

**2018 Participation Award Changes Webinar  
November 30, 2017, Question & Answer Session**

**Q: With regard to regional meeting attendance, why is only 3 points awarded for MD attendance when our institution sends 6 MDs on average to semi-annual regional meetings?**

**A:** Each Participation Award category is limited to 6 points in order to keep the categories balanced and the scoring fair across all centers. Giving a center 1 point for every MD in attendance would inflate the importance of meeting attendance in the overall score and bias the awards in favor of large centers.

**Q: More simply, when is the next round of scores being disseminated and are the scores being determined by the original set of standards?**

**A:** The 2017 Participation Awards will be announced in March 2018. The 2017 awards will follow the 2017 rules, meaning that the quality domain will not be a part of the 2017 scoring.

**Q: Does a poster presentation at the 2017 VQI Annual Meeting count toward this year's award system?**

**A: No.** For the 2018 Participation Awards, presentations, posters and publications must occur within 2018.

**Q: Will only cases with imaging between 9 and 21 months postop count for the EVAR imaging measure? Our physicians do their imaging studies at 6 months and then will see the patient at 1 year, but not usually with imaging. We still enter the 6 months image as a record. EVAR imaging at 6 months and then 18 months is out of compliance since that would be 24 months so outside the window.**

**A:** Imaging must occur between 9 and 21 months postop to meet this measure.

**Q: How does submission of one project per center work for health systems, as usually there is one report covering all centers? How will that be scored?**

**A:** Each center must submit its own project charter even if the same project is being performed across multiple centers in the same system. While the QI project can be the same across all hospitals, it is assumed, at minimum, that staff involvement will vary and baseline and goals could also be different. The SVS PSO is also interested in knowing how hospital-level variations impact system-wide quality improvement efforts.

**Q: Why are NP and PAs not counted as attendees for the group as they are providers like MDs?**

**A:** We have had lagging attendance from MDs and want to encourage attendance by physicians, who may have more responsibility for direction of patient care and quality projects. If an MD attends, they may bring PAs, NPs, nurses, program managers, data coordinators, residents or students, but we're not sure the reverse occurs.

**Q: Will this presentation be available to share with staff?**

**A: Yes. You can find a replay of the webinar and the accompanying slides in the Resources Tabs of Pathways and on the VQI website <https://www.vqi.org/vqi-resource-library/quality-improvement/>**

**Q: Where can we find the score for our region/hospital on the VQI website?**

**A: The 2016 Participation Awards can be found at [www.vqi.org/review-the-new-2016-vqi-participation-awards/](http://www.vqi.org/review-the-new-2016-vqi-participation-awards/)**

**Q: Why aren't physicians credited if they attend remotely? Some organizations have travel bans due to budgets.**

**A: Regions have reported varying degrees of success with remote attendance, both in terms of technology and participation. Given the overall lack of success, the standard rules do not provide credit for remote attendance. In instances where the technology works well and there is a high-level of participation by the remote attendees, we allow the regional leader to award credit to remote attendees.**

**Q: Can ASA and anti-coagulants prescriptions be considered an anti-platelet for compliance?**

**A: Yes**

**Q: Do you have a list of project ideas?**

**A: Primary sources of QI project ideas are the semi-annual reports, which include center-specific data on the VQI's two national quality projects. Additionally, you can also refer to the National Shared Area of the Members Only portion of the VQI website, where you can find presentations and case studies on QI projects undertaken by other VQI sites ([www.vqi.org/national-data](http://www.vqi.org/national-data)).**

**Q: Our site published on readmission  $\leq$  30 days for LEB in November/December 2017. Can we submit that? We are hoping to present at a 2018 regional meeting.**

**A: As long as the initial presentation and/or publication occurs in 2018, we will provide credit. Given this is not a new project, however, you cannot submit and get credit for a QI project charter.**

**Q: How can we measure our LTFU EVAR imaging if we can't filter cases done 9-21 months in the analytic engine? Can you fix it so we can see our improvement in this outcome in the analytic engine?**

**A: While we will not be able to provide EVAR LTFU imaging information in the analytic engine, information will continue to be provided in the semi-annual regional reports. The PSO will also provide center-level information on the national quality projects for the quarters in which the regional reports are not distributed.**

**Q: Does each site need to perform its own QA project or can a regional project qualify for all institutions that participate and qualify as its QA project for that year?**

**A: While institutions can participate in a regional project, each institution will need to submit its own project charter. The SVS PSO would like to know the staff involved in the project at each site and gain an understanding of the baseline metrics and improvement goals for each institution.**

**Q: How do you determine what is a significant improvement on LTFU or DC meds? A 10% improvement, a 20% improvement?**

**A: The SVS PSO will conduct the analysis and results will be determined by a statistical test of rates comparing the current year to the last year.**

**Q: Can you please review where we can find the project charter on the web and what it is called?**

**A: The QI project charter can be found at [https://www.vqi.org/wp-content/uploads/Project-charter-6.2017\\_formatted.docx](https://www.vqi.org/wp-content/uploads/Project-charter-6.2017_formatted.docx). This can be found in the Quality Improvement section of VQI Resource Library at <https://www.vqi.org/vqi-resource-library/quality-improvement/>. The document is called “QI Project Charter Form (Word version).”**

**Q: Just making sure since the new award system was not implemented in 2017, will any efforts towards QI made in 2017 be counted in 2018?**

**A: For QI project charters, we are looking for new quality improvement projects, which will be implemented in 2018. We will give credit for original posters/presentations/publications occurring in 2018, even if it was based on a 2017 QI project.**