

Regional Data Manager Leads  
 Agenda  
 September 23, 2015

| <b>Regional Data Manager:</b>                | <b>Region:</b>              | <b>Attendance:</b> |
|--|-----------------------------|--------------------|
| Lorri Bennett                                | Carolina's                  |                    |
| Diane Call                                   | Chesapeake                  |                    |
| Yuming Lin & Merri Goodman                   | Florida/Georgia/Mississippi |                    |
| Christina Smith                              | Great Lakes                 |                    |
| Ryan Shelters                                | Michigan                    |                    |
| Cheryl Jackson                               | Mid-America                 |                    |
| Kathy Levan                                  | Mid-Atlantic                |                    |
| Lisa Saleemi                                 | Mid-West                    |                    |
| Scott Kronenberg & Carlos Moreno & Kay Behan | Northern California         |                    |
| John Blanchard & Amanda Sigala               | Pacific Northwest           |                    |
| Allison Spain and Judith Daniel              | Rocky Mountains             |                    |
| Shelley Berthiaume                           | Southern California         |                    |
| Rosha Nodine                                 | SoVONET                     |                    |
| Steve Ross                                   | Tennessee                   |                    |
| Barbara Chacko                               | Upper Mid-West              |                    |
| Olympia Christoforatos                       | Greater New York            |                    |
| Susan Curtis                                 | VSGNE                       |                    |
| Mary Baldwin                                 | Virginia's                  |                    |

- I. Welcome and Introductions
  
- II. Regional Lead expectations
  - a. Quarterly call with Carrie
  - b. Schedule meetings with your regional DM in between these calls
  - c. Bring Regional Questions and issues to this call for us all to discuss
  - d. Keep minutes and send to Carrie to review
  - e. Work with Megan Mathy to organize bi-annual regional meetings
  - f. Brief update at the regional meetings to inform the docs what the DM activities have been in the prior 6 months
  - g. Work with regional DM on a Quality Improvement project
  
- III. Annual meeting of all DM: SCVS Vegas March 12<sup>th</sup> all day VQI meeting (tentative)

IV. Questions from the regions:

UpperMidwest:

- Follow up requirements finalized?

Northern California:

- Data Abstraction Services
- Q-Centrix  
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Mid-Atlantic:

- Expand the 9 to 21 Month Follow-up Window - Suggest the registry provides a 60 day grace period on each end of the 9 to 21 follow-up month window for these types of instances and instead it will be 7 to 23 months window!
- Do Not Require Special Project Data Entry to Non-participating Hospitals - Do not feel that all participants should be required to obtain special project data on a case if their facility is not participating in that special project. Perhaps a separate tab for those facilities participating could be added to their module. This would allow non-participating facilities to continue with-out additional burden, reduce their work collection/entry and allow for more follow-up work.
- Same Day Readmission - Currently if you have a patient that was readmitted the same day as discharge, the follow-up form will not allow you to use that discharge date as the follow up admission date, thus that data point is incorrect.

Southeastern:

- Is a follow-up goal of 80% reasonable as the VQI mean is only around the mid-high 50's%
- Can the follow-up range be changed to begin at 6 months? Many physicians seem to see their patients at the six month point and not thereafter.
- Are the follow-up stats pulled at the 9 month point rather than at the 21 month point? We need more clarify on calculation rules.
- Star System: group would like to check with Carrie when it will start

- Could VQI procedures have all the form like TEVAR form that has tab could change color after it completed and saved—Shawna mentioned that VQI is currently working on this
- Request more data points which in important of Hemodialysis procedure—possible additional data collection and cost
- A more robust data dictionary is needed. We need clear definitions for all VQI data points. There is a concern of grey area data points could dilute the project efforts.
- Lucas Surgical Group: 1. Accurate date entry for Surgical Interventions done on the same day as original surgery; 2. Implement a new drop down box for patients who are on dialysis that list the type of treatment such as: PD home, Home Hemo, In-Center dialysis. This implementation will benefit for future follow up retrieval.

#### Virginia's:

- NEW site recognition award: consider adding data manager attendance @ regional meetings as a component
- Procedure- based mortality reporting vs patient -based
  - $\geq 1$  procedure during hospitalization with operative mortality  $\rightarrow$  pt appearing twice on mortality report
- M2S processes, risk analysis, communication plan with emphasis on better customer communication during unanticipated downtime
- EVAR angulation measurements
- QXMD
- Additional Testing: Hemodialysis access upgrade required additional permission for follow-up personnel giving them access to the additional information not included in the instructions provided.
- Mapping with regard to using VQI data for CMS submission for CAS.
  - mapping of the 'Modified Rankin Scale Score if Patient Experienced Stroke Pre-Procedure' has linked what should be a "pre-procedure" data element to report symptoms to a "post-procedure" data element, status at D/C home. If the NCD from CMS is dependent upon pre-procedure symptoms of CAS (a modified Rankin score of greater than or equal to 3 would be excluded from coverage), why would CMS care what the discharge modified Rankin score was or if the patient had expired?
- Update of development with NeuroVascular Quality Initiative (NVQI)

#### Pacific Northwest:

- Share Point site