



## Project Overview

### **Get With the Guidelines: Heart Failure**

Michigan Department of Community Health  
Cardiovascular Health, Nutrition and Physical Activity Section  
Heart Disease and Stroke Prevention Unit  
January 22, 2008

Heart Failure has been reported as the largest contributor to preventable hospital admissions. It is a disease that requires long-term, usually complex management and occurs more often in an elderly population with co-morbid conditions. The incidence of heart failure has increased and early diagnosis of heart failure is essential to prevent further deterioration. Appropriate treatment and management can lead to a higher quality of life, reduce unnecessary hospitalizations, reduce co-morbid complications and reduce deaths.

#### **Get With the Guidelines Patient Management Tool:**

The American Heart Association has a quality improvement program targeting heart failure and the Michigan Department of Community Health is providing some funding to Michigan hospitals to support implementation of this program. The AHA *Get With the Guidelines (GWTG) Patient Management Tool: Heart Failure*, is an award-winning, ready-to-implement program. The program is designed to quickly and positively impact hospital patient care through consistent application of the most up-to-date scientific, evidence-based treatment guidelines. It has an easy-to-use, online management system that fulfills hospital requirements for The Joint Commission and Centers for Medicare & Medicaid Services reporting. Key features of the GWTG program include: real-time hospital-specific and aggregate benchmarking reports, comparisons of current guidelines to patient care, creation of automated patient notes and physician follow-up letters to referring physicians, downloadable data on-demand and the ability to transmit data to selected third parties. To learn more about the GWTG program go to [www.americanheart.org/getwiththeguidelines](http://www.americanheart.org/getwiththeguidelines) or contact the AHA Quality Improvement Initiatives Director, Kimberly Sutter, at 989-573-8181 or [Kimberly.Sutter@heart.org](mailto:Kimberly.Sutter@heart.org). Consultation and assistance will be available through the American Heart Association Midwest Affiliate during the project. Outcome Sciences, Inc. a third-party vendor, owns the software for the GWTG program and will also provide training and technical assistance.

#### **Funding and Expectations:**

\$2,500 will be provided to the hospitals selected. The funding from MDCH should be used to purchase the GWTG program and assist with onsite implementation. Learning sessions will be offered for orientation and guidance in the project.

Project responsibilities include:

- Purchase the license to use the AHA GWTG Heart Failure Tool from Outcome Sciences
- Attend 1-2 learning sessions
- Identify a physician champion within the hospital.
- Identify and convene a hospital team.

- Development or revision of standing orders and/or protocols according to GWTG-HF measures. (discharge instructions provided, LV function measured, ACE inhibitor and/or ARB prescribed at discharge, Beta blocker on discharge if relevant and smoking cessation counseling provided if relevant)
- Enter baseline data into the Patient Management Tool (at least 30 consecutive heart failure patients).
- Report project results to MDCH: 90 days after the start of the project, 6 months after the start of the project, and one-year from the initial start date. This will include tracking the number of re-admissions.

The AHA has several recognition programs for GWTG hospitals. Your hospital could be eligible for the “Participating Get With the Guidelines Hospital” status award.

**How To Apply:**

To request consideration for project funding, complete the attached application or indicate your interest in submitting an application by February 15, 2008. Submit the application to the address indicated. If you have any questions regarding the project please contact Velma Theisen at [theisenv@michigan.gov](mailto:theisenv@michigan.gov) or 517-335-8754. This cycle of funding awards will be made February 18, 2008. Additional funding awards will be considered later.