Virtual clinic review of Heart Failure patients improves coding accuracy

Conflicts of Interest

- The work described here was undertaken as part of a joint working agreement with Novartis
What is heart failure?

- Inability of the heart to keep up with the demands on it and, specifically, failure of the heart to pump blood with normal efficiency. When this occurs, the heart is unable to provide adequate blood flow to other organs such as the brain, liver and kidneys. Heart failure may be due to failure of the right or left or both ventricles. The signs and symptoms depend upon which side of the heart is failing. They can include shortness of breath (dyspnea), asthma due to the heart (cardiac asthma), pooling of blood (stasis) in the general body (systemic) circulation or in the liver's (portal) circulation, swelling (edema), blueness or duskeness (cyanosis), and enlargement (hypertrophy) of the heart.
Survival of incident cases of heart failure from the Hillingdon heart failure study (95% confidence intervals also shown).

Cowie et al 2002

Left ventricular systolic dysfunction
The context in Hounslow

HEART FAILURE PROJECT
HOUNSLOW CCG

West Middlesex Hospital
Chelsea and Westminster Hospital
NHS Foundation Trust
Aim:

A Quality improvement initiative across Hounslow Clinical Commissioning Group to improve quality of care and healthcare outcomes for people with or at risk of Heart Failure.
Heart Failure Virtual Clinic

- Virtual review of the Heart Failure register – HF001
- Aimed at accurate coding and diagnosis of Left Ventricular Systolic Dysfunction (LVSD)
- Review through primary and secondary care records to confirm LVSD diagnosis
- Primary outcome- Improving prevalence rates of LVSD through coding accuracy
- Secondary outcome – optimum management in the primary care and reduced secondary care admissions
Pilot screening

• 20 GP practices included
• Intervention:
  ➢ Up coding if evidence of reduced ejection fraction in medical records
  ➢ Down coding if error coded or resolved LVSD identified
• Pre-intervention LVSD – 174 (26.40%)
• Post-intervention LVSD – 308 (46.73%)

Virtual Clinic Complete

• Hounslow CCG covered – 48 GP practices
• Patients screened from HF001 : 1663
• Pre intervention LVSD – 451
• Final LVSD after review – 849
• New identified LVSD - 398 (46.87%)
• Total resolved/ error coding - 56
Next Steps..

• Completion of coding intervention for all practices
• Face to face clinics for optimum management
• Heart Failure Dashboard*
• Using EPR to improve coding

THANK YOU

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