



Call to action

Heart failure (HF) is a forgotten condition and few countries feature it in their cardiovascular health strategies. What's more, it is often considered a lost cause – when in fact appropriate diagnosis and care can make a huge difference to improving patient outcomes, avoiding unnecessary suffering by patients and decreasing costs for society.

With the number of people living with HF increasing rapidly, forward-thinking strategies are urgently needed to reduce the burden HF poses on our societies and ensure that every person with HF is offered the best-quality diagnosis and care possible.

We call upon governments across Europe to commit to improving the lives of people living with HF by focusing on the following priority actions:

Make HF a national priority



National HF strategies with measurable goals

Every country should feature HF as a major condition within their cardiovascular disease and chronic disease strategies.



Public awareness campaigns

Ministries of health should work with public health authorities, professional societies and patient organisations to help people recognise the signs of HF and encourage them to seek appropriate care.



Data-driven resource planning

Ministries of health should invest in reliable data collection to guide improvements that will make the biggest difference to patient outcomes and make the best use of available resources.

Ensure timely diagnosis and prevention in those at risk



Professional training

All healthcare professionals who are in contact with people at high risk of HF should receive specific training in HF diagnosis and management.



Availability and reimbursement of diagnostics

National healthcare systems should provide appropriate reimbursement for guideline-recommended diagnostics and ensure their widespread availability in hospital and relevant community settings.

Deliver multi-disciplinary, person-centred care

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A standardised HF pathway that reflects clinical guidelines

All patients with HF, regardless of where they are treated, should be offered high quality care consistent with ESC guidelines (or national equivalents) delivered by a specialist-led multidisciplinary team.

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A dedicated contact for follow up care

Patients hospitalised for HF should leave the hospital with:

- A clear discharge plan which reflects individual patient needs and circumstances
- A dedicated contact for follow up care
- An appointment to see an HF specialist within 2 weeks of discharge.

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A person-centred care plan

All patients with HF should be offered a personalised long term care plan to help them self-manage their condition.

Invest in tools and resources in primary care

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Workforce planning in primary care

Governments should evaluate existing professional capacity in primary care to ensure dedicated professionals are available to provide comprehensive care to people living with HF.

All nurses should receive training in HF and, where appropriate, HF specialist nurses should be officially recognised as a profession.

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Investment in innovative tools that promote self-care

Governments should invest in the implementation of tools which may enable patient self-care and reduce avoidable hospital admissions (e.g. patient monitoring devices).



The Heart
Failure Policy
Network

Please sign here

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Title..... Full name

Are you signing as an individual or on behalf of an organisation ? (PLEASE TICK)

Organisation and role (if applicable)

Address.....

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Email address

Please return to a HF Policy Network member, or info@hpolycynetwork.eu or HF Policy Network, Health Policy Partnership, 68 - 69 St. Martin's Lane, London, WC2N 4JS