
Heart Failure Collaborative

Information pack for applicants

Safer Care Victoria (SCV) is excited to offer Victorian hospitals an opportunity to participate in the Heart Failure Collaborative. This statewide collaborative will improve outcomes for patients with heart failure, with the aim of helping people stay well and stay home.

Why a Heart Failure Collaborative?

Cardiovascular disease is a significant burden on the lives of Victorians, with many experiencing multiple hospital admissions and challenges in accessing specialist cardiac care in hospital and community care settings.

We are looking to build on improvement work that has already begun and accelerate implementation of best practice. The Heart Failure Collaborative is an opportunity for Victorian hospitals who are looking to embed evidence-based change ideas that improve the management of, and increase the time spent in the community for, those living with heart failure.

Who is eligible to apply?

All Victorian public and private hospitals who provide adult acute and sub-acute care to Victorians with heart failure are eligible to apply.

The Heart Failure Collaborative is being delivered in parallel with the **Cardiovascular ambassador project**. Hospitals who participate in the Heart Failure Collaborative will be assessed as first priority for the Cardiovascular ambassador project.

[Read more information about the Cardiovascular ambassador project](#)

Both initiatives are open for expressions of interest from hospitals until **5pm Wednesday 25 August 2021**.

What will this collaborative accomplish?

By December 2022, we will enable more people with heart failure to stay well and stay home by reducing unplanned readmissions* to hospital by 20 per cent.

*Includes when a person with heart failure is readmitted to hospital within either 30 or 90 days of an initial admission as defined by the Victorian key performance measures.

Collaborative approach

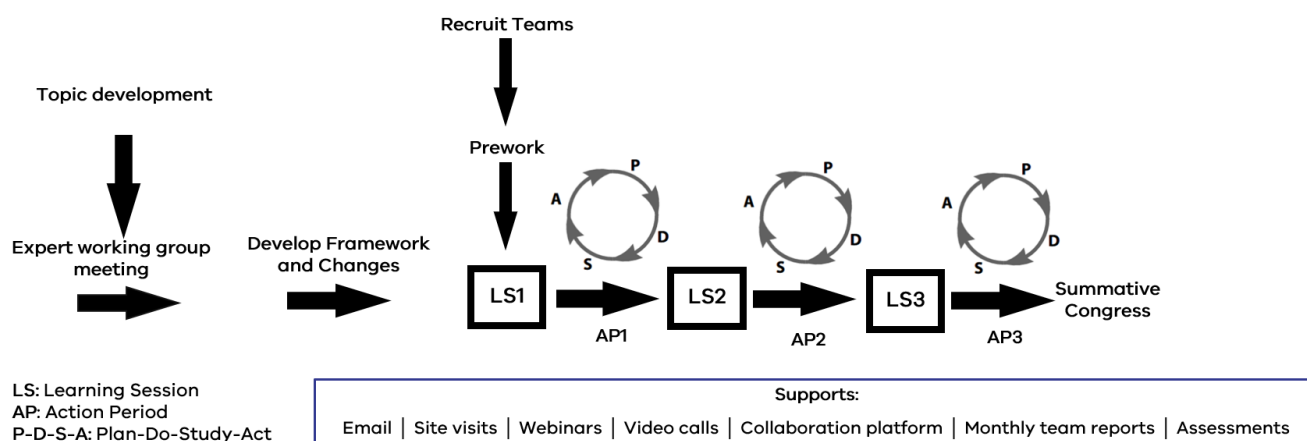
Known as a ‘breakthrough collaborative’, our improvement method relies on the spread and adaptation of existing knowledge (called a change package) to multiple settings to accomplish a common aim. It involves hospital teams working intensively together, with the support of SCV and the Institute of Healthcare Improvement (IHI), to achieve significant improvements.

Over 12 to 18 months, teams participate in three in-person learning sessions (or equivalent virtual sessions) and three hospital-based action periods. Teams maintain continual contact with each other and the SCV and IHI team members through web calls, online discussions, email, and monthly progress reports.

During learning sessions, hospital teams meet to share experiences and learn about quality improvement methodology and the proposed changes to clinical care. During action periods, teams work together to embed and test changes using the Model for Improvement. Throughout, teams measure the impact of their efforts and use data to drive improvement. Members will learn and apply quality improvement tools, methods, and resources to improve daily work, sustain change, and spread. These learned skills are applicable to any project.

The Heart Failure Collaborative will commence in September 2021 and run through to November 2022.

Figure 1: The breakthrough series collaborative model



What does participation in a collaborative involve?

This collaborative is designed for hospital teams that are committed and ready to accelerate their work on the management of patients with heart failure. Participation is open to all public and private hospitals and is free. However, a commitment to adequately resourcing teams to do the work is expected.

Each participating hospital will have:

- **An executive sponsor:** Engages with the work and attends a session designed to support them (learning session two in March 2022).
- **A day-to-day team leader:** Coordinates the team's testing, measuring, and reporting.
- **A multidisciplinary core team** (including the team leader) of three to five members; Includes clinical (medical, nursing pharmacy, allied health), consumer and member with quality improvement experience. Responsible for identifying champions and driving change on the ground. This group includes a member responsible for data entry.
- **A wider network of six to 12 members** (e.g. clinicians, managers): Influencers in the organisation who can drive commitment and attention to the work and support frontline staff to test changes. Inclusion of psychology professionals and GP liaison officers is also encouraged.
- Time dedicated to do the work (including online meetings and site visits): In our experience, optimal results are achieved when teams can devote at least 30 hours per week to the project (shared between team members).
- Support for the core team to attend all learning sessions.
- A commitment to implement all elements of the change package.

The advantage to this approach is that improvements are designed and implemented by local, frontline teams involved in the day-to-day work to achieve sustainability.

How does an executive sponsor support their team?

Active partnership between organisation leadership and the collaborative team is essential to achieve results. Teams succeed when a senior leader sponsors the work. The sponsor is responsible and accountable to the organisation for performance and results of improvement work. They are not a day to day member of the team but support the team to achieve their aim.

Successful executive sponsors:

- create an authorising environment for team members to attend all relevant learning session and action period activities
- support their teams to implement changes by making themselves available to them on a regular basis, unblocking barriers and championing the work
- participate in collaborative content designed specifically for executive sponsors and collaborate with other executive sponsors to create change at a system level.

Activity milestones

Activity	Description
<p>Team recruitment process</p> <p>July/August 2021</p>	<p>An information session featuring SCV and IHI representatives will be held at 11am Wednesday 28 July 2021 to answer any questions you may have about the collaborative.</p> <p>Expressions of interest close 5pm Wednesday 25 August 2021.</p> <p>Teams who have submitted an EOI will be notified of the outcome by Wednesday 1 September 2021.</p>
<p>Kickstart webinar and pre-work</p> <p>September and October 2021</p>	<p>A kickstart webinar will provide participating teams with the opportunity to meet each other, hear more about the collaborative and support teams to prepare for the pre-work before learning session 1.</p> <p>Pre-work will include collecting baseline data for measures and confirming their local team structures.</p>
<p>Development of a change package and measurement strategy</p> <p>Underway</p>	<p>A change package has been developed, informed by relevant research and best practice, and tested with our expert working group in June 2021.</p> <p>A measurement strategy is being developed and will be used to track improvement and align with collaborative goals. Measures include outcome, process, balancing and structural measures. Each measure is clearly defined for data collection and reporting with a clear data collection strategy articulated (source, frequency etc.).</p>
<p>Learning sessions</p> <ol style="list-style-type: none"> 1. End October 2021 2. March 2022 3. July 2022 	<p>Learning sessions are face-to-face or virtual meetings where teams come together to exchange ideas. At the first learning session, SCV, IHI and faculty present a vision for ideal care of patient with heart failure and specific changes, called a change package, that when applied locally will significantly improve the system's performance. Teams learn from an Improvement Advisor (IA) the Model for Improvement that enables teams to test these change ideas locally, and then reflect, learn, and refine these tests.</p> <p>At the second and third learning sessions, team members learn even more from one another as they report on successes, barriers, and lessons learned in general sessions, workshops, storyboard presentations, and informal dialogue and exchange. Formal academic knowledge is bolstered by the practical voices of peers who can say, 'I had the same problem; let me tell you how I solved it.'</p>
<p>Action periods</p> <p>Between Learning Sessions</p>	<p>During action periods, teams test and implement changes in their local settings and collect data to measure the impact of the changes. They submit monthly progress reports for the entire collaborative to review, and are supported by web conference calls and site visits that enable them to share information and learn from each other. The aim is to build collaboration and support teams as they try out new ideas, even at a distance.</p>
<p>Summative congress</p> <p>November 2022</p>	<p>Once the collaborative is complete, the work is documented, and teams present their results and lessons learned to each other at a half-day event called a summative congress.</p>

How to apply

Applications close **5pm Wednesday 25 August 2021**.

We recommend the application is completed by the project lead with the executive sponsor.

Once you have read this information pack, complete the [online expression of interest form](#).

More information

An **information session** will be held at **11am Wednesday 28 July**.

[Register to attend](#)

For any other enquiries, please contact:

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