**Table S1.** List of all the quality indicators included in the modified Delphi voting

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Domain1: Structural QIs** | | | | | | | |
| **Main (1): Centre should have a dedicated multidisciplinary team to manage patients with HF** | | | | | | | |
| Keep: 100 % | | | | | Remove | Modify | |
| **Main (2): Centres should have dedicated trained healthcare professional to deliver HF specific education to facilitate patient self-care** | | | | | | | |
| Keep: 88.8 % | | | | | Remove: 12.2% | Modify | |
| **Domain 2: Patient assessment** | | | | | | | |
| **Main (1): Proportion of patients with HF who have a documentation of their HF clinical type (HFrEF, HFmrEF, HFpEF)** | | | | | | | |
| Keep: 94.4 % | | | | Remove: 5.6% | | | Modify |
| **Main (2): Proportion of patients with HF who have a documentation of their ECG findings** | | | | | | | |
| Keep: 100% | | | | | Remove | | Modify |
| **Main (3): Proportion of patients with HF who have their NPs measured** | | | | | | | |
| Keep: 94.4% | | | | | Remove: 5.6% | | Modify |
| **Main (4): Proportion of patients with HF who have their blood tests checked** | | | | | | | |
| Keep: 100% | | | | | Remove | | Modify |
| **Main (5): Proportion of patients hospitalised with HF who have been referred for a cardiac rehabilitation program** | | | | | | | |
| Keep: 94.4% | | | | | Remove: 5.6% | | Modify |
| ***(New) (6):* Proportion of patients hospitalized with HF who have a follow up visit by a healthcare professional within 6 weeks from their hospital discharge** | | | | | | | |
| The QI is valid | | 8 (1.4) | | | | | |
| The QI is feasible | | 8 (1.4) | | | | | |
| ***(New) (7):* Proportion of patients hospitalized with HF who at 6-week review have achieved initiation and rapid up-titration of evidence-based treatments.** | | | | | | | |
| The QI is valid | 8 (1) | | | | | | |
| The QI is feasible | 7 (2.1) | | | | | | |
| **Domain 3. Initial treatment** | | | | | | | |
| **Main (1): Proportion of patients with HFrEF who are prescribed bisoprolol, carvedilol, sustained-release metoprolol succinate, or nebivolol in the absence of any contraindications** | | | | | | | |
| Keep: 100 % | | | | Remove | | | Modify |
| **Main (2): Proportion of patients with HFrEF who are prescribed ACE inhibitor, ARB or ARNI in the absence of any contraindications** | | | | | | | |
| Keep: 100% | | | | Remove | | | Modify |
| **Main (3): Proportion of patients with HFrEF who are prescribed an MRA in the absence of any contraindications** | | | | | | | |
| Keep: 100% | | | | Remove | | | Modify |
| ***New (4):* Proportion of patients with HF regardless of LVEF who are prescribed a SGLT2 inhibitor in the absence of any contraindications** | | | | | | | |
| The QI is valid | 8 (1) | | | | | | |
| The QI is feasible | 8 (1.3) | | | | | | |
| **Main (5): Proportion of patients with HF who are prescribed loop diuretic therapy if they have evidence of fluid retention** | | | | | | | |
| Keep: 100 % | | | | Remove | | | Modify |
| **Domain 4. Therapy optimization** | | | | | | | |
| ***New) (1):* Proportion of patients with HFrEF and HFmrEF who are prescribed iv iron therapy if they have evidence of iron deficiency** | | | | | | | |
| The QI is valid | | | 8 (1.2) | | | | |
| The QI is feasible | | | 8 (1.2) | | | | |
| **Secondary (2): Proportion of symptomatic patients with HFrEF in sinus rhythm with a QRS duration ≥150 msec and LBBB QRS morphology and with LVEF ≤35% despite ≥3 months** **OMT who are offered CRT** | | | | | | | |
| Keep: 100% | | | | Remove | | | Modify |
| **Secondary (3): Proportion of symptomatic patients with HF, LVEF ≤35% despite ≥3 months of OMT, and IHD who are offered primary prevention ICD** | | | | | | | |
| Keep: 100 % | | | | Remove | | | Modify |
| **Domain 5. Patient HRQoL** | | | | | | | |
| **Secondary (1): Proportion of patients with HF who have an assessment of their HRQoL using a validated tool** | | | | | | | |
| Keep: 72.2% | | | | Remove: 27.8% | | | Modify |

ACE= angiotensin converting enzymes; ARB=angiotensin receptor blocker; ARNI=angiotensin-receptor neprilysin inhibitor; CRT=cardiac resynchronization therapy; ECG=electrocardiogram; ESC=European Society of Cardiology; FBC=full blood count; HbA1c=glycated haemoglobin; HF=heart failure; HFA=Heart Failure Association of the ESC; HRQoL=health-related quality of life; HFmrEF=heart failure with mildly reduced ejection fraction; HFpEF=heart failure with preserved ejection fraction; HFrEF=heart failure with reduced ejection fraction; ICD=implantable cardioverter defibrillator; IHD-ischaemic heart disease; LFTs=liver function tests, LVEF=left ventricular ejection fraction; MRA= Mineralocorticoid receptor antagonists; NP=natriuretic peptides; NYHA= New York Heart Association; OMT=optimal medical therapy; QIs=quality indicators; SGLT2=sodium-glucose transport protein 2, TSH=thyroid stimulating hormone; U&Es=urea and electrolytes