

CVQG

May 7, 2021

1000 am – 1230 pm

Meeting Status – Virtual

Respectfully submitted by: Lynne Hampton Data Manager behalf of Katharine McGinagle, MD, MPH, Regional Medical Director

Participation Award and CE/CME Credit only available if attendee has signed in with full first and last name. For Fellows and Residents please add “MD” and associated center.

See Power Point slide deck posted on VQI.org for detailed presentation.

Agenda:

Regional Data Review

Katharine McGinagle, MD, MPH, Carolina’s Regional Vascular Surgery Group

Learning Objectives:

- Use the VQI regional reports to establish quality improvement goals for the vascular patients (outcomes) and for their center (process).
- Interpret and compare each centers’ VQI results to regional and national benchmarked data.
- Learn, through group discussion the VQI regional results to improve the quality of vascular health care by monitoring measurable performance indicators, SVS PSO evidence-based research, and outcomes.
- Identify high performing regional vascular centers to discuss variations in care and clinical practice patterns to improve outcomes and prompt quality improvement recommendations for vascular care patients. Sharing of best practices/pathways of care.
- The importance of completing data sets was emphasized, so as to be accurately reflected when reports are calculated.

Summary:

1. The CVSG region overall has slid in a negative way for most of our metrics. There has been a decrease in LTFU rate and an increase in mortality/outcomes, hopefully this trend will correct itself as we emerge from Covid-19, we will need to keep an eye on this trend.
2. Congratulations to our members who participate in the PVI registry our ABI/TBI rate prior to procedure is 85% compared to national VQI at 75%.
3. It was requested that smoking status be included in the reporting for PVI module

Regional QI Proposal

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 - Interpret and compare each centers' VQI results to regional and national benchmarked data.
 - Learn, through group discussion the VQI regional results to improve the quality of vascular health care by monitoring measurable performance indicators, SVS PSO evidence-based research, and outcomes.
 - Identify high performing regional vascular centers to discuss variations in care and clinical practice patterns to improve outcomes and prompt quality improvement recommendations for vascular care patients. Sharing of best practices/pathways of care
- **Regional QI Project Presentation**
 1. Wake Med Health and Hospitals Raleigh NC shared their process for improving compliance with antiplatelet therapy and statin medication at discharge. They utilize the Kaizen/PDSA method for PI. This process was used to increase D/C medication compliance from 86% to 90% for all patients entered into VQI starting 10/2019. The goal of 90% was exceeded in 6 of the registries.

National VQI Update

Jim Wadzinski PSO Support Person, SVS PSO

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Summary:

1. There is a new opportunity in which VQI wants to help trainees learn about QI and VQI. Working to develop a more formal program to mentor and train medical students, residents and fellows in VQI, quality improvement and the workings of the PSO.
2. The FDA will be working with PSO to share safety notifications. There are sections on VQI webpage and in newsletters.
3. Jim gave an update on QI activities including Qi charters and help available if needed
4. Update provided on Participation Award for 2021, whether or not LTFU will be included

Council Updates (AQC, VQC, RAC, Governing Council)

1. The PSO has established a Diversity Committee, chaired by Dr. Leila Mureebe.
2. Dr. Chandler Long from Duke will be the Associate Medical Director for our region
3. AQC Dr. DeMartino is the new chair. looking to standardize data definitions and major updates for modules of Infra/Supra, oAAA and amputation.
4. VQC Dr. Sheehan shared that Dr. Marc Passman is the chair. Dr. Sheehan shared the 3-year goals for the VQC.
5. RAC Dr. Genovese reviewed the research proposal process. Looking for residents to present at the Fall meeting. She encourages cross-institution research collaborations.
6. GC update- strategic priorities include continued partnership with ACC, working on the PSO trainee Scholarship program and linking research and QI projects

Action Items:

1. Focus on LTFU and reaching back out to patients who may have been more likely to get lost to follow up with Covid-19
2. Our outcomes and mortality rates have slipped slightly, be mindful of these as we emerge from Covid-19.

Open Discussion/Next Meeting/Meeting Evaluation

1. Fall 2021 meeting will be VIRTUAL on **Friday November 5 9:00 am -12:00 pm** and will include breakout rooms for data management, quality improvement projects, and research projects