

Anesthesiology Performance Improvement and Reporting Exchange (ASPIRE)

Quality Committee Meeting Notes – Monday, February 27, 2017

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

P	Abdallah, Arbi 'Ben' (Wash U)	P	Lacca, Tory (Michigan)
A	Agarwala, Aalok (MGH)	P	Lins, Steve (Bronson Battle Creek)
P	Ajja, Olivia (St. Joseph Ann Arbor)	A	Lorzano, Alyssa (Oregon)
A	Angel, Alan (Bronson Battle Creek)	P	Louzon, Kathryn (Beaumont Royal Oak/Troy)
P	Aziz, Michael (OHSU)	P	Mack, Patricia (Weill-Cornell)
P	Becker, Aimee (Wisconsin)	P	Mathis, Mike (Michigan)
A	Berris, Joshua (Beaumont FH)	A	Mathur, Piyush (Cleveland Clinic)
P	Bhavsar, Shreyas (MD Anderson)	P	McKinney, Mary (Beaumont Dearborn/Taylor)
P	Biggs, Daniel (Oklahoma)	A	Miletic, Nino (NYU Langone)
A	Brightman, Deena (Henry Ford)	A	Molina, Susan (St. Mary)
P	Bornhoft, Katie (Michigan)	A	Moore, James (UCLA)
P	Buehler, Katie (Michigan)	P	Naik, Bhiken (Virginia)
P	Carlington, Jen (St. Mary)	A	Nanamori, Masakatsu (Henry Ford)
P	Cuff, Germaine (NYU Langone)	P	Nelson, Anne (Beaumont)
A	Coffman, Traci (St. Joseph)	P	Osborne, Jaime (Michigan)
P	Coons, Denise (Bronson Battle Creek/Kalamazoo)	P	Paganelli, Bill (Vermont)
P	Coyle, Nina (PhyMed)	P	Pace, Nathan (Utah)
P	Crawford, Joan (Mercy Muskegon)	P	Pardo, Nichole (Beaumont Grosse Pointe)
A	Cywinski, Jacek (Cleveland Clinic)	P	Peterson, William (Sparrow)
P	Davies, Eric (St. Joseph Oakland)	P	Poindexter, Amy (Holland)
P	DeBoer, Jennifer (Holland)	A	Price, Matthew (Beaumont Royal Oak)
A	Domino, Karen (U of Washington)	A	Popovich, Matt (AQI)
P	Dubovoy, Tim (Michigan)	P	Quinn, Cheryl (St. Joes Oakland)
A	Fergus, Claudette (PhyMed)	P	Rensch, Bob (Bronson)
A	Fleisher, Lee (Pennsylvania)	A	Roberson, Nicole (Trinity)
P	Gates, Liz (Beaumont Royal Oak/Troy)	P	Rozewicz, Deb (Bronson)
A	Giambrone, Greg (Weill-Cornell)	P	Saager, Leif (Michigan)
A	Godbold, Michael (Tennessee)	A	Sams, Amy (Bronson)
A	Greulich, Philip (UT Southwestern/MD Anderson)	A	Schoenberger, Rob (Yale)
A	Hart, Steve (Utah)	A	Schwartz, Rob (Holland)
P	Harwood, Tim (Wake Forest)	P	Segal, Scott (Wake Forest)
P	Heiter, Jerri (St. Joseph)	P	Shah, Nirav (Michigan)
P	Hightower, William (Henry Ford W. Bloomfield)	A	Shanks, Amy (Michigan)
A	Hitti, Nicole (Weill-Cornell)	P	Sharma, Anshuman (Wash U)
P	Horton, Brandy (A4)	A	Silvasi, Daniel (Beaumont Troy)
A	Housey, Shelley (Michigan)	P	Smith, Susan (Beaumont Royal Oak)
A	Jameson, Leslie (Colorado)	A	Stefanich, Lyle (Oklahoma)
A	Jeffries, Thomas (St. Mary)	A	Tom, Simon (NYU Langone)
P	Kennedy, Jori (Sparrow)	P	Turnbull, Zackary (Weill-Cornell)
A	Kheterpal, Sachin (Michigan)	A	Turzewski, Cynthia (St. Mary)
A	King, Lisa (Oklahoma)	P	Tyler, Pam (Beaumont Farmington Hills)
A	Kraus, Kelli (St. Mary's Livonia)	A	Wedeven, Chris (Holland)
A	Kuck, Kai (Oklahoma)	A	Whitney, Gina (Children's Colorado)
P	Lagasse, Robert (Yale)	A	Wilczak, Janet (Beaumont Dearborn/Taylor)
A	LaGorio, John (Mercy Muskegon)	P	Wood, Aaron (Beaumont Farmington Hills)

Agenda & Notes

1. Minutes from January 23, 2017 meeting approved.
2. Announcements
 - a. Next quarterly meeting: Friday, April 28. Will co-host with MSQC at Schoolcraft College in Livonia. Agenda is focused on both anesthesia and surgeon topics. Bhiken Naik coming to discuss intraop topics- agenda will be posted soon. Dr. Leif Saager to present on intraop handoffs in the afternoon.
 - b. ASPIRE only quarterly meeting to be held Friday, July 21, 2017 10a-2p in Lansing.
 - c. MPOG meeting next year will be in Boston in October 20, 2017.
3. Cohort 3 and Other Site Status
 - a. Wake Forest now an active MPOG site. Congrats!
 - b. Cohort 3: Beaumont-Grosse Pointe will likely be able to submit in March this year. With each year, ASPIRE sites join in a shorter time frame.
 - c. Memorial Sloan Kettering and MGH working towards submission currently and nearing upload status.
 - d. Many additional Epic sites are interested in joining this year. New flat file process should help sites upload with greater efficiency.
4. QCDR Update
 - a. 2016 QCDR Summary Reports sent to QCDR Champions last week: reply by March 8 to approve for submission to CMS. Submission planned for mid-March.
 - b. QCDR audits are due in May. Will be sent out this week.
 - c. QCDR Contract has been approved by the MPOG Executive Board. Will be sending out to interested sites once approved as a QCDR by CMS for 2017.
 - d. Let Dr. Shah or Katie Buehler via email know if interested in participating for 2017- can send out QCDR Participation Guide.
 - e. ASPIRE will report on 6 quality measures (1 outcome) and improvement activities for providers in 2017.
5. ASPIRE Pediatric Subgroup
 - a. Had interest from pediatric anesthesiologists to participate in subgroup from UM, WashU, and PEAR consortium.
 - b. First meeting to be held in March.
 - c. Goal is to build pediatric specific ASPIRE measures.
 - d. This will be the first ASPIRE subgroup to cover specific patient population. If successful, will branch into OB and cardiac areas in the future.
6. Performance Summary in ASPIRE Dashboard
 - a. Many QI champions have requested that performance be listed by provider in Galileo dashboard- for QI champion review only.
 - b. ASPIRE has now released a new report that displays individual provider performance for each measure (shared example of the report via Webex during the meeting).
 - i. 2 versions of the report exist: 1 anonymized and 1 identified.
 - ii. For anonymized version, QI Champions can use a key to identify providers by AIMS staff ID.
 - iii. Can download the spreadsheet for further analysis.

iv. Seeking feedback from champions to improve visualizations in the future.

7. QI Toolkits

- a. Plan is to focus on 1 or 2 key areas and build a QI Toolkit to assist with QI work in those areas. Examples include reference cards, literature review summaries.
- b. Options for measures include: PUL 01, TRAN 01, and TEMP 02.
- c. PUL 01: Variation still exists across sites for tidal volume settings. This toolkit would focus on improving respiratory outcomes with protective lung ventilation techniques.
- d. TRAN 01: Variation still exists due to structural and process issues at sites. A QI toolkit may help distribute best practice literature to necessary stakeholders to get the needed equipment in the ORs to check hgb/hct before transfusions in the OR.
- e. TEMP 02: Significant performance variation across sites. Toolkit would assist with process opportunities to improve outcomes associated with normothermia.
 - i. Discussion around TEMP 02 measure actually capturing true performance. Though there are some consistent data issues across sites but in reviewing failed cases, there is a real core temperature measurement gap across ASPIRE sites.
 - ii. Glucose measures also suggested as a focus area for toolkit build due to high variation.

8. Measure Build Updates

- a. Temperature Outcome measure: TEMP 03. Initial build complete. Will release soon to dashboards.
- b. TOC measure in progress. PACU handoff measure based on MIPS 426. Will release an audit tool in conjunction with this measure. Sites wishing to participate with this measure will have 2 scores, one for the EHR documentation score and one for the audit result.
- c. PONV measure spec is complete (MIPS 430). Will begin build soon. ASPIRE will work with sites to identify documentation opportunities to accurately extract and measure the data for PONV.
- d. Each of these measures can be used for QCDR submission and allow ASPIRE data to be compared across other providers nationally who are submitting via another anesthesia QCDR.
- e. Will likely have additional revisions to measures based upon feedback from the peds subgroup.
- f. Provider emails: ASPIRE has received feedback from QI Champions and providers for enhancements to provider emails.
 - i. Updates available in the first half of the year:
 - 1. ASPIRE can reduce the number of measures displayed in emails by site. QI Champions should notify ASPIRE if they would like a selection of measures displayed rather than all measures for every email.
 - 2. Can hide measures on a provider basis as well. We can do this by provider specialty or by volume. For instance, if a provider does not have any cases for a certain measure, we can hide that measure for that month.

3. Will be adding trend information to the bar graphs. Last month's performance will be displayed above each bar graph so providers can better compare their performance month to month.
- ii. Improved visualizations latter half of the year- seeking feedback from Quality Committee.
 1. Spider graphs
 2. Line graphs
 3. Send enhanced graphs on a quarterly basis to all providers? Only QI Champions?
 - iii. Cannot currently identify if providers open the email. We can only identify if a provider logs into Galileo from the email. ASPIRE investigating the adding this functionality in the future.

Meeting concluded at 1058.