

Transitioning Levels of Care

# Reducing CHF Readmissions Through Effective Transitions

VAMC Huntington, WV

Paula S. McKee RN, BSN, MSSL, CPHQ

Doreen Ward, RN, BSN, MSSL

5/14/12 Update

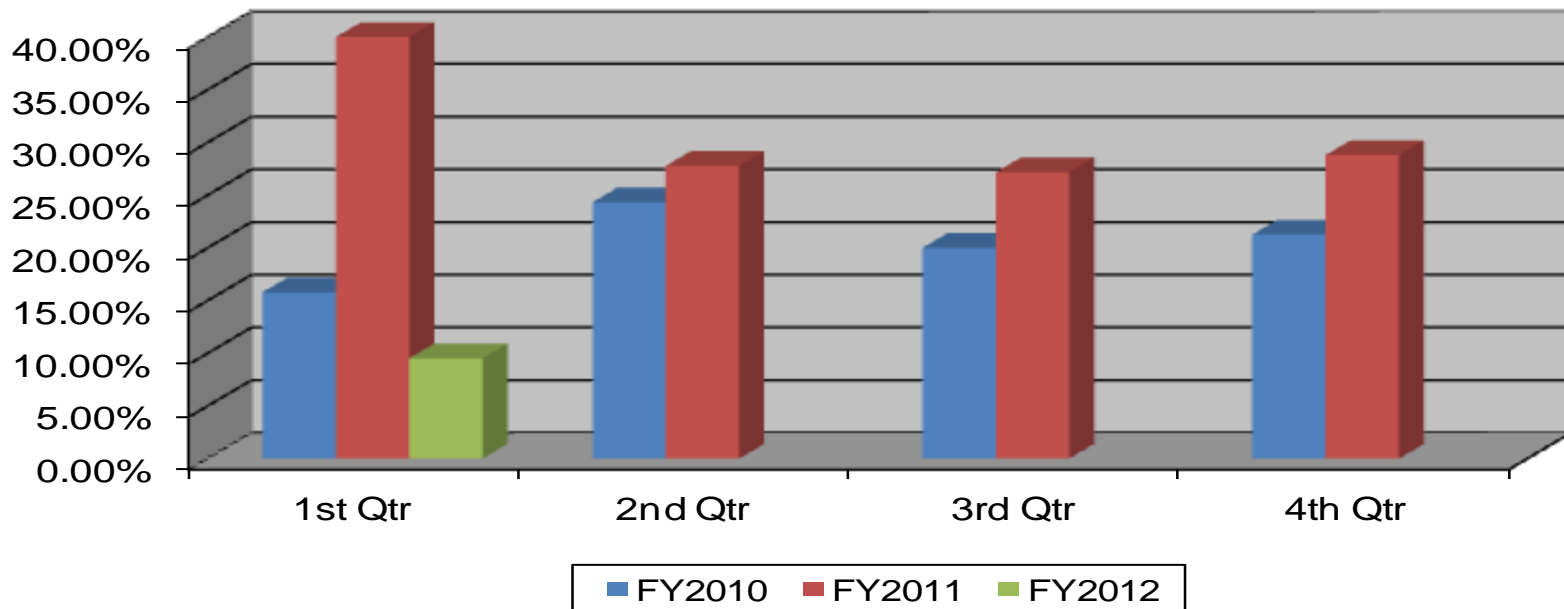
2011\_IF-T\_Reducing CHF Readmissions Through Effective Transitions

1

# Vision & Analysis

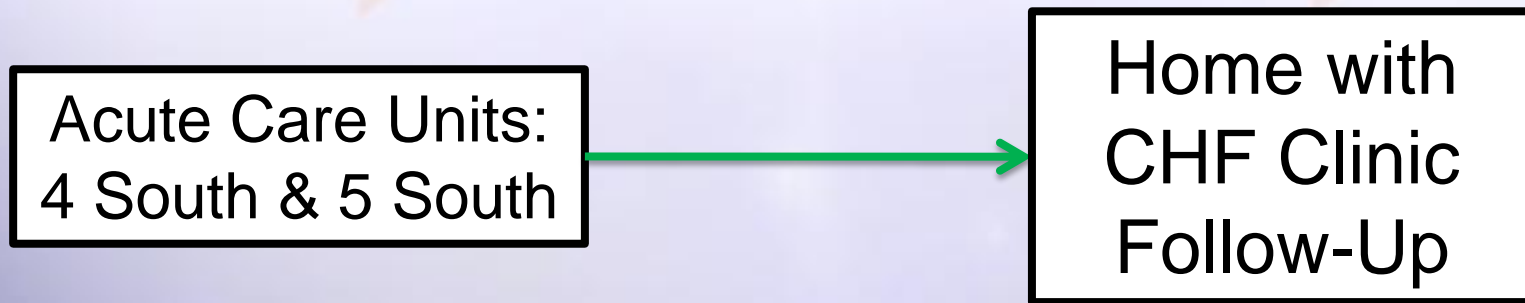
Reduce the Percentage of Congestive Heart Failure (CHF) Readmissions (all causes)

**VAMC Huntington, WV**  
**% CHF Readmissions**  
(Data Source: IPEC)



# A Collaborative Vision

## Transitioning Levels of Care (TLC) Collaborative



# TLC CHF Team

## Core Team Members and Roles

**Project Manager:** Paula McKee RN, Quality Manager

**Facilitator/Data Management:** Doreen Ward RN, UM Coordinator/Supervisor

### **Clinical Champions:**

Stephanie McCagg MSN, RN-BC Primary Care and Medical Specialty Nurse Manager

Karen Bailey APRN Cardiology Clinic

Anna Perkins, Dietitian

Dr. Sara Allman Assistant Chief, Medicine

Dr. Vikas Virkud, Chief, Cardiology

Dr. James Allman II, Clinical Pharmacist

### **Leadership Support:**

Dr. Jeff Breaux, Chief of Staff

Cathy Locher RN, Associate Director/Nursing Services

# Team

## ***Additional Team Members and Roles***

Gail Workman RN, Inpatient Care Manager  
Gail Spears RN, Associate Chief Nurse – Inpatient  
William Barnette RN, AA to the Chief of Staff  
Cora Hosey, Cardiology Supervisor  
Nola Conley RN, Associate Chief Nurse – Ambulatory  
Jerry Nelson RN, Inpatient Care Manager  
Sandra Shaw RN, Research Nurse  
Jeanine Bledsoe, Social Work  
Jana Studeny RN, Nursing Clinical Informatics  
Robert D. Thompson, HBPC Program Director  
Tammy Winters RN, CC/HT Lead  
Dr. Joye Martin, HBPC Physician Director

# AIM Statements

- By September 1, 2011, 80% of inpatients with a primary diagnosis of Congestive Heart Failure will have the CHF Order Set initiated within 1 day of admission.
- By 9/30/11, the average length of stay (ALOS) for inpatients with CHF transitioning from acute care to home with Cardiology Clinic follow-up will be reduced by 5%.
- By 11/1/11, Cardiology Clinic will have sustained capacity for 6 months in seeing 80% of CHF patients at high risk for readmission within 7 days of discharge from acute care.
- By 10/1/11, 80% of CHF patients at high risk for readmission will be seen by the new Cardiology "CHF" Clinic within 7 days of discharge from acute care. *(High risk for readmission is defined as inpatients with acute or decompensated CHF)*

5/16/2012

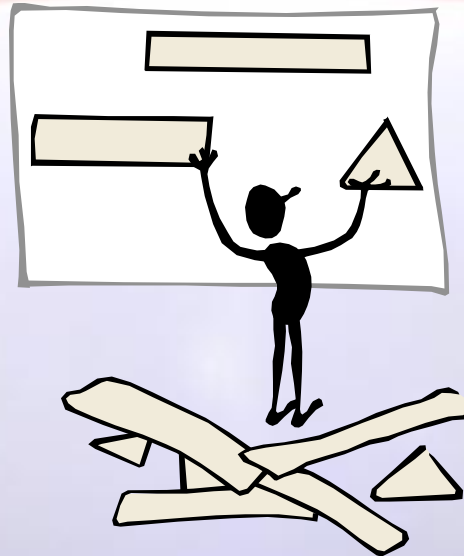
2011\_IF-T\_Reducing CHF Readmissions Through Effective Transitions

6

# AIM Statements

- **Clinical Aim:** By 9/30/11, the rate of readmission for CHF patients will be reduced by 25%.
- **Completed Kit Aim:** Patients transitioning from acute care to the Cardiology Clinic will have a complete kit - **40% by 7/1/11.**

# Mapping the Process



5/16/2012

2011\_IF-T\_Reducing CHF Readmissions Through Effective Transitions

8



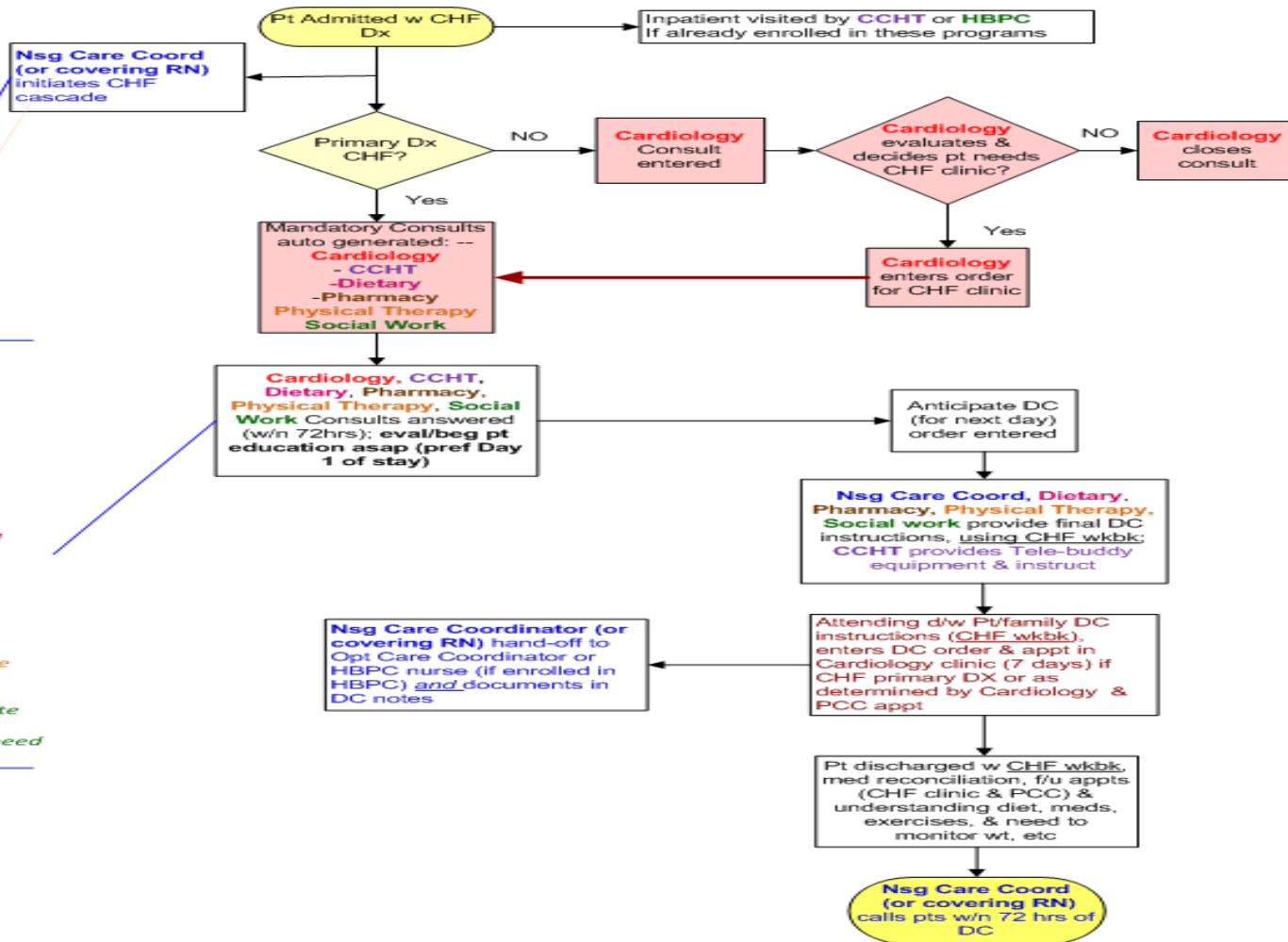
## CHF Inpatient Flow

### CHF Cascade:

- Nursing**
- Meet w pt and/or family
  - Begin education w CHF workbook
  - Ensure mandatory consults entered
  - Screen for DC planning needs
  - (Prosthetics for scale or B/P needs)
  - (SW for other DC needs)
  - (Evaluate- HBPC candidate?)
  - (Evaluate for smoking cessation)

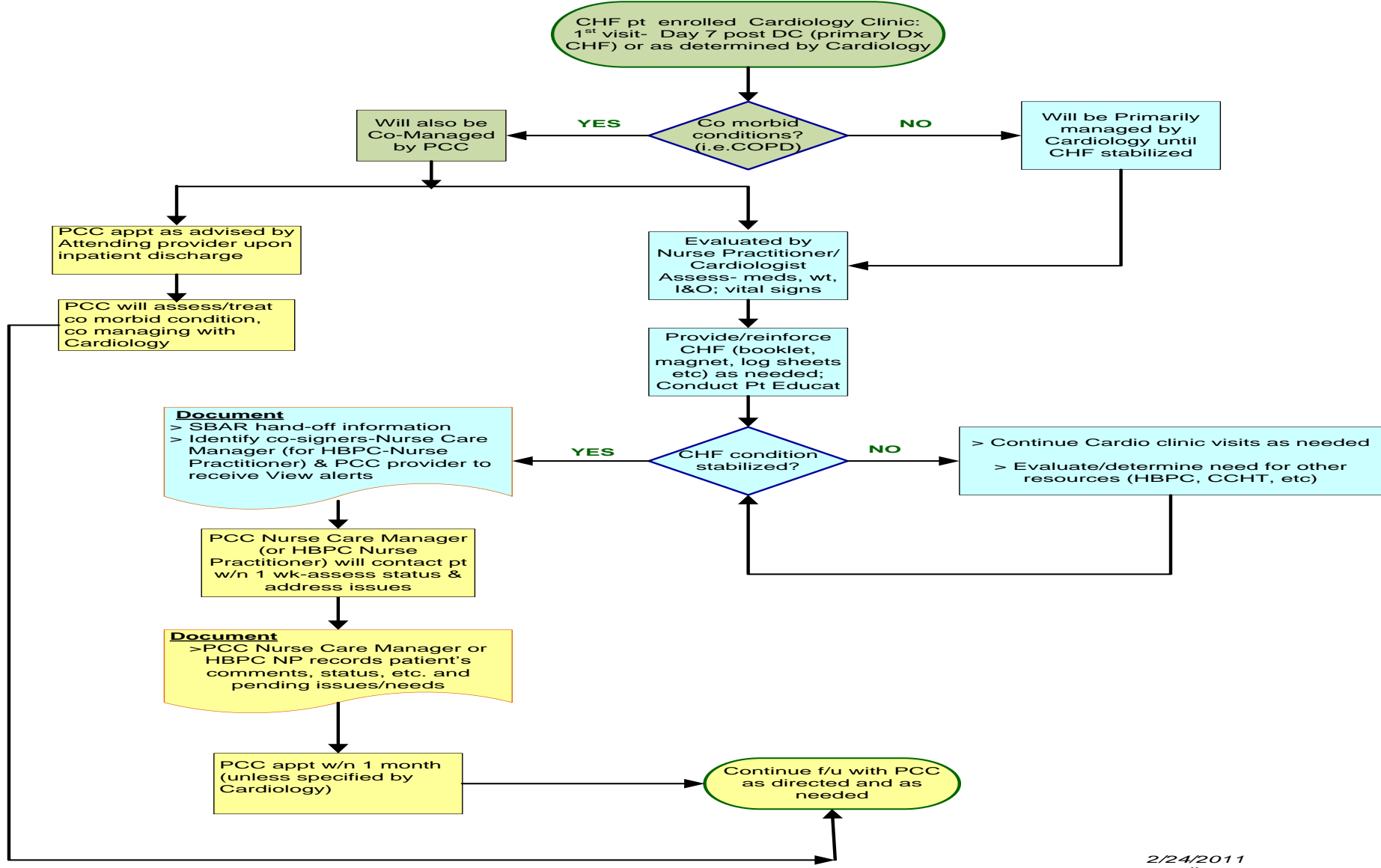
### Service CONSULTS:

- Pharmacy**
- Meet w pt and/or family
  - Begin education w CHF wkbk re: meds
  - Eval meds for drug interactions
  - Rec med adjust
  - Med reconciliation
- Dietary**
- Meet w pt and/or family
  - Begin education w CHF wkbk re: diet
  - Discuss alternatives to restricted foods
- CCHT**
- Meet w pt and/or family
  - Discuss program
  - Provide equipment/education
- Physical Therapy/Rehab**
- Demonstrate strengthening activities to maintain mobility (use CHF workbook)
- Social Work**
- Psychosocial assessment; evaluate social support system, ability to travel/transportation needs, and need for MHC



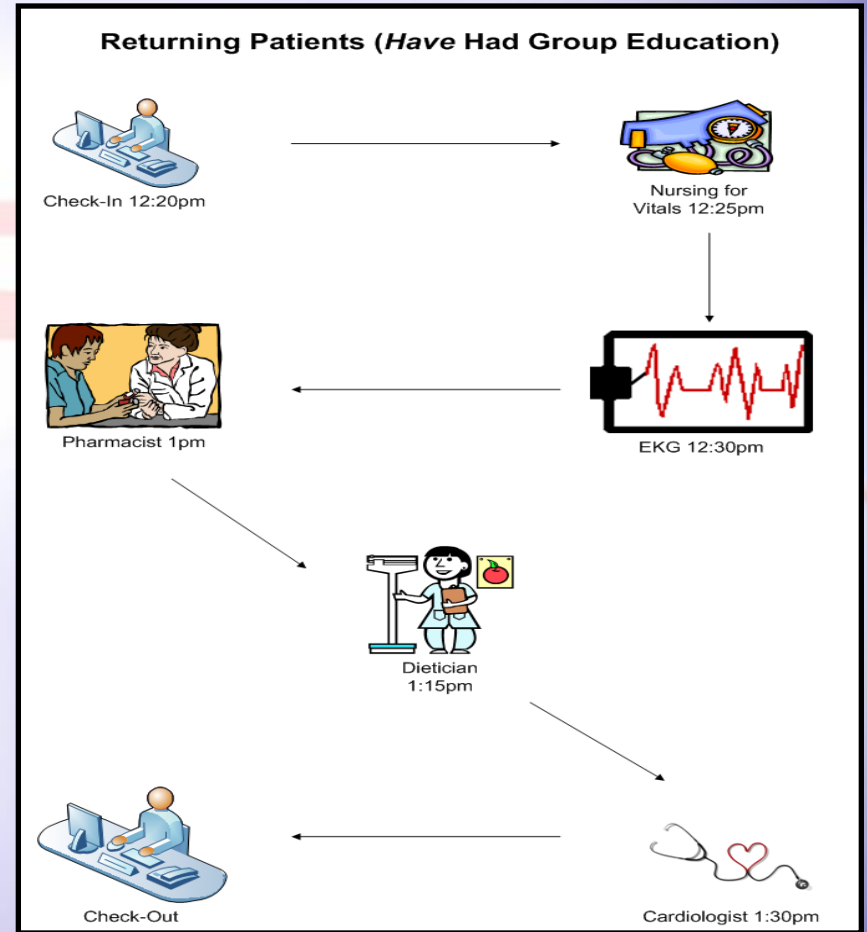
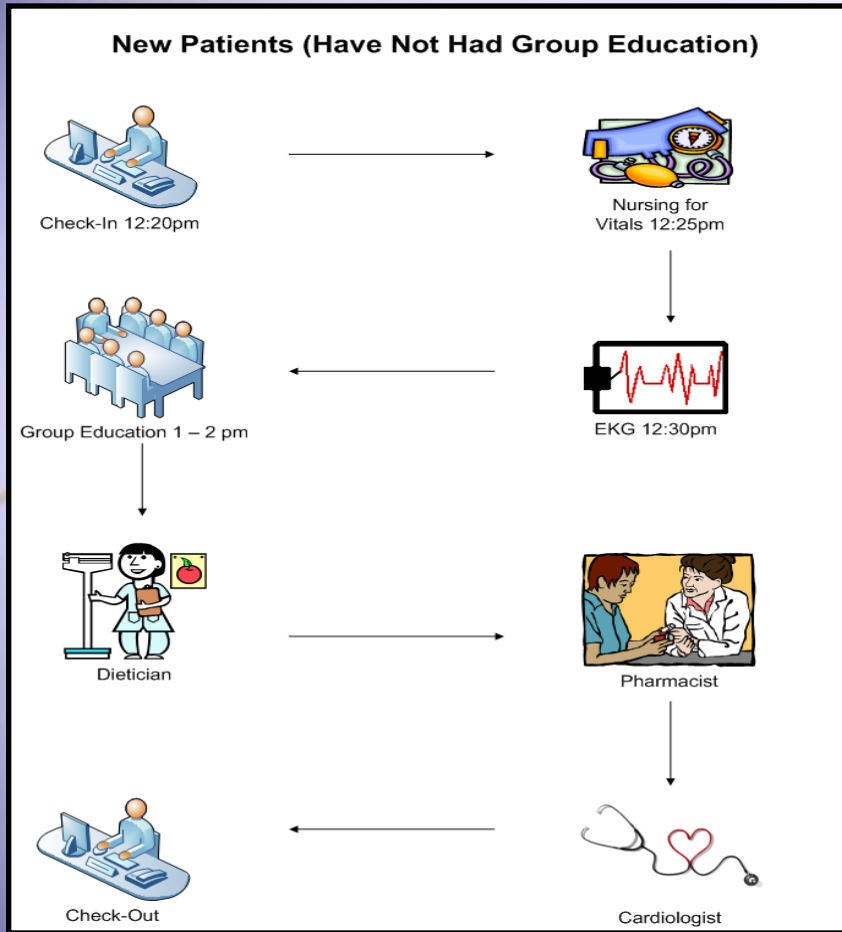
Huntington VAMC

**Transitioning CHF pt from Cardiology Clinic to PCC**



2/24/2011  
dlw

# MAP – CHF Clinic/Group Education



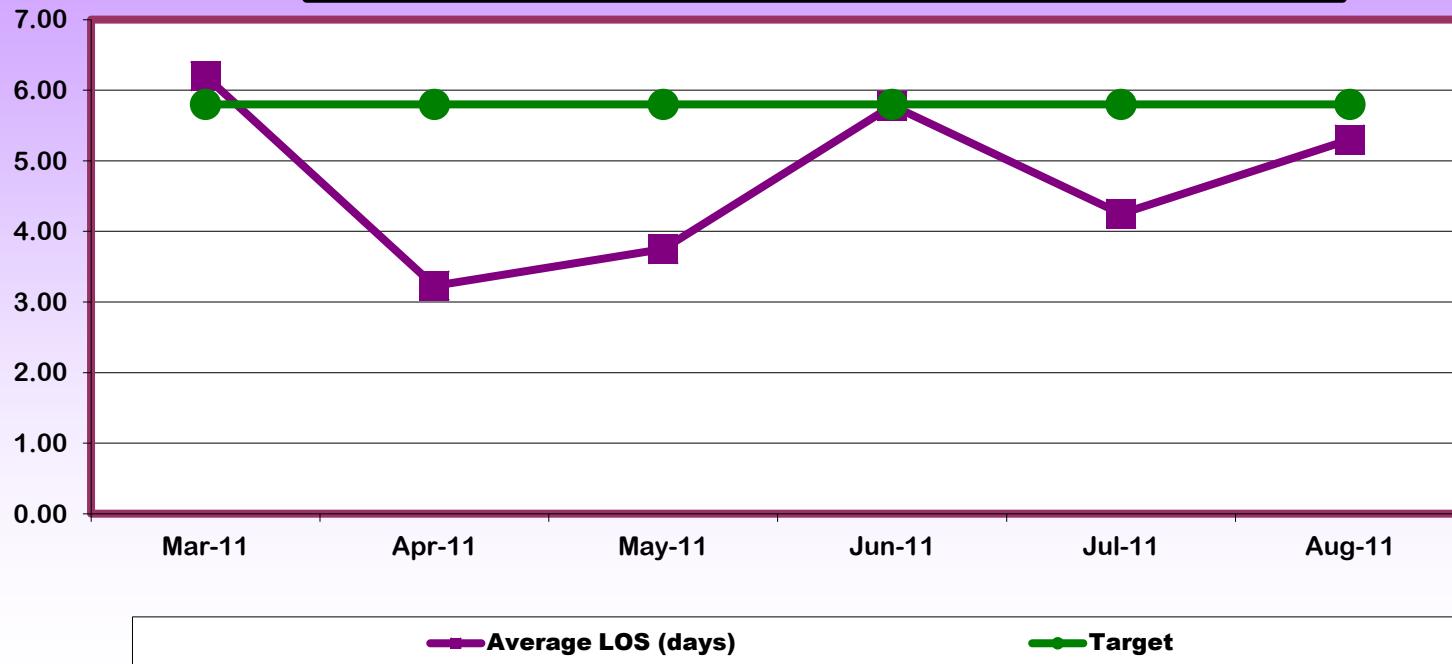
5/16/2012

2011\_IF-T\_Reducing CHF Readmissions Through Effective Transitions

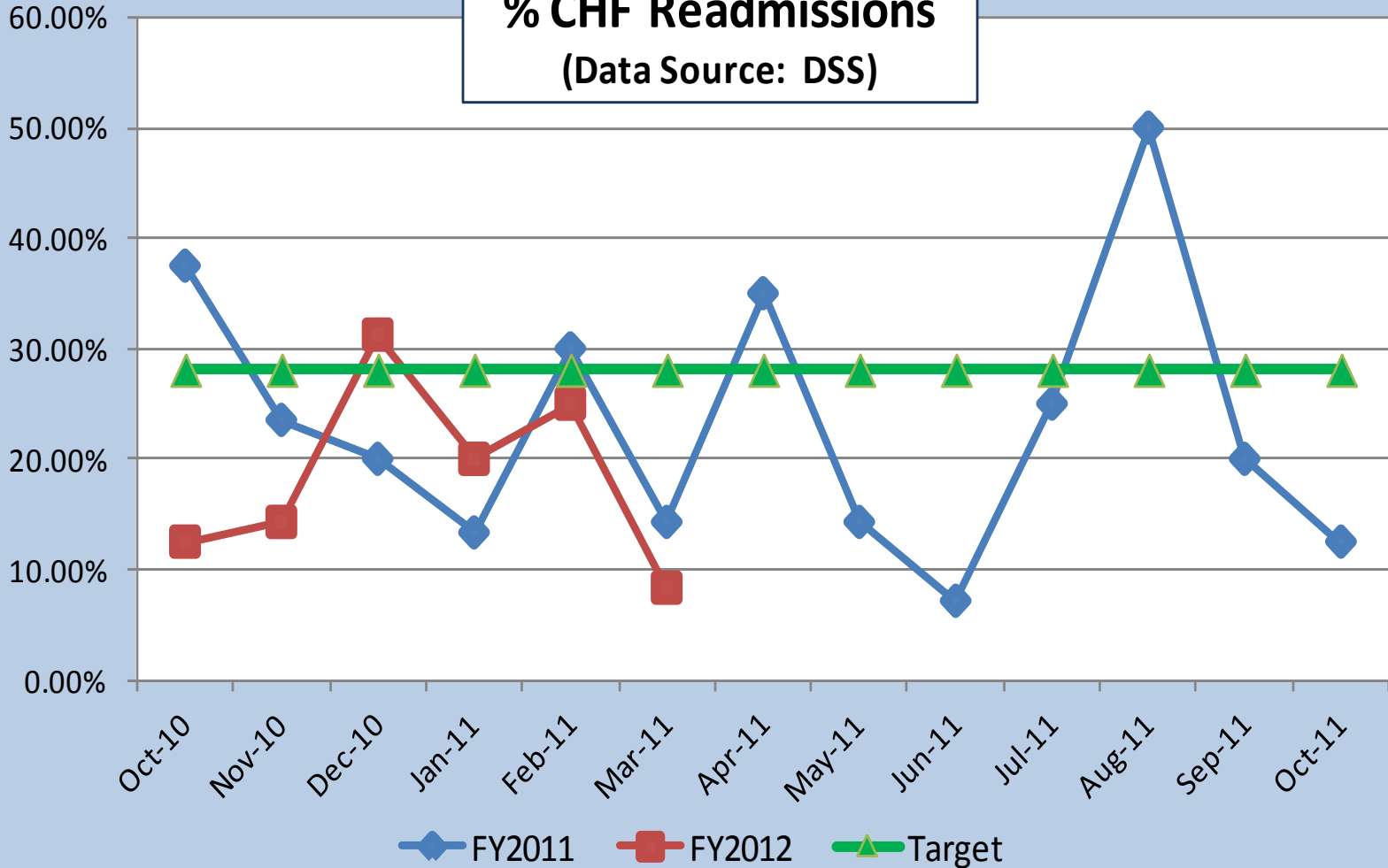
11

# Measurement

VAMC Huntington  
Patients with Primary Discharge Diagnosis of CHF  
Average Length of Stay (ALOS)



# VAMC Huntington, WV % CHF Readmissions (Data Source: DSS)



# Complete Kit at Discharge

	<b>Mar 2011</b>	<b>Apr 2011</b>	<b>May 2011</b>	<b>Jun 2011</b>	<b>Jul 2011</b>
<b>D/C Instruction Sheet</b>		<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>
<b>Pt Centered Medication List</b>		<b>97%</b>	<b>100%</b>	<b>86%</b>	<b>100%</b>
<b>CHF Education Booklet Reviewed with Pt</b>		<b>26%</b>	<b>8%</b>	<b>21%</b>	<b>71%</b>
<b>CHF Order Set Implemented</b>		<b>39%</b>	<b>21%</b>	<b>57%</b>	<b>82%</b>
<b>CHF Clinic Appointment within 7 Days of D/C</b>	<b>9.5%</b>	<b>10%</b>	<b>22%</b>	<b>46%</b>	<b>59%</b>
<b>Overall Compliance</b>	<b>9.5%</b>	<b>5%</b>	<b>8%</b>	<b>21%</b>	<b>47%</b>

# When Aggregate Data Isn't Enough



5/16/2012

2011\_IF-T\_Reducing CHF Readmissions Through Effective Transitions

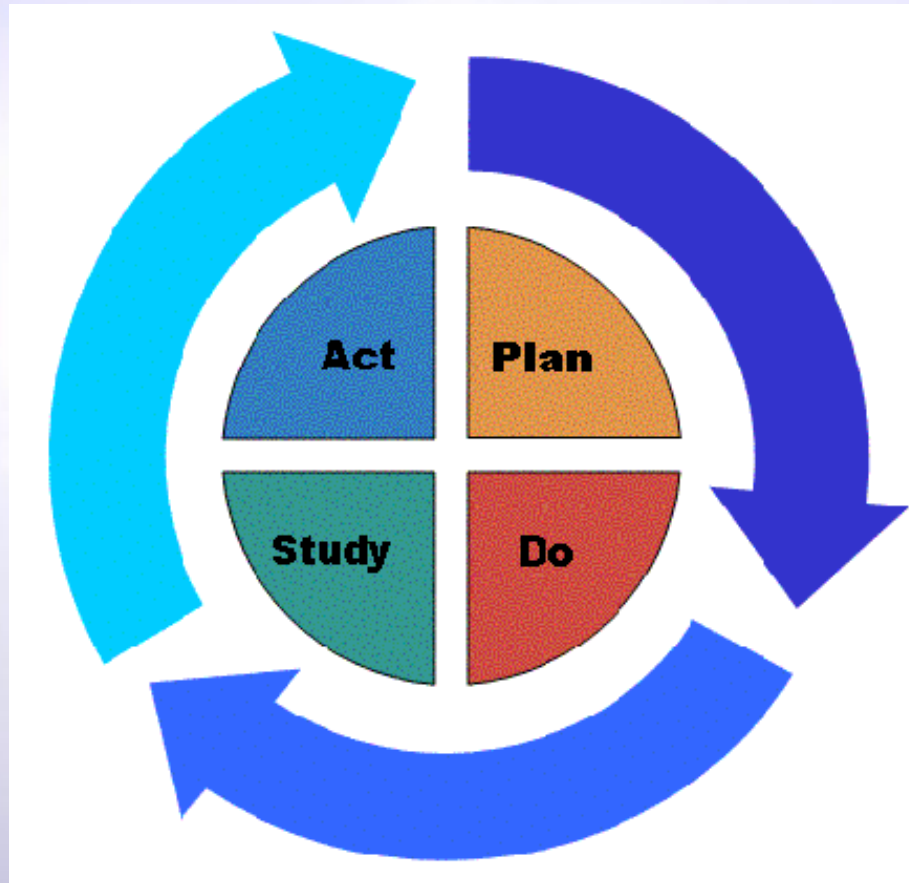
15

# Patient Case Study

- 7/20/11 – 7/22/11
  - Cardiology consult on 7/20/11
  - Seen by Cardiology on 7/20/11 and f/u on 7/21 and 7/22/11
- 8/19/11 – 8/21/11
  - CHF Order set consult on 8/19/11
  - Not seen by Cardiology
- 8/25/11 – 8/29/11
  - CHF Order set consult on 8/26/11
  - Not seen by Cardiology
- 8/30 – OBS to admission
  - CHF Order set consult on 8/30/11
  - Patient transferred from a community facility with chest pain & pulmonary edema
  - Palliative Care Consult ordered for end stage CHF



# Change – PDSA Cycle



5/16/2012

2011\_IF-T\_Reducing CHF Readmissions Through Effective Transitions

17

# CHF Clinic

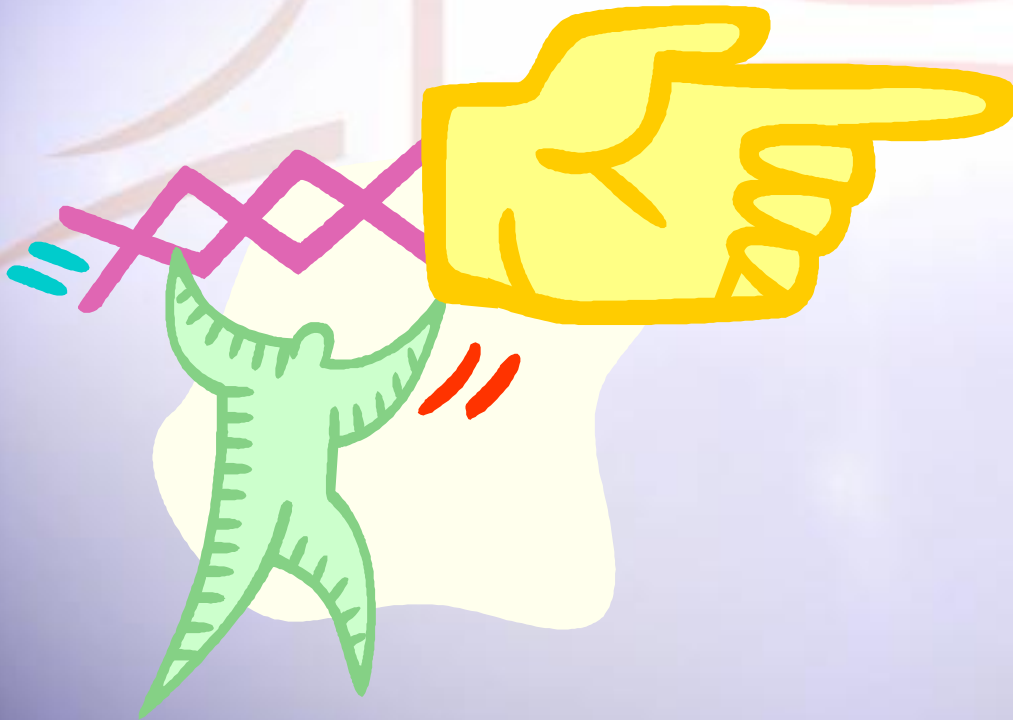
## CHF Clinic Hours:

Patients are seen in Cardiology Clinic on additional days if needed. CHF Clinic is on Fridays, allowing for expansion into the morning hours for the clinic if needed.

Once weekly x 1 month  
Once a month x 3 months  
F/u in 3 months if stable

Hours: 1 p.m. to 4:30 p.m.  
with capacity to expand into the a.m. hours

If you build it.....



# Actions Taken



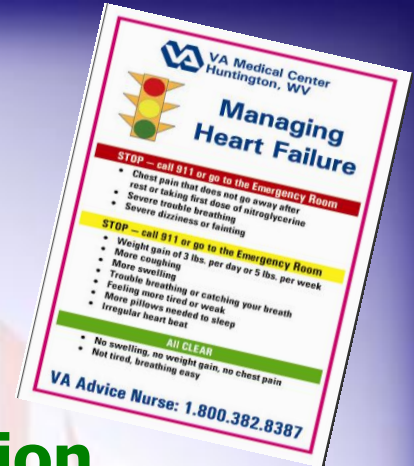
- **CHF Clinic** – established December 2010
- **Scales** – distributed through Prosthetics w/order from Cardiology
- **CHF Order Set** – Multidisciplinary Consult – Implemented January 2011 (Pharmacy, SW, Nutrition, CCHT, Rehab, & Cardiology) - **NOTE: The CHF Order set has since been expanded to include Palliative Care, Code Status, Medications, etc.**
- **Patient Education:**
  - Pocket shopping guide with Dos and Don'ts to remember
  - Foods to Avoid or Limit handout
  - Living with CHF – A Patient's Guidebook
  - Managing Heart Failure Refrigerator Magnet

5/16/2012

2011\_IF-T\_Reducing CHF Readmissions Through Effective Transitions

19


# Actions Taken

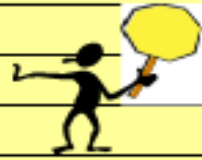


- **Daily Review of Discharges & Notification to Key Staff**
  - ✓ Patients not scheduled for CHF Clinic
  - ✓ Special reviews
- **Director's Morning Report** – Included in UM Report
- **Director's Staff Meeting Presentation** – April 2011
- **UM Shared File with Care Managers** – Ensure staff can identify inpatients with CHF

# Actions Taken

- **Orientation for Home Based Primary Care (HBPC) staff**
- **Article for Health Beat – Patient Newsletter (publication pending)**
- **View Alert to the Inpatient Care Managers**
- **CHF Health Summary**

** FOODS to AVOID or LIMIT **	Serving Size	Calories	Sodium (mg)
<b>Meat &amp; Meat Substitutes</b>		Calories per serving	Sodium per serving
<b>Limit:</b>			
 Cooked, Cured, Salted or Canned Meat, Fish, Poultry	3-4 oz	490	820
Bacon/Sausage	2 slices/links	88/107	185
Hot Dogs	1 dog	150	515
Bologna	1 slice	86	205
Pickle Loaf	1 oz	75	360
Spam	2 oz	175	767
Beef, Pork, Deer Jerky	1 piece	40	445
Canned corned beef	1 slice	50	210
Cheese (Cheddar/Swiss)	1 slice	115	175
Cheese Spreads/ Cheese Whiz, Velveeta®	2 TBSP	90	540
Regular Peanut Butter	2 TBSP	190	220
Frozen Entrees			



<b>Breads &amp; Cereal</b>
<b>Limit:</b>
Pancake Mix
Self-rising Flour
Instant Hot Cereals
Salted Crackers




**Congestive Heart Failure (CHF) Shopping Guide**

for \_\_\_\_\_

Patient \_\_\_\_\_

Sodium (Salt) Restrictions: \_\_\_\_\_ mg a day

<b>Breads &amp; Cereal</b>		Calories per serving	Sodium per serving
<b>Choose:</b>			
White, Wheat, Whole Wheat, Rye, Pumpernickle	1 slice	70	130
Hard Dinner Rolls	1 roll	87	145
Cooked Cereal No Salt	1 cup	130	8
Dry, Low Sodium Cereal	1 cup	100	2
Unsalted Crackers/Biscuits	1 cracker	13	25
Low Sodium or Homemade Bread Crumbs	1 oz	110	95
<b>Fruits</b>		Calories per serving	Sodium per serving
<b>Choose: All Fruits</b>			
Banana	1 medium	105	1
Grapes	1 cup	104	3
Canned Peaches	1 cup	135	10
Dried Cranberries	1/2 cup	220	5
<b>Vegetables</b>		Calories per serving	Sodium per serving
<b>Choose: All Fresh Vegetables</b>			
Romaine Lettuce	2 cups	15	8
Raw Carrots	1 cup	50	85
Fresh Green Beans	1 cup	35	7
Low Sodium Canned Green Beans	1 cup	30	3
Low Sodium 100% Vegetable Juice	4oz	25	85
<b>Milk &amp; Milk Products</b>		Calories per serving	Sodium per serving

<b>Meat &amp; Meat Substitutes</b>	3-4 oz	Calories per serving	Sodium per serving
<b>Choose:</b>	(size of a deck of cards)		
Fresh Chicken Baked without skin		135	64
Fresh Turkey Baked without skin		141	72
Fresh Roast Beef		168	86
Fresh Pork Grilled		126	90
Fresh Lamb Roasted		186	66
Fresh Venison Roasted		211	107
Fresh Game (Rabbit)		147	38
Fresh Fish Unbreaded		89	66
Low Sodium tuna		99	42
Low Sodium Peanut Butter	2 TBSP	200	64
Dried peas/beans	1/2 cup	120	16
Eggs/Egg Substitute	1 egg	77	62
<b>Limit:</b>		Calories per serving	Sodium per serving
Smoked, Cured, Salted or Canned Meat, Fish, Poultry	3-4 oz	490	820
Bacon/Sausage	2 slices/links	88/107	185
Hot Dogs	1 dog	150	515
Bologna	1 slice	86	205
Pickle Loaf	1 oz	75	360
Spam	2 oz	175	767
Beef,Pork,Deer Jerky	1 piece	40	445
Canned corned beef	1 slice	50	210
Cheese (Cheddar/Swiss)	1 slice	115	175

5/16/2012

2011\_IF-T\_Reducing CHF Readmissions Through Effective Transitions

24



# Shopping Pocket Guide



## SHOPPING GUIDE



### High Sodium (Salt) Alert Foods—Shopping DON'Ts

#### Don't Choose:



(more than 300mg sodium per serving)

Regular Salt	Olives	Regular Ketchup
Sea Salt	Any Sauce Mixes	BBQ Sauce
Garlic Salt	Soy Sauce	Pickles
Onion Salt	Teriyaki Sauce	Any salted snacks
Canned Vegetables	Nuts, Seeds	Instant Cereals
Smoked, cured, salted, or canned meats	All Boxed Dinners	Spaghetti Sauce
Lunchmeats, sausage, bacon	Buttermilk	
All Frozen Entrees	Cheese	
Any Quick Bread Mixes		
Salt Substitute—(low- sodium table salt alternative)—ask your doctor about this before use		
*Read Food Labels and Look Out for the following: Sodium Phosphate, Sodium Benzoate, Sodium Nitrate, Sodium Sorbate Hidden fluids—(foods that appear as solids; but are liquid at room temperature)		

VAMC Huntington  
June 2011



## SHOPPING GUIDE



### Low Sodium (Salt) Option Foods to Choose—Shopping DOs

#### Do Choose:



(less than 300mg sodium per serving)

Fresh Meats (chicken, lean pork, & fish)	Dried Beans	Brown Rice, Whole Wheat Pasta
Eggs	Wheat bread	Low Sodium Peanut Butter
Fresh/Frozen Vegetables	Milk, Yogurt	Canola/Olive Oil
Fresh Fruit	Low Sodium Cereals	Low Sodium Margarine
Salt-free Spice Blend	Hot Sauce	Unsalted Snacks(chips, nuts, popcorn)
Pepper	Low Sodium Baking Powder	
Herbs	Vinegar	
Low Sodium Ketchup		

VAMC Huntington  
June 2011

5/16/2012

2011\_IF-T\_Reducing CHF Readmissions Through Effective Transitions

25

# Sustain the Gains

- Reinforcement with Inpatient Providers
- Continuous monitoring and feedback

Morning Report Date	8/24/11	8/25/11	8/26/11	8/29/11	8/30/11	8/31/11
	Adm 8/22 ContStay 8/20-22	8/23/11	8/24/11	8/25/11	Adm 8/26-8/28 ContStay 8/26	Adm 8/29 ContStay 8/27-8/29
<b># Acute Adm</b>	11	18	8	21	11	18
# Met Criteria	10	18	6	19	11	16
% Adm Meeting Criteria	91%	100%	75%	90%	100%	89%
# Referred Phys Advisor	0	0	0	0	0	0
# PUMA Override	0	0	0	0	0	0
% PUMA Override	NA	NA	NA	NA	NA	NA
# Not Referred/Hosp policy	1	0	2	2	0	2
# w/o ER notes	0	0	0	0	0	0
<b># Obs Adm</b>	6	5	8	7	7	9
# Obs Met	6	5	6	7	aw review	aw review
# Obs Converted Acute	6	5	4	8	2	4
# Converts Met Acute	5	5	4	6	2	3
% Converts Met Acute	83%	100%	100%	75%	100%	75%
<b># Cont Stays Pts</b>	76	40	51	44	54	22
Total Cont Stay Days	128	40	51	44	54	54
# Cont Stays Meeting	122	40	51	42	51	51
% Cont Stays Meeting	95%	100%	100%	95%	94%	94%
# Referred Phys Advisor	0	0	0	0	1	0
# PUMA Agree w current level care	0	0	0	0	1	0
% PUMA Override	#DIV/0!	NA	NA	NA	100%	NA
#NOT Referred/Hosp policy	6	0	0	2	2	7
Day of Discharge	8/26/2011	8/27/2011	8/28/2011	8/29/2011	8/30/2011	8/31/2011
Patients w/primary CHF dx at discharge scheduled for f/u appt with CHF Clinic	1	0	1	1	0	0
Patients w/primary CHF dx at discharge	2	0	1	1	0	0
% w/CHF F/U appt (within 7 days of d/c)	50%	NA	100%	100%	NA	NA

5/16/2012

2011\_IF-T\_Reducing CHF Readmissions Through Effective Transitions

26

# Spread

- Sharing with others
  - *Note: OHI CAP Review Guide Coordination of Care – Heart Failure October 2011*
- Establishment of a Pneumonia Clinic
- Group Appointments
  - On site at the Medical Center
  - Via TeleHealth for CBOC and State Veteran's Home Residents
  - Cardiology Education – Fridays at 1 p.m.



## *for Better Health*

---

- COPD Education - Tuesday 1:00pm
- Cardiology Education - Friday 1:00pm
- Smoking Cessation - Mon, Tues 12pm,  
Thur 12:30
- Move! - Tuesday 2:30pm
- Diabetic Education—2nd and 4th Friday 9:00

*Your health care provider has recommended the  
above class. Classes meet every week at our*



# Lessons Learned

- Active leadership support & physician involvement is necessary
- Share current data & provide continuous feedback to your stakeholders
- Get the word out! Staff understanding is essential for buy in.
- Encourage early intervention. Discharge planning starts in the Emergency Department. Don't wait!

# More Lessons Learned

- Develop a contingency plan before you need it. Plan while you still have capacity.
- Use the resources you have available.
  - Evidenced Based Journal Club – provided literature reviews
  - Utilization Management – established a shared file for the inpatient Care Managers & Cardiology staff to assist with identifying CHF patients

# Sing the Same Tune!



**Continuity across  
all services.  
Remember: It's a  
team within a  
system that is  
providing care, not  
just one individual!**

# Grateful Acknowledgements

- The Transitioning Levels of Care Collaborative
  - The TLC Leadership: Dr. William Cahill, Barbara Boushon, Anna Marie Lieske, Christina Conde, and Kendra Brown
  - The VA Facilities who share their experiences, “cool tools”, and knowledge
- Our TLC Coach: David C. Yarbrough
- Our Veteran consultant



# Serving Our Nation's Heroes



5/16/2012

2011\_IF-T\_Reducing CHF Readmissions Through Effective Transitions

33

# A Final Thought

- We learned to share as children, so here is our chance to do what our mothers told us to do.....

**SHOPPING GUIDE**

**High Sodium (Salt) Alert Foods—Shopping DON'Ts**

(more than 300mg sodium per serving)

Don't Choose:	Others	Regular Ketchup
Regular Salt	Any Sauce Mixes	BBQ Sauce
Sea Salt	Any Sauce	Pickles
Garlic Salt	Teriyaki Sauce	Any salted snacks
Onion Salt	Hot Sauce	Instant Cereals
Canned Vegetables	Hot Sauces	Spaghetti Sauce
Smoked, cured, salted, or canned meats	All boxed dinners	
Lunchmeats, sausage, bacon	Butter/milk	
All frozen entrees	Cheese	
Any Quick Bread Mixes		

VA Medical Center  
June 2011

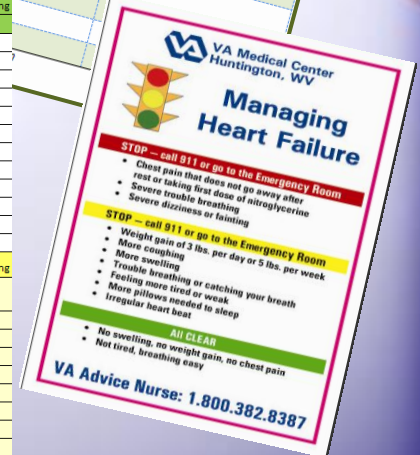
**SHOPPING GUIDE**

**Low Sodium (Salt) Option Foods to Choose—Shopping DOs**

(less than 300mg sodium per serving)

Do Choose:		
Fresh Meats (chicken, lean pork, & fish)	Dried Beans	Brown Rice, Whole Wheat
Eggs	Wheat bread	Pasta
Fresh/Frozen Vegetables	Milk, Yogurt	Low Sodium Peanut Butter
Fresh Fruit	Low Sodium Cereals	Canola/Olive Oil
Salt-free Spice Blend	Hot Sauce	Low Sodium Margarine
Pepper	Low Sodium Baking Powder	Unsalted Snacks (chips, nuts, popcorn)
Herbs	Vinegar	
Low Sodium Ketchup		

Meat & Meat Substitutes	3-4 oz (size of a deck of cards)	Calories per serving	Sodium per serving
<b>Choose:</b>			
Fresh Chicken Baked without skin		135	64
Fresh Turkey Baked without skin		141	72
Fresh Roast Beef		168	86
Fresh Pork Grilled		126	90
Fresh Lamb Roasted		186	66
Fresh Venison Roasted		211	107
Fresh Game (Rabbit)		147	38
Fresh Fish Unbreaded		89	66
Low Sodium tuna		99	42
Low Sodium Peanut Butter	2 TBSP	200	64
Dried peas/beans	1/2 cup	120	16
Eggs/Egg Substitute	1 egg	77	62
<b>Limit:</b>		Calories per serving	Sodium per serving
Smoked, Cured, Salted or Canned Meat,			
Fish, Poultry	3-4 oz	490	820
Bacon/Sausage	2 slices/links	88/107	185
Hot Dogs	1 dog	150	515
Bologna	1 slice	86	205
Pickle Loaf	1 oz	75	360
Spam	2 oz	175	767
Beef, Pork, Deer Jerky	1 piece	40	445
Canned corned beef	1 slice	50	210
Cheese (Cheddar/Swiss)	1 slice	115	175



# Contact Information

- [Paula.McKee@va.gov](mailto:Paula.McKee@va.gov)
- [Doreen.Ward@va.gov](mailto:Doreen.Ward@va.gov)

# Evidenced Based Practice (EBP) Journal Club:

- Lea, Patricia. 2011. Depression takes its toll on patients with heart failure. *Nursing2011 Critical Care*, 6 (1, January). 19-23.
- Jacobs, Barbara. 2011. Reducing heart failure hospital readmissions from skilled nursing facilities. *Professional Case Management*. 16 (1, Jan/Feb). 18-24.
- Shelley, Shelia. 2010. What is the formula that adds up to heart failure success? *Professional Case Management*. 15 (6, Nov/Dec), 325-329.
- Paul, Sara. 2008. Hospital discharge education for patients with heart failure: what really works and what is the evidence? *Critical Care Nurse*. 28, 66-82.
- Albert, Nancy M., Eastwood, Cathy A. & Edwards, Michele L. 2004. Evidence-based practice for acute decompensated heart failure. *Critical Care Nurse*. 24, 14-29.
- McCoy, Mary L. 2010. Care of the congestive heart failure patient: the care, cure and core model. [NAPNES Inc. website](#).
- Howell, Nicky & Kniceley, Chellyn. 2007. Best-practice protocols: improving CHF outcomes. *Nursing Management*. 38 (11, Nov), 41-45.
- Gordon K., Smith, F. & Dhillon, S. 2007. Effective chronic disease management: patients' perspective on medication-related problems. *Patient Educ Couns*. 65, 407-15.
- Boren, Suzanne Austin, Wakefield, Bonnie J., Gunlock, Teira L. & Wakefield, Douglas S. 2009. Heart failure self-management education: a systematic review of the evidence. *Int J. Evid Based Healthcare*, 7, 159-168.

# Evidenced Based Practice (EBP) Journal Club:

- Inglis, Sally c., et al. 2010. Structured telephone support or telemonitoring programs for patients with chronic heart failure. *Cochrane Database of Systemic Reviews*. Issue 8. Art. No. : CD007228. DOI: 10. 1002/146651858.CD007228.pub2.
- Casas ,J-P, Kwong,J. & Ebrahim, S. Telemonitoring for chronic heart failure: not ready for prime time [editorial]. *The Cochrane Library* 2010 (9 Aug). <http://www.thecochranelibrary.com/details/editorial/805687/Telemonitoring-for-chronic-heart-failure-not-ready-for-prime-time-by-Dr-Juan-Pab.html>(accessed 26/8/2010).
- Case, Rachel, Hayes, Donna, Holaday, Bonnie& Parker, Veronica. 2010. Evidence-based nursing: the role of the advanced practice registered nurse in the management of heart failure patients in the outpatient setting. *Dimensions of Critical Care Nursing*. 29 (2, March/April), 57-62.
- Sherwood, A.et al. 2011. Worsening depressive symptoms are associated with adverse clinical outcomes in patients with heart failure. *Journal of the American College of Cardiology*.57 (4,Jan 25), 418-23.
- O'Reilly.2011. Reducing readmissions: how 3 hospitals found success. *amednews staff*. Posted Feb. 7, 2011.
- Dickenson, Kacie M., Clifton, Peter M. & Keogh, Jennifer B. 2011. Endothelial function is impaired after a high-salt meal in healthy subjects. *Am J. Clin Nutr*. 93. 500-505.
- Dickenson, Kacie M., Keogh, Jennifer B & Clifton, Peter M. 2009. Effects of a low-salt diet on flow-mediated dilation in humans. *Am J. Clin Nutr*. 89. 485-90.



# QUESTIONS?

5/16/2012

2011\_IF-T\_Reducing CHF Readmissions Through Effective Transitions

38