



The Carolinas Vascular Quality Group
Bi-Annual Regional Meeting, SVS/VQI
The Grove Park Inn
May 6, 2016

Agenda

- 10:00am Welcome.....Dr. Jeb Hallett
- 10:05am -11:00am National PSO Update.....Jim Wadzinski
- 11:00am-12:00pm "Appropriateness in Vascular Care".....Dr. Philip Goodney
- 12:00pm - 1:00pm Lunch/Breakout Groups:
- Physicians: "Some new technical tip that I want to share with you".....Member Surgeons*
- Coordinators: "We're not in Kansas anymore.... navigating Oz".....Lorri Bennett RN,MSN,CCRC
Deborah MacAulay/Coordinator Group*
- 1:00-1:30pm Regional Reports.....Dr. Jeb Hallett/Membership
- 1:30- 2:30pm Quality Improvement Planning for 2016.....Dr. Jeb Hallett/Membership
- 2:30-2:45pm Regional Advisory Council: Nomination for additional members and selection of new regional leader of Regional Advisory Council (RAC).....Dr. Jeb Hallett/Membership
- 3:00pm Adjourn

Note: Please mark your calendars for our Fall Meeting on November 4, 2016.

Carolina's Vascular Quality Study Group
Spring Meeting, May 6, 2016
Minutes

Welcome/ Introductions: Dr. Jeb Hallett, Membership.

Refer to sign-in sheet for roll call of membership present.

National VQI Update: Jim Wadzinski (Guest Speaker- SVS/PSO).

- * 376 Centers in 45 States and Canada- 17 Regional Quality Groups.
- * VQI 1st Annual Meeting will be on June 18, 2016.
- * Updates on:
 - VQI Tool Kit - to be released at the VQI Annual Meeting.
 - Medicine Registry (anticipated release 3rd of 4th Quarter 2016)
 - Planned COPI Reports
 - EVAR Cost Pilot: MedAssets
 - EPIC Template for CEA integration in progress.
 - Regulatory
 - Meaningful Use/MACRA/MIPS/APM's
 - PQRS/QCDR
- * Pathways Development Update:
 - Upcoming Enhancements/reporting.
 - New PVI form- for release at VAM.
 - 2016 Q1 Projects: New PVI/EVAR/TEVAR registry updates.
 - CREST 2 Clinical Trial/ Lombard.
- *The VQI Registry is the first registry to be approved for an FDA Clinical Trial.
- * Interface between EPIC/Cerner will be important in the future.
- * Ideas for reports? -- If so, please connect with chairman of your region.

Appropriateness in Vascular Care: Dr. Philip Goodney (Guest Speaker)

* Challenges in "Appropriateness" and the VQI. Discussion: "Does participation in a quality improvement initiative may be associated with provision of more appropriate vascular care"- comparisons (patient characteristics, change in mortality, appropriate imaging, improvement in EVAR imaging).

Summary:

- Providing appropriate vascular care is a challenge- and a responsibility.
- Vascular care isn't easy, and simple participation alone in VQI won't get us there.

- Collaboration in QI efforts appears to be associated with opportunities for improvement and more "appropriate" care.

- Look for chances to engage in projects related to more "appropriate" vascular care in VQI.

Lunch/Breakout Groups:

The Physician's Luncheon:

"Some new technical tip that I want to share with you" Dr. Jeb Hallett/Member Surgeons

The Coordinator's Luncheon:

"We're not in Kansas anymore...navigating Oz"Lorri Bennett RN,MSN,CCRC/Member Coordinators

Note: The Minutes for the Coordinator's Luncheon are pending/separate from these minutes.

Regional Reports and Regional Quality Initiatives: Dr. Jeb Hallett

(Please refer to your individual facility Regional Reports for data analysis.)

- * Purpose was to identify areas of greatest variability, ask "the best" to share tactics, and derive consensus on how to improve.
- * LTF/VQI Toolbox/VQI Best Practices discussed.
- * Development of National VQI Patient Appointment Card (courtesy of the CVQSG!)
- * Review of the data: comparison of Regional & National.
- * Areas for the Carolina's to be involved include: Hemoaccess, IVC Filters, Varicose Veins, Vascular Medicine, Complex Aortic Aneurysms.
- * Areas to improve include: Rx of discharge statin/ASA, ABI documentation, use of US for arterial puncture, hardwiring CEA LOS.
- * Our region is involved with 3 National QI Projects:
 - (1) Statin/AP Therapy
 - (2) Follow-up Imaging after EVAR
 - (3) Appropriateness of care

Council Updates: (Dr. Jeb Hallett)

RAC

- * Approved Project list is online.
- * National Proposals New Portal for Submission: <http://abstracts123.com/svs1/>
- * Demo of site.
- * New Chair of the CVQSG RAC: Dr. Thomas Brothers.
New Vice Chair of the CVQSG: Dr. Rhabuveer Vallabhaneni.
New committee member: Dr. Leila Mureebe.

Governing Council: Dr. Hallett will be coming off of the General Council in 2017- will take nominations/vote at the November Fall Meeting.

Pending Appointments needed: Chair Regional Arterial Committee and Chair Regional Venous Committee.

Please notify Dr. Hallett if you are interested in either position.

General Council meeting at VEITH: (Guest Speaker: Dr. P. Goodney):

Dr. Goodney provided an overview of the Audit Subcommittee's efforts to link patients in the VQI to their respective Medicare claims for long-term outcomes such as stroke, amputation, need for further procedures, and overall survival. In the near future, VQI participants will be able to link to clinical-claims datasets as an ongoing mechanism for long-term effectiveness evaluation.

Regional General Session:

* **VOTE: Transparency re: LTF Rates.** There was discussion regarding whether or not each individual center would the opportunity to either opt in or opt out (blinded vs unblinded %). The VQI uses 80% as the LTF goal.

-National VQI Motion: The Carolina's Vascular Quality Study Group (regional group) votes for transparency regarding each member's Long Term Follow-up Rate (percentage).

-Voting Result: Motion did NOT pass.

-The following was agreed upon: (1) CVQSG recognize top "Stars" only- if the top star wishes to reveal who they are (ie: unblind themselves to the group). Vote to keep data blinded, and revisit in 6 months at the Fall Meeting. All sites agree that there must be a unanimous vote for regional group to unblind data.

***VOTE: Discussion regarding the length of the VQI forms** from 1 page to >10 for some registries. TAVAR form "too long" to fill out- same with PVI and EVAR. The length of the forms has hindered using the registry for Hemoaccess, IVC Filter, Varicose Vein, PVI, EVAR, and Amputation modules. Recommendation came from the floor to separate the registry into "Research Forms" vs "Light Forms".

-Motion made: "Recommendation that the VQI Forms be simplified so that they can be easily abstracted."

-Voting Result: Motion passed. Dr. Hallett to bring motion forward to National VQI Committee.

* **Discussion items for the November Fall Meeting:**

- (1) Compare/contrast symptomatic CEA data vs. asymptomatic CEA data.
- (2) Evaluate regional re-admit rates (across all modules) for variation.

The meeting was adjourned at 3:00pm by Dr. Jeb Hallett.

Respectfully Submitted,

Lorri Bennett, RN, MSN, CCRC

John "Jeb" Hallett, MD

Date

Addendum June 20, 2016: Dr. Hallett completed his term on the National PSO Committee.