

NHFA AT A GLANCE

Data from the three-year period April 2019 to March 2020

Access to cardiology wards and specialist HF care is associated with better survival for all and improved treatment at discharge for those with HFrEF.










69,556
total admissions

All patients

Admitted to
cardiology
ward

Seen by a
specialist

	All patients	Admitted to cardiology ward	Seen by a specialist
 Patients diagnosed with echocardiography	86%	94%	90%
 Patients receiving specialist care	82%	99%	100%
 Patients with HFrEF discharged on all three disease-modifying drugs	49%	56%	51%
 Patients who received a cardiology follow up	46%	61%	51%
 Patients who received a Heart Failure nurse follow up	55%	67%	63%
 Patients referred to cardiac rehabilitation	15%	22%	18%
 Mortality in hospital	9%	6%	8%

Place of care is a key quality indicator for HF as care on a cardiology ward is associated with the best survival, both during the admission and after discharge, better treatment for HFrEF, and the best access to specialist care