Heart Failure and Heart Disease Care at Home: A National Practice Module

Caring for older adults with heart failure and heart disease at home.

Why this module matters. About 7.7 million Americans live with heart failure, up from 6.7 million a few years earlier. Daily weights, medicines, and early reporting at home can prevent many hospital stays.

About this module

This module gives teams a shared, evidence-based approach to caring for older adults with heart failure and heart disease at home. It draws on current federal rules and national guidance, and it ends with a checklist that agencies, clinicians, and families anywhere in the United States can adopt.

Item	Details
Who it is for	Family caregivers, home care aides, nurses, and clinicians
Format	7 units, case scenarios, a knowledge check, and a national checklist
Time	About 1.5 hours
How to use it	Caregivers focus on Units 2, 4, 5, and 7. Clinicians and agencies use all units.

Learning objectives

After completing this module, learners will be able to:

1. Describe heart failure and heart disease nationally.
2. Recognize heart failure symptoms.
3. Understand the national treatment approach.
4. Support daily self-care.
5. Use green, yellow, and red zones.
6. Support other heart conditions.
7. Manage the move home from the hospital.

Scope. Aides and family caregivers observe, support, and report. Clinical assessments, medication changes, and treatment decisions belong to licensed clinicians. Follow your state scope-of-practice rules and agency policies.

Unit 1. The national picture

Measure	Figure	Source
Americans living with heart failure	7.7 million (2021 to 2023), up from 6.7 million (2017 to 2020)	AHA 2026 Statistics
Adults 20+ with cardiovascular disease	Nearly 49%	AHA 2026 Statistics
Blood pressure control among adults with high blood pressure	Fell from 54.1% (2013–14) to 48.3% (2017–20)	AHA 2026 Statistics
Medicare 30-day readmission rate, all causes	17.0 per 100 hospital stays (2020)	AHRQ HCUP
Strokes each year	More than 795,000	CDC

Heart failure is one of the most common reasons older adults are admitted and readmitted to the hospital. Much of that risk can be reduced with daily self-care at home.

Unit 2. Understanding heart failure

Heart failure means the heart is not pumping as well as the body needs. Fluid can build up in the lungs, legs, and belly. It is a long-term condition that can be managed.

Common symptom	What the caregiver may see
Shortness of breath	Breathless walking or lying flat; needs more pillows
Swelling	Ankles, legs, or belly; shoes or rings tight
Weight gain	Quick gain from fluid, not fat
Fatigue	Tired with less activity
Cough	Dry cough, especially at night
Confusion or poor appetite	Especially in older adults

Unit 3. National treatment approach

The 2022 AHA/ACC/HFSA heart failure guideline recommends combinations of medicines that improve survival and reduce hospital stays for heart failure with reduced ejection fraction. These are often called the four pillars:

Medicine group	Examples
ARNI, ACE inhibitor, or ARB	Sacubitril-valsartan, lisinopril, losartan
Beta-blocker	Carvedilol, metoprolol succinate, bisoprolol
Mineralocorticoid receptor antagonist	Spironolactone, eplerenone
SGLT2 inhibitor	Dapagliflozin, empagliflozin

Diuretics (water pills) relieve fluid buildup. The clinician chooses medicines and doses. Caregivers help by giving them correctly and reporting side effects such as dizziness.

Unit 4. Daily self-care at home

Task	How
Weigh every morning	Same time, after using the bathroom, before breakfast, same clothes, same scale; write it down
Take medicines	As prescribed, every day; use an organizer; never stop without advice
Watch salt	Follow the clinician’s advice; read labels; limit processed and restaurant foods
Fluids	Follow any fluid limit the clinician sets
Check swelling and breathing	Each day, and record changes
Stay active	Walking as advised; cardiac rehabilitation if offered
Blood pressure	Check and record if the plan calls for it
Vaccines and checkups	Follow the clinician’s advice; keep follow-up visits

Unit 5. Warning zones

Zone	Signs	Action
Green	Usual weight, breathing, and swelling	Keep up daily care
Yellow	Weight up 2 to 3 lb in a day or 5 lb in a week (or the person's own limit), more swelling, more breathless, needs more pillows, dizzy, new cough	Call the clinician or nurse the same day
Red	Struggling to breathe at rest, chest pain, fainting, confusion, coughing pink frothy mucus	Call 911

> **Personal limits.** Follow each person's own weight and symptom limits from their clinician. The zones above are common examples.

Unit 6. Other heart conditions

Condition	Key caregiver points
High blood pressure	Take medicines daily; check readings as directed; report very high or low readings
Coronary artery disease	Know heart attack signs; call 911 for chest pain
Atrial fibrillation	Blood thinners need careful dosing; report bleeding or falls; know stroke signs (BE FAST)
After a heart attack or surgery	Follow activity limits; attend cardiac rehab; watch for depression

Unit 7. After a hospital stay

- Bring all medicines to a review; compare with the discharge list.
- Make a follow-up visit within 7 days if possible.
- Start daily weights the day you get home.
- Know who to call for yellow zone signs.
- Use the Hospital-to-Home Transition module.

Case scenarios

Case 1. Weight creeping up

Mr. V's weight was 182 lb on Monday and 186 lb on Wednesday. His ankles are more swollen.

- Which zone is this?
- What should happen?

Discussion: Yellow zone: 4 lb in two days with more swelling. Call the clinician or nurse the same day; the diuretic may need adjusting.

Case 2. Dizzy after a new medicine

Mrs. W feels dizzy when standing after starting a new heart medicine.

- What are the risks?
- What should the caregiver do?

Discussion: Low blood pressure on standing and a fall. Have her sit before standing, keep her walker close, and report to the clinician the same day.

Knowledge check

1. How many Americans live with heart failure? *(About 7.7 million)*
2. When should a person with heart failure weigh themselves? *(Every morning, after the bathroom, before breakfast)*
3. What weight gain is a common warning sign? *(2 to 3 lb in a day or 5 lb in a week)*
4. Name the four pillars of heart failure medicines. *(ARNI/ACE inhibitor/ARB, beta-blocker, MRA, SGLT2 inhibitor)*
5. What red zone signs need 911? *(Severe breathlessness at rest, chest pain, fainting, confusion)*

National Heart Failure and Heart Disease Home Care Checklist

This checklist turns national heart failure guidance into one tool for families, agencies, and clinicians. The "National basis" column shows where each item comes from. Adapt it to your state rules and policies.

Name or ID	Date	Completed by and role
Agency or organization	Reviewed by	Next review date

A. Plan

Action	National basis	Done	Notes
Personal weight and symptom limits written	2022 AHA/ACC/HFSA guideline	☐	
Green, yellow, red zone plan given	2022 AHA/ACC/HFSA guideline	☐	
Medicine list current, with purpose of each	Best practice	☐	
Salt and fluid advice written	2022 AHA/ACC/HFSA guideline	☐	

B. Daily care

Action	National basis	Done	Notes
Weight every morning, recorded	2022 AHA/ACC/HFSA guideline	☐	
Medicines given daily as prescribed	Best practice	☐	
Swelling and breathing checked and recorded	Best practice	☐	
Activity or cardiac rehab as advised	2022 AHA/ACC/HFSA guideline	☐	

C. Respond

Action	National basis	Done	Notes
Yellow zone signs reported the same day	Best practice	☐	
Red zone signs: 911	Best practice	☐	
After discharge: medicine review and follow-up within 7 days	Medicare TCM; AHRQ RED	☐	

Completed by: signature	Printed name and title	Date
Reviewed by: signature	Printed name and title	Date

Sources and further reading

News-Medical: AHA 2026 Heart Disease and Stroke Statistics summary (Jan. 2026) (news-medical.net)

PubMed: 2026 Heart Disease and Stroke Statistics (AHA) (pubmed.ncbi.nlm.nih.gov)

AHRQ HCUP Statistical Brief 304 (hcup-us.ahrq.gov)

CDC: Stroke Facts (cdc.gov)

ACP: Transitional Care Management fact sheet (acponline.org)

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