Welcome/Opening Remarks

Sue Caponi, CEO ESRD Program, NW2 Executive Director
Housekeeping Reminders

• This WebEx will be recorded and slides will be made available on the Network Website https://network2.esrd.ipro.org/events/
• All lines have been muted to eliminate background noise
• To ask a private question use the Chat section in the bottom right corner of your screen sending to All Panelists
• To ask a question for the answer to be shared with all Attendees or Privately, use the Q&A section in the bottom right corner of your screen
Meeting Agenda

• Overview of IPRO ESRD Network Program
• Patient Engagement and Patient Experience of Care
• Review of 2019 Quality Improvement Activities
• Emergency Management Updates
• Information Management Reminders
Overview of IPRO ESRD Network Program
Island Peer Review Organization (IPRO)

• 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 Beachwood, Ohio.
Mission Statement

The Mission of the IPRO End Stage Renal Disease (ESRD) Network Program is to promote health care for all ESRD patients that is safe, effective, efficient, patient-centered, timely, and equitable.
IPRO ESRD Network Service Areas
(2017 Network Annual Reports)

Network 1
CT, MA, ME, NH, RI, VT
- Patients: 14,669
- Facilities: 191
- Transplant: 15

Network 2
NY
- Patients: 29,851
- Facilities: 299
- Transplant: 13

Network 6
NC, SC, GA
- Patients: 49,148
- Facilities: 730
- Transplant: 10

Network 9
OH, KY, IN
- Patients: 33,556
- Facilities: 611
- Transplant: 12

IPRO ESRD Program
- 127,224 ESRD Patients
- 1,831 Dialysis Facilities
- 47 Transplant Centers
### NW2 Facility Breakdown

<table>
<thead>
<tr>
<th>Ownership</th>
<th>ESRD Patient Census</th>
<th># of Dialysis Facilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>FKC</td>
<td>7,013</td>
<td>67</td>
</tr>
<tr>
<td>DaVita</td>
<td>6,548</td>
<td>70</td>
</tr>
<tr>
<td>Dialysis Clinic Inc.</td>
<td>2,791</td>
<td>22</td>
</tr>
<tr>
<td>Independents</td>
<td>13,962</td>
<td>144</td>
</tr>
<tr>
<td>Veterans Administration</td>
<td>287</td>
<td>6</td>
</tr>
<tr>
<td><strong>Totals:</strong></td>
<td><strong>30,601</strong></td>
<td><strong>309</strong></td>
</tr>
</tbody>
</table>
ESRD Network Role/Responsibilities

- Improve quality of care for ESRD patients
- Promote patient engagement / patient experience of care
- Support ESRD data systems and data collection, analysis and monitoring for improvement
- Provide technical assistance to ESRD patients and providers
- Support emergency preparedness and disaster response
CMS National Priorities and ESRD Program Goals

• **Priority 1:** Opioid Crisis
• **Priority 2:** Health Insurance Reform
• **Priority 3:** Drug Pricing
• **Priority 4:** Value-Based Care

**Goal 1:** Empower patients and doctors to make decisions about their healthcare

**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
Patient Engagement and Patient Experience of Care

Erin Baumann, Patient Services Director
Grievance Management and Best Practices

• Create an anonymous grievance process
• Provide patients, caregivers and families ability to provide concerns
  - QAPI
  - Care planning
  - Support groups
• ESRD Network Grievance Poster
  - Displayed in every dialysis facility
• Additional Resources
  - Dialysis Patient Grievance Toolkit
  - Dialysis Patient Depression Toolkit
Support for Access to Care Concerns

Reasons for Access to Care Cases
• At-Risk of Involuntary Discharge
• Immediate Involuntary Discharge
• Involuntary Discharge
• Involuntary Transfer
• Failure to Place
• Lost to Follow Up

Provider Interventions
• Education on Conditions for Coverage Guidelines
• IVD Process Guidelines
• Communication Tips
• Patient Care Conference
• Behavioral Contract
• Crisis management
• Mental health resources
Non-Compliance

• Patients who do not come to treatment on a regular basis or shorten their treatments
• Facilities provide education to the patient on the risks of noncompliance
• Facilities work to find the reason for the non compliance and try and mitigate
• CFC do not allow discharges of patients who are non-compliant
Lost to Follow Up

- Efforts to be made for at least 30 days time
- Patients cannot be discharged for not coming to treatment
- After 30 days time – Lost to Follow Up
- Facilities expected to treat this patient once found
Available Resources

• Involuntary Discharge Resources
  – Threats are Not Okay Here Poster
  – Involuntary Discharge Guide

• Grievance Management Process Resources
  – Dialysis Patient Grievance Toolkit

• Improving Communication Resources for staff and patients
  – Applying Net Forward Energy in Patient Care Webinar
  – Relationship Centered Communication Webinar

• Psychosocial Support Resources
  – Dialysis Patient Depression Toolkit
  – Depression and Dialysis: Removing the Stigma and Strengthening our Mental Health Webinar
  – Managing Patients’ Psychological Challenges at Dialysis Webinar

• Social Support Resources
  – Patient Peer Mentorship Toolkit
Contact Patient Services

- General Information: (516) 209–5778
- Patient Line: (800) 238–3773
- Patient Services: (516) 209–5624
- Priority Line: (516) 209–5622
Patient Advisory Committee (PAC)

- **PAC Member**
  - ESRD Patient or Care Partner interested in learning more about ESRD
- **Patient Facility Representative**
  - Nominated by Facility Social Worker
  - Participate in Facility QI Activities
- **PAC Advisor**
  - Serve as Patient SME for ESRD Network, NCC, and other activities
  - Support PAC Representatives locally
Welcome to IPRO ESRD Network Program E-University

This site provides End Stage Renal Disease training opportunities for patients and professionals that align with the ESRD Network and CMS quality improvement goals. Once you have created a user account through the Log In link, you will be able to access and take training courses, download supporting materials, and obtain a certificate of completion.

If you require assistance, create a support ticket here: http://help.esrd.ipro.org/support/home, select "New support ticket", complete the form and select "Submit". Please reference E-University in the subject line of the form.

https://esrdlms.ipro.org/
Questions or Comments?
Quality Improvement Activities (QIAs)

Jeanine Pilgrim, Quality Improvement Director,
Network Assistant Director
Quality Improvement Team

Jeanine Pilgrim  
Quality Improvement  
Director and Network  
Assistant Director

Anna Bennett  
Quality Improvement  
Coordinator and  
Emergency Manager

Novlet Russel-English  
Quality Improvement  
Coordinator Nurse

John Cocchieri  
Quality Improvement  
Data Coordinator
Intervention Commonalities for 2019

• Focus on Patient and Family Centered Care
  – Incorporating patients into QAPI/Patient Support Groups
  – Interventions aimed at reducing disparities

• ESRD National Coordinating Center (NCC) Learning and Action Network (LAN) Webinars
  – Everyone is invited!
  – 1 QIA facility staff member mandatory participation
  – 1 FREE CEU provided per call upon registration

• Network-developed Patient and Professional Training Programs

• Virtual Collaborative Meetings
  – Interdisciplinary collaborative approach
  – Share best practices, review goal progress, provide coaching support
  – Focus on innovative approaches and rapid cycle improvement that incorporates boundariliness, unconditional teamwork, are customer-focused and sustainable
Patient Safety QIAs

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

Purpose:
- Reduce Rates of Blood Stream Infections and Long Term Catheters
- Supporting facility enrollment in NHSN, completion of NHSN annual training and quarterly data checks
- Assisting dialysis facilities in the implementation of the CDC Core Interventions

Facility Selection Criteria:
- 50% of Facilities in the Network, include facilities with highest BSI rates
- LTC rate >15% from 50% of facilities with the highest BSI rates

Measurement Goals:
- BSI – 20% relative reduction from the selected facilities 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 Health Information Exchange (HIE)
BSI Reduction: RCA Findings Drive Interventions

Facilities reported lack of patient education
- Facility Educational resource mailings
- Education Stations

Facilities reported poor patient Hand Hygiene / poor hygiene
- Clean Hands Count for patients and visitors factsheet and brochure
- Patient infection prevention pocket guide
- Making dialysis safer coalition conversation starter

Facilities reported infections were staff related
- Use of CDC Core Interventions
- CDC training modules, Network in-services
LTC Reduction: RCA Findings Drive Interventions

Facilities reported lack of patient education
  • PSME Webinar for patient engagement
  • Mitigating patient fears/apprehensions

Facilities reported appointment delays
  • Vascular Access Reduction Toolkit, Monthly Catheter Tracking Tool

Facilities reported that patients refused a different access type
  • ESRD Forum Refusal Form and Tools
NHSN: National Healthcare Safety Network

• Healthcare Associated Infection (HAIS) tracking system
• Dialysis Event Surveillance training is required of all hemodialysis facilities
• Monthly NHSN reporting of data is needed to meet QIP requirements
• Complete NHSN Training and Network Attestation Survey
Questions or Comments?
Home Therapies and Transplant QIAs

Anna Bennett, Quality Improvement Coordinator
2019 Requirements: Home Therapies & Transplant QIAs

**Home Therapies 5 Year National Goal:**
- By 2023, increase the % of ESRD patients dialyzing at home to 16% from the 2016 national average of 12%

**Purpose:**
- Promote referral to home dialysis modalities,
- Identify and mitigate the barriers to timely referral.

**Criteria:** Identify 30% (92) of dialysis facilities to participate in each QIA. (Baseline: 5 year average trend Oct 2013-Sept 2018)

**Goals:** By September 30, 2019 2% point increase in the natural trend of:
- # of patients on waitlist for transplant
- # of patients utilizing home therapies

**Transplant 5 Year National Goal:**
- By 2023 increase the % of ESRD Patients on the transplant waitlist to 30% from the 2016 national average of 18.5%

**Purpose:**
- Promote early referral to transplant
- Improve referral patterns by addressing barriers to the steps of waitlist
2018 Home Therapies and Transplant QIA Data

Patients Starting Home Training in CROWNWeb

Patients on the UNOS Transplant Waitlist

Data Source: CROWNWeb
6 Steps Leading to Receiving a Transplant

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

• This year eligibility to transplant will not be accounted for, goal has been adjusted to 2% increase from total patients.

• Patients on the waitlist PRIOR to January 1, 2019 will not be counted in the rate, only NEW patients to the UNOS waitlist from Jan-Sept 2019 will count towards goal.
7 Steps Leading To Home Dialysis Utilization

1) Patient interest in home dialysis (after assisting the patient to determine modality options that fit the patient’s lifestyle),
2) Educational session about home modality,
3) Patient suitability for home modality determined by a nephrologist with expertise in home dialysis therapy,
4) Assessment for appropriate access placement,
5) Placement of appropriate access,
6) Patient accepted for home modality training,
7) Patient begins home modality training.
2019 Intervention Strategies

Facility Self Assessment/QAPI Benchmarking
- Root Cause Analysis
- Staff and patient knowledge Assessment
- Monthly “Report Card”

Specific Interventions
- ESRD NCC Best Practice Interventions
- Network Toolkit
- Kickoff Webinar (January)
- Best Practices Webinar

Patient Engagement
- Education Station Contest
- Collect Patient Feedback
- Patient Interest Checklist
- Family/Care Partner Liaison

Interdisciplinary Team Approach
- ESRD NCC LAN Calls
- Monthly QIA Newsletter
- Cohorts/Shared resources
Questions or Comments?
Support Gainful Employment QIA

Anna Bennett, Quality Improvement Coordinator
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 (31 Facilities)
  - Patients Ages 18-54

• **Measures:**

• **Goals:**
  - 10% point improvement of patients referred to an EN and/or a VR
  - 5% point improvement of patients utilizing the services of EN and/or a VR
  - Demonstrate a decrease in the disparity gap
2018 Support Gainful Employment QIA Data

Patients Referred to VR/EN

<table>
<thead>
<tr>
<th>Month</th>
<th>% Referred</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baseline</td>
<td>3.895%</td>
</tr>
<tr>
<td>Goal</td>
<td>8.850%</td>
</tr>
<tr>
<td>Dec-2017</td>
<td>5.313%</td>
</tr>
<tr>
<td>Jan-2018</td>
<td>5.694%</td>
</tr>
<tr>
<td>Feb-2018</td>
<td>9.179%</td>
</tr>
<tr>
<td>Mar-2018</td>
<td>8.989%</td>
</tr>
<tr>
<td>Apr-2018</td>
<td>9.014%</td>
</tr>
<tr>
<td>May-2018</td>
<td>9.312%</td>
</tr>
<tr>
<td>Jun-2018</td>
<td>9.038%</td>
</tr>
<tr>
<td>Jul-2018</td>
<td>12.442%</td>
</tr>
<tr>
<td>Aug-2018</td>
<td></td>
</tr>
<tr>
<td>Sep-2018</td>
<td></td>
</tr>
</tbody>
</table>

Patients Receiving VR/EN Services

<table>
<thead>
<tr>
<th>Month</th>
<th>% Receiving</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baseline</td>
<td>1.634%</td>
</tr>
<tr>
<td>Goal</td>
<td>3.634%</td>
</tr>
<tr>
<td>Dec-2017</td>
<td>1.499%</td>
</tr>
<tr>
<td>Jan-2018</td>
<td>1.528%</td>
</tr>
<tr>
<td>Feb-2018</td>
<td>0.974%</td>
</tr>
<tr>
<td>Mar-2018</td>
<td>1.264%</td>
</tr>
<tr>
<td>Apr-2018</td>
<td>1.408%</td>
</tr>
<tr>
<td>May-2018</td>
<td>1.433%</td>
</tr>
<tr>
<td>Jun-2018</td>
<td>1.458%</td>
</tr>
<tr>
<td>Jul-2018</td>
<td></td>
</tr>
<tr>
<td>Aug-2018</td>
<td></td>
</tr>
<tr>
<td>Sep-2018</td>
<td>1.866%</td>
</tr>
</tbody>
</table>

Data Source: CROWNWeb

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2019 Intervention Strategies

**Facility Self Assessment/QAPI Benchmarking**
- Root Cause Analysis
- Staff and patient knowledge Assessment
- Monthly “Report Card”

**Specific Interventions**
- ESRD NCC Best Practice Interventions
- Network Toolkit
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- Best Practices Webinar

**Patient Engagement**
- Education Station Contest
- Collect Patient Feedback
- Patient Interest Checklist
- VR/EN Liaison

**Interdisciplinary Team Approach**
- ESRD NCC LAN Calls
- Monthly QIA Newsletter
- Cohorts/Shared resources
Emergency Management
Anna Bennett, Quality Improvement Coordinator
2018: Facility Lessons Learned

- Establish plans / relationships with local emergency management (OEMS)
- Join your local Healthcare Emergency Preparedness Coalition
- Maintaining service for as long as possible prior to events that require evacuation
- Data Management - updated contact, address, and emergency contacts
- Patient Communication
  - Clear instructions on who to contact in the event of an emergency
Questions or Comments?
Information Management

Jaya Bhargava
Regional Operations Director

Ben Williams
Data Analyst

Sharon Lamb
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 CROWNWeb Data Quality Goals
- Established key indicators and goals align with Data Management Guidelines
- Used to assess facility data submission and performance

CROWNWeb Key Indicators & Goals

<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; Acretions accepted/rejected w/in 15 days</td>
<td>90%</td>
</tr>
<tr>
<td>PART every 30 days</td>
<td>100%</td>
</tr>
</tbody>
</table>
CROWNWeb Data Reports from Network

• Review reports and submit missing data in CROWNWeb

• All data submissions are time sensitive but highest priority with immediate action required are for:
  - Missing Clinical Data reports – clinical month closes and cannot be changed
  - Facility Personnel Report – ensures the most current contact information is available for your facility

• Your CROWNWeb Data contacts receive reports in these areas on a regular basis.

NEVER send PHI or PII via email to the Network
CROWNWeb Facility Personnel

- Monthly your CROWNWeb Data contact receives report
- Review and ensure Facility Personnel in CROWNWeb is complete and accurate

### ESRD NETWORK CROWNWeb Contact List

**Dialysis Center 123**

#### Why is it important to keep your CROWNWeb contacts up to date?

The Network relies on accurate facility personnel contact information including e-mail address and phone number to support the distribution of critical information in an efficient and cost effective way. Information distributed to facilities through email includes:

- Changes to CMS policy
- Critical resources during an emergency
- Activities related to the QIP and DFC
- Quality improvement activities

CROWNWeb is the Network’s source for facility personnel contact information. CROWNWeb Data Management Guidelines require that key facility personnel are added and/or removed within 5 business days of staff changes.

At minimum, facilities should list and maintain the key personnel outlined in the table to the right.

### Table: ESRD NETWORK CROWNWeb Contact List

<table>
<thead>
<tr>
<th>Job Description</th>
<th>Job Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility Medical Director</td>
<td>FMD</td>
</tr>
<tr>
<td>Facility Nephrologist</td>
<td>FNPH</td>
</tr>
<tr>
<td>Facility Administrator</td>
<td>FADM</td>
</tr>
<tr>
<td>Facility Manager</td>
<td></td>
</tr>
<tr>
<td>Facility Head Nurse/Nurse Supervisor</td>
<td>FHNNS</td>
</tr>
<tr>
<td>Facility Social Worker</td>
<td>FSW</td>
</tr>
<tr>
<td>Facility Dietitian</td>
<td>FDIE</td>
</tr>
<tr>
<td>Disaster Contact</td>
<td></td>
</tr>
<tr>
<td>Disaster Contact Back Up</td>
<td></td>
</tr>
<tr>
<td>Facility Data Contact</td>
<td>FDC</td>
</tr>
<tr>
<td>(CROWNWeb Data Entry Person)</td>
<td></td>
</tr>
</tbody>
</table>

*Home Dialysis Coordinator*

*If applicable

### Attached on the following page(s) is a list of contacts listed in your facility including their name, job type, email, phone number and the last date their personnel information was updated in CROWNWeb.

**If a personnel record is accurate and complete, saving the record will update the “Last Updated” field and will act as verification that the information is accurate.**

**If a personnel record has not been updated within the last year or a field is missing, the field is highlighted in yellow.**
IPRO ESRD Network Freshdesk Data Support

• Platform for resolving and tracking requests for data assistance from facilities in our region
• Online Portal and Knowledge Base for facilities to utilize
  – Review articles related to different support topics
  – Submit a request for data assistance directly from the website
  – Email the Network directly at a dedicated email address for Freshdesk data support.

Please send emails to: NW2Help@iproesrdnetwork.freshdesk.com
Questions or Comments?
Closing Remarks/Wrap-up

Jeanine Pilgrim, Quality Improvement Director, Network Assistant Director
Facility Responsibilities

• **Participate in Network Activities**
  - Implement Interventions for Quality Improvement Activities
  - Attend National Learning and Action Network Webinars
  - Participate in Training Opportunities
  - Support Patient and Family Engagement by identifying a Patient Facility Representative(s)
  - Incorporate patients into QAPI and Support Group Activities
  - 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 2019 Kick-off Meetings (Tentatively Scheduled)
  - **HAI**: Tuesday, January 8, 2019 /2:00-3:00 PM
  - **Transplant /Home Modalities**: Thursday, January 10, 2019 /2:00-3:00 PM
  - **Gainful Employment**: Tuesday, January 15, 2019 /2:00-3:00 PM
  - **LTC**: Thursday, January 17, 2019 /2:00-3:00 PM
Topics to include:

- ESRD Network Project Overview
- Transplant Coalition Activities
- Advanced Directives
- Managing Expectations
- Tips for the ESRD Diet
- QAPI Meeting Guidelines
- Quality Awards, and MORE!

Thursday, April 4, 2019
8:00 AM - 3:00 PM

Garden City Hotel
45 Seventh Street, Garden City, NY 11530

Breakfast and Lunch Included

Registration Fees: Early-Bird Special: $75 (12/12/18-2/28/19)
Regular Registration (After 2/28/19) $85.00
We need your feedback and suggestions! Please complete our Webinar Evaluation to share your thoughts and comments. We welcome and value your input!
ESRD Network of New York (Network 2) Staff

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Erin Baumann  
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Vacant  
Community Outreach Coordinator  
tbd@nw2.esrd.net

Sharon Lamb  
Data Coordinator  
slamb@nw2.esrd.net
Thank You!

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http://ipro.org