



# 2016 Network 4

Patient Representative Meeting, January 4<sup>th</sup> and 5<sup>th</sup> 2017

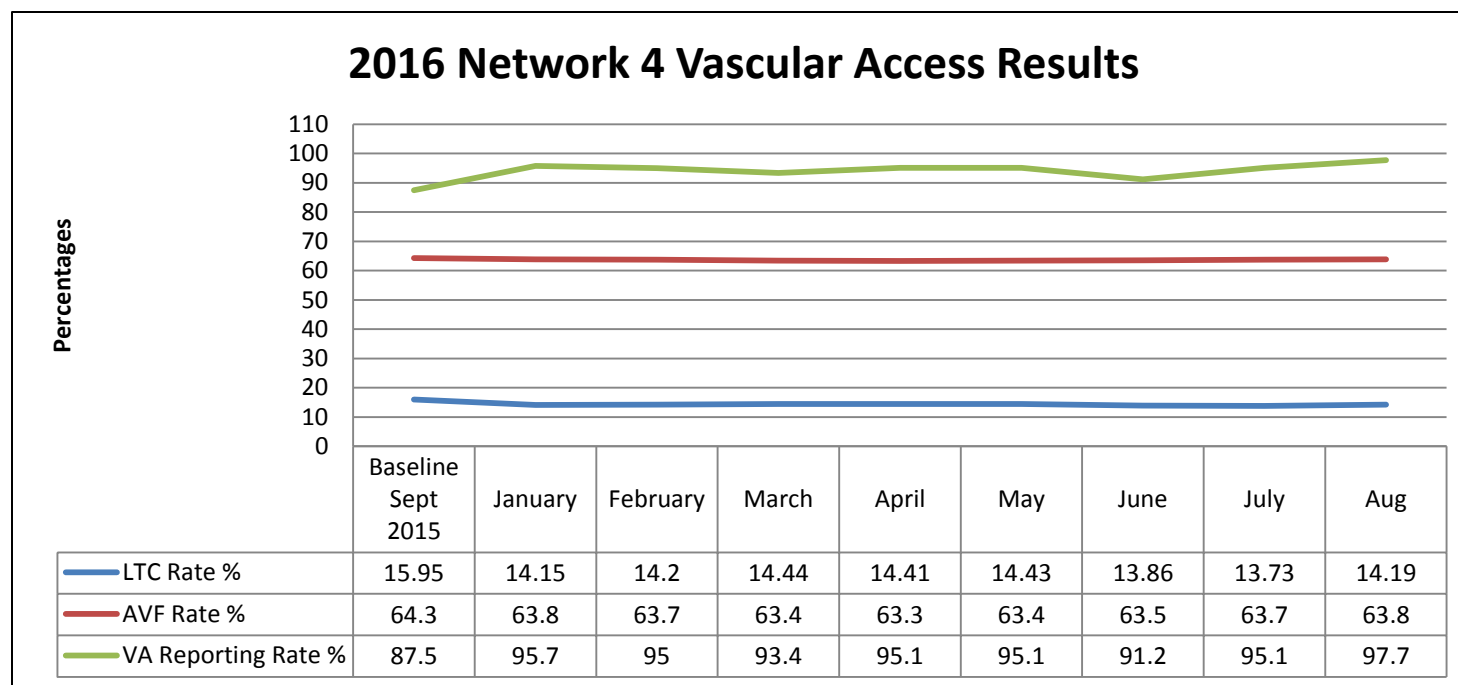
# Review the 2016 Quality Improvement Activities (QIA's)

QIA	
AIM 1	Long Term Catheters
	ICH CAHPS
	BSI Reduction
	Vaccination: HBV & Pneumonia
	Grievance
AIM 2	Home Dialysis Referrals
AIM 3	QIP- Hypercalcemia
	NHSN Data Quality

- Total of 8 QIA's
- Facilities with the MOST opportunity for improvement were chosen to participate
- Participation was mandatory once a facility was identified.

# Long Term Catheters

- This QIA worked to reduce the use of catheters



**LTC Rate – only targeted (>10% LTC Rate in September 2015) facilities**

**AVF Rate – all facilities in Network**

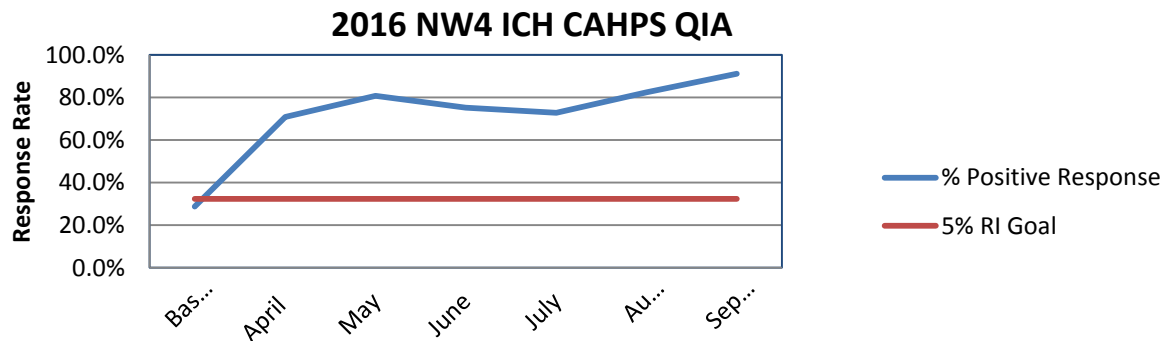
**Reporting Rate – all facilities in Network**

# ICH-CAHPS

- This QIA look to improve the patients response to the most negatively scored question on the 2015 ICH CAHPS Spring Survey; Question #39

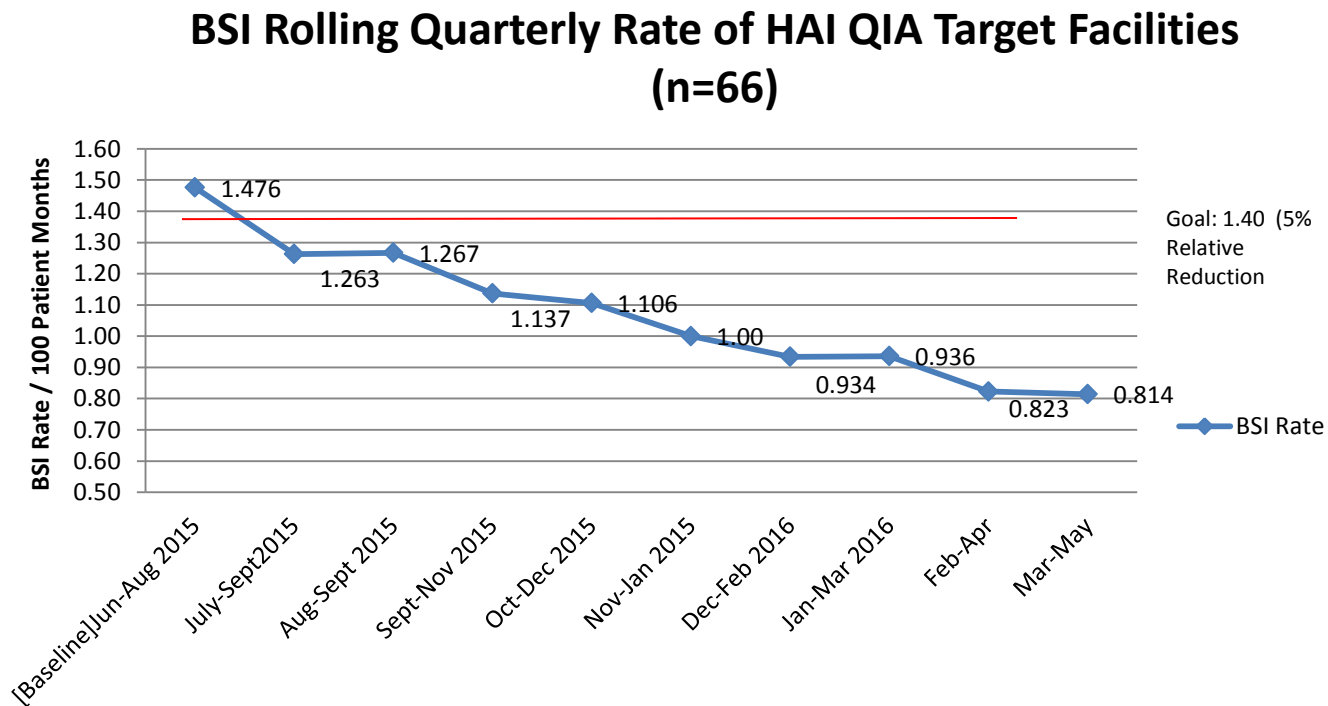
*“Peritoneal dialysis is dialysis given through the belly and is usually done at home. In the last 12 months, did either your kidney doctors or dialysis center staff talk to you about peritoneal dialysis?”*

- Interventions done at the facility
  - Root Cause of why patients may have responded negatively to this question
  - Implement system changes to improve process for educating patients about treatment options and PD to insure patients get the education they need



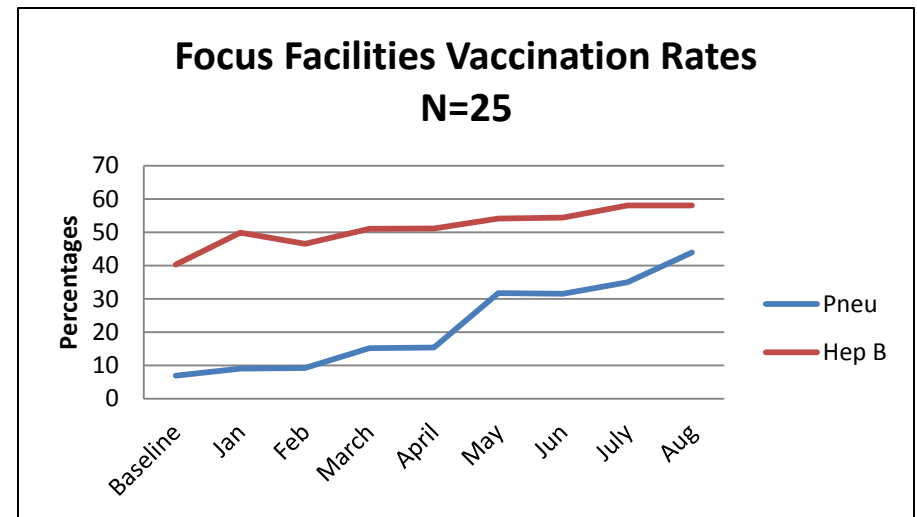
# BSI Reduction

This QIA looked to reducing blood stream infections(BSI)



# Vaccination

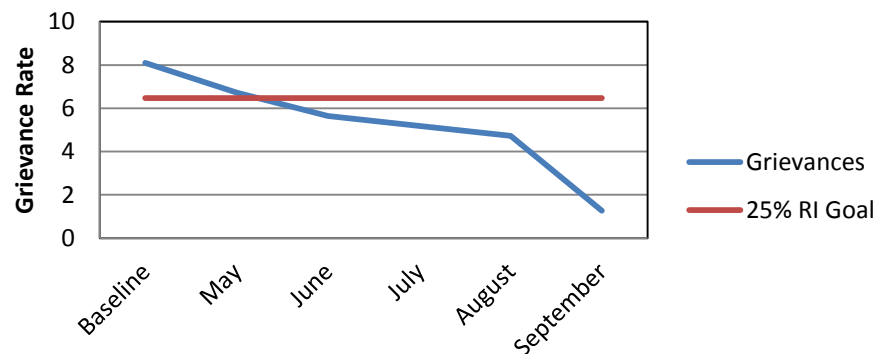
- This QIA is aimed at improving patients receiving both the Hepatitis B vaccine and the Pneumonia vaccine
- Facilities included had the poorest performance



# Grievances

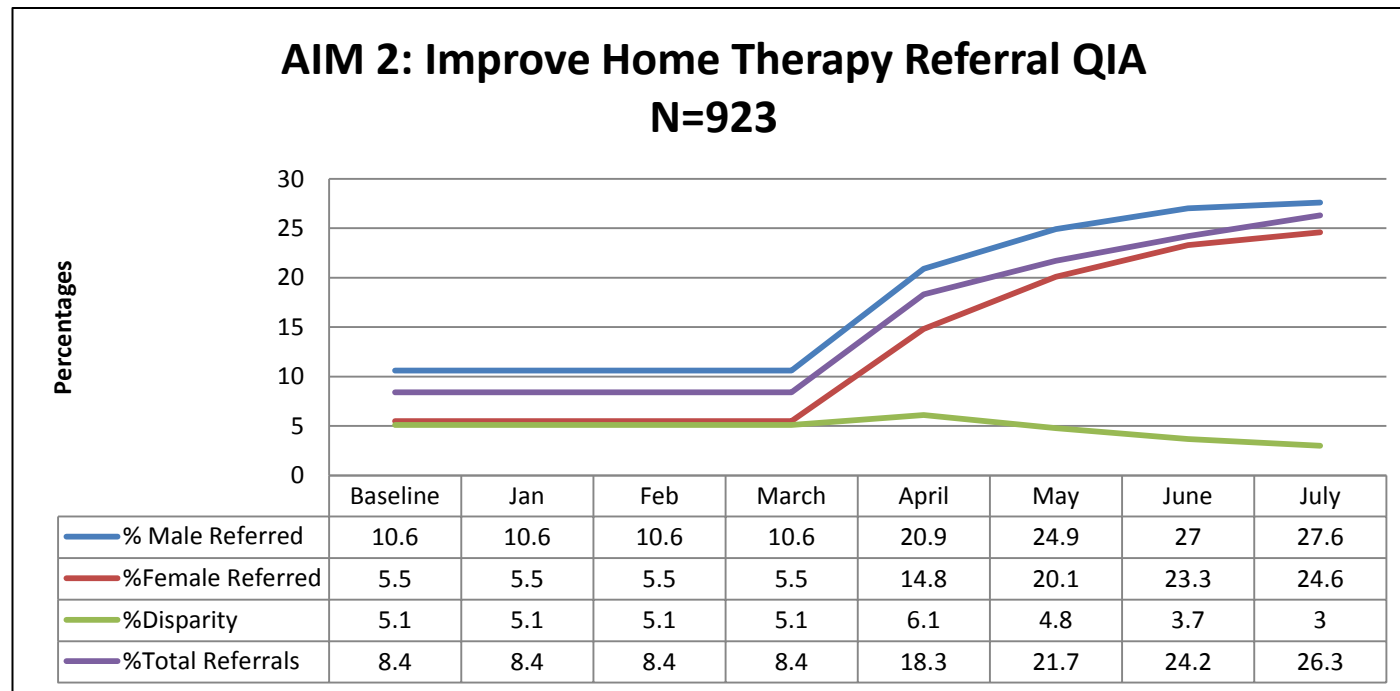
- This QIA looked to improve how selected facilities reduced their internal grievances leading to better experience of care for patients
- Interventions done at the facility
  - Root Cause of the most common facility level grievances
  - Implement system changes to improve issues patients complain about
  - Activities to improve Communication and Professionalism by staff

**2016 NW4 Grievance QIA**



# Aim 2 Home Dialysis Referrals

This QIA worked on improving referral for Home Dialysis Options – either PD or Home Hemo





# Hypercalcemia

This QIA looked to improve Hypercalcemia in the Lowest Performing Network Facilities

- 14 facilities chosen to participate based on PY2015 QIP Hypercalcemia performance
- Interventions done at the facility
  - Root Cause of why patients may experience Hypercalcemia in each focus facility
  - Implement system changes to improve process for detecting, educating and treating Hypercalcemia
- Network 4 Results
  - 12 of 14 facilities achieved improvement for three consecutive months

# 2017 QIA's

- Same QIA topics as 2016
  - Exception: Will replace Improve Home Referral with Improve Transplant Referral
- Facilities chosen based on data from 2016
  - Use data sources CROWNWeb, NHSN or ICH CAHPS
- Facilities will be notified of their involvement by the end of January 2017
  - Each facility is HIGHLY encouraged to include a patient representative in the planning of interventions and collection of data!



# Patient Engagement

Soaring to new heights in 2017



# Objectives

- The Network 4 facilities will all be attending a meeting on January 10<sup>th</sup> and 11<sup>th</sup> and will receive a presentation on Patient Engagement
- Goal is to have the facilities be able to:
  - Define patient and family engagement
  - List 2 ways patient and family engagement can improve healthcare outcomes for dialysis patients
  - Identify three Network 4 documents to be given to prospective Patient Representatives
  - List 2 ways a Patient Representatives can contribute to the activities at your dialysis facility

# What is Patient and Family Engagement?

Nothing about me **WITHOUT** me!

“It means that we who offer health care **stop acting like hosts to patients and families, and start acting like guests in their lives.**”

- Don Berwick, former CMS administrator

- “Engagement, broadly defined, is an **active partnership** among individuals, families, health care clinicians, staff, and leaders to improve the health of individuals and communities, and to improve the delivery of health care.”

- *Health Affairs*, 32(2) 2013



- *“Involve patients and families in decisions regarding health and health care, tailored to fit their preferences.”*
  - Patients and families should be given the opportunity to be fully engaged participants at all levels, including individual care decisions, health system learning and improvement activities, and community-based interventions to promote health.”



- Patient engagement represents “actions individuals must take to obtain the greatest benefit from the health care services available to them.”





- An "engaged patient" is one who is fully involved in, and enthusiastic about their health, and thus will act in a way that promotes optimal health in the chronic treatment setting



# What is Patient and Family Engagement from a Patient's perspective

**“Patient Engagement** is a patient being completely involved with their team, with the physician, the dietitian, social worker and tech when you're in-center and being completely involved with everything that goes on as far as the dialysis treatment.”

**“Patient Engagement** is being able to ask questions about things you're not familiar with like calcification.”

**“Patient Engagement** is not being afraid to ask questions. I'm learning that the only dumb question you have is the one you don't ask. Don't be afraid to ask and ask again until you understand.”

- 2013 PE LAN Patient Subject Matter Experts

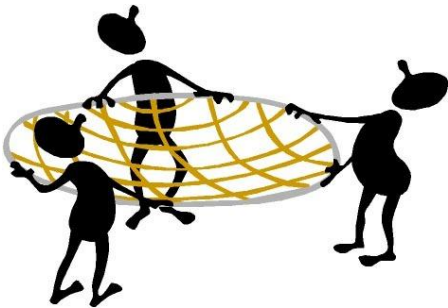
# Why is Patient Engagement Important?



# Why is Patient Engagement So Important?

- Allows patients to be part of the process and part of the solutions to their health care needs
- Allows patients to own their care and their care plan
- Provides patients control of their health and health care flight plan
- Puts patients and families at the center of care
- It results in working "with" patients and families, rather than just doing "to" or "for" them

- “patients and families can play a critical role in preventing medical errors and reducing harm.”
  - (2014) report from the NPSF Lucian Leape Institute at the National Patient Safety Foundation



# Why Patient AND Family Centered Care and not just Patient-Centered Care?

- Individuals, who are most dependent on health care, are most dependent on families...
  - The very young;
  - The very old; and
  - Those with chronic conditions.
- **Families** can be allies for quality and safety; they often are the constant support across settings and assist with transitions of care.
- **Families** can participate in the development of a care plan and support adherence to the plan.

# Where should Engagement occur?

- At every clinical encounter
  - Patient and family engagement should occur during direct care, care planning, and decision-making.
- At the practice AND organizational level
  - Patient and family engagement should occur in all quality improvement and health care redesign.

# Patient and Family Engagement will only work if you as a health care provider:



- Assume ***patients*** are the ***experts*** on their own experience and they have information ***you need to hear and act on.***
- Know that **families** are **primary partners** in a patient's experience and health.



# How patient and family engagement can improve healthcare outcomes for dialysis patients?



# How can Patient and Family Engagement Improve Healthcare?

- **Compelling Evidence:**
  - Improves quality, safety and outcomes of care
  - Ensures that patients receive care that fits their preferences
- **Reduces:**
  - Use of diagnostics and health care services
  - Health care costs
- **Increases:**
  - Buy-in to prescribed treatment
  - Patient experience and satisfaction scores
  - Staff and clinicians' satisfaction and retention



# How will Patient Engagement Help?

- Provide a reason to get up each morning
  - Improves feelings of worth
  - Improves depression
  - Improves adherence to the healthcare flight plan
  - Helps patients attain the highest level of health possible
- Allows patients to not just survive but thrive
- Improves
- Realize that “Dialysis Means Life”

# How will we get started



# 2017 Patient & Family Engagement

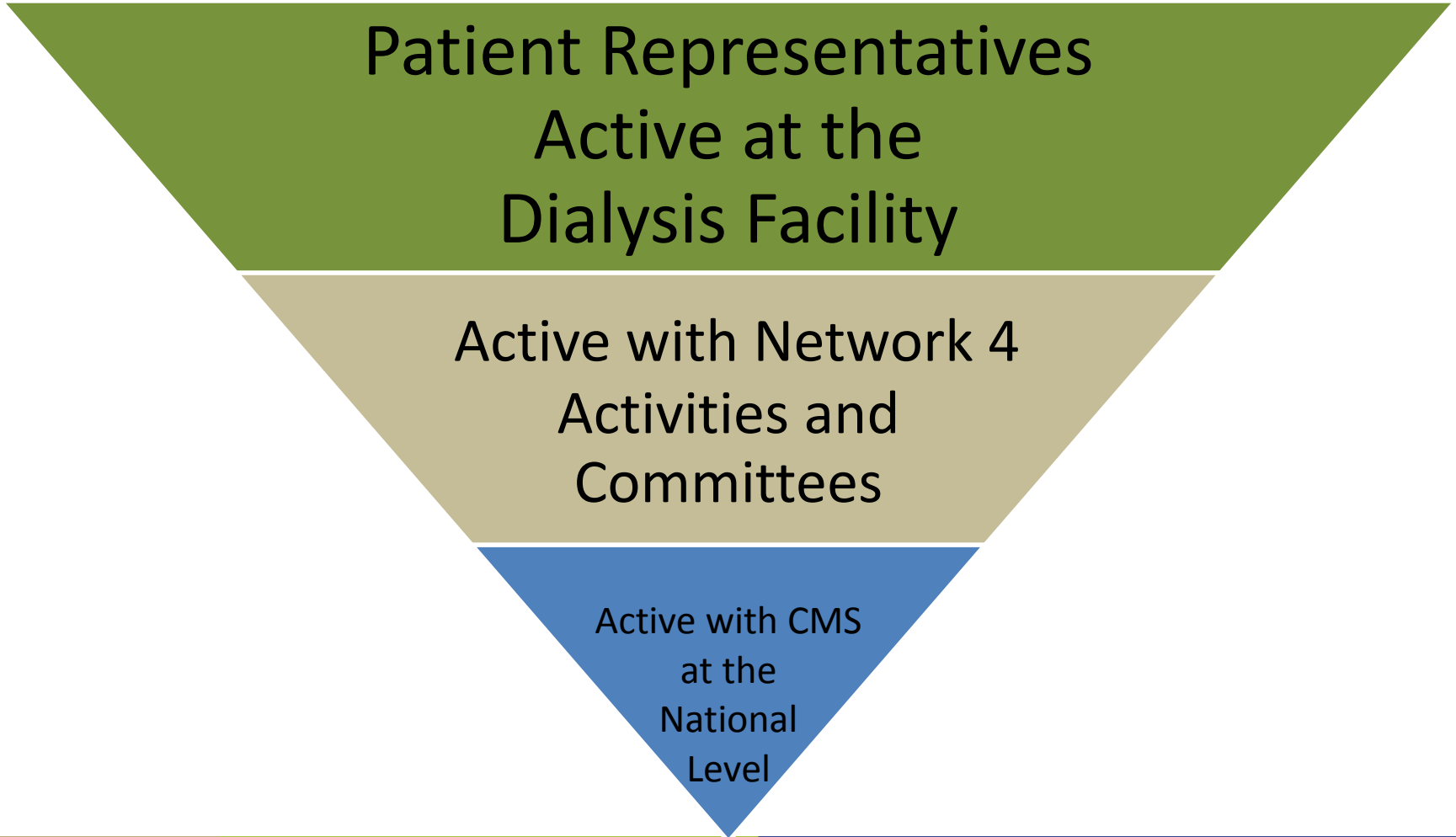
- Network 4 Partnered with Patients to redefined Patient Advisory Council (PAC) and Patient Representative Program
- Will continue to work closely with patient SMEs throughout 2017 to:
  - Revise the Network structure for Patient Engagement
    - Provide more guidance and training for patient representatives
    - Provide opportunities “roadmap” for patients to become partners with facilities and the Network
    - Provide more guidance and training for facilities on the Patient Representative Program
  - Network will continue to support Patient Representatives
    - Goal to have a Patient Representative in each facility
  - Immediate changes to expect
    - New 2017 Patient Representative Handbook
    - New 2017 Patient Representative Forms
    - Sample agenda for Quality Meetings to incorporate Patient Representative Voice

# Patient Representative Program

## High Level

- The Patient Representative Program is made up of Dialysis Patients and Kidney Transplant Patients (or families and caregivers) who would like to serve as Patient Representatives at their clinic.
- Provides a patient voice in the day-to-day activities of the dialysis unit
- Patient Representatives volunteer to serve as liaisons between any of the following:
  - The dialysis patients and the dialysis staff
  - The dialysis facility and Network Staff
  - The dialysis patients and CMS

# Overview of 2017 Network 4 Engagement of Patient Representatives



Patient Representatives  
Active at the  
Dialysis Facility

Active with Network 4  
Activities and  
Committees

Active with CMS  
at the  
National  
Level

# Patient Representative Program

## Dialysis Facility Level – Conceptually

- The program seeks to engage and integrate the Patient Representatives into key committees to insure a patients voice:
  - Quality Committee
  - Safety Committee
  - Readmission within 30 days Committee
  - Falls Committee
  - Strategic Planning Process
- Brings patient concerns and questions to the facility administration during Quality and Governing Body meetings
- Allows patients voice to be considered in special projects at the dialysis facility.



# Patient Representative Program

## Dialysis Facility Level – Specifics

- Act as mentors to new patients, introducing them to Network activities, publications, QIRN 4 patient rights and responsibilities, Network 4 grievance procedures and toll free patient phone number
- Participate in Facility activities such as:
  - Hand out Facility and Network 4 patient newsletters
  - Welcomes and mentors new patients
  - Participate in the facility committee meetings
  - Gets involved in special projects
  - Consulted on facility enhancements
  - Become involved with updating and creation of facility policies
  - Assist with the developed educational tools for patients and families

# DML

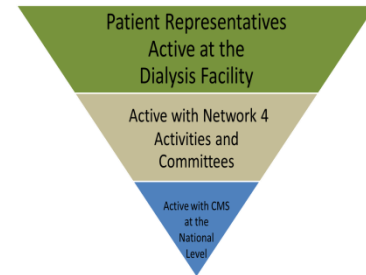
- All patient representatives will be educated on DML and will receive their Patient Representative pin.



# Network 4 Patient Representative Support

## Path to Engagement

- **Patient Representatives Path to Patient Engagement at Dialysis Facility**
  - New: Initial Patient Representative Receives Patient Representative Handbook and is Training by Network Staff
  - Participates in 100% Dialysis Facility Activities
  - Participates in Quality Training; Then Attends Quality Meetings
  - Participate in Peer Mentoring Training; Then Participates in Peer Mentoring
  - Participates in Support Group Training; Then Leads Support Group
  - Participates in Executive Leadership Training; Then Attends Leadership Meetings
- **Patients Representative Path to Patient Engagement at Network 4**
  - Recognized as a Patient Subject Matter Expert (SME)
  - Member of the Patient Advisory Committee (PAC)
  - QIA Training ; Then Participates as a QIA Advisors
  - Joins CMS Network 4 COR Call
  - Active Member, on the Network 4 Boards (BOD, MRB or NC)
- **Patient Representative Path to Patient Engagement at CMS and National Level**
  - Participates in NCC NPFE LAN
  - Participates in National Work Groups
  - Participates in National CMS Meetings – both on the phone and in person



# Please Engage your Patients Representative Today!!

- Network 4 Goal for 2017:
  - All facilities will have at least **ONE** Patient Representative by 12/31/17
- Next Steps
  - Distribute the New 2017 Patient Representative Handbook
  - Distribute New 2017 Patient Representative Forms for your current reps and fax to the network office
  - Consider use of the new Network 4 Sample agenda for Quality Meetings to incorporate Patient Representative voice in your facility activities

# Questions?