

Chest Pain MI



Dashboard NEWS.....

More Data Leads to Better Care

Additional columns (Transfer from outside facility date/time, First ECG date/time & First STEMI ECG date/time) were added to the Metric 56 - Transfer from outside facility patient level detail report (drilldown). This information along with the data already in the drilldown can help receiving hospitals better understand the care provided by the transferring facility. Evaluating 'arrival to first ECG time' or 'arrival to transfer out time', etc. can support conversations within your intersystem delivery of care network and help drive change that improves the quality of patient care!

Update to Composites 1, 2 & 5 is Complete

We are pleased to share the Chest Pain – MI Steering Committee recommendation to remove Metric 56 Time to primary PCI among transferred patients from Metric 1 Overall AMI performance composite, Metric 2 Overall defect free care (evaluated in the Performance Achievement Award Program), and Metric 5 Acute AMI performance composite is complete! View performance on the Dashboard in “unpublished” Ending Timeframes to appreciate how this update might have impacted the performance in these composite measures.

To see all requirements for the 2022 Performance Achievement Award Program locate the document (of the same name) on the Documents Home Page.

BRAND NEW Professional Level Dashboard – Beta Version

We invite you to visit the Professional Level Dashboard (PLD) “Beta” site to see the progress being made on this brand new Chest Pain – MI Registry offering! Navigate to the Dashboard, and from the top left “hamburger” menu select “Professional Level” with the Ending Timeframe 2021Q1. Please ensure you have a copy of the Professional Level Dashboard User Guide for Registry Participants from the Documents Home Page handy to support you in this new experience.

Note(s):

- Access to the Professional Level Dashboard is controlled by the Registry Site Manager (page 4).
- The PLD functions similarly to the eReports Dashboard (ensure the view is ‘all metrics’ if there is no data, page 6).
- The PLD is updated quarterly (it is not refreshed weekly).
- Only clinicians entered in your CPMI data collection tool with a valid National Provider Identification (NPI) number will receive a report (page 11).
- Use the Provider Maintenance & Remediation User Guide to assist with validating NPI information.
- The PLD will display all metrics for each provider; however, only the provider ‘type’ identified in the User Guide for the metric will have admissible data.
- If you believe a metric is not functioning as expected after reviewing the User Guide and validating the metric will populate with data for the distinct provider, please identify the Metric Key, Detail Line Name, Quarter and include your data analysis vs the metric detail line result to support our review.
- Please monitor the Announcement page to catch when additional metrics and historical v3 data (through 2019Q4) are added to the PLD. Thank you for your support and patience during this exciting endeavor!

MY SUMMER BIKINI BODY NEVER HAPPENED



BUT MY FALL SWEATER
BODY IS READY TO GO

MORE Chest Pain MI



Dashboard NEWS.....

Intersystem Delivery of Care Data – Available NOW

Did you know that nearly 17% of STEMI (pre-admit) patients arriving by EMS to Chest Pain – MI Registry facilities didn't have a pre-hospital ECG? And that over 98% of these patients were STEMI positive on their 1st in-hospital ECG? And that only 68% of these ECGs occurred within 10min of arrival? Navigate to the Detail Lines Dashboard and select Intersystem Delivery of Care to see how these new detail line metrics provide insights into the care delivered by emergency medical responders, transferring facilities and you! These data are available for all v3 published reports (2019Q4-2021Q1) and will soon populate to the unpublished quarters. Please note, the Intersystem Delivery of Care detail lines have minimal denominator exclusions to provide the most comprehensive view of the care delivered. Use the Detail Lines Companion Guide (available on the Documents Home Page) to support your review and understanding.

Still in development but coming soon!

- A patient drilldown for Metric key 11879 Pts arrived by EMS.
- The Intersystem Delivery of Care Dashboard which will be home to transferring facility and emergency medical services (EMS) metrics where you will be able to filter performance based on individual facility or EMS agency ID.

We hope these new offerings will better support all the ways in which you strive to deliver the very best care! If you believe a metric key is not functioning as expected, please provide: Metric number/name and your data analysis result vs the metric result to support our review. Thank you.

Another...New Executive Summary Measure!

We are pleased to share Metric 57 Risk standardized extended length of stay is now available for all v3 Executive Summary Reports (2019Q4-2021Q1)! This measure joins Metric 58 Risk standardized discharge to post-acute care (PAC) to give your team insights into the rate at which your acute MI patients will have a length of stay ≥ 3 days and/or require coordinated discharge planning for post-acute care. Clicking on the 'Metric Details' link and changing the historical performance view on this page to 'R4Q Trend' will demonstrate how the predicted rates for your hospital have changed over time and help you plan for the future. As hospitals strive to improve the value of care for patients with acute MI, clinicians need tools to predict the likelihood of an extended LOS and whether skilled care facilities will be needed. Access the Executive Summary Measures & Metrics Companion Guide from the Documents Home Page to review the model specifications and the source document from the embedded link.

