ASPIRE Account & Access to Individual ASPIRE Dashboards

Activation of ASPIRE Account

On the same day you receive your first provider feedback email, you will also receive an ASPIRE Activation Email prompting you to setup your ASPIRE account. If you do not receive this email or you are experiencing difficulty accessing your ASPIRE account, please contact your site's Quality Champion or Anesthesia Clinical Quality Reviewer (ACQR).



Individual ASPIRE Dashboard Access

There are two methods for accessing your Individual ASPIRE Dashboard to review cases; through the Dashboard Login via the MPOG website and also through your Personalized MPOG Quality Performance Report (sent via email). Your MPOG Quality Performance Report is sent via email at the end of each month and includes data from the previous month's cases. For example, the September email will include August performance data.

Accessing your Individual ASPIRE Dashboard via the Dashboard Login through the MPOG website:

1. Go to the MPOG website https://mpog.org/ and click on the blue Dashboard Login icon in the upper right corner of the website. You will be directed to the ASPIRE Login. Sign in using your ASPIRE username (institution email address) and password. You need to create this password using the activation email sent separately. Contact your site quality champion if you did not receive the email to establish your account.



2. If you are unable to remember your password, click on the **Forgot your password?** link and follow the prompts.

	MPDG MULTICENTER PERIOPERATIVE OUTCOMES GROUP	
Log in v	n to MPOG with your username and password below.	
4	Username	
٩,	Password	-
€ For	Login	

3. Once logged in to your ASPIRE account you will be directed to your Individual ASPIRE Dashboard.

	🏫 Dashboards 👻 Measure Sui	mmary 👻 Case List 👻						Individual Provider 👻
International Filters International Filters	My Measure Pe The following measures have be Janurary 2020 - Nov	rformance een selected as focus are vember 2020	eas for your institution.	671 X		100 50 0, 20 ¹ c eb ²⁰ yati	Сазе Volume	Gen 70 Oct 70 How 70
	AKI-01 Acute Kidney Injury Outcome	4.9% Cases Threshold s 10%	BP-01 Low MAP Prevention < 55	100% - Cases Threshold ≥ 90%	BP-02 Avoiding Monitoring Gaps	96% Cases Threshold ≥ 90%	CARD-02 Myocardial Infarction	1.2% Cases Threshold s 5%
	FLUID-01-C Minimizing Colloid Use (Cardiac)	N/A Cases No threshold	FLUID-01-NC Minimizing Colloid Use (Non-Cardiac)	99% Cases No threshold	GLU-01 High Glucose Treated, Intraop	86% Cases Threshold 2 90%	GLU-02 Low Glucose Treated, Intraop	N/A Cases Threshold 2 90%

4. Move to Step 2 on the following page for instructions on navigating through the dashboard.

Accessing your Individual ASPIRE Dashboard via your Personalized MPOG Quality Performance Report (distributed monthly via email):

1. Open your Personalized MPOG Quality Performance Report and click on the hyperlink for any measure to access your Individual ASPIRE Dashboard. You will be directed to the ASPIRE Login. Sign in using your ASPIRE username (institution email address) and

password. Click on the measure hyperlink to access detailed performance information related to a specific measure.



2. Once you have accessed your Individual Dashboard, click on any of the measure hyperlinks in the measure column *or* the individual measure boxes to further examine your personal performance.

S Reporting	▲ Dashboards Measure Summ	ary 👻 Case List 👻						Individual Provider 👻
Entity John Doe (Hospital A) Time keriod Past 12 Months Additional Filters	My Measure Perf The following measures have been Janurary 2020 - Nover	ormance selected as focus are mber 2020	as for your institution.	671 Areas		50	Case Volume	
Location Patient Age Patient Gender Patient Gender Patient Race/Ethnicity Surgical Service	AKI-01 Acute Kidney Injury Cutcome	boards < Measure Summary < Case List Measure Performance owing measures have been selected as focus areas for your institution. rary 2020 - November 2020 idney Injury 4.9% Threndod 5 10% O1-C nng Colloid Use (Cardiac) NAR NAR Name	BP-01 Low MAP Prevention < 55	100% Cases Threshold 2 90%	BP-02 Avoiding Monitoring Gaps	Jan ^{2,D} _{F40} ^D ₁ Jan ^{2,D} 96% Cases Threshold 2 90%	مراقع المراقع ا CARD-02 Myocardial Infarction	560 DO OC PO 100 PO 20 1.2% Cases Threshold 55%
	FLUID-01-C Minimizing Colloid Use (Cardiac) N/A Cases No threshold		99% Cases No threshold	GLU-01 High Glucose Treated, Intraop	86% Cases Threshold 2 90%	GLU-02 Low Glucose Treated. Intraop	N/A Cases Threshold 2 90%	

3. Additional filters for Location, Age, Gender, Race, Ethnicity, Surgical Service, and Time Period are located in the blue navigation bar on the left side of the screen. If you practice at multiple facilities, click on your name to change your dashboard to view performance at another site.

	🏫 Dashboards 👻 Measure Sumr	nary 🔻 Case List 👻		
Entity John Doe (Hospital A) Time Period Past 12 Months	Personal Performance Individual Provider (Hospital A) Individual Provider (Hospital B) Janurary 2020 Nove	ormance selected as focus are mber 2020	as for your institution.	671 Cases
Additional Filters + Location + Patient Age + Patient Gender + Patient Race/Ethnicity + Surgical Service	AKI-01 Acute Kidney Injury Outcome	4.9% Cases Threshold ≤ 10%	BP-01 Low MAP Prevention < 55	100% Cases Threshold ≥ 90%
	FILIID-01-C		FLUID-01-NC	

4. Additionally, the black navigation bar located at the top of the screen can be used to view additional dashboards. Specialty-specific dashboards for pediatrics, cardiac, and obstetrics now exist for providers who may be interested in viewing their performance for those patient populations. If enrolled in the ASPIRE MOCA Part IV program, your selected measures will populate on the MOCA Selected Measures under the **Dashboards** dropdown.

	A	Dashboards 🝷 Measure Sum	mary 👻 Case List 👻			
Entity John Doe (Hospital A) Time Period Past 12 Months Additional Filters	ן דד ע נ	My Measure Performance Pediatric Obstetric Cardiac MOCA Selected Measures	formance selected as focus are mber 2020	as for your	institution.	671 Cases
+ Location + Patient Age + Patient Gender + Patient Race/Ethnicity + Surgical Service	A	AKI-01 kcute Kidney Injury Outcome	4.9% Cases Threshold ≤ 10%	BP-01 Low MAR	² Prevention < 55	100% Cases Threshold 2 90%

5. The **Measure Summary** and **Case List** dropdown menus allow for quick navigation to a measure summary page or case list for a specific measure.

Reporting	n Dashboards 🔻	Measure Summary 🔻	Case List 🝷	
Entity	My Meas	ABX-01-OB	PONV-01	
John Doe (Hospital A)	The following mea	AKI-01	PONV-02	ur institution
Time Period	The following mea	BP-01	PONV-03	ar institution.
Past 12 Months	Janurary 20	BP-02	PONV-03b	
Additional Filters	,	BP-03	PUL-01	
+ Location		CARD-02	PUL-02	
+ Patient Age + Patient Gender + Patient Race/Ethnicity + Surgical Service	AKI 01	CARD-03	PUL-03	
	Acute Kidney Injury	FLUID-01-C	SUS-01	IAP Prevention <
+ Surgical Service		FLUID-01-NC	TEMP-01	
		GLU-01	TEMP-02	
	Outcome	GLU-02	TEMP-03	
		GLU-03	TEMP-04-Peds	
	FLUID-01-C	GLU-04	TOC-01	0-01-NC
	Minimizing Colloid U	MED-01	TOC-02	izing Colloid Use
		NMB-01	TOC-03	
		NMB-02	TRAN-01	
		PAIN-01-Peds	TRAN-02	

6. Clicking the measure box from any dashboard or selecting a measure from the measure summary dropdown, will link to a **Measure Summary** page. This includes details such as overall performance, case counts, trend graph, and a detailed breakdown of primary cause of measure failure. To access an abbreviated version of the measure specification, click **More Info** located after the measure title.

											Provider 👻
BP-02: The percentag	Avoiding N ge of cases that avoid b	Monitoring Gaps	More Info minutes								Case List
c	Verall Score	Result Counts				Perfo	rmance Trend				
	\frown	Result	Case Count			My Performa	nce M	y Department		Overall sco	re: 96%
	00	Passed	588	100%	 _	\wedge					
	96% Cases	Y Marare Summary C Case Lit * Acouches Monitoring Gaps Case that avoid blood pressure monitoring gaps > 10 minutes or cases that avoid blood pressure monitoring gaps > 10 minutes enal Scor Sors Sors Xeson X									
1	Threshold: ≥ 90%										
	Flagged 25 Excluded 58 Total 671 Basen Case Found Basen Case Found										
Result R	Reason		Case Count								
Passed	BP Count		588								
Flagged	BP Monitoring Ga	ip (Last 30 Minutes)	19								
Flagged	BP Monitoring Ga	ib.	3								
Flagged	BP Monitoring Ga	p (First 30 Minutes)	3								
Excluded	Diagnostic Proced	dure	29								
Excluded	Labor Epidural		24								
Excluded	ASA Class		4								
Excluded	Provider Present E	During Evaluation Period	1								
Total			671								

Flagged, Passed, & Excluded Case Lists

1. By clicking on the blue Case List button in the top right corner, a case list will populate to allow for further review. The case list includes all flagged, passed, & excluded cases for the previous 12 months. To filter to only the flagged cases, uncheck the boxes in the top right corner for Excluded and Passed. Only Flagged cases will remain. To review a case, select **View Case** in the desired category to access case information.

BP-02: Avoiding Mo The percentage of cases that avoid blood	nitoring Gaps Cases More Info pressure monitoring gaps >10 minutes				Summary
Show 10 v entries				☑ Passed ☑ Flagged ☑ Search.	Excluded
♦ View Acase A	Surgical Procedure	Primary Anesthesia (CPT	Measure Result Reason	Attributable Attendings Attributable CRNA/Resident	MPOG ase ID
View Case Passed	Surgical Service - Not (Actual)COMPLDX3 specified	00520	BP Count: 36		
View Case Passed	Neurosurgery (Actual/Right SIDED HEMICRANIECTOMY (Right)	00210	BP Count: 175		

- 2. You will be directed to the MPOG web case viewer which displays case data including intraoperative notes, cardiovascular, ventilator, neuromuscular blockade, medications, and physiologic case details.
 - The details section in the top left corner gives additional measure details to assist in understanding measure inclusion and success criteria.
 - Click on any of the arrow icons next to Ventilator, Neuromuscular blockade, Medications, & Physiologic categories to display additional values
 - Hovering over a red triangle will display additional note details.

												1					
¥ E	3P02 Details				50							10	1				••••
Is V	alid Case		Yes	Included	0							N			**	P.0.	*
BP02 Details Is Valid Case ASA Class Labor Epidural Diagnostic Procedure Provider Present During Evaluation Pence BP Count Is Non-Operative Case Additional Information Patient Age (Years)			ASA Class 3	Included		SpO2 %		 95			100	100	100	98	98	98	98
Lab	or Epidural		No	Included		09:00	09:30	10:00 RP Dias Non-im	10:30	11:00	11:30	Ise Rate	12:00	al CO2 (mr	2:30	- SnO2 Pul	:00
Dia	gnostic Procedure		No	Included													
Pro	vider Present During Evaluatio	n Period	Yes	Included	> \	entilator											
BP	Count		36	Passed													
IS N	Ion-Operative Case		No	Included	> 1	leuromuscula	r blockade										
Ac	Iditional Information				> N	ledications											
Pat	ent Age (Years)			74	> F	luids											
					// ¥ F	hysiologic											
Intra	aop Notes																
îme	Desc	Note										AS					
6:47	Reason Antibiotic Not	Not indicat	ted for this pro	ocedure		Ventilator-Pr	ressure Sup										
	Administered					TOF objectiv	e ratio (ac							Law		1	
6:47	NIBP Site	Right Arm				TOF (subject	tive assessm				110	1.1.1	0/4	10/4	1 400	10/4	L co
9:55	Site Marked?	Not applica	able			Tidal Volume	e actual	197.5			113	197.7	197.7	97.7	1 97 7	197.7	1441
						Temp 1-Uns	pecified Site	150.5				1 1 200	1.00	1.000	1.51.5	1.800	
0.55	Patient ID Verified	Verbal: Are	band			SoO2 Pulsa B	Zato				100	97	91	86	85	83	81
9:55	Patient ID Verified	Verbal;Am	nband			SpO2 Pulse F	Rate	95			100	1 100	191	98	98	83	81
09:55 09:55	Patient ID Verified Antibiotics Ordered/Given?	Verbal;Am No	nband			SpO2 Pulse F SpO2 % Respiratory F	Rate-Unspec	95 16			100 100	97 100 13	91 100 14	86 98 16	85 98 16	83 98 16	81 98 16