities focus on distinct key areas: audit and feedback (n=4), case management (n=4); care-coordination for telehealth (n=3); early follow up after discharge (n=12); goal-setting (n=1); setting up HF clinic (n=1); medication management (n=4); provider education (n=2); patient education (n=1); HF registry (n=3); sharing EBP (n=3); staffing (n=1) and team building (N=3).



CHF QUERI’s Subsequent VA H2H Initiative:

Given the success of the Save 5 Million Lives Campaign in October 2009 the Institute for Health Care Improvement (IHI) and the American College of Cardiology (ACC) launched the **Hospital to Home (H2H)** initiative. This is a new national campaign to reduce preventable readmissions for patients recently hospitalized with a cardiovascular condition (www.H2Hquality.org). Dr. Paul Heidenreich is on the Steering Committee of the national H2H initiative.

In January 2010 the CHF QUERI launched the **VA H2H** initiative to implement the national H2H initiative at all the VA facilities through its’ HF Network. Members from all facilities were asked to (1) enroll their facility on the H2H website showing their commitment to reduce readmissions for heart failure; and (2) initiate and/or plan projects at their facility based on the VA H2H initiative as well as review ongoing projects also focusing on reducing readmissions for heart failure. Currently a total of 55 facilities have enrolled on the H2H website. Also, a total of 31 facilities have initiated and planned (46) programs in response to the VA H2H initiative. These facilities have also reported 113 ongoing projects unrelated to the VA H2H initiative focusing on reducing readmissions for heart failure.

Impact:

CHF QUERI's involvement and facilitation of the Save 5 Million Lives campaign within the VHA has shown to impact VISN leadership in improving the quality of care for their heart failure patients. Majority of the VISN contacts have been actively participating in the HF Network and have also invited providers and leadership from their VISN to join the HF Network.

Summary:

Implications for future studies/implementation: We will link to readmission rates as well as to whether the sites enrolled in H2H/started H2H projects.