Welcome to the ESRD Network of New York Network Council Meeting

The webinar will begin momentarily!
IPRO ESRD Network of New York Network Council Meeting

January 9, 2018
Welcome/Opening Remarks
Sue Caponi, Executive Director
CEO, IPRO ESRD Program
Reminders

• All phone lines will be muted
• There will be breaks for comments and Q & A
• You can submit questions via chat at any time
Meeting Agenda

• Overview of IPRO ESRD Network Program
• Emergency Management
• Review of 2018 Quality Improvement Activities
  − Intervention Commonalities
  − Patient Safety – Health Associated Infections
  − Improve Transplant Coordination
  − Supporting Gainful Employment in ESRD Patients
• Patient Engagement and Patient Experience of Care
• Information Management
• Closing Remarks & Next Steps
Island Peer Review Organization

• Founded in 1984, IPRO, a national independent, not-for-profit organization, holds contracts with federal, state and local government agencies as well as private-sector clients nationwide.

• Provides a full spectrum of healthcare assessment and improvement services that enhance healthcare quality to achieve better patient outcomes and foster more efficient use of resources.

• Headquartered in Lake Success, NY and also has offices in Albany, NY, Hamden, CT, Camp Hill, PA, Morrisville, NC, Princeton, NJ, San Francisco, CA and now, Beachwood, Ohio.
## IPRO ESRD Network 2 Service Area by Facility Ownership

<table>
<thead>
<tr>
<th>Ownership</th>
<th>ESRD Patient Census</th>
<th># of Dialysis Facilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>FKC</td>
<td>6106</td>
<td>57</td>
</tr>
<tr>
<td>DaVita</td>
<td>6575</td>
<td>61</td>
</tr>
<tr>
<td>Dialysis Clinic Inc.</td>
<td>1508</td>
<td>14</td>
</tr>
<tr>
<td>Independents</td>
<td>20269</td>
<td>149</td>
</tr>
<tr>
<td>Other</td>
<td>449</td>
<td>10</td>
</tr>
</tbody>
</table>
ESRD Network Role/Responsibilities

• Improve quality of care for ESRD patients
• Encourage patient engagement
• Support ESRD data systems and data collection
• Provide technical assistance to ESRD patients and providers
• Evaluate and resolve patient grievances
• Support emergency preparedness and disaster response
CMS Priorities

HHS Priorities are interpreted for purposes of this SOW as:

• Priority 1: Reform, Strengthen, and Modernize the Nation’s Health Care System
• Priority 2: Protect the Health of Americans Where They Live, Learn, Work, and Play
• Priority 3: Strengthen the Economic and Social Well-Being of Americans Across the Lifespan
• Priority 4: Foster Sound, Sustained Advances in the Sciences
• Priority 5: Promote Effective and Efficient Management and Stewardship
CMS Goals

CMS Goals are interpreted for purposes of the SOW as:

- **Goal 1**: Empower patients and doctors to make decisions about their health care
- **Goal 2**: Usher in a new era of state flexibility and local leadership
- **Goal 3**: Support innovative approaches to improve quality, accessibility, and affordability
- **Goal 4**: Improve the CMS customer experience
ESRD Statement Of Work Requirements

• Decrease to 4 QIAs / Increased number of facilities in each QIA
• 2023 AIM Goals Established
• Emphasis on Patient Engagement
• Use of interventions aimed at reducing disparities.
• Focus on innovative approaches and rapid cycle improvement that incorporates boundariliness, unconditional teamwork, are customer-focused and sustainable
• Collaborative meetings with FKC and DaVita to strategize on facility selection, intervention design, and data collection
Emergency Management
Anna Bennett, Quality Improvement Coordinator and Emergency Manager
NW2 2017 Emergency Events

<table>
<thead>
<tr>
<th></th>
<th># of Events</th>
<th>Closed Days</th>
<th>Altered Schedule</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Weather</strong></td>
<td>5</td>
<td>177</td>
<td>66</td>
<td>Winter Storms (3 multiday events):</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>- Helena (No Interruptions)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>- Niko (45 fac)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>- Stella (205 fac)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Tornados (1): Erie and Allagash Counties (No Interruptions)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Extreme Heat (1): (No Interruptions)</td>
</tr>
<tr>
<td><strong>Power, Water, &amp; Structural</strong></td>
<td>12</td>
<td>34</td>
<td>16</td>
<td>4 Power Outage (3/9/17 Rochester Wind Storm 9 facilities impacted)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>7 Water Issues (ROs, Endotoxins, Water Main Break, water pressure issues)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Newburgh Structural (31 Days Closed)</td>
</tr>
<tr>
<td><strong>Other</strong></td>
<td>2</td>
<td>4</td>
<td>0</td>
<td>FMC Work Action NYC/Westchester (4 Facilities)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>DaVita/Baxter Saline Shortage (No Interruptions)</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td>19</td>
<td>216</td>
<td>82</td>
<td></td>
</tr>
</tbody>
</table>
## NW2 Emergency Management

<table>
<thead>
<tr>
<th>Type</th>
<th>#</th>
<th>Facilities Participated/Details</th>
</tr>
</thead>
</table>
| **Alerts/Notices**               | 51  | - 33 (NYC Training NorthHelp)  
- 7 (Advisory Alerts)  
- 11 (KCER Recall/Alerts)       |
| **Coalition/OEM/ESF8 Meetings**  | 38  | - 25 KCER Meetings (National)  
- 1 HealthCare Ready (National)  
- 2 NY State (MARO & HEPC)  
- 4 NorthHelp  
- 6 NYC OEM/ESF8               |
| **Emergency Drills**             | 2   | - 27 Facilities NorthHelp Drill (NYC)  
- KCER Operation NExUS (National All NW/CMS) |
| **Totals**                       | 91  | (200+ FTE Hours)                                                                 |
Emergency Management – Things to know

Facility Reporting/Tracking

- Report Facility Status (Open/Closed/Altered)
- Report patient access to care
- Contact the Network to assist with local OEM coordination efforts

Prepare patients for an Emergency

- Be prepared patient worksheet
- Snowstorm Health: Tips for people on Dialysis

Prepare your facility for an Emergency

- Technical Assistance to Facilities to develop feasible, comprehensive emergency/disaster plans
Questions or Comments?
Improving Quality of Care for ESRD Patients

Jeanine Pilgrim, Quality Improvement Director
Anna Bennett, Quality Improvement Coordinator and Emergency Manager
John Cocchieri, Quality Improvement Support Coordinator
Quality Improvement Activities
Intervention Commonalities
Jeanine Pilgrim, Quality Improvement Director
2018 ESRD Statement Of Work

- Contract period begins 12/01/2017
- Change from 8 QIAs to 4 QIAs
- Increase the number of facilities in each QIA (10-50% of facilities in the Network)
- Emphasis on Patient Engagement
- National Learning and Action Networks (LANs) for each project
Participate in NCC National Learning and Action Networks (QIA Specific)

• CMS has established a LAN for each QIA, coordinated by ESRD NCC
  • Create a diverse forum (patients, organizations, and stakeholders) for addressing problematic issues
  • Utilize measurable and clear goals with proven effective practices to drive decision making
  • Set the pace and tone for goal related activities and to create an open sharing of practice and data
  • Initiate change methodology which rapidly tests small quality improvement changes specific to the area of work.
  • All Facilities are invited to participate in LAN events
Technician Training for Patient Coach Program

- Hemodialysis Technicians CEU Accredited program
- Effective communication strategies
- Coaching techniques
- Promoting active patient involvement in care
- Discussing transplant and Home Dialysis as modality options
- Helping patients plan for a vascular access
- Reducing Blood Stream Infections
Peer Mentorship: A proven approach on kidney care health outcomes

• Structured patient-centered training curriculum
• Network-hosted webinars and provided welcome kits for facilities
• Available in multiple formats, including both audio and visual components
• Supplemental resource toolkits developed with patients, for patients
• Patient developed role-playing scenarios to support patients practice mentoring
How Patient Subject Matter Experts (SME) Support QIA Projects

• Emphasis engaging patients to be involved in the development of QIA interventions
• Focus on encouraging facilities to include patients in their QIAs
• SMEs are asked to:
  • Consider becoming a Peer Mentor
  • Joining the Network Patient Advisory Committee
  • Sharing their ESRD journey story with others
  • Attend meetings led by Network project needs
  • Attend NCC led LANs based on their chosen project of interest
  • Participate in national meetings and technical expert panels
Questions or Comments?
Patient Safety:
Healthcare-Associated Infections

Jeanine Pilgrim, Quality Improvement Director
Reduce Rates of BSIs and VA LTCs

**Purpose:** Reduce Rates of BSIs and VA LTCs as well as enrollment in HIE

Reduce the rate of blood stream infections by:

- Supporting NHSN by assisting facility enrollment, completion of NHSN annual training and quarterly data checks
- Participating in the ESRD NCC HAI LAN, and
- Assisting dialysis facilities in the implementation of the CDC Core Interventions

**Selection Criteria**

- 50% of Facilities in the NW, include facilities with highest BSI rates
- BSI cohort – 20% of facilities with the highest BSI rates
- LTC rate >15% from 50% of facilities with the highest BSI rates

**Goals**

- BSI – 20% relative reduction from the 20% highest BSIs in the cohort
- LTC – 2 percentage points reduction from data available in Oct (July data)
- Assist at least 20% of facilities in the pool of 50% facilities to join a HIE
Interventions

- RCA using 5 Why Approach
- CDC Making Dialysis Safer Coalition
- Peer Mentorship Program
- Core Interventions for Dialysis BSI Prevention
- NCC HAI LAN
- Discuss infection control at QAPI meetings
- Share best practices/evidence based
Improve Transplant Coordination

Jeanine Pilgrim, Quality Improvement Director
Increase Rates of Patients on a Transplant Waitlist

Purpose:
- Promote early referral to transplant
- Improve referral patterns by addressing barriers to the steps of waitlist

National Goal:
- By 2023 increase the percentage of ESRD Patients on the transplant waitlist to 30% from the 2016 national average of 18.5%

Criteria:
- Identify 30% of dialysis facilities to participate

Goal:
- 10 percentage point increase of patients placed on the waitlist for transplant by September 30, 2018
7 Steps Leading to Receiving a Transplant

1. Patient suitability for transplant
2. Patient interest in transplant,
3. Referral call to transplant center
4. First visit to transplant center
5. Transplant center work-up
6. Successful transplant candidate
7. On waiting list or evaluate potential living donor
Interventions

- Transplant referral process and center criteria
- Kidney allocation system
- Patient self-referral per transplant facility
- Tracking and reporting the 7 steps leading to a transplant
- Patient SME’s and/or family/caregivers included at facility level
Promote Appropriate Home Dialysis

Anna Bennett, Quality Improvement Coordinator and Emergency Manager
Increase Rates of Patients Dialyzing at Home

National Goal:
• By 2023, increase the number of ESRD patients dialyzing at home to 16% from the 2016 national average of 12%

Purpose:
• To promote referral to home dialysis modalities,
• Identify and mitigate the barriers to timely referral, and
• determine the steps to improve referral patterns

Criteria:
• Identify 30% of dialysis facilities to participate

Network Goal:
• 10 percentage point increase of patients started on home dialysis training
7 Steps Leading To Home Dialysis Utilization

1. Patient interest in home dialysis
2. Educational session to determine the patient’s preference of home modality
3. Patient suitability for home modality
4. Assessment for appropriate access placement
5. Placement of appropriate access
6. Patient accepted for home modality training
7. Patient begins home modality training
Interventions to increase awareness and education on home modality options

• Incorporating the process steps into patient education, facility practice and the facility QAPI process
• Development and implementation of Home Dialysis Peer Mentorship Module
• Development and implementation of Home Therapy Navigator Module
• Tracking patients at each stage of the 7 steps and monitoring that patients are being moved to the next step
• Utilization of the Home Dialysis Toolkit
Supporting Gainful Employment in ESRD Patients
Erin Baumann, Patient Services Director
Support Gainful Employment of ESRD Patients

Purpose:

- Assist ESRD patients with seeking gainful employment and/or returning to work
- Collaboration with Employment Network (EN) and/or State Vocational Rehabilitation (VR)

Criteria:

- 10% of dialysis facilities in the Network service area (72 Facilities)
- Patients 18-54

Measures:

- Baseline: October 2016 – June 2017 / Re-measure: September 30, 2018

Goal:

- 5 percentage point improvement of patients referred to an EN and/or a VR
- 2 percentage point improvement of patients utilizing the services of EN and/or a VR
- Demonstrate a decrease in the disparity gap
Interventions

Provider

• Assessment of current referral process in the dialysis facility
• Evaluate changes in life events that could change receptiveness to vocational rehabilitation

Patient

• Increase awareness of vocational rehab and change dialysis facility culture
• Support patients with resources and goal setting tools

Employment Network and Vocational Rehab

• Collaborate with vocational rehabilitation resources to advocate for the needs of ESRD patients
Questions or Comments?
Patient Engagement and Patient Experience of Care

Erin Baumann, Patient Services Director

Nigisty Lulu, Community Outreach Coordinator
Patient Services Updated Phone Support

• In 2017, Patient Services updated the phone system to support the ESRD community

New Phone Tree:

• Case Consultation: (516) 209 – 5624
  • To discuss cases with Patient Services

• Access to Care: (516) 209 – 5622
  • To discuss IVDs or any patients at risk
Grievances and the Networks Role

• Responsible for identifying ESRD providers that are “not cooperating toward meeting Network goals and assisting [them] in developing appropriate plans for correction....”

• Network Roles
  o Facilitator
  o Expert Investigator
  o Educator
  o Quality Improvement Specialist
  o Advocate
  o Referral Source
Grievance Management and Best Practices

• Development/Support Robust Grievance Process
• Foster environment that encourages patients, family members, caregivers to voice their opinions
• Encourage Positive Resolution focused outcomes
• Establish an Anonymous Grievance Process
• Grievance Educational Materials
  o 2018 New Grievance Poster
  o Grievance Toolkit
Patient Advisory Committee

PAC Member

• ESRD Patient or Care Partner interested in learning more about ESRD

PAC Representative

• Nominated by Facility Social Worker
• Complete Participation Agreement
• Complete base Peer Mentorship Modules

PAC Chair

• Served in the role of a Patient Representative for one year
• Complete Participation and Confidentiality Agreement
• Complete all 4 Peer Mentorship Modules
Questions or Comments?
Information Management

Ariana Lucido,  
Information Management Director

Sharon Lamb,  
Sr. Data Coordinator
CMS CROWNWeb Data Management Guidelines

- Standardized data management processes
- Separated by tasks and tiers
- Three Tasks
  - Data Monitoring (Data quality - accuracy, timeliness, etc.)
  - Data Measuring (Data comparison to a criteria)
  - Data Managing (Data collection)
- Three Tiers
  - Tier 1: Facilities – Enter data directly into CROWNWeb; update facility personnel with changes and, at least, quarterly
  - Tier 2: Networks – Provide technical data reporting assistance
  - Tier 3: QualityNet Help Desk – Support CMS data reporting needs; CROWNWeb locked accounts, EQRS Facility Dashboard, changes to submitted forms, patient merge requests, etc.
CROWNWeb Data Quality Goals

- CMS issued preliminary CROWNWeb Data Quality Goals for 2017-2018
- Established key indicators and goals are in line with the aforementioned Data Management Guidelines and will be used to assess facility data submission/performance

<table>
<thead>
<tr>
<th>Area of Focus</th>
<th>Target Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admission within 5 Days of Date of First Dialysis</td>
<td>90%</td>
</tr>
<tr>
<td>Initial CMS-2728 within 10 Days (New)</td>
<td>50%</td>
</tr>
<tr>
<td>Initial CMS-2728 w/in 45 Days (Due)</td>
<td>90%</td>
</tr>
<tr>
<td>CMS-2728 greater than 45 Days (Overdue)</td>
<td>0</td>
</tr>
<tr>
<td>CMS-2746 within 14 Days</td>
<td>90%</td>
</tr>
<tr>
<td>System Discharges / GAP Patients</td>
<td>0</td>
</tr>
<tr>
<td>Notifications &amp; Accretions accepted/rejected w/in 15 days</td>
<td>90%</td>
</tr>
<tr>
<td>PART every 30 days</td>
<td>100%</td>
</tr>
</tbody>
</table>
The Network uses Freshdesk as a platform for resolving and tracking requests for data assistance from facilities in our region.

This tool also allows the Network to maintain an Online Portal and Knowledge Base for facilities to utilize:

- Facilities can review articles related to different support topics and, if they are unable to find an answer to their question, submit a request for data assistance directly from the website.
- Facilities can also email the Network at a dedicated email address for Freshdesk data support: NW6Help@iproesrdnetwork.freshdesk.com

Freshdesk has allowed the Network to implement efficiencies within the Data Department by streamlining support to facilities and automating the majority of support request entry and tracking.
A peek at the portal…
Questions or Comments?
Closing Remarks/Next Steps

Sue Caponi, Executive Director
CEO, IPRO ESRD Program
Facility Responsibilities

• Participate in Network activities
  - Quality Improvement Activities
  - National Learning and Action Network
  - Patient and Family Engagement (PAC – Peer Mentorship)
  - Training Opportunities
  - Keep personnel information updated in CROWNWeb

• Communicate with the ESRD Network
  - Respond to inquiries and requests for information
  - Report impacts to your facility or patients during an emergency
  - Contact the Network to discuss patient issues in advance of considering a discharge
  - Share your successes/challenges/barriers
Important Dates to Remember:

- **QIA Kick-Off Webinar Meetings**
  - HAI – Thursday, January 18\(^{th}\) 2:00-3:00PM
  - Transplant – Thursday, January 25\(^{th}\) 2:00-3:00PM
  - Home Modalities – Tuesday, January 30\(^{th}\) 2:00-3:00PM

- **Root Cause Analysis Training**
  - Thursday, January 17\(^{th}\) 1:00-2:00PM

- **Network Annual Meeting**
  - Thursday May 17th, Garden City Hotel
Stay in Touch!

- Subscribe to receiving Provider Insider, Emergency Messaging, Kidney Chronicles, and PAC Speaks
  - http://tinyurl.com/IPROESRD
- Social Media Platforms
  - https://www.facebook.com/IPROESRDProgram
- Website
  - http://network2.esrd.ipro.org/
Questions or Comments?
ESRD Network of New York (Network 2) Staff

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Thank You!

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