

Project Overview

Problem Statement: During the Fall 2023 Upper MidWest Regional Meeting, the region was at 58.5% overall for PVI Claudication ABI/Toe Pressure. After a robust discussion, it was decided that this needed to become a regional QI project.

The acquisition of Ankle Brachial Index (ABI) studies prior to peripheral vascular interventions is below expected benchmarks for Hospital X performing these interventions. According to AHA/ACC guidelines, an ABI should be conducted on patients presenting with risk factors for PAD so that therapeutic interventions known to diminish their increased risk of myocardial infarction (MI), stroke, and death may be offered.

The Hospital X SVS ABI rates are lower than national SVS rates. The 2023 Hospital X rate was % with the VQI regional rate comparison at 58.5% and VQI national rate at 67.5%.

Goal: Hospital X will improve rate of pre-procedural ABI testing to % by December 31, 2024.

The UMW Regional goal will be to improve the PVI Claudication ABI/Toe Pressure by 3-5% by the Spring 2025 Regional Meeting.

Scope: This project will include patients undergoing Peripheral Vascular Interventions at Hospital X for 1/1/2024-12/31/2024.

Deliverable(s):

1. Provide education to staff regarding ABI studies and current performance with benchmarks.
2. Develop monthly reporting process to providers with individual and group rates .
3. Meet with Vascular team to discuss adding ABI to the pre-procedure testing.
4. Report data monthly for 1 year and audit cases to evaluate effectiveness of education, identify challenges and need for potential changes.
5. Develop EPIC/Cerner smart phrases and integrate these into the EHR's
6. Create OP Note template
7. Communication for all stakeholders on the importance of ABI's versus ultrasound
8. Develop system on how to obtain studies outside of center

Resources Required:

1. Educational material
2. IT department
3. EPIC champions
4. Various Stakeholders input
5. Auditors

Key Metrics		Milestones	
Outcome Metrics Improvement on the percentage of patients receiving testing prior to their procedure Process Metrics: Making sure to obtain testing done at Hospital X on transfer patients. VQI data Smart phrase utilization		Milestone / Description:	Date (mm/yy):
		Complete 'QI Project Overview'	12/2023
		Confirm baseline outcome metric	12/2023
		Identify root cause / hypothesis	12/2023
		Identify potential improvement(s)	12/2023
		Implement improvement(s)	1/2024
		Evaluate progress & confirm action plan	2/2024 and ongoing
Team Members			
Exec Sponsor:		Clinical Sponsor:	
Sponsor:		Process Owner:	
Project Leader:		Team Members:	

Upper MidWest Regional QI PROJECT CHARTER

Task Name	Responsible	Planned			Actual		% Complete
		Start Date	Finish Date	(wks)	Start	Finish	
Initiate Project				0.0			0%
Draft charter				0.0			100%
Interview stakeholders to understand process/issues				0.0			0%
Identify team members and process owners				0.0			0%
Define meeting schedule (team, process owner, sponsor, exec)				0.0			0%
Hold project kickoff				0.0			0%
Confirm charter				0.0			0%
Confirm Baseline				0.0			0%
Identify metrics needed				0.0			0%
Create data collection plan for needed metrics				0.0			0%
Collect baseline measurements				0.0			0%
Create current state process map				0.0			0%
Create communication plan				0.0			0%
Identify Root Cause				0.0			0%
Create detailed process map				0.0			0%
Confirm process map				0.0			0%
Perform data analysis				0.0			0%
Perform root cause analysis				0.0			0%
Identify and validate areas of opportunity				0.0			0%
Develop Solution & Implement				0.0			0%
Generate potential interventions				0.0			0%
Prioritize/select interventions				0.0			0%
Define future state process				0.0			0%
Determine gaps between current and future state				0.0			0%
Create intervention implementation plan				0.0			0%
Pilot interventions				0.0			0%
Assess and modify interventions as needed				0.0			0%
Evaluation				0.0			0%
Develop monitoring process to track metrics				0.0			0%
Create Evaluation/Action plan				0.0			0%
Review with sponsors				0.0			0%
Transition full ownership to process owner				0.0			0%