

Network 4 – Network Council Teleconference Meeting

Phone 1-866-951-1151 Then 35 24 922#

June 6, 2018



Agenda

- Answers to Submitted FAQs
- 2018 Quality Improvement Activity Update
- Patient Engagement Activity Update
- Annual NHSN Dialysis Event Surveillance Training
- Update on Emergency Management Requirements
- Opioid Crisis
- CROWNWeb Reminders



Survey: Frequently Asked Questions

#1: How are facilities selected to participate in projects?



Project Participant Selection Process

 QIRN4 has a contract with CMS, and as part of that contract, CMS dictates the improvement projects that are to be conducted, as well as the selection criteria.

Example taken from 2018 contract:

- Select at least 50% of facilities in the Network's service area including those facilities reporting the highest BSI rates.
- Provide the facilities in the BSI QIA with guidance to implement all CDC recommended interventions for dialysis BSI prevention (Surveillance and feedback using NHSN, hand hygiene observations, catheter/vascular access care observations, staff education and competency, patient engagement/education, catheter reduction, chlorhexidine for skin asepsis, catheter hub disinfection, and antimicrobial ointment) that the facility has not adopted or is having difficulty successfully implementing. The Network shall stress to facilities the Core Interventions identified by CDC as having the greatest potential to reduce the infection rate, catheter reduction and catheter interventions (scrub the hub, chlorhexidine for skin asepsis, antimicrobial ointment at the catheter exit site, staff education regarding the interventions with competency test, and regular audits to reinforce appropriate catheter care).



National & Regional Buy-In

- CMS has said that they spoke to dialysis corporations to determine which initiatives they were focused on, and designed these 2018 projects to support those existing efforts
- For projects with no prescribed selection criteria (primarily Home Dialysis and Transplant) we spoke to regional managers of DCI, Fresenius and DaVita to see which project they preferred



Selection by Project – Bottom Line

- Three projects with prescribed selection:
 - BSI 20% of facilities with worst BSI rates
 - LTC facilities with BSI rate in worst 50% in Network AND
 LTC rate >15%
 - HIE facilities with BSI rate in worst 50% in Network
- Three projects with non-prescribed selection:
 - Transplant all DaVita facilities
 - Home Dialysis all Fresenius facilities
 - Vocational Rehab facilities not participating in multiple other projects



2018 Quality Improvement Activities (QIAs)

- 1. Patient Safety: Healthcare-Associated Infection
- Improve Transplant Coordination
- 3. Promote Appropriate Home Dialysis
- 4. Population Health Focused Pilot



QIA 1: Pt. Safety - Healthcare-Associated Infections

- AIM: Reduce Blood Stream Infections
- 167 Network facilities selected for participation
- Goals of this QIA:
 - Decrease the blood stream infection semi-annual pooled mean by a 20% relative improvement
 - Polling Questions for ALL Network facilities:
 - Do you currently have a patient participating in a hand hygiene audit?
 - Would you be interested in attending a 30 minute teleconference to hear from clinic managers who have successfully incorporated patients into the hand hygiene audit process and/or a quality improvement team meeting?



QIA 1: Pt. Safety - Healthcare-Associated Infections

- Reduce the number of patients who dialyze via a Long Term Dialysis Catheter (LTC) by 2%
 - Polling Question for ALL Network facilities:
 - Do you currently have a patient who has completed a formal Peer Mentoring program (i.e. National Coordinating Center(NCC) or National Kidney Foundation (NKF) and is assisting with long term catheter reduction?
- Work with 50% of the Network facilities to join a Health Information Exchange (HIE) or gain access to a hospital electronic medical record (EMR)



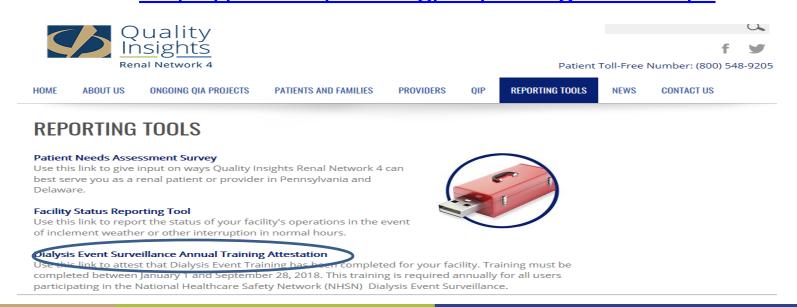
Healthcare-Associated Infections: Hepatitis C

- Polling Question:
 - Would you like to be able to find the resources (phone number, website links) for reporting Hepatitis C seroconversions on our website?



Reminder: Annual NHSN Dialysis Event Surveillance Training & Attestation

- Training is now required annually beginning in 2018
- Training must be completed no later than September 30th
- Completion of training is tracked through attestation on our website https://www.qirn4.org/Reporting-Tools.aspx





QIA 2: Improve Transplant Coordination

- AIM: Increase number of patients placed on transplant waitlist
- 100 (30%) Network facilities selected for participation
- Goals of QIA
 - 10% increase in the number of patients who are waitlisted
- Top 4 Barriers: patient refusal, burdensome transplant process, lack of follow up with appointments, educational knowledge gap
- Intervention Discussion
 - Patient Advocates in Action
 - Timmy Nelson



QIA 3: Promote Appropriate Home Dialysis

- AIM: Increase number of patients trained for Home Therapies
- 100 (30%) Network facilities selected for participation
- Goals of QIA
 - 10% increase in the number of patients who have begun training for a home modality
- Top 4 barriers: educational knowledge gap, lack of home support system, patient refusal, does not want responsibility
- Intervention Discussion
 - Patient Advocates in Action
 - Timmy Nelson



QIA 4: Population Health Focused Pilot

- AIM: Support Gainful Employment of ESRD Patients
- 34 Network facilities selected for participation
- Goals of QIA:
 - 10% increase in the number of patients who are referred to Vocational Rehabilitation Services OR Employment Network Agencies
 - 2% increase in the number of patients who are utilizing Vocational Rehab Services OR Employment Network Agencies
- Question to the Network:
 - How will returning to work affect a patients state or federal benefits?
- Answer:
 - Have patient call <u>Ticket to Work at 866-968-7842</u> to discuss their specific situation! Work income will not affect all patient benefits in the same way

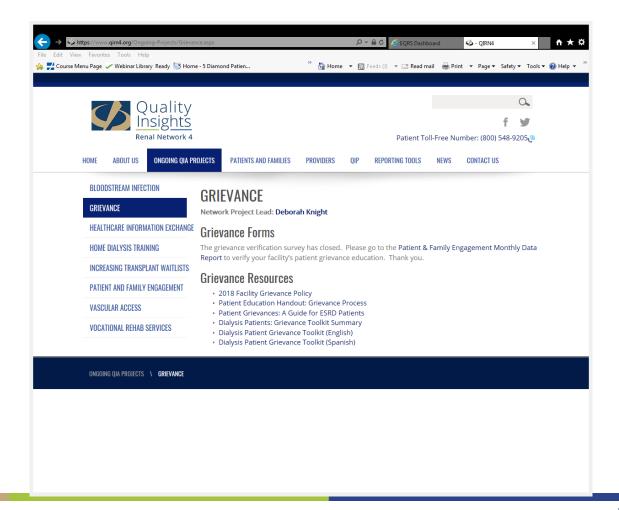


Grievance Activity

- Patient education on what is a grievance, role of Network 4 and the grievance toolkit.
- Answer a short verification form confirming that your patients were educated.
- Currently only 11% of facilities have completed their survey.



Grievance Activity



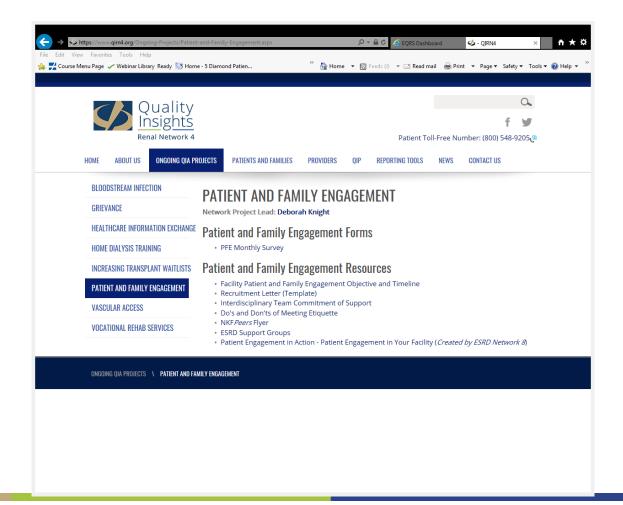


PFE Activity

- Show patient engagement in facility activities such as recruiting a patient representative, patient rep attendance at monthly QAPI meeting, patient rep assistance with educating fellow patients about available support group options.
- Answer a short monthly survey for four consecutive months.
- Currently only 21% of facilities have completed their surveys.



PFE Activity





Peer Mentoring by Robin Asick

- Patient Family Partnership Program
 - Offers support for people affected by kidney disease, organ donation or transplantation. It's designed just for patients, family members and care partners. Speak with a trained specialist who will answer your questions and listen to your concerns.









CMS EP Rule Requirements (Develop):

Develop:

- Risk Assessment and Planning (Hazard Vulnerability)
 - Collaborate with local EM agencies to ensure effective plan
- Policies and Procedures
 - Include evacuation plan, sheltering in place, tracking patients and staff during an emergency
- Communication Plan
 - System to contact staff, patients' physicians, other key persons
- Training and Testing Program
 - Training at least annually
 - Demonstrate staff knowledge of procedures
 - Educate patients on how to evacuate facility, communication protocols, facility P&P



CMS EP Rule Requirements (Test):

• Conduct:

- Drills and exercises at least annually
 - One community based full-scale exercise or
 - If community exercise not accessible, individual facility based exercise
 - One full scale exercise or tabletop exercise that includes group discussion led by facilitator using prepared questions <u>designed to</u> <u>challenge an emergency plan</u>



New Topic – Opioid Crisis

- CMS National Awareness Campaign
 - Development of a Medication Management and Opioid (MMO) Initiative LAN
 - First Call was Wednesday May 16, 2018
 - Polling Questions:
 - From your own assessment-how many patients at your facility are battling Opioid addiction (including prescription, non-prescription or illicit street drugs)?
 - Would you be interested in attending future calls about the Opioid Emergency?



CROWNWeb Reminder

PART VERIFICATION

- PART Verification plays a Vital Role in the accuracy of CROWNWeb Data.
- If patients are missed at this stage there could be issues down the line with missing forms & missing clinical values, which can affect your facilities QIP Score and completion of the 2744-Annual Survey.
- It only takes a few minutes each month to head off much bigger issues later on!!
- Please properly verify your patients each month by comparing your in house census report to CROWNWeb's PART report. Be sure to verify Admission Date, Transient status and Modality.
 - Polling Question
 - What are your biggest issues with CROWNWeb?
- CROWNWeb Data Management Guidelines found at this link:
 - http://mycrownweb.org/assets/crownweb-dm/CROWNWeb
 Data Management Guidelines FINAL.pdf



Q&A

Open Discussion

