

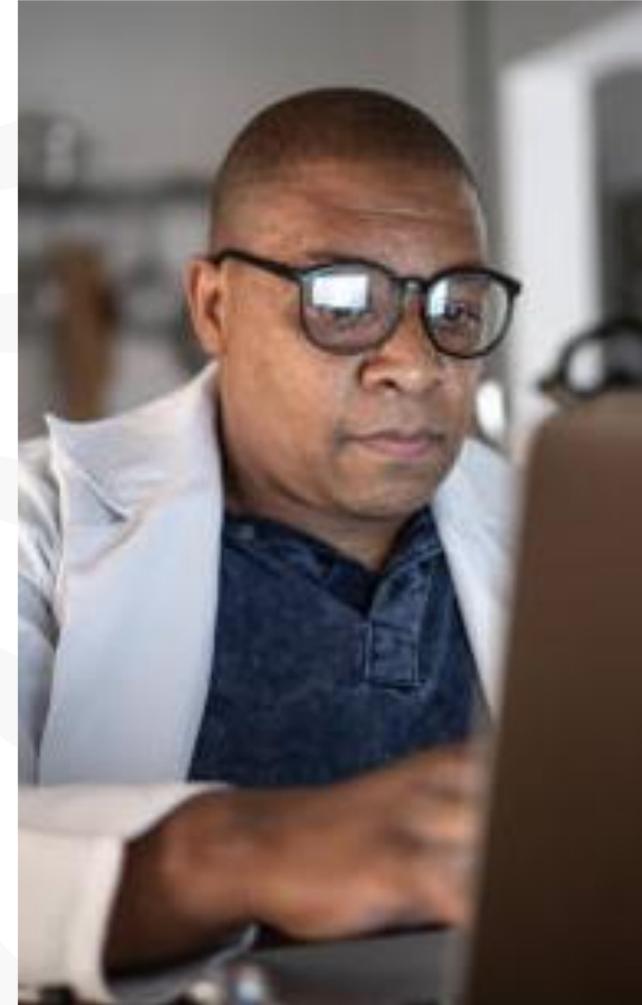
ACEP  
**PARTNER**  
COLLABORATIVE

# Clinical Policies & EM Accreditation Update

Sandra Schneider MD FACEP  
Kristin McCabe-Kline MD FACEP FAAEM  
FACHT

# Clinical Policies (Our guidelines)

- Currently have 21 clinical policies
- Each one takes about 18 months from start to publication
- Require robust evidence-based literature (several RCTs)
- Frequently downloaded: 10,000
- Frequently viewed: almost 20,000 unique views last year



# Current Policies

Blunt abd trauma

Heart failure

Ischemic stroke

VTE

Appendicitis

Asympt hypertension

CO poisoning

CAP

Early pregnancy

Fever <2 yo

Headache

tPA for stroke

Mild TBI

Non stemi ACS

Opioids

Procedural sedation/analgesia

Psych

Stemi

Seizure

TIA

Aortic Dissection

# In Progress

- Acute agitation
- Naloxone
- Asymptomatic hypertension in the elderly
- Telehealth in long term care
- Corneal abrasion

# How a Clinical Policy is created

- Start with a subject
- Create a critical question (or two)
- Literature search
- Grading of the evidence
- Subcommittee creates draft
- Final paper submitted for publication



# How a Clinical Policy is created

New this year:

- Creation of a quality metric or measure
- Used by groups to measure their performance
- Used by ABEM to measure group performance

# How Clinical Policies Are Used

1. One of the most valued member resources
2. Direct reference and source of truth for Emergency Physicians (academic and community)
3. Influential when working with C-Suite level executives  
re: resourcing
4. ABEM and Educational materials derived from ACEP Clinical Policy content
5. Medicolegal reference for any potential/actual litigation
6. Policymaker reference for federal/state/local infrastructure needs



What are you looking for?

Topics ▾

Practice ▾

Education ▾

American College of Emergency Physicians / Clinical Policies

## Clinical Policies

ACEP's clinical policies are developed by the Clinical Policies Committee, guided processes in accordance with national guideline-development standards. The policies are approved by the ACEP Board of Directors to provide guidance on the clinical management of emergency department patients. These ACEP Board-approved documents describe ACEP's policies on the clinical management of emergency department patients. These clinical policies are not intended to repres

# Clinical Policy Downloads

- Consistently the most downloaded and read articles when appearing in the *Annals of Emergency Medicine*
- Clinical Policies webpage received approximately 20,000 views during the last year representing greater than a 6% annual increase
- The policies viewed with consistently increased frequency are related to sudden, time sensitive medical emergencies but the greatest increase in frequency was for Acute Heart Failure Syndromes (300% increase)

# Website

## Point-of-Care Tools

ACEP's Point-of-Care tools are transforming care at the bedside. We've recruited the field's top experts and thought-leaders to develop tools our members can trust and deploy in the clinical setting. The evidence-based, clinical content provided in these tools ensures that you are providing the best possible care to the patients in your emergency department.

### ACEP Mobile\*

The ACEP app is here to give you what you need, when you need it.



\*Currently, only the tools below marked with the ACEP Mobile logo are found within the application.



### emPOC Mobile App\*\*

emPOC is available exclusively to ACEP Members.



\*\*Currently, only the tools below marked with the emPOC logo are found within the application.



### ADEPT

Confusion and Agitation  
in the Elderly ED Patient

LEARN MORE



### AFIB

Manage ED Patients  
that Present with Atrial Fibrillation

LEARN MORE



### ALTERD

Hepatic Encephalopathy

Recognition and Treatment of  
Hepatic Encephalopathy in the ED

LEARN MORE



### ASD

Manage Autism Spectrum



### Asthma Exacerbation

in the Emergency Department

Variable airflow obstruction and



### BEAM-ED

Bedside Examination

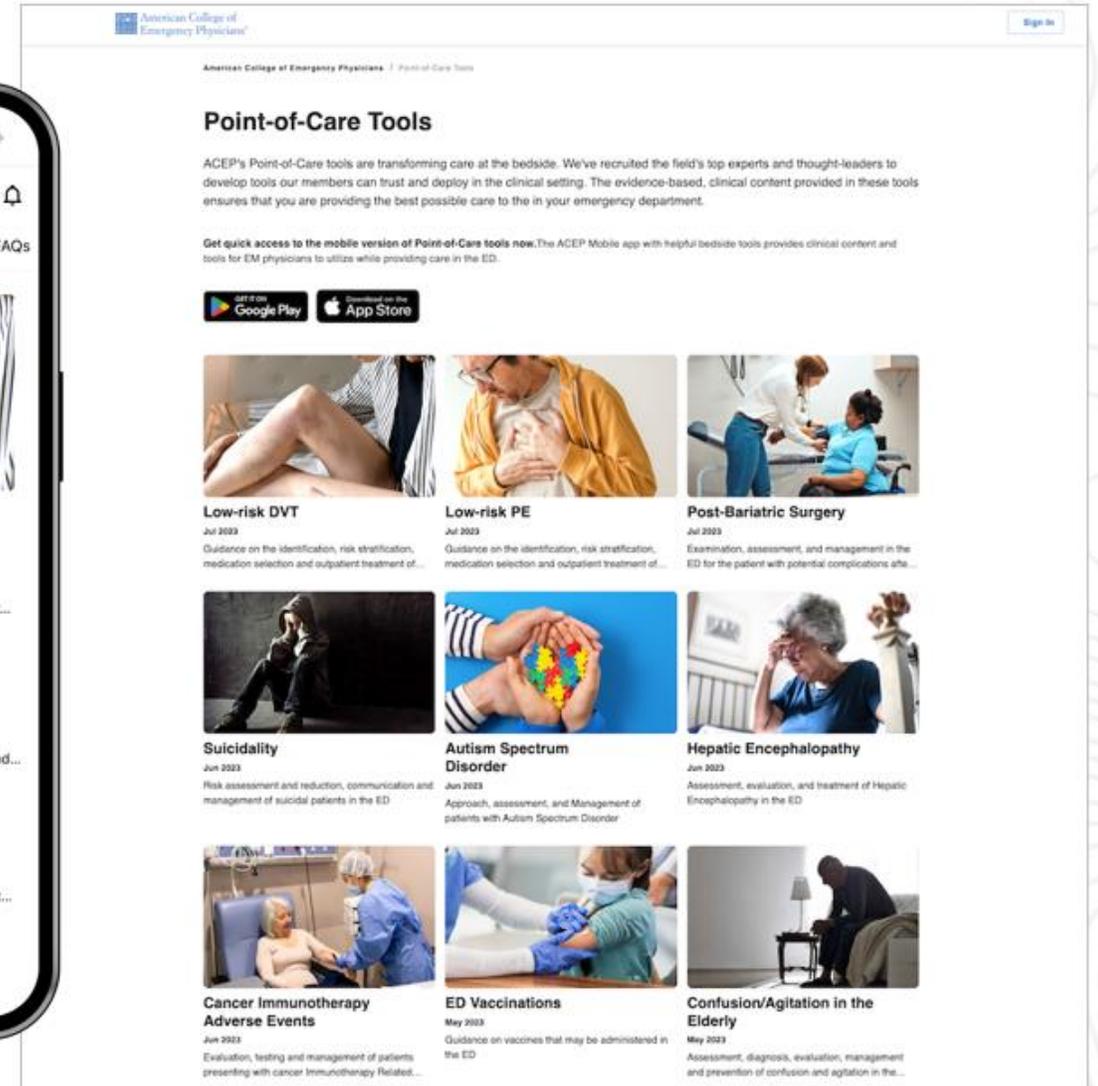
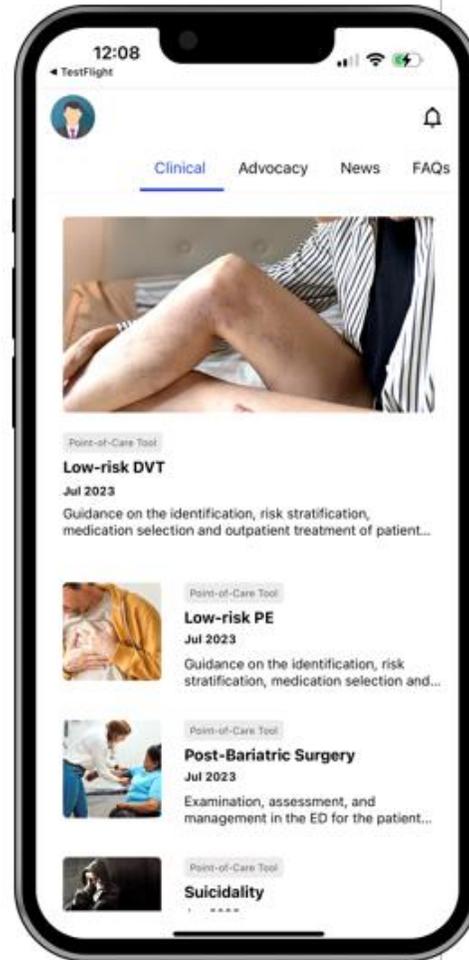


# Mobile App

## New Point-of-Care Tool website

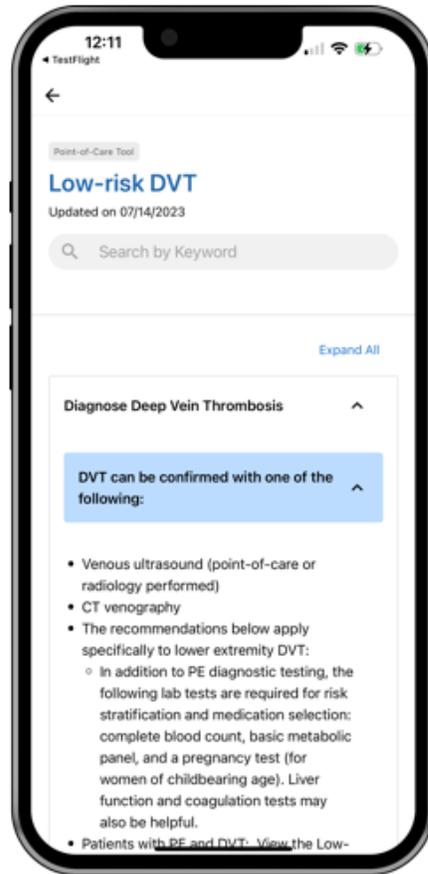
Eliminate the duplicate staff effort of adding new POC content:

- On the **ACEP Mobile** app by Tech Services
- On **ACEP.org** website separately by Communication/web



# Mobile App

## New Point-of-Care Tool website



The image shows a desktop website interface for the 'Low-risk DVT' tool. The header includes the American College of Emergency Physicians logo, a user profile 'Hello, Lillian Renner', and a 'Join ACEP' button. The breadcrumb trail reads 'American College of Emergency Physicians / Point-of-Care Tools / Low-Risk DVT'. A navigation bar contains a back arrow, 'Back to All Tools', the title 'Low-risk DVT', and the update date 'Updated on 07/14/2023'. The main content area starts with 'No description available.' and an 'EXPAND ALL' button. Below this is a list of sections, with the first section 'Diagnose Deep Vein Thrombosis' expanded to show a blue box containing the text 'DVT can be confirmed with one of the following:' followed by a bulleted list of diagnostic methods and management considerations. The list of sections includes: 'Diagnose Deep Vein Thrombosis', 'Risk Stratify DVT and Identify Patients Safe for Outpatient Management', 'Risk Stratify for Bleeding on Anticoagulation', 'Select and Start an Anticoagulant', 'Follow-up and Patient Education', 'Pearls and Pitfalls', 'References', and 'Acknowledgements'. At the bottom, there is a call to action: 'Get quick access to the mobile version of Point-of-Care tools now. The ACEP Mobile app with helpful bedside tools provides clinical content and tools for EM physicians to utilize while providing care in the ED.' and two buttons for 'GET IT ON Google Play' and 'Download on the App Store'.

# **Impact**

***Emergency Medicine Physicians are leveraging ACEP content in real time asynchronously to guide practice patterns and evolve infrastructure for emergency care throughout the USA and internationally.***



**QUESTIONS**



# Accreditation

# CUAP



Clinical Ultrasound Accreditation  
Program  
Demonstrates adherence with ACEP's  
Guidelines for ultrasound  
About the program  
Quality improvement  
Storage  
Cleaning of machine  
notifications

# CUAP PACED

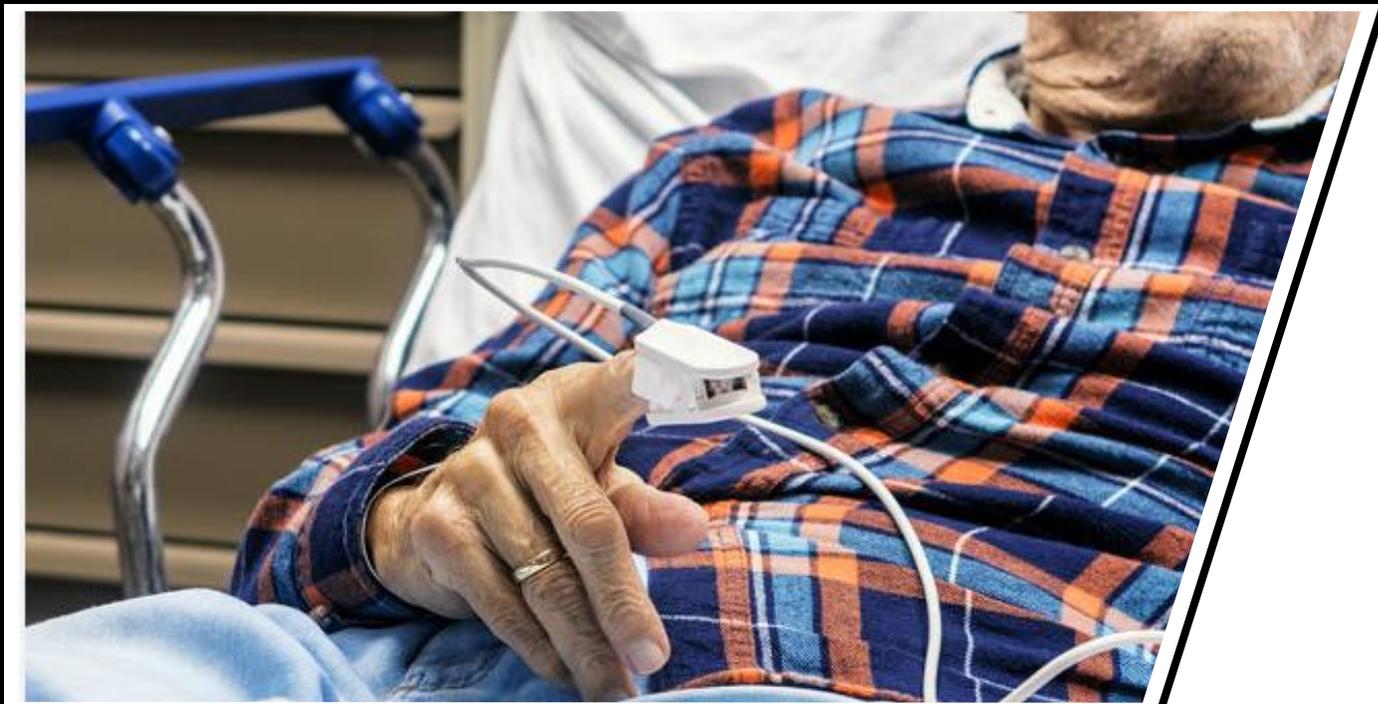


Pain and addiction care in  
the ED

3 levels

Opiate avoidance,  
overdose care/naloxone,  
addiction services

CUAP  
PACED  
GEDA



Geriatric ED Accreditation  
Improves care for geriatric  
patient – walkers, food,  
quality improvement  
3 levels  
Geriatric patients remain in  
community hospitals, fewer  
readmissions

CUAP  
PACED  
GEDA  
EDAP



ED Accreditation program  
Staffing, patient care,  
resources, well workplace

# ED Accreditation Program (EDAP) Task Force

Task Force worked to create worked to create criteria addressing the following areas:

- Physician Staffing (including Medical Director qualifications)
  - Clinical Care Team Staffing
- Quality Assurance and Metric Monitoring
- Hospital Policies -ED POCUS Availability
- Resources (i.e., Translation Services)

# **ED Accreditation Program (EDAP) Task Force**

## **Board of Governors**

**Marianne Gausche-Hill, MD, FACEP (Chair)**  
**Brahim Ardolic, MD, FACEP**  
**Merle Andrea Carter, MD, FACEP**  
**Kathleen J. Clem, MD, FACEP**  
**Jasmeet Singh Dhaliwal, MD, MPH, MBA**  
**Kelly Gray-Eurom, MD, MMM, FACEP**  
**Azita Hamedani, MD, MBA, MPH, FACEP**  
**Paul Kivela, MD, MBA, FACEP**

**James B. Mullen, III, MD, FACEP**  
**Todd Parker, MD, FACEP**  
**Nathaniel Schlicher, MD, JD, MBA, FACEP**  
**Heather Anne Marshall Vaskas, MD, FACEP**  
**Adnan Hussain, MD, FACEP**  
**Nicole Veitinger, DO, FACEP**  
**Kristin McCabe-Kline, MD, FACEP, FAAEM, FACHT (ACEP  
Liaison)**  
**Nicole Tidwell (ACEP Staff Liaison)**

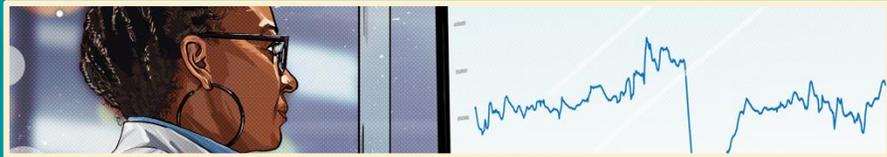
# ED Accreditation Program (EDAP) Task Force Potential Impact



- Improved Level of Infrastructure in all EDs
- Equipment and Resources Expectation Raised
- CONSUMER FACING ACCREDITATION STATUS SOCIALIZED
- Business Case from an ROI perspective
- Health Systems Leveraging ED Accreditation to Protect/Increase Market Share, Competitive Edge with Payors/Shared Risk Contracts, etc.



**QUESTIONS**



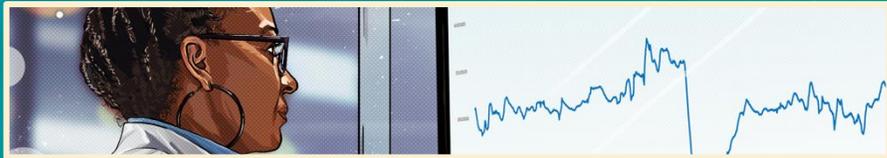
ACEP  
**PARTNER**  
COLLABORATIVE

# NEXT UP

11:30 am – 12:30 pm **Lunch** | Harmony A

12:30 – 1:30 pm

**Breakout Sessions  
& Coffee Chats**



ACEP  
**PARTNER**  
COLLABORATIVE

## NEXT UP

1:30 – 1:45 pm Break

1:45 – 3:00 pm Speed Networking  
Melody CF