

## Appendix 4B: Inpatient Process Indicators (Nonpharmacological)

The panel members considered the following inpatient process of care indicators to be important quality measures. Strong process-outcome links have not been clearly identified, however, the panel considered these indicators to be important in the management decisions involved in heart failure care.

The left ventricular function evaluation indicator does not address the accuracy, quality, or reproducibility of the diagnostic test report. The indicator does not assess whether another mode of diagnostic evaluation is performed when the initial study is technically difficult. These are limitations of this indicator. Weight measurement assesses the performance and recording of weights and therefore is not necessarily satisfied by documentation of the physician's order in the chart. Patient days spent in the ICU setting are excluded from the calculation of the total number of eligible days of length of stay in recognition that not all facilities have accurate bed scales.

The panel considered a number of discharge instructions to the patient or surrogate to be important individual quality indicators. The potential limitations of chart documentation were acknowledged.

<b>LEFT VENTRICULAR FUNCTION EVALUATION BEFORE OR DURING ADMISSION</b>	
<b>ELIGIBLE</b>	1) All HF patients
<b>EXCLUSION</b>	1) EF evaluated previously (within 6 months) 2) Discharge plan to evaluate EF after discharge 3) Transfers to another acute care hospital
<b>STATISTIC</b>	% of eligible CHF patients with LV function evaluated in hospital

<b>WEIGHTS MEASURED AND RECORDED AT LEAST 50% OF DAYS</b>	
<b>ELIGIBLE</b>	1) Admission diagnosis of heart failure
<b>EXCLUSION</b>	1) Exclude days in ICU setting from calculation of total days in-hospital 2) Limited mobility such that weight cannot be routinely assessed
<b>STATISTIC</b>	% of eligible CHF patients weighed on at least 50% of non-ICU in-hospital days

<b>LENGTH OF HOSPITAL STAY<sup>§</sup></b>	
<b>ELIGIBLE</b>	1) All hospitalized CHF patients
<b>EXCLUSION</b>	1) Administrative or chart data not available
<b>STATISTIC</b>	Median length of hospital stay

<sup>§</sup>The time period of observation for this indicator includes the first 14 days of non-ICU hospital stay (if LOS  $\geq$  14 days) or the entire hospital stay (if LOS < 14 days).

**Appendix 4B (continued): Inpatient Process Indicators  
(Nonpharmacological)**

<b>CRITICAL INFORMATION / INSTRUCTIONS GIVEN TO PATIENT OR SURROGATE AT DISCHARGE – DISCHARGE MEDICATIONS</b>	
	Discharge element documented in medical record:
	i. discharge medications reviewed by pharmacist or other health professional
<b>ELIGIBLE</b>	1) Discharged alive
<b>EXCLUSION</b>	1) Not discharged home (transfers)
	2) Physician documentation of reason for no discharge instruction <b>Example:</b> language barrier
<b>STATISTIC</b>	% of eligible CHF patients with documented instructions

<b>CRITICAL INFORMATION / INSTRUCTIONS GIVEN TO PATIENT OR SURROGATE AT DISCHARGE – SALT/FLUID RESTRICTION (ANY DOCUMENTATION)</b>	
	Discharge element documented in medical record:
	i. discharge instructions regarding salt or salt/fluid or fluid or diet restriction or documented dietician consult
<b>ELIGIBLE</b>	1) Discharged alive
<b>EXCLUSION</b>	1) Not discharged home (transfers)
	2) Physician documentation of reason for no discharge instruction <b>Example:</b> language barrier
<b>STATISTIC</b>	% of eligible CHF patients with documented instructions

<b>CRITICAL INFORMATION / INSTRUCTIONS GIVEN TO PATIENT OR SURROGATE AT DISCHARGE – DAILY OUTPATIENT WEIGHT MONITORING</b>	
	Discharge element documented in medical record:
	ii. discharge instructions regarding self-measurement of daily weights at home and instruction regarding action in response to weight increase (seek medical attention, increase diuretic dose)
<b>ELIGIBLE</b>	1) Discharged alive
<b>EXCLUSION</b>	1) Not discharged home (transfers)
	2) Physician documentation of reason for no discharge instruction <b>Example:</b> language barrier
<b>STATISTIC</b>	% of eligible CHF patients with documented instructions

## Appendix 4B (continued): Inpatient Process Indicators (Nonpharmacological)

<b>CRITICAL INFORMATION / INSTRUCTIONS GIVEN TO PATIENT OR SURROGATE AT DISCHARGE – SYMPTOMS OF WORSENING HEART FAILURE</b>	
	Discharge element documented in medical record:
	i. discharge instructions regarding symptoms of worsening heart failure and actions to take in event of worsening
<b>ELIGIBLE</b>	1) Discharged alive
<b>EXCLUSION</b>	1) Not discharged home (transfers)
	2) Physician documentation of reason for no discharge instruction <b>Example:</b> language barrier
<b>STATISTIC</b>	% of eligible CHF patients with documented instructions

<b>CRITICAL INFORMATION / INSTRUCTIONS GIVEN TO PATIENT OR SURROGATE AT DISCHARGE – FOLLOW-UP APPOINTMENT</b>	
	At least one of the following discharge elements documented in medical record:
	i. discharge instruction regarding follow-up to appointment (arranged within 4 wks)
	ii. acceptable alternative: patient to arrange own follow up to be assessed in 4 weeks
<b>ELIGIBLE</b>	1) Discharged alive
<b>EXCLUSION</b>	1) Not discharged home (transfers)
	2) Physician documentation of reason for no discharge instruction <b>Example:</b> language barrier
<b>STATISTIC</b>	% of eligible CHF patients with documented instructions