

Fall Regional Meeting
Midwest Vascular Collaborative (MVC)
October 15, 2021
Remote Meeting

Attendance:

Andrea Fassiotto	Dr. Greg Schmieder	Megan Gibas
Ashlee Vinyard	Eleftherios Xenos	Melissa Trott
Bethany Taylor	Elena Kleeman	Michelle Delda
Blair MacPhail M.D.	Eric Endean's	Missy Eggleston
Brad Thomas	Gary Lemmon	Mohammed Ezuddin
Carmen Griffith	Greg Westin	Nathaniel Dew
Carol Kotva	Hanna Speicher	Neil Mascarenhas
Caroline Morgan	Jen Harris	Raghunandan Motaganahalli
Carrie Bosela	John Martens	Sam Tyagi
Charles Bower MD	Justin Lightburn	Sarah Strot
Dave Osterman	Kathy Maddox	Sreenivas Kamath
David Lipski	Kelly Byrnes (Norton Healthcare)	Tana Repella
Debbie MacAulay	Lliliana B Terziyska-Kuvlieva	Thomas Etter
Dennis Wolf SJRMC	Mark Fleming	ZIAD FAYAD
Lillian Camino		

I. Presentations:

- Regional Data Review (Dr. Eleftherios Xenos MD, MVC Medical Director)
- Regional QI Proposal (Dr. Eleftherios Xenos MD, MVC Medical Director)
- National VQI Update (Carrie Bosela, PSO Senior Director of Clinical Operations)
- AQC Update (Dr. Bradley Thomas MD)
- VQC Update (Dr. Ziad Fayad MD)
- RAC Update (Dr. Raghu Motaganahalli, MD)
- Governing Council Update (Dr. Gary Lemmon MD)
- Open Discussion/Next Meeting/Meeting Evaluations

Regional Data Review

(Dr. Eleftherios Xenos MD, MVC Medical Director)

- 3 new centers joined MVC: Mercy Health Lourdes Hospital, UofL Health Mary & Elizabeth Hospital, and UofL University of Louisville Hospital
- **Fall 2021 Important Report Updates:**
 - NEW: Display of 10th/90th percentiles have been added to the dashboard reports.
 - NEW: Region Volume Appendix that provides region volumes of cases included for each report. Important for risk adjustment data interpretation and missing fields.
 - NEW: Long Term Follow up mandatory fields' rules start to be reflected in the reports.
 - NEW: TCAR inclusion/exclusion criteria changed excluding non-carotid access from reports.
 - NEW: OAAA reports will include longer span of years (4yrs aggregate) due to low procedure volume preventing from displaying tables in regional reports.
- **Procedure Volumes:** in the region has not significantly changed in the last period.
- **Physician Specialty Distribution:** Our region has slightly different physician representation than nationwide with a much higher volume of cardiology and radiology.
- **Long Term Follow Up:** our region has higher LTFU compliance than nationwide (76% vs 68%).
 - *Group Discussion: High LTFU compliance centers (Goshen Hospital and Baptist Hospital) shared their strategies on how they were able to reach high numbers. Factors contributing to success included: small size hospital, strong data manager, work closely with surgeon scheduler and practice admin using VQI LTFU tools, having access to all EMR databases used (even outside clinic EMR), participation in less challenging modules, change the follow up appointments to be within 9-21m window.*
- **Discharge Medications:** our region compliance is higher than benchmarks (89% vs 86%).
- **Carotid Stent Stroke/Death** (among cases with complete data): our region is doing good preventing stroke/death after carotid stenting (compared with what is expected and with benchmarks):
 - **In TFEM Asymp:** Region Observed (1.5%) vs Expected (1.9%) vs Benchmarks (1.7%)
 - **In TFEM Symp:** Region Observed (4.5%) vs Expected (4.4%) vs Benchmarks (6.1%)
 - **In TCAR Asymp:** Region Observed (1.3%) vs Expected (1.3%) vs Benchmarks (1.4%)
 - **In TCAR Symp:** Region Observed (0.8%) vs Expected (2.7%) vs Benchmarks (2.3%)
 - *Group Discussion: Dr. Motaganahalli shared his experience regarding his TCAR early utilization (since 2015) and his success stories.*
- **Carotid Endarterectomy Stroke/Death** (among cases with complete data): our region has slightly higher stroke/death after endarterectomy:
 - **in Asymp CEA:** Region Observed (1.4%) vs Expected (1.1%) vs Benchmarks (1.0%)

- **in Symp CEA:** Region Observed (2.2%) vs Expected (2.1%) vs Benchmarks (2.1%)
- *Group Discussion: Group noticed that we had “2 centers in our region with significantly higher stroke/death rate in Asymp patients”, and “2 centers with significantly higher stroke death in Symp patients”. They can reach Carrie Bosela for assistance in improvement.*
- **Carotid Endarterectomy Post-op LOS >1day:**
 - **in Asymp CEA:** Region Observed (18.5%) vs Expected (22.1%) vs Benchmarks (22.0%)
 - **in Symp CEA:** Region Observed (24.3%) vs Expected (43.8%) vs Benchmarks (40.9%)
 - *Group Discussion: We have lower “CEA post-op LOS” than benchmarks. Physicians stated that might be due to our regions strong rehab services. The region was encouraged to use the data for studies and paper publishing.*
- **EVAR Post-Op LOS >2days:** our region had slightly higher LOS after EVAR than benchmarks
 - Region Observed (16.2%) vs Expected (15.6%) vs Benchmarks (15.7%)
 - *Group Discussion: Discussion about possibility of lacking adequate documentation of comorbidities.*
- **EVAR Diameter Sac Reporting:** our region is 2nd best in from all regions at better “Sac diameter surveillance at 1yr (9-21m)” than benchmarks
 - Region (70.7%) vs Benchmarks (15.7%)
 - *Group Discussion: High compliance centers (IUH Arnett) shared their strategies on how they were able to reach high numbers. Factors contributing to success included: small volume of cases, good 1yr LTFU compliance, providing recurrent feedback of compliance with documentation, getting report from imaging with sac measured numerically, giving permission to abstractor to use sac diameter from imaging report when clinical notes lack sac diameter, using template for LTFU notes. Physicians stated correlation between sac diameter reporting and mortality/survival.*
- **EVAR SVS Sac Size Guidelines:** our region falls below Sac size guidelines for EVAR.
 - Region (68.3%) vs Benchmarks (74.3%)
 - *Group Discussion: SVS is working to improve data capturing of “other sac size guidelines” that are not currently captured in module. More is yet to come.*
- **TEVAR Diameter Sac Reporting:** our region falls within the status quo of most of the nation.
 - Region (50.8%) vs Benchmarks (55.7%)
 - *Group Discussion: Group stated having the same barriers as in EVAR.*
- **OAAA: In Hospital Mortality:** our region has better survival rate than benchmarks in the 4yr span.
 - Region Observed (3.3%) vs Expected (3.6%) vs Benchmarks (4.2%)
 - *Group Discussion: group noticed 1 center with a much higher mortality.*
- **OAAA: SVS Cell-Saver Guideline:** our region is close to benchmarks for the 4yr span
 - Region (85.4%) vs Benchmarks (92.4%)

- *Group Discussion: only 1 center with a low Cell saver utilization (can be a problem in understanding how to abstract this variable... contact Carrie Bosela for discussion)*
- **OAAA: SVS Iliac Infor Guideline:** our region is close to benchmarks for the 4yr span
 - Region (93.2%) vs Benchmarks (97.4%)
- **PVI Claud: ABI/Toe Pressure:** our region does better at getting pre-procedure test.
 - Region (79.0%) vs Benchmarks (75.4%)
 - *Group Discussion: 5 centers in our region below 70%*
- **Infra CLTI: Major Complications:** our region does less complications than benchmarks.
 - Region (4.0%) vs Benchmarks (4.8%)
 - *Group Discussion: 3 centers in our region with complication rate of >5%*
- **Supra CLTI: Major Complications:** our region does less complications than benchmarks.
 - Region (5.7%) vs Benchmarks (8.0%)
- **LEAMP: Postop Complications:** not enough centers to display data in our region.
- **HAD: Primary AVF vs. Graft:** our region is 2nd best from all regions.
 - Region (91%) vs Benchmarks (81.8%)
- **IVCF: Filter Retrieval Reporting:** not enough centers to display data in our region.

Regional Improvement Projects

- *Group Discussion: The group discussed choosing “EVAR and TEVAR Sac Diameter reporting at 1yr” as a regional project for ALL centers to improve.*

National VQI Updates

(Carrie Bosela, PSO Senior Director of Clinical Operations)

- **VQI Centers** keep growing, with currently 861 VQI centers participating with 18 regional groups, and 800K procedures captured in the registry. 2 new registries available: Vascular Medical Consult Registry and Venous Stent Registry
- **Trainee Program:** opportunity for resident/fellows to become mentored in the VQI data analysis and research. This program is in collaboration with APDVS. If interested in the program or to be a mentor, contact Betsy Wymer or Dr. Gary Lemmon.
- **PSO Diversity Equity and Inclusion Committee:** new committee to address diversity in governance and leadership activities.
- **2021 VQI Annual Meeting:** successful hybrid meeting with all sessions live-streamed. Posters presented and podium presentations available in on VQI website. New Poster award: “PSO Director Award”. Presenting data in posters, SVS etc is eligible for Star Award points.
- **SVS/VQI Registry had the 10th year anniversary.**
- **Covid-19 Update:** Review of primary outcomes in Covid variables presented. VQI had robust data that was analyzed and presented (refer to slide deck for more details). More analysis to come. Vaccination variables will be added to the registry.
 - Note: relationship of increase mortality and Covid positivity in VQI population.

- **“My PAD” Patient Reported Outcomes (PROs):** VQI started a pilot for PRO for PVI. Still on pilot format. Collect VasculQoL-6 and EuroQoL 5D-5L. Uses paper form, computer tablet and smart phones for answering questionnaire. If interested contact Carrie Bosela.
- **New SVS PSO Director of Quality:** Betsy Wymer started this role. Cheryl Jackson retired from this role.
- **Quality Improvement Resources:** multiple resources available in our regional website: Quarterly webinars, monthly VQI News, QI Project Guide Supplement.
- **Charters:** there are focus groups calls available to anyone wanting to participate. Great tool for networking and discussing successes and barriers with other peers working on similar projects. If needed, you can request one on one call Contact Betsy Wymer.
- **Participation Award Program Update:** Scoring 2020 had 3 categories: Meeting attendance (including regional meetings), QI project involvement and number of registry participation. In 2021, LTFU will be reinstated for Star Award system.
- **New Name FIVOS:** Medstreaming and M2S are now called FIVOS. Verify spam folder for FIVOS email.

Arterial Quality Council (AQC)

(Carrie Bosela, PSO Senior Director of Clinical Operations)

- **Development Priorities for revision:** Infra/Supra Registry (end 2021) and OAAA Registry (2022q2)
- **New Pathways Follow Up Report:** CAS and EVAR are currently available. CEA, TEVAR, PVI, HAD will be available (by end 2021-early 2022).
- **Other items AQC working on:** CAPI Reports, Standard Operative Notes for Epic users, Registry specific QI Initiatives, My PAD PRO, Opioid variables for Infrainguinal Registry (released... some variables will not be mandatory anymore), and Registry Education recorded sessions (available at website).
- **Vascular Medicine Consult Registry:** available for participation. Focus is clinical management on Atherosclerotic carotid artery occlusive disease, Abdominal Aortic Aneurysm, and Peripheral Lower Extremity arterial disease due to atherosclerosis or true aneurysm. If interested, contact Carrie Bosela.

Venous Quality Council (VQC)

(Dr. Ziad Fayad, MD)

- **VQC will resume frequent meetings.**
- **3 committees on this council:** IVC filter, Varicose Vein and Venous Stent.
- **3-year Goals:** Representation at AVF, creation of Dashboards for the registry, CAPI reports, COPI reports, etc (refer to slide deck).
- **Venous Stent Registry:** is available for participation. If interested contact Carrie Bosela.

Arterial Research Advisory Council (RAC)

(Carrie Bosela, PSO Senior Director of Clinical Operations)

- **New SVS PSO Associate Medical Director:** Dr. Leila Mureebe, MD
- **Tools available for RAC Proposal:** Video on “How to Submit a RAC Proposal for Success”, and other tools available for new investigators.
- **Proposal Process for Research:** Contact Dr. Raghu Motaganahalli and/or Carrie Bosela for more information. (see slide deck for more information).
- **Vascular Implant Surveillance and Interventional Outcomes Network (VISION):** partnership between VQI and MDEpiNet. This allows to do 5yr outcomes research studies on Medicare patients for more info contact Carrie Bosela.
 - **New reports were sent in august to facilities using this VISION 5yr Outcome information of EVAR, Open AAA, CEA, CAS.**

Governing Council (GC)

(Dr. Gary Lemmon, MD, PSO Associate Medical Director)

- **Governing Council is working on:**
 - COVID Collaboration with VASCC
 - Improved Reporting (PSO reports/MedStreaming)
 - US News and World Report Collaboration
 - Data Integration (Epic/Cerner)
 - Relationships (Societies/FDA/CMS/Industry)
 - SVS PSO Diversity Committee