

MSTCVS Quality Collaborative

Onboarding Guide for

Data Managers and Quality Improvement Staff

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Welcome

This onboarding guide is intended for new STS abstractors and hospital Quality Improvement (QI) team members who are new to participating in the Michigan Society of Thoracic and Cardiovascular Surgeons Quality Collaborative (MSTCVS-QC).

This document serves as a foundational orientation and should be used alongside:

- Site-specific workflows
- Society of Thoracic Surgeons (STS) data specifications and guidance
- Direction from the MSTCVS-QC Coordinating Center

This guide will help you:

- Understand how STS and MSTCVS-QC fit together
- Clearly distinguish what systems and platforms access MSTCVS-QC does and does not provide
- Become oriented to systems, reporting, and participation expectations
- Understand data quality, governance, and collaborative learning principles

Overview of the MSTCVS Quality Collaborative

The MSTCVS-QC is a statewide, surgeon-led, multidisciplinary Collaborative Quality Initiative (CQI) focused on improving outcomes in cardiothoracic surgery across Michigan.

The Collaborative:

- Includes all 33 non-federally funded Adult Cardiac Surgery (ACS) programs and 23 participating General Thoracic Surgery (GTS) programs in Michigan.
- Uses data submitted to the Society of Thoracic Surgeons (STS) National Database
- Supports benchmarking, transparency, and shared learning
- Emphasizes quality improvement

MSTCVS-QC does not replace STS. MSTCVS-QC extends the value of STS data by enabling Michigan-specific analysis, benchmarking, and collaborative improvement initiatives.

Relationship Between STS and MSTCVS-QC

Role of the Society of Thoracic Surgeons

- Maintains national clinical registries for Adult Cardiac Surgery and General Thoracic Surgery
- Defines data specifications, inclusion criteria, and abstraction standards
- Provides national benchmarking and risk-adjusted outcomes
- Hosts reporting tools and data quality reports through IQVIA platform

Role of MSTCVS Quality Collaborative

- Uses STS data already submitted by participating hospitals
- Performs Michigan-specific analyses
- Leads statewide quality initiatives
- Provides collaborative reports, education, and peer-to-peer learning opportunities

Access Clarification

MSTCVS-QC does not:

- Provide access to
 - STS registry data entry and submission platforms
 - Hospital-level registry software
 - STS IQVIA dashboards
- Maintain or update your hospital's [STS Participant Contact Form](#)

All access to STS systems and vendor tools is arranged locally by each hospital.

STS vs MSTCVS-QC: High-Level Comparison:

Topic	STS (Society of Thoracic Surgeons)	MSTCVS Quality Collaborative
Scope	National registry	Michigan-only collaborative
Primary Purpose	National benchmarking, public reporting, research	Statewide quality improvement
Data Entry	Entered into STS-approved vendor software	Uses data submitted to STS by participating hospitals
Data Ownership	Hospital owns its STS data	Used under MSTCVS-QC participation agreements
Reporting Access	IQVIA dashboards, STS reports	MSTCVS-QC dashboards, reports, presentations
Database Access	Direct access via vendor tools	No direct database access provided
Analysis	Hospital-generated and STS-generated	Performed by MSTCVS-QC Coordinating Center

Collaborative Learning Philosophy

MSTCVS-QC is intentionally designed to support collaborative learning rather than hospital ranking.

Benchmarking results are used to:

- Identify opportunities for improvement
- Share best practices across sites
- Support data-driven discussions in a non-punitive environment

Comparative data is not intended for competition or public ranking but for shared improvement.

MSTCVS Quality Committee

Role of the Quality Committee

The MSTCVS-QC Quality Committee is the governing decision-making body of the Collaborative.

Representation

- One physician champion from each Adult Cardiac Surgery and General Thoracic Surgery program
- Members are appointed by hospital administration. Please contact the MSTCVS-QC Coordinating Center if your Physician Champion changes.

Responsibilities

- Set annual statewide priorities and goals
- Select statewide quality initiatives
- Review and approve:
 - Site-specific quality improvement initiatives
 - Requests for collaborative-wide data
- Identify hospitals needing quality site visits
- Oversee Phase of Care Mortality Analysis (POCMA)

Phase of Care Mortality Analysis (POCMA)

As part of statewide participation, all operative mortalities in Michigan undergo Phase of Care Mortality Analysis.

Data Managers and QI staff support this process by:

- Identifying relevant cases
- Collaborate with Physician Champion to facilitate multidisciplinary POCMA case review
- Submitting required documentation including:
 - History and Physical, operative notes, discharge summaries, and pertinent provider consultation notes, clinician documentation, diagnostic testing reports, or autopsy reports
- MSTCVS POCMA forms can be found under 'Other Forms' here:
<https://mstcvs.org/quality-collaborative/reporting-materials/>
- Responding to clarification requests

Roles and Responsibilities

Data Managers / Clinical Abstractors

Primary responsibilities:

- Identifying all eligible Adult Cardiac Surgery or General Thoracic Surgery cases
- Abstracting cases in accordance with current STS data definitions
- Submitting complete and accurate data by STS harvest deadlines
- Reviewing and resolving Data Quality Reports
- Participating in MSTCVS-QC education, audits, and meetings

Hospital Quality Improvement Staff

Primary responsibilities:

- Reviewing STS and MSTCVS-QC reports with clinical leadership
- Interpreting trends in performance and outcomes
- Supporting site-level quality improvement initiatives
- Assisting with data validation and chart review as needed
- Collaborating with Data Managers and surgeon champions

Systems and Platforms

Hospital-Provided Systems

You must obtain local access to:

- Your hospital's STS-approved registry software
- Vendor reporting and dashboard tools
- The STS Participant Portal (IQVIA)

MSTCVS-QC Systems

MSTCVS – QC Statewide Data Warehouse

The MSTCVS-QC data warehouse is provided by ARMUS Healthcatalyst.

- If your hospital does not use ARMUS as their STS software vendor, contact the Coordinating Center to obtain data upload access.

REDCap

A HIPAA-compliant data capture and document management platform.

- Requires two-factor authentication ([Okta Verify](#))
- Monthly login required to maintain account access

Used for:

- Data Entry:
 - Adult Cardiac Surgery PRO data entry
 - Adult Cardiac Surgery Clinical Frailty Score data entry
 - General Thoracic Chest Cat Scan and Consult data entry
- Secure file transfer for submitting the following to MSTCVS-QC
 - Audit documentation
 - Clinical questions
 - QI report submission
 - Phase of Care Mortality Analysis (POCMA)
- Secure file transfer for receiving the following from MSTCVS-QC
 - Blinded quarterly meeting slides
 - Benchmark reports

Access is requested through the MSTCVS-QC Coordinating Center.

Power BI

Power BI is used by MSTCVS-QC to deliver interactive dashboards and standardized reports.

Used for:

- Statewide and site-level quality dashboards
- Key indicator and benchmarking reports
- Performance monitoring for quality initiatives
- PERForm registry-related reports (as applicable)

Access to Power BI reports is coordinated through the MSTCVS-QC Coordinating Center.

MSTCVS data, blinded meeting slides, and reports are intended solely for internal quality improvement activities and collaborative learning and may not be used for marketing, publication, or competitive site-to-site ranking or comparison purposes. Collaborative-wide data may not be independently analyzed or shared externally without prior approval.

MSTCVS-QC Meetings and Participation

MSTCVS-QC holds quarterly collaborative meetings, offered both virtually and in person, to support shared learning and statewide quality improvement.

Meetings provide opportunities to:

- Review statewide and site-level benchmarking data
- Discuss performance trends and quality initiatives
- Share best practices across Michigan programs
- Provide education for surgeons, data managers, QI staff, and allied professionals

Participation Expectations

Participation is required to maintain collaborative standing and contributes to performance-based participation programs.

Attendance expectations typically include:

- Site surgeon champion or approved alternate
- Site data manager or approved alternate
- Ongoing involvement from quality improvement staff is strongly encouraged

Meeting Information

Meeting schedules, materials, and registration details are available here: <https://mstcvqs.org/meetings/>.

Some materials are restricted and require access coordinated through the MSTCVS-QC Coordinating Center.

MSTCVS-QC Reporting and Performance Programs

Pay for Performance (P4P)

- Adult Cardiac Surgery only
 - QI results reported to the MSTCVS-QC Coordinating Center twice per year
 - Collaborative-wide measures selected annually by the MSTCVS-QC Quality Committee
 - Site-specific QI measures reviewed and approved by the MSTCVS-QC Quality Committee
 - Includes both participation and performance components

Value Based Reimbursement (VBR)

- Adult Cardiac Surgery and General Thoracic Surgery
 - QI results reported to the MSTCVS-QC Coordinating Center once per year
 - Collaborative-wide measures selected annually by the Quality Committee

Detailed methodologies, timelines, and supporting materials are available here: <https://mstcvqs.org/quality-collaborative/reporting-materials/>.

Training and Ongoing Education

STS Education

STS provides:

- New Data Manager webinar series
- Live and archived training sessions
- Data specification manuals and FAQs
- IQVIA User Platform Training

Completion of STS training resources is strongly recommended and is your first source for any STS associated education.

MSTCVS-QC Education

The MSTCVS-QC Coordinating Center provides onboarding and ongoing support, including:

- Secondary abstraction education
- Overview of quality improvement processes
- Audit expectations and guidance
- Monthly QI Chat virtual meetings

Important Websites for Orientation

The following websites should be reviewed early in onboarding and incorporated into orientation checklists:

MSTCVS Quality Collaborative Website

- <https://www.mstcvs.org>
- Meeting schedules, collaborative reports, quality initiatives, and P4P/VBR materials

STS Data Manager Resources

- <https://www.sts.org/research-data/registries/resources-data-managers>
- Data specifications, training manuals, webinars, and registry guidance

Data Quality Expectations

MSTCVS-QC emphasizes:

- Complete submission of all eligible cases
- Accurate application of STS definitions
- Consistent interpretation across hospitals
- MSTCVS-QC Data Quality Checkers for ACS and GTS are available:

<https://mstcvs.org/quality-collaborative/quality-checker/>

Participants are involved in:

- Data audits conducted by the MSTCVS-QC Coordinating Center at least once per STS data version
- Data validation checks
- Follow-up requests from the Coordinating Center

Data Use, Privacy & Governance

All MSTCVS-QC work is governed by HIPAA, MSTCVS-QC participation agreements, data use and publication policies, and Quality Committee oversight.

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Initial Orientation Checklist

Immediate

- Contact the MSTCVS-QC Coordinating Center to
 - Provide your contact information
 - Determine if additional data upload access is needed
- Update STS Participant Contact Form if a [participant role](#) needs to be updated for your hospital: <https://www.sts.org/sts-participant-contact-form>
- Identify hospital STS vendor and support contacts
- Obtain access to local vendor reporting tools
- Confirm STS login credentials

First 30 Days

- Review current STS data specifications
- Complete review of STS training resources
- Learn site-specific abstraction workflows
- Meet with surgeon champion and QI leadership
- Connect with MSTCVS-QC and obtain access to MSTCVS-QC systems

First 60–90 Days

- Independently review Data Quality Reports
- Attend an MSTCVS-QC meeting
- Participate in quality discussions
- Support collaborative quality initiatives

Closing Statement

High-quality STS data is the foundation of the MSTCVS Quality Collaborative's work.

Through shared learning, collaboration, and continuous improvement, MSTCVS-QC supports better outcomes for patients across Michigan.