



## Evaluation and Self-Assessment

### Help Shape the Future of Heart Failure Care in Canada

Workshop, October 24<sup>th</sup>, 2006  
Canadian Cardiovascular Congress 2006 – Vancouver  
**Global Audience**

1. I have attended a previous CCS workshop on Heart Failure this year.

Yes	<b>29%</b>
No	<b>71%</b>

2. Please rate the following learning objective statements

Please use the following scale

Not Familiar	Somewhat Familiar	Familiar	Familiar Enough to Explain to Others
1	2	3	4

**A) Learning Objective:** To review optimal management strategies for patients with co-morbidities and heart failure

Pre- Program Familiarity				Post-Program Familiarity				Relevance to My Practice			
1	2	3	4	1	2	3	4	1	2	3	4
0%	22%	<b>52%</b>	26%	0%	0%	37%	<b>63%</b>	0%	0%	11%	<b>89%</b>

**B) Learning Objective:** To determine best practice for surgical interventions

Pre- Program Familiarity				Post-Program Familiarity				Relevance to My Practice			
1	2	3	4	1	2	3	4	1	2	3	4
0%	39%	<b>52%</b>	9%	0%	5%	53%	<b>42%</b>	0%	5%	37%	<b>58%</b>

**C) Learning Objective:** To increase knowledge and control for end-of-life care in heart failure resulting in improved decision-making, autonomy and dignity

Pre- Program Familiarity				Post-Program Familiarity				Relevance to My Practice			
1	2	3	4	1	2	3	4	1	2	3	4
0%	36%	56%	18 %	0%	0%	28%	72%	0%	0%	17%	83%

**D) Learning Objective:** To appreciate (evaluate) multidisciplinary involvement in heart failure patient care related to specific case presentations

Pre- Program Familiarity				Post-Program Familiarity				Relevance to My Practice			
1	2	3	4	1	2	3	4	1	2	3	4
0%	15%	65%	20%	0%	6%	31%	63%	0%	0%	31%	69%

### 3. Primary specialty

Cardiology	27%
Internal medicine	23%
Pharmacology	0%
Nursing	43%
Other - Resident - Leadership and management (cardiac rehab and HF)	7%

### 4. Years of practice in current specialty

<5	25%
6-10	12%
11-20	37%
20-30	14%
>30	12%

**5. With cardiology, my practice environment is primarily**

Community cardiology	<b>44%</b>
Academic cardiology	<b>18%</b>
Subspecialty cardiology	<b>41%</b>
Intervention	<b>8%</b>
Echocardiography/imaging	<b>33%</b>
Electrophysiology	<b>0%</b>
CHF/transplant	<b>17%</b>
Other <ul style="list-style-type: none"> <li>- <i>Cardiac rehab</i></li> <li>- <i>Pacemaker/ICD</i></li> <li>- <i>HI clinic</i></li> </ul>	<b>42%</b>

**6. As a non MD my principal role with heart failure patients is to:**

Educate	<b>44%</b>
Reduce hospital LOS	<b>6%</b>
Phone	<b>11%</b>
Reduce hospital re-admin.	<b>17%</b>
Other : <ul style="list-style-type: none"> <li>- <i>Develop strategies/policies to improve HF care</i></li> <li>- <i>Quality of 1 year improve</i></li> </ul>	<b>22%</b>

**7. How many heart failure patients do you see per week:**

0	<b>4%</b>
1–2	<b>13%</b>
3–4	<b>22%</b>
5–10	<b>22%</b>
1–20	<b>22%</b>
> 20	<b>17%</b>

**8. I have read the CCS HF 2006 guidelines:**

Yes	<b>76%</b>
No	<b>24%</b>

**9. And I refer to them**

Daily	<b>12%</b>
Weekly	<b>18%</b>
Monthly	<b>41%</b>
Other <ul style="list-style-type: none"> <li>- <i>Variable</i></li> <li>- <i>As needed for policy development</i></li> <li>- <i>Occasionally</i></li> <li>- <i>Periodically</i></li> </ul>	<b>29%</b>

**10. I like the current format of the CCS HF guidelines with clear nursing recommendations followed by a brief overview of the evidence to support the recommendations:**

Yes	<b>100%</b>
No	<b>0%</b>
Perhaps	<b>0%</b>

**11. To treat your patients, what other sources do you refer to?**

Literature	<b>36%</b>
- <i>Published</i>	<b>86%</b>
- <i>Unpublished</i>	<b>14%</b>
Internet	<b>31%</b>
- <i>Medical</i>	<b>95%</b>
- <i>Non-medical</i>	<b>5%</b>
Continuing Medical Education	<b>27%</b>
- <i>Industry</i>	<b>52%</b>
- <i>Society</i>	<b>40%</b>
- <i>Medical schools</i>	<b>8%</b>
Other sources	<b>6%</b>
- <i>ACC CME, e.g. ACCEL</i>	
- <i>Electrophotographs Heart Society</i>	
- <i>Academic rounds in clinic setting</i>	
- <i>Weekly rounds</i>	

**12. Heart failure guidelines provide me with**

Primary document for the management of disease	<b>30.5%</b>
Specific decision aid in patient management	<b>25%</b>
Secondary document that allows me ready access to the key primary documents	<b>22.25%</b>
Tools to compare my practice with those of my peers	<b>22.25%</b>
Other	<b>0%</b>

**13. In my practice the area(s) of greatest difficulty in the treatment of heart failure is/are**

Treating multi-system disease (which disease) - <i>CKD</i>	<b>39%</b>
Pulmonary - <i>Near end stage renal failure (pre-dialysis), chronic symptomatic hypotension</i>	
Treating with polypharmacy (comment) - <i>Especially elderly</i> - <i>Needing to expand Rx</i>	<b>22%</b>
Resource limitation (which ones?) - <i>BNP</i>	<b>19%</b>
Access to expensive technologies (Biv/AICD)	<b>11%</b>
Other - <i>N/A to me personally but I am aware of all the challenges above</i> - <i>Preventing contrast-induced nephropathy with CF</i>	<b>8%</b>

**14. In future iterations of the CCS guidelines, the issues in heart failure I would like to see addressed are**

- Vasopressor inhibitors
- Devices
- Emphasize the key features on HL and review the exams technique; prevent DVT and AE
- End-of-life – motivated suggestions recommendations
- F/U after inhibitory treatment
- Timelines (when) to (illegible) Na+
- Target drug doses
- Chronic disease management/behaviour change
- ICD psychosocial considerations
- Promptness of discussion on end-of-life
- Reversibility of decisions to put/stop VAD, ICO....with patients early on
- Important (more emphasis) on multidisc and communication of
- Therapeutic plan

**15. How best can the CCS obtain your feedback on guidelines as they are developed?**

Broader stakeholder input	<b>9.1%</b>
Release of “guidelines in progress”	<b>36.4%</b>
Online written feedback	<b>54.5%</b>
Other	<b>0%</b>

**16. Please rate the following aspects of the program**

	Poor	Satisfactory	Very Good	Excellent
	1	2	3	4
Program/Presenter: Over all Clarity	0%	5.3%	44.2%	<b>50.5%</b>
Program/Presenter: Over all Relevance to your practice	0%	5.4%	43.2%	<b>51.4%</b>
Program/Presenter: Over all Educational Value Perceived	1.6%	6.5%	<b>55.1%</b>	36.8%

**17. Please rate the following aspects of the program**

	Poor	Satisfactory	Very Good	Excellent
	1	2	3	4
<i>Overall, I would rate the workshop</i>	0%	15%	<b>67%</b>	18%
<i>I found the facilities to be</i>	0%	19%	<b>58%</b>	23%
<i>The audiovisual presentations were</i>	0%	19%	<b>58%</b>	23%
<i>Conduciveness of the format to learning was</i>	0%	15%	<b>50%</b>	35%

**18. What topics would you like to see covered in future events?**

- CHF diagnosis, treatment and use of other resources in elderly
- Team interaction – RN, pharmacist, Kinesiologist, MD – how to bring about change
- Drugs – options – forget cases