

MSTCVS Quality Collaborative  
2026 P4P Quality Improvement Initiatives  
**Progress Report**

Due to the Coordinating Center June 15, 2026

Hospital Name:	
Submitted by:	
Date:	

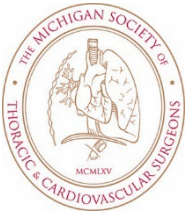
**2026 Site-Specific QI Progress Reporting (P4P Measure #7)**

*\*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 (Include Time Period):	
2026 Year-End Goal:	
Progress Report:	January-March (Q1) 2026: N/D:
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:	

For assistance completing this form, contact Lisa Grelecki: [lgreleck@med.umich.edu](mailto:lgreleck@med.umich.edu)

Please return completed report to the MSTCVS-QC Coordinating Center through your REDCap Account – QI Reporting Submission



MSTCVS Quality Collaborative  
 2026 P4P Quality Improvement Initiatives  
**Progress Report**

*Due to the Coordinating Center June 15, 2026*

**2026 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:	<b>Reduction in Intra/Postoperative Red Blood Cell Transfusion</b>
Target Patient Population:	Isolated CAB
Baseline Data 2025:	
2026 Year-End Goal:	<b>Collaborative Mean of <math>\leq 25\%</math></b>
Progress Report:	January-March (Q1) 2026: N/D:
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:	

For assistance completing this form, contact Lisa Grelecki: [lgreleck@med.umich.edu](mailto:lgreleck@med.umich.edu)

Please return completed report to the MSTCVS-QC Coordinating Center through your REDCap Account – QI Reporting Submission