**Service Priorities and Programmes**

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# Effects of a transitional care model on end-stage heart failure patients: a randomized controlled trial

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## Introduction

End-stage Heart Failure (HF) patients tend to have frequent emergency room visits and repeated hospital admissions. These patients also suffer from a number of health problems that adversely affect their quality of life. Many guidelines, local and world-wide, have advocated a palliative approach of care for those HF patients who are at end stage. In mid-2012, a cross-hospital project was launched to serve this group of patients. The palliative care unit from 3 hospitals including Grantham Hospital, Haven of Hope Hospital, and United Christian Hospital were collaborated with The Hong Kong Polytechnic University for the project.

## Objectives

(1) to compare the effects of customary hospital-based care and interventional Home-based Palliative HF Program (HPHP) (2) to minimize health care utilization (3) to improve or maintain their quality of life and support their caregivers

## Methodology

A randomized controlled trail would be employed. Subjects are 1) hospitalized patients suffered from end-stage heart failure who are new to palliative care service; 2) they are planned to be discharged home; 3) they agreed to accept the pre-discharge assessment and post-discharge follow up by the palliative home care nurses who act as the nurse case managers (NCMs) in the project. The interventional Home-based Palliative HF model is built on two main conceptual guides which are the recommended principles for palliative HF care and transitional care model. Outcome measures are: hospital readmission rate and cost data, quality of life, caregiver burden, and satisfaction with care.

## Result

This reports the preparatory phase of the project which for the upcoming main study. Over the period from August 2012 to January 2013, 10 evidence-based protocols were developed with expert reviews in guiding the interventions for palliative heart

failure care. The protocols comprise various common physical and psychological symptoms management; and referral system in a standardized way. Besides, a 5 session training program was completed for a total of 6 NCMs, two from each hospital. In addition, 3 cases were chosen for pilot aims. The preliminary activities described were to ensure the consistency in practice and quality assurance prior to the main study. It is hoped that this project will fill the knowledge gap as well as inform practitioners which service model works best for end-stage HF patients.