

Mid-Atlantic Vascular Study Group

Data Manager Meeting

Wednesday, December 2nd 2015

1:30-2:30 p.m.

Agenda and Phone Bridge Instructions

Participant Instructions: Dial In: 1-866-590-2059 Access Code: 882772#

I. Welcome and Attendance

Data Manager	Facility	Attendance
Kathie Allen	Abington Memorial	
Kim Alfaro	Abington Memorial	
Karin Jonczak	Abington Memorial	
Deborah Murphy	Abington Memorial	
Cindy Dmitchik	Beebe Healthcare	
Elizabeth Richardson	Beebe Healthcare	
Kathryn Hundley	Beebe Healthcare	
Maria Albert	Christiana Care Health System	
Amy Pajula	Christiana Care Health System	
Jonelle O'Shea	Cooper University Hospital	
David Carey (Facilitator)	Geisinger Health System	
Kathy Levan (Regional Lead)	Geisinger Health System	
Pamela Orshaw	Guthrie Clinic	
Angie Young	Guthrie Clinic	
Brittany Miller	Guthrie Clinic	
Pat Gortych	Overlook Medical Center	
Margaret Mellow	Overlook Medical Center	
Tess Hollingsworth	Penn State Milton S Hershey	
Kim Paolini	Reading Hospital and Medical Center	
Lisa Baro	Reading Hospital and Medical Center	
Thomas Wojda	St. Lukes Hospital & Health Network	
Jennifer Lai	University of Pennsylvania	

II. Meeting Expectations

- A. Mid-Atlantic meetings will be held quarterly, ability to meet as needed for Special Projects
- B. Regional Lead will convey the minutes, any questions or concerns from these meetings to Carrie Bosela SVSPSO for review and presented to the Regional Data Manager Lead Meeting
- C. Information from the Regional Data Manager Lead Meeting will be conveyed during these Mid-Atlantic meetings

III. Discussion Items from Regional Data Manager Lead Meeting held September 23rd 2015

- A. Data Definitions - All in attendance are in agreement of the need for standardized definitions in conjunction with other registries, as well as source listings.
Any requests for changes reviewed quarterly by M2S and sent for review/approval. It will be up to the data managers to suggest changes to the definitions. Do we want to do this as a Mid-Atlantic project and select one modular at a time and identify which fields to review and submit changes quarterly?
- B. FAQs - Hard to search. Need for uniformity and consistency. All in attendance have experienced receiving inconsistent answers from Pathways Support when they have posed the same question more than once.
- C. Registry- Uniform frustration with registry as a whole. Do not feel that all participants should be required to obtain special project data on a case if their facility is not participating in that special project. Perhaps a

separate tab for those facilities participating could be added to their module. This would allow non-participating facilities to continue with-out additional burden.

All data module entry fields currently being reviewed and updates coming but no rollout date at this time.

IV. Long Term Follow-Up

- A. Completion Rate- Some facilities are experiencing difficulties in completing the required follow-up for the following reasons:
 - a. Multiple Modules with large volumes of cases. Concentration is focused on qualifying cases being entered. Follow ups are then completed as time allows because staffing is limited.
 - b. Often times this registry is not the sole position the abstractor holds within the facility.
 - c. Some facilities are entertaining the idea of switching to other registries where long term follow-up is not a requirement.
 - d. Facilities experiencing scenarios where a patient was seen just shy of 9 months or several days over 21 months (example: patients cancelling/rescheduling or Physician/Practice following standard of care guidelines) and thus falls out of the 9 to 21 month window. The visit does not count as complete. Do not feel facilities should be penalized for such scheduling events. Suggest the registry provides a 60 day grace period on each end of the 9 to 21 month window for these types of instances and instead it will be 7 to 23 months window.
Long term follow-up window pending approval to expand from 9 to 21 months, to 6 to 23 months from date of procedure.
 - e. Review/discuss LTFU attachment and STAR rating.

V. General Discussion

- A. Same Day Readmission - Currently if you have a patient that was readmitted the same day as discharge, the follow-up form will not allow you to use that discharge date as the follow up admission date, thus that data point is incorrect. This was brought to the attention of M2S by a facility approximately 1 year ago without correction of that data point on the LTFU forms with any of the recent upgrades to the system.
Same Day Readmission – M2S aware of issue and it is in que for correction. For now, input as the following day if readmitted in same day discharged. Ensure you note the correct date in the comment section.
- B. Electronic Medical Record Data Integration – Information is available if you want to look into this for your hospital. **Refer to attachment.**
- C. M2S System Down Time – M2S has changed their process when they have a system down time. When you log in and the system is unavailable, you should be taken to a statement page describing the anticipated system down time. Currently you need to contact M2S to see if the system is down.
- D. EVR Measurements Vendor Sheets – Can be used, but not intended to be scanned in as part of the medical record.
- E. Suggest Change to Physician Dictation – Change EVAR dictation template to include the measurements. Some facilities are working with the Radiology Department to have them include these measurements on the imaging reports.
- F. Mid-Atlantic Expansion – Chesapeake Vascular Study Group to merge with Mid-Atlantic Vascular Study Group. Possibly 12 new hospitals to join this group. Lehigh Valley Health System, Lancaster General Hospital, St. Lukes University Health Network, Holy Redeemer Hospital and Medical Center, Wellspan York Hospital, Hahnemann University Hospital, St. Mary's Medical Center, Indiana Regional Medical Center, Fresenius Vascular Care, Lankenau Hospital, Westmoreland Regional Hospital, Pennsylvania Hospital, Crozer-Keystone Medical Center
- G. Mid Atlantic Group Website
- H. Future topics for discussion could include data points per module, regional information, potential QI projects, Webinar by M2S on analytic and reporting engine.

VI. Next Meeting is Wednesday March 2, 2015 at 1:30 pm via phone conference.