



Vascular Quality Initiative[®] Powered by

A collaborative of regional vascular quality improvement groups collecting and analyzing data to improve patient care.

The Vascular Quality Initiative[®] employs Clinical Data Pathways as its platform for data collection and long-term outcomes assessment on major vascular procedures.



Clinical Data Pathways provides physicians, clinical researchers, and institutions a secure, web-based, single point of entry for data collection and report generation.

Data Management

- Validated data fields
- Help text and error trapping
- Automated data import from EMR and clinical systems
- Local control of permissions and settings
- Data Management Reports

Analysis Tools

- Longitudinal tracking of center and region
- Major Outcomes by surgeon and center
- Major Complications by surgeon and center
- Pre- and Post-Operative Medication Usage
- Ad-Hoc Reports

Benefits

- Detection of specific areas for quality improvement
- Comparison of providers and centers in support of performance improvement initiatives
- Identification of best practices
- Demonstration of center's dedication to improving patient care
- Data collection to meet CMS's Carotid Artery Stent Facility Recertification requirements
- Potential to increase physician reimbursement through PQRS

For more information about the SVS PSO:

Email: c.bosela@svspso.org

Call: (603) 298-5509

www.vascularqualityinitiative.org



The mission of the Society for Vascular Surgery[®] Patient Safety Organization (SVS PSO) is to improve patient safety and the quality of vascular health care delivery by providing web-based collection, aggregation, and analysis of clinical data submitted in registry format for patients undergoing specific vascular treatments through the use of M2S's Clinical Data Pathways product. The SVS PSO provides outcome analysis intended to be an integral component of each participating health care provider's quality improvement efforts, including the implementation of recommendations, protocols, and best practices developed by the SVS PSO.

What is a Patient Safety Organization (PSO)?

The Patient Safety and Quality Act of 2005 encourages health care providers to share outcome and patient safety data without fear of legal discovery through a mechanism known as a Patient Safety Organization (PSO).

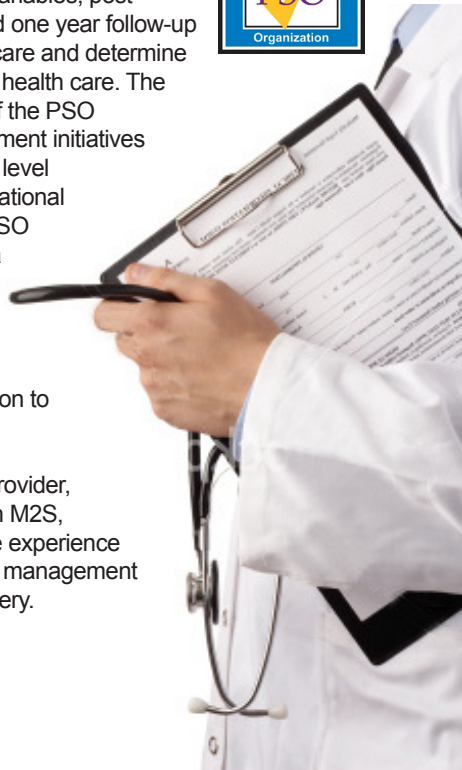
Functions of a PSO

- ▶ Protects the identity of hospitals and providers that are compared in benchmarking and other quality analyses generated through a PSO from legal discovery in state and federal court.
- ▶ Permits providers to collect patient-identified data for quality improvement purposes without requiring consent from individual patients or prior approval from an Institutional Review Board.

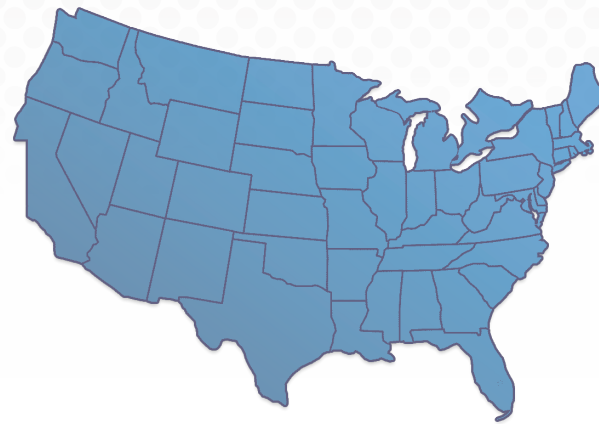
Society for Vascular Surgery® Patient Safety Organization (SVS PSO)

The SVS PSO collects pre-operative risk factors, intra-procedural variables, post-procedural outcomes, and one year follow-up data to assess quality of care and determine best practices in vascular health care. The organizational structure of the PSO promotes quality improvement initiatives conducted at the regional level with the ultimate goal of national collaboration. The SVS PSO provides oversight of data sharing arrangements between regions, key outcome and quality measure analyses, and dissemination of information to participating providers.

For its clinical database provider, the SVS PSO has chosen M2S, a company with extensive experience providing data and image management services for vascular surgery.



Regional Group Formation



Vascular Study Group of New England Experience

The Vascular Study Group of New England (VSGNE) was organized in 2002 by surgeons in ME, NH, and VT to improve the quality of vascular health care by analyzing and reporting outcomes based on a common registry. Both large and small hospitals have found considerable value in the anonymous benchmarked reports of key outcomes and quality measures as a complement to their ongoing internal quality assurance and improvement activities. In 2009, the VSGNE joined the SVS PSO to promote this national quality improvement endeavor.

How to Begin Your Own Regional Group

Based on the VSGNE's experience, several steps have been identified as being essential to forming a regional study group.

- ▶ **Step 1:** Identify a few surgeons in your area who have expressed interest in benchmarking for quality improvement. Organize an initial meeting or conference call to discuss your mission.
- ▶ **Step 2:** Sign-up as a study group to begin entering data and benchmarking. Plan to meet on a regular basis to discuss your outcomes, quality improvement initiatives, and research projects.
- ▶ **Step 3:** Reach out to other institutions in your area to expand your benchmarking capabilities. Invite representatives from other institutions to participate in your regional study group meetings.

Data Entry Requirements

To reduce the burden of participating in the Vascular Quality Initiative®, the SVS PSO has adopted M2S's Clinical Data Pathways, a system designed to easily integrate into a variety of workflows, allowing multiple users to access and enter data on a single form. Designed by surgeons for surgeons, this application captures important demographic and risk factor information as well as major outcome and complication data in order to provide comprehensive outcome analysis and inform performance improvement. The following data entry information and guidance is based on the experience of current customers.

- ▶ In many institutions, physicians enter the majority of the procedure data and other qualified staff enter the history, demographic, and post-operative information.
- ▶ Surgeons have responded that their portion, normally the procedure details, takes only 2-3 minutes.
- ▶ Data managers have reported that it takes on average 30-45 minutes to enter each procedure, including time to abstract data from their departmental clinical systems.
- ▶ Performing data entry at the point of patient care may reduce the time requirements to 10-20 minutes per procedure.



Automated data import from an electronic medical record or clinical system is also an option to further reduce data entry time requirements.