Checklist for Core Elements of Anticoagulation Stewardship Programs

The following checklist supports the *Core Elements of Anticoagulation Stewardship Programs*. This checklist should be used to systematically assess key elements and actions that are integral to successful anticoagulation stewardship efforts and high-quality patient care.

Healthcare organization administrators should work in tandem with healthcare staff knowledgeable in anticoagulation therapy, using this checklist as a guide to determine if essential support, resources, and initiatives are in place for optimal management of patients on anticoagulation medications.

As each healthcare setting is unique, it is recognized that no single anticoagulation stewardship program model will fit all facilities. As such, implementation of checklist elements may need to be customized, based on infrastructure and access to resources.

**Scoring:** Evaluate your organization’s current state and provide a score for each item using the following scale.

0 = Not yet addressed  
1 = Partially implemented  
2 = Fully implemented  
NA = Not applicable to organization

### 1. Secure administrative leadership commitment

<table>
<thead>
<tr>
<th>Score</th>
<th>A. Provides visible endorsement of stewardship efforts by incorporating anticoagulation-related priorities into organizational strategic plans or quality improvement action plans, reviews performance annually and holds itself accountable for stewardship goals</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>B. Budgets resources for development and ongoing support of anticoagulation stewardship activities that are appropriately matched to size, function and needs of the organization (e.g. dedicated positions, training, information technology support, etc.)</td>
</tr>
</tbody>
</table>

### 2. Establish professional accountability and expertise

<table>
<thead>
<tr>
<th>Score</th>
<th>A. Identifies a champion to serve as the program leader who is responsible for oversight of anticoagulation stewardship activities and achievement of related goals</th>
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<tbody>
<tr>
<td></td>
<td>B. Identifies one or more clinician(s) with advanced training and expertise in anticoagulation management to support the program leader in development, implementation and evaluation of stewardship activities</td>
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### 3. Engage multidisciplinary support

A. Identifies representatives from key areas to obtain valuable perspectives from all domains of the care delivery system, such as:

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<tr>
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<th>Surgical Provider(s)</th>
<th>Non-Surgical Provider(s)</th>
<th>Nursing</th>
<th>Pharmacy</th>
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B. Establishes a mechanism (e.g. standing committee) to solicit multidisciplinary input on stewardship program development, implementation and performance improvement

### 4. Perform data collection, tracking and analysis

A. Allocates information technology and data analytic resources to develop and implement necessary tools and processes for ongoing evaluation of anticoagulation stewardship activities and performance

B. Tracks processes and outcomes (including net clinical benefit) to evaluate the safety, efficacy and cost-effectiveness of anticoagulation-related care, such as:

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<th>Adherence to evidence-based clinical guidelines, protocols and/or policies related to anticoagulation</th>
<th>Adequate documentation of key anticoagulation information</th>
<th>Quality of anticoagulation management (e.g. TTR, INR &gt;5, etc.)</th>
<th>Adverse events (e.g. bleeding, thrombosis, medication errors)</th>
<th>Healthcare staff education on anticoagulant therapies</th>
<th>Patient/family/caregiver education on anticoagulant therapies</th>
<th>Safety and effectiveness of care transitions</th>
<th>Other(s)</th>
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C. Evaluates organizational performance of key measures annually to identify opportunities for improvement

D. Implements a mechanism for feedback to administrators, providers and other healthcare staff as to anticoagulation stewardship performance
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### 5. Implement systematic care

**A.** Develops and implements an institutional policy that addresses key anticoagulation stewardship aspects, such as structure and function of the program, delineation of roles and responsibilities of those caring for anticoagulation patients and need for baseline and ongoing monitoring.

**B.** Develops and implements evidence-based clinical guidelines, protocols, order sets or pathways that address common anticoagulation drugs, disease states or clinical situations, such as:

- Parenteral and oral anticoagulants
- Prevention and treatment of venous thromboembolism
- Stroke prevention in atrial fibrillation
- Cardiac valves
- Management of bleeding, reversal, and resumption of anticoagulants
- Perioperative management of anticoagulants
- Other(s)

### 6. Facilitate transitions of care

**A.** Implements standardized processes to proactively identify new or incoming patients receiving anticoagulant therapy and obtain relevant information to assure safe and effective anticoagulation therapy when care begins in the new setting.

**B.** Implements standardized evidence-based processes for periprocedural anticoagulation management.

**C.** Implements standardized processes to proactively identify current anticoagulant users transitioning to other care settings and communicates bi-directionally to assure that relevant information is shared and acknowledged to support safe and effective anticoagulation therapy when care begins in the subsequent setting.
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#### 7. Advance education, comprehension, and competency

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<tr>
<td><strong>A.</strong></td>
<td>Ensures that clinical expert(s) responsible for anticoagulation stewardship achieve and maintain their level of expertise through advanced training</td>
<td>❌</td>
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<td><strong>B.</strong></td>
<td>Establishes processes to ensure patients and caregivers receive and comprehend anticoagulation-related education, especially at each care transition, that is culturally appropriate, in the preferred language, and is presented at an appropriate health literacy level</td>
<td>❌</td>
</tr>
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**Checklist items scored as “not yet addressed” or “partially implemented” should be priorities for action, while “fully implemented” program elements should undergo periodic re-evaluation. To support areas needing improvement, high-quality resources from multiple organizations are available through the Anticoagulation Forum’s Centers of Excellence Resource Center ([excellence.acforum.org](http://excellence.acforum.org)).**