

# Partnership for Patients



ALASKA STATE HOSPITAL &  
NURSING HOME ASSOCIATION



Washington State  
Hospital Association

## VTE Prevention – Hospital Setting

**Baseline Rate: 2.74**

**Goal: 2.19**

1

•**Leadership: Select champions to lead the VTE initiative:** including Executive/Senior Leadership, Nursing, Pharmacy, Physicians and Clinical Decision Support.

2

•**Prevent:** Develop a **multi-disciplinary team** that involves front-line staff and providers in the development of the VTE prevention protocol.

3

•**Prevent:** Develop a **VTE prevention protocol that includes a standardized assessment of VTE and bleeding risk** that is tied to recommendations of VTE prophylaxis for each level of risk.

4

•**Prevent:** Develop a VTE prevention protocol that **reliably detects all patients at risk for developing a VTE** and that provides decision support regarding combination mechanical and pharmacological prophylaxis.

5

•**Prevent:** Develop a VTE prevention protocol that is **simple to use for the end-user and does not require complex calculations**, minimizes over-prophylaxis for low risk patients and decreases HA-VTE without any increase in bleeding.

6

•**Prevent:** Choose a **model to assess VTE and bleeding risk:** A Qualitative or Quantitative risk assessment model is the preferred tool over Prompts and Opt Out models.

7

•**Mitigate:** Implement a **plan for promoting patient mobility upon admission.** The plan should have explicit steps that can be individualized to the patient. Trigger reassessment of VTE risks when the patient does not meet ambulation goals.

8

•**Mitigate: Involve the family and patient during discharge planning** to ensure they understand the importance of post-discharge VTE prophylaxis, if prescribed. Educate patient and family members on early signs of VTE symptoms and instructions on who to contact.

9

•**Performance and evaluation: Design reliability into VTE prevention processes.** Hold physician and nursing staff accountable to established VTE initiatives. Identify outliers and provide customized training to target gaps in knowledge.

10

•**Moving towards zero: Involve Clinical Pharmacy in daily rounds** to ensure appropriate VTE prophylaxis. Leverage IT support to identify real time gaps in care and to signal appropriate next steps. Report out VTE metrics to all departments and Senior Leaders.