SIMPLE SOLUTIONS.
BIG IMPACT.
KEY BENEFITS

Participation in Quality Improvement for Institutions offers:

• **Data-driven solutions and benchmarking tools** to improve patient outcomes and address common concerns about reimbursement and regulations.

• Access to a multitude of **quality improvement tools**, available for everyone on your care team.

• Comprehensive **quality improvement solutions** that combine ACC’s accreditation and registry services, quality initiatives and education.

• **Benchmark reporting** and physician level registry dashboards to compare individual performance.

• Opportunities to **collaborate with a community** of facilities committed to improving quality.

• Access to the QI Communications Kit, to promote your facility’s affiliation with ACC’s Quality Improvement for Institutions program and commitment to quality.

• Participation in NCDR research, ACC-sponsored quality campaigns and cutting edge pilot programs.

• Opportunities to **assess your facility’s performance** against others on key metrics for ACC quality campaigns.

• Resources to help you meet public reporting requirements.

• Ongoing customer support from the ACC.

• **Ready-to-go projects** designed to fit your organization’s needs.

QUALITY IMPROVEMENT FOR INSTITUTIONS

Quality Improvement for Institutions combines the American College of Cardiology’s (ACC) proven quality improvement service solutions and its comprehensive suite of cardiovascular registries. This innovative program helps facilities improve guideline adherence, reduce variations in care and enhance patient outcomes by providing the entire cardiovascular care team unlimited, on-demand access via one convenient website – CVQuality.ACC.org.

Quality Improvement for Institutions includes:

**NCDR®** – suite of cardiovascular data registries helping hospitals and practices measure and improve the quality of care they provide.

**Quality Campaigns** – proven, hospital-based efforts, including Door to Balloon (D2B), Hospital to Home (H2H), Surviving MI, Patient Navigator Program: Focus MI and other campaigns that disseminate evidence-based strategies and toolkits, promote best practice sharing, and build nationwide learning networks.

**Clinical Toolkits** – easy-to-use tools for ensuring the highest quality patient care.

**ACC Accreditation Services** – programs aimed to connect quality and cost with outcomes and patient satisfaction to create cardiovascular communities of excellence.

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**NCDR**

**Quality Campaigns**

**Clinical Toolkits**

**ACC Accreditation Services**
NCDR

20+ YEARS OF CONTINUOUS QUALITY IMPROVEMENT

NCDR is ACC’s suite of data registries helping hospitals, health systems and practices measure and improve the quality of cardiovascular care they provide. More than just data collection, NCDR is a comprehensive network of cardiovascular care providers committed to ensuring evidence-based care, improving patient outcomes and lowering health care costs. Learn more and get started at ACC.org/NCDR.

HOSPITAL REGISTRIES

The ACC offers registries supporting the following areas of cardiovascular care:

Acute myocardial infarction treatment
ACTION Registry® is a risk-adjusted, outcomes-based quality improvement program focusing exclusively on acute myocardial infarction patients. It assists organizations in applying ACC/American Heart Association Clinical Guidelines recommendations for ST-elevation myocardial infarction (STEMI) and non-ST-elevation (NSTEMI) treatments.

Atrial fibrillation procedures
AFib Ablation Registry™ assesses the prevalence, demographics, acute management and outcomes of patients undergoing atrial fibrillation (AFib) catheter ablation procedures. Its data support the development of evidence-based guidelines for AFib treatments that will improve patient outcomes.

Diagnostic cardiac catheterization and percutaneous coronary intervention
CathPCI Registry® assesses the characteristics, treatments and outcomes of cardiac disease patients who receive diagnostic catheterization and/or percutaneous coronary intervention (PCI) procedures. It delivers benchmarking data that helps cath labs reduce door-to-balloon times, limit procedural complications, monitor appropriateness of PCI and more.

Implantable cardioverter defibrillator and leads procedures
ICD Registry™ establishes a national standard for understanding treatment patterns, clinical outcomes, device safety and the overall quality of care provided to implantable cardioverter defibrillator (ICD) patients. The ICD Registry plays an important role in determining the association between evidence-based treatment strategies and clinical outcomes.

Pediatric and adult congenital treatment procedures
IMPACT Registry® assesses the prevalence, demographics, management and outcomes of pediatric and adult congenital heart disease (CHD) patients who undergo diagnostic catheterizations and catheter-based interventions. Its data support the development of evidence-based guidelines for CHD treatment that will improve outcomes for CHD patients of all ages.

Atrial fibrillation procedures
LAAO Registry™ captures data on left atrial appendage occlusion (LAAO) procedures to assess real-world procedural outcomes, short- and long-term safety, comparative effectiveness, and cost effectiveness. LAAO provides a treatment option to manage stroke risk for non-valvular atrial fibrillation patients who are unable to maintain adequate anticoagulation through medication therapy. The LAAO Registry is approved by CMS to meet the registry requirements outlined in the national coverage decisions for Percutaneous Left Atrial Appendage Closure.

Peripheral vascular intervention procedures
PVI Registry™ measures the prevalence, demographics, management and outcomes of patients undergoing lower extremity peripheral arterial catheter-based interventions, carotid artery stenting and carotid endarterectomy procedures. It enables clinicians to use decision-making data to implement changes to improve the quality of patient care – whether care is provided in a hospital cath lab, interventional radiology department or an outpatient vascular center.

Transcatheter valve therapy procedures
STS/ACC TVT Registry™ monitors patient safety and real-world outcomes related to transcatheter valve replacement and repair procedures – emerging treatments for valve disease patients. Employing state-of-the-art heart valve technology, transcatheter heart valve procedures provide new treatment options for patients who are not eligible for conventional heart valve replacement or repair surgery.
DATA POWERING RESEARCH

The NCDR encourages research applications from credentialed researchers, government agencies, educational institutions and corporations who are interested in using registry data to answer clinical questions on the delivery and outcomes of cardiovascular health care. Whether published as articles in peer-reviewed journals or presented during major scientific or medical conferences, these findings have a true potential to improve the quality of patient care.

NCDR offers two analytic services:

• **Web-enabled business intelligence data report dashboards** that allow hospitals, health systems and other stakeholders to tailor NCDR reports for comparison purposes, including monitoring the quality of data submissions and performing comparative analyses.

• **Custom analytics** that can be used to evaluate clinical data from real-world populations to gain a broad understanding of myriad issues, including safety, effectiveness and quality.

Finally, through ACC’s **Outpatient Registries Research Alliance**, practices that specialize in both cardiovascular care and diabetes have the opportunity to participate in research and access clinical trials, observational studies and investigator development programs. The Research Alliance provides a unique opportunity for practices to help advance the next generation of medicine.

OUTPATIENT REGISTRIES

The ACC offers registries for quality improvement in the following areas:

**Outpatient cardiovascular care**

PINNACLE Registry® focuses on coronary artery disease, hypertension, heart failure, atrial fibrillation and diabetes in the outpatient setting. Its HIPAA-compliant data collection tool works with most electronic health record systems, and its unique online dashboard delivers on-demand reports for viewing overall clinical care, accessing quality improvement best practices, and maximizing opportunities to earn incentives under the CMS Quality Payment Program and e-prescribing incentives.

**Diabetes and cardiometabolic management**

Diabetes Collaborative Registry® is the first clinical ambulatory registry aimed at tracking and improving the quality of diabetes and cardiometabolic care across the primary and specialty care continuum. The combined data from primary care physicians, endocrinologists, cardiologists and other diabetes care providers allows for longitudinal study of diabetes, making this a valuable resource that reveals new insights, drives decision-making, and enables better treatment and improved outcomes.

NCOR® is an initiative of the American College of Cardiology, with partnering support from the following organizations: CathPCI Registry® — The Society for Cardiovascular Angiography and Interventions; IMPACT Registry® — The Society for Cardiovascular Angiography and Interventions and American Academy of Pediatrics; STS/ACC TVT Registry™ — An initiative of The Society of Thoracic Surgeons and the American College of Cardiology Foundation; PVI Registry™ — The Society for Cardiovascular Angiography and Interventions; Diabetes Collaborative Registry® — American Diabetes Association, American College of Physicians, American Association of Clinical Endocrinologists and Joslin Diabetes Center; ACTION Registry® — The American College of Emergency Physicians.
ACC ACCREDITATION SERVICES

ACCREDITATION IMPROVES PATIENT OUTCOMES

ACC Accreditation Services is a Quality Improvement for Institutions initiative of the American College of Cardiology. To learn more, visit Accreditation.ACC.org, call 614-442-5950 or email accreditationinfo@acc.org

ACC Accreditation Services is a Quality Improvement for Institutions Initiative of the American College of Cardiology.

ACCREDITATION SERVICES OFFERS ACCREDITATIONS FOR THE FOLLOWING CV SERVICE LINES:

Chest Pain Center Accreditation is a quality improvement program designed for hospital cardiovascular (CV) teams that are focused on the efficient and effective emergency care of acute coronary syndrome (ACS) patients. A facility’s STEMI treatment capabilities and strategies dictate which of the three designations may be earned. A single facility may earn one of the following three accreditations: Chest Pain Center; Chest Pain Center with Primary PCI; and Chest Pain Center with Primary PCI & Resuscitation.

Cardiac Cath Lab Accreditation is an operational model that merges the latest science and process improvement methodologies across the Cardiac Cath Lab. It incorporates the most recently calculated measures that reflect patient care process performance. Designations for this accreditation include External Peer Review and Independent Angiographic Review for a confidential and objective audit of Cath Lab procedures and related metrics.

Heart Failure Accreditation is a collaborative approach to the treatment of heart failure patients. As a quality improvement initiative, it ensures that requisite protocols, processes and systems are established in the care of heart failure patients. Two Heart Failure Accreditation designations exist — one for facilities that must transfer or refer patients in need of a heart transplant or other more advanced types of mechanical circulatory support and an advanced designation for facilities that perform those more complex and invasive surgical interventions onsite.

Atrial Fibrillation (AF) Accreditation is a quality improvement program that examines the processes, policies, and practices aligned with the care of patients with atrial fibrillation (AFib). Through investigation and tracking of key measures for clinical performance, outpatient care data, and other key patient engagement metrics, the path to process improvement is calculated and a guideline-driven, strategic direction is created to reduce the overall burden of AFib. A facility may earn either AF Accreditation or AF with Electrophysiology and Surgical Services (EPS) Accreditation if providing full electrophysiology and surgical services.

Electrophysiology (EP) Accreditation is an operational model that merges the latest science and process improvement methodologies in the EP Lab setting. This accreditation encompasses both adult and pediatric EP labs and is supported by NCDR’s ICD Registry, AFib Ablation Registry, LAO Registry, and the IMPACT Registry for pediatric facilities. It incorporates the most recently compiled guidelines and expert consensus statements to produce the best possible care of the EP patient.

FreeStanding ED Cardiac Care Certification promotes process improvement and adherence to clinical guidelines among providers of emergency CV services within hospital outpatient departments or independent freestanding emergency departments. Tracking and trending of operational measures associated with the treatment of diagnosed and suspected cardiovascular diseases can lead to optimized medical interventions and better patient outcomes in the freestanding ED setting.
Clinical Toolkits, available through Quality Improvement for Institutions, provide hands-on tools to help institutions implement guidelines-based and best practice care, and address common clinical issues at their facility.

**QI TOOLS AND RESOURCES**
- QI Toolkit
- PCI Bleeding Risk Checklist
- Hospital to Home Toolkits
- Surviving MI Toolkit
- D2B Toolkit

**QI TOOLS FOR OUTPATIENT PRACTICES**
Implement these tools to improve quality in your outpatient facility, in the areas of early follow up, patients education, communication and stroke prevention.

**ACC MOBILE APPS**
The ACC has a number of clinical apps for use with smartphones and tablets to help clinicians implement quality at the point of care. Examples include:
- ACC Guideline Clinical App
- NCDR Clinical Quality Coach
- ASCVD Risk Estimator Plus
- LDL-C Manager
- ICD/CRT Appropriate Use Criteria App
- TAVR In-Hospital Mortality Risk App
- And many more

*For more information, visit [ACC.org/Apps](http://ACC.org/Apps) and [CVQuality.ACC.org/Clinical-Toolkits](http://CVQuality.ACC.org/Clinical-Toolkits)*

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**CLINICAL TOOLKITS**

**Clinical Toolkits**

**QI TOOLS AND RESOURCES**

**QI TOOLS FOR OUTPATIENT PRACTICES**

**ACC MOBILE APPS**

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HOSPITAL TO HOME CAMPAIGN

The Hospital to Home Campaign (H2H) is a resource for hospitals and cardiovascular care providers committed to improving transitions from hospital to “home” and reducing their risk of federal penalties associated with high readmission rates.

The H2H Campaign challenges communities to better understand and tackle readmission problems through the use of simple, targeted and actionable strategies in three core concept areas: early follow-up, post discharge medication management and patient recognition of signs and symptoms.

Key Strategies

See You in 7

The goal of the H2H See You in 7 Project is for all patients discharged with a diagnosis of heart failure (HF) or acute myocardial infarction (MI) to have a follow-up appointment scheduled/cardiac rehab referral made within seven days of hospital discharge.

Mind Your Meds

The goal of the H2H Mind Your Meds Project is for clinicians and patients discharged with a diagnosis of HF/MI to work together to ensure optimal medication management.

Signs and Symptoms

The goal of the H2H Signs and Symptoms Project is to educate patients to recognize early warning signs and develop a plan to take action.

Learn more and get started at CVQuality.ACC.org/H2H

DOOR TO BALLOON CAMPAIGN

The Door to Balloon Campaign provides hospitals with key evidence-based strategies and supporting tools needed to reduce D2B times through a worldwide learning community. National guidelines developed by the ACC and the American Heart Association state that hospitals treating STEMI patients with emergency PCI should reliably achieve a D2B time of 90 minutes or less.

Key Strategies

Emergency Department Physician Activates the Cath Lab

One Call Activates the Cath Lab

Cath Lab Team Ready in 30 Minutes

Prompt Data Feedback

Pre-Hospital ECG Activates the Cath Lab (Optional)

Learn more and get started at CVQuality.ACC.org/D2B

Quality Improvement for Institutions
SURVIVING MI CAMPAIGN

The Surviving MI Campaign seeks to increase the adoption of evidence-based strategies associated with lower 30-day risk-standardized mortality rates for patients hospitalized with acute myocardial infarction (MI) by creating a hospital learning network.

Key Strategies

The following strategies affect the whole hospital and different members of the cardiovascular care team including physicians, nurses, pharmacists and hospital administrators:

- Evidence-based Protocols and Processes in Place
- Nurse and Physician Champions
- Creative Problem-Solving Culture
- Regular Case Reviews With EMS Providers
- Cardiologist Presence Around the Clock
- Dedicated Nursing Staff Assigned to Cath Lab
- Pharmacists Involved With Care

Research indicates that each of these strategies can decrease 30-day mortality rates. Unfortunately, fewer than 10 percent of hospitals are consistently and routinely using at least four of these strategies. Changing organizational culture through the Surviving MI Campaign creates lasting change.

Get started at CVQuality.ACC.org/SurvivingMI

ACC PATIENT NAVIGATOR PROGRAM: FOCUS MI

The ACC Patient Navigator Program: Focus MI leverages evidence-based best practices to improve the care and outcomes of myocardial infarction (MI) patients and reduce readmissions.

This national program was designed for hospitals and health systems participating in NCDR's ACTION Registry. The program was built on the lessons learned from the initial pilot phase of the Patient Navigator Program that worked with select hospitals to implement interventions aimed at bridging gaps between inpatient and outpatient MI care through 30-day post-hospitalization.

Benefits

Participating hospitals and health systems have access to:

- Evidence-based toolkits
- Self-assessment tools
- ACTION Registry data collection tool
- A community of national experts, leading hospitals and institutions
- Patient-centered team-based approach to improving care for MI patients

Learn more at CVQuality.ACC.org/PatientNavigator