

# Vascular Quality Initiative®

vascularqualityinitiative.org

## March 10, 2017 Northern California Vascular Study Group Meeting Summary

Data Managers Meeting 9:30 – 11:30AM; Physician Meeting: 1:00 – 3:30PM

UC Davis Medical Center, Sacramento, CA

Attendees: Tej Singh, MD, David Dawson, MD, Ed Aboian, MD, Nasim Hedayati MD, Matthew Mell, MD, Nadine Caputo, Deborah MacAulay, Kathleen Behan, Cynthia Bagdazian, Joyce Nacario, Marsha McRorie, Sandi Wong, Teresa Marsh, Lily Toy, Carolyn Dudley, Laura Concepcion, Carlos Moreno, and Michele Cantrell.

### **Data Manager Meeting:** Welcome and Introduction by Dr. Singh

Discussion and information from Dr. Singh, Nadine Caputo and Deborah MacAuley:

- Discussed missing data report and the need for more specific information. Nadine Caputo indicated that this report will be discontinued.  
**ACTION:** The PSO will be working with the registry chairs to develop a revised version that includes details on the percentages of critical variables that are missing by registry.
- Discussed the new *member only* discussion forum and website; participants recommended that an alert system be used to be sure all questions are addressed by members or PSO staff.
- LTFU was discussed; the higher rates for closed health systems was noted and Dr. Singh reported that these results will be highlighted in future presentations.
- Dr. Singh indicated the importance of Nor Cal attendance at the national VQI meeting being held in California. **ACTION:** Dr. Singh indicated that he would prepare a letter from the NCVS to support attendance by the data managers; Nadine Caputo provided a template justification letter from the PSO that he will modify to support data manager attendance at this meeting.
- Question on the exclusion criteria for OAAA LOS over 8 days in the regional reports - are we missing potential quality issues; e.g., procedures performed during weekends. Should the PSO report all cases but separate those cases performed on the weekends, so they can also be reviewed.  
**ACTION:** Nadine will discuss with PSO team and determine if the report can or should be modified for the Fall reports.
- Issue of increasing time for data collection - the option of using of outside data abstraction vendors, however, the time needed to find critical information in the chart is still an issue, regardless of who collects the data. One member noted that it takes a NP on average one hour for PVI data abstraction. UC Davis has developed and is using EPIC templates for veins and PVI. and they reported that the templates make documentation easier.
- Some participants reported not receiving information on the monthly webinars but did receive the newsletters. Nadine and Deb MacAuley will follow-up.
- Participants also suggested that M2S FAQs be more frequently updated and cited the need for definitions to be tagged.

### **Physician Meeting:** Welcome and Introduction by Dr. Singh

National VQI update by Nadine Caputo

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- Volume of participating centers = 413 centers in 46 states and the volume of procedures exceeds 350,000. [vascularqualityinitiative.org](http://vascularqualityinitiative.org)
- Nadine highlighted the new *member only* website to help members to share quality improvement and best practice information more easily between and within Regional Quality Groups. The site includes a new password protected *topical discussion forum* for VQI members. Lead Regional Data Managers are currently pilot testing the site; expected to be operational in June 2017.
- The VQI@VAM meeting in San Diego begins on **Tuesday, May 30, 2017** with a half-day session for data managers. Wednesday, May 31st is a full day session for physicians and data managers. Many of the topics for 2017 were submitted by members. The new poster session/reception on Tuesday at 5pm was highlighted and members were encouraged to submit an abstract for posters by March 15<sup>th</sup>. Posters can focus on QI processes, case studies or workflow issues.
- The newsletter is now published every other month with detailed information on the annual meeting, QI projects, the participation awards and other PSO initiatives. In addition to receiving the newsletter via email, it is posted on the front page of the VQI website
- Two national QI initiatives for the PSO – the first is discharge medications – slides and transcripts from the Feb webinar with Drs. DeMartino and Jackson are available on the VQI website under the Resource tab. The goal is 100% compliance. The second initiative is EVAR LTFU – a webinar will be presented in April 2017. A copy of the QI Project charter and an example using a discharge medications example is included in the regional slide deck. The QI charter will help the PSO track VQI quality projects.
- Changes to the CMS physician payment program was discussed under MACRA/MIPS. Transcripts and slides from the Dec. 2016 webinar on MIPS/MACRA are available on the VQI website. The importance of submitting data IN 2017 under the ‘pick your pace’ program that allows submission of minimal data to avoid a penalty in 2019 or the full data submission that provides opportunities for bonus incentives.

Dr. Singh reviewed data from the Regional Reports. He reported that the region is doing very well on several key indicators including the rate of ultrasound guidance, chlorhexidine use, CEA LOS, and complications after INFRA.

Dr. Abouian presented an update from the Arterial Quality Committee, Dr. Mell provided a Research Advisory update and Dr. Hedayti presented the Venous Quality Committee update. She also presented venous data from her center.

## Group Discussion and Feedback

- Issue – is the Participant Awards program significant for members – has the PSO measured the impact? Although anecdotal information and the volume of questions from members suggests that it has had an impact. **ACTION:** The PSO staff will discuss options for conducting a more formal evaluation of the program.
- In discussing new options for participation awards criteria, the group suggested that points awarded for presentation at regional meetings could be a disadvantage for community based physicians.
- For LTFU, participants requested that the database be modified so post 1 year follow-up visits (visits that occur 2 – 5 years’ post-surgery) could be included and credit be issued for those visits. **ACTION:** PSO team and committees will discuss this modification.

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- The group raised the issue of ROI and demonstrating the value of VQI after initial successes, including the challenge of sustaining interest from administrators and practitioners. [vascularqualityinitiative.org](http://vascularqualityinitiative.org)
- The importance of accreditation of vein centers was highlighted and the example from MA where accreditation is mandated by BCBS of MA. VQI members in the NCRSG area are accredited.
- The issue of the inclusion or exclusion of juxtarenal repair in the open AAA registry (UC Davis has a number of cases from young trauma patients) was raised. **ACTION:** This issue will be placed on the agenda for the March 2017 AQC meeting.
- Comment on the slide outlining next steps proposed for the EVAR LTFU imaging – indicated that Medicare data on imaging is not specific enough for the required comparisons. **ACTION:** This feedback will be forwarded to the EVAR LTFU workgroup.

**Project Ideas for the regional group:** The group discussed ideas for a regional research project and the need to focus on high volume procedures. Ideas included:

- Procedure volume for fistulas; noted the difficulties in obtaining good LTFU data
- PVI patients – patency, outcomes, smoking
- Traditional surgery vs. peripheral vascular procedures and rate of repeat procedures.

Deb MacAuley from M2S Pathways provided an update. Members provided the names of vascular surgeons or physicians in the Northern California area to recruit for membership in VQI.

## **Next Northern California VQI Meeting Fall 2017**

**Sept 29-30 2017** Friday afternoon for data managers meeting; Saturday morning for physician meeting at Mills hospital. Dr. Singh encouraged all participants to consider presenting VQI data at this meeting.