



# Reduce the Risk: PCI Bleed

A Campaign of the  
American College of Cardiology



# Start on the Right Foot: Assessment and Planning

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November 7, 2018



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*Please submit your questions for the  
moderated question and answer session*



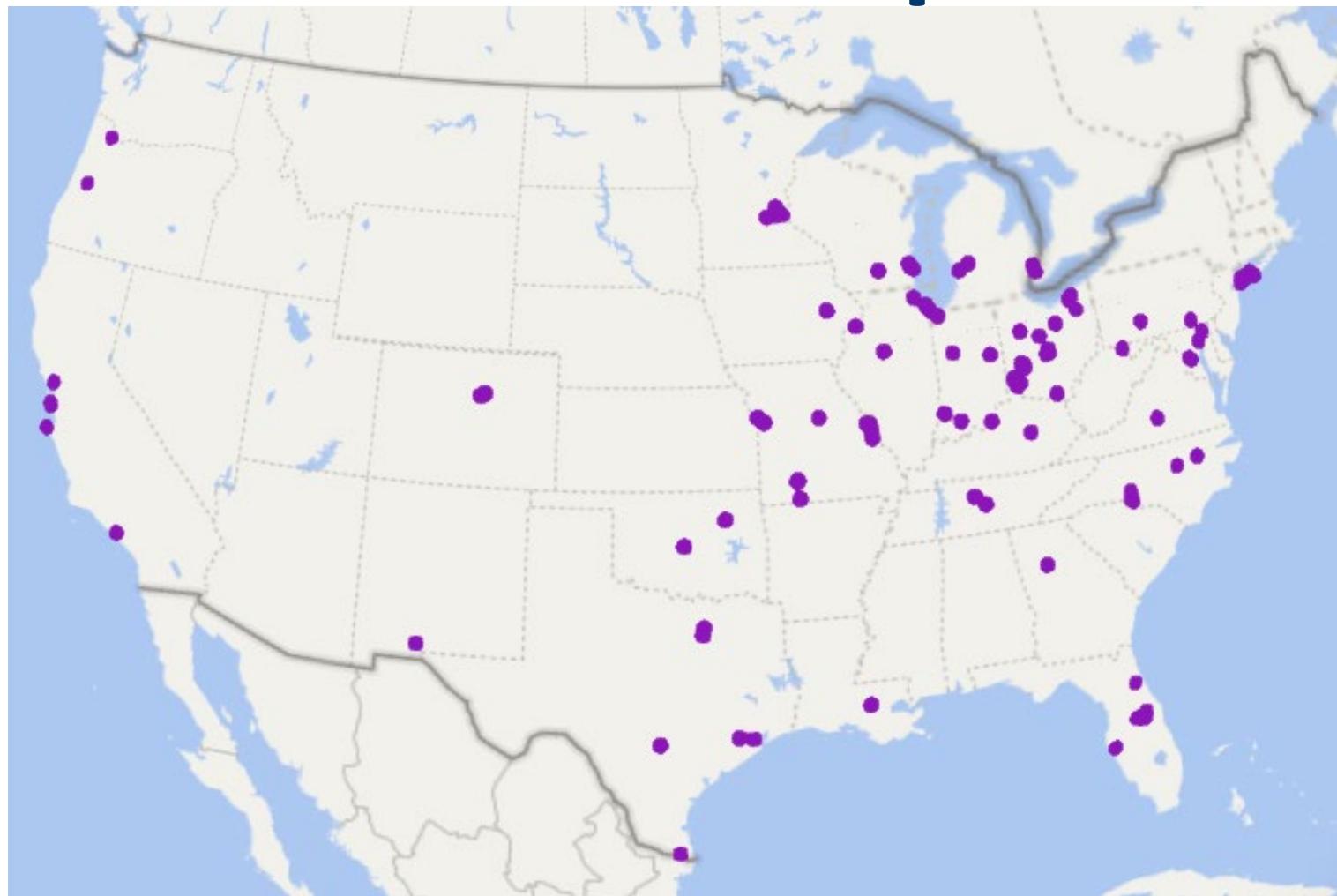
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- Program Update
- Facility Assessment
- New Project Management Templates
- Press Kit



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- ▶ Getting Started
- ▶ **Reduce the Risk Features**
  - Assessment
  - Toolkit
  - Webinars
  - Reduce the Risk Listserv
  - Reduce the Risk: PCI Bleed Participation Certificate

#### ADVERTISEMENT



## Features

The Reduce the Risk: PCI Bleed Campaign leverages evidence-based best practices to improve the care and outcomes of patient who have undergone a percutaneous cardiovascular intervention (PCI).

### Assessment

Includes benchmarking data and is designed to identify opportunities for improvement.

[Read more...](#)



### Toolkit

Specific tools and strategies designed to address one general topic area for improvement.

[Read more...](#)



### Webinars

Listen to webinars that review evidence-based toolkits and lessons learned.

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### Listserv

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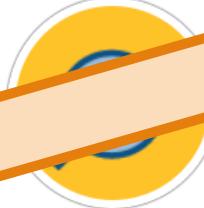
The Reduce the Risk: PCI Bleed Campaign leverages evidence-based best practices to improve the care and outcomes for the patient who have undergone a percutaneous cardiovascular intervention (PCI).

### Assessment

Includes benchmarking tools designed to identify areas for improvement.

[Read more...](#)

Ready?



Ready?

### Toolkit

Specific tools and strategies designed to address one general topic area for improvement.

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## PCI in-hospital risk standardized rate of bleeding for all patients

1 Does your facility have protocols and/or processes in place to determine a patient's bleeding risk prior to each PCI?

- Yes
- No
- Not sure

2 If Yes, how consistently does your team evaluate each patient for the risk of bleeding prior to the PCI procedure?

- 100% of the time
- 75%-99% of the time
- 50%-74% of the time
- 25%-49% of the time
- <25% of the time
- Never
- Not sure

3 Who at your facility is responsible for conducting a bleeding risk assessment on your patients prior to the PCI procedure?

- Nurse
- Cath lab technician
- Physician
- Physician Assistant
- Other
- Not done

4 Is the Bleeding Risk score part of your pre-procedure "time-out"?

- Yes
- No
- Not sure

5 Does your team use a bleeding risk calculator for each PCI patient?



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## Reduce the Risk: PCI Bleed Assessment

User: Veronica Wilson

Facili

The following results show your scores for an assessment completed by success metric. Review to help identify current opportunities for improvement.

To view results from a previous assessment, select a different date in the drop-down below and click Go. You can also select the Comparison Report to see how your results compare with others from your facility and all who have taken the assessment.

View Previous Results:

October 31, 2018

Go

Comparison Report

Results for Assessment Completed:

October 31, 2018



YOUR SCORE

**Overall Score** (49 of 95 possible points)

52%

**Success Metric 1: PCI in-hospital risk standardized rate of bleeding for all patients**

(33 possible points)

22

**Success Metric 2: Proportion of PCI procedures with transfusion of whole blood or red blood cells**

(5 possible points)

4

**Success Metric 3: Procedures with an observed bleeding event**

(9 possible points)

5

**Success Metric 4: Anticoagulation utilization**





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## Reduce the Risk: PCI Bleed Assessment

User: Veronica Wilson

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### Overall Score

#### Success Metric 1: PCI in-hospital risk standardized rate of bleeding for all patients

(33 possible points) ..... 22

#### Success Metric 2: Proportion of PCI procedures with transfusion of whole blood or red blood cells

(5 possible points) ..... 4

#### Success Metric 3: Procedures with an observed bleeding event

(9 possible points) ..... 5

#### Success Metric 4: Anticoagulation utilization





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## Reduce the Risk: PCI Bleed Toolkit

The table below displays the Reduce the Risk: PCI Bleed Campaign metrics and the tools and strategies to support facilities participating in this Quality Campaign. These tools and strategies are resources available to all participating facilities to assist with meeting the goal of decreasing overall bleeding events.

- Metric 1: in-hospital risk-standardized rate of bleeding events for all PCI patients.
- Metric 2: Proportion of PCI procedures with transfusion of whole blood or red blood cells.
- Metric 3: Procedures with an observed bleeding event.
- Metric 4: Anticoagulation utilization.
- Metric 5: Access site utilization.
- Metric 6: Method for closure for arterial access site.

Check back for more tools coming soon!

- [Preprocedural \(Tools to address Metric #1 and 6\)](#)
- [Intraprocedural \(Tools to address Metric #1, 5, and 6\)](#)
- [Postprocedural \(Tools to address Metric #1, 5, and 6\)](#)

Metric	Tools
Metric 1: in-hospital risk-standardized rate of bleeding events for all PCI patients	<a href="#">Post PCI Procedure Groin Bleed</a>
Metric 5: Access site utilization	
Metric 1: in-hospital risk-standardized rate of bleeding events for all PCI patients	<a href="#">Post PCI Procedure Orders</a>
Metric 6: Method for closure for arterial access site.	
Metric 1: in-hospital risk-standardized rate of bleeding events for all PCI patients	<a href="#">Hematoma Classification and CPCi Definition</a>
Metric 6: Method for closure for arterial access site	

- [Pharmacotherapy \(Tools to address Metric # 1, 2, 3, 4, 5, 6\)](#)



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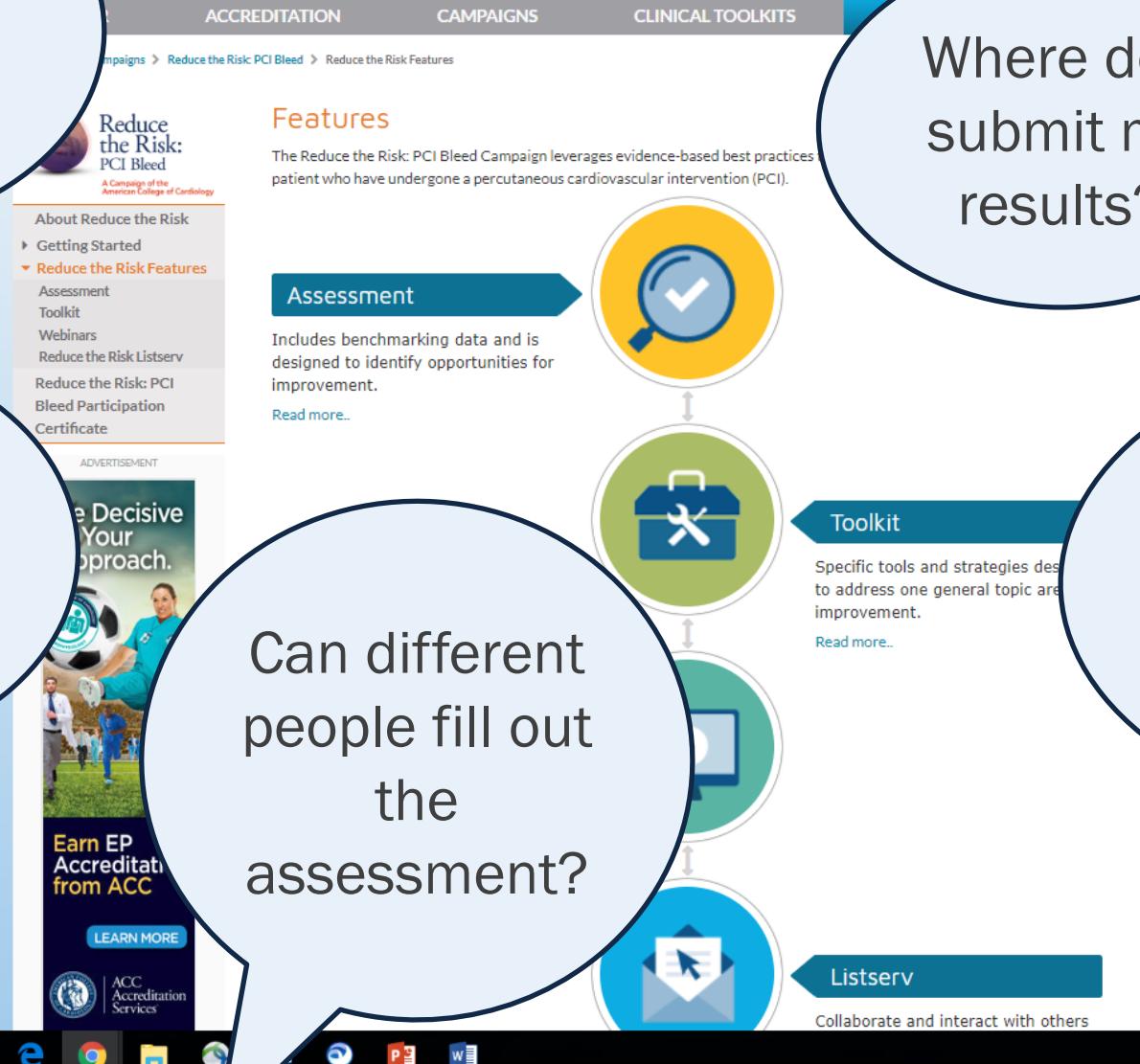
Can we  
preview the  
assessment?

Can we do the  
assessment  
multiple  
times?

Can different  
people fill out  
the  
assessment?

Where do I  
submit my  
results?

How do we handle  
performing  
assessments on a  
multi-hospital  
network?





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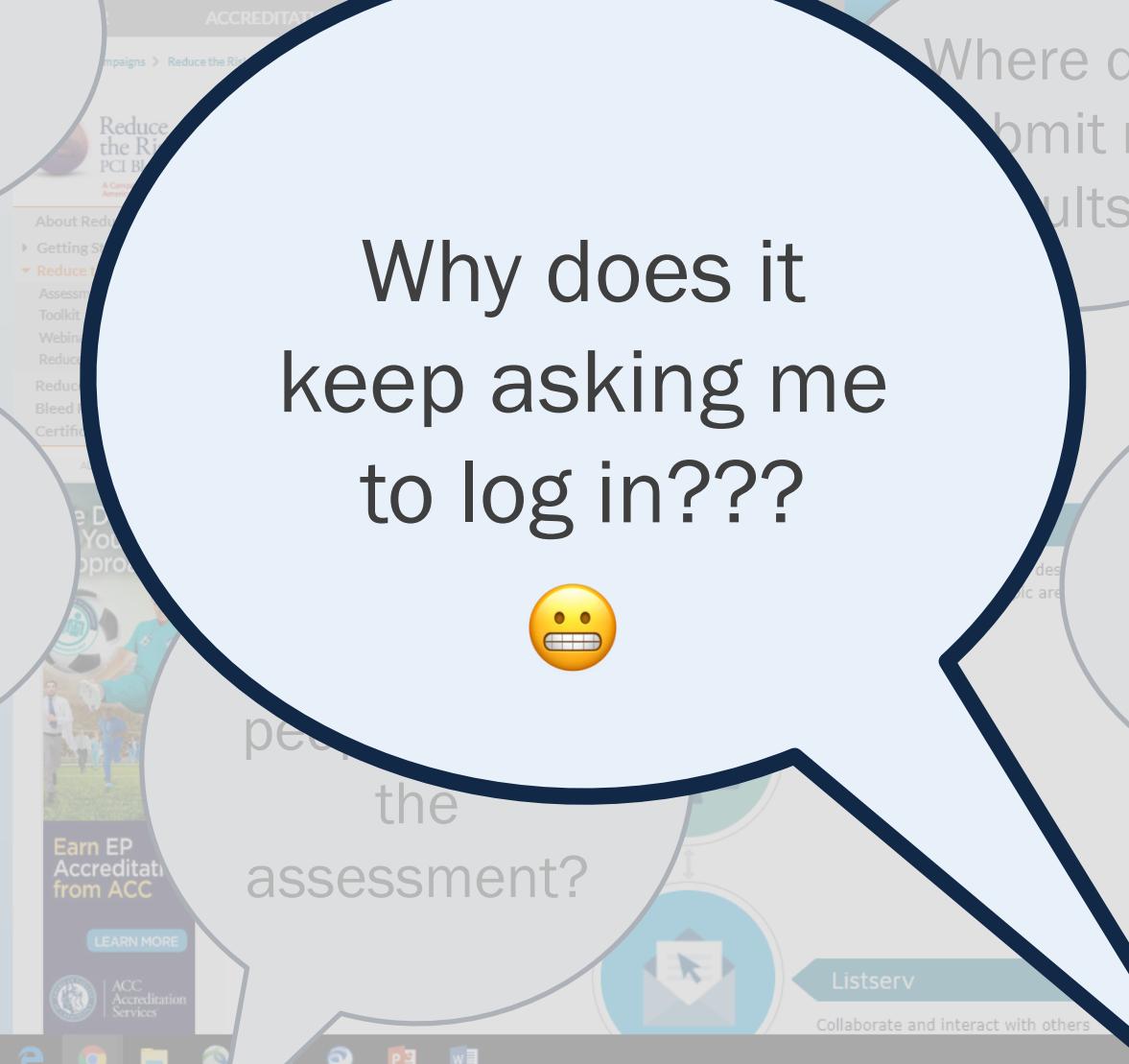
Why does it  
keep asking me  
to log in???



people  
the  
assessment?

Where do I  
submit my  
results?

How do we handle  
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network?



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2. Clear cache
3. Open a fresh browser
4. Go to [www.CVQuality.ACC.org](http://www.CVQuality.ACC.org)
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## Project Management Templates

The list below displays the Reduce the Risk: PCI Bleed Campaign tools and templates to support facilities implementing improvements as participants in this Quality Campaign. These resources are available to all participating facilities to assist with meeting the goal of decreasing overall bleeding events.

- [Plan for Improvement Template](#)
- [SMART Goals Worksheet](#)
- [Goal Progress Tracking Template](#)
- [SAMI Strategies for Broad Engagement of Pharmacists in the Care of AMI Patients](#)
- [SAMI Barriers and Solutions to Forming a Physician and Nurse Champion Team](#)
- [SAMI Characteristics of Clinical Champions \(Physician and Nurse\)](#)
- [IHI SBAR Communication Tool](#)
- [SBAR Report to a Physician](#)
- [Press Kit \(ZIP File, 23MB\)](#)
- [QI Toolkit](#)

# Plan for Improvement Template

**Aim Statement:** To reduce the incidence of PCI-associated adverse bleeding events by supporting bleeding risk assessments and risk-based care decisions before, during and after the procedure, thereby reducing patient harm and costs.

Step 1: Select Goal	Step 2: Identify Barriers	Step 3: Choose a Method for Measurement
Make sure your objective includes the following: <ul style="list-style-type: none"><li>• What are you seeking to improve?</li><li>• Who is targeted?</li><li>• By how much will it be improved?</li><li>• Over what period of time?</li></ul>	Sample questions to identify barriers: <ul style="list-style-type: none"><li>• What are the difficult, complex or sensitive aspects of this goal?</li><li>• What potential shifts in the environment should we monitor?</li><li>• What technical or materials-related problems could delay us?</li><li>• How might current clinician attitudes or culture affect the adoption of our recommendations?</li></ul>	May utilize a CathPCI Registry data element or pull data from another source.
<i>Increase interventionalist use of pre-op bleeding risk assessment tool by 25% by Q4 2019.</i>	<i>Medical Staff buy-in:</i> <ul style="list-style-type: none"><li>• <i>No risk assessment tool protocols currently established by facility</i></li><li>• <i>One medical staffer opposed to risk-adjusted care</i></li></ul> <i>Technical barriers:</i> <ul style="list-style-type: none"><li>• <i>Lack of wifi in the cath lab prevents use of online calculator tools.</i></li><li>• <i>Lack of a tool to fit risk assessment efficiently into the workflow</i></li></ul> <i>Process barriers:</i> <ul style="list-style-type: none"><li>• <i>Pre-op process is already complex</i></li></ul>	<i>Chart review or EMR data.</i> <ul style="list-style-type: none"><li>• <i>Numerator equals the number of patients whose bleed risk (as a numerical score or low/mid/high) is noted in the EMR before undergoing non-emergent PCI</i></li><li>• <i>Denominator equals the number of patients undergoing non-emergent PCI</i></li></ul>



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# Plan for Improvement Template

Step 4: Develop strategies/interventions to achieve your goal			
Strategies/Interventions	Action steps	Target Date	Responsible Person
Pilot adoption of a bleed risk assessment tool that does not require wifi.	<ol style="list-style-type: none"><li>1. Engage clinicians in using a bleed risk assessment tool by conducting an educational presentation around the risk model behind a calculator of choice</li><li>2. Provide data that supports the bleed risk stratification in the model via printouts</li><li>3. Demonstrate the tool in a meeting with clinical staff, and engage 25% of proceduralists in implementing the tool for six months.</li></ol>	By three months from today	Veronica Wilson
Develop new pre-procedure checklists that include noting risk assessment in the EMR, and roll out risk assessment tool to all staff.	<ol style="list-style-type: none"><li>1. Modify our pre-procedure orders policy to include bleed risk assessment.</li><li>2. Add acknowledgement of bleed risk score to the “time out” protocol.</li></ol>	Three months after Pilot effort completes, if positive feedback is shown.	Medical staff liaison



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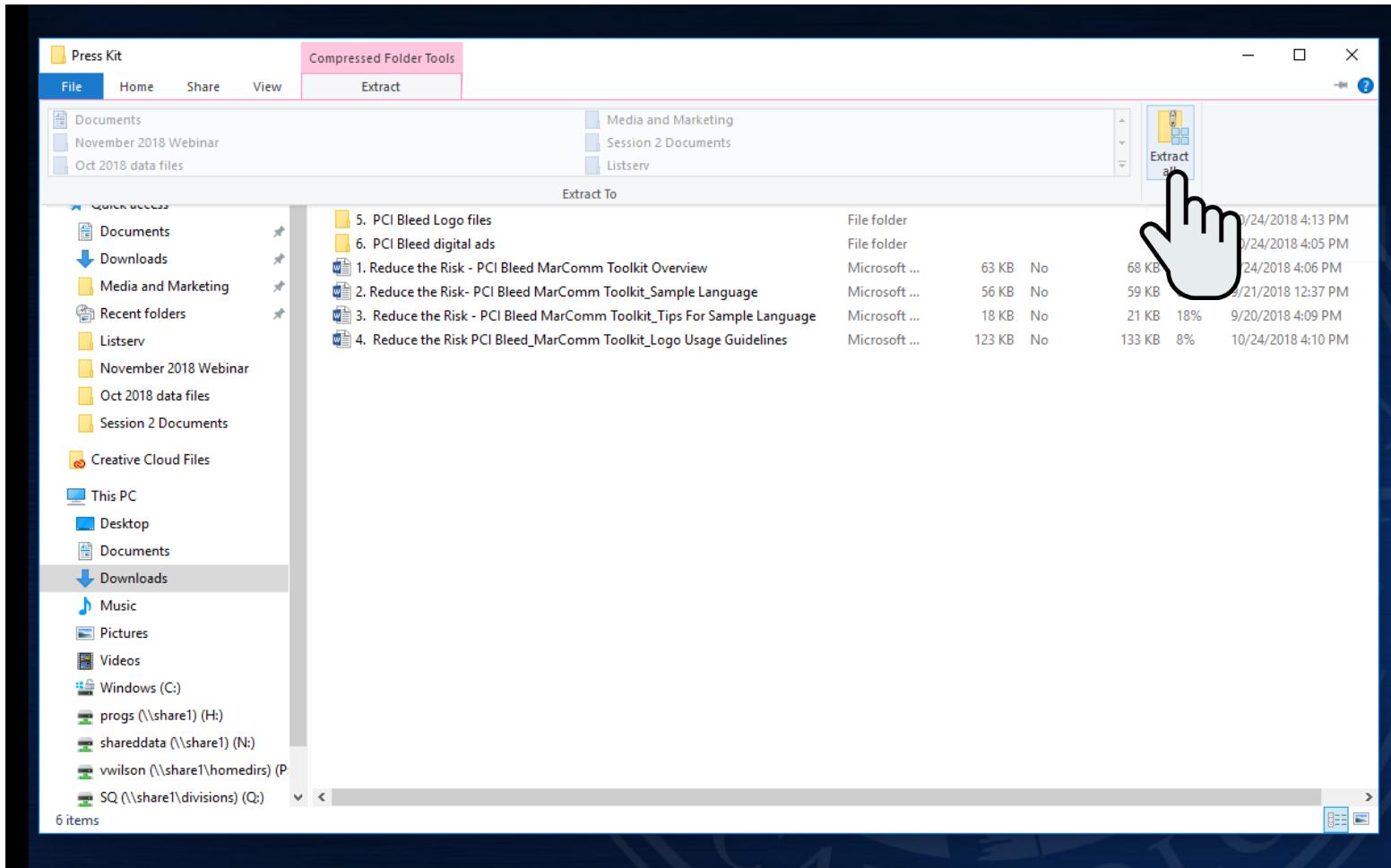
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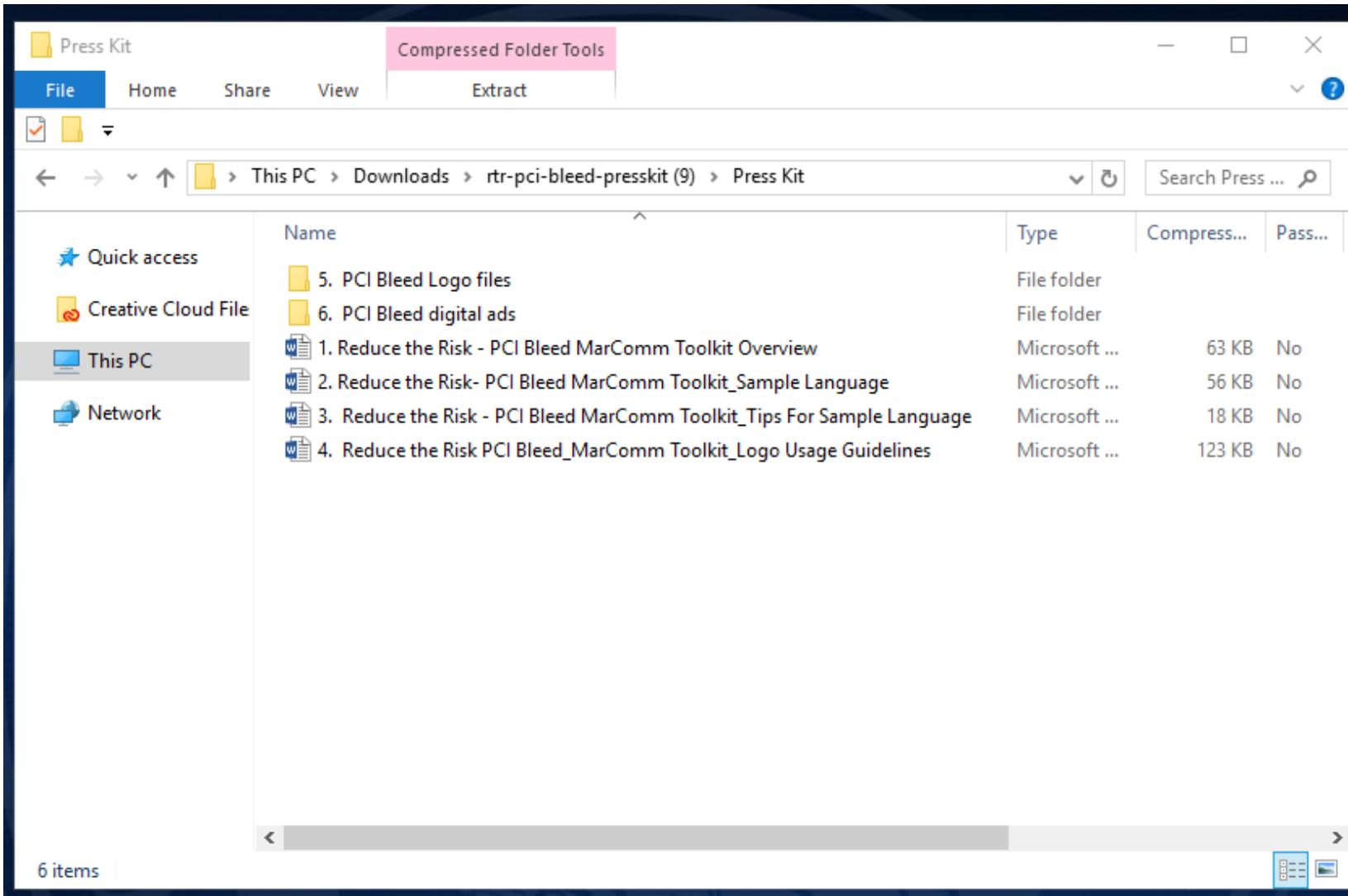
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Press Kit

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1. Reduce the Risk - PCI Bleed MarComm Toolkit Overview	Microsoft ...	63 KB	No
2. Reduce the Risk- PCI Bleed MarComm Toolkit_Sample Language	Microsoft ...	56 KB	No
3. Reduce the Risk - PCI Bleed MarComm Toolkit_Tips For Sample Language	Microsoft ...	18 KB	No
4. Reduce the Risk PCI Bleed_MarComm Toolkit_Logo Usage Guidelines	Microsoft ...	123 KB	No

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**--Dr. John Erwin,  
chairman of the  
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