

2022 Anesthesiology Quality Improvement and Reporting Exchange (ASPIRE)

Collaborative Quality Initiative Performance Index Scorecard

Cohorts 1 - 5

Measurement Period: 01/01/2022 - 12/31/2022

Measure #	Weight	Measure Description	Points
1	5%	Collaborative Meeting Participation: ASPIRE Quality Champion and Anesthesiology Clinical Quality Reviewer (ACQR) combined attendance at meetings. Three total meetings with six opportunities for attendance.	
		5 - 6 / 6 Meetings	5
		4 or Less Meetings	0
2	5%	Attend Webex ASPIRE Quality Committee Meetings: ASPIRE Quality Champion or ACQR attendance across six meetings	
		5 - 6 / 6 Meetings	5
		4 or less Meetings	0
3	5%	ACQR/ASPIRE Quality Champion perform data validation, case validation and submit data by the 3rd Wednesday of each month for January - November and by the 2nd Wednesday of the month for December. Data must be of high quality upon submission, >90% of diagnostics marked as 'Data Accurately Represented.'	
		10 - 12/12 Months	5
		9 or Less Months	0
4	5%	Site Based Quality Meetings: Sites to hold an onsite in-person or virtual meeting following the three ASPIRE Collaborative meetings to discuss the data and plans for quality improvement at their site	
		3 Meetings	5
		2 or less Meeting	0
5	10%	ACQR attendance at Fall ACQR Retreat	
		Yes	10
		No	0
6	25%	Pain (PAIN 02) Percentage of patients ≥ 18 years old who undergo a surgical or therapeutic procedure and receive a non-opioid adjunct preoperatively and/or intraoperatively. (cumulative score January 1, 2022 - December 31, 2022)	
		Performance is ≥ 75%	25
		Performance is ≥ 70%	15
		Performance is ≥ 65%	10
		Performance is < 65%	0
7	20%	Sustainability (SUS 01) percentage of cases with mean fresh gas flow (FGF) equal to, or less than 3L/min, during administration of halogenated hydrocarbons and/or nitrous oxide (cumulative score January 1, 2022 - December 31, 2022)	
		Performance is ≥ 90%	20
		Performance is ≥ 85%	10
		Performance is < 75%	0
8	25%	Site Directed Measure: Sites choose a measure they are performing above/below ASPIRE threshold or needs improvement by December 10, 2022 (cumulative score January 1, 2022 through December 31, 2022)	
		Performance is ≥90%; ≤10%; ≤5% or show ≥25% improvement	25
		Performance is ≥85%; ≤15%; ≤10% or show ≥15% improvement	15
		Performance is ≥80%; ≤20%; ≤15% or show ≥10% improvement	10
		Performance is <80%; >20%; >15% or show <10% improvement	0

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Measure Explanation: Cohorts 1 – 5 (2015 – 2020 start)

Measure #1: The ASPIRE Quality Champion (or a designated representative who must be an anesthesiologist) and the Anesthesiology Clinical Quality Reviewer (ACQR), combined, must attend ASPIRE Collaborative Meetings in 2022. There are three total meetings with six opportunities for attendance:

1. MSQC / ASPIRE Meeting: Friday, April 8, 2022
2. ASPIRE Collaborative Meeting: Friday, July 15, 2022
3. MPOG Retreat: Friday, October 21, 2022

Measure #2: There will be six Quality Committee e-meetings in 2022. One representative (ASPIRE Quality Champion or ACQR) must attend the meetings:

1. Monday, January 24, 2022
2. Monday, March 28, 2022
3. Monday, May 23, 2022
4. Monday, July 25, 2022
5. Monday, September 26, 2022
6. Monday, November 28, 2022

Measure #3: Maintenance Schedule located on MPOG website in the resources tab of the quality section. Data must be of high quality upon submission, >90% of diagnostics marked as 'Data Accurately Represented.'

Measure #4: The site is expected to schedule a local meeting either in-person or virtually following each ASPIRE collaborative meeting (see Measure #1 for dates) to discuss site based and collaborative quality outcomes with clinical providers at their site. Sites must send the coordinating center the site-based collaborative meeting report located on the MPOG website in the P4P sub tab of the Michigan hospitals tab of the quality section.

Measure #5: ACQR must attend the Fall ACQR Retreat to be held on Friday, September 16, 2022.

Measure #6: Sites will be awarded points for compliance with the multimodal pain measure PAIN 02 (cumulative score January 1, 2022 through December 31, 2022). See P4P Scorecard for point distribution.

Measure #7: Sites will be awarded points for compliance with the sustainability measure SUS 01 (cumulative score January 1, 2022 through December 31, 2022). See P4P Scorecard for point distribution.

Measure #8: Sites will choose a measure where performance is above/below the ASPIRE threshold or a measure that needs improvement. Sites must submit their current measure score (November 1, 2020 through October 31, 2021) to the Coordinating Center by Friday, December 10, 2021 for review and approval (cumulative score January 1, 2022 through December 31, 2022). Measure selection form is located on the MPOG website in the P4P sub tab of the Michigan hospitals tab of the quality section. See P4P Scorecard for point distribution.