

# Vascular Quality Initiative®

vascularqualityinitiative.org

## VQI Long-Term Follow-Up: Suggestions for Success

Consistent LTFU demonstrates commitment to quality patient care. In order to raise the LTFU rates for all VQI centers, high performing centers are eligible to receive a VQI participation award and be acknowledged in SVS/PSO publications. Completeness of LTFU reporting is a major component of VQI participation awards, in which high performers are recognized with star ratings and acknowledged in SVS/PSO publications. Centers with low performance on LTFU, defined as an average LTFU rate across all vascular registries of less than 50%, will be placed on probation. Centers with low rates will receive assistance from the PSO to improve LTFU, including this best-practice toolkit and a peer advisor. If a center's LTFU rate does not improve after one year on probation, the center's data will be excluded from research studies and from participation in industry trials, and physicians will not be able to use VQI data for the Physician Quality Reporting System (PQRS) or for Maintenance of Board Certification (MOC).

Below are some suggestions from high-performing VQI sites on how to improve your LTFU:

- A physician champion is critical to the success of LTFU. The physician champion communicates to his/her VQI team that LTFU is essential for good patient care and improved outcomes.
- Report cards that display the center's current LTFU rate and track improvement should be provided weekly or monthly to the VQI team (see how to run a report in Appendix). Report cards might also include lists of VQI patients who are due or past due for a follow-up visit.
- Some sites have tied hospital credentialing and staff evaluations/raises to the success of achieving LTFU of 80% or greater.

A VQI site that has 100% LTFU provided these tips for improving results:

- Start reviewing electronic records at the 9-month post-procedure time point
- Send a list of patients who need a follow-up appointment to office staff
- Key is to make a follow-up appointment at the time of the surgical procedure
- If no vascular appointment will be made inside the window of 9-21 months post procedure, use another appointment (i.e. PCP, endocrine, cardiac, oncology) to collect data
- If the patient will not be returning for an appointment, call at home. Calling outside of work hours is often successful
- Call the emergency contact in the medical record, if unable to reach the patient directly
- Internet Search- patient's name and city will bring up obituaries, new addressed or other family members to contact
- Email the patient if the address is given in the medical record.
- Call the patient's place of work as a last resort.

We look forward to working together with all of the VQI centers to enhance and acknowledge participation and improve quality of care for all vascular patients. Please contact Carrie Bosela if you have questions about this program ([c.bosela@svspsso.org](mailto:c.bosela@svspsso.org)).

## Best Practice when Generating the Procedure Requiring Follow-up Report

### Background

As a participant in the VQI Registry, you are required to record at least a single one year follow-up, 9 – 21 months from surgery date, for each procedure captured in the VQI Registry. For Hemodialysis Access procedure modules participants the requirement is to record both an early follow-up, 0 – 6 months from surgery date, and a late follow-up, 9 – 21 months from surgery date. The Procedures Requiring Follow-Up report is designed as a data management tool to help ensure an awareness of patient procedures that require follow-up data be recorded in the VQI Registry.

### Generating the Procedure Requiring Follow-up Report

The Procedures Requiring Follow-Up report is a reporting tool created to help you, as a user, understand what patient procedures are due for follow-up. It is best practice to generate this report on a regular basis (once monthly) to determine what patients have had a procedure that has yet to have their early, late or one year follow-up. It is highly recommended that you record, in the VQI Registry, all follow-up encounters with a patient as this data is valuable to the analysis of patient outcomes, however as stated about to meet the minimum SVS requirement for long term follow-up, it is required that each procedure entered into the registry have at least one long term follow-up recorded. Below represents the best practice for getting the most from your Procedures Requiring Follow-Up Report.

- To access the Procedures Requiring Follow-Up report go to the Tools tab within the Data Management section of the VQI Registry.
- Click on the link to access the Procedures Requiring Follow-Up report.



- From the parameters of the report you may select a particular Physician or All, and/or a particular procedure module or All.
- From the parameters of the report you will want to enter a Surgery Date From and a Surgery Date To date range. To find all patients/procedures that that have not had their long term follow-up you will want to enter a time period that is at least 9 months prior to the current date.
- From the parameters of the report you will want to enter a Without a Follow-Up Between and Months Since the Surgery range. It is recommended that you use the range of 9 to 21 months here, as that is the acceptable range for being considered a long term follow-up from date of procedure.

- Click the Submit button to generate the report.

As an example; to find all of the procedures with a surgery date of September 1, 2010 – December 31, 2010 that had not had their long term follow-up recorded you would respond to the prompts in the following way.

The list that is reported back to you would be all of the patients/procedures that do not have a follow-up with a Date of Contact that is in a date range that is 9 to 21 months from the recorded Surgery Date of the patient procedure. It is important to understand that the patient procedures in the reported list may have a follow-up recorded but, you will find that the recorded follow-up will not be within the 9 to 21 month post procedure date range. We recognize that some patient will are not available for a long term follow-up or may refuse to participate in a long term follow-up. In this case you are still required to record a follow-up in the Registry. You would create a follow-up record, enter the date you are creating the follow-up record as the Date of Contact and respond No Follow-Up Possible in the Contact By field before submitting the follow-up record.

## Status of your LTFU can be tracked in PATHWAYS

In the Tools Tab, select “Long-Term Follow-up (>= 9 months) Completion Rate by Procedure”

[Enter New / Find Existing Patients](#) | [Tools](#) | [Resources](#) | [Share a File](#) |

Tools



### Data Management Tools

- Incomplete Record
- Procedures Requiring Follow-Up
- Procedure & Follow-Up Data Download
- CAS Certification Data Download
- Long-Term Follow-Up (>= 9 Months) Completion Rate by Procedure
- Full Patient List

Pick your date range and hit submit to see your results

[Enter New / Find Existing Patients](#) | [Tools](#) | [Resources](#) | [Share a File](#) | [Analytics & Reporting Engine](#) |

Tools > Long-Term Follow-Up (>= 9 Months) Completion Rate by Procedure

Surgery Date From   Surgery Date To  

Procedure Type	Completion Rate*
Carotid Artery Stent	0%
Carotid Endarterectomy	70%
Endo AAA Repair	68%
Hemodialysis Access	96%
Infra-inguinal Bypass	69%
Lower Extremity Amputation	58%
Open AAA Repair	53%
Peripheral Vascular Intervention	57%
Supra-inguinal Bypass	69%
Thoracic and Complex EVAR	43%
Overall	66%

\* Exclude procedures less than 15 months after which the patient passed away.  
Only follow-ups with Contact By = Face to face or Phone or Other source are considered as valid in calculating the follow-up rate.  
Please note, follow-ups with Contact By = No Follow-up Possible and with Death of patient reported will be considered as valid.