

## VASCULAR QUALITY INITIATIVE

### SoVONet Meeting

June 1<sup>st</sup> 2017

San Diego, California



- I. Dr. Dennis Gable called the meeting to order and welcomed everyone. Introductions were made around the room and those present on the phone.

Dr. Gable: New Items:

- Structure and function of meetings going forward
  - There are 34 centers in SoVONet
  - Each hospital will need a lead physician to make the Executive Committee
    - A list will be sent to all centers to make sure the physician we have labeled as the primary contact is correct
  - We will have majority vote if we have 2/3 members from each institution present
  - If we do not have 2/3 of the institutions at the meeting to vote, an electronic voting system will be sent out and will be given 5 days to approve
  - The region is possibly going to select 2 papers from the Journal Club and spend 20 minutes discussing
  - Carrie Bosela will contact high and low performers from each category in the regional report to see if they will discuss their successes or road blocks they are having with those measures
- Dues
  - Funding for meeting room, prep, food, etc and Lead Data Manager reimbursement
    - PSO is looking into building member dues in to PSO billings
    - Keep using industry funding
      - Getting more difficult
    - Have hospitals host meetings
      - Currently the meetings that need funding are the Fall meetings that are in conjunction with TSVES. This could reduce the participation if they are not held in same area.

- II. Action items from the fall Meeting

- LTFU (long term follow-up) transparency – This will be unblinded by facility for the next meeting.
  - Rationale for unblinding: For VQI to submit data for research, we have to have a target of 80% LTFU. Currently, we're at about 30%. Unblinding gives us the opportunity for the high-performing centers to help the low performing centers with processes to improve, as well as utilizing peer pressure to increase performance.
- Increase participation research studies from our region – Carrie will be contacting people to speak
- Medicine Registry Update – It is expected to be complete by Quarter 3 or 4

- III. National VQI Update: Carrie Bosela, SVS PSO

- There are currently 416 participating VQI centers in 46 states and Ontario.
  - Ontario has formed their own regional group
  - 373,209 cases entered in VQI to date

- Currently we have Arkansas and Oklahoma in Sovonet, but we currently don't have any sites participating in those states
  - Anne Parker is working with some hospitals from those states
- Members only Website
  - To help and encourage member to share quality improvement and best practices with other regions
  - The Heart Hospital Baylor Plano has already posted their project for discharge medication on the website
  - Forums for data managers
  - Do not rely on this website for definitions. You will still need to contact Pathways for those type of questions.
- VQI 2<sup>nd</sup> Annual Meeting in June 2017 San Diego, was 2 days long this year with a poster session and networking reception. 1<sup>st</sup> day was breakout sessions and the 2<sup>nd</sup> day was discussion from several different institutions about PI projects. The meeting is still being tweaked. Physicians felt there could be more physician geared topics.
- VQI Pulse is a newsletter that highlights topics in the VQI and is sent every other month.
- National projects
  - Will count for MIPS if you participate in a National Project
  - Antiplatelet and Statin at discharge
    - o 2 projects are posted on members only site to help increase compliance
  - Increase follow-up rates for EVAR
    - o Must have Sac diameter to participate in National Project
    - o Work with your data manager, doctor and radiologist to form a plan
- QI Project Charter
  - Use this when you start a quality improvement project. It will help with setting up your project. It will provide questions like who, what, when and why to help you set up a full project, outcome and timeline.
  - The Heart Hospital Baylor Plano presented a charter for discharge medications
- MIPS
  - VQI is a specialty registry and a QCDR will help you meet one of your measures
  - VQI will help with CMS submission
  - Contact VQI for further questions
- Partition award
  - There has been an increase in 1 star and 3 star which means centers are working to achieve higher ratings
  - There will be some changes to the participation award that will be shared soon
- VQI data discrepancies
  - Due to multiple revisions and coding
  - No significant errors

- Research Advisory Council will be looking over projects that have been published. If you have based your project on any data that may have discrepancies they will contact you to look at your project
- Will continue periodic review
- Looking at mapping errors

#### IV. Regional Reports – Dennis Gable, MD

- Dr. Gable reminded everyone that for the regional report, we must have at least three centers participating in that module with at least 10 procedures/center to get a report for that specific module
- Spoke briefly about volumes
  - Questioned was the center with over 600 cases. Would like to know process and what modules they were participating in. No centers spoke up.
- Went over physician specialties across VQI and the Region
  - This is a new report
- Missing data
  - This will be the last time this report will be reported
  - With this last report, do a process improvement project to decrease the missing fields. Pull your data download and see if there is a pattern you can correct. Some centers are focusing on the data fields that are used in risk adjusted reports.
- Long Term Follow-up
  - This will be unblinded by center next regional meeting
- Discharge antiplatelet plus statin rate
  - SoVONet is at 76% which is lower than the national average
- Infrainguinal bypass skin prep
  - Betadine is excluded
  - Capture only what was put on incision area
- Percentage of percutaneous femoral procedures using ultrasound guidance
  - Clarify with your providers, they may not be documenting
  - This could be a great project to publish due to the numbers
  - Carrie will contact the one center that is low to make sure they are capturing this field correctly
- EVAR and TEVAR sac diameter
  - Reach out to your radiologist and have them add this to the report
- Open AAA Length of Stay
  - Volumes are so low
  - Go over exclusions with data managers to make sure they are not excluding cases that should be put in the registry
  - There could be a project on the LOS since SoVONet is so low
- In hospital stroke or death after CEA
  - Carrie will reach out to centers with a high rate
  - If your rate is low reach out to Carrie who can pair you up with a high performing center

- Major complications after Infra
  - Make sure you understand the definition of this data point.
- V. Research Advisory Council Update: Dennis Gable, MD and Carrie Bosela
  - Discussed how to submit a project
    - You can submit yourself
    - PSO will look at removing old projects that have not had any activity
  - Proposal submission happens in August and October
  - There are currently two research projects from our region
  - The SoVONet region will start meeting twice a year
    - Meeting times will come soon
- VI. Arterial Quality Council Update: Taylor Smith, MD
  - Discussed term limits
  - Three national projects
  - PSO National QI Project Committee Process
  - Implementation of National Projects
  - COPI Reports
    - Last year was for CEA and CAS
    - Upcoming is on hematoma after PVI
- VII. Venous Quality Council Update: Carrie Bosela, MD
  - Need a volunteer to be on the Venous Quality Council
    - Email will be sent out for volunteers
    - Your institute must participate in the venous registry to be on the council
- VIII. Pathways Development Update: Anne Parker
  - PVI Clone Data for general and demographics
    - Webinar in resources
    - Must clone before you move through case, can't go back and clone
    - Released in quarter 1
  - PVI Post Procedure tab revision
    - To improve data collection and accuracy
  - TEVAR Dissection
    - 1 year still enrolling
    - Sites have received \$854,100
    - FDA has 4 summary reports
  - Lombard Aorfix
    - Still enrolling
    - Sites have received \$79,200
    - Lombard has 4 summary reports
  - Medtronic IN.PACT DCB ISR
    - Still enrolling
    - Objective is to track long term safety and performance
  - Bard LifeStent
    - Still enrolling
    - Objective is to track long term safety and effectiveness
  - CREST 2

- Still enrolling
- 64 physicians are participating through VQI
- C2R have received 10 summary reports
- TCAR
  - Collaboration with CMS to provide reimbursement
  - Submit Meciare claim using NCT 02850588
  - Data will be compared to CEA data
  - Objective to generate real-world data for future decisions about coverage for TCAR
  - You need to be enrolled in VQI or Roadster
  - If you are not with CREST2, use the new CAS form

- IX. Contact PATHWAYS at [vqi@m2s.com](mailto:vqi@m2s.com) if you are not receiving emails from VQI or Pathways
- X. Contact PATHWAYS support with questions regarding the VQI registry at [PATHWAYSSupport@m2s.com](mailto:PATHWAYSSupport@m2s.com)
- X. Next Meeting will be with TSVES. Please send any recommendations for change of the Regional Meeting to Dr. Dennis Gable or Carrie Bosela.

Next Meeting

The Crescent Hotel, Gallery II

Friday, November 3<sup>rd</sup>

2:00-5:00 pm

Data Manager meeting 1:00-2:00 pm