



AHRQ's Initiative To Increase Use of Cardiac Rehabilitation

TRAINING • AWARENESS • KNOWLEDGE • ENGAGEMENT

From:

To: TAKEheart

Re: Application to Participate in AHRQ's TAKEheart Initiative

Date:

We have reviewed the information for participation in AHRQ's TAKEheart Initiative including the one page summary and FAQs.

This letter of intent indicates the hospital's executive sponsor understands and agrees to the program components and expectations outlined below.

As a participant in this initiative, our organization will receive, at no charge to us, step-by-step training on implementing a proven means of increasing cardiac rehabilitation among our eligible patients. More specifically, we will receive:

- Individualized coaching and technical support in developing your own action plan for increasing cardiac rehabilitation referral, enrollment and retention
- Access to a high-impact, 10-month virtual training program providing guidance on how to implement an evidence-based strategy (automatic referral with patient care coordination support) to achieve this goal
- Insights from leading cardiac rehabilitation experts and
- Peer-to-peer knowledge sharing, coaching and tools

As a participant in this initiative, our organization agrees to:

- Form a multi-disciplinary team to implement this quality improvement activity
- Work to increase patient referral to cardiac rehabilitation, including by
 - Implementing an automatic cardiac rehabilitation referral process into the EMR or other automatic system
 - Providing care coordination for patients referred to cardiac rehabilitation services
- Share success stories and lessons learned with other AHRQ TAKEheart hospitals via the project platform
- Participate in monthly webinars
- Share aggregate level, de-identified data on patient referral rates when available*
- Participate in two online surveys as part of the initiative's evaluation
- Participate, if selected, in interviews as part of the initiative's evaluation.

** We understand that most hospitals will not have systems in place to capture the data immediately and may not have data available until the end of participation. Please note that hospitals will be provided with a customized tool to track patients and submit data quarterly. Hospitals can start collecting data at any time during participation. Once referral and/or enrollment data are available, the evaluation team will provide your hospital with quarterly, customized feedback report with charts showing your progress.*

The signatures below indicate support from our hospital's executive sponsor and affirms our ability

to compose a multidisciplinary team to access the training curriculum and implement automatic referral with care coordination support and our commitment to participating in the evaluation by providing de-identified patient-level data on referral to cardiac rehabilitation using a convenient template.

Executive Sponsor Signature:

Name Printed:

Title:

Date:

Project Leader/Key Contact Name:

Title:

Phone:

Email:

Date:

Please contact the American Hospital Association at cardiac.rehab@aha.org with any questions or concerns. Please upload completed forms within the application form or submit it via the email listed above.