



NCVSG Spring 2023 Regional Meeting

Saturday, May 6, 2023

9:00am-12:00am PST

Remote via Zoom

Meeting Minutes

Remote Attendance:

Name - Institution

Shipra Arya, MD - Stanford Health Care
Dirk Baumann, MD - Palo Alto Medical Foundation
Joel Crawford, MD - UC Davis Health
Ron Dalman, MD - Stanford Health Care
Allison Donnalley - UC Davis Health
Shernaz Dossabhoy, MD - Stanford Health Care
Laura Duffey - St. Joseph's Medical Center - Eureka
Rouchelyn Fallorina - Stanford Health Care
Eri Fukaya, MD - Stanford Health Care
Shaun Gifford, MD - UC Davis Health
Misty Humphries, MD - UC Davis Health

Name - Institution

James Iannuzzi, MD - UCSF Health
Ritu Karki Sitaula - UC Davis Health
Mimmie Kwong, MD - UC Davis Health
Pam Lasiter - St. Joseph's Medical Center - Stockton
Jason Lee, MD - Stanford Health Care
Steven Maximus, MD - UC Davis Health
Marsha McRorie - El Camino Health
Joyce Nacario - UCSF Health
Ben Waldau, MD - UC Davis Health
Sarah Wartman, MD - Palo Alto Medical Foundation
Lily Toy, NP - Palo Alto Medical Foundation

SVS-PSO Representatives Attending Meeting:

Melissa Latus, RN - PSO Clinical Project Manager,
Leka Johnson, Education & Membership Manager.

Topic

Presenter

I. Welcome and Introductions:

Shipra Arya, MD – NorCal VSG Medical Director

- 6 new centers joined NorCal VSG – WELCOME!
- 26 centers NorCalVSG participating in VQI

II. Regional data review:

Shipra Arya, MD

- Pre-op Smoking and Smoking Cessation new metrics in Dashboard for arterial procedures. Regional rate for Preop Smoking (18%) is below VQI Overall rate (30%) and the lowest when compared to other regions. Smoking Cessation rate is higher (34%) than VQI Overall rate (26%) and second highest when compared to other regions.
- Regional Observed Stroke/Death rates for asymptomatic patients undergoing TCAR procedures (n=66) was higher (1.5%) than expected (1.4%) and observed VQI overall (2.1%). Observed Stroke/Death rates for symptomatic patients undergoing TCAR procedures (n=52) was higher (5.8%) than expected (2.4%) and observed VQI overall (1.0%).
- Regional Length of Stay >1 day rate for asymptomatic patients undergoing carotid endarterectomy procedures was higher (25%) than VQI overall (21.4%). Rate was lower in symptomatic patients (30.5%) than overall VQI rate (42.2%).
- Regional Length of Stay >2 day rate for patients undergoing EVAR procedures was higher (16.5%) than VQI overall (15.1%), but improved from previous years.
- Regional rate for Sac Diameter Reporting at LTFU for patients with EVAR procedures was higher (68.8%) than overall VQI (60.5%) and third highest among other regions. For patients with TEVAR procedures, regional rate was also higher (69.2%) than overall VQI rate (61.9%).
- Regional Major Complication rate for patients undergoing supra-inguinal procedure for CLTI was higher (28.6%) than overall VQI rate (8.2%).
- Regional rate for ABI/Toe pressure on patients undergoing PVI for claudication is similar (71.9%) to overall VQI rate (69.4%) but reduced from previous years. Institutional variation accounts for lower rate and may merit discussion for possible regional project.

Comment by Dr. Lee: referred patients may undergo outside imaging and repeat testing not performed as may not be reimbursed. Documentation of outside imaging may improve abstraction.

- Other regional reported rates (LTFU, DC Meds, etc.) similar to National rate levels.

III. Regional Lead Data Manager Updates *Carlos Moreno*

- Data Manager meeting to be held after Regional meeting:
 - Ongoing discussion on incorporating outside visits & documentation into VQI abstraction workflows
 - Request for guidance/recommendations from PSO on dedicated personnel resources for VQI abstraction and efforts.

IV. Current regional QI charters *Shipra Arya, MD*

- Long-term Follow-up – ongoing but may have reached plateau with diminishing returns. Open to ending as energy may be better focused on other efforts.
- EVAR Sac Diameter Reporting - ongoing
- Proposal for improving ABI/Toe pressure reporting as next charter

V. National VQI Update: *Melissa Latus, RN*

- New milestone: 1000 centers participating in VQI registry.
- National VQI@VAM meeting to be held June 13-14, 2023 at Gaylord National Resort and Convention Center located in National Harbor, MD outside of Washington, DC; Registration is open.
- Brand new VQI.org website
- New statistician for PSO Analytics team: Jeff Yoder
- Infra/Supra inguinal bypass revisions went live March 30th
- New National Smoking Cessation Quality Initiative to be announced at VQI@VAM.
- New risk calculator
- New Follow-up reports for IVC filter and Varicose Vein registries
- Coming soon:
 - Harmonization of CAD and anticoagulation variables
 - Open AAA Registry revision
 - Other registries revisions focusing on variable and data burden reduction including EMR integration.
- New Data Integrity Audit Program:
 - CAS registry initial effort; additional registries will be added on a regular basis
 - Blinded Data audited by third party vendor (Telligen) and compared to data in Pathways
 - Results will not be punitive but rather utilized to update training and help texts.
- SVS Verification Program in partnership with American College of Surgeons:
 - Six National Quality Strategies based on AHRQ aims and priorities
 - Inpatient launched in March, outpatient to be launched in June 2023.
 - Very large institutional commitment

Discussion by Drs. Iannuzzi, Humphries, Arya, Dalman, Lee and Ms. Latus followed:

Keypoints:

- UCSF experience in pilot accreditation program: large commitment of resources required. However, the process did identify a couple of areas of weakness that were addressed with administration to request additional resources and justify another hire.
- Costs, availability of assisting automated tools, institutional burden and sustainability remain undefined; other similar verification programs may serve as models.
- Participation in VQI is not a requirement for the Vascular Surgery Verification Program, but VQI is the only one available for reporting the data, although NSQIP has been utilized as part of the verification.
- Impression that the major driver was outpatient verification as several states that have been asking for guidance, yet inpatient is being rolled out first. Possible reason is since there are no existing regulations or standards for outpatient setting, inpatient was launched first to work out the kinks.
- Vizient quality measures are being utilized by C-suites across the nation as quality barometer it relies on for comparison. It may be difficult to convince administration of need for another registry

equivalent that they may have to invest in until it becomes a requirement for reimbursement. Onerus will be on physicians to prove the value of VSVP.

- New Educational videos: TASC/GLASS and Varicose Veins available at <https://www.vqi.org/registry-education-members-only/>
- Special offer: Venous Stent Registry and Vascular Medicine Consult free trial for a limited time.
- NorCal VSG 2022 Participation Award results:
 - 3-stars: Stanford Health Care, UC Davis Health System, Stanford Health Care – ValleyCare.
 - 2-stars: UCSF Medical Center, St. Joseph’s Medical Center Stockton.
 - 1-star: Palo Alto Medical Foundation, Dominican Hospital – Santa Cruz.
- 2023 Participation Awards criteria has changed:
 - Domain 1 – LTFU – 40% weighted
 - Domain 2 – Regional Meeting Attendance – 30% weighted
 - Domain 3 – QI Project – 25% weighted
 - Domain 4 – Registry Subscriptions – 5% weighted
- QI Charters: 113 charters submitted in 2022 with top three being LTFU, DC Meds and LOS.
- Clinical Practice Guidelines now available via link in VQI.org
- SVS PSO Quality Fellow-in-training (FIT) Program
 - 2023 Scholarship winners will be announced at VQI@VAM 2023
 - FIT Mentors applications open

Question from Dr. Humphries: What is the goal for this program? One fellow per region?

Response by Ms. Latus: We would like more than one per region as there is no limit, but we would like for the trainee to be matched with a mentor in the same institution.

Comment by Dr. Arya: The program requires mentors to be at the same institution and it does not provide any funding and that may be challenging.

Response by Ms. Latus: The Jack Crommenwelth scholarship does provide some funding, and the trainees seem to truly benefit from it.

Comment by Dr. Arya: There is some peripheral benefits such as the peer connection and an accolade in their CV.

VI. QI/PI Presentation: *Shernaz Sophia Dossabhoy, MD*

Title: *“Leveraging the Vascular Quality Initiative to Reduce Hospital Length of Stay after Carotid Endarterectomy and Endovascular Aneurysm Repair”*

Center name (ID): Stanford Health Care (110)

VII. Arterial Quality Council update: *Misty Humphries, MD*

- Major Revision Open AAA Registry in progress to obtain more relevant information including ERAS variables
- Other arterial registries are also being under review for revisions
- Smoking Cessation criteria includes cigarettes, pipe, or tobacco but not to include vaping at this time
- Introduction of the Data Integrity Program: 100 participating centers each providing 10 Carotid artery stent records for validation

VIII. Venous Quality Council update: *Eri Fukaya, MD*

- Committee lead by Dr. Mark Passman and composed of 3 American Venous Forum and 3 SVS representatives; last met in February will meet again at VAM and at UIP-AVLS in September.
- Number of participating sites in venous registries:
 - Nationwide: IVC filter – 52; Varicose Vein – 41; Venous Stent - 11.
 - NCVSG Region: IVC filter – 1; Varicose Vein - 1; no sites participating in Venous Stent.
- Overall number of cases submitted nationwide: IVC filter – about 18,000; Varicose Vein – 59,000; Venous Stent – 137.
- Goals for this year is to develop reporting measures for biannual reports
- Challenges are related to the broad participation by vascular and non-vascular specialties performing vascular procedures as well as the presence of other competing registries

IX. Arterial and Venous RAC updates: *Melissa Latus, RN*

- Melissa Latus (mlatus@svspso.org) is now the primary PSO point of contact on the status or refresh request for datasets.
 - Active account is required for receiving blinded datasets under the *share a file* tab in Pathways.
 - Always include RAC number in communications.
 - All Investigators and team members are responsible for security of datasets which are only to be used for the approved project.
 - Datasets are only available to the investigator if their center subscribes to the corresponding registry for which the data is being requested and has a LTFU rate of at least 50%.
 - SVS PSO Executive Committee does not allow comparison between specialties in submission topics.
- a. Arterial RAC update: *James Iannuzzi, MD & Melissa Latus, RN*
- Five published papers, four presentations at national meetings, and six successful applications for projects from our region since our last meeting.
 - VQI is now expecting the inclusion of the application approval number in any manuscript submitted for publication
 - Next submission deadline May 30th and submissions will be discussed June 12th. Submission deadline for next cycle will be August 1st, with discussion by August 14th. Please reach out if any questions or assistance.
 - 194 Publications in 2022 nationwide.
- b. Venous RAC update: *Shipra Arya, MD & Melissa Latus, RN*
- Regional Venous RAC representative position is currently vacant.
 - To be representative, the institution to which the representative is affiliated to has to participate in a venous registry.
 - Only two institutions in the region participate in venous registries, so if interested please reach out for nomination.

X. Governing Council updates: *Shipra Arya, MD*

- Meeting held November 18, 2022
- QI Updates:
 - Smoking Cessation as a National Quality Initiative
 - 113 charters in 2022 (record)
- RAC Submission limits set:
 - 5 proposals per cycle from each institution
 - Once a center reaches 15 Arterial RAC proposals, faculty member expected to serve on RAC as an at-large member.
- Frailty variable development under discussion
- Opioid registry refinement aiming to provide enhanced value, better reporting and reimbursement and easing data burden with ties to Data Integrity Audit Program
- Discussion on data burden within the registry:
 - Committee member engagement and expectations
 - Each committee will have an associate chair
 - Call to enhance reporting measures
 - Ongoing review of current variables, required fields and elimination of data variables.

XI. Nominations updates: *Shipra Arya, MD*

- NCSVG Medical Director
 - Matthew Mell, MD – term ended
 - Shipra Arya, MD – term started Spring 2023
- Open Nominations
 - NCSVG Associate Medical Director

XII. NCVSG 2023 Fall regional Meeting *Shipra Arya, MD*

- Proposal for in-person Fall meeting

Discussion keypoints:

- Friday or Saturday meeting at Stanford campus
 - Difficult to take time off during the week
 - Attendance may be limited if venue far from participating site
 - NorCal Vascular Regional meeting?
 - In conjunction with UCSF Vascular meeting limited to availability of regional report
 - Hybrid meeting
 - Dinner meeting
 - Networking event
 - Industry sponsorship
- Doodle poll to gauge interest and possible meeting dates.

XIII. Adjournment *Shipra Arya, MD*

Congratulations Dr. Iannuzzi's on your engagement!