Capture HF – Outcomes Dashboard

Instructions for using the dashboard and CME components.

Accessing Outcomes Dashboard

From the **Records** window, choose **Patient Menu → Open Outcomes Dashboard**. The Outcomes Dashboard opens in a new window.

1. • Click the **All Dashboards** icon in the top right of the window
   • Select the **Capture HF dashboard** from the dropdown.

2. • Click the **Favourite** icon for future quick access

3. • Click on the **Share** icon at the top left corner of the Capture HF Outcomes Dashboard window.
   • Scroll to the bottom of the window that appears, select the **From Earliest** button, which will provide baseline statistics.

   By sharing, I consent to the terms of The Canadian Heart Reseach Centre
   Start Sharing: From Earliest   From Today

   • For more information on sharing see Share your Metrics FAQ at the end of the document.

4. • Click on **Help** for general information on using a dashboard.

STEP 1: Identify All Heart Failure patients then code

The first step is a practice audit that will ensure that the patients you will be reviewing on the remaining tiles are active Heart failure patients.

It is important to identify the patients in your practice that have heart failure in a standardized format.

Heart Failure Coded

1. Click on **Heart Failure Coded** to generate a list of patients who are currently coded with the ICD-9 428 (or SNOMED 84114007)
2. Ensure that these patients are still part of your practice. If there are patients on this list that are no longer part of your practice change their patient status to deceased or inactive as appropriate.

STEP 1. Identify All Heart Failure Pts. Then Code	☰
	Value (Count)
Heart Failure Coded	42
Consider HF Not Coded: Documented as text in PROB or HPH	21
Consider HF Not Coded: HF custom form used	12
Consider HF Not Coded: Sacubitril/Valsartan prescribed	5
Consider HF Not Coded: Carvedilol prescribed	8
Consider HF Not Coded: On Triple Therapy	4
Consider HF Not Coded: Q050A >=1	2
Consider HF Not Coded: Dx in 2+ bills	5

> **To change patient status**
>
> i) Double click on the patient to open the patient record
> ii) Double click anywhere on the **Patient demographics section (Ctrl {CMD} +])** at the top of the record window (this will open the patient demographics window)
> iii) Click the patient status on the bottom right of the demographic window to choose the appropriate status e.g. deceased or inactive

💡 At any point to bring your search list back to the front of the windows the shortcut is CTRL {CMD}+O

Next review the Consider HF not coded:

These lines will provide you with a list of patient who potentially have heart failure.

Patients returned in these lines will not be counted as heart failure patients. It is important to review and update their problem field to include a coded heart failure diagnosis.

1. Click on the **Consider HF Not Coded: Documented as text in PROB or HPH** to view list of patients with HF in the problem or history of past health box.
2. Review the patients on the list to verify whether they have heart failure and should be coded.

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There are two options for coding your patients individually or as a batch.

To code patient by patient

- Double click on the patient to open the patient record
- Double click on **PROB** to add a problem
- In description field type **428** and then **tab** out of that field box (if your default setup uses SNOMED coding enter 84114007)
- This will populate the description with Heart failure and also add the diagnosis code to the Associated diagnosis box
- Click Add to Problem

To code a batch of patients from a search list

- Remove all patients that you do not want to code by by selecting them one by one on the list then press the delete key on the keyboard. (for MAC laptops Function+delete)
- Click on the **Report** menu → Select **Add Problem For All Found.**
- Enter the code **428** in the description field and tab out of the box (if your default setup uses SNOMED coding enter that code 84114007) this will add the description heart failure and also add the appropriate code to the Associated Diagnoses section.
- Click on the **Add to List** button. This process runs in the background and will notify you only if it fails.
- Repeat this process with each additional consider line

Any patients that you have not coded will remain on these lists but not be included in the cohort for the remaining tiles.

Numbers for each tile will update with the overnight run of the searches. If however you want refresh a tile at any time while working through this process then from the tile menu on the top right choose the refresh option

STEP 2: Identify HFrEF pts, Document LVEF and NYHA Class

This step will identify which of your heart failure patients have reduced ejection fraction (HFrEF) and their current NYHA Class this step is important to identify the HFrEF patients for the remainder of the dashboard.

If you are doing this step immediately after Step 1 please refresh this tile as mentioned above this will ensure that the patients returned in this tile reflect the work you did in Step 1.

Note: LVEF and NYHA class documented in the **CDM Congestive Heart Failure 2018** custom form will be automatically recorded as those vitals. Or if you prefer to use stamps use the custom vital functionality of PS to record these as a vital as follows;

1. For ejection fraction use @LVEF: e.g. @LVEF: 45
2. For NYHA Class use @NYHAClass: e.g. @NYHAClass: 2
3. For JVP use @JVP: e.g @JVP: 3.5 (not need for this tile but is a custom vital that needs to be recorded for heart failure visits)

Custom Vitals are a way of creating additional standardized vitals for any important value that needs to searchable/graphed or pulled into flowsheets. To create a custom vital it needs to be consistent so using stamps is helpful and must be prefixed with @ and followed by a colon see above. The name should not have spaces. For more information on this functionality you can review **Best practice: Using categories when entering vitals data** in the PS Help files (Main Toolbar → Help → Show Help → search for Entering vitals data)

Documenting Ejection Fraction

1. Click on the black segment of Ejection Fraction bar
2. Double click on a patient to review their record
3. Review the latest echocardiogram (Ctrl {CMD} +3 and search for echo, or ejection fraction if you have electronic reporting through HRM)
4. Document Ejection Fraction either using the **CDM Congestive Heart Failure 2018** custom form or in a progress note @LVEF: e.g. @LVEF: 45
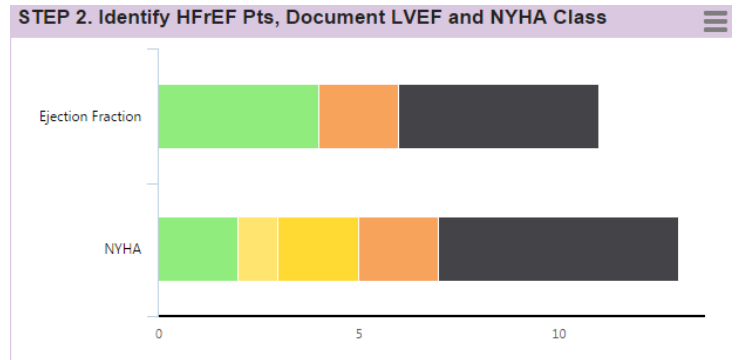
Documenting NYHA Class

5. Click on the black segment of NYHA bar
6. Double click on a patient to review their record
7. Review the symptomatic status of the patient and document their latest NYHA class using the **CDM Congestive Heart Failure 2018** custom form or in a progress note as @NYHAClass: e.g. @NYHAClass: 2

When you document the LVEF you can Document the NYHA Class at the same time as the same patients will be reflected in both lists.

## Preparing for CME component of Medical Management Add custom form to favourites

You may choose to add the **Capture HF CHRC CME Response** custom form to the favourite list on the EMR toolbar in the Records window this allow easy and quick access to the custom form while you are working through the CME component

1. Click on the ⭐icon
2. Choose Add to favourites
3. Select custom form
4. Chose the Capture HF CHRC CME Response and save
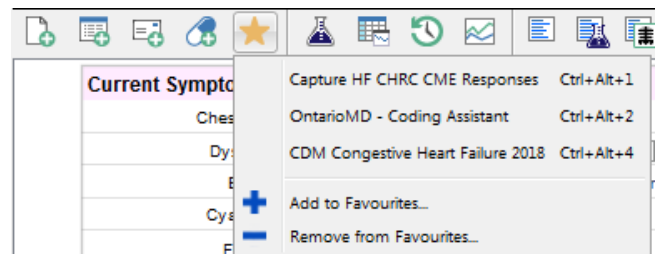
STEP 3: HFrEF (LVEF <=40) Pts: Review Medical Therapy

1. Double click on the black segment for the ACEi or ARB bar, to produce a list of patients that have a treatment gap for that medication but do not have a treatment gap response recorded.

2. From the report, double click on a patient to go to the chart and review their medications as per the CCS HF guidelines.

3. Insert the **Capture HF CHRC CME response** form, and select the appropriate response from the drop-down option of the appropriate drug class you are reviewing.
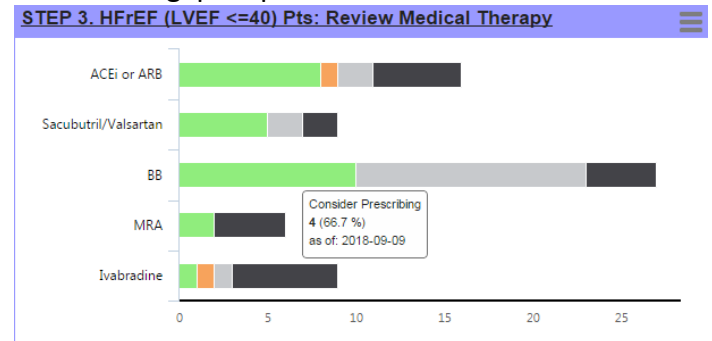
> The patient may fall into multiple black segments as you review each one, use the same form to provide responses for multiple segments.

Capture HF CHRC CME response form

Use this form to capture the responses for identified treatment gaps as per CCS HF guidelines.

This form provides the option of a hover over tooltip of the recommended medications and doses in that class or if you click on the drug class a pop up window with the same information will display. The pop up will remain open until you choose to close it while the tooltip displays for a few seconds.

Hover over view

Click view

The form also provides a flow sheet for pertinent lab and vitals as you review the treatment guidelines for the patient.

	Latest Value	Last Done	l	Aug 8 2018
K	3.5 MMOL/L	Aug 8		3.5 MMOL/L
eGFR	90 ML/MIN/1.73M**2	Aug 8		90 ML/MIN/1.73M**2
Pulse (HR:)....	77	Jul 31		

Resource section at the end of the form contain links to the CCS HF Pocket guide and Medication Initiation and Titration guides.

Share your Metrics FAQ

Who is it being shared with and why is it important for me to share?

- The dashboard statistics are shared with the sponsor of the dashboard, Canadian Heart Research Centre (CHRC).

- By sharing your statistics with CHRC, you are supporting the reflective practice component of the Capture HF program. Please refer to the welcome tile on the CHRC dashboard, to review the program objectives and instructions for participation.

- Sharing enables you to view the aggregated peer average of all participating physicians.

What is shared?

Physician statistics and patient counts visible on the dashboard are shared with the sponsor. Please note that patient information will NOT be shared.

How will my statistics be used?

The use of the statistics is defined by the sponsor organization, who will be utilizing the statistics. For full Sharing Terms review the link to the terms of sharing in the dashboard, the link is accessible from the share window.

By sharing, I consent to the terms of The Canadian Heart Reseach Centre

Start Sharing: From Earliest   From Today

[Back to Dashboard instructions](#)