Multidisciplinary, person-centred care

Outcomes for people with HF are worse than breast, prostate, and bowel cancer.¹

Of patients hospitalised with HF:

1 in 4 will be readmitted to hospital within one month²,³
1 in 3 will die within 1 year⁴

Over 50% of unplanned hospital admissions for HF can be prevented through better follow-up and transitions of care⁵,⁶,⁷,⁸

1 in 3 will be readmitted to hospital within one month²,³

Who should be involved in the multidisciplinary team?

- Internists
- GPs
- Cardiologists
- Psychologists
- Physiotherapists
- Nurses
- Dieticians
- Social workers
- Pharmacists
- Palliative care specialists
- Pharmacists
- Palliative care specialists

Multidisciplinary care for patients hospitalised with HF works²,³,¹⁰,¹¹,¹²,¹³

We are just not applying it as consistently as we should

Cost-effective
Reduces length of stay
Leads to lower rates of death

Self-management is a critical part of good HF care

It can enhance quality of life and improve adherence to treatment¹⁴,¹⁵

Self-management can enhance quality of life and improve adherence to treatment¹⁴,¹⁵

References:
2. Cowie et al. ESC HFA 2014.