

MSTCVS Quality Collaborative
2023 P4P Quality Improvement Initiatives
Progress Report

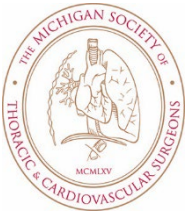
Due to the Coordinating Center September 12, 2023

Hospital Name:	
Submitted by:	
Date:	

2023 Site-Specific QI Progress Reporting (P4P Measure #7)

**P4P points will not be awarded without evidence that a plan was implemented and/or if no reports are submitted*

Site-Specific Quality Initiative:			
Target Patient Population:			
Baseline Data:			
2023 Year-End Goal:			
Mid-Year Progress:	Q1 2023:	Q2 2023:	January-June 2023:
Was the progress of this QI reviewed by a multidisciplinary team? If yes, please list disciplines:			
Please describe all interventions and strategies and when they were implemented:			
Please describe any challenges or barriers that were encountered and how your team overcame them:			
Additional information, comments, or observations:			



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2023 Collaborative-Wide QI Progress Reporting (P4P Measure #6)

**P4P points will not be awarded without evidence that a plan was implemented and/or if no reports are submitted*

Collaborative-Wide Quality Initiative:	Multiple Arterial Grafting		
Target Patient Population:	Isolated CABG		
Baseline Data:			
2023 Year-End Goal:	38.3% <i>(3% higher than 2022 calendar year mean)</i>		
Mid-Year Progress:	Q1 2023:	Q2 2023:	January-June 2023:
Was the progress of this QI reviewed by a multidisciplinary team? If yes, please list disciplines:			
Please describe all interventions and strategies and when they were implemented:			
Please describe any challenges or barriers that were encountered and how your team overcame them:			
Additional information, comments, or observations:			