

The **Evidence2Practice Ontario (E2P)** heart failure EMR tool supports clinicians in providing the optimal standard of care for patients with heart failure by bringing the most up-to-date evidence to the point of care.

Heart failure is a chronic condition with a high risk of death. Once diagnosed with heart failure, 50% of people will die within five years, and over 90% within 10 years¹. Yet, evidence-based best practice is not being delivered to patients consistently across Ontario¹. Variations in care for patients with heart failure must be reduced to promote effective disease management.

E2P's EMR-integrated point-of-care tools provide clinicians with access to the right evidence at the right time, allowing them to focus on caring for their patients while simultaneously ensuring their clinical practice is in alignment with best practice. E2P reduces the administrative burden associated with finding and updating this information on their own.

Impact in Practice

Dr. R. Dacre, a primary care physician, shared his insights on the effectiveness and applicability of the E2P heart failure tool:



Improves time and resource efficiency, enabling clinicians to see more patients



Helps identify patients who may benefit from heart failure monitoring and disease management



Improves care towards best practices




Promotes holistic consideration of the patient to ensure appropriate care is provided

“This tool will help you to ensure that you are up to date with the way that this disease is identified, diagnosed, treated, and monitored. It's going to make you much more confident about how well you're managing this patient - and not just more confident, but I think more pleased with how you're doing it.”

Dr. R. Dacre, Physician, Toronto, ON

Dr. R. Dacre is an independent physician in the Toronto region who accessed both change management support and academic detailing through the E2P program to support optimal use of the E2P heart failure tool. Since gaining access to the tool **7 months** ago, he has used the tool for all patients seen for their heart failure visits during this time. His practice treats a total of:


2,400 patients


29 patients with heart failure



Dr. R. Dacre has used the E2P heart failure tool with **11** patients, which represents all heart failure visits conducted during the study period

When examining the impact of the tool, the analysis focused on specific indicators for patients with a diagnosis of heart failure.

100%
Of patients who had the tool used received recommended diagnostic assessments



Patients who had the tool used were more likely to receive quadruple therapy

100%
Of patients who had the tool used received recommended vaccinations

Based on best practice guidelines, patients with heart failure should receive a chest x-ray, ECG, and echocardiogram either leading up to or after their diagnosis.¹

Across Ontario:



Approximately **1 in 5** patients with heart failure over the age of 40 have not received a chest x-ray or ECG¹

7.5%

Of people over the age of 65 with heart failure have received *triple* therapy medications¹

In this case study, **25% of patients** over the age of 65 who had the tool used were prescribed the more recently recommended *quadruple* therapy medications, and **100% had received the recommended immunizations** for patients with heart failure.

Based on the findings of this case study, the sustained use of E2P tools at the point of care, at scale, has the potential to improve the management of patients with heart failure in Ontario.

If you have any questions or would like further information on this case study, contact communications@ehealthce.ca.

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Published: February 2024

Works Cited:

1. Ontario Health. "Heart Failure Care in the Community for Adults." Quality Standards, 2019 [Online]. Available at: <https://www.hqontario.ca/Portals/0/documents/evidence/quality-standards/qs-heart-failure-quality-standard-en.pdf>