**Manager, PROMETHEUS project**
– improving heart failure care

<table>
<thead>
<tr>
<th>Title:</th>
<th>Manager, PROMETHEUS Project</th>
<th>Team:</th>
<th>Cardiovascular Health</th>
<th>Position type:</th>
<th>Fixed Term 17 Months at 0.8FTE</th>
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</thead>
<tbody>
<tr>
<td>Reports to:</td>
<td>Manager, Clinical Care</td>
<td>Company:</td>
<td>Victorian Division</td>
<td>Hours per week:</td>
<td>30 hours</td>
</tr>
<tr>
<td></td>
<td>Engagement</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Grade:</td>
<td>7</td>
<td>Location:</td>
<td>Melbourne</td>
<td>Effective date:</td>
<td>1 January 2017</td>
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**ORGANISATIONAL CONTEXT**

The Heart Foundation is an independent charity whose purpose is to reduce premature death and suffering from heart, stroke and blood vessel disease. As a federation of nine companies (a national company and eight state/territory divisions) we work together to achieve a national strategic plan, *For All Hearts Strategy 2013-2017* under the auspice of a Federation Agreement and guided by shared organisational values: Visionary; Dynamic & Collaborative; Integrity; and Passionate.

The Victorian Division, has a Fundraising, and Cardiovascular Health (CVH) team, all of which are supported by the functions of Finance, Media and Communications and Human Resources.

The CVH team in Victoria prepares an annual operational plan which aligns with the goals and objectives of the national *For All Hearts Strategy 2013-2017*. Our activities address key areas of prevention under *Healthy Hearts* (eg. improving access to a healthier food supply, more active living and smoke free environments) and under *Heart Care* (eg. early recognition and detection, improved access, and better management of heart disease). We have a strong focus on addressing health inequity amongst Aboriginal and Torres Strait Islanders, those who are culturally and linguistically diverse, from low socio economic backgrounds and from rural and regional Victoria.

The position of Manager, PROMETHEUS project sits within the Clinical Care Engagement team (see org chart, attached). The CVH team works collaboratively with all other functions to ensure the Heart Foundation Victoria meets its strategic and operational objectives.
Position Purpose:

In 2016 the Heart Foundation (with the support of the Victorian Cardiac Clinical Network) developed a resource titled ‘Heart Failure Toolkit – a targeted approach to reducing heart failure readmissions’ [https://www.heartfoundation.org.au/programs/the-heart-failure-toolkit](https://www.heartfoundation.org.au/programs/the-heart-failure-toolkit). The resource provides a locally relevant, globally informed framework to reduce heart failure readmission rates and guide heart failure systems optimisation with the Victorian healthcare setting. It has been widely disseminated and promoted to hospitals across Victoria. The purpose of the PROMETHEUS project is to pilot the implementation of the Toolkit and will have two key priorities:

- **Primary** - Improve access to timely and appropriate heart failure care through implementing redesign processes (defined in the Toolkit) aimed at improving early heart failure specialty input, heart failure education and transitional care
- **Secondary** - Capture and measure outcomes which matter most to the patient through the implementation of globally validated heart failure Patient Reported Outcome Measures (PROMs) – a first in Victoria.

A comprehensive project plan has been developed (project brief Appendix A) and The Project Manager will be responsible for the effective implementation and evaluation of the project. The Project Manager will have visibility and oversight of all of the deliverables of the project. The project brings together a collaborative partnership (defined in the table below). To ensure the success of the project, The Project Manager will work closely with the collaborating partners to ensure that they are working effectively and implementing the activities that are defined in the project plan.

**Project partners**

<table>
<thead>
<tr>
<th>Health Services</th>
<th>Austin Hospital</th>
<th>Will be implementing redesign processes to improve patient care and reduce readmissions using a PDSA methodology</th>
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<tbody>
<tr>
<td></td>
<td>Western Hospital</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Bendigo Hospital</td>
<td></td>
</tr>
<tr>
<td>Monash University</td>
<td>Centre for Research Excellence</td>
<td>Will be developing an IT platform to collect patient measures. Partner in the evaluation of project benefits.</td>
</tr>
<tr>
<td>Telstra Health</td>
<td>Dr Foster Quality Investigator tool</td>
<td>Will provide visibility of hospital heart failure readmissions data</td>
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<tr>
<td>ICHOM</td>
<td>International Collaboration for Health Outcomes Measurement</td>
<td>Will guide the implementation of a system to collect patient outcome measures in the three participating hospitals and develop a heart failure PROMs implementation guide on project completion</td>
</tr>
<tr>
<td>VCCN</td>
<td>Victorian Cardiac Clinical Network</td>
<td>Clinical guidance, project advice and funding</td>
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</table>
A governance structure has been developed for the project; The Project Manager will work within this governance structure.

Each hospital will receive funding to employ a Clinical Change Facilitator (CCF) that will actively lead the implementation of the project at the hospital site. The Project Manager will work closely with and provide guidance to the CCFs to ensure the success of the project.
## Key Accountabilities

<table>
<thead>
<tr>
<th>Key Result Areas</th>
<th>Major Activities</th>
<th>Outcomes</th>
</tr>
</thead>
</table>
| Project Management          | • Implement the project within agreed timelines and on budget as outlined in the project plan addressing all of the key deliverables  
  • Effectively and proactively manage (troubleshoot) any issues that may jeopardise the project and escalate any concerns that may have a significant impact  
  • Clearly articulate the expectations and requirements of each of the project partners and support them to deliver what is required within the timelines  
  • Be a key information source to the clinical change facilitators working at the hospital sites. Ensure there is accountability for the work being undertaken and that it meets the project expectations.  
  • Act as a key driver to motivate and inspire the project partners to achieve the expectations of the project  
  • Provide regular reports and updates which demonstrate the progress of the project  
  • Implement tools and resources to assist with practice change – PDSA methodology  
  • Convene and lead a collaborative working group of the hospitals that are engaged in the project to share ideas and learnings  
  • Be responsible for stakeholder communication | The three hospitals are actively engaged in the project and meet the project requirements. The CCFs are accountable for the hospital level deliverables of the project  
The project is delivered on time and on budget as per the project plan milestones and timelines. Issues that impact on the outcomes of the project are identified early and proactively managed  
Key elements of the Heart Failure Toolkit (systems redesign) are implemented and their impact on patient outcomes and readmissions is measured  
Patient Related Outcome Measures (PROMS) are collected in all three hospitals and entered into the IT platform  
A resource is developed that showcases the process for collecting PROMs and how this can be implemented by other hospitals  
Regular reports are produced and provide meaningful information to partners and DHHS  
Hospitals work collaboratively to implement quality improvement initiatives. Learnings are shared and networks are developed.  
Heart Foundation tools and resources are promoted and utilised by participating hospitals, where relevant |
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| **Collaboration** | • Build and maintain productive working relationships between all of the project partners  
• Act as a key support and mentor to the Clinical Change Facilitators to build their knowledge and capacity, particularly around the Plan Do Study Act activities  
• Be a key resource for the project partners providing knowledge, expertise and encouragement  
• Communicate effectively so that everyone is clear of the expectations of the project and how things are tracking  
• Collaborate with the internal working groups convened by the hospitals and provide support where needed or as requested by the Clinical Change Facilitators  
• Engage in information exchange through meetings, in-services, online activities etc  
• Develop a strategic approach to the engagement of key stakeholders who can assist with system changes i.e. Department of Health, professional bodies, Health Services, Victorian Cardiac Clinical Network | Hospitals work collaboratively to implement quality improvement initiatives. Learnings are shared and networks are developed. The CCFs working across the three sites feel supported to undertake their role. Internal hospital working groups are actively engaged in championing the change; they have a clear understanding of how to improve current practice – what needs to change and how Tools and resources are developed that are meaningful and useful to stakeholders |
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<th>Outcomes</th>
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| Knowledge Management    | • Develop a strong working knowledge of the information in the ‘Heart Failure Toolkit’ and how the elements defined in the Toolkit can be applied in practice to improve care  
  • Facilitates an ‘expert advisory group.’ that will inform and guide the project  
  • Communicate the importance of patient centred care principles to the project group  
  • Be a central point of information on the principles of PROMs and the work of ICHOM  
  • Source information that is required to assist with the effective implementation of the project – this could be clinical, process or quality improvement related  
  • Maintain a sound knowledge of current issues, research and evidence in heart failure management  
  • Translate clinical information so that it is meaningful and engaging for various audiences including clinicians, administrators, Department of Health staff, patients and their families | The project manager provides advice on best practice approaches to heart failure care  
The expert advisory group is consulted at key points throughout the project. Advice from this group is used to strengthen the work of the project |
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| Data and evaluation                  | - Develop an evaluation methodology (including data collection) to determine the impact and effectiveness of strategies that are implemented i.e. measures of success  
- Ensure that data that is necessary to support the evaluation of the project is clearly identified, accessible and available and has ethics approval  
- Work with Monash University to inform the requirements for the IT platform that is being developed to capture PROMS  
- Work with Telstra Health and the quality investigator tool (Dr Foster) to ensure hospital sites have visibility of the relevant patient data  
- Identify the best approach to collecting PROMs at each of the three hospital sites. This is informed by the work of ICHOM  
- Develop performance indicators, targets and acceptable variance  
- Use data for reporting, benchmarking purposes  
- Work with stakeholders to engage them in meaningful discussion about their data and its relevance to the project | Data is sourced to evaluate the project  
Ethics approval is gained  
The project evaluation clearly demonstrates the outcomes of the project - success and learnings  
PROMs are collected at each of the three hospital sites |
| Internal collaboration and liaison   | Represent Victorian Division on relevant National working groups and committees under the *Healthy Hearts Strategy 2013-2017*  
Work with the Manager and/or Fundraising Director in the preparation of submissions to attract external funding when required. | Input into working groups is demonstrated and documented and information is shared with Victorian CVH team where relevant  
Evidence of engagement with Fundraising Team in the preparation of submissions to relevant funding sources |
QUALIFICATIONS, EXPERIENCE/KNOWLEDGE

Key selection criteria

Qualifications:
- Tertiary Nursing, Allied Health or other relevant qualification.
- Project management qualification (desirable)

Experience/Knowledge
- An understanding of the Victorian hospital and health care system as it relates to heart failure management
- Sound knowledge of the principles of heart failure management as outlined in the NHF & CSANZ guideline
- Experience in applying quality improvement methodologies e.g. Plan, Do, Study, Act (PDSA)
- A proven track record in change management and project management (minimum of 3 years) preferably in a health setting

Skills
- An ability to bring together and lead diverse stakeholders in a collaborative model to achieve shared outcomes
- An ability to analyse and interpret data and prepare meaningful reports
- Excellent communication and negotiation skills

CHALLENGES:
- Working on a project that is being delivered in partnership across multiple sites, teams and diverse stakeholders with competing interests and potentially divergent points of view.
- Introducing concepts of quality improvement to clinical staff, who are working in a busy and pressured environment such as emergency departments and hospital wards
- Securing genuine engagement and enthusiasm from hospitals; particularly from senior clinicians (cardiology) and health professionals more broadly.
- Developing performance measures and data collection processes that will accurately measure process improvement and allow project evaluation.
- Introducing system changes that are sustained beyond the project
- Develop a strategy that will allow the learnings and findings of this project to be scaled for broader funding and implementation

DECISION MAKING:

Independently
The position is accountable for the implementation and evaluation of the project and the reporting that is required

With input
The position consults with
- The Project Director (Manager Clinical Care Engagement) in the development of annual operational and work plans; changes to strategic work priorities; policy submissions and funding proposals; budget expenditure
- The Victorian Cardiac Clinical Network for Project Advice and clinical leadership
- Key clinicians and implementation working groups in health services

KEY COMMUNICATIONS:

Internally:
- Fortnightly catch ups with Heart Foundation PROMETHEUS Project Director
- Monthly clinical engagement team meetings
- Monthly cardiovascular health team meetings

Externally:
- Meetings with senior hospital clinicians to secure engagement
- Meetings with CCF from each of the hospitals (joint meetings as a collaborative)
- Regular engagement with project partners, key stakeholders, project advisors and working group members
In the development of tools and resources
- The expert advisory group

Recommends
- Program enhancements, as well as expansion of/extension to key activities
- Mechanisms for broad-based information dissemination
- Evaluation and data collection
- Strategic activities that are innovative and will assist in systems improvement

Guidance
- The position is guided in its decisions by:
  - Heart failure guidelines and evidence
  - Systems of care for heart failure management – patient centred care coordination
  - Multidisciplinary care principles

The expert advisory group that has been convened for this project

- Visiting hospitals as required to assist with systems improvement implementation eg hospital in-services to change teams
- Project presentations as required
- Engaging the expert advisory group that is formed for this project

**Direct Reports (position titles):**  | **Indirect Reports:** | **Budget Delegation:**
---|---|---
Nil | Nil | Expenditure: $0

Organisational agility
Knowledgeable about how organisations work; knows how to get things done both through formal channels and the informal network; understands the origin and reasoning behind key policies, practices and procedures; understands the cultures of organisations

Innovation Management
Is good at bringing the creative ideas of others to market; has good judgement about which creative ideas and suggestions work; has a sense about managing the creative process of others; can facilitate effective brainstorming; can project how potential ideas may play out in the market place

Negotiation
Can negotiate skillfully in tough situations with both internal and external groups; can settle differences with minimum noise; can win concessions without damaging relationships; can be both direct and forceful as well as diplomatic; gains trust quickly of other parties to the negotiations; has a good sense of timing

**Interpersonal savvy**
Relates well to all kinds of people, up, down, and sideways, inside and outside the organisation; builds appropriate rapport; builds constructive and effective relationships; uses diplomacy and tact; can diffuse even high-tension situations comfortably

**Perseverance**
Pursues everything with energy, drive and a need to finish; seldom gives up before finishing, especially in the face of resistance or setbacks

**Planning**
Accurately scopes out length and difficulty of tasks and projects; sets objectives and goals; breaks down work into the process steps; develops schedules and task/people assignments; anticipates and adjusts for problems and roadblocks; measures performance against goals; evaluates results

**Problem Solving**
Uses rigorous logic and methods to solve difficult problems with effective solutions; probes all fruitful sources for answers; can see hidden problems; is excellent at honest analysis; looks beyond the obvious and doesn't stop at the first answers.

**OUR VALUES**

**Visionary**
We are able to see the “big picture” and articulate our vision of the future. We inspire each other to help turn this into reality. We are prepared to take calculated risks and feel empowered to make change.

**Dynamic & Collaborative**
We work together to achieve the Heart Foundation’s vision. We communicate openly, debate the issues, and share our knowledge, expertise and experience so that we can utilise each other’s strengths to best effect and learn from our mistakes and our successes. We are flexible and make timely decisions that enable us to shape and adapt to our changing environment.

**Integrity**
We will be respectful and transparent in all our actions. We accept responsibility and stand up for what is right.

**Passionate**
We believe in what we do and are proud to work for the Heart Foundation. Our energy and enthusiasm drives our performance and creates a positive and inspiring work environment.
<table>
<thead>
<tr>
<th>Manager</th>
<th>Incumbent</th>
</tr>
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<tbody>
<tr>
<td>Name: Harry Patsamanis</td>
<td>Name:</td>
</tr>
<tr>
<td>Signed:</td>
<td>Signed:</td>
</tr>
<tr>
<td>Dated: 20\textsuperscript{th} December 2016</td>
<td>Dated:</td>
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1.1 Background

Heart failure is a chronic condition with high admission costs, bed day usage and an increased burden of care due to its complexity and clinical progression. However data suggests that up to two-thirds of heart failure related hospitalisations are preventable.\textsuperscript{8, 9, 10}

The case for heart failure system redesign is compelling and the opportunities for improvement are significant. In Victoria, data indicate that the prevalence of heart failure is close to one quarter of a million\textsuperscript{11} It continues to be one of the leading causes of CVD hospitalisation across Victoria, is one of the top 3 reasons for the greatest number of bed day usage for unplanned readmissions and is the second highest emergency admission Diagnosis-Related Group (DRG) based upon volume.\textsuperscript{2, 3, 4}

A 2013 and subsequent 2015 Department analysis of State-wide health service readmissions data indicated:

a. A 30 day unplanned heart failure readmission rate of 25.3%

b. Variation amongst health service providers, with 30-day readmission rates ranging from 13-33\% across Victoria

c. A lack of benchmarks to drive heart failure system improvement, and

d. The need to improve patient centred care to ensure that the service being delivered was truly aligned with the outcomes that matter most to the patient and their carer.

Through initial funding provided by the Victorian Cardiac Clinical Network (VCCN) to address the abovementioned problem, the Heart Foundation (VIC) developed The Heart Failure Toolkit (The Toolkit) \url{http://heartfoundation.org.au/programs/category/victoria/} an evidence based, sector informed and patient centred resource that:

a. Identifies the cause for variation in readmission rates and use this information to,

b. provide a targeted approach to addressing unplanned heart failure readmissions with a focus on
   - Early heart failure specialty support
   - Heart failure education
   - Care transitions, and

c. for the first time presents the opportunity to capture recently developed, internationally validated heart failure Patient Reported Outcome Measures (PROMs).

The Toolkit has been widely disseminated and was launched at the sold out showcase and workshop on heart failure PROMs held in March 2016. It highlights innovative approaches which have been successfully implemented in particular hospitals and could be further scaled across the state and new innovation such as the implementation of heart failure PROMs – a first in Australia. The sector has and continues to be, widely engaged with this resource and believes it contains the tools within it to impact on heart failure care delivery. However, whilst there is confidence in the
Toolkits ability to improve heart failure care and management there now needs to be evidence to support this.

Taking The Toolkit through to pilot implementation is a necessary step to evaluate the short, medium and long terms benefits of implementing the redesign elements and to provide justification for, and guidance in, how best to scale and embed this innovation across Victoria in order to see true heart failure system reform.

1.2 Objectives

The primary objective of this project is to:

- Improve access to timely and appropriate heart failure care at the The Austin hospital, Western hospital (Footscray) and Bendigo hospital through redesign processes aimed at improving early heart failure specialty input, heart failure education and transitional care.

The secondary objectives of this project is to:

- Capture and measure outcomes which matter most to the patient through the inaugural implementation of globally validated heart failure Patient Reported Outcome Measures (PROMs)
  – a first in Victoria.
- Put in place the building blocks for scalability through the development of an IT module within the Victorian Cardiac Outcomes Registry (VCOR) platform. This IT module will facilitate the capture, reporting and benchmarking of heart failure PROMs and build on the existing investment in cardiac performance monitoring.

1.3 Scope

The Austin Hospital, The Western Hospital (Footscray) and Bendigo Hospital will each form Internal Working Groups (IWG) to implement this initiative. Representatives will be multidisciplinary and reach across emergency, cardiology and general medicine departments along with those responsible for heart failure discharge planning, outpatient and home based care and quality improvement.

One of their first key activities will be to process map the heart failure patient journey through their system. This mapping exercise will identify the 2 redesign activities that health services will focus on, where they will take place and where best to capture the PROMs. This will subsequently refine, a. the scope of staff to be involved in the PDSA activities and PROMs capture and b. the cohort of heart failure patients to be involved.

The aim will be to capture heart failure PROMs within a minimum of 50% of heart failure patients within the defined pathways for PROMs capture.

1.4 Scope exclusions

The following items are out of scope for this project:
- To be determined on completion of process mapping exercise at the health service le