

2016 Anesthesiology Performance Improvement and Reporting Exchange (ASPIRE)

Collaborative Quality Initiative Performance Index Scorecard

Cohort 1 - Year 2 (2015 start)

| Measure # | Weight | Measure Description | Points |
|-----------|--------|---|--------|
| 1 | 10% | Quarterly and Annual Meeting Participation - Anesthesiology Quality Champion or designated backup - 5 Meetings Total | |
| | | 4 - 5/5 Meetings | 10 |
| | | 3/5 Meetings | 5 |
| | | 2 or less Meetings | 0 |
| 2 | 10% | Quarterly and Annual Meeting Participation - Anesthesiology Clinical Quality Reviewer (ACQR) - 5 Meetings Total | |
| | | 4 - 5/5 Meetings | 10 |
| | | 3/5 Meetings | 5 |
| | | 2 or less Meetings | 0 |
| 3 | 10% | Attend Monthly Webex ASPIRE Quality Committee Meetings | |
| | | 8 - 12 meetings | 10 |
| | | 6 - 7 meetings | 5 |
| | | 5 or less meetings | 0 |
| 4 | 20% | ACQR/Anesthesiology Champion performing data validation, case validation and submitting data on a monthly basis by the 17th of each month | |
| | | 11/12 months | 20 |
| | | 10 months | 10 |
| | | 9 months | 5 |
| | | 8 or less | 0 |
| 5 | 10% | ACQR and Anesthesiology Quality Champion monthly meetings | |
| | | 12/12 months | 10 |
| | | 11/12 months | 5 |
| | | 10/12 months | 0 |
| 6 | 20% | Site based quality meetings - sites to hold an onsite meeting following the ASPIRE Quarterly meetings to discuss the data and plans for quality improvement | |
| | | 4/4 Meeting | 20 |
| | | 3/4 Meeting | 10 |
| | | 2/4 Meetings | 5 |
| | | 1/4 Meetings | 0 |
| 7 | 10% | Performance Measure: PUL 01: % cases with median tidal volumes less than 10 ml/kg | |
| | | Performance is > 90% by month 12 | 10 |
| | | Performance is < 90% but shows improvement month 1 to 12 | 5 |
| | | Performance < 90% and shows no improvement month 1 to 12 | 0 |
| 8 | 10% | Performance Measure: NMB 01: cases receiving non-depolarizing neuromuscular blocker that have a TOF monitor documented | |
| | | Performance > 90% by month 12 | 10 |
| | | Performance < 90% but shows improvement month 1 to 12 | 5 |
| | | Performance < 90% and shows no improvement month 1 to 12 | 0 |



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Measure # 1 & 2: The ASPIRE Quality Champion (or a designated representative who must be an anesthesiologist) and the Anesthesiology Clinical Quality Reviewer (ACQR) will need to attend 4 of the 5 ASPIRE Quarterly and Annual Meetings for 2016:

- a. Friday, March 25, 2016 – Lansing Community College, Lansing
- b. Friday, June 10, 2016 – In conjunction with MSQC, Radisson, Kalamazoo
- c. Friday, September 16, 2016 – In conjunction with MSQC, Bavarian Inn, Frankenmuth
- d. Friday, October 21, 2016 – MPOG/ASPIRE Annual Retreat at ASA, Chicago, Illinois
- e. Friday, December 9, 2016 – Location TBD

Measure # 3: ASPIRE Monthly Quality Committee meetings are held the fourth Monday of each month at 10:00am via Webex. A representative from each Cohort will need to attend the meeting.

Measure # 4: For detailed monthly uploads, please refer to monthly upload document on ASPIRE website.

Measure # 5: ACQR and the ASPIRE Quality Champion need to meet on a monthly basis to discuss the data and plans for quality improvement. A log of the meeting dates/times need to be submitted to the ASPIRE Coordinating Center.

Measure # 6: The site is expected to schedule local meetings following each ASPIRE Quarterly meetings to discuss site based and collaborative quality outcomes with all clinical providers at their site. The physicians will participate in discussion of the data and plans for quality improvement. The site will provide the agendas and attendance list from the meeting to the ASPIRE Coordinating Center.

Measure # 7&8: Sites will be awarded points for compliance with ASPIRE Quality Measures. The chosen measures for 2016 are NMB 01 and PUL 01 (see aspirecqi.org for more detail). Compliance greater than threshold value by end of year or improvement from beginning to end of year are both awarded points.