I would like to send a big 'THANK YOU' to those providers who participated in the Network's 2015 needs assessment and who worked so hard to obtain and return the patients responses to the Network. The assessments allow for comparison and evaluation of the different perspectives of our target audiences, helping the Network to improve technical assistance and resources. One example is the results for Question 2 as seen here:

**Provider Assessment Question:** Do you educate your patients about the circumstances in which they could be involuntarily discharged (forced to leave the facility) from your facility?

<table>
<thead>
<tr>
<th></th>
<th>In-Center:</th>
<th>Home:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>92% (195)</td>
<td>83.6% (97)</td>
</tr>
<tr>
<td>No</td>
<td>8% (17)</td>
<td>16.4% (19)</td>
</tr>
</tbody>
</table>

**Patient Assessment Question:** Has your facility explained to you situations that could result in your being involuntarily discharged (forced to leave the facility) from the dialysis unit?

<table>
<thead>
<tr>
<th></th>
<th>In-Center:</th>
<th>Home:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>54.8% (3153)</td>
<td>74% (452)</td>
</tr>
<tr>
<td>No</td>
<td>45.2% (2601)</td>
<td>25.7% (156)</td>
</tr>
</tbody>
</table>

We look at this information to then determine the best improvement approach to assist providers and patients with knowledge about involuntarily discharge. This information is also utilized in the development of quality improvement/patient engagement campaign materials and resources. So again, thank you for helping us to better understand how to help you. Never hesitate to call or email with your suggestions, recommendations, and/or if you'd just like to talk or brainstorm about an idea or issue.

Demetra Denmon, MA-WSD
Executive Director, ESRD Services
Phone: 813.865.3166 | ddenmon@hsag.com
AIM 1
Better Care for the Individual through Beneficiary and Family Centered Care

Network 7 Launches 2015 Patient Engagement Learning and Action Network (LAN) Quality Improvement Activity (QIA) and Patient LAN Campaigns

The 2015 LAN QIA will focus on establishing Patient Engagement and Education Representatives (PEERs) in 33 facilities across Florida, with the hope of adding more PEERs every year. The PEERs will work with a facility representative on orienting to the role and establishing guidelines regarding how they will assist patients in their facilities. This program was started by patients for patients. If you are interested in establishing a PEER in your facility contact Helen Rose at HRose@NW7.esrd.net.

Campaign #1: Infection Prevention
The goal of this campaign is to educate patients and families about infection prevention practices in dialysis facilities, so they are empowered to speak up and help to improve hand hygiene compliance. The campaign also aims to assist dialysis facility staff in understanding the patient perspective related to infection prevention and encourage open communication between staff and patients.

Campaign #2: Patient Engagement in the Plan of Care Meeting
The focus of this campaign is to increase patients’ participation in their Plan of Care (POC) meetings with the interdisciplinary team (IDT). Facilities will provide each patient due for a POC with a campaign resource booklet and encourage patients to become more engaged in their dialysis care by attending their POC meeting.

New Resources from Fistula First/Catheter Last
The ESRD National Coordinating Center (NCC) has announced the newest addition to the vascular access materials in the Lifeline for a Lifetime toolkit. The newest tools include resources for the One Minute Catheter Check and a Spanish language version of the Access Planning Manual. The complete toolkit for patients and providers can be found in one central location and includes:

- All-inclusive Resource Download Center for convenient access and downloading of educational materials
- Videos that can be downloaded and saved for continued use
- Downloadable PDFs and interactive files for patients and professionals
- Patient resources available in English and Spanish

June is National Safety Month
Injuries are a leading cause of disability for people of all ages and they are the leading cause of death for Americans age 1 to 44. Slips, trips, and falls are areas of focus for National Safety Month. Did you know that one in three older adults falls each year? Many falls lead to broken bones and other health problems. Take time to talk to your patients about looking at ways to prevent accidents from happening in their homes. It is also a
good time for staff to stop and survey the dialysis and transplant units to make sure everyone is safe every day. For more information, visit www.healthfinder.gov/nho/JuneToolkit2.aspx.

**BREAKING NEWS from the Dialysis NHSN Helpdesk!**

Check out the most recent NHSN newsblast to see how you can address data quality concerns raised by the Network.

**AIM 2**

**Better Health for the ESRD Population**

**2015 AIM 2 Project - Increase Hepatitis B and Pneumococcal Vaccination Rates**

In 2014, the Network successfully completed a vaccination project with a small group of facilities whose Hepatitis B and Pneumococcal vaccination rates indicated a racial disparity in White vs. African American patients. Upon analysis of the Network’s 2014 quarter three and four vaccination data, racial disparity once again has the largest area for improvement. The Network will include 20 facilities in the 2015 vaccination project to spread and improve access to care with regard to Hepatitis B and Pneumococcal vaccination rates. Within the new group of facilities our goal will be to see at least a 10% improvement in each of the vaccination rates by the end of the third quarter of 2015.

**AIM 3**

**Reduce Costs of ESRD Care by Improving Care**

**Quality Improvement: Am I Doing It Right?**

Quality Improvement (QI) is described by the CMS Conditions for Coverage as Quality Assessment and Performance Improvement (QAPI). The QI process must maintain and demonstrate evidence of continuous monitoring. Your QI meetings should be based on aggregate data which is reviewed by the interdisciplinary team (IDT) and should incorporate all facility services (e.g., in-center hemodialysis, home therapies). Meetings should focus on quality indicators related to improving health outcomes and the prevention and reduction of medical errors.

Many clinicians are more comfortable focusing on what is going on with each individual patient rather than looking at aggregate facility outcomes. Going over each individual patient lab is not a QI meeting, but rather a patient care meeting.

Monthly QI Meeting suggested topics:

1. Aggregate data is the combined outcomes, by modality, of all patients in the facility. For example, percentage of HD patients achieving the Kt/V target of 1.2.
2. Review data to see if quality goals are being met; trend data for at least six data points to determine if there is improvement or if there is a decline in outcomes.

3. Identify which quality indicators need action. If there are multiple areas, prioritize which will be the immediate facility focus for improvement and create a quality improvement plan utilizing the Plan-Do-Study-Act (PDSA) model.

4. Document in the QAPI meeting minutes any activities from the prior month. Were there successes? Can successful processes be replicated to address other focus areas? If not, re-evaluate your plans and interventions and make adjustments.

Include evidence of the interdisciplinary team involvement in the meeting. What were the contributions by the various team disciplines?

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**Emergency (All-Hazards) Preparedness**

As we move into the 2015 Hurricane season, it is important to remember that plans and drills are important components to successfully handling any major emergency. One of the critical planning issues for dialysis patients is TRANSPORTATION. Even in good times patient transportation can be problematic, so it is likely the difficulties will increase during an active hurricane season. It is important that back-up transportation arrangements are made ahead of time and to know who is available to assist prior to a weather-related event. If back-up transportation is not possible during inclement weather, patients should consider staying closer to their dialysis facility with family, friends, or at a local hotel.

REMEMBER - Emergency responders such as ambulance and fire departments will not provide transportation assistance to scheduled dialysis treatments and should only be contacted when emergency services at the hospital are required. Emergency (all-hazards) preparedness materials are available at: http://kcercoalition.com/.
Dialysis Facility Compare (DFC)

Five Star Ratings are the newest part of DFC website. The Five Star Ratings are part of Medicare's efforts to make data on dialysis centers easier to understand and use. The posted Five Star Ratings will use the same data previewed by facilities during the July 2014 preview period, and this data will be updated on an annual basis beginning in October 2015.

Other information on the DFC website includes:

- Dialysis facility descriptions and services
- Detailed quality scores that provide information about the facility's hospitalizations, deaths, and the use of best treatment practices

For more information, visit www.medicare.gov/dialysisfacilitycompare/#about/what-is-dfc.

CROWNWeb

CROWNWeb Activities

There are activities that must be performed monthly through the single user interface by facility staff at every dialysis facility. Completion of these activities is extremely important, as failure to do so could adversely affect patient benefits, as well as skewing the data on reporting required by CMS.

Monthly, the Network will send facilities the list of delinquent activities. The list below does not reflect every CROWNWeb activity, but it is intended to be a reminder of monthly reoccurring tasks:

- **Verification/entry of vascular access (VA) and clinical data** is due within two months after the end of each month (i.e., January data is due by the end of March). You may use the N/A check box(es) for specific labs if they are not available. **NOTE:** Remember to make sure that all data is in "submitted" status, as "saved" data will be counted as missing.

- **Verification of the Patient Activity and Related Treatment (PART) Report** is due by the 10th of each month - no exceptions.
  - **All Users:** This is a good time to verify your patient roster and identify any patients that have discharged by the system due to being admitted as Non-Transient to another facility. You should also review any transient patients that have been admitted for over 30 days and update their record if necessary.
  - **Batch Users:** This is a good time to verify and match your patient's information (last name, first name, date of birth, and gender) with your corporate database for a smooth transition for batch submissions of your VA and clinical data

- **Enter the required CMS 2728 and 2746 forms, as appropriate.**
  - **The CMS 2728** is due within 45 days of the date that the patient starts permanent dialysis at your facility.
  - **The CMS 2746** is due within 14 days of the date of death.
• **Update patient records from the Action List weekly.** The items on this list reflect instances where the patient information in CROWNWeb does not match what is in the EDB (Medicare’s Enrollment Database). As you Accept/Reject records from the Action List, make sure to update CROWNWeb and your corporate system as needed.

**CROWNWeb Training**
Are you having problems with CROWNWeb? Use the [CROWNWeb](#) website training on how to use the software. The website contains many tools and videos for training purposes.

## UPDATING EVENTS and WEBINARS

**Florida Renal Administrators Association Annual Meeting**
**Date:** July 16-18, 2015  
**Location:** The Naples Beach Hotel & Golf Club, Naples, FL  
For more info, click [here](#).

**Board of Nephrology Examiners Nursing and Technology (BONENT) 2015 Southeast Regional Seminar**
**Date:** September 27, 2015  
**Location:** Fort Lauderdale Marriott North, Fort Lauderdale, FL  
For more info, click [here](#).

**American Association of Kidney Patients (AAKP) National Patient Meeting**
**Date:** September 25-27, 2015  
**Location:** Nashville Airport Marriott, Nashville, TN  
For more info, click [here](#).

**American Nephrology Nurses Association (ANNA) Fall Meeting 2015**
**Date:** October 10-12, 2015  
**Location:** JW Marriott Austin, Austin, TX  
For more info, click [here](#).

**Network 7 2015 Annual Forum**
**Date:** October 25-27, 2015  
**Location:** Renaissance Tampa Hotel International Plaza, Tampa, FL  
More registration information coming soon.

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This material was prepared by The Florida ESRD Network (Network 7), under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. Publication Number: FL-ESRD-GR-06292015-01

HSAG: The Florida ESRD Network (Network 7) | 3000 Bayport Drive | Suite 300 | Tampa | FL | 33607