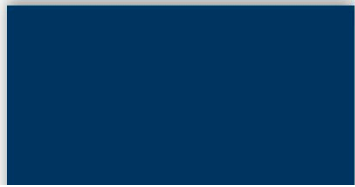


Network Council Call

Network 4- PA & DE

May 22, 23, 24, 2023



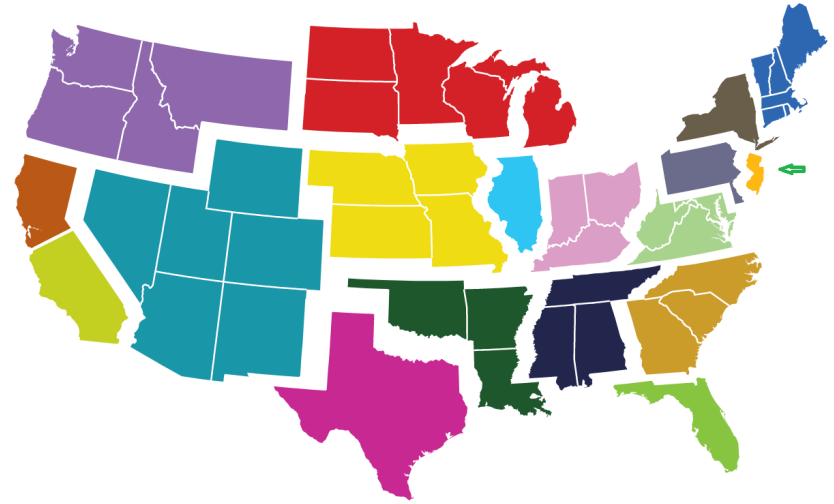
Objectives

- Role and Responsibilities of the ESRD Network
- CMS Priorities and Goals
- 2023-2024 QIA Initiatives and Resources



ESRD Network Program

- CMS uses two external groups to ensure dialysis facilities are providing quality, safe, and effective care to patients with kidney failure
 - State Survey Agencies
 - 18 ESRD Networks
- ESRD Networks are dedicated to:
 - Assisting dialysis facilities and kidney transplant centers in their efforts to provide quality care for patients with ESRD.
 - Support Achievement of CMS Goals



Overview of ESRD Network 4

State/Territory	Facility Count	Patient Count
Pennsylvania	332 Total 295 Outpatient Facilities 14 Home Only Facilities 4 Hospital based Facilities 3 VA Hospital 16 Transplant Hospitals	17,780 Total Dialysis Pts 15,004 In-Center HD 1,928 Home CCPD 233 Home CAPD 397 Home HD 218 SNF/LTC HD 13,002 Living TxP Pts
Delaware	36 Total 30 Outpatient Facilities 2 Hospital based Facilities 1 Pediatric Renal Facility 1 VA Hospital 2 Transplant Hospitals	1,856 Total Dialysis Pts 1,543 In-Center HD 188 Home CCPD 49 Home CAPD 76 Home HD 356 Living TxP Pts

*Data as of May 2, 2023



Facility Relationship with the ESRD Network

- Federal Regulation
- (i) Standard: Relationship with the ESRD network. The governing body receives and acts upon recommendations from the ESRD network. [Network 4 Goals and Recommendations](#)
 - The dialysis facility must cooperate with the ESRD network designated for its geographic area, in fulfilling the terms of the Network's current statement of work. Each facility must participate in ESRD network activities and pursue network goals. §494.180

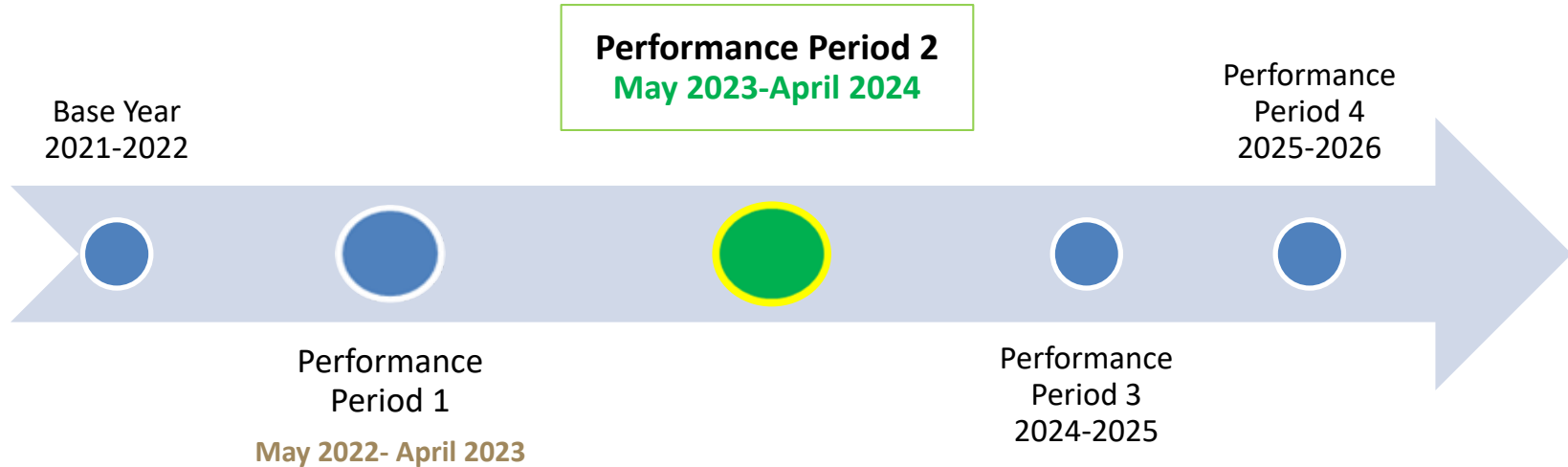


Facility Participation in QIAs

- CMS includes all facilities in all Network QIA measures.
- Tips for Success
 - Involve the interdisciplinary team.
 - Identify QIA topic leads.
 - Review Network QIAs in QAPI meetings.
 - Participate in Network led technical assistance activities.
 - Report key personnel changes



CMS Task Order Period June 2021- April 2026



Final Option Year 1 Outcomes & Kudos



Overview of OY1 Performance (May 2022 – Apr 2023)



Measure	Goal	Final
Treat Patients for Depression	29.4%	16.7%
Incident to Home Dialysis	838	765
Transition to Home Dialysis	1137	1068
Transplants Received	891	861
Add to Transplant Waitlist	1049	1062
Reduce Inpatient Admissions	<2.98/ 100 pm	3.00/ 100 pm
Reduce Readmissions	<10.62%	10.30%
Reduce ER Visits	<1.296/ 100 pm	1.312/ 100 pm
Patient Influenza Vaccination	85%	79.7%
Staff Influenza Vaccination	90%	46.4%

Measure	Goal	Final
Data Quality: 2728s	81.3%	79.6%
Data Quality: 2746s	65.7%	62.1%
Data Quality: Admissions	75.3%	73.2%
COVID-19 Staff Vaccination	100%	86.8%
COVID-19 Staff Vaccination Booster	100%	37.1%
COVID-19 Patient Vaccination	80%	77.1
COVID-19 Patient Vaccination Booster	80%	62%
Reduce COVID-19 Hospitalizations	<863	834


Red: Missed Goal
Green: Met Goal



Data Submission Facility Recognition


Facility Name	CCN	State	# 2728s OnTime	Total 2728s	% 2728s OnTime	# 2746s OnTime	Total 2746s	% 2746s OnTime	# Admissions OnTime	Total Admissions	% Admissions OnTime	Total Rate
FKC Mon Valley	392565	PA	12	12	100.0%	9	9	100.0%	20	20	100.0%	100.0%
DCI Punxsutawney	392681	PA	10	10	100.0%	4	4	100.0%	13	13	100.0%	100.0%
DCI Five Points	392698	PA	10	11	90.9%	5	5	100.0%	35	35	100.0%	98.0%
FKC Pittston	392621	PA	13	13	100.0%	13	13	100.0%	22	23	95.7%	98.0%
FKC Clairton	392576	PA	10	10	100.0%	7	8	87.5%	21	21	100.0%	97.4%
FKC Donora	392651	PA	18	18	100.0%	20	20	100.0%	29	31	93.5%	97.1%
FKC Hermitage	392546	PA	32	32	100.0%	14	16	87.5%	48	49	98.0%	96.9%
DaVita PDI Ebensburg	392686	PA	18	18	100.0%	15	16	93.8%	29	30	96.7%	96.9%
ARA Bucks County	392735	PA	19	19	100.0%	18	18	100.0%	25	27	92.6%	96.9%
FKC North Philipsburg	392747	PA	9	9	100.0%	6	6	100.0%	16	17	94.1%	96.9%
FKC Stroudsburg	392547	PA	17	17	100.0%	7	7	100.0%	29	31	93.5%	96.4%
ARA Northeast Philadelphia	392876	PA	16	16	100.0%	13	15	86.7%	23	23	100.0%	96.3%
DCI Chestnut Ridge Blairsville	392780	PA	8	9	88.9%	2	2	100.0%	15	15	100.0%	96.2%
FKC Cumberland County	392634	PA	13	14	92.9%	11	11	100.0%	24	25	96.0%	96.0%




Home Dialysis Facility Recognition




Facility Name	CCN	State	# Pts Start at Home	# New Starts	Direct to Home Rate
DaVita Montage	392811	PA	8	8	100.0%
AKC Hockessin	082523	DE	2	3	66.7%
FKC Temple Ontario	392605	PA	2	3	66.7%
DaVita Franklin Dialysis	392756	PA	8	12	66.7%
DaVita St Lukes at Home	392840	PA	10	15	66.7%
DaVita Coudersport	732510	PA	4	6	66.7%
FKC Riverside Park	082505	DE	11	18	61.1%
DaVita Riddle	392739	PA	18	30	60.0%
DCI Pittsburgh Oakland	392610	PA	16	27	59.3%
USRC Central York	392790	PA	7	12	58.3%
DaVita Monroeville	392752	PA	20	35	57.1%
DaVita Quentin Circle	392834	PA	4	7	57.1%
DaVita Harmarville	392800	PA	6	11	54.5%
Geisinger Health System	392300	PA	2	4	50.0%
DaVita Abington	392614	PA	16	32	50.0%
DaVita Suburban Campus	392803	PA	14	28	50.0%



Facility Name	CCN	State	# Pts Move to Home	# ICHD Pts	Transition to Home Rate
DaVita Lake Erie Home Dialysis	392796	PA	7	8	87.5%
DaVita Coudersport Home	732510	PA	1	2	50.0%
DaVita Bethel Park	392808	PA	4	12	33.3%
UPMC Presbyterian Renal Unit	392327	PA	2	7	28.6%
DaVita State College Dialysis	392789	PA	6	21	28.6%
DaVita St Luke's Tamaqua Dialysis	392708	PA	8	29	27.6%
DCI Chippewa	392622	PA	7	27	25.9%
DaVita Lehigh Valley Dialysis	392584	PA	10	39	25.6%
Home DS Services of Hershey	392841	PA	3	13	23.1%
Dialysis Care Center Lebanon	392896	PA	6	28	21.4%
DaVita Dunmore Dialysis	392723	PA	11	52	21.2%
USRC South York	392895	PA	6	29	20.7%
USRC Chambersburg	392648	PA	8	39	20.5%
DaVita Radnor Dialysis	392630	PA	9	44	20.5%
FKC Greensburg	392520	PA	10	49	20.4%




Transplantation Facility Recognition



Facility Name	# Pts	# Waitlisted	Waitlist Rate
Geisinger Health System	5	4	80.0%
St. Christopher's Hosp for Children	4	3	75.0%
DaVita Robinson HT at Home	20	8	40.0%
Kidney Center Home Therapies	14	5	35.7%
UPMC Children's Hosp of Pittsburgh	9	3	33.3%
DaVita Coudersport Home Training	6	2	33.3%
DaVita Belle Vernon	20	5	25.0%
Dialysis Care Center Lebanon	33	8	24.2%
Children's Hospital of Philadelphia	34	8	23.5%
DaVita St Lukes at Home	36	8	22.2%

Facility Name	# Pts	# Transplanted	Transplant Rate
Geisinger Health System	5	3	60.0%
FKC Temple Ontario	11	3	27.3%
Children's Hospital of Philadelphia	34	9	26.5%
FKC Freedom Center of Central PA	38	7	18.4%
ARA Woodhaven	74	13	17.6%
Alfred I. DuPont Hospital for Children	6	1	16.7%
Christiana Care Health System	6	1	16.7%
DaVita Radnor Dialysis	69	11	15.9%
DaVita Robinson HT at Home	20	3	15.0%
DaVita Thorn Run Dialysis	41	6	14.6%
Kidney Center Home Therapies	14	2	14.3%
DCI Shenango Valley	35	5	14.3%
FKC Greene County	14	2	14.3%
Albert Einstein Medical Center	15	2	13.3%



Patient Vaccinations - Facility Recognition



Facility Name	# Pts	# Vaccinated - Flu	Vax Rate
St. Christopher's Hospital for Children	4	4	100.0%
DaVita Paris Dialysis	25	25	100.0%
FKC Temple Ontario	11	11	100.0%
FKC Roxborough Dialysis	31	31	100.0%
The Kidney Center	1	1	100.0%
DaVita Paoli Park Dialysis	17	17	100.0%
FKC Pottsville	76	77	98.7%
FKC Fox Chase	48	49	98.0%
FKC Phoenixville	31	32	96.9%
FKC Shaler	29	30	96.7%
DaVita Market Street Dialysis	58	60	96.7%
DaVita NE Philadelphia Dialysis Center	54	56	96.4%
DaVita Franklin Commons Dialysis	53	55	96.4%
DaVita Fayette County Dialysis	25	26	96.2%

Facility Name	# Pts	# Vaccinated - COVID	Vax Rate
DaVita Paoli Park Dialysis	15	15	100.0%
FKC Fogelsville	25	25	100.0%
St. Christopher's Hosp for Children	4	4	100.0%
UPMC Children's Hosp of Pittsburgh	5	5	100.0%
FKC North Dover	58	57	98.3%
FKC Easton	39	38	97.4%
FKC Clairton	36	35	97.2%
ARA Woodhaven	78	75	96.2%
FKC Allentown	66	63	95.5%
FKC Lansdale	64	61	95.3%
FKC South Hills	40	38	95.0%
ARA Langhorne	98	93	94.9%
FKC Shaler	35	33	94.3%
DaVita North Wales Dialysis	31	29	93.5%
AKC Newark	75	70	93.3%



Hospitalization Facility Recognition



**Facilities With No In-Patient Admissions
May – April**

Facility Name	CCN	# FFS patients
FKC North Philipsburg	392747	15
VA Pittsburgh	392321	14
FKC Phoenixville	392872	13
Children's Hosp Phila	392354	7
DaVita Harbison	392881	7
AKC Middletown	082532	5
DCI New Kensington	392535	5

**Facilities With No Re-Admissions
May – April**

Facility Name	CCN	Patient discharges
FKC Wynnewood	392539	24
FKC Liberty Doylestown	392743	24
DaVita Suburban Campus	392803	20
FKC Bethlehem	392511	19
DaVita Saint Charles Way	392838	18
DaVita PDI - Walnut Tower	392702	17
ARA Woodhaven	392773	17
DaVita Jennersville Dialysis	392631	15
DaVita Monroeville	392752	13
DaVita Buttonwood	392788	13
FKC Greensburg	392520	13
Concerto Wyndmoor	732504	13

**Facilities With No ED Visits
May – April**

Facility Name	CCN	# FFS Pts
ARA Bucks County	392735	34
FKC State College	392647	30
ARA NE Philadelphia	392876	29
FKC Bridgeville	082527	28
DaVita Oxford Court	392644	27
DaVita Cottman	392766	27
USRC Carlisle	392627	25
FKC Dover Home Dialysis	082526	24
DaVita Pocono Home	392804	19
DaVita Quentin Circle	392834	19
FKC Donora	392651	17
FKC of Reading	392856	17
DCI North Hills	392581	16



Patient Engagement Facility Recognition



Facility Name	Facility Name
ARA Bensalem Dialysis Center	FKC Brandywine Home Therapies
ARA Bucks County	FKC Christiana
ARA Langhorne	FKC Delco Dialysis Center
Christiana Care Health System	FKC DuBois
DaVita Northern Philadelphia Dialysis	FKC Harrisburg
DaVita Palmer Dialysis Center	FKC Liberty Dialysis Middletown
DaVita Paxton Dialysis	FKC Milford
DaVita PDI - Walnut Tower	FKC New Bloomfield
DaVita St Lukes at Home	FKC of Reading
DaVita St Lukes Quakertown Dialysis	FKC Shadyside
DaVita Wissahickon Dialysis	FKC South Allentown
DCI Canterbury	FKC Western Pennsylvania
DCI Chestnut Ridge Blairsville	Home Dialysis Care
DCI Hempfield	Prodigy Dialysis Richland
DCI Mount Pleasant	USRC Chambersburg
DCI New Kensington	USRC Hanover
DCI Philadelphia	USRC York
DCI Seven Fields	
FKC Allentown	



Network 4 Presenters and Volunteers

- Transplant
 - Lee Detwiler, DaVita Abington
- Hospitalization
 - Michael Austin, DaVita Bradford
- Home Dialysis
 - Lauren Myers, UPMC Transitional Care Unit
 - Diana Headlee-Bell, Network 4 Patient Mentor



Option Year 2 Overview



CMS Priorities and Goals

Goal 1	Increase in the percentage of patients, within the subset of patients identified as having depression , who have received treatment by a mental health professional
Goal 2 & 5	Improve Care of Nursing Home Residents on Dialysis- Catheter-related infections; Anemia
Goal 3	Increase Home Dialysis Starts and Prevalent Transitions to Home Modality; Increase Transplant Waitlisting and Transplantation; Promote Vaccinations- COVID-19 (patients and staff), Influenza (patients and staff), Pneumococcal pneumonia (patients)
Goal 4	Reduce Hospitalizations, Readmissions, and ED Visits, Reduce Obesity



Strategic Program Foundations

- Patient and Family Engagement
 - Engaging patients participation in QAPI meetings
 - Assisting patients in developing a life plan from which the facility develops the dialysis plan of care
 - Developing a Patient to Patient Support Program
- EQRS Reporting Timeliness and Accuracy
 - CMS 2728 Medical Evidence Report
 - CMS 2746 Death Form
- Patient Experience of Care
 - Management of Patient Grievances and Facility Concerns





New This Year!

- Address Obesity
 - decrease average body weight, among prevalent ESRD patients identified as obese, over the task order period of performance. Data for this measure is based on post-weights reported in EQRS.
- **Scheduled** Onsite Visits
- Culturally and Linguistically Appropriate Services (CLAS)

What? Onsite Visits?

- CMS gave us a list of ~105 facilities, chosen by location and Area Deprivation Index score of the patients. Not indicative of performance, star rating or anything else.
- We need to visit 90 of them
- No surprise “drop-ins”
- Will give advance notice to ensure
 - right staff will be available
 - staff are prepared for visit/discussion



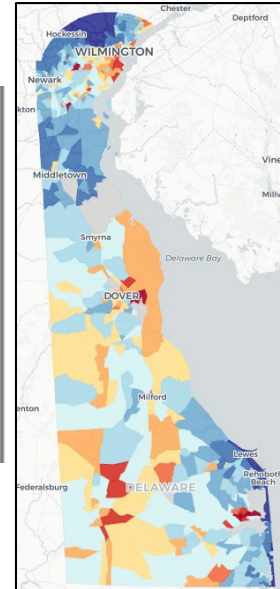
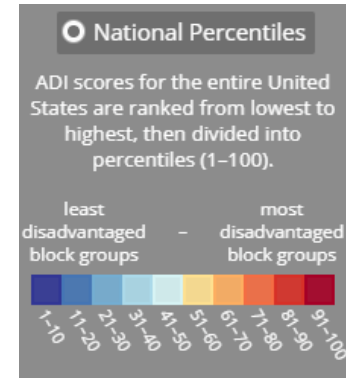
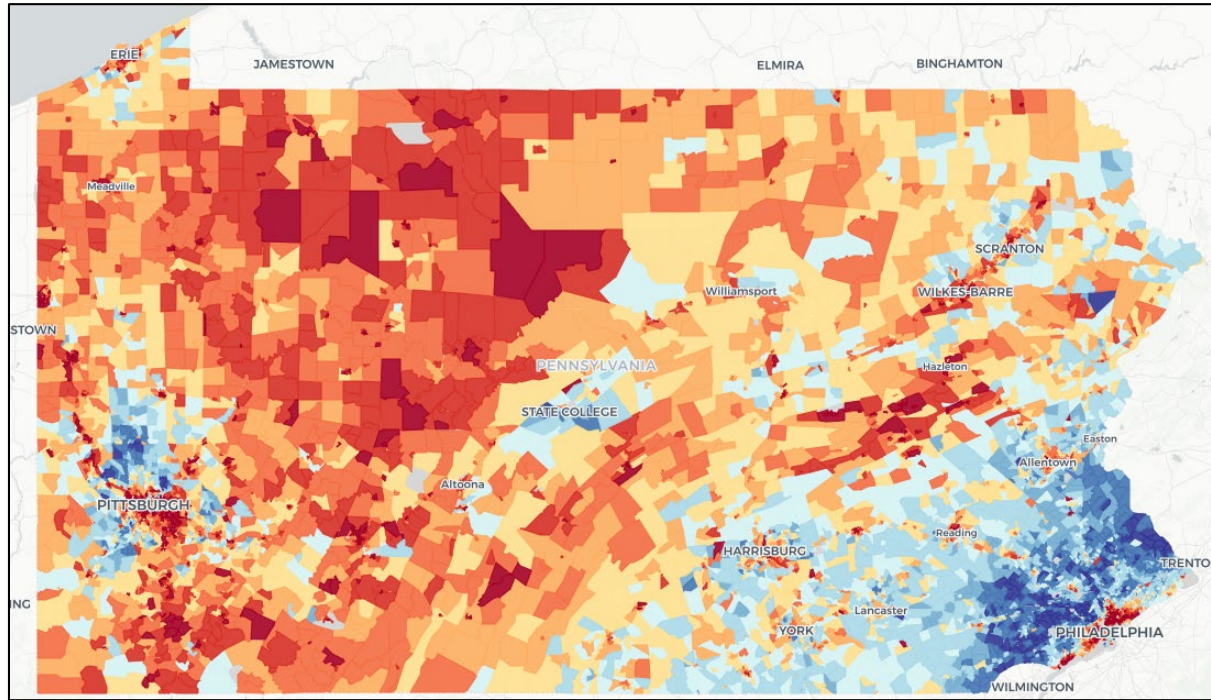
What is the Area Deprivation Index?

- 38% of patients with less than a high school education recalled health terms and information freely and accurately
- 65% patients with a college degree recalled health terms and information freely and accurately
- The prevalence and severity of limited health literacy disproportionately affect people with low income

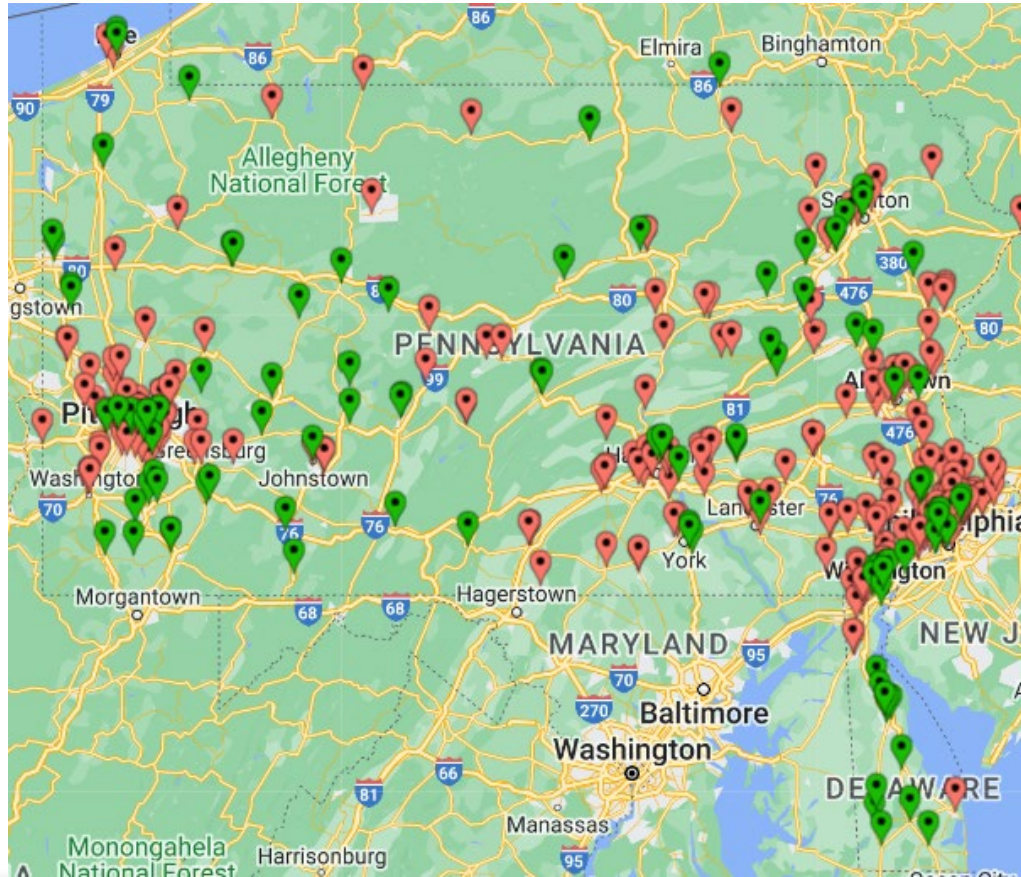
Laws, M.B., Lee, Y., Taubin, T., Rogers, W.H., & Wilson, I.B. (2018)

Domain	Variable
Education	% Population aged 25 years or older with less than 9 years of education
	% Population aged 25 years or older with at least a high school diploma
	% Employed population aged 16 years or older in white-collar occupations
Income/employment	Median family income in US dollars
	Income disparity
	% Families below federal poverty level
	% Population below 150% of federal poverty level
	% Civilian labor force population aged 16 years and older who are unemployed
Housing	Median home value in US dollars
	Median gross rent in US dollars
	Median monthly mortgage in US dollars
	% Owner-occupied housing units
	% Occupied housing units without complete plumbing
Household characteristics	% Single-parent households with children younger than 18
	% Households without a motor vehicle
	% Households without a telephone
	% Households with more than 1 person per room

What is the Area Deprivation Index?



Who?



Find Your Facility Name

American Kidney Care Dover
ARA At Ohio Valley Hospital
ARA New Castle
Bayhealth Medical Center
DaVita Belle Vernon
DaVita Cedar Grove Dialysis
DaVita City Line Dialysis
DaVita Clearfield Dialysis
DaVita Commonwealth Dialysis
DaVita Corry Dialysis
DaVita Dialysis Center of Erie
DaVita East End Pittsburgh Dialysis
DaVita Erie Dialysis
DaVita Fayette County Dialysis
DaVita Frackville Dialysis
DaVita Girard Estates Dialysis
DaVita Homestead Dialysis
DaVita Lebanon County Dialysis
DaVita Lewistown Dialysis Center
DaVita McKeesport West Dialysis
DaVita Meadville Dialysis
DaVita Mt Pocono Dialysis
DaVita Napoleon Place Dialysis
DaVita NE Philadelphia Dialysis Center
DaVita Norristown Dialysis
DaVita Northside Dialysis
DaVita PDI Ebensburg
DaVita Pdi Lancaster
DaVita Penn Hills Dialysis
DaVita Philadelphia West Dialysis
DaVita Progress Avenue Dialysis
DaVita Quentin Circle Dialysis
DaVita Robinson HT at Home
DaVita Saint Charles Way Dialysis
DaVita Scranton Dialysis
DaVita Somerset County Dialysis

DaVita Upland Dialysis Center
DaVita Waynesburg Dialysis
DCI Chestnut Ridge Blairsville
DCI Clarion
DCI Hastings
DCI Indiana
DCI Mount Pleasant
DCI Parks Bend
DCI Punxsutawney
DCI Shenango Valley
Dialysis Care Center Fulton County
Dialysis Care Center Lebanon
FKC Altoona
FKC Berwick
FKC Bridgeville
FKC Capital Area
FKC Carbon County
FKC Central Delaware
FKC Clarion
FKC Donora
FKC Dover Home Dialysis Center
FKC DuBois
FKC East Norriton
FKC First State
FKC Fox Chase
FKC Freedom Center of Wyoming Valley
FKC Greene County
FKC Greentree
FKC Hermitage
FKC Lehigh Valley Home
FKC Liberty Dialysis Middletown
FKC Mid Sussex County
FKC Milford
FKC Millsboro
FKC Mon Valley
FKC Montgomery East

FKC Nanticoke
FKC New Castle
FKC Newport Pike
FKC North Dover
FKC North Wilmington
FKC Northwest Philadelphia
FKC of Mount Pleasant
FKC Overbrook
FKC Penn Hills
FKC Pittston
FKC Pottsville
FKC Redstone Centerville
FKC Riverside Park
FKC Sayre
FKC Smyrna
FKC Southside Dialysis
FKC Three Rivers
FKC Uniontown
FKC Wilkes Barre
FKC Wilmington
Lehighon Davita Dialysis
NCPDC Lock Haven Dialysis Center
Prodigy Dialysis Meyersdale
The Kidney Center
The Kidney Center of Greater Hazleton
USRC Altoona
USRC Bedford
USRC Central York
USRC Laurel
USRC Philadelphia
USRC Seaford
USRC South York
USRC Wellsboro
Wilmington VA Medical Center



Polling Question #2



ESRD Network Initiatives and Resources



2023-2024 Quality Improvement Measures

Measures	Details
Home Dialysis	Incident to home, Prevalent to home Telemedicine visits for patients in a rural zip code
Transplant	Waitlisting & Transplant
Hospitalizations	ESRD Hospital Admissions, ED Visits, Unplanned Readmissions
Vaccinations	For Patients & Staff: COVID & Flu For Patients: Pneumococcal
Data Quality & Timeliness	Form 2728 & Form 2746
Depression	Receiving Treatment for Depression
Patient & Family Engagement	Life Plan, QAPI Meeting, Peer Mentor <i>Note: Incorporate in all QIAs except Data Quality & Timeliness</i>
*Patients Receiving Dialysis in Nursing Homes	Reduce Catheter Related Infections and Blood Transfusions
*Healthy Living	Network-Wide Healthy Living Campaign <i>In addition, incorporate into the Transplant QIA for patient specific focus - weight reduction for waitlisting eligibility and maintaining active waiting list status</i>

Link to access the ESRD Facility Report:
<https://esrdreportsnw4.qualityinsights.org/>

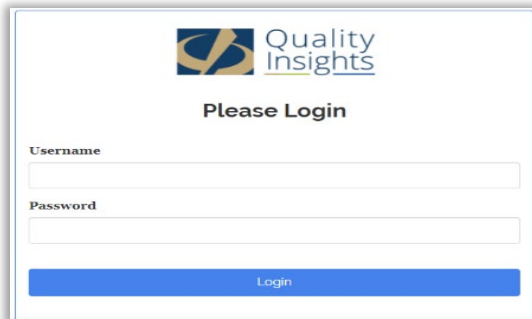
User ID: *CCN#*

Password: *Facility Specific*
(Network will provide facility specific password)

** Note: currently not listed on the ESRD Facility Report*



ESRD Facility Report



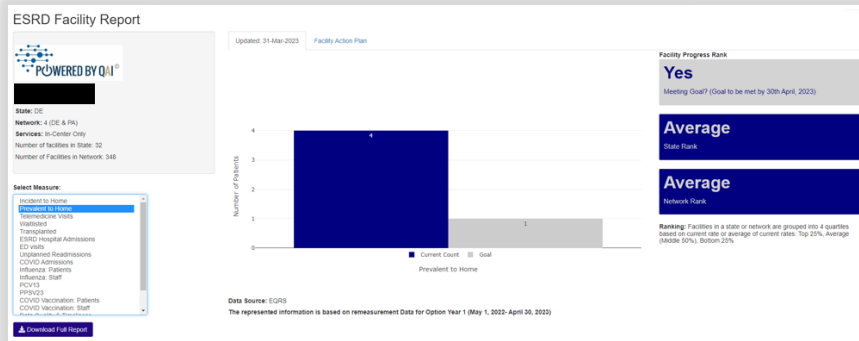
Quality Insights

Please Login

Username

Password

Login



Link to ESRD Facility Report

- <https://esrdreportsnw4.qualityinsights.org/>
- Need facility credentials
- Updated monthly
- Data sources:
 - EQRS, NHSN, UNOS, Medicare Fee for Service Claims
- Data reported either by your facility or by your organization



Improvement Process

- Root Cause Analysis to identify barriers
- Specific Change Package for intervention ideas
- Use of QIA-Specific Patient Level report
- 4-Month Data Driven Plan Do Study Act (PDSA) Cycle
- Reporting to Network via Survey Monkey link
- One-to-one follow up calls/emails as needed



QIA Concepts/Resources

Home Dialysis

- Home Dialysis Champion
- Transitional Care model
- [My Kidney Life Plan](#)
- QIRN4 Website:
 - Home Dialysis Voices posters
 - Network 4 Peer Mentors
 - Treatment Option Brochure



QIA Concepts/Resources

Transplant

- Transplant poster board
- [My Kidney Life Plan](#)
- QIRN4 Website:
 - Transplant Voices posters
 - Network 4 Peer Mentors
 - High KDPI poster/pamphlet

Goodbye Dialysis, Hello Transplant



QIA Concepts/Resources

Hospitalization

- Focus on High frequency diagnoses – HTN, Sepsis and fluid volume overload
 - Micro- focus with performance improvement plan for improving compliance with organizational policies for the treatment of HTN in select facilities
- Developing Reducing Fluid Volume Overload Toolkit



QIA Concepts/Resources

Reducing Hospitalizations and Unnecessary ER Visits Toolkit – Stoplight Tool

STOP! I Have a Medical Problem. Where Do I GO?

Red Light: I have a medical problem. I need help now!

Go to the closest Emergency Room (ER) or Call 911 **RIGHT NOW** if you have...

- High fever with shaking chills
- Trouble breathing
- Signs of stroke
- Signs of heart attack
- Severe stomach pain, vomiting
- Unable to stop severe bleeding with pressure or catheter has come out

DO NOT go to the ER for routine care/minor illness. Clear the way for people who need emergency care. Contact your dialysis clinic after you visit an ER, urgent care, or walk-in clinic.

Yellow Light: I need to see my doctor but the office and dialysis clinic are closed.

Go to an Urgent Care, Walk-In Clinic or Telemedicine

- Urgent Care treats simple complaints like common cold, flu, pain in the ear, skin rashes, minor bleeding or injuries.
- You can call an Urgent Care Clinic for advice before going in person.

Green Light: I need medical care BEFORE my next dialysis treatment.

I Need Kidney or Dialysis Care

- Call your kidney doctor or dialysis clinic if:
 - You need a treatment today
 - Your catheter dressing is wet, dirty, loose, or bloody
 - You have swelling or more swelling than usual in your feet or legs
 - You are swelling or have a weak pulse at your fistula or graft

I Need Care for a Something Else

- Call your Primary Care Provider (PCP) if:
 - You need care for something other than your kidney, your access or your dialysis treatment
 - Your PCP can best help you with your health problems – such as grief, high blood pressure, diabetes, wound care and other problems

***If your kidney doctor's office, dialysis clinic, and primary care provider's office is not open, call an urgent care or walk-in clinic for advice on next steps before visiting in person.**

Quality Insights
Real Results

No material was prepared by Quality Insights Renal Network 4, an End Stage Renal Disease (ESRD) Network under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. Publication No. ESRD-121622

KNOW THE SIGNS

Heart Attack & Stroke

SIGNS OF A HEART ATTACK

- 1 Pain or discomfort in chest
- 2 Lightheadedness, nausea or vomiting
- 3 Jaw, neck or back pain
- 4 Discomfort or pain in arm or shoulder
- 5 Shortness of breath

SIGNS OF A STROKE

Spot a stroke F.A.S.T.

Face Drooping
Does one side of the face droop or is it numb? Ask the person to smile. Is the person's smile uneven?

Arm Weakness
Is one arm weak or numb? Ask the person to raise both arms. Does one arm drift downward?

Speech Difficulty
Is speech slurred? Are they unable to speak, or are they hard to understand? Ask the person to repeat a simple sentence, like "the sky is blue." Is it repeated correctly?

Time to Call 911
If the person shows any of these symptoms, even if the symptoms go away, call 911 and get them to the hospital immediately.

Quality Insights

This material was adapted by Quality Insights Renal Network 4, an End Stage Renal Disease (ESRD) Network under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. Publication No. ESRD-121622



QIA Concepts/Resources

Vaccinations

- Continuation of Philadelphia Vaccine Coalition
- Increase collaboration with QIN –QIO in developing tools and strategies
- Encouraged use of PA-SIIS and DelVax state immunization databases
- Assist independent clinics with data entry as needed



QIA Concepts/Resources

Data Quality & Timeliness

EQRS

DashboardFacilitiesPatientsReports

Overview

Form 2728

New0

Due0

Past due0

Form 2746

Due0

Past due0

Accretions

Unresolved0

System Discharges

20230

20220

Form 2744 Status

2022

Missing

Clinical Data

Due in May0

Due in June0

Dialysis Facility Transplant Waitlist

Facility Dashboard Overview

Upcoming Reminders

06/01/2023 2:59 am EDT

Clinical Data submission deadline for the March 2023 clinical period.

07/01/2023 2:59 am EDT

Clinical Data submission deadline for the April 2023 clinical period.

08/01/2023 2:59 am EDT

Clinical Data submission deadline for the May 2023 clinical period.

Facility Dashboard Overview Upcoming Reminders

- 06/01/2023 2:59 am EDT - Clinical Data submission deadline for the March 2023 clinical period.
- 07/01/2023 2:59 am EDT - Clinical Data submission deadline for the April 2023 clinical period.
- 08/01/2023 2:59 am EDT - Clinical Data submission deadline for the May 2023 clinical period.



QIA Concepts/Resources

Depression Measure

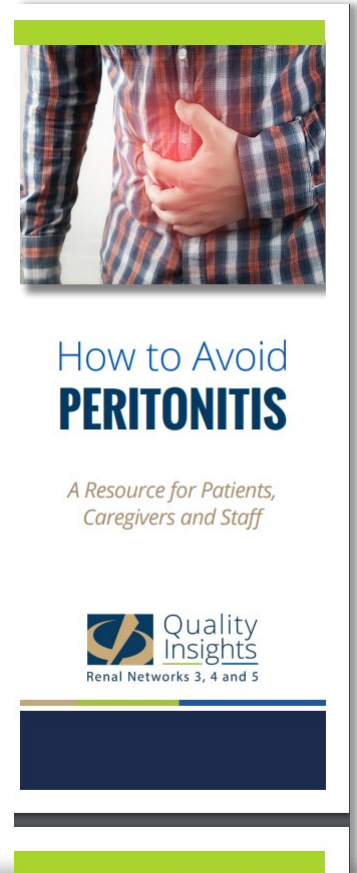
- Bulletin board – self management tools
- [Forum Depression Toolkit](#)
- National Coordinating Center website:
<https://esrdncc.org/en/>



QIA Concepts/Resources


Patients Receiving Dialysis in Nursing Homes

- Improve communication gaps
- Staff education
- QIRN4 Website:
 - Reducing Peritonitis brochure



Patient and Family Engagement

- Life Plan



I Can Do It:
My plan to take charge of my life

Name _____ Date _____

1. What's bothering me: _____

2. I want to be able to: _____

3. To take charge, I need to:
A) Talk to these people: _____
B) Get this medical information: _____
C) Get other information: _____

4. Today's date is: _____
I want to take care of this problem by this date: _____

5. What is likely to get in the way is: _____

6. To make sure I succeed, I am going to ask for help from: _____







- QAPI

Because Your Voice Matters!

Your dialysis facility often invites patients like you to take part in what is called a Quality Assessment & Performance Improvement (QAPI) meeting. You can also ask to take part in a QAPI meeting. This meeting gives you the chance to talk to the dialysis facility leaders about your concerns and other patient issues. Many times, the ideas and decisions that come out of QAPI meetings affect how the dialysis facility is run.

To have a good QAPI meeting experience, use this document to help you before, during, and after the meeting. Write down notes on what you would like to talk about with the healthcare team. This will help you stay on track during the meeting. Remember, your ideas can help make patient care better.


Before the QAPI Meeting
To prepare, think about questions, concerns, or feedback you and/or other patients may have. Ask the manager what topics will be discussed at the meeting. This might include:

 Facility improvement	 Home dialysis and kidney transplant education
 Preventing infections	 Emergency preparedness education
 Fistula/Catheter education	 Reducing patient hospitalizations

During the Meeting
In most cases, you will only be in the meeting for the first 15 minutes. You will be asked to offer suggestions for improving patient engagement and care. The dialysis facility leaders may ask you for your opinion and/or to share your experiences. The questions are meant to help the staff make the dialysis experience better for patients. If you do not understand something, just ask! You may be asked questions like:

- What do you think we are doing well in the dialysis facility?
- What areas do you think we could improve in the dialysis facility?
- What do you think are the most common reasons patients miss or shorten treatments?
- What is the best way for staff to communicate with patients about their treatment?

For more information, visit www.esrdncc.org/patients.



<https://esrdncc.org/en/professionals/>



Patient to Patient Support

Interested in Becoming a Patient Peer Mentor?

Do you have a positive outlook in dealing with kidney disease?

Are you comfortable helping patients take an active role in their care plans and talking with their care team?

Are you open to learning about resources for end stage renal disease (ESRD) treatment choices and sharing them with others?

If you answered yes to the questions above, you might be the right person to be a peer mentor at your dialysis facility.

What Do I Need to Do to Become a Peer Mentor?

- Must have been on dialysis for one year or more with at least 6 months of your treatment done in-center.
- Complete application and meet additional criteria to become a peer mentor.
- Willing to complete four Peer Mentoring courses.
- Attend a Peer Mentoring Program Orientation.
- Ability to set aside time to meet with peer by phone or Zoom at least once a week.

Where Can I Get More Information on the Peer Mentoring Program?

- Talk to a social worker at your facility for more information about peer mentoring.
- Contact your ESRD Network and ask to talk to the Peer Mentoring Program Peer Champion (your facility can provide you with his/her phone number).
- Visit www.kidneylearninghub.com.

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PEER MENTORSHIP ROLE AND BENEFITS

COMMUNICATION Enhanced communication among patients, care advocates, providers and ESRD Network communities.

LEADERSHIP Identification of patient leaders who can champion important activities within your local ESRD Network.

COACHING Support for patients learning from one another; seeking, sharing and spreading information and knowledge.

CONNECTONS Development of an opportunity to connect patients with individuals who have "walked in their shoes."

MENTORING A way for patients to help other patients become engaged, educated, and empowered.

ROLE MODEL A means for asking questions comfortably and freely, without fear of judgment. A way to offer support and encouragement to peers.

ADVISORS A bridge for overcoming language/cultural barriers.

ESRD NCC NATIONAL COORDINATING CENTER

End Stage Renal Disease National Coordinating Center
website: www.esrdncc.org • e-mail: nccinfo@hsag.com
www.facebook.com/esrdncc [@esrdncc](https://twitter.com/esrdncc)

Prepared by the National Patient and Family Engagement (N-PF) Learning and Action Network (LAN) under the ESRD NCC.
Source: ESRD Network N-PF LAN Members.
This material was prepared by the End Stage Renal Disease (ESRD) National Coordinating Center (NCC) contractor, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services under CMS contract #HCAM-500-2012-NW0002C, and was adapted by the contractor under CMS contract # HCAM-500-2016-NW0072. The contents presented do not necessarily reflect CMS policy nor imply endorsement by the U.S. Government. Publication Number: P-ESRD NCC 7707102-0002/2016-04

<https://esrdncc.org/en/patients/peer-mentoring-resources/>



Advancing Health Equity

Culturally and Linguistically Appropriate Services (CLAS)

- Culturally and Linguistically Appropriate Services (CLAS)
 - A means to provide effective, equitable, understandable and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy and other communication needs.
- The National CLAS Standards for CLAS
 - A framework for providing CLAS
 - 15 standards of practice individuals and health care organizations can implement to help advance health equity, improve quality, and eliminate health care disparities
 - **Core Standard:** Provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs
 - Governance, Leadership, Workforce; Communication and Language Assistance; Engagement, Continuous Improvement, and Accountability



How Does Your Facility Implement CLAS?

Implementation Checklist

Select your organization's stage of implementation for each practice		Currently implementing	Planning to implement	Not planning to implement at this time
1.2a	Identify and designate a CLAS champion or champions , who are supported by the organization's leadership, and whose specific responsibilities include (at a minimum) continuous learning about, promoting, and identifying and sharing educational resources about CLAS and the National CLAS Standards throughout the organization.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.2b	Create and implement a formal CLAS implementation plan that is (at a minimum) endorsed and supported by the organization's leadership, that describes how each Standard is understood, how each Standard will be implemented and assessed, and who in the organization is responsible for overseeing implementation.			
1.3a	Target recruitment efforts to the populations served to increase the recruitment of culturally and linguistically diverse individuals , through actions such as: posting job descriptions in multiple languages in local community media, holding job fairs in the community(ies) served, and/or working with leaders of local community institutions to create mentorship and training programs targeting populations served.			
2.6	Provide individuals with notification that describes what communication and language assistance is available, in what languages the assistance is available, and to whom they are available. Notification should clearly state that communication and language assistance is provided by the organization free of charge to individuals.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.7a	Require that all individuals serving as interpreters complete certification or other formal assessments of linguistic and health care terminology skills to demonstrate competency.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.7b	Provide financial and/or human resource (e.g., time off) incentives to staff who complete interpreter training and meet assessment criteria , to build organizational capacity to provide competent language assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.8	Formalize processes for translating materials into languages other than English and for evaluating the quality of these translations. This may include testing materials with target audiences.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

An Implementation Checklist for the National CLAS Standards
with a CLAS Action Worksheet and CLAS Testimonials



Using CLAS to Improve the Delivery of Care

**Breakdowns in communication
can equate to breakdowns in the
quality of care and patient safety.**

- What are Culturally and Linguistically Appropriate Services?
<https://youtu.be/8NNR9M2HFf0>
- Using Culturally and Linguistically Appropriate Services to Improve Delivery of Care: <https://youtu.be/E7faJVgtbHs>

Advancing Health Equity

Health Literacy



Advancing Health Literacy in the Kidney Disease Community
ID: E-D19JDV

Language: English - ★★★★★5

PREVIEW

- Demonstrating organizational health literacy is a key component to advancing individual health literacy and implementing CLAS
- Learn & Earn (Includes 1.5 Free CEs)
 - Create a free EDISCO account to enroll - <https://learn.qualityinsights.org/learn/signin>
 - Learning Objectives:
 - Explain the impact of limited health literacy on clinical outcomes for people with kidney disease
 - Discuss the association between limited health literacy and access to home dialysis and kidney transplant
 - Identify at least three (3) indicators of limited health literacy
 - Describe at least five (5) actionable attributes of a health literate health organization
 - Identify at least three (3) key factors for creating easy-to-understand patient materials



QIA Specific Expert Coalitions

- Goals
 - Identify local barriers and areas for improvement
 - Plan interventions (tools, educational activity/webinar, etc.)
 - Participate in sharing of promising practices
- Topic Specific Groups
 - Philadelphia County Vaccination
 - Lankenau Reducing Hospitalizations, Readmissions and ER Visits (pending)
 - Home Dialysis/Transplant/Behavioral Health



Sharing of Best Practices

- Coalition led activities
- ESRD NCC Topic Specific Learning and Action Network (LAN) Calls
- ESRD NCC Topic Specific Expert Team Calls



Patient Experience of Care




Patient Experience of Care - Grievances

- The ESRD Conditions for Coverage require dialysis facilities to have a grievance policy
- Patients must be informed they have the right to file a grievance without reprisal
- Patients must be educated that they can file a grievance anonymously



Patient Experience of Care - Grievances

- Grievance Posters:



Quality Insights
Renal Network 4

WHAT TO DO IF YOU HAVE A CONCERN

First, talk with the staff at your dialysis facility if you have a complaint.

A complaint or grievance is any concern that you have about the care that you receive from your healthcare facility. Anyone can file a complaint.

The complaint process helps to ensure that people are receiving safe care. The complaint process is also a very effective way of working through problems.

Contacting your State Survey Agency is always an option.

DE Health and Social Service (DHSS)/ Office of Health Facilities Licensing and Certification
800-542-7373

PA Dept. of Health/Quality Assurance Complaint Hotline
800-254-5164

You can also contact us at Network 4. Here's what to expect.

- ✓ If you are not satisfied with your facility's response, or if you are not comfortable talking to the staff at your facility, you can contact us.
- ✓ Our registered nurses and social workers will help you with your complaint.
- ✓ We may investigate your complaint by contacting your dialysis unit.
- ✓ We may provide education and resources to you or the staff at your facility about issues related to your complaint.
- ✓ We can provide mediation and refer your complaint to another agency that can assist you, if needed.

Quality Insights Renal Network 4
1586 Summertown Pike #1470
Kulpsville, PA 19443
www.qirn4.org

CONTACT US FOR HELP. WE'RE HERE FOR YOU.
800-548-9205



1586 Summertown Pike #1470
Kulpsville, PA 19443
1-800-548-9205 (patients only)
www.qirn4.org

I am a Kidney Patient, What Can I do if I Have a Complaint?

Quality Insights Renal Network 4
1-800-548-9205

The Centers for Medicare & Medicaid Services (CMS) contracts nationwide with End Stage Renal Disease (ESRD) Networks to assure quality of care for people with kidney failure. The ESRD Networks are responsible for receiving, evaluating and resolving complaints involving patient care. Quality Insights Renal Network 4 is the ESRD Network for the dialysis and transplant patients in Pennsylvania and Delaware.

A complaint or grievance is any concern that you have about the care that you receive from your healthcare facility. Anyone can file a complaint including patients and family members. Anyone also connected to a patient can file a complaint on behalf of a patient.

It is very important to let a professional know when you have a complaint. The complaint process helps to ensure that people are receiving safe care. The complaint process is also a very effective way of working through problems. It is also a way for patients to help each other.

What Should I do if I Have a Complaint?

Try talking with the staff at your dialysis facility. If you are not satisfied with the facility response, contact the Network. If you don't feel comfortable talking to the staff at the facility, contact the Network.

The Network has registered nurses and a social worker on staff to listen to your complaint. They can help you work through what to do about it. They may investigate the complaint and contact your dialysis unit to discuss your complaint. They may provide education to you and/or the staff about issues related to your complaint. The Network can provide mediation as necessary. If needed, we can refer your complaint to another agency that can better help you. Patients or family members may contact the Network by calling 800-548-9205. All calls are confidential. We will not give out any information about you or your call without your permission.

The ESRD Network works closely with state survey agencies. We need to ensure that dialysis facilities work within the Federal and State regulations in providing dialysis treatments to people with kidney failure. You can also contact them about your complaint. The state survey agencies that work in this area are:

Pennsylvania Department of Health
Quality Assurance Complaint Hotline
800-254-5164

Delaware Health and Social Service (DHSS)
Office of Health Facilities Licensing and Certification
800-942-7373

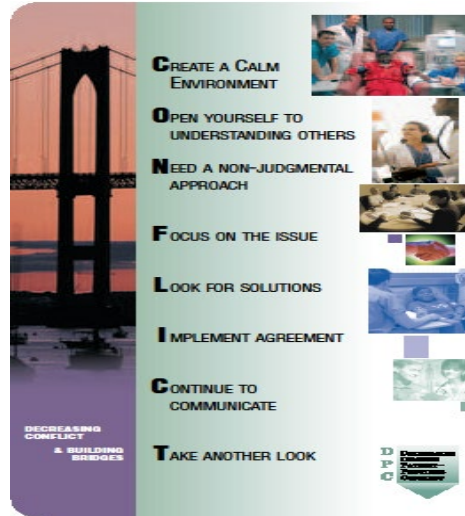
Quality Insights Renal Network 4
1586 Summertown Pike #1470, Kulpsville, PA 19443
Patients' Line 800-548-9205
Phone 610-265-2418
Fax 610-781-4074
www.qirn4.org

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Patient Experience of Care

- Decreasing Patient-Provider Conflict (DPC)



<https://esrdnetworks.org/resources-news/decreasing-patient-provider-conflict-dpc/>

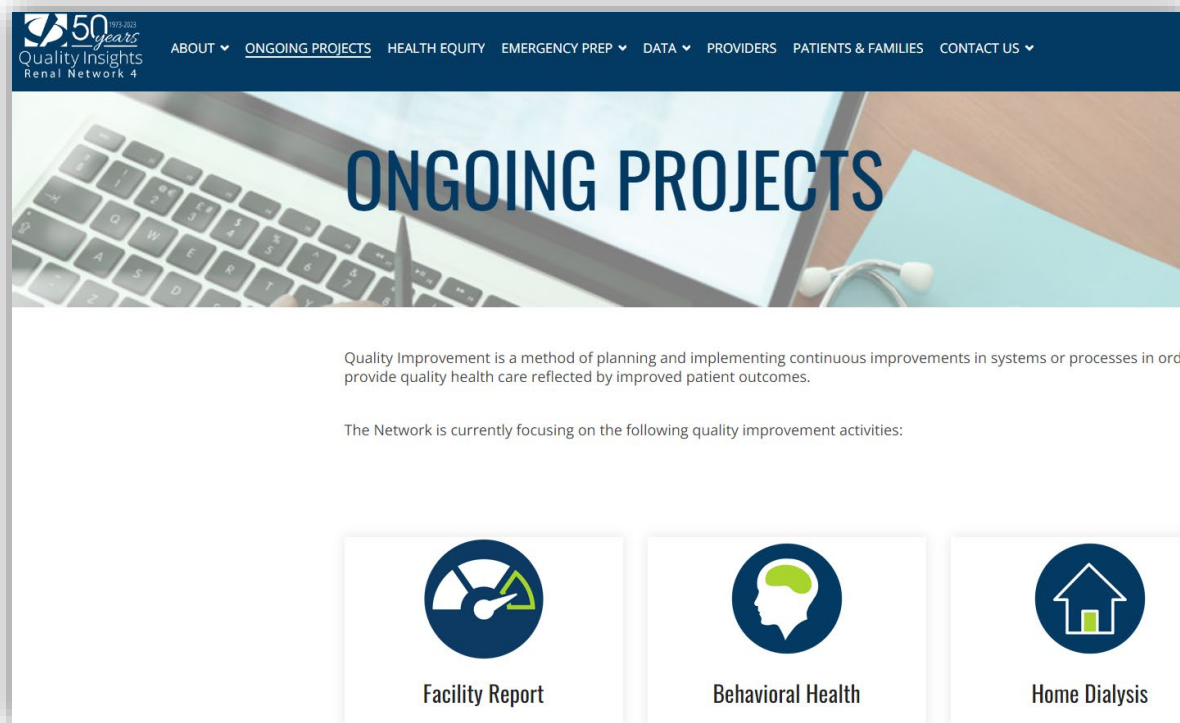
Our website...is getting a new look soon!



<https://www.qirn4.org/Home.aspx>



New Look



Network 4 Monthly Newsletter

Subscribe now!



Network4NEWS

Greetings from Network 4

Welcome to the May 2023 edition of the Quality Insights Renal Network 4 e-newsletter. In this issue, we bring you information about the latest [coronavirus news](#), Centers for Medicare & Medicaid Services ([CMS](#)) [updates](#), [emergency preparedness](#) information, [patient and family engagement](#) updates, upcoming [events and education opportunities](#), kidney patient and provider [resources](#), and this month's [patient education piece](#) focused on Dialysis Facility Compare. We encourage you to contact us with any questions, concerns or suggestions.

Please click on a button below to go to that section of the newsletter.

Behavioral Health

CMS Updates

Emergency Preparedness

ESRD Resources

Events & Education Opportunities

Health Equity



Timeline

Task	Frequency	Due	Who
Initial Facility Action Plan <i>Performance Period May 2022-April 2023</i>	Once (May)	June 15th	All Facilities
Access ESRD Facility Report <i>Review Outcomes During QAPI</i>	Monthly	Monthly update*	All Facilities
Onsite Facility Visits	Monthly	N/A	*CMS Priority List
PDSA Cycle Survey	Monthly X 4	TBD	Target facilities
Midpoint Facility Action Plan	TBD	TBD	TBD
Notify Network of Key Personnel Changes	As indicated	Ongoing	All Facilities

* Email Notification to Facility Administrators



Network Project Leads



QIA Topics	Network Leads
Behavioral Health Outcomes Depression Treatment	ngrider@qualityinsights.org
Patients Receiving Dialysis in Nursing Homes	kkhamoua@qualityinsights.org
Home Dialysis	kkhamoua@qualityinsights.org
Transplant	kkhamoua@qualityinsights.org
Vaccinations (COVID, Flu, Pneumo)	jshrift@qualityinsights.org
Hospitalization, Readmissions, ER Visits Including Addressing Obesity	jshrift@qualityinsights.org
Patient and Family Engagement- Life Plan, QAPI, Patient to Patient	ngrider@qualityinsights.org
EQRS Data Quality & Timeliness	khricak@qualityinsights.org
Health Equity	amoores@qualityinsights.org

Thank you!

