

IMPLEMENTATION OF A HEART FAILURE ALERT CARD AND IMPLICATIONS FOR CONTINUITY OF CARE

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THE PROBLEM

A lack of effective communication between primary and secondary care

A scoping exercise was conducted in NHS Manchester to elicit views on how heart failure services and processes might be improved. Interviews were conducted with a selection of health care professionals and heart failure specialist nurses raised concerns that they were not notified when patients on their caseload were admitted and discharged from hospital resulting in:

Repeated tests
Unnecessary referrals to therapists

HFSNs unaware of medication changes
Ward staff unaware of patient baselines

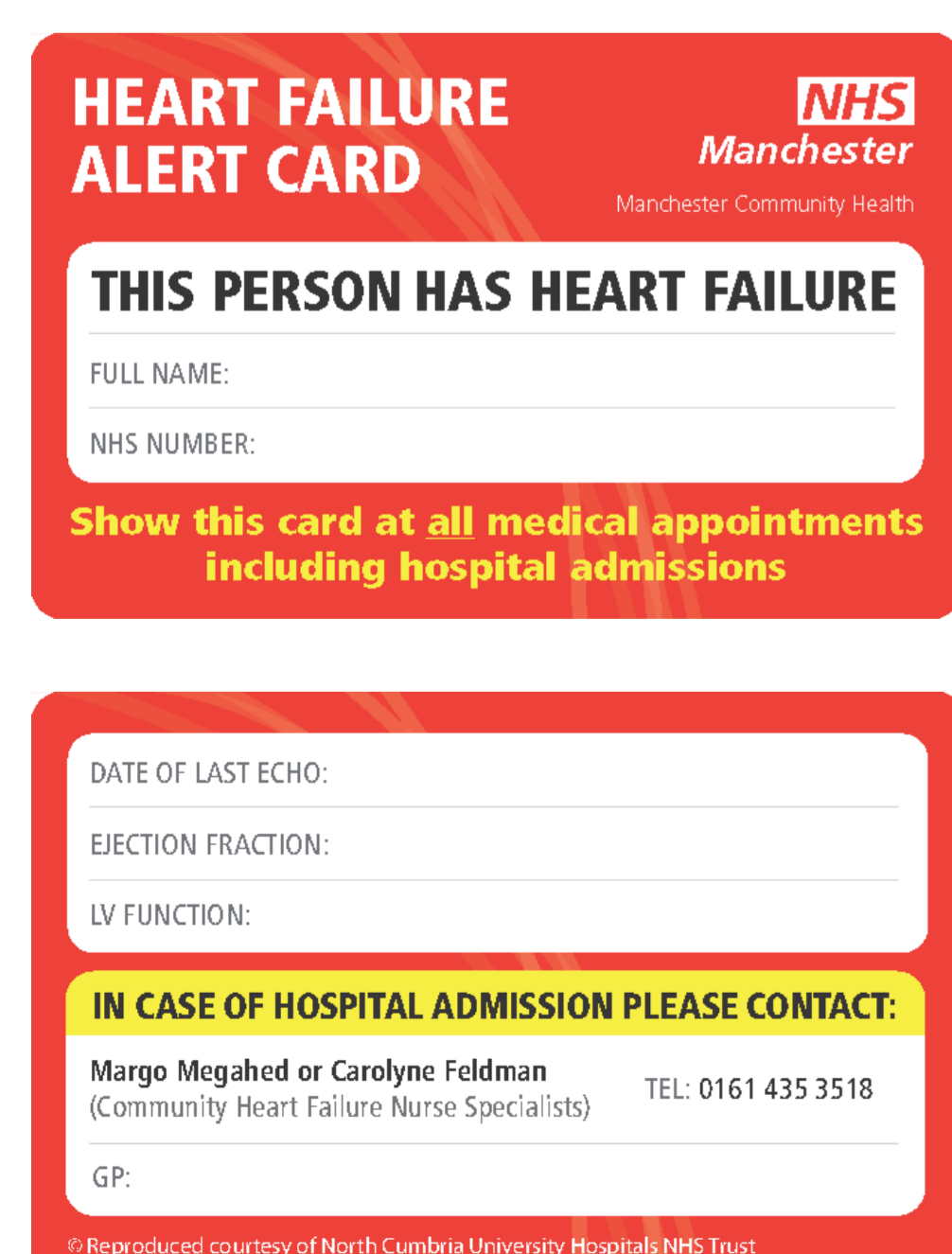
THE SOLUTION – A HEART FAILURE ALERT CARD

Aim: to improve communication between healthcare professionals at transitions of care

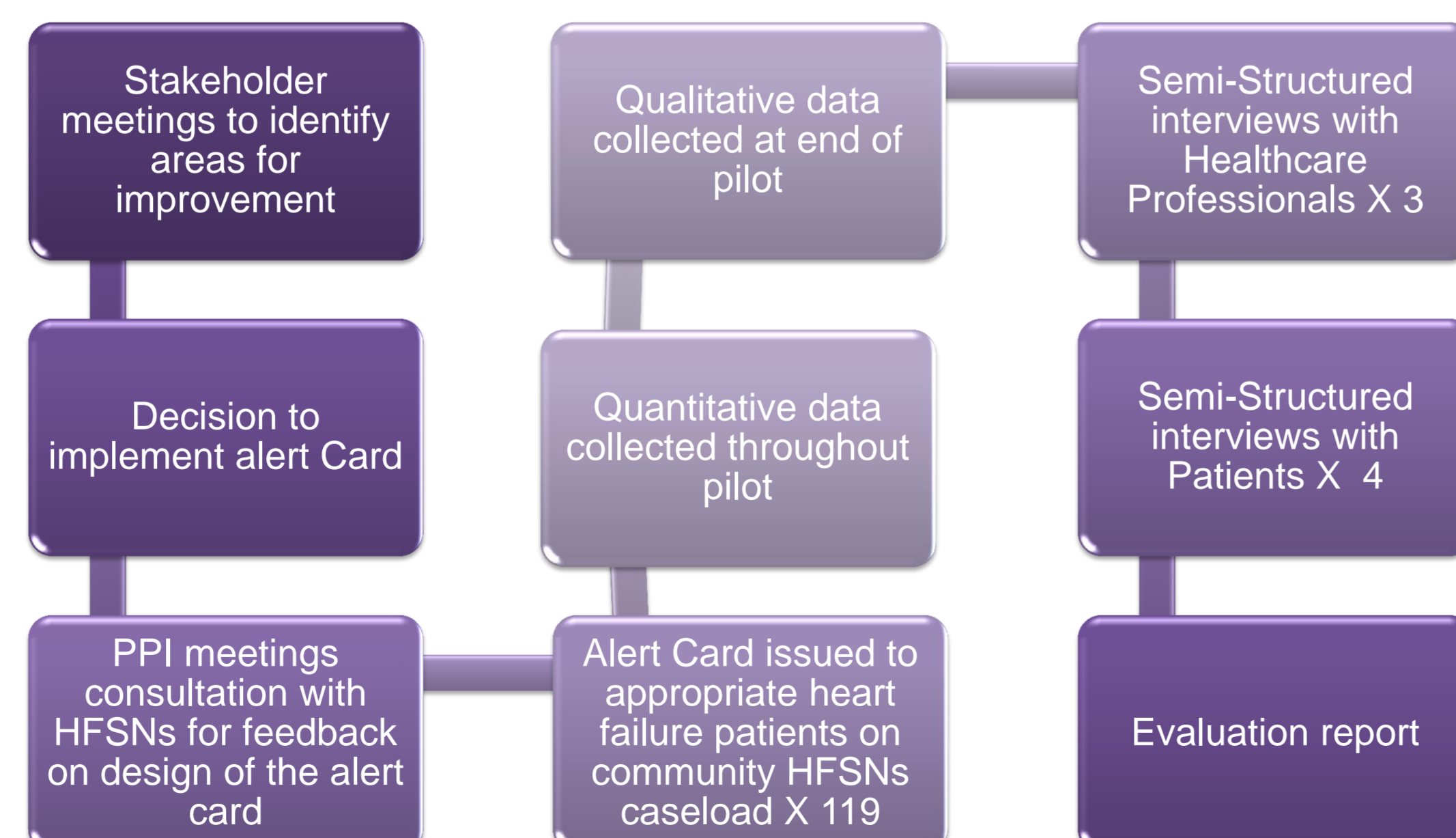
Objectives: To increase the incidence of HFSNs being notified that a patient has been admitted
To increase the incidence of HFSNs being notified that a patient has been discharged
To ensure baseline information is communicated to staff in secondary care
To empower patients to take an active role in their care by identifying they have a HFSN

The card was designed with input from patients, carers and health care professionals. It is plastic, the size of a credit card and fits into a wallet or purse. The card is issued during face to face consultations by a heart failure specialist nurse. Patients were asked to present the card on hospital admission or at out-patients appointments. The main target for the card were patients admitted to general medical wards, where nurses are less knowledgeable about heart failure and changes in treatment more likely to occur. In the previous 12 months the HFSN were contacted by secondary care on only two occasions to notify them of patient admission.

Alert Card

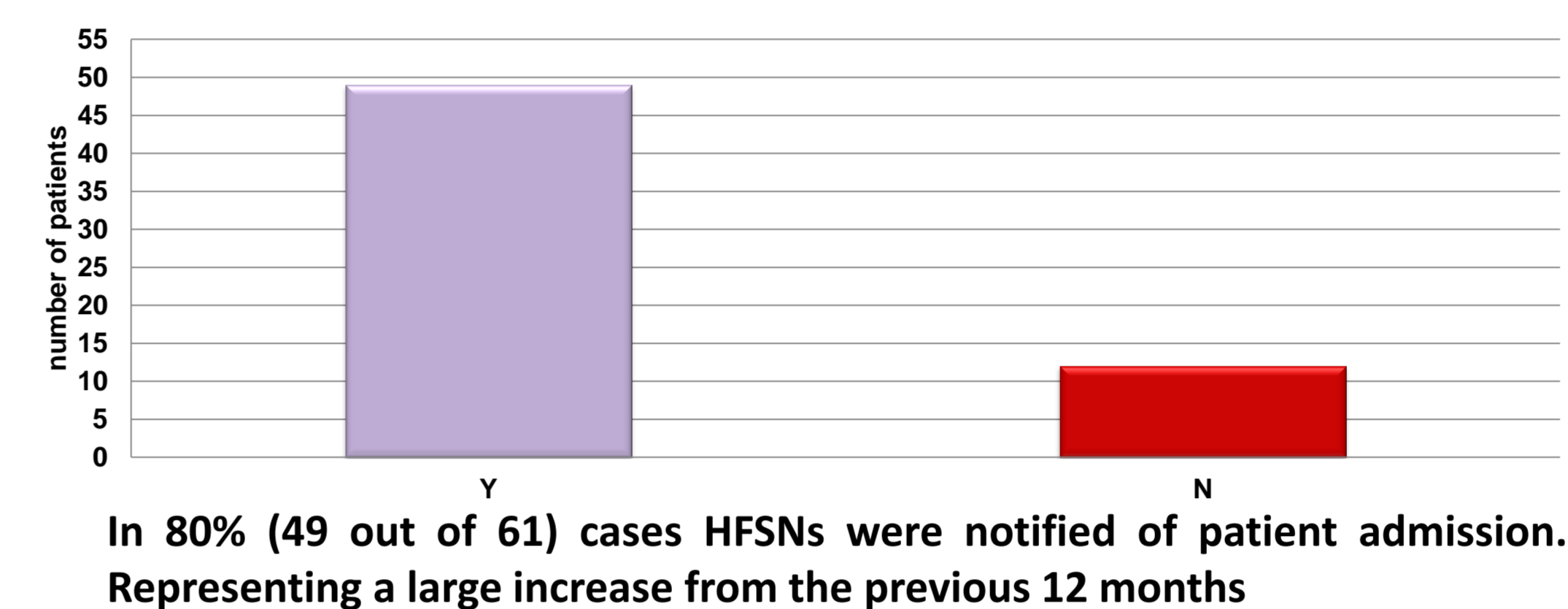


Project Design Flow Diagram

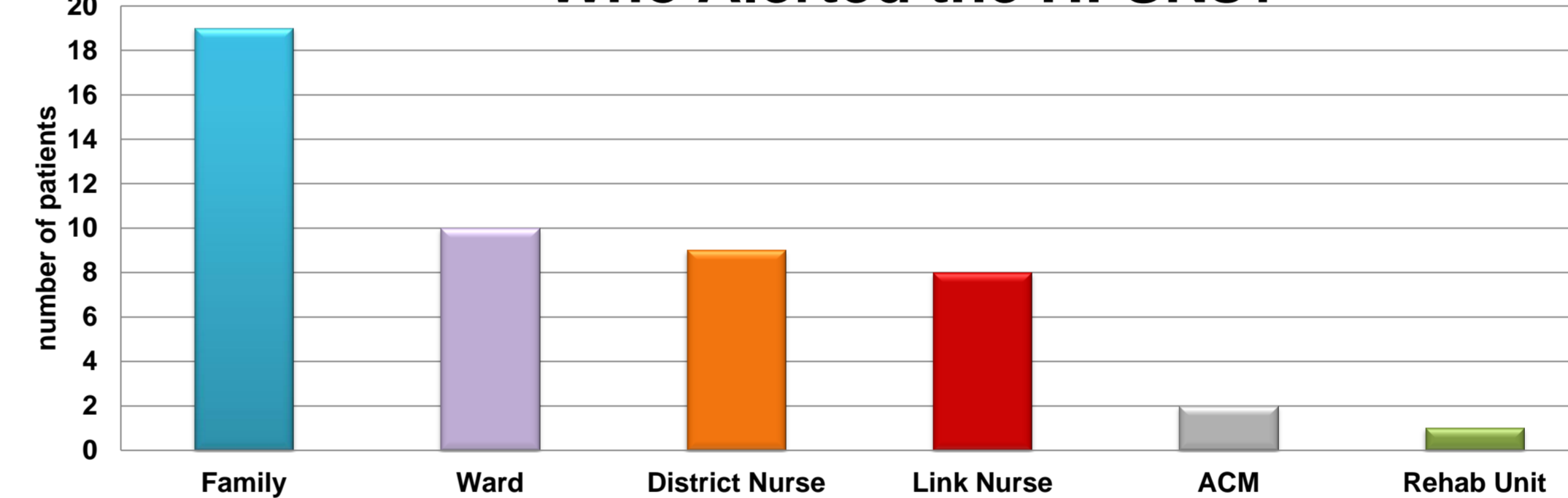


QUANTITATIVE RESULTS

Was the HFSN Informed of Admission?

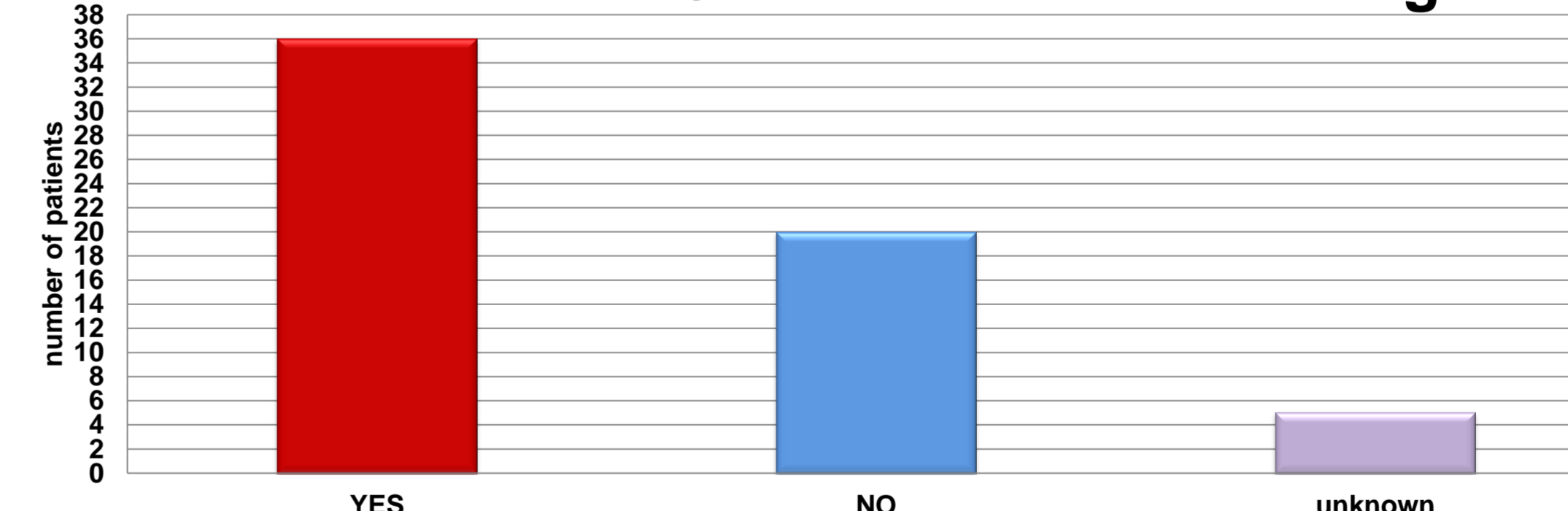


Who Alerted the HFSNs?



18 (37%) of notifications came from secondary care nurses. In the previous 12 months the HFSNs had only been notified of a patient admission on 2 occasions this represents nearly a 10 fold increase assuming similar admission rates

HFSNs Informed of Discharge



In 36 (59%) of cases the HFSNs were informed of discharge from secondary care. Prior to the alert card they had not been notified of any patient discharges and considered this to be a significant improvement in communication

CONCLUSIONS

The alert card pilot achieved the objectives in terms of:

- An increase in the number of notifications of admission
- An increase in the number of notifications of discharge
- HFSNs were more involved in in-patient care
- Patients/carers were empowered to take a more active role in their care

QUALITATIVE RESULTS

3 HCPs, 3 patients and 1 carer were interviewed by telephone. Everyone interviewed considered the alert card to be a good idea. HFSNs felt that communication with secondary care had improved significantly. HFSN have become more involved in in-patient management and have started to be contacted by hospital clinicians. The HFSN have started to be copied into out-patients letters that would previously be sent only to the GP.

“It certainly has increased since we started doing the alert card... We receive either notification from the link nurse... or directly from the ward” (HCP 1)

“I’ve had two patients admitted to hospital as a result of a fall in a different part of the country and they produced the card and we were contacted by the hospital” (HCP 3)

Feedback from patients has been positive and suggests that they feel more empowered

“Oh I will always carry the card” (P/C 2)

“I am quite confident about it I think it’s like a protection for me as well” (P/C 1)

“I feel more confident with it now it’s better than me saying I’ve got heart failure. It’s more official looking” (P/C 1)

“It’s good to have it and the information is available by phone call.... I think it’s brilliant” (P/C 2)