

Impact of a Community-Based Heart Failure Unit on Hospitalizations

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Background:

Heart failure (HF) is an enormous financial burden on any health care system, mainly due to hospitalization. Community-based care of patients with significant HF improves symptoms, reduces hospitalizations and emergency department (ED) visits. A new community-based heart failure unit (HFU) was inaugurated by the southern region of Clalit Health Services to improve management of patients with significant HF.

Aims:

To investigate whether a new community-based HFU impacts on hospitalizations and reduces costs, in keeping with results previously described.

Methods:

Prospective follow-up of patients referred to the HFU from 1.1.2012 to 31.10.2012. Following assessment by a HF specialist nurse and physician, investigations & treatment were instigated. Data was collected on demographics, hospitalizations and ED visits. Amongst patients who were seen at least 3 times up to July, repeat hospitalizations and ED visits during the following 3 months were recorded and compared to the same period during the previous year.

Results:

During the study period, 206 patients altogether were seen, aged 27-90. 129 (63%) were men. Fifty-four patients were seen at least 3 times from January to July. Over the next 3 months, they were hospitalized for a total of 233 days, compared to 346 days during the previous year (33% decrease, $p = 0.002$). There were 20 ED visits, compared to 34 during the previous year (41% decrease, $p = \text{NS}$). Based on calculations of cost of a day's hospitalization, there was a saving of 146,900 shekels amongst the patients during this period (not taking into account the cost of running the unit). A saving of 8,400 shekels was made by the reduction in ED visits.

Conclusions:

As in other settings, a community-based heart failure service can significantly reduce hospitalization and ED visits, with a marked decrease in health service costs.