



## Executive summary of Collaborative Working Outputs

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<b>Project title</b>	Establishing Quality Improvement through Partnership in Heart Failure
<b>Duration</b>	February 2025 – February 2026
<b>Project partners</b>	AstraZeneca UK Ltd and NHS South Tees Foundation Trust
<b>What was the issue to be addressed?</b>	<p><b>Aim:</b> Optimise the management of HF in secondary care community outreach hubs for patients who are historically eligible for ESC 4 pillars of care but have not received it.</p> <p><b>Objective:</b> Working with the Cardiology Directorate of NHS South Tees NHS Foundation Trust, the objective of this project is to provide additional clinical tools, capacity and education to enable the Trust to identify and optimise their sub optimally treated heart failure patients.</p> <p>It will offer identified patients' timely access to a clinical review through Trust-facilitated additional outreach clinics. The clinics will adhere to ESC 4 Pillars guidance and deliver any required interventions and medicine optimisation. The Trust will embed essential therapy area-related learnings throughout the project and implement ESC 4 Pillars guidance and protocols to help sustain these patients' enhanced standard of care.</p> <p>Evidence of improvement in the standard of care will be documented to support the Trust in understanding the scope of their business information unit (BIU) to support patient care more routinely post-completion and outline how BIU can support retrospective case finding of this nature going forward.</p>
<b>What were the results?</b>	<p>745 Patients were screened from the National Heart failure Data base from 2008 – 2023 that were indicated to be on 4 pillars of care including SGLT2i and at the time of discharge from following an acute admission for heart failure with ejection fraction &lt; 50% were not.</p> <p>These 745 patients were then cross referenced by NHS South Tees Foundation Trust and 252 patients were removed from the cohort, for the following reasons:</p>

- 51 patients were deceased
- 171 patients had moved from area
- 30 patients care records duplicated

Further validation of care records was conducted for the remaining 493 patients to remove patients that no longer fell within scope for this project.

The remaining population were sent letters inviting them to attend a cardiology nurse clinic where suitability for GDMT was assessed and offered where indicated as appropriate.