



*ESRD Networks 7, 13, 15, 17*

# Long Term Catheter (LTC) Reduction Quality Improvement Activity (QIA)

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# Webinar Attendance

To verify facility attendance:

- Message the host via the chat function with the name of the facility and attendees.

Or

- Send an email after the call with the name of the facility and attendees to [JChaine@hsag.com](mailto:JChaine@hsag.com).

# Agenda

- Introduction
- Inclusion criteria
- LTC QIA goals
- LTC QIA interventions and activities
- LTC QIA reporting dates and information
- Quality Assessment and Performance Improvement (QAPI) activities
- Facility Patient Representative (FPR) program overview
- Best practices
- LTC QIA tools and resources
- Questions

# LTC QIA Introduction

# LTC QIA Introduction Details

The Centers for Medicare & Medicaid Services (CMS) and the Network have established goals to reduce LTCs (catheters in use greater than 90 days) because:

- Central venous catheters (CVCs) are associated with an increase in morbidity and mortality.
- Arteriovenous fistulas (AVFs) are the preferred vascular access due to:
  - Longevity.
  - Lower rates of required rework/repairs.
  - Lower rates of infection, hospitalization, and death.

# LTC QIA Inclusion Criteria

# LTC QIA Inclusion Criteria Details

- Facilities selected for this QIA have:
  - An LTC rate of 15% or greater.
    - LTC data is based on July 2019 CROWNWeb data.
  - A facility census greater than 25 patients.

# LTC QIA Goals



# LTC QIA Goals in Detail

- Achieve a **2-percentage point reduction** in LTCs from the facility's baseline rate.
- Report 100% of the facility's vascular access data in CROWNWeb, each month.
- Identify at least one FPR to participate in the QIA interventions.
- Sustain quality improvement practices to reduce CVC rates in the facility.

# LTC QIA

## Interventions and Activities

# QIA Interventions & Activities (Pt. 1)

LTC QIA interventions include the following:

- Completing monthly reporting to the Network via SurveyMonkey.
- Identifying a vascular access manager (VAM) and/or vascular access team.
- Establishing a process to educate and refer patients for a permanent access within 2 weeks of admission.
- Using a vascular access tracking tool to monitor vascular access status and to follow up on patients' vascular access appointments.

# QIA Interventions & Activities (Pt. 2)

LTC QIA interventions include the following:

- Building relationships and collaborating with vascular access surgeons and access centers.
- Re-educating patients and staff on a monthly basis on vascular access topics.
- Auditing vascular access data in CROWNWeb to ensure data accuracy and completion.
- Reviewing LTC QIA progress, trends, and barriers during monthly QAPI meetings.

# QIA Interventions & Activities (Pt. 3)

LTC QIA interventions include the following:

- Developing a process to establish a permanent access plan for patients with acute kidney injury (AKI).
- Participating in one-on-one calls with the Network to review barriers and successes.
  - The Network may conduct a site visit to your facility to review QIA progress.
- Involving the FPR in QIA interventions, feedback, and educational activities.

# LTC QIA

## Reporting Dates and Information

# LTC QIA Reporting Dates

- Submit monthly QIA reporting to the Network via SurveyMonkey links by the **5th of each month**.
  - A new SurveyMonkey link will be emailed approximately 2 weeks before the monthly submission due date (i.e., the 5th of the month).
  - The first monthly QIA reporting via a SurveyMonkey link will be due **February 5, 2020**.

# LTC QIA Reporting

The Network CVC Tracking Tool will assist you with your monthly reporting to the Network via the SurveyMonkey link.

Long Term Catheter (LTC ) Monthly Tracker												
Facility Name:					Medicare CCN Number:							
Individual Completing Report:												
<p>Use this vascular access tracker when completing your monthly reporting to the Network via SurveyMonkey link. Please include all permanent in-center hemodialysis patients (ICHD) when completing this tracker. Ensure all vascular access data has been reported in CROWNWeb prior to each clinical month closure!</p> <p>Please contact Jane Chaine (Wilson) at <a href="mailto:jchaine@hsag.com">jchaine@hsag.com</a> for any questions about this QIA.</p>												
Month	ICHD Census	# of patients with LTC (catheter > 90 days)	# of LTC removed during the month	Total # of new ESRD admissions	# of new admissions with permanent access (no catheter)	# of new admissions with a catheter and permanent access maturing	# of new admissions with a catheter ONLY	# of new admits with a catheter educated & referred for permanent access	# of patients refusing permanent access	# of patients medically ineligible for permanent access	# of patients without insurance	# of AKI patients with a catheter
January												
February												



# Required Monthly Reporting to CROWNWeb

- Submit all vascular access data to CROWNWeb **by the last day of the month.**
  - CROWNWeb data submission due dates are for the month that is **2 months prior to the current reporting month.**
  - CROWNWeb Clinical Closure dates:

<b>October 2019</b>	<b>January 2, 2020</b>
<b>November 2019</b>	<b>February 3, 2020</b>
<b>December 2019</b>	<b>March 2, 2020</b>

# Vascular Access Reporting in CROWNWeb

- Tips to avoid over reporting LTCs in CROWNWeb:
  - **For any CVC patient using 1 or 2 needles, document that the patient is using needles in CROWNWeb and in the patient's electronic medical record (EMR).**
  - Each facility should have at least 2 CROWNWeb users to ensure complete and accurate reporting.

# LTC QIA QAPI Requirements

# Monthly QAPI Meetings

- Facilities are required to review the LTC QIA in monthly QAPI meetings.
- The following topics should be reviewed in QAPI by the interdisciplinary team:
  - Barriers to LTC reduction.
  - LTC QIA interventions and progress towards goals.
  - FPR involvement in the QIA.
  - Surgical outcomes.
  - Issues related to faulty cannulation.
  - Permanent access plans for patients with AKI.

# LTC QIA QAPI Form

## QUALITY ASSESSMENT AND PERFORMANCE IMPROVEMENT (QAPI) QUALITY IMPROVEMENT ACTIVITY (QIA) MONITORING FORM

### Reducing the Use of Long-Term Catheters (LTCs)

Date of QAPI Meeting: \_\_\_\_\_

Facility QIA Baseline: \_\_\_\_\_

Facility QIA Goal: \_\_\_\_\_

Facility Patient Representative (FPR) Present:  Yes  No

Goal Met:  Yes  No

Monitoring Metrics												
	Number of Patients by Month											
Number of Patients with:	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
An LTC >90 days, who are eligible for a permanent access												
An LTC >90 days, who have been referred for a permanent access												
An LTC >90 days, educated on permanent access types												
An LTC that are Acute Kidney Injury (AKI) patients												

# LTC QIA QAPI Form (cont.)

What QIA interventions have been implemented at the facility this month?

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What interventions were successful? \_\_\_\_\_

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After implementing the interventions, what barriers remain for reducing LTCs? \_\_\_\_\_

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What is the facility's LTC reduction plan for the next month? \_\_\_\_\_

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Does the facility have a process to address permanent access placement for patients with AKI? If no, what is the facility's plan to address permanent access placement for AKI patients? \_\_\_\_\_

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Facility Administrator/Date

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Facility Medical Director/Date

# FPR Program

# What Is the FPR Program?

- The FPR program is a patient-centered approach to spread educational information to patients, provide peer-to-peer support, and provide additional support for staff at the dialysis facility.
- An FPR can be:
  - A patient currently on dialysis.
  - A patient who has had a kidney transplant.
  - A dialysis patient caregiver.
  - A volunteer at his/her dialysis facility or another facility in his/her area.



# What Is the FPR Role?

## FPRs may:

- Act as the “patient voice” by addressing patient interests/concerns, and by providing new ideas and QIA feedback during monthly QAPI meetings.
- Hand out the Network 17 Patient Newsletter: <http://www.hsag.com/NW17PatientNewsletter>
- Distribute QIA educational materials.
- Act as a greeter for newly admitted patients.
- Act as a peer mentor to support patients to prevent infection and pursue permanent access placement.
- Assist with QIA interventions or other activities to meet the needs of the facility.

# FPR Program Resources

- The FPR Guide explains the role of an FPR, including FPR selection criteria, how FPRs can assist the Network, what is expected of an FPR and more.
  - <https://www.hsag.com/contentassets/57fa392060b1488fbafda0bd076319dc/nw17nprguidefinal508.pdf>
- The FPR Recruitment Flyer
  - <https://www.hsag.com/contentassets/57fa392060b1488fbafda0bd076319dc/nw17nprflyerfinal508.pdf>
- The FPR Agreement Form
  - <https://www.hsag.com/contentassets/57fa392060b1488fbafda0bd076319dc/2019nw17npragrmntformqiafnl508.pdf>

# LTC QIA Best Practices

# LTC QIA Best Practices in Detail

- Best practices for successful completion of the LTC QIA include:
  - Collaborating with surgeons and vascular access centers to improve timeliness of the permanent access referral process.
  - Encouraging nephrologists and hospital coordinators to create a process for patient access assessment and plan prior to hospital discharge.
  - Providing ongoing staff and patient education regarding permanent access placement and home dialysis treatment options.
  - Posting educational bulletin boards and hosting infection prevention Lobby Days.

# LTC QIA Best Practices (cont.)

Best practices for successful completion of the LTC QIA include:

- Incorporating the FPR in LTC QIA interventions.
- Instituting a CVC tracking process to monitor:
  - Timely patient referral.
  - Follow-up to vascular access appointments.
  - AVF maturation.
  - Removal of temporary accesses.
- Ensuring all vascular accesses are updated in CROWNWeb once cannulation is initiated.
- Identifying at least 1 VAM or establishing a vascular access team.

# LTC QIA Tools and Resources

# LTC QIA Tools & Resources

The Network will distribute these LTC QIA tools and resources and post to the HSAG: ESRD Network 17 website (<https://www.hsag.com/en/esrd-networks/esrd-network-17/quality-improvement-activities-for-2019/reducing-rates-of-healthcare-associated-infections-hais-qias/reducing-long-term-catheter-ltc-use-and-bsis/>) to support your success throughout the QIA:

- *Your CVC: What You Need to Know*
  - <https://www.hsag.com/contentassets/0860b71f1b1e417fa1c9a2b07116c8cb/nw17caringdialysiscatheter508.pdf>
- *Vascular Access Options*
  - [https://www.hsag.com/contentassets/22289df9ec7e493f95e20bb2d34e0912/nw17\\_va-options\\_avf-avg\\_final\\_508.pdf](https://www.hsag.com/contentassets/22289df9ec7e493f95e20bb2d34e0912/nw17_va-options_avf-avg_final_508.pdf)
- *Fistula First Hemodialysis Vascular Access (available on request)*
- *Benefits to Having a Permanent Access*
  - [https://www.hsag.com/contentassets/0860b71f1b1e417fa1c9a2b07116c8cb/nw17\\_permanent-access-patient-education\\_final\\_508.pdf](https://www.hsag.com/contentassets/0860b71f1b1e417fa1c9a2b07116c8cb/nw17_permanent-access-patient-education_final_508.pdf)
- *Dialysis Patient Speak: a Conversation about the Importance of AV Fistulas (video)*
  - <https://www.youtube.com/watch?v=B4ncHQoOg34>

# Additional Resources for Success

- *Vascular Access Appointment Sheet*
  - <https://www.hsag.com/contentassets/0860b71f1b1e417fa1c9a2b07116c8cb/vascularaccessapptsheet508.pdf>
- *Catheter Tracking Form*
  - <https://www.hsag.com/contentassets/0860b71f1b1e417fa1c9a2b07116c8cb/allnwcathetertrackingform508.xlsx>
- *LTC QIA QAPI Form*
  - <https://www.hsag.com/contentassets/0860b71f1b1e417fa1c9a2b07116c8cb/nw17bsiltmonthlyqapireview508-1.pdf>
- *ESRD NCC Vascular Access Planning Guide for Professionals*
  - [https://www.esrdncc.org/contentassets/3dc1d6c5c6724ab4b49e7e782294d8ad/73.esrdncc\\_vascular\\_access\\_planning\\_guide\\_professionals\\_11\\_2015\\_508.pdf](https://www.esrdncc.org/contentassets/3dc1d6c5c6724ab4b49e7e782294d8ad/73.esrdncc_vascular_access_planning_guide_professionals_11_2015_508.pdf)
- ESRD NCC Fistula First Catheter Last website
  - <http://fistulafirst.esrdncc.org/ffcl/>
- Medical Advisory Council (MAC) of the Forum of ESRD Networks Catheter Reduction Toolkit
  - <http://esrdnetworks.org/mac-toolkits/download/download-write-able-forms-catheter-reduction-toolkit>



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# Network 17 Quality Improvement Contact

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**HSAG: ESRD Network 17 QIAs:**

<https://www.hsag.com/en/esrd-networks/esrd-network-17/quality-improvement-activities-for-2020/>



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# Thank you!

## HSAG: ESRD Network 17:

<https://www.hsag.com/en/esrd-networks/esrd-network-17/>

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# Questions

