



# Resource impact statement

Resource impact

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## Indicator

**IND318.** The percentage of patients with a diagnosis of heart failure on or after 1 April 2026 who have a recorded ejection fraction category (reduced, mildly reduced, or preserved).

## Resource impact

The recording of heart failure (HF) ejection fraction category (reduced, mildly reduced, or preserved) appears to be suboptimal in primary care records, contributing to disparities in treatment and poorer patient outcomes. Improving the routine coding of heart failure type in general practice electronic medical records presents an opportunity to refine treatment and improve care outcomes.

Echocardiograms, which are generally used alongside other diagnostic tests to diagnose heart failure, routinely record ejection fraction category. Recording ejection fraction category for people newly diagnosed with heart failure is therefore not expected to lead to a cost or capacity impact.

It is estimated that an average practice with 10,000 patients would have around 17 people with a new diagnosis of chronic heart failure per year (inferred from [QOF 2023 to 2024 data](#)). It is expected that this will increase over time.