

VA Heart Failure Network

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Improving Early Follow-up Following Heart Failure Hospitalization

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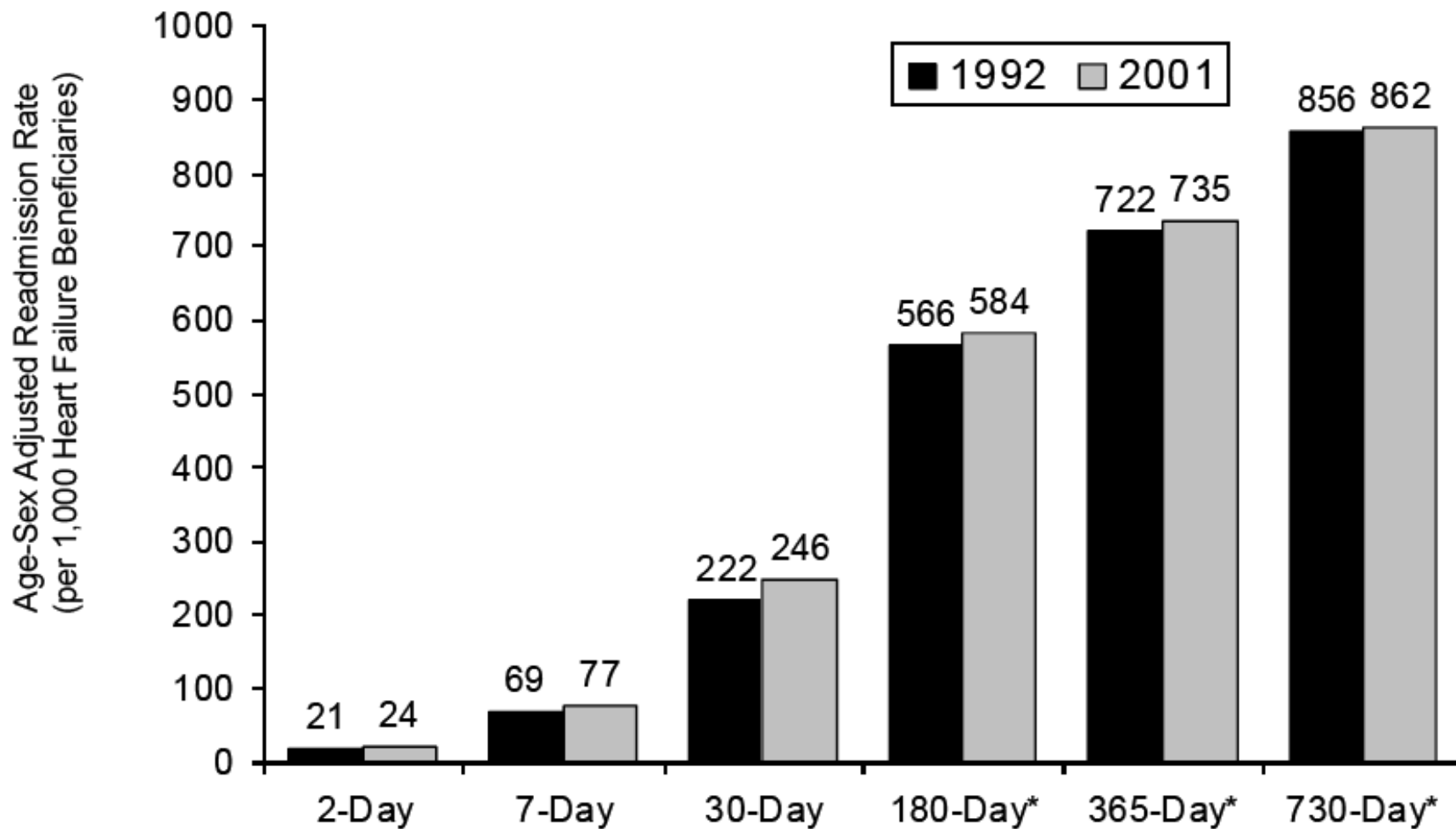
Questions

- Improving Early Follow-up Post Discharge
 - Is this worth addressing?
 - What can we do with current resources?

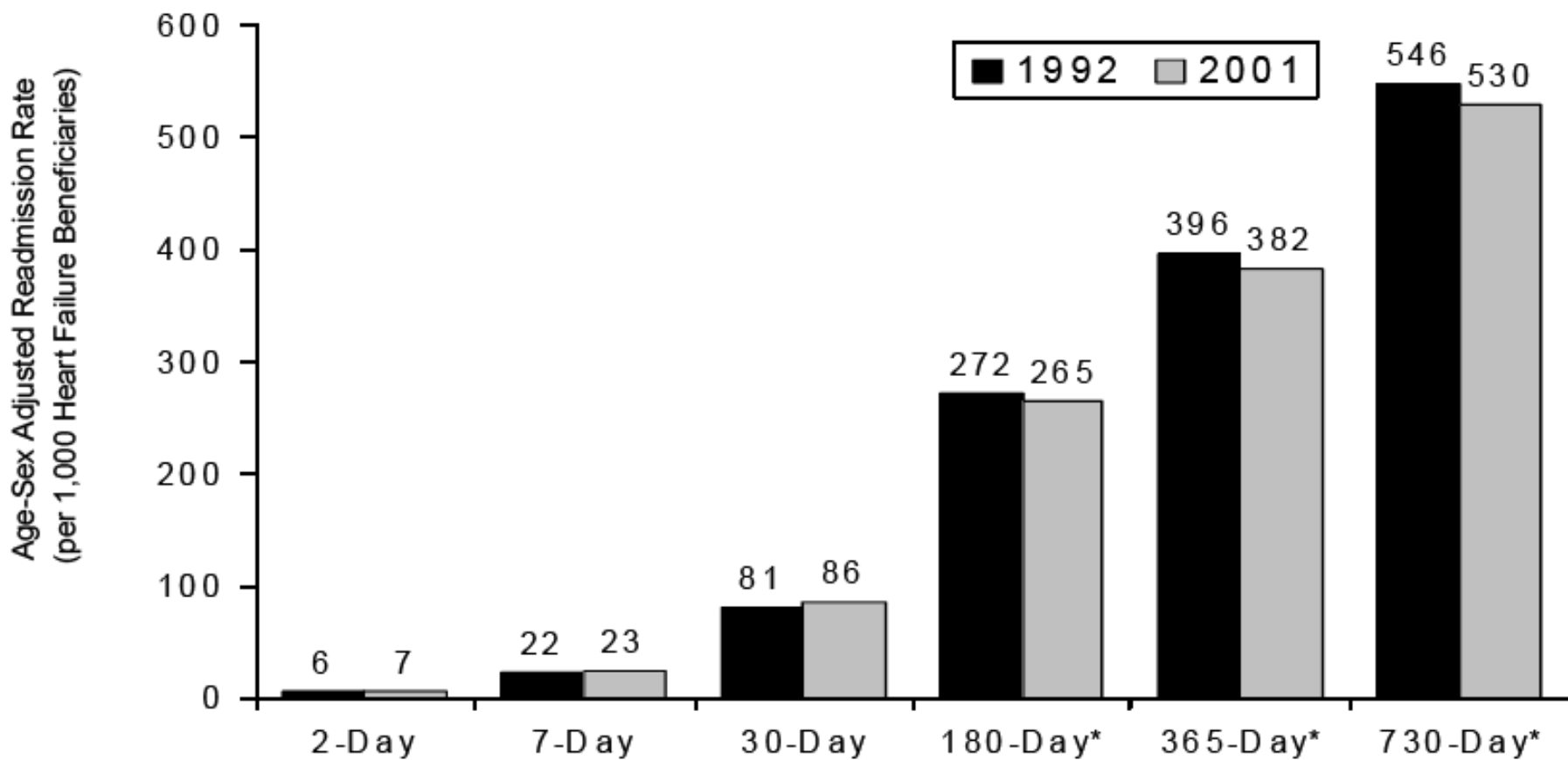
Background

- How is the US Medicare doing?
- How is the VA doing?
- Institute for Healthcare Improvement (IHI) initiative

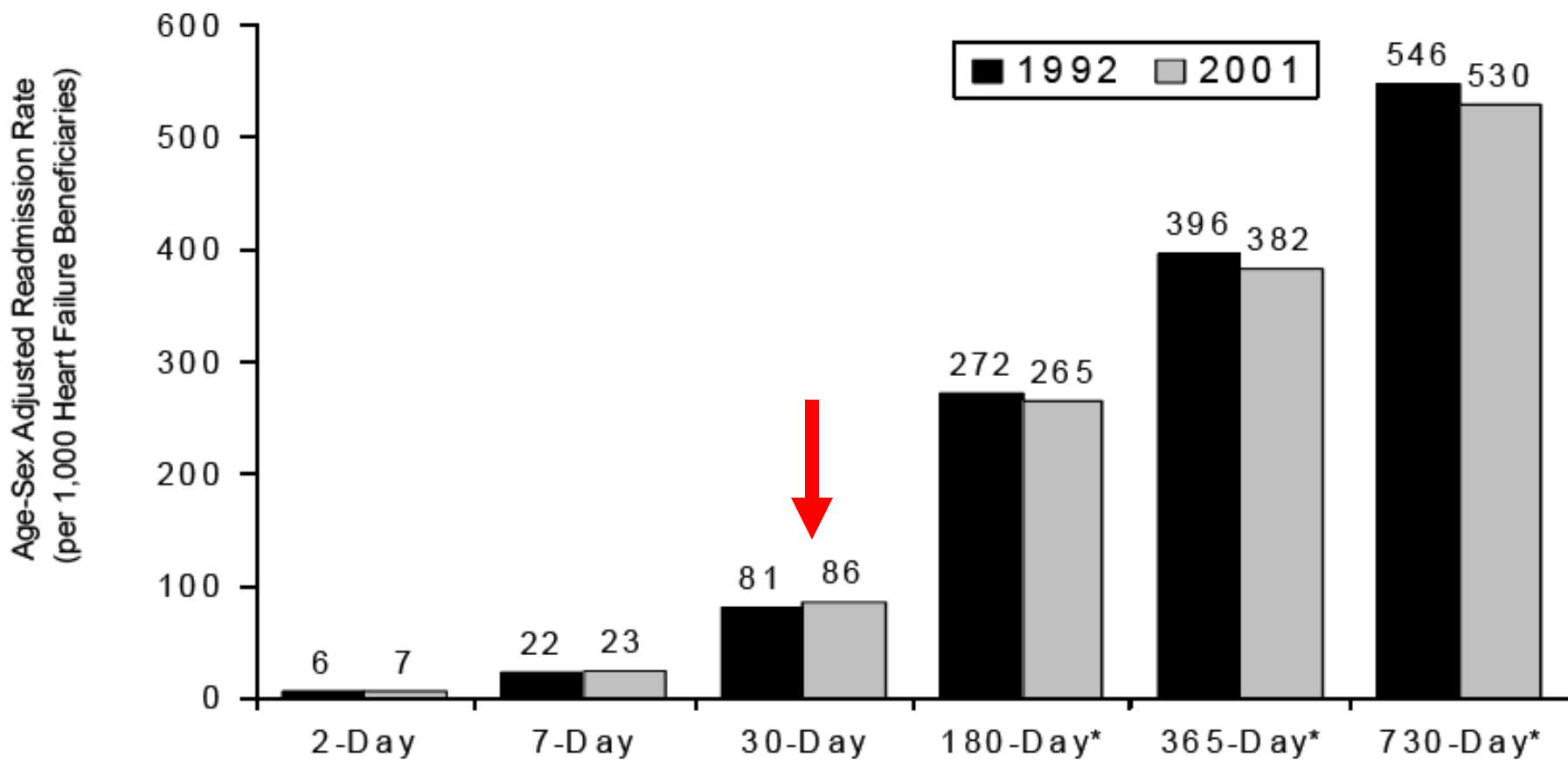
All Cause Readmission: Medicare



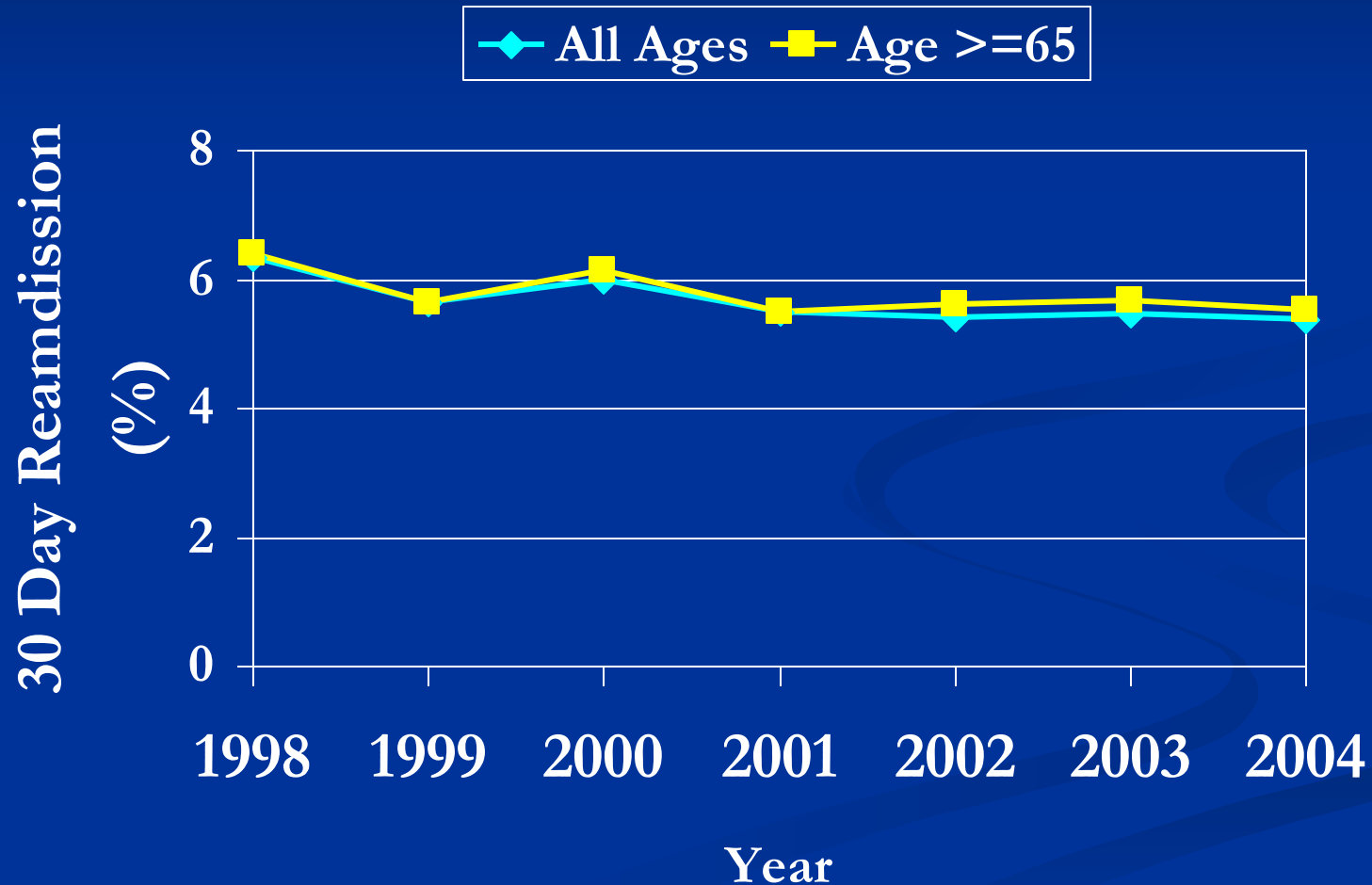
HF Readmission Rates: Medicare



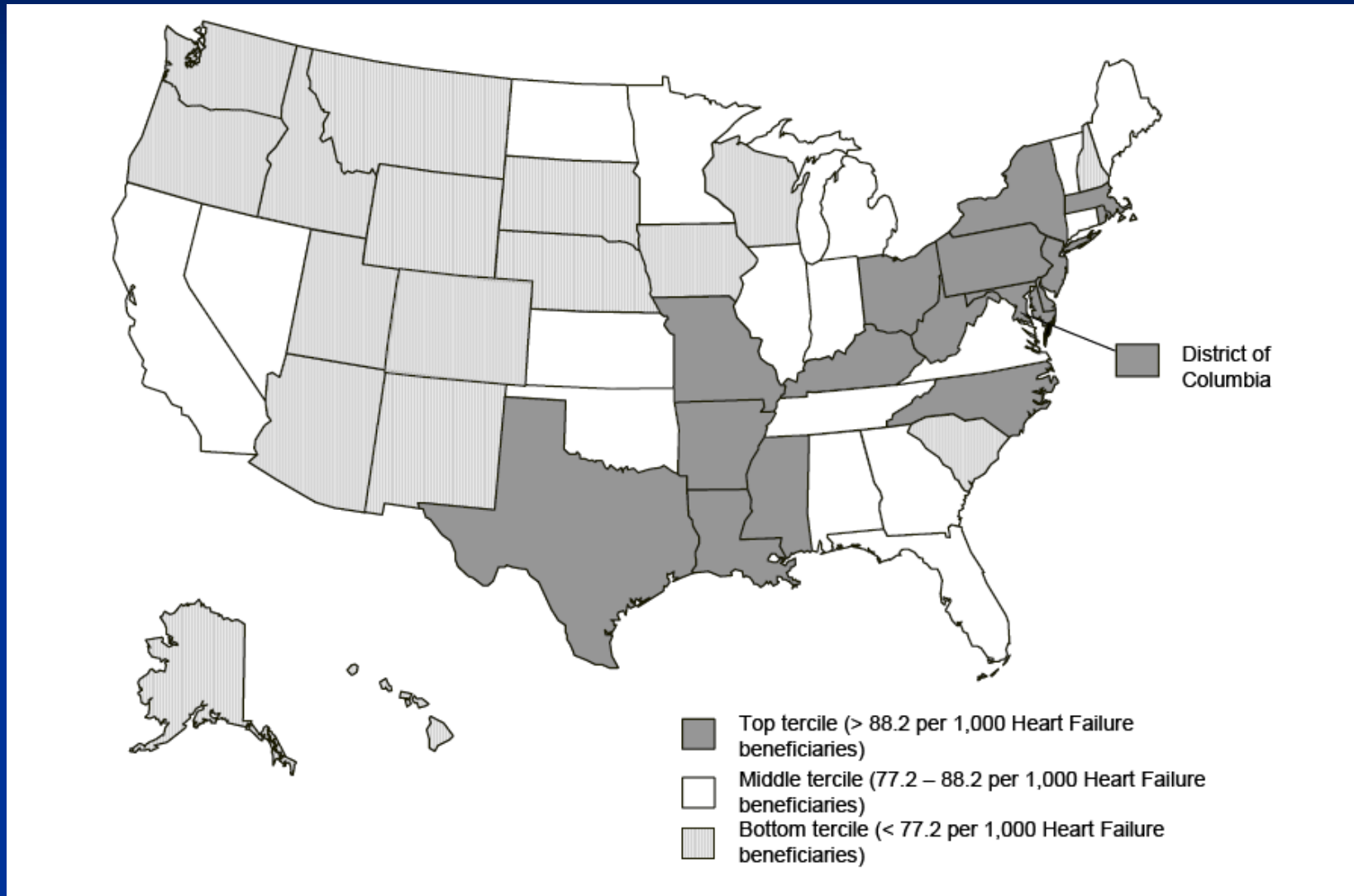
HF Readmission Rates: Medicare



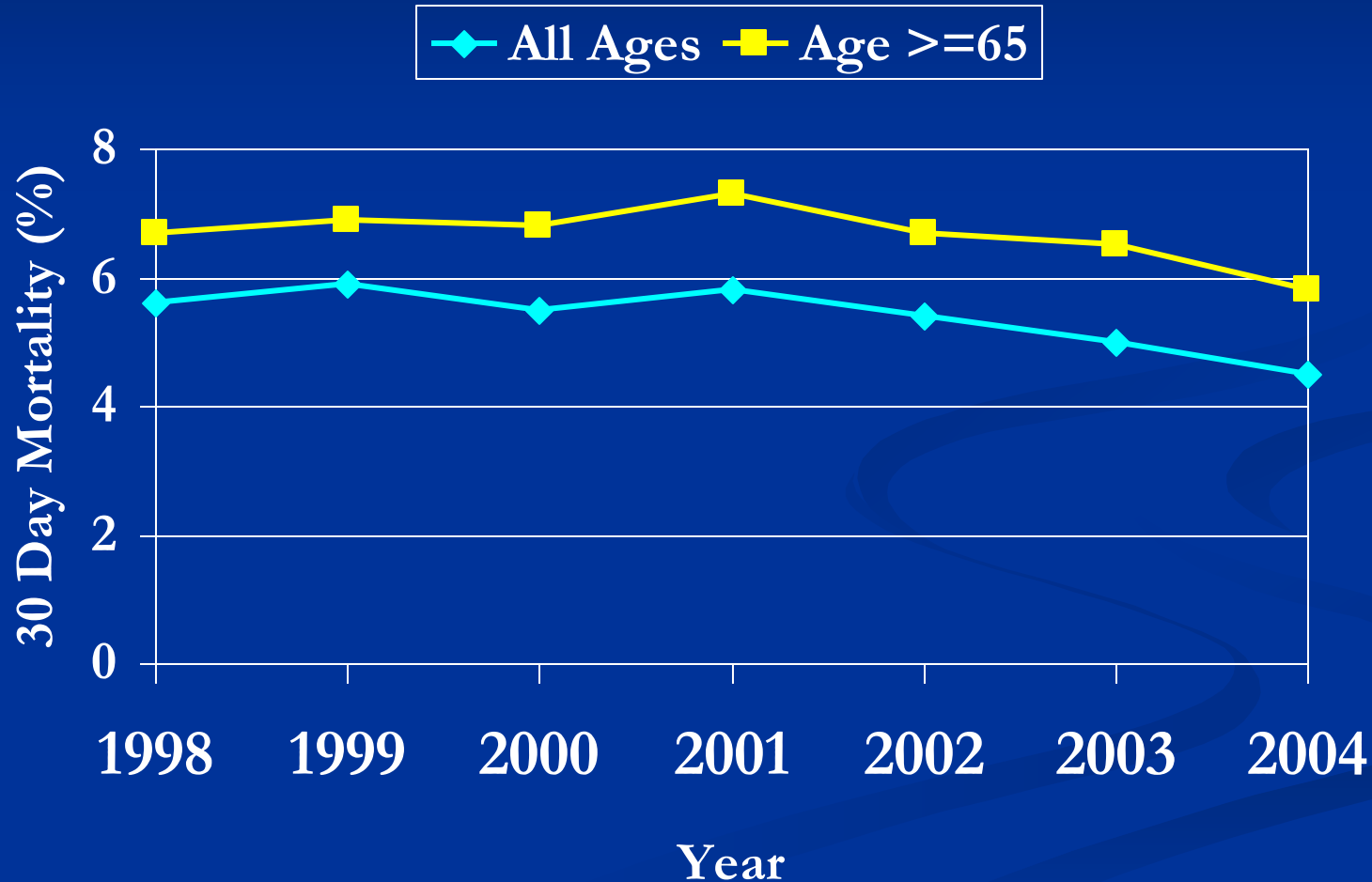
VA Heart Failure 30-Day Readmission



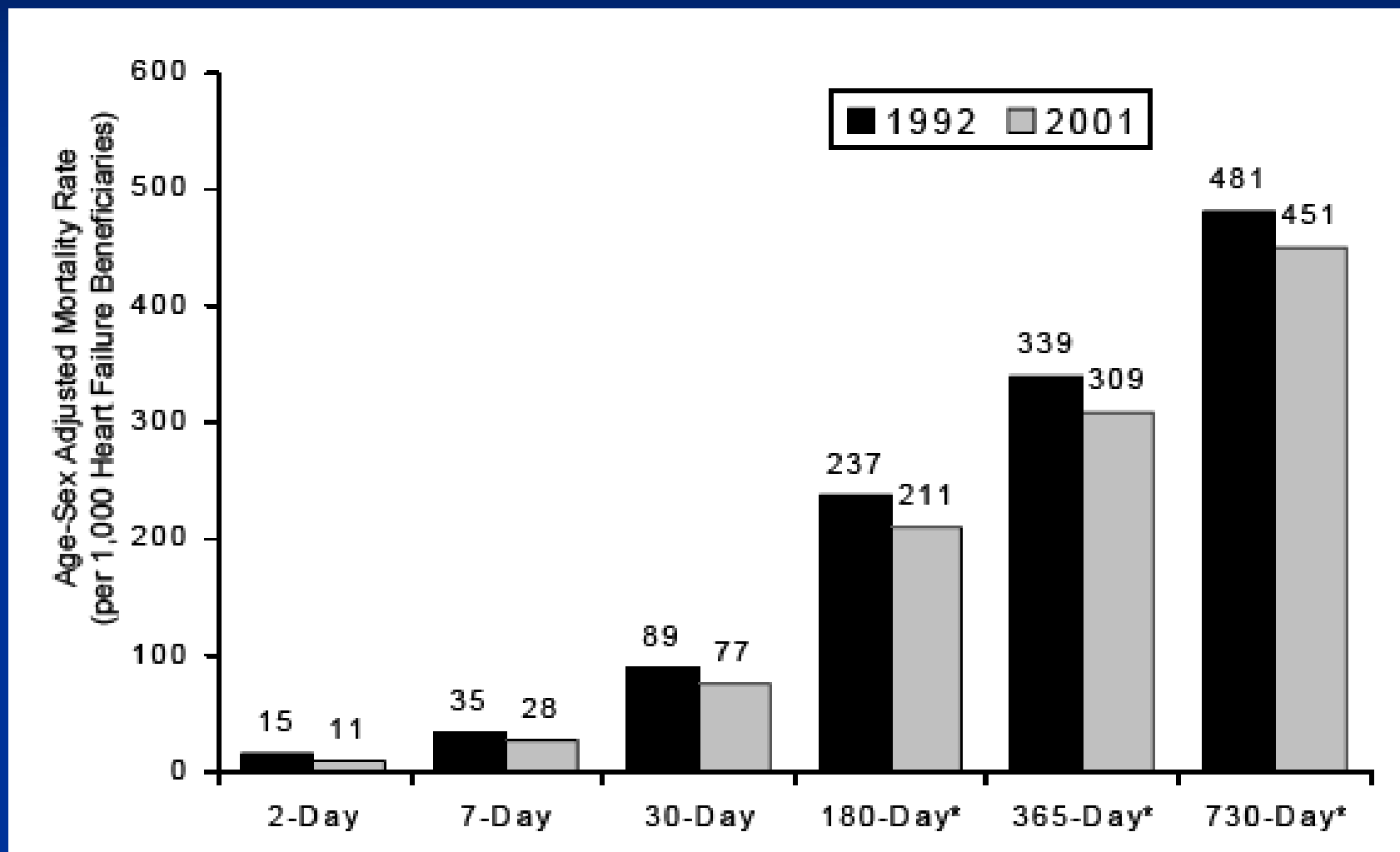
Regional Variation: HF Readmission in Medicare



VA Heart Failure 30-Day Mortality



Medicare Heart Failure Mortality



Summary of Administrative Data

- Apparently Stable readmission rates
- Can we improve?

PROTECTING

5 Million

lives

FROM HARM

IHL.org

The Institute for Healthcare Improvement (IHI)

- Save 100,000 lives campaign
 - Reduce hospital mortality
 - Rapid response teams
 - Better acute MI Care
 - Prevent adverse drug events
 - Prevent central line infections
 - Prevent ventilator-associated pneumonia
 - Prevent surgical site infections

100K Lives Campaign

- 3100 Hospitals participated
 - 18 months
- 124,000 lives saved

The Institute for Healthcare Improvement

- Many more patients are harmed than killed
 - 37 million hospitalizations/year in the US
 - 40-50 injuries/100 admissions
 - 15 million are harmed/year in US hospitals
 - 40,000 / day
- **Goal: Eliminate harm to 5 million patients over the next two years**

IHI Definition of Medical Harm

Unintended physical injury resulting from or contributed to by medical care (including the absence of indicated medical treatment), that requires additional monitoring, treatment or hospitalization, or that results in death.

IHI

Save 5 Million Lives From Harm

- Prevent pressure ulcers
- Reduce MRSA
- Prevent harm from high-alert medications
- Reduce Surgical Complications
- **Deliver reliable evidence-based care for heart failure**
- Get boards on board

IHI 5 Million Lives Campaign: Heart Failure

- Goal: Deliver reliable evidence-based care for congestive heart failure ... to reduce admissions.
 - Reduce the readmission rate by 50% by December 2008

Discharge Checklist

- Reconcile Medications
- Teach Back
- Follow up phone call in 48 hours
 - Medication check
- Physician visit
 - 1 week for average risk patients
 - 48 hours for high risk patients
- Case management for high risk patients

Heart Failure Key Interventions

- Measure Left Ventricular Ejection Fraction (EF)
- ACE inhibitor or ARB at Discharge if $EF < 40\%$
- Anticoagulation if Atrial Fib. at Discharge
- Influenza vaccine
- Pneumococcal vaccine
- Smoking Cessation counseling
- Discharge instructions

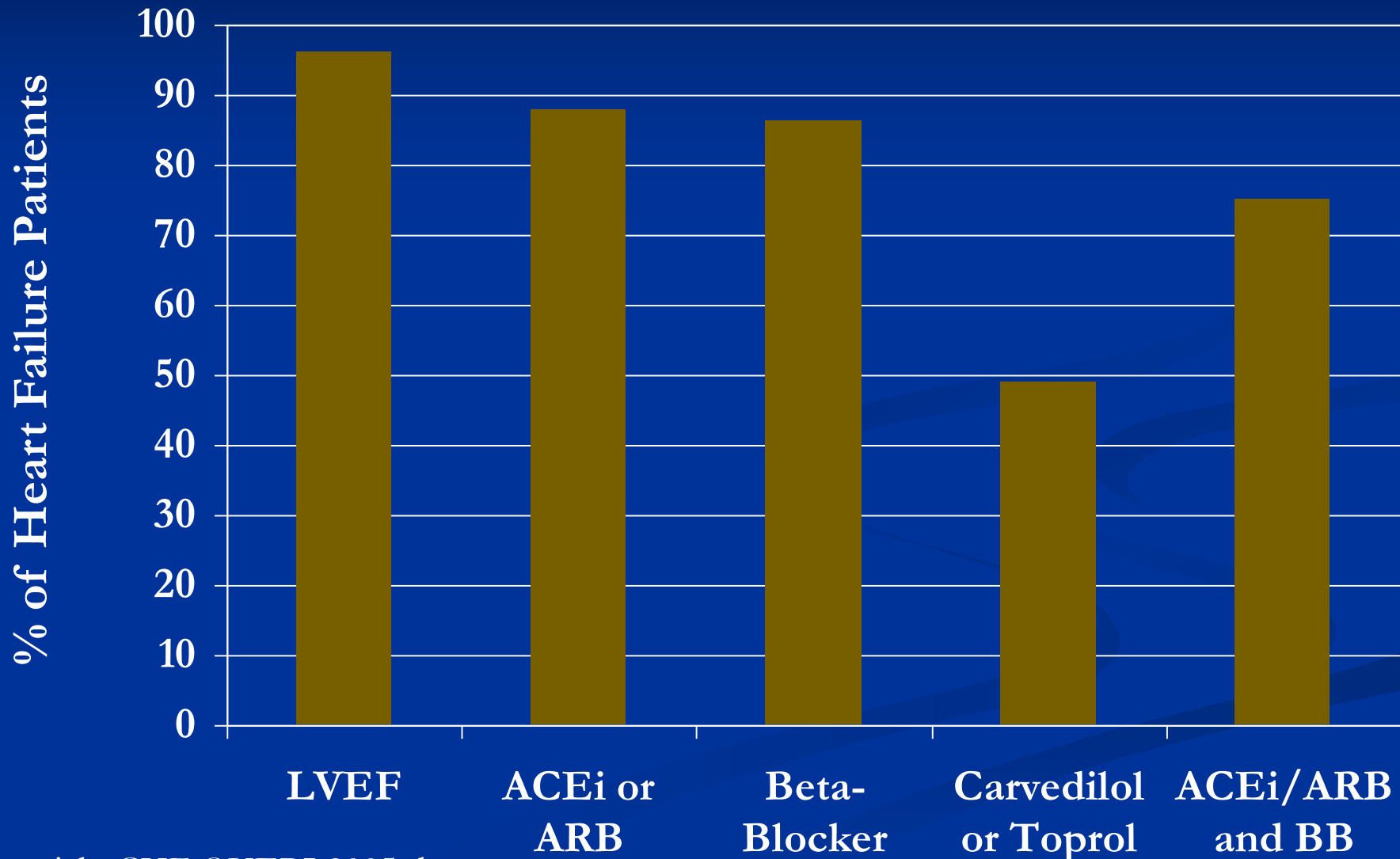
CMS: in 2005 only 54% of eligible patients received all interventions

Heart Failure

Other Interventions to Consider

- Beta-Blocker at Discharge if $EF < 40\%$
- Discharge Contract
- Statins for coronary disease
- Spironolactone for certain high risk patients

The VA Does Well on Medication Use for Heart Failure



Questions

- How many patients are called within 48 hours of discharge?
- How many are seen by a provider within 2 weeks? 1 week?
- Have sites improved follow-up without an increase in staff?
 - If so, what was done?
 - Have you eliminated advance appointments to make room for post-discharge visits?
- Are the IHI goals (1 week follow-up) worth pursuing?
 - Possible collaborative of interested sites