

Carolinas Vascular Quality Group - CVQG

Friday, May 5, 2023

10:00am – 4:00pm Eastern Time

The Restoration Hotel – Asheville, NC Hybrid













Meeting Attendance Credit



Before we get started...

Please sign in using your <u>Full Name</u> (First and Last).

In-Person Attendees – Scan the QR code shown and sign in

Remote Attendees – See below instructions (#1-#3)

- 1. Click "Participants" in the box at the top or bottom of your screen.
- 2. If your full name is not listed, hover next to your name and you'll see "rename".
- 3. Click and sign in.



Please note: If you can't sign in, please email Leka Johnson at ljohnson@svspso.org and let her know the identifier you were signed in under (ex –LM7832 or your phone number).

**SPECIAL NOTE: ALL ATTENDEES must have an ACTIVE PATHWAYS user account to get attendance credit!!!













Agenda-Carolinas VQG-May 5, 2023



Time	Topic	CE Credit
10:00 am	 Welcome Regional Data Review – Katharine McGinigle, CVQG Medical Director 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. 	Yes
11:00am	 Regional QI Proposal - Katharine McGinigle, CVQG Medical Director 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. 	Yes

















Time	Topic	CE Credit
12:00 pm	Lunch	No
1:00 pm	 National VQI Update –Caroline Morgan, RN, PSO Director of Clinical Operations Learning Objectives: Use the VQI regional reports to establish quality improvement goals for the vascular patients (outcomes) and for their center (process). 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. 	Yes
2:00 pm	Break	No
2:15 pm	AQC Update - Caroline Morgan	No
2:30 pm	VQC Update – Caroline Morgan	No
2:45 pm	RAC Update – Caroline Morgan	No
3:00 pm	Governing Council Update – Katharine McGinigle, MD	No
3:15 pm	Case Presentations	No
3:45 pm	Nomination Results/Discussion	No
4:00 pm	Open Discussion/Next Meeting/Meeting Evaluation	No













Disclosure



None













Welcome and Introductions



Alamance Regional Medical Center

Anmed Health

Atrium Health Cabarrus

Atrium Health Pineville

Atrium Health Union

Beaufort Memorial Hospital

Cape Fear Valley Health

CarolinaEast Medical Center

CaroMont Regional Medical Center

Catawba Valley Medical Center

Cone Health

Duke University Medical Center

Lexington Medical Center

Margaret R. Pardee Memorial Hospital

McLeod Health

Medical University Hospital Authority

Mission Hospital

MUSC Health Columbia Medical Center

MUSC Health Florence Medical Center

New Hanover Regional Medical Center

Novant Health Forsyth Medical Center

Novant Health Matthews Medical Center

Novant Health Presbyterian Medical Center

PineHurst Surgical

Prisma Health Richland

Regional Medical Centers of Orangeburg and Calhoun Counties

Rex Hospital, Inc.

Roper St. Francis

Sanger Heart and Vascular Institute

Self Regional Health

Spartanburg Regional

St. Francis Hospital Downtown

Trident Medical Center

University of North Carolina Hospitals

Vidant Medical Center

Wake Forest University Baptist Health Medical Center

WakeMed Health & Hospitals-Cary Campus

WakeMed Health & Hospitals-Raleigh Campus

Wayne UNC Healthcare















Region Volume Appendix

The Region Volume Appendix provides your region's case volumes for each report. In addition, the number of centers with cases contributing to each report is given. Note that columns referencing complete cases are appropriately left blank for non risk-adjusted reports.

Report :	Included Cases	Centers with Included Cases	Centers with at least 10 Included Cases	Complete Cases	Centers with Complete Cases	Centers with at least 10 Complete Cases
Procedure Volume	8843	35	33			
Procedure Volume, All Years	75896	39	39			
Long-Term Follow-up	7893	33	31			
Discharge Medications	8075	35	33			
Preop Smoking	7250	35	33			
Smoking Cessation	1902	27	21			
TFEM CAS ASYMP: Stroke/Death	116	13	4	94	12	3
TFEM CAS SYMP: Stroke/Death	180	14	8	161	14	6
TCAR ASYMP: Stroke/Death	521	29	19	503	29	19
TCAR SYMP: Stroke/Death	258	27	14	244	26	14
CEA ASYMP: Stroke/Death	878	24	20	823	24	19
CEA ASYMP: Postop LOS>1 Day	873	24	20	821	24	19
CEA SYMP: Stroke/Death	390	22	13	371	22	13
CEA SYMP: Postop LOS>1 Day	386	22	13	367	22	13
EVAR: Postop LOS>2 Days	626	18	16	570	18	15
EVAR: Sac Diameter	521	19	17			

Report :	Included Cases	Centers with Included Cases	Centers with at least 10 Included Cases	Complete Cases	Centers with Complete Cases	Centers with at least 10 Complete Cases
EVAR: SVS AAA Diameter Guideline	548	18	16			
TEVAR: Sac Diameter Reporting	142	8	4			
OAAA: In- Hospital Mortality	194	11	8	152	11	7
OAAA: SVS Cell-Saver	172	11	8			
OAAA: SVS Iliac Inflow Guideline	179	12	7			
PVI CLAUD: ABI/Toe Pressure	1215	18	18			
INFRA CLTI: Major Complications	626	16	14			
SUPRA CLTI: Major Complications	114	11	4			
LEAMP: Postop Complications	337	4	4			
HDA: Primary AVF vs. Graft	95	3	2			
HDA: Ultrasound Vein Mapping	133	3	3			
HDA: Postop Complications	133	3	3			
IVCF: Filter Retrieval Reporting	34	2	2			

Spring 2023 SVS VQI Regional Report Slides



The VQI Regional Quality Report is produced semiannually to provide centers and regions targeted, comparative results and benchmarks for a variety of procedures, process measures and postoperative outcomes.

The following updates have been implemented to enhance and improve the Spring 2023 VQI Regional Quality Report:

- **Preop Smoking Report Added** A preop smoking report is now provided. This report displays center-level, regional, and VQI overall rates of current smoking at time of procedure.
- **Smoking Cessation Report Added** A smoking cessation report is now provided. This report displays center-level, regional, and VQI overall rates of smoking cessation at follow up.

• https://www.vqi.org/wp-content/uploads/SPRING 2023 REGIONAL REPORT SLIDES CAROLINAS REVISED.html

Regional Improvement Projects



2022 Regional Quality Improvement Charters

LTFU

- Forsyth Medical Center, Laura Myers Lead
- Dr. Shawn Fleming/Dr. Phillip Moore Physician Champions

Pre-Procedure ABI TBI for PVI CLI

Wakemed Health & Hospitals – Raleigh; Sheila Debastiani – Lead (no longer at center)
 Ellen Dillavou, MD Physician Campion

LTFU

- Self Regional Health; Jennifer Clary Lead
- Dr. Lanford Physician Champion
- Lecia Segaard will represent the center for Charter discussion

EVAR LTFU Sac Diameter

- McLeod Health; Christy Hall Lead
- Dr. Rzucidlo Physician Champion

CROW AND CONFESS!!





Group Discussion



 How are centers using VQI patient level data outside of the PSO reports





National VQI Update

Caroline Morgan, RN **PSO Director of Clinical Operations**







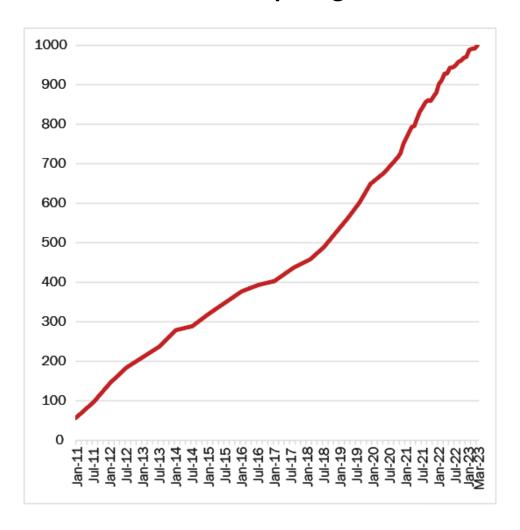








Number of Participating Centers



Location of VQI Participating Centers











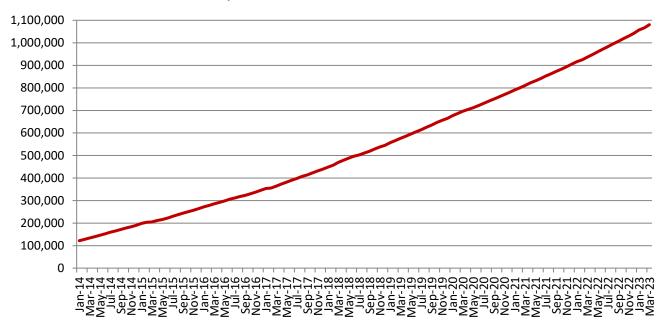






TOTAL PROCEDURES CAPTURED (as of 4/1/2023)	1,080,461
Peripheral Vascular Intervention	373,148
Carotid Endarterectomy	192,093
Infra-Inguinal Bypass	81,019
Endovascular AAA Repair	80,103
Hemodialysis Access	76,335
Carotid Artery Stent	96,355
Varicose Vein	61,164
Supra-Inguinal Bypass	25,887
Thoracic and Complex EVAR	28,692
Lower Extremity Amputations	28,322
IVC Filter	18,290
Open AAA Repair	17,727
Vascular Medicine Consult	1,162
Venous Stent	164

VQI Total Procedure Volume



Total Procedure Volume reflects net procedures added to the registry for the month























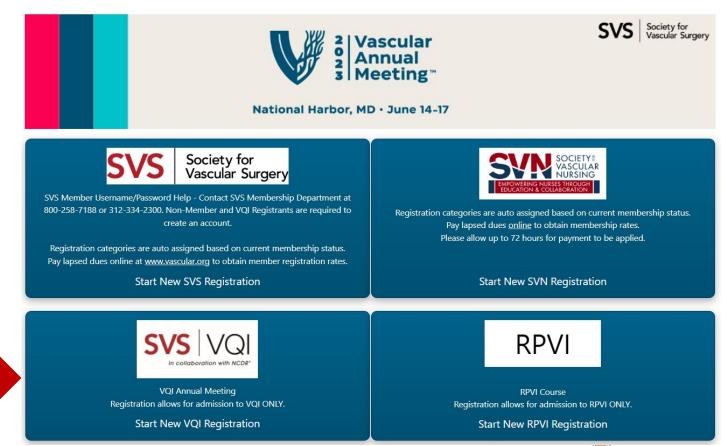




VQI@VAM Registration Link



https://www.compusystems.com/servlet/ar?evt_uid=805









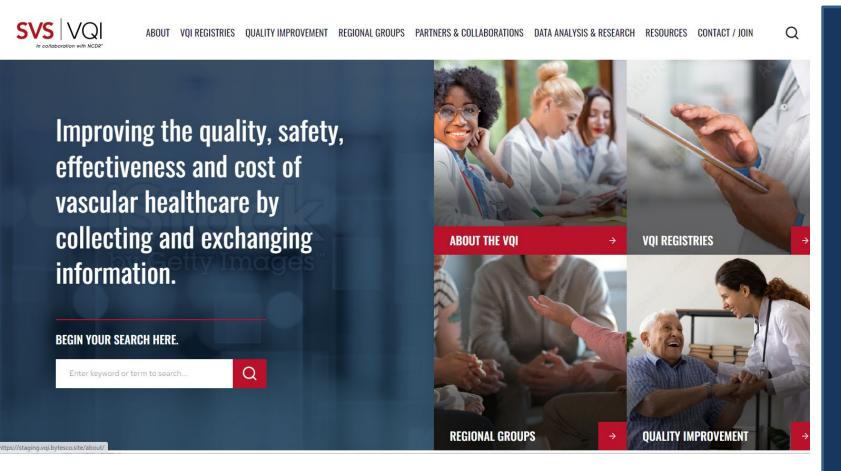






A Brand New VQI.org!





- The addition of 14 registry specific pages
- More robust search capabilities, so customers can easily get the information they need
- Clean presentation of content
- Consistent menu options for each of the 18 Regional Group Pages.
- Streamlined Members Only area













Welcome



Jeff Yoder – Statistician

- Start Date December 2022
- M.S. degree in Statistical Science from Indiana University
- Teaching assistant at Indiana University.



Working with the PSO Analytics team on a variety of projects and initiatives.













National Updates



Infra/Supra Inguinal Bypass Revisions live March 30, 2023

New National Quality Initiative Smoking Cessation to be announced at

VQI@VAM

- Data Integrity Audit Program
- Risk Calculator
- Follow-up reports:
 - IVC Filter and Varicose Vein
- Coming soon:
 - Harmonization of CAD variables
 - Harmonization of Anticoagulation
 - Open AAA Registry Revision















Registry Revisions



- SVS PSO recognizes need to reduce number of registry variables while maintaining balance between QI & research/publishing
- Work underway to decrease data entry burden
- Registry committees have begun reviewing variables
 - Possible variable retirement
 - Marking variables as mandatory versus NOT mandatory for record completion
- Variables required for reporting measures, industry projects & guideline/AUC recommendations will be taken into consideration
- Progress being made with data integration between EMRs & VQI. Updates provided at the VQI Annual Meeting















Data Integrity Audits



- Data Integrity Audits have begun Spring 2023.
- The Carotid Artery Stent Registry first to go live.
- Additional registries will be added on a regular basis.
- Data results will not be punitive; will be utilized to update training and help texts.
- Audits are being preformed by a third-party vendor Telligen.
- Audited records will be blindly abstracted by Telligen; then compared to the completed case in Pathways for matches.
- More information to come soon.
- All inquires should be sent to Melissa Latus. mlatus@svspso.org













SVS Verification Program



- In partnership with the American College of Surgeons
- Inpatient launch late March, Outpatient launch June
- Standards derived by SVS members; program is used to measure compliance w/standards
- Six National Quality Strategies to align organizational functions to drive improvement based on the aims & priorities of the Agency for Healthcare Research and Quality (AHRQ):
 - Measurement & feedback w/ required registry participation
 - Certification, accreditation, & regulation w/required facility regulation
 - Consumer incentives & benefit designs with thorough discussion of treatment options and consent
 - Health information technology, working with outside software for continuation of care
 - Innovation & diffusion with research
 - Work force development w/ the capability of resident training













Inpatient Vascular Verification Program



Program Standards Manual for Inpatient Program

- Institutional commitment
- Program scope and governance
- Resources for facilities, equipment, services, and personnel
- Clinical care
- Data abstraction and analysis
- Quality improvement
- Education and research
- https://www.facs.org/quality-programs/accreditation-andverification/vascular-verification/standards/

For more information contact:

vascular@facs.org















New Educational Videos



- TASC/GLASS
 - Dr. Elizabeth Genovese, M.D.
- Varicose Vein
 - Dr. Jennifer Ellis, M.D.

Visit VQI.org for a full listing of all **Educational video offerings**

https://www.vqi.org/registryeducation-members-only/

REGISTRY EDUCATION WEBINARS

- VQI Educational Session Vascular Medicine Consult (VMC)
- VQI Educational Session Infra/Supra
- VQI Educational Session PVI
- VQI Educational Session EVAR
- VQI Educational Session TEVAR/COMPLEX EVAR
- VQI Educational Session CAS and CEA
- VQI Educational Session Open AAA
- SVS VQI Infra/Supra Registry Revisions Webinar
- SVS VQI Educational Webinar TASC/GLASS
- SVS VQI Education Webinar TASC/GLASS Slides

















Venous Stent Registry and Vascular Medicine Consult Registry **Free Trial**

For a limited time, SVS VQI is offering a complimentary one-year trial subscription to the VSR and VMC for an easily accessible first-hand experience of its value and ROI.

https://mailchi.mp/5119b784e8d0/no-time-like-the-present

To learn more about the Venous Stent Registry offer click here: Venous Stent

To learn more about the Vascular Medicine Consult Registry offer click here: Vascular Medicine

Or email vqi@fivoshealth.com to contact an account executive.













2023 Top 10 VQI Publications



- A Vascular Quality Initiative frailty assessment predicts post discharge mortality in patients undergoing arterial reconstruction Kraiss LW, Al-Dulaimi R, Allen CM, Mell MW, Arya S, Presson AP, Brooke BS. https://pubmed.ncbi.nlm.nih.gov/35709866/
- **Ankle-brachial index use in peripheral vascular interventions for claudication** Hawkins KE, Valentine RJ, Duke JM, Wang Q, Reed AB. https://pubmed.ncbi.nlm.nih.gov/35276260/
- Assessing the quality of reporting of studies using Vascular Quality Initiative (VQI) data Mirzaie AA, Delgado AM, DuPuis DT, Olowofela B, Berceli SA, Scali ST, Huber TS, Upchurch GR Jr, Shah SK. https://pubmed.ncbi.nlm.nih.gov/35760240/
- Incidence of Procedure-Related Complications in Patients Treated With Atherectomy in the Femoropopliteal and **Tibial Vessels in the Vascular Quality Initiative** Sanon O, Carnevale M, Indes J, Gao Q, Lipsitz E, Koleilat I. https://pubmed.ncbi.nlm.nih.gov/35466788/
- Survival, reintervention and surveillance reports: long-term, center-level evaluation and feedback of vascular interventions Fowler XP, Gladders B, Moore K, Mao J, Sedrakyan A, Goodney P. https://pubmed.ncbi.nlm.nih.gov/36248241/











2023 Top 10 VQI Publications



- Perioperative outcomes of carotid endarterectomy and transfemoral and transcervical carotid artery stenting in radiation-induced carotid lesions Batarseh P, Parides M, Carnevale M, Indes J, Lipsitz E, Koleilat I. https://pubmed.ncbi.nlm.nih.gov/34560219/
- Long-term implications of elective evar that is non-compliant with clinical practice guideline diameter thresholds de Guerre LEVM, Dansey KD, Patel PB, Marcaccio CL, Stone DH, Scali ST, Schermerhorn ML. https://pubmed.ncbi.nlm.nih.gov/34508797/
- Effect of postoperative antithrombotic therapy on lower extremity outcomes after Infrapopliteal bypass for chronic limb-threatening ischemia Marcaccio CL, Patel PB, Wang S, Rastogi V, Moreira CC, Siracuse JJ, Schermerhorn ML, Stangenberg L. https://pubmed.ncbi.nlm.nih.gov/35074410/
- The association between device instructions for use adherence and outcomes after elective endovascular aortic **abdominal aneurysm repair** De Guerre LEVM, O'Donnell TFX, Varkevisser RRB, Swerdlow NJ, Li C, Dansey K, van Herwaarden JA, Schermerhorn ML, Patel VI. https://pubmed.ncbi.nlm.nih.gov/35276256/
- Association of preoperative vein mapping with hemodialysis access characteristics and outcomes in the Vascular Quality Initiative Fedorova E, Zhang GQ, Shireman PK, Woo K, Hicks CW. https://pubmed.ncbi.nlm.nih.gov/34718099/













Regional Meeting CME/CE Credit





Des Moines University is the continuing education provider for this activity.



The attendance roster will be cross-referenced with those applying for CME/CE. Sign in correctly.



Each participant **MUST COMPLETE BOTH** the <u>attendance attestation</u>
and the <u>meeting evaluation</u> from
the URL site – one form.



You will have 7 days from the date of the meeting to complete the forms and **SUBMIT.**



Approximately 14 days from the meeting, Des Moines University will email you instructions on how to access your certificate.



PSO leadership is providing continuing education credit to you at no charge!

If you do not complete and submit the online forms within 7 days, continuing education credit cannot be awarded.

CE/CME Meeting Attendance Credit



REMEMBER TO PSO:

- PUT your FULL NAME in Zoom for remote attendees. Record of meeting attendance is required for CME/CE credit (no exceptions will be made)
- SEND an email to <u>ljohnson@svspso.org</u> with names of group members that are sharing 1 device
- OFFICIALLY apply for CME/CE credit by clicking the URL or QR code provided here:

https://dmu.co1.qualtrics.com/jfe/form/SV_bvhZTavSIZmS8MC

You only have 7 days to complete forms for CME/CE Credit.

NO EMAIL WILL BE SENT AS A REMINDER OR WITH THE CME/CE LINK



Participation Award Results





Cone Health
McLeod Health
Self Regional Health
WakeMed Health & Hospitals-Cary
WakeMed Health & Hospitals-Raleigh



Alamance Regional Medical Center
Atrium Health Cabarrus
Atrium Health Pineville
Atrium Health Union
Duke University Medical Center
Mission Hospital
Novant Health Presbyterian Medical Center
Prisma Health Richland
Rex Hospital, Inc.
Sanger Heart and Vascular Institute
University of North Carolina Hospitals
Vidant Medical Center
Wake Forest University Baptist Health Medical Center



CarolinaEast Medical Center
Catawba Valley Medical Center
Medical University Hospital Authority
Novant Health Forsyth Medical Center
Novant Health Matthews Medical Center
Roper St. Francis
Spartanburg Regional





Quality Improvement Update Spring 2023













Quality Improvement – Participation Awards



The following is a list of the four domains for the 2023 Participation Awards criteria:

- Domain 1 LTFU 40% weighted
- **Domain 2 Regional Meeting Attendance 30% weighted**
- Domain 3 QI Project 25% weighted



Domain 4 – Registry Subscriptions – 5% weighted



https://www.vqi.org/quality-improvement/participation-awards/





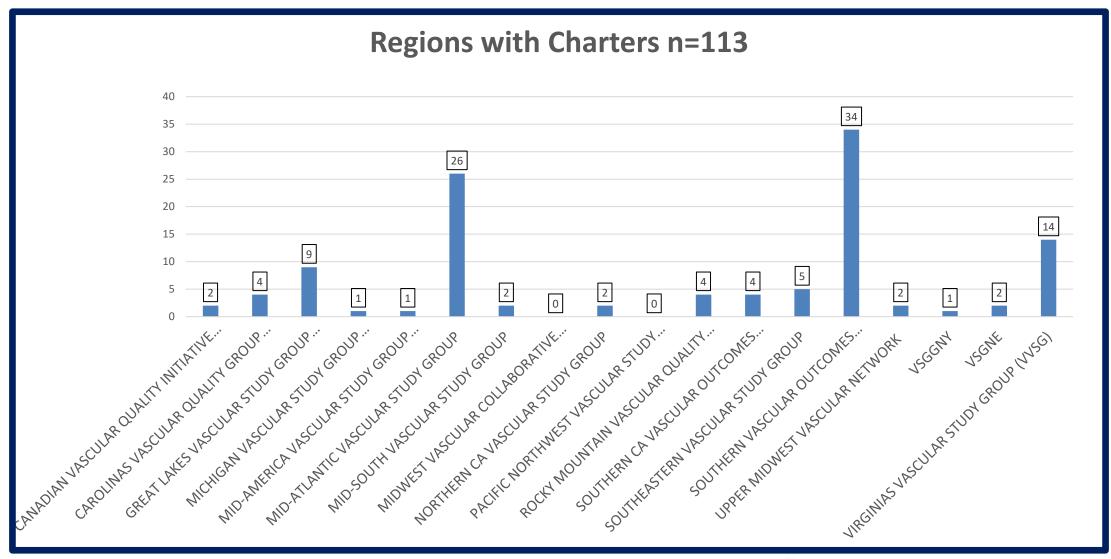






Quality Improvement - Charters

















Carolinas QI Charters



- Forsyth Medical Center LTFU Laura Myers lwmyers@novanthealth.org Dr. Shawn Fleming/Dr. Phillip Moore
- Wakemed Health & Hospitals Raleigh
 Pre Procedure ABI TBI for PVI, CLI Sheila Debastiani SHEILA DEBASTIANI <SDEBASTIANI@wakemed.org> Ellen Dillavou, MD
- Self Regional Health LTFU Jennifer Clary Clary, Jennifer
- McLeod Health LTFU EVAR LTFU Sac Diameter Christy Hall Christy Hall <chall@mcleodhealth.org> Dr. Rzucidlo





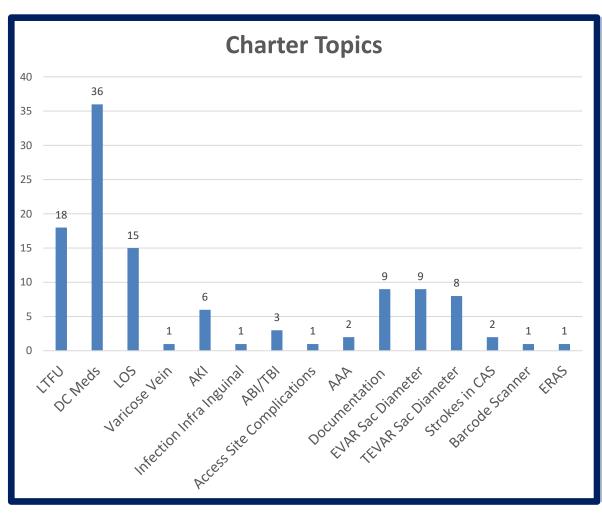


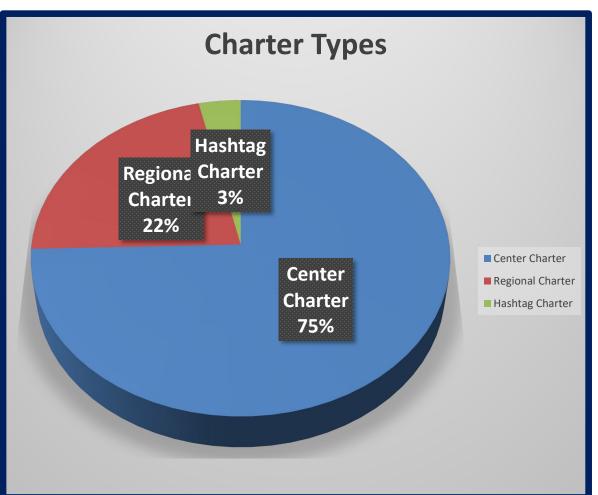




Quality Improvement – Charter Breakdown



















Quality Improvement



- Quarterly Webinars (Charter and QI)
 - www.vqi.org/quality-improvement-members-only/#upcoming-events
- Sample Charters
 - www.vqi.org/quality-improvement/quality-improvement-tools/#qicharters
- Toolkits (VQI@VAM, Data Manager, LTFU)
 - www.vqi.org/quality-improvement/quality-improvement-tools/#qitoolkits
- New improved VQI website
 - www.vqi.org
- 1:1 Calls
 - bwymer@svspso.org











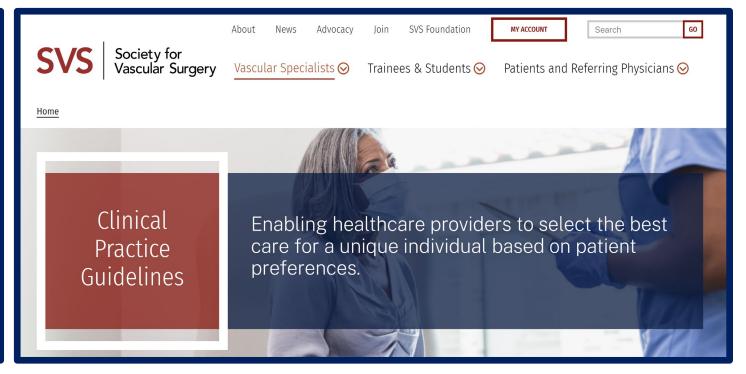






SVS Clinical Practice Guidelines

















SVS PSO Quality FIT Program



- Existing FIT Trainees Jack Cronenwett Scholarship Application
 - Applications accepted January 9 February 28
 - FIT Committee Review March April
 - Scholarship winners announced at VQI@VAM 2023
- FIT Trainee 2023 Applications
 - Applications accepted January 9 February 28
 - FIT Committee Review April May
 - FIT Trainees with FIT Mentors announced at VQI@VAM 2023
- FIT Mentors
 - Accepted at any time
 - Contact <u>bwymer@svspso.org</u>
- www.vqi.org/quality-improvement/quality-fellowship-intraining-fit-program/









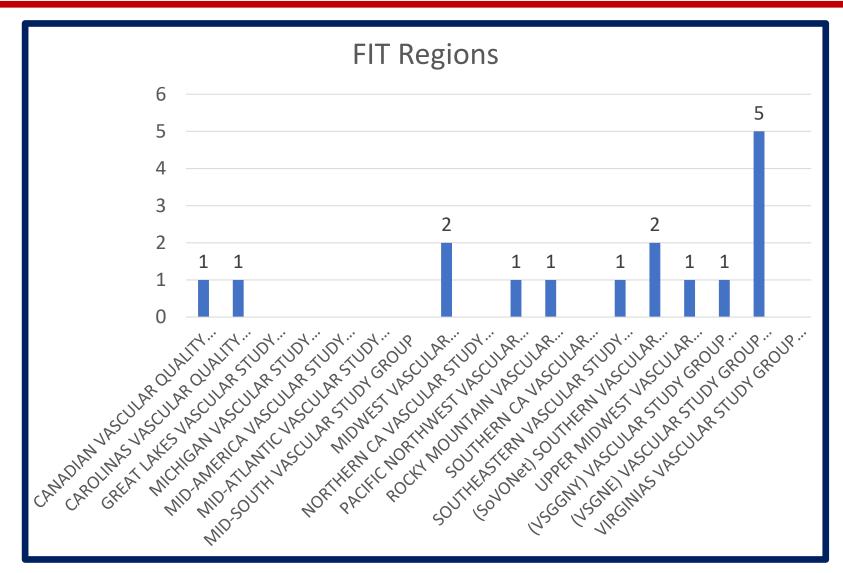






SVS PSO Quality FIT Program















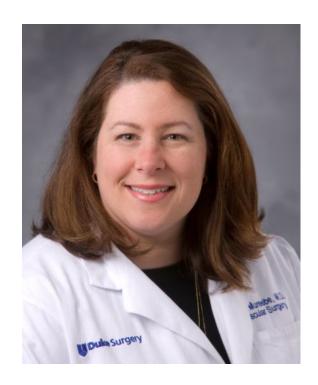




Welcome New Council Members



Dr. Leila Mureebe, MD **Duke University Medical Center Arterial Quality Council**



Dr. Gabriela Velazquez, MD Wake Forest University Baptist Health Medical Center **Arterial RAC**

















Arterial Quality Council:













Arterial Quality Council Update



- Open AAA Major Revision
 - Will be renamed to accurately capture intent of the registry
 - Iliac to Left Subclavian
- Registry Committee updates
- Review Smoking Cessation and inclusion of vaping variables. Grp decided not at this time
- Introduction of the Data Integrity Program















Venous Quality Council:













Venous Quality Council Update



- Last Meeting February 22, 2023
- Re-engagement of the venous registry committees
 - Focus on new center recruitment
 - Review of current reporting
 - Brainstorming & discussion for addition of new reporting measures for bi-annual reports, Quarterly Dashboards and follow-up reports







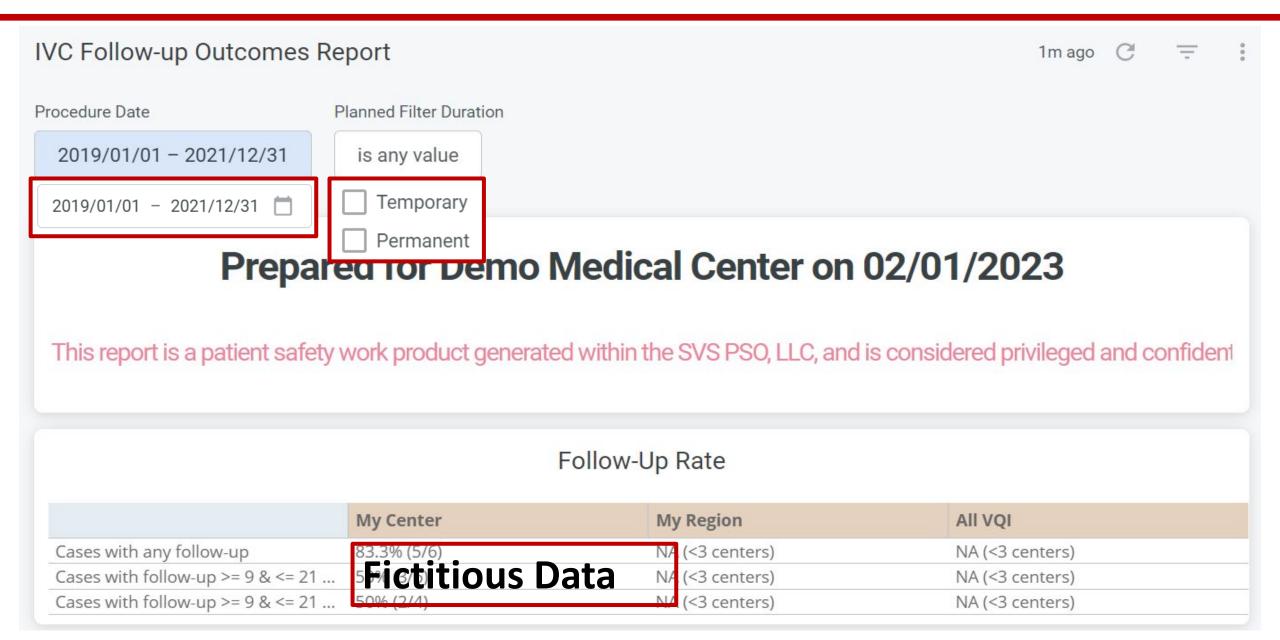






IVC Filter Follow Up Report

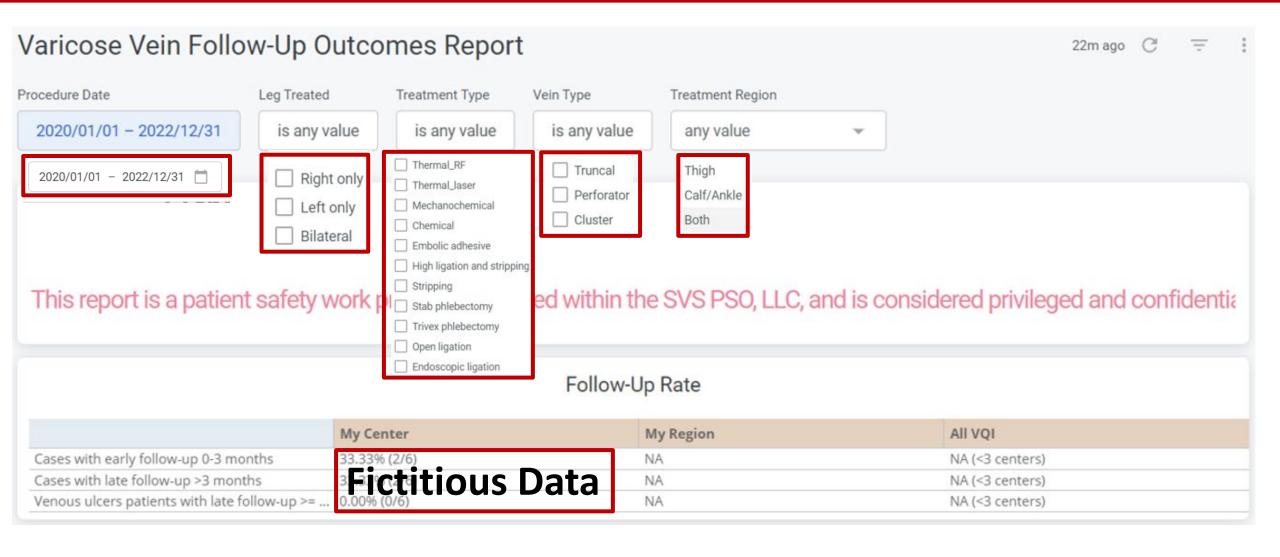






Varicose Vein Follow-up Report

















Arterial and Venous RAC Tips



- Melissa Latus is your PSO primary point of contact on the status or refresh request. mlatus@svspso.org
- An ACTIVE pathways account & privileges to 'Share a File' is required in order to receive your requested Blinded Data Set (BDS).
- Always include your RAC proposal number in any communications please.















Arterial Research Advisory Council:













Arterial RAC Schedule



https://www.vqi.org/svs-vqi-national-arterial-rac-schedule/

- PSO Arterial RAC April 2023 Proposal Submission
- Call for Proposals: February 28, 2023
- Submission Deadline: March 28, 2023
- Meeting: April 10, 2023

- PSO Arterial RAC June 2023 Proposal Submission
- Call for Proposals: May 2, 2023
- Submission Deadline: May 30, 2023
- Meeting: June 12, 2023

- PSO Arterial RAC August 2023 Proposal Submission
- Call for Proposals: July 4,2023
- Submission Deadline: August 1, 2023
- Meeting: August 14, 2023













Arterial Research Advisory Council



194 Publications in 2022

- **Data Security:** All investigators/team members are responsible for security of datasets, which are only to be used for the project for which they were approved.
- **Dataset Access:** Investigators have free access to the datasets to which their center has subscribed, providing that their center has at least 50% Long Term Follow-Up for the registry data being requested. Please confirm that your center subscribes to the dataset(s) you wish to analyze before submitting your proposal.
- Comparison of Specialties: The SVS VQI is a multi-specialty registry, therefore the SVS PSO Executive Committee does not allow comparisons between specialties in submission topics.















Venous Research Advisory Council:













Venous RAC Update:



Created a separate Venous RAC in July 2020

The Vascular Quality Initiative - National Venous RAC Schedule (vqi.org)

2020: 3 proposals

- The impact of vein size on closure rate in treatment of the saphenous vein for venous insufficiency: Jaime Benarroch-Gampel, MD
- Comparison of complication rates of IVC filters based on anticoagulant and indication: Emily Spangler, MD
- Effect of Access Site Choice on Angulation of IVC filter and Impact on retrieval rates: Khalil Qato, MD

2021: 3 proposals

- Incidence of venous thromboembolic events (VTE) after endovenous ablation in patients with venous stasis ulcers (C6 disease): Jaime Benarroch-Gampel, MD
- Impact of Treatment Length and Treatment Region on Clinical Outcomes after Varicose Vein Procedures: Halbert Bai, MD
- Safety and efficacy of Endovenous ablation in patients with a history of DVT: Mikel Sadek, MD

2022: Proposals

- Impact of IAC Vein Treatment Center Accreditation on practice habits, utilization index, and patient outcomes: ProMedica Toledo Hospital
- Patient, Provider, and Geographical Factors Influencing Appropriate Use of Endovenous Ablation Therapy
- Outcomes following endovenous ablation therapy for obese patients with CEAP C2 and C3 venous disease













National Venous RAC



National Venous RAC Schedule

Submissions are made separately to the National Arterial RAC and the National Venous RAC - see the schedule below and the link to Abstracts123: http://abstracts123.com/svs1/

(If you do not have a login for Abstracts123, you can create one through the same link)

Bi-Monthly Schedule for National Venous RAC Proposal Submissions

May 2023

Call for Proposals: March 28, 2023

Submission Deadline: April 25, 2023

Meeting: May 8, 2023

July 2023

https://www.vqi.org/national-venous-rac-schedule/

Call for Proposals: May 30, 2023

Submission Deadline: June 27, 2023

Meeting: July 10, 2023















Governing Council:

Katharine McGinigle, MD













Governing Council Update



Meeting November 18, 2022

- Quality Improvement Update
 - Smoking Cessation as a National Quality Initiative
 - 2022 ended with a record # of charters 113
- RAC Submission
 - 5 proposals per cycle from each institution
 - Once a center reaches 15 Arterial RAC proposals, faculty member will be expected to serve on RAC as an at large member
- Frailty variable development
- OBL Registry Refinement; enhanced value, reporting/reimbursement, ease data burden
- Discussion Data burden within registry
 - Committee member engagement/expectations
 - Each Committee will have an associate chair
 - Enhance reporting measures
 - Review current variables; consider required fields; elimination of data variables













Nominations Update



For Spring 2023:

- NEW Arterial RAC Chair: Gabriela Velazquez MD, Wake Forest Univ. Baptist Health Medical Center
- NEW Venous RAC Chair: Open Position
- NEW AQC Chair: Dr. Leila Mureebe MD, Duke Univ.
- NEW VQC Chair: Open Position



Updates for Spring 2023 VQI Regional Meetings



Coming Soon...

The **Support** Team is currently developing brief training videos to assist with specific functionality and tasks. By sharing some pointers with you, we hope to save you time and highlight PATHWAYS functionality and tools that you may not be familiar with.

The **Technology** Team has several features in progress to enhance PATHWAYS functionality including:

- ➤ Infra & Supra Follow-up Outcomes reports.
- ➤ Expanding data integration capabilities with Cedaron to include more VQI registries.
- > Visualization of recently updated help text on the online/electronic form.
- > Enhancing the Support tab to accommodate links to external resources.

Carolinas 2023 Fall Regional Meeting



TBD













Thank You!!



- Industry Supporters
 - –Cook Medical
 - -W.L. Gore
- CME/CE Accrediting Entity Des Moines University
- Regional Membership Team













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CE/CME Meeting Attendance Credit



REMEMBER TO PSO:

- PUT your FULL NAME in Zoom for remote attendees. Record of meeting attendance is required for CME/CE credit (no exceptions will be made)
- SEND an email to <u>ljohnson@svspso.org</u> with names of group members that are sharing 1 device
- OFFICIALLY apply for CME/CE credit by clicking the URL or QR code provided here:

https://dmu.co1.qualtrics.com/jfe/form/SV_bvhZTavSIZmS8MC

You only have 7 days to complete forms for CME/CE Credit.

NO EMAIL WILL BE SENT AS A REMINDER OR WITH THE CME/CE LINK



