Clinical Excellence Division

Developing a cardiac rehabilitation-specific The state **Queensland Cardiac Outcomes Registry** H module Jane Faulkner and Samara Phillips 308 8th August 2017



Background





QCOR

» The Statewide Cardiac Clinical Network (SCCN) has established an exciting Statewide clinical registry and quality program. The Queensland Cardiac Outcomes Registry (QCOR) is a clinician led and managed program used across public health facilities in Queensland.

- QCOR commenced enrolment in late 2012 with stepwise installments across the state. There are a growing number of service lines including
- Cardiac catheter lab 7out of 8 sites
- Heart Failure all 37 sites
- Cardiac surgery all 4 sites
- Thoracic surgery all 4 sites
- Echocardiography North QLD 3 sites
- Electrophysiology all 8 sites
- Cardiac Rehab all sites (55 OPCR programs)
- TAVR (ETA 2017/18)

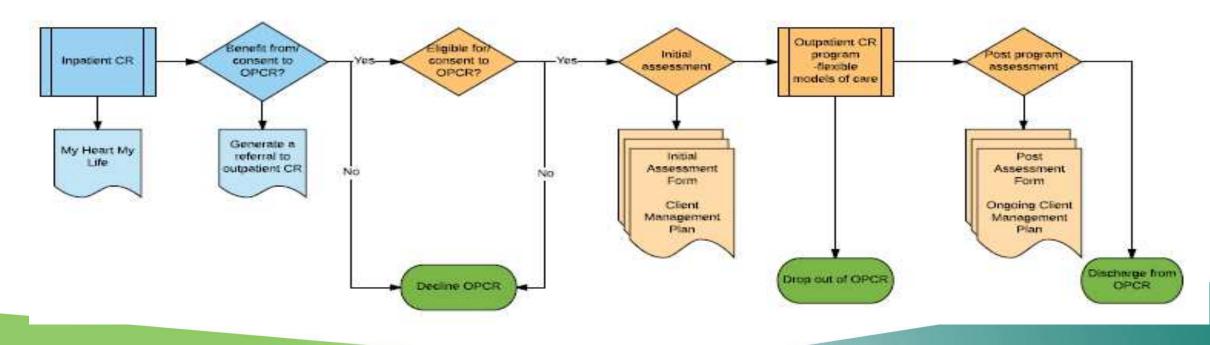
Limited CR data or information



CR Module

CR patient journey





Heartbeats

Cardiac Rehabilitation

Q

My worklist

Showing new and incomplete cardiac rehabilitation referrals

Referred to CR Program	Q~ Go				Go	Actions 🗡	s× ٤						
Cairns Outpatient CR Prog 🗠	#	Patient	Date of birth	Gender		Referred by Facility	Referral date ↑=	Referral	Pre assessment	Post assessment	Complete		
7		Bear, Yogi	08-May-1947	Male		Townsville	09-Jun-2016	10-May-2017	03-Jul-2017	04-Jul-2017 ^[1]			
Due within 7 days or overdue		Simpson, Lisa	06-Feb-1958	Female		Princess Alexandra	29-Jun-2016	09-May-2017	09-Aug-2016 ¹¹⁾	Not assessed	Complete		
9 Due within 14 days		Simpson, Marge	21-May-1945	Female		Cairns	08-Jul-2016	Герг 09-Мау-2017	11-Aug-2016				
6		Simpson, Bart	20-Jun-1953	Male		Townsville	14-Jul-2016	09-May-2017	26-Jul-2016	20-Dec-2016	Complete		
New 7		Simpson, Homer	31-Oct-1959	Male		Townsville	18-Jul-2016	09-May-2017	27-Jul-2016	15-Dec-2016 Por Por	Complete		
To Assess		Fry, Phillip	17-Apr-1940	Male		Townsville	20-Jul-2016	₽ 18-May-2017	Not assessed		Complete		

Create referral

WHeartbeats

LIAT / Test Environment	Referral Wizard - Diagnosis/procedure details						
M UAT / Test Environment This is the Test environment for Heartbeats. Ple	Diagnosis						
Accessible function	 Diagnosis STEMI NSTEMI Stable angina Unstable angina CHF Arrhythmia Valvular disease Other 						
Functionality available to all Queensl	Most recent PCI Angiogram CABG procedure Valve replacement/repair PPM/CRT-P/CRT-D/ICD Other						
Cardiac Rehabilitation Referrals	Procedure date						
Cardiac Rehabilitation Referral Referral form to refer a client to a cardia rehabilitation program. Cardiac rehabilitation can help in the recovery after heart attack or cardiac surgery. A PDF version of the form can be printed on completion.	Diagnosis / episode details						
	Past medical history Type II Diabetes Asthma						
	Drug allergies Yes NKDA						
Modify existing referral Modify or delete a referral you created prior to dispatch.	Cancel	ext >					
Dispatch occurs at 12:00 and 17:00 dail							

⑦ Help 및 phillsam ▼

Referral

Form

Queensland Government			Family name:	ONT	
Statewide Cardiac	Rehabilitatio	on	Given teme(s)	Phills	
Referral F	orm		Address:	15 Social Way Ca	
Fadilty: Princess Atexandra H	copital		Dets of birth:	82-20-1950	Sec: Female
	ATTACH DISCH	ARGE SUMM	ARY FOR SITES	OUTSIDE QUEEN	SLAND HEALTH
Client details					
indigenous status:	Not Stated/Unik	nown			
South Sea Islander status:					
Interpreter required:	Yes	Language:			
Referral status:	Inpatient (GH)	10.000.000	Contraction of the second	nt): 06-JUI-2017	
Medicare registered: Contact number:	Yes	Medicare n	tumber:		
Consented to referral:	Yes				
GP Detalls:					
Name:	Brown, Jenny				
Clinic	Colourful GP C	linic			
Diagnosis/procedure detai	ile.				
Diagnosis:	Unstable angine	a, Arrhythmia	5		
Most recent procedure:	Angiogram				
Date of procedure:					
Diagnosisiepisode details:					
Past medical history:	Type II Diabete Asthma	5			
Drug allergies					
Drug allergies:	NKDA				
Angina/ohest discomfort/0	oca				
Angina / cardiac symptoms:	Yes				
CC8 score:					
Chest pain (CP) action plan	Yes				
Review CP action plan:	No				
Heart failure					
Heart failure:	No				
Ejection fraction tested:	No				
issues or concerns					
Comments:	Going Oversea	is in 3 month	5		
Referrer detallic					
Name:	Samara Philips	5			
Referral date:	05-Jul-2017				
Referred to CR outpatient pr	rogram: Calms C	Dutpatient CF	R Program		

Horad III Constants

STATEWIDE CARDIAC REHABILITATION REFERRAL FORM

Home	ŵ	> \ 20170912: Smith, Phillis \ Pre	Pre assessment								Create
All Referrals	Sh	Now All Assessment details	Patient history	Medications	Past medical history	Risk factors	Psychological	Physical	Social circumstances	Educatio	n resource
Smith, Phillis	~	Referral from facility	Pr	incess Alexandr	a Hospital						
Client identification		Referral date	05	5 Jul 2017							
Patient history		Origin of referral	In	patient (QH)							
Pre assessment		Discharge date	06	5 Jul 2017							
		GP name	Br	own, Jenny							
		GP clinic	Co	olourful GP Clin	ic						
		Most recent procedure	Ar	ngiogram							
		Date									
		Diagnosis	Ur	nstable angina a	and Arrhythmia						
		Past medical history	Ту	pe II Diabetes A	Asthma						
		Drug allergies	N	KDA							

What it will produce

- » Referral form
- » Individual client pre-assessment record
- » Individual client management plan
- » Individual client post-assessment record
- » Individual ongoing client management plan

When?



THANKYOU

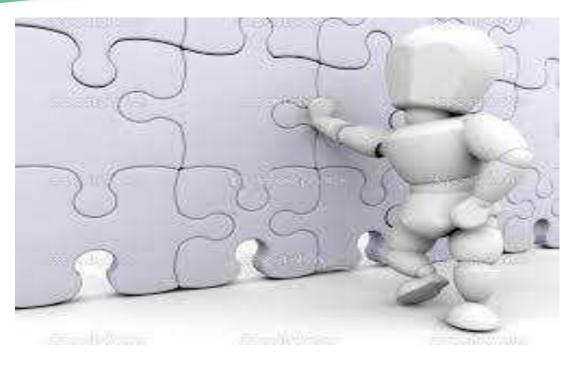
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