Anesthesiology Performance Improvement and Reporting Exchange (ASPIRE)

Quality Committee Meeting Notes – Monday, July 24, 2017

Attendees: P=Present; A=Absent; X=Expected Absence

P	Abdallah, Arbi 'Ben' (Wash U)	P	Kaye, Toni (ASA AQI)
P	Adelman, Bruce (Henry Ford)	P	Kooij, Fabian (AMC)
P	Angel, Alan (Bronson Battle Creek)	P	Kuck, Kai (Utah)
P	Aziz, Michael (OHSU)	P	Lagasse, Robert (Yale)
P	Biggs, Daniel (Oklahoma)	P	Lacca, Tory (Michigan)
P	Laura Bonello (Beaumont)	P	Chris Ladd (Michigan)
P	Katie Bornhoft (Michigan)	P	Lins, Steve (Bronson Battle Creek)
P	Brightman, Deena (Henry Ford)	P	Louzon, Kathryn (Beaumont Royal Oak/Troy)
P	Buehler, Katie (Michigan)	P	Mathis, Mike (Michigan)
P	Carlington, Jen (St. Mary)	P	Molina, Susan (St. Joseph Oakland)
P	Cuff, Germaine (NYU Langone)	P	Nachamie, Anna (Weill Cornell)
P	Colquhoun, Douglas (Michigan)	P	Naik, Bhiken (Virginia)
P	Coons, Denise (Bronson Battle Creek/Kalamazoo)	P	Nelson, Ann (Beaumont)
P	Crawford, Joan (Mercy Muskegon)	P	Pardo, Nichole (Beaumont Grosse Pointe)
P	Domino, Karen (U of Washington)	P	Poindexter, Amy (Holland)
P	Dubovoy, Tim (Michigan)	P	Price, Matthew (Beaumont)
P	Harwood, Tim (Wake Forest)	P	Quinn, Cheryl (St. Joes Oakland)
P	Heiter, Jerri (St. Joseph)	P	Bob Rensch (Bronson)
P	Jameson, Leslie (Colorado)	P	Shah, Nirav (Michigan)
P	Hightower, William (Henry Ford)	P	Sharma, Anshuman (Wash U)
P	Hitti, Nicole (Weill-Cornell)	P	Silvasi, Daniel (Beaumont Troy)
P	Housey, Shelley (Michigan)	P	Tyler, Pam (Beaumont Farmington Hills)
P	Brandy Horton (A4)		

Agenda & Notes

1. Minutes from June 26, 2017 meeting approved- posted on the website for review. Recording available as well.
2. Upcoming Events
   a. MPOG meeting next year will be in Boston in October 20, 2017. Agenda has been posted on the website.
3. Announcements
   a. MOCA Part IV approved!
   b. Introduction to ASPIRE Toolkits. Avoiding Respiratory Toolkit released last week, contains 4 components focused on improving NMB 01, NMB 02, & PUL 01. Available on the website under Curriculum (QI Toolkits). Feedback welcome!
   c. Updates to ASPIRE dashboard, released July 26, 2017. Expands data for case review and measure review.
      i. Includes passed, failed, and excluded case lists.
      ii. Exposed reasons why the measure failed in order to streamline case review process
      iii. Feedback emails will be delayed one week to accommodate upgrade to ASPIRE dashboard. Emails will go out 7/31/2017. Half measures converted by end of week, the remainder over the next month.

      iv. Available to ACQRs and QI champions only until all measures are converted Providers will have access once all measures have been converted

d. Planning for 2017-2018
   i. Plan on including extra application server at each site as part of BCBSM funding for MI sites
   ii. Important for non-funded sites as well.
   iii. Estimated cost $10,000, some recurring costs may apply specific to each institution
   iv. More information to follow

e. Measure Updates
   i. Discussion last month regarding Transfer of Care QI Program-Measure audit
      1. 2 components to Transfer of Care
      2. Measure that captures yes/no if an appropriate handover between transferring and receiving staff was completed.
      3. Visual audit of handovers ~ 10x/month to determine quality of transfer of care. Sites to participate based on interest and available resources.
      4. PACU TOC 02 measure a QCDR measure
      5. Planned completion of TOC audit tool is end of September for release at ASA

f. Lung protective tidal volume
   i. Create submeasure to look at performance at 8 cc/kg
   ii. Possibly evaluate PEEP values across sites for recommendation as well

g. Oral Morphine Equivalent-Epic Workgroup
   i. Working with Epic to come up with single unified version for use in MPOG for all Epic sites to use.
   ii. Sites can use for research and QI. Will be seen in DataDirect and ASPIRE dashboard to filter based on specific case.

h. CARDS 01 Modification for increased opportunity to improve care
   i. Recent studies suggest significantly elevated mortality with Troponin elevation
      1. Reduce lower limit in ASPIRE measure from 1.0 to 0.6?
      2. Create buckets for mild/moderate/severe Troponin elevation?
      3. Look at rates of Troponin ordering for "major" non-cardiac surgery?

Meeting concluded at 11:00.

7/24/2017