

Cardiology

Hospital at Home - Heart Failure Pathway

What is heart failure?

Heart failure means that the heart is unable to pump blood around the body properly. It usually occurs because the heart has become too weak or stiff.

The main signs and symptoms of heart failure are:

- breathlessness
- tiredness
- reduction of exercise capacity
- fluid retention

The most common causes of heart failure include:

- a previous heart attack
- high blood pressure
- cardiomyopathy – a disease of the heart muscle. This can be inherited, or caused by infection or pregnancy, for example.

Heart failure can also be caused by:

- heart valve disease
- abnormal heart rhythms
- congenital heart conditions



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- endocarditis (infection of the heart)
- excessive alcohol consumption
- anaemia
- thyroid gland disease
- some cancer treatments

What is Hospital at Home – Heart Failure pathway?

Hospital at Home is a wraparound service. This means it provides medical support within your home environment rather than in the hospital when you become unwell. It can also enable earlier discharge from the hospital to your home. This enables you to remain at home for your treatment if this is your preferred place of care. The heart failure team will decide if this is safe for you.

What should I expect?

You will be monitored remotely on a daily basis through the Docobo telemonitoring system. You will be taught by a member of the heart failure hospital at home team on how to use this before you are admitted to the virtual ward. You will also be provided with an information leaflet explaining the device.

We will ask you to tell us how you feel by answering some short questions and upload your observations, which include blood pressure, heart rate, weight, temperature, and oxygen level measurements, daily by 9am each day.

Whilst on the hospital at home heart failure pathway, you will be visited daily by the UHCW hospital at home team who will administer intravenous diuretic therapy. The community heart failure specialist nurse will see you in person at least once.

What will the treatment involve?

Very likely you will have already be prescribed Furosemide or Bumetanide as a tablet. These are medications are “diuretics”, taken to reduce the fluid build-up in your body. Sometimes the tablets do not work as well as they

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should, so your treatment will be change to furosemide by injection (intravenously) once or twice a day, because injections are much stronger diuretics than tablets.

A doctor or nurse will insert the cannula, which is a small hollow plastic tube inserted into a vein, either at home or prior to leaving the hospital. This will be secured with a dressing. You may have a bath or shower but please ensure you keep your cannula clean and dry. Don't immerse the cannula under water.

Cannulas sometimes get accidentally dislodged or fall out, both of which may cause some bleeding. Don't worry if this happens, just place a tissue or dressing on to the area and apply pressure until the bleeding stops. Bleeding usually stops within a few minutes (unless you are taking blood-thinning medications).

If the bleeding continues, raise your arm, and continue to press gently on the area. If you are unable to stop the bleeding, call the nurses on the number on this leaflet or 111. If you have any pain or redness around the cannula, please let the nurses know.

Are there risks if I receive treatment at home?

Any new drug may cause an allergic reaction, but this is rare. The nurse will monitor you during and after the medication is given, and you will be given advice about what to do if you experience any reactions. You may experience some side effects, including dizziness. This is usually due to a drop of your blood pressure and must be reported to your nurse. Diuretics can sometimes affect your kidney function. You will have regular blood tests at home to monitor your kidney function closely.

What equipment will I be given?

You will be given

- a blood pressure machine
- pulse oximeter to measure your oxygen saturations,
- thermometer

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- an electronic tablet device. This should be used to answer the short questions asking about how you are feeling. If you are unable to work the Docobo system, we will provide paper documents.

You will have your hospital notes and any medical equipment needed supplied in a plastic box for storage.

How long will I stay on Hospital at Home – Heart Failure pathway for?

Typically, we expect you to be on the virtual ward for up to 10 days. However, this depends on your recovery. How long you stay on the ward is judged individually for each patient.

What happens if I feel worse?

On Monday- Friday your observations will be monitored by a member of the heart failure virtual ward team. If these indicate a deterioration, we will be sent an alert. We will then contact you to review your symptoms and give clinical advice if required.

If you are concerned, please call us during our service hours on 0300 3032444 for the Coventry community heart failure team.

For the Rugby heart failure team, call 01788 663944.

We are available Monday-Friday 9:00am - 4:00pm

If out of hours call 111, or in case of an emergency call 999.

What happens once I am discharged from the virtual ward?

We will inform your GP and we will call you to arrange a pickup time for your equipment. You will automatically be followed up 2 weeks after discharged from hospital at home by the community heart failure team.

What do I do if my equipment doesn't work or is broken?

Please call the heart failure team or the number on the Docobo leaflet provided and inform the heart failure team.

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Personal parameters

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| Oxygen levels | |
| Respiratory rate | |
| Blood pressure | |
| Temperature | |

If your parameters fall outside of the agreed range, please contact the team in heart failure team within working hours or 111/999 out of hours.

Make sure you are not wearing nail polish, as this will affect your oxygen saturation level.

The Trust has access to interpreting and translation services. If you need this information in another language or format, please contact 0300 303 2444 and we will do our best to meet your needs.

The Trust operates a smoke free policy.

Document History

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