

Licking Memorial Health Systems

Taking Quality To Heart

...a community report on patient care quality



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Take a few minutes to read this month's quality report. You'll soon discover why Licking Memorial Hospital has been named one of the nation's 100 Top Hospitals for three consecutive years.

LMH 2000

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Congestive Heart Failure Care...

How do we compare?

LMH 1999

Congestive Heart Failure (CHF) is one of the major public health problems facing the United States today. The Centers for Disease Control & Prevention estimate that 4.8 million people in the United States have CHF. Because of its prevalence and profound health affects, LMH is focusing February's quality report on this important health issue.

1. In 2000, the most common medical reason for admission to Licking Memorial Hospital was Congestive Heart Failure (CHF).

LMH 1998

of Patients Admitted at LMH for CHF

2. Unscheduled Readmissions within 30 days Unscheduled hospital readmissions measures the percentage of individuals readmitted to the hospital within 30 days of a hospital discharge due to the same or related condition.

LMH 2000⁴ State⁴ Hospital Readmissions for CHF Patients 21.6 % 19 %

3. Average Length of Stay for CHF Patients

This indicator measures the average number of days a CHF patient spends in the hospital.

LMH 2000² Nation³ LMH 1999² Average Length of Stay for CHF Patients 4.7 3.7 4.3

4. Inpatient Mortality for CHF Patients

Inpatient mortality measures the percentage of inpatient deaths due to CHF within a year.

LMH 1999² LMH 2000² Nation¹ **CHF Inpatient Mortality** 4.0 % 3.7 %

5. Medication Usage for CHF Patients

While there isn't a cure for CHF, the condition can be managed through the use of medications.

Beta Blockers - Beta blockers have been shown to reverse or prevent some of the health affects associated with heart failure and can prevent the progression of the disease. Significant improvement in heart function has been seen in patients treated with beta blockers after three months of treatment. Beta blockers are generally used together with diuretics and ACE inhibitors.

LMH 2000⁴ State⁴ CHF Patients Admitted on Beta Blockers 18.8 % 75 %

Inhibitors - The cornerstone of proper medical treatment is the prescription of an angiotensin converting enzyme (ACE) inhibitor in patients with heart failure. ACE inhibitors have been shown to lower mortality and improve functional capacity and quality of life.

Aspirin - Aspirin usage has been shown to prevent blood clotting, which can disrupt blood flow to the heart and even lead to a heart attack.

LMH 2000⁴ CHF Patients on ACE Inhibitors at Discharge 79.8 % 78.9 % CHF Patients on Aspirin at Discharge 64.5 %

6. Home Management of CHF

Those with CHF must self manage their condition to reduce health complications and increase their quality of life. Individuals need to monitor their weight, watch their salt intake to prevent water retention and take their medications regularly. It is important for healthcare providers to give thorough discharge instructions to help CHF patients effectively manage their condition.

State⁴ LMH 2000⁴ Discharge Instructions Given to CHF Patients on Medications 81.5 % 96.3 % Discharge Instructions Given to CHF Patients on Diet Restrictions 89.9 % 81.5 %

- 1 Maryland Hospital Association national quality study for third quarter of 2000 (most recent report).
- 2 LMH patient data for MHA study period, third quarter of 2000.
- 3 Based on LMH patient data from first half of 2000. Comparative data from 198 hospitals in the Midas clinical data base 4 Ohio National Heart Failure Project, Aggregate Outcomes Report - Baseline, December 2000. Study conducted by KePRO, an agency that conducts healthcare quality studies for the federal government on Medicare recipients.

LMH Joins National Effort to Improve CHF Care

Licking Memorial Hospital chose to participate in a national health project on Congestive Heart Failure (CHF) designed to improve the care, and ultimately the health outcomes, of patients with CHF. The year-long project will be led by Voluntary Hospitals of America, a national network of not-for-profit hospitals, and will run through 2001.

As part of the project, LMH organized a CHF team made up of cardiologists, family physicians, inpatient medical specialists, nurses, dieticians, pharmacists, case managers and other professionals. The team has been working together to bring about innovative change to help our population understand CHF, improve quality of life and benefit from the most current knowledge available.

A variety of quality indicators are being studied as part of the project. The first report will be released in 2001.

The CHF team has already instituted several quality improvement efforts at Licking Memorial Hospital for CHF care:

· Usage of Clinical Practice Guidelines - A standard approach to the care of the CHF patient was developed last

year at LMH. The CHF Clinical Practice Guideline outlines the care that should be consistently provided to CHF patients. The guideline is based on the recommendations of the American Heart Association, the American College of Cardiology and the Agency for Policy and Healthcare Research. The CHF team has been promoting its usage through:

- Special Identification of CHF Patients Because CHF patients can exhibit symptoms common to other illnesses, special effort has to be made to ensure all CHF patients are identified so they can receive care according to the CHF Clinical Practice Guideline. An LMH case manager makes daily hospital rounds and marks the charts of those patients with CHF with a large sticker. This sticker alerts the nurse to use the CHF Clinical Practice Guideline, along with standard order forms and patient instruction sheets that have been developed especially for the CHF patient.
- Extensive Training In March of 2001, members of the Licking Memorial CHF Team will be conducting extensive training on CHF care and treatment. Education will be provided to the appropriate professional staff at the hospital, in physician offices and from extended care facilities to share the latest advancements in CHF care and treatment.

SUCCESS STORY

Taking CHF a Step at a Time...

Lance Clarke was short of breath after climbing just one flight of stairs. He had swollen ankles, a persistent cough and could only sleep in an upright position. He knew something was wrong.

An echocardiogram unveiled that Lance had congestive heart failure (CHF).

"When you tell people you have congestive heart failure, they expect you to fall over the next minute. Failure is an unfortunate word," Lance said.

CHF means the heart is not functioning to the level it should be. Through medication, proper diet and conditioning, a person with CHF can lead a normal life.

"The one thing you have to do is to take those pills religiously,"

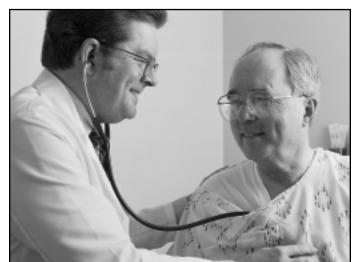
he stressed. "Dr. Morrice tells me I'm unusual because I take my pills. It's a real hassle, but you just can't forget." Lance is on five different medications, four of which he takes

twice daily. He stays on track by repositioning his pill bottles

after he takes his medication.

"I was in Japan and realized that I did not have enough potassium pills to last the trip and the hospital there didn't have strong doses of potassium. Finally, I was able to obtain some small pills, but I had to take 20 to make up for two. I figured that was better than eating 72 bananas a day!," he said laughing.

While in Japan, Lance put his heart to the test. "My wife and I were on a tour and came to this shrine on top of a hill. You can either go around the hill or go up hundreds of stairs to the shrine. My wife looked at me and asked, 'Do you want to go around?,' and I said emphatically, 'No, I'm going to climb those stairs!"



Lance Clarke with Cardiologist Bryce Morrice at a recent check-up.

"...I'm going to climb those stairs."

- Lance Clarke

What is CHF?

Congestive Heart Failure CHF isn't as scary as it may first sound. It simply means the heart isn't pumping as well as it should be. Because the body is not getting enough oxygen-rich blood, CHF lowers a person's energy level and causes a buildup of fluids in the body. Symptoms of CHF include:

- · Shortness of breath
- Difficulty breathing lying down
- Dry hacking cough
- · Swelling of feet, ankles and/or hands
- Sudden weight gain
- Fatigue
- Water weight gain

The weakening of heart muscle causes CHF. It can be due to coronary artery disease, a prior heart attack, high blood pressure, heart valve disease or other disease, infection or birth defect impacting the heart muscle.

CHF can be managed with proper medication and diet monitoring.

Visit www.lmhealth.org to review other LMHS quality report cards. Also, if you have a suggestion on how we can improve our care, please call our Performance Improvement Line, 348-4641.