

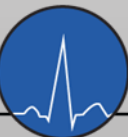
The logo for ASPIRE, featuring the word "ASPIRE" in a large, bold, blue sans-serif font. Below it, the full name "Anesthesiology Performance Improvement and Reporting Exchange" is written in a smaller, red sans-serif font. The logo is centered at the top of the slide, flanked by two horizontal bars of vertical lines of varying heights, resembling a waveform or a data visualization.

Anesthesiology Performance Improvement and Reporting Exchange

Quarterly Meeting – Breakfast Session

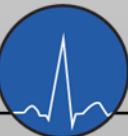
Kalamazoo, Michigan

June 10th, 2016

A smaller version of the ASPIRE logo, located in the bottom left corner. It consists of the word "ASPIRE" in blue, with the full name "Anesthesiology Performance Improvement and Reporting Exchange" in red below it. The logo is set against a white background with a thin border of vertical lines.

Agenda

- Executive board notes/ membership
- Provider email update
- Site visits discussion
- Provider Contacts tool – Katie Buehler, RN
- Education Module – Jamie Osborne, RN
- IARS update
- Cohort 3 planning
- Site QI projects – a survey

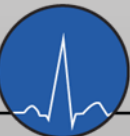


Welcome!



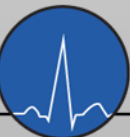
MPOG Executive Board Meeting – May 2016

- New Board Members
 - Timothy Cahill, MD - St. Joseph Mercy
 - Robert Craft, MD – University of Tennessee
 - Hugh C. Hemmings, MD, PhD – Weill Cornell
 - Jeffrey Kirsch, MD – Oregon Health Sciences



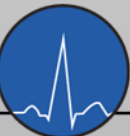
Provider Email Update - All Cohort 1 sites receiving emails

Institution	Earliest Email
University of Michigan Health System	July 2015
Trinity - St. Joseph Mercy Ann Arbor, Chelsea, Livingston	November 2015
Beaumont Royal Oak and Troy	January 2016
Trinity - Mercy Health Muskegon	April 2016
Beaumont Dearborn and Taylor	April 2016



When will the randomization end?

- Approximately 6 months after each site starting receiving the current slate of measures in Galileo (ie not including Temp or AKI)
- Statistical experts analyzing data to confirm adequate numbers
- Will be able to inform sites in next couple of weeks



Cohort 2 Reminder: Individual Performance e-mail

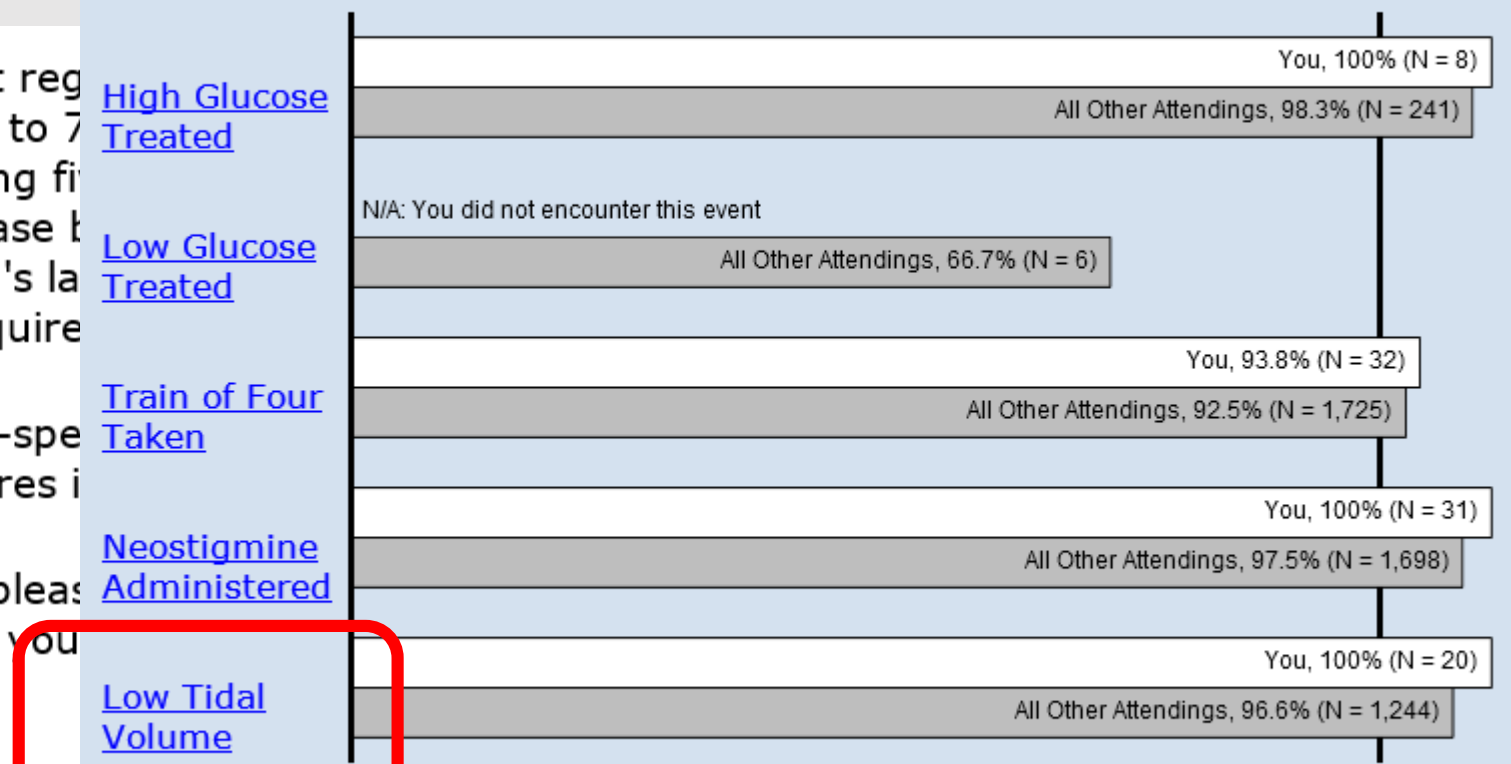
The ASPIRE team has compiled a report regarding an anesthesia attending from 7/1/2015 to 7/31/2015. This report contains performance measures targeting five areas of focus. If you'd like a case-by-case breakdown of a particular measure, click on the graph's label on our reporting website (ASPIRE login required).

Because of the wide variation in patient-specific performance threshold for these measures, your performance is compared to all other attendings.

If you have any questions or feedback please email aspire@med.umich.edu. Thank you for your participation.

Sincerely,
The ASPIRE Team

Your Performance vs All Other Attendings



An asterisk (*) denotes that the difference between your performance and everyone else's was statistically significant.



Single click from email to list of failures

Failed PUL 01 Cases

Drilldown Reports Trusted Url

Based on version 5.6.5

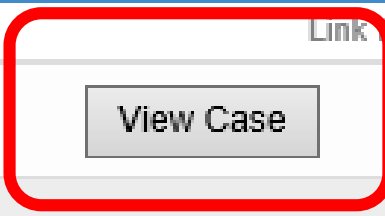
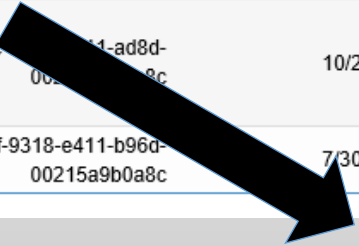
Dependencies (10)

5. Failed Cases + Tag

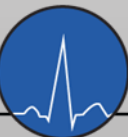
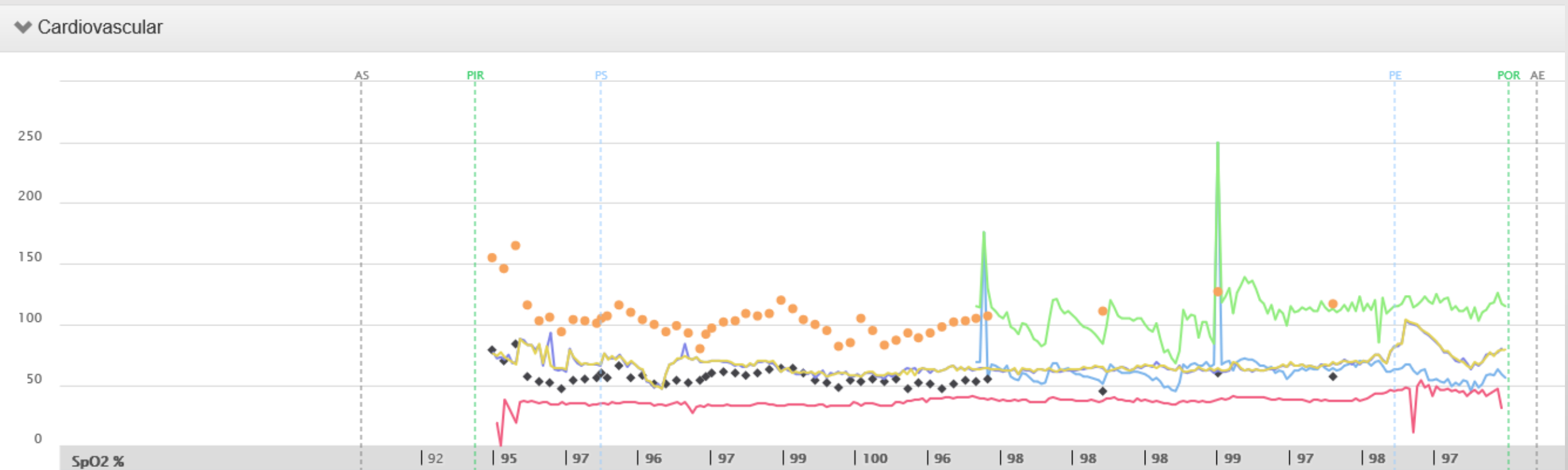
+ Execution Group

Completed at 7/3/2015 3:26:39 AM. Processed

Link to Case	MPOG Case ID	Sc	Procedure	Ideal Body Weight (kg)	Median Tidal Volume
View Case	b5dc36cd-8c8a-e411-ba4e-00215a9b0a8c	12/22/20	THYROIDECTOMY	38.58	387.00
View Case	764aab2c-...-ad8d-00...	10/22/20	TOTAL ABDOMINAL HYSTERECTOMY WITH BILATERAL SAPHINGO-OOPHORECTOMY	43.23	442.00
View Case	ec80500f-9318-e411-b96d-00215a9b0a8c	7/30/20	LAPAROSCOPIC PARTIAL RECTOMY WITH DAVINCI	52.42	533.50



Easy access to actual intraoperative record of failure



Pul 01 Case Viewer

48 years old, F
 ASA Status: 3
 119.153 kg (...), 61 in (...)

Beaumont Health
 Procedure Time: 09/30/2015 08:00
 Anes Duration: 08:00 to 11:03
 Procedure: CRANIOTOMY FOR TUMOR
 Diagnosis: BRAIN METASTASIS

MPOG Case ID: 1d068621-43b2-fc7f-e053-
 eb7052a270d2
 MPOG Patient ID: f308b61d-3ced-db9e-e053-
 eb7052a23c4d
 AIMS Case ID: 39959018
 AIMS Patient ID: Z2662792

Time	Desc	Note
00:00	A-LINE (ANESTHESIA ONLY)	A-LINE (ANESTHESIA ONLY)
08:00	Anesthesia Start Time	Anesthesia Start Time
08:00	Anesthesia Start	Anesthesia Start
08:05	Start Data Collection	Start Data Collection
08:13	Induction	Induction
08:17	Intubation	Intubation
08:27	Ready for Case	Ready for Case
08:27	Position	Supine; Surgeon directed/participated in positioning
08:27	Head	Mayfield pins
08:27	Arms	Padded arm board I

> Cardiovascular

< Ventilator

	AS																		AE
Tidal Volume actual		13	628	583	583	620	624	578	486	501									
Positive End Expiratory...						4	4	4	4	4									
Respiratory Rate-Unspec...		26	14	12	13	13	13	13	10	8									
Peak inspiratory pressure		1	28	26	27	28	28	26	27	4									

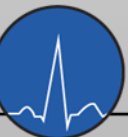
> Neuromuscular blockade

> Prophylaxis

> Medications

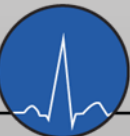
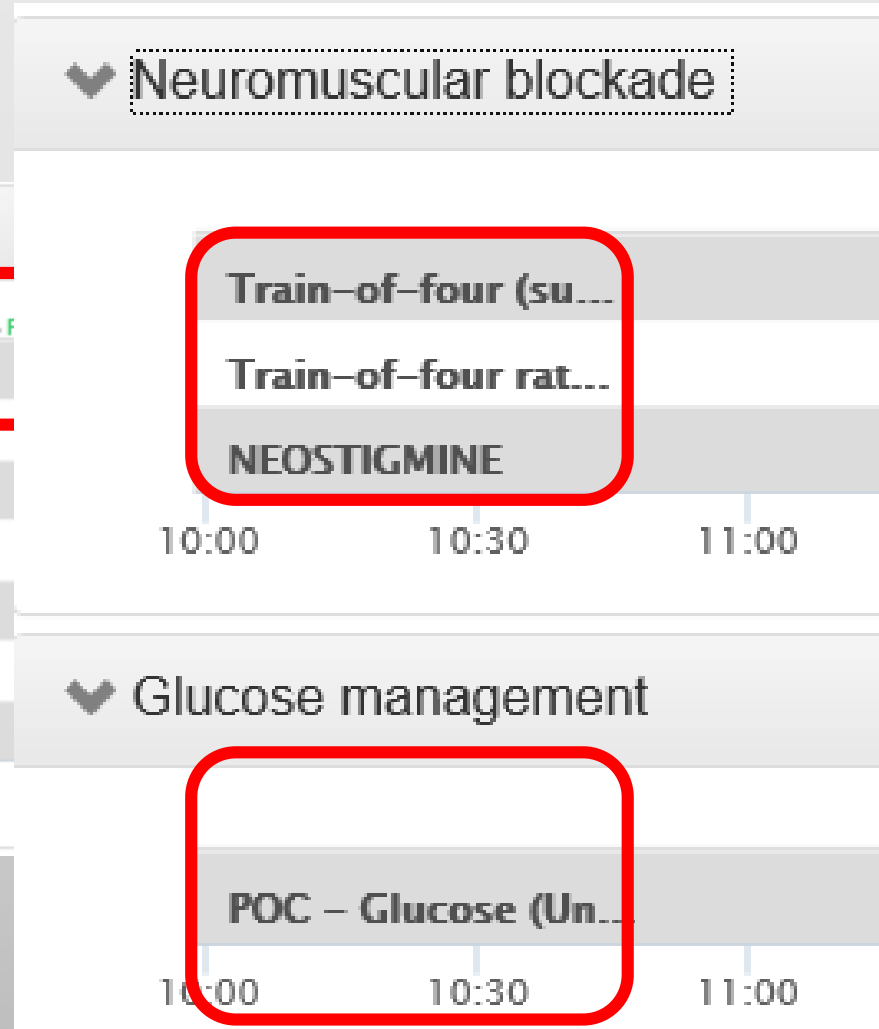
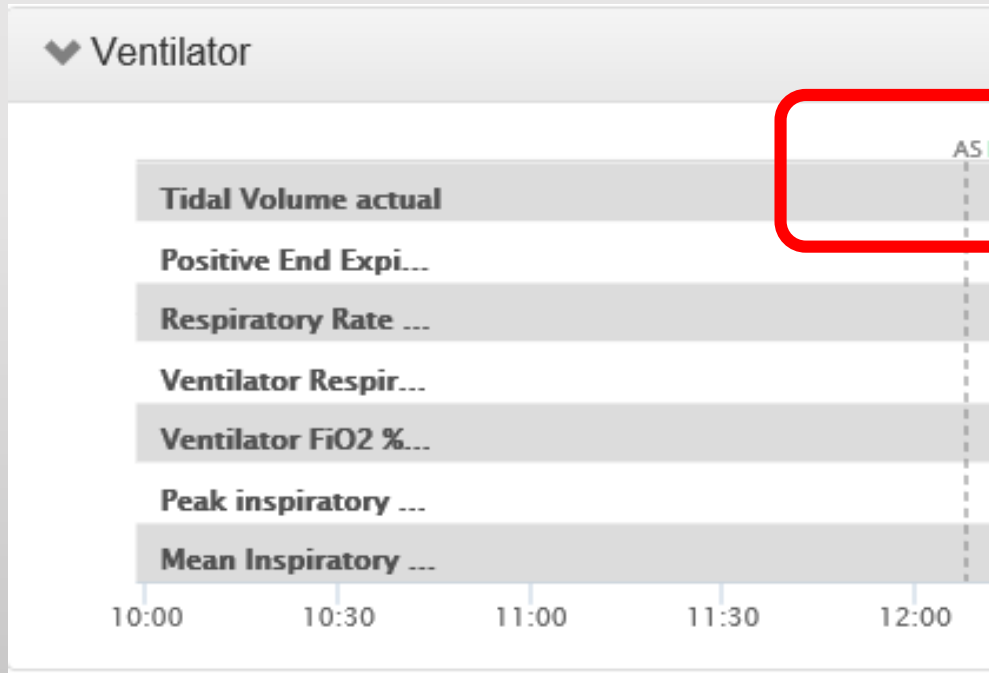
> Fluids

> Physiologic

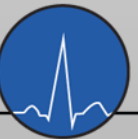


Each measure has a specific case viewer template

67 years old, F
ASA Status: ASA 3
100 kg, 57 in (...)

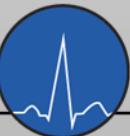


Feedback from Cohort 1 sites on emails?



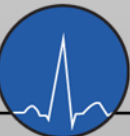
Site Visits - completed

- University of Michigan – March 2015
- St. Joseph Ann Arbor, Chelsea, Livingston – January 2016
- Beaumont Dearborn and Taylor – January 2016
- Beaumont Royal Oak and Troy – January 2016
- Mercy Muskegon – April 2016



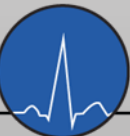
Site visits to be planned

- Beaumont – Farmington Hills
- St. Joseph – Oakland
- St. Mary Mercy – Livonia
- Bronson – Kalamazoo/Battle Creek
- Holland Hospital – Holland
- Sparrow



Provider Contact Application – Katie Buehler, RN

- Also known as the ‘User Management Tool’
- Access granted to each Quality Champion and ACQR
- Provider information previously sent to ASPIRE already uploaded



Provider Contact Application

MPOG / ASPIRE Application Suite

User Management Tool

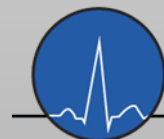
Institution: University of Michigan Health System ▾

Show 10 ▾ entries at a time

Export ▾

⇅ Status	⇅ AIMS Staff ID	⇅ Staff Role	⇅ First Case Date	⇅ Last Case Date	⇅ Case Count
Incomplete		Resident	3/6/2015	4/30/2015	126
Incomplete		CRNA	7/10/2004	4/22/2015	2421
Incomplete		Attending	7/5/2012	1/16/2015	2259
Incomplete		Resident	11/7/2014	12/30/2014	116
Incomplete		Resident	11/3/2010	12/1/2014	120
Incomplete		Attending	11/19/2014	11/19/2014	1
Incomplete		Resident	9/5/2014	10/30/2014	110
Incomplete		Resident	6/6/2011	9/17/2014	1358
Incomplete		Resident	7/7/2014	8/30/2014	133
Incomplete		Resident	7/8/2014	8/8/2014	57

ASPIRE provides information in these columns. **Export option available for future updates.**



Provider Contacts Application

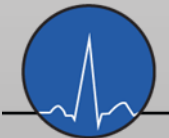
Template available for import. [Excel / CSV Import](#)

Search: Status: All - Staff Role: All - Active: All -

First Case Date	Last Case Date	Case Count	First Name	Last Name	Email	NPI	TIN (Opt.)	Active
3/6/2015	4/30/2015	126	Click to Edit	Click to Edit	Click to Edit	Click to Edit	Click to Edit	No
7/10/2004	4/22/2015	2421	Click to Edit	Click to Edit	Click to Edit	Click to Edit	Click to Edit	No
7/5/2012	1/16/2015	2259	Click to Edit	Click to Edit	Click to Edit	Click to Edit	Click to Edit	No
11/7/2014	12/30/2014	116	Click to Edit	Click to Edit	Click to Edit	Click to Edit	Click to Edit	No
11/3/2010	12/1/2014	120	Click to Edit	Click to Edit	Click to Edit	Click to Edit	Click to Edit	No
11/19/2014	11/19/2014	1	Click to Edit	Click to Edit	Click to Edit	Click to Edit	Click to Edit	No
9/5/2014	10/30/2014	110	Click to Edit	Click to Edit	Click to Edit	Click to Edit	Click to Edit	No
6/6/2011	9/17/2014	1358	Click to Edit	Click to Edit	Click to Edit	Click to Edit	Click to Edit	No
7/7/2014	8/30/2014	133	Click to Edit	Click to Edit	Click to Edit	Click to Edit	Click to Edit	No
7/8/2014	8/8/2014	57	Click to Edit	Click to Edit	Click to Edit	Click to Edit	Click to Edit	No

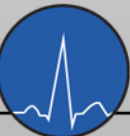
Previous 1 ... 43 44 45 ... Next

Site populates these columns using AIMS Case ID as identifier.
***Mark those providers who should no longer receive feedback as inactive (Active: No).**



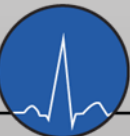
Tips for Successful Upload

- Technical team to identify provider AIMS Staff ID.
- ACQR or Quality Champion to populate using template:
 - First Name
 - Last Name
 - Email Address
 - NPI
 - TIN (**Required for QCDR sites only.**)
- Template now allows for 'null' cells.
- All columns must be populated to show as complete
(Exception: TIN for non-QCDR sites).
- Continue to update at least quarterly.
- 'Provider Contacts' button on the MPOG suite: Coming soon!



Education Module Updates - Jamie Osborne, RN

- Former PPAI group currently completing the first module for the NMB measure
- Current members:
 - Lead: Dr. Leslie Jameson, University of Colorado
 - Dr. Jaime Hyman, Mount Sinai
 - Dr. Francine Yudkowitz, Mount Sinai
 - Dr. Dawn Dillman, Oregon Health & Science University
 - Dr. Mohammed Minhaj, University of Chicago
 - Dr. Tim Dubovoy, University of Michigan, ASPIRE QI Champion
- More ASPIRE membership is encouraged, needed. If interested, please contact Jaime Osborne jsulek@med.umich.edu or Katie Buehler kjbucrek@med.umich.edu



Plan for module roll-out

- Will be adding section to curriculum tab on our website
- Publicly accessible within the month
- Available for staff distribution as part of plan for performance improvement for measures



The screenshot shows the ASPIRE website interface. At the top, the ASPIRE logo is displayed in blue, with the full name "Anesthesiology Performance Improvement and Reporting Exchange" underneath. Below the logo is a navigation menu with several tabs: "Curriculum", "Technical", "News/Media", "Contact Us", "MPOG", and "ACQR". A large red arrow points from the left towards the "Curriculum" tab, which is also circled in red. Below the navigation menu, the main content area features a "Welcome" section with a banner image of medical equipment. The text below the banner describes the ASPIRE initiative, its funding, and its goals. To the right of the main content, there are several news items and a "View My Reports" button. At the bottom right, there are logos for Blue Cross Blue Shield of Michigan and Blue Cross Blue Shield of Michigan, along with text indicating their support for ASPIRE.

ASPIRE
Anesthesiology Performance Improvement and Reporting Exchange

Curriculum Technical News/Media Contact Us MPOG ACQR

Welcome



The Anesthesiology Performance Improvement and Reporting Exchange (ASPIRE) is a quality improvement initiative based at the University of Michigan partially funded by Blue Cross Blue Shield of Michigan (BCBSM) and based upon the data infrastructure of the Multicenter Perioperative Outcomes Group (MPOG, www.mpogresearch.org). ASPIRE uses EHR and administrative data to analyze the interplay between patient comorbidities, surgical procedure, intraoperative anesthesiology technique and interventions, and postoperative outcomes. By combining this data with a culture of collaboration, ASPIRE creates an environment of performance improvement using priorities and measures driven by its members. With more than 4.7 million anesthetics integrated across 30 hospitals, ASPIRE represents one of the most detailed and comprehensive international anesthesiology datasets.

The program enables motivated physicians and hospitals to assess variation in practice, identify local / regional best practices, and measure process adherence and patient outcomes. We aim to integrate surgeon and anesthesiologist perspectives to improve patient care using data as the foundation for collaboration. The ultimate goal of ASPIRE is to improve the quality of anesthesiology care in the state of Michigan and around the world. We will use real-world data and the collective experience of its members to transform care.

ASPIRE takes a data-driven, collaborative approach to transform perioperative care to:

1. Measure variation in intraoperative ventilation, fluid therapy, and neuromuscular blockade practice
2. Reduce unnecessary intraoperative administration of blood products and colloid fluids
3. Measure variation in primary anesthesia technique, hemodynamic management, and patient monitoring to identify optimal and cost-effective patterns of care
4. Build collaborative relationships across surgeons and anesthesiologists across hospitals

View My Reports

News
MPOG/ASPIRE April 2016 Newsletter
April 2016 Newsletter now available.

MPOG App Upgrade
All sites are being upgraded the week of April 18, 2016.

QCDR 2016
ASPIRE re-approved QCDR for 2016.

Welcome Cohort 2 Sites
ASPIRE is pleased to welcome our 7 new Cohort 2 sites.

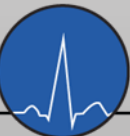
Cohort 1 Sites now Active!
ASPIRE is pleased that 8-sites are now active!


Nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association
Support for ASPIRE is provided, in part, by Blue Cross and Blue Shield



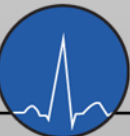
Education Module Updates

- First version of modules will be PowerPoint and Word Doc including an educational activity.
 - Example: the NMB Module contains an additional Suggamadex educational activity.
 - Entire NMB Module is about 50-60 slides and 20-30 pages (Module approx. 2-3 hours for provider to complete)
- Future versions will have formatting to enable MOCA Part IV and CME credit
 - More information to follow in the Fall/Winter 2016/2017



Measure Update – Pul 01 – IARS Panel on LPV

- Extensive research (both basic science and clinical) has been performed examining the relationship between lung ventilation parameters and outcomes (e.g. ARDS, hospital stay, mortality).
- Both increased PEEP (>5 cm H₂O) and decreased tidal volumes (<6-10 mL/kg IBW) have been investigated individually, demonstrating associations with improved outcomes.
- Bender et al. demonstrated using MPOG data from 2008 to 2012, a reduction in tidal volume and an increased use of PEEP \geq 5 cm H₂O. However, to date, there is no consensus on which level of tidal volume and PEEP – when assessed together rather than in isolation – constitutes optimal LPV.
- Furthermore, the effect of driving pressure (plateau pressure – PEEP) has been largely uninvestigated until recently.
- This panel focused on presenting recent research in the field, which suggests that perhaps the key to LPV is driving pressure, rather than tidal volume or PEEP.

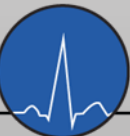


Cohort 3 planning – Limited sites

- Henry Ford Hospital – Detroit and West Bloomfield
- Beaumont - Grosse Pointe

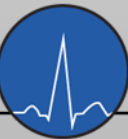


Beaumont



Site QI projects – a survey

- UMHS
 - Handovers
 - Various enhanced recovery protocols
 - Antibiotic timing



Thank you!

Meet again at 12:45...

ASPIRE

Anesthesiology Performance Improvement and Reporting Exchange

