## 2017 Anesthesiology Performance Improvement and Reporting Exchange (ASPIRE)

Collaborative Quality Initiative Performance Index Scorecard Cohort 3 - Year 1 (start 2017)

Measure #	Weight	Measure Description	Points
1	10%	Collaborative and Annual Meeting Participation - Anesthesiology	
		Quality Champion or their designated backup	
		3/3 Meetings	10
		2/3 Meetings	5
		1 or less Meetings	0
2	10%	Collaborative and Annual 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	
		9 - 10 meetings	10
		7 - 8 meetings	5
		6 or less meetings	0
4	10%	Timeliness of Regulatory/Legal documentation	
		Data Use Agreement (DUA), MPOG Bylaws and IRB	
		Submitted by April 1, 2017	10
		Submitted by July 1, 2017	5
		Submitted after July 2, 2017	0
5	10%	Hiring an Anesthesiology Clinical Quality Reviewer (ACQR)	
		ACQR Start by February 1, 2017	10
		ACQR Start by February 1, 2017  ACQR Start by April 1, 2017	5
		ACQR Start by April 1, 2017  ACQR Start after April 1, 2017	0
6	20%	Timeliness of data submission (with Case by Case Validation and Data	<u> </u>
		Diagnostics)	
		Data submitted by July 1, 2017	20
		Data submitted by September 1, 2017	10
		Data submitted after September 2, 2017	0
7	20%	Performance Metric: Accuracy of data of "High" and "Required"	
		priority data diagnostics marked as "Data Accurately Represented" in	
		Data Diagnostics Tool	
		≥ 90% diagnostics marked as "Data Accurately Represented"	20
		≥ 75 - 90% marked as "Data Accurately Represented"	10
		< 75% marked as "Data Accurately Represented"	0
8	10%	Timeliness of Responses to Coordinating Center Inquiry Requests	
		Within 2 business days	10
		Within 5 business days	5
		Greater than 5 business days	0



2017 Performance Index Scorecard

Anesthesiology Performance Improvement and Reporting Exchange (ASPIRE)

Cohort 3 – Year 1 (2017 start)

Measure # 1: The ASPIRE Quality Champion (or a designated representative who must be an anesthesiologist) must attend 3 out of 3 ASPIRE Collaborative and Annual Meetings for 2017:

- a. Friday, April 28, 2017 in conjunction with MSQC, Schoolcraft Community College, Livonia, MI
- b. Friday, July 21, 2017 ASPIRE Meeting, Lansing Community College, Lansing, Michigan
- c. Friday, October 20, 2017 MPOG/ASPIRE Annual Retreat at ASA, Boston, MA

Measure # 2: The Anesthesiology Clinical Quality Reviewer (ACQR) will need to attend 2 out of 3 of the 3 ASPIRE Collaborative and Annual Meetings for 2017:

- a. Friday, April 28, 2017 in conjunction with MSQC, Schoolcraft Community College, Livonia, MI
- b. Friday, July 21, 2017 ASPIRE Meeting, Lansing Community College, Lansing, Michigan
- c. Friday, October 20, 2017 MPOG/ASPIRE Annual Retreat at ASA, Boston, MA

Measure # 3: ASPIRE Monthly Quality Committee meetings are held the fourth Monday of each month at 10:00am via Webex. One representative from each site will need to attend the meeting. There will be ten meetings in 2017. There will be no meeting held in October due to ASA and December due to the holiday.

Measure # 4: All regulatory/legal documentation must be finalized by April 1, 2017. This includes the following documents:

- 1. Data Use Agreement (DUA)
- 2. IRB
- 3. MPOG Bylaws

Measure # 5: Must hire Anesthesiology Clinical Quality Reviewer (ACQR) by February 1, 2017. The success of the program is greater when the ACQR is hired early in the process.

Measure # 6: The minimum data requirements must be uploaded into the Multicenter Perioperative Outcomes Group (MPOG) Central Repository by July 1, 2017

Measure # 7: Data must be of high quality before January 1, 2017 upload. The ASPIRE QI Coordinator and ASPIRE technical team will assist in ensuring data accuracy.