

2019 Anesthesiology Performance Improvement and Reporting Exchange (ASPIRE)

Collaborative Quality Initiative Performance Index Scorecard - Cohort 4

Measurement Period: 01/01/2019 - 12/31/2019

Measure	Weight	Measure Description	Points
1	10%	Collaborative Meeting Participation: ASPIRE Quality Champion	
		3/3 Meetings	10
		2/3 Meetings	5
		1 or less Meetings	0
2	10%	Collaborative Meeting Participation: Anesthesiology Clinical Quality Reviewer (ACQR)	
		2 -3/3 Meetings	10
		1/3 Meetings	5
		0 Meetings	0
3	10%	Attend Monthly Webex ASPIRE Quality Committee Meetings	
		6 Meetings	10
		5 Meetings	5
		4 or less Meetings	0
4	20%	ACQR/ASPIRE Champion perform data validation, case validation and submit data on a monthly basis by the 17th of each month	
		11/12 Months	20
		10 Months	10
		9 Months	5
		8 Months or Less	0
5	10%	ASPIRE Quality Champion and ACQR monthly meetings	
		12/12 Months	10
		11/12 Months	5
		10/12 Months	0
6	10%	Site based meetings: Sites are to hold an onsite meeting following the ASPIRE Collaborative meetings to discuss the data and plans for quality improvement	
		3 Meetings	10
		2 Meetings	5
		1 or Less Meetings	0
7	10%	Sites must perform 10 Transfer-of-Care 02 (TOC 02) Audits on a Monthly Basis	
		11 - 12/12 Months	10
		8 - 10/12 Months	5
		7 or Less Months	0
8	10%	Performance Measure: Transfusion 02 (TRAN 02) - percentage of cases with a post transfusion hemoglobin or hematocrit value less than or equal to 10g/dL or 30% (cumulative score January 1, 2019 through December 31, 2019)	
		Performance is > 85% by month 12	10
		Performance is < 85% but shows improvement month 1 to 12	5
		Performance < 85% and shows no improvement month 1 to 12	0

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Measure	Weight	Measure Description	Points
9	10%	Site Directed Measure: Sites choose a measure they are performing below national ASPIRE threshold by December 14, 2018 (cumulative score through January 1, 2019 - December 31, 2019)	
		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 Explanation

Cohort 4

Measure #1: The ASPIRE Quality Champion (or a designated representative who must be an anesthesiologist) must attend Collaborative Meetings in 2019.

Meeting Dates:

1. Friday, April 5, 2019: MSQC / ASPIRE meeting, Schoolcraft Community College, Livonia, Michigan
2. Friday, July 26, 2019: ASPIRE Meeting, Henry Executive Center / MSU, Lansing, Michigan
3. Friday, October 18, 2019: MPOG Retreat at ASA, Orlando, Florida

Measure #2: The Anesthesiology Clinical Quality Reviewer (ACQR) must attend Collaborative Meetings in 2019 (meeting dates listed above in Measure #1).

Measure #3: There will be six Webex ASPIRE Quality Committee meetings in 2019. One representative (ASPIRE Quality Champion or ACQR) must attend the meetings. The 2019 meeting dates are as follows:

1. Monday, January 28, 2019 at 10:00 a.m.
2. Monday, February 25, 2019 at 10:00 a.m.
3. Monday, April 22, 2019 at 10:00 a.m.
4. Monday, June 24, 2019 at 10:00 a.m.
5. Monday, September 23, 2019 at 10:00 a.m.
6. Monday, November 25, 2019 at 10:00 a.m.

Measure #4: Refer to the Maintenance Schedule located on MPOG website under the resources tab of the quality section.

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

Measure #6: The site is expected to schedule a local meeting following each ASPIRE / MPOG Collaborative meeting (meeting dates listed above in Measure #1) to discuss site based and collaborative quality outcomes with clinical providers at their site. Sites must send the ASPIRE Coordinating Center the site-based collaborative meeting report (located on MPOG website), agenda, presentation(s) and attendance list from the meetings.

Measure #7: A hospital must perform 10 Transfer-of-Care 02 (TOC 02) audits on a monthly basis using the MQARK application. The MQARK user guide is located on MPOG website under the resources tab of the quality section.

Measure #8: Sites will be awarded points for compliance with the Transfusion Outcome measure: TRAN 02. To be awarded full points, sites must have compliance greater than the threshold value of 85% by end of year (cumulative score January 1, 2019 through December 31, 2019).

Measure #9: Sites will choose a measure they are performing below the ASPIRE threshold. Sites must submit the measure to the ASPIRE Coordinating Center by Friday, December 14, 2018 for review and approval. To be awarded full points, compliance greater than threshold value (cumulative score January 1, 2019 through December 31, 2019) by end of year is required.