



*The Florida ESRD Network*

# Network 7 and Kidney Community Emergency Response (KCER) Updates

Sally Gore, MSW, MBA, PMP  
*Executive Director*

Florida Renal Administrators Association Annual Meeting  
July 21, 2016

# Objectives

- Discuss recent changes to the ESRD Network Program
- Review Network 7 demographics and 2016 quality improvement activities (QIAs)
- Describe KCER's 2016 activities and opportunities for collaboration

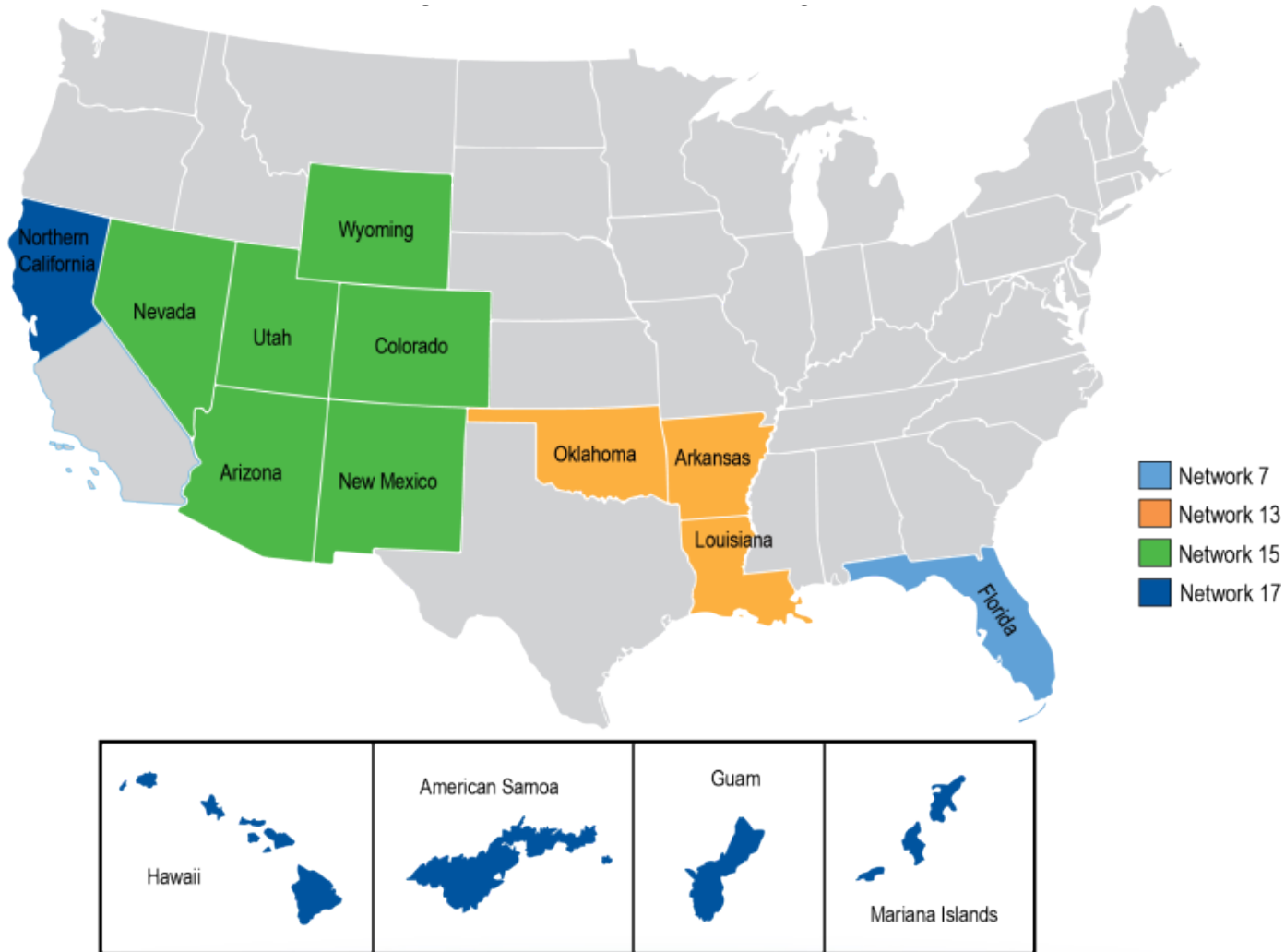
# ESRD Network Program

## *Recent Changes and Updates*

# ESRD Network Program Changes

- In 2015, the Centers for Medicare & Medicaid Services (CMS) awarded 18 ESRD Network contracts in an open competition
- ESRD Networks will work over a five-year period to promote positive change related to the CMS Three-Part Aim:
  1. Better Care for the Individual through Patient and Family Centered Care
  2. Better Health for the ESRD Population
  3. Reduce Costs of ESRD Care by Improving Care

# HSAG: ESRD Network Program



# Network 7 Updates

## *Demographics and QIAs*

# Florida ESRD Demographics

	2013	2014	2015
Incidence	7,224	7,319	7,970
Prevalence	26,431	27,795	29,119
Home Dialysis	2,790	3,433	3,289
Hemodialysis	539	591	568
CAPD	401	405	386
CCPD	2,157	2,434	2,334
Kidney Transplants	959	1,025	996
Patient Deaths	4,790	4,692	5,129
Vocational Rehabilitation (VR)	17%	22%	24%
Dialysis Facilities	387	416	432
Transplant Centers	7	8	9

# Grievance QIA

- Improve utilization of the facility grievance process
- Assist facilities in evaluating grievance trend data to quickly anticipate and resolve patient issues before they escalate into grievances

# Facilities	# Patients	Baseline (April 2016)	Current (May 2016)	Goal (October 2016)
10	847	3.4	3.6	2.7



# In Center Hemodialysis Consumer Assessment of Hospital and Provider Systems (ICH CAHPS) QIA

- Improve ICH CAHPS results for Question 27:
  - “In the last three months, how often did dialysis center staff explain blood test results in a way that was easy to understand?”
- Implement Learn About Blood (L.A.B) Test Results intervention

# Facilities	# Patients	Baseline (Spring 2015)	Current (May 2016)	Goal (September 2016)
20	2,100	74.8%	89.0%	75.9%

# Long-Term Catheter (LTC) QIA

- Reduce rate of LTC use among prevalent patients in target facilities by 2 percentage points
- Intensive focus group interventions with subset of LTC facilities
- Support facilities with vascular access reporting to CROWNWeb

# Facilities	# Patients	Baseline (Sept 2016)	Current (Jan 2016)	Goal (Sept 2016)
184	12,500	16.2%	14.4%	14.2%

# Healthcare-Associated Infection (HAI) QIA

- Reduce rates of dialysis events in targeted facilities (bloodstream infection [BSI]/sepsis)
- Utilize Centers for Disease Control and Prevention (CDC) intervention materials (e.g., audit tools)
- Demonstrate a 5% or greater relative reduction in the pooled mean BSI rate

# Facilities	# Patients	Baseline (April 2016)	Current (May 2016)	Goal (Sept 2016)
63	4,300	1.35	1.09	1.42

# Vaccination QIA

- Increase hepatitis B (HBV) and pneumococcal vaccination (PPV) rates
- Utilize patient refusal surveys to target educational resources
- Achieve rate of 60% or greater for both HBV and PPV for each individual facility
- Increase aggregate HBV and PPV rates by 2 percentage points over the baseline each among targeted facilities

# Vaccination QIA (continued)

- QIA includes 25 facilities with a total of 1,681 patients

<b>HBV</b>	<b>Baseline (Jan–Dec 2015)</b>	<b>Current (Jan 2016)</b>	<b>Goal (Sept 2016)</b>
	30.5%	47.7%	32.5%

<b>PPV</b>	<b>Baseline (Jan–Dec 2015)</b>	<b>Current (Jan 2016)</b>	<b>Goal (Sept 2016)</b>
	11.4%	14.5%	13.4%

# Reduce Hospitalizations Pilot Project

- Included in CMS workgroup to collaborate with three other Networks to address issue and develop new measures
- Include 20–25 dialysis facilities and 5–7 area hospitals
- Reduce hospitalization rate by 2 percentage points by end of 2016

# Facilities	# Patients	Baseline (Apr –Sept 2015)	Goal (Sept 2016)
20	2,063	71.4%	69.4%

# ESRD Quality Incentive Program (QIP) QIA

- Improve hypercalcemia performance among at-risk facilities based on QIP performance
- Provide support with facility implementation of Plan-Do-Study-Act (PDSA) cycles
- Facilities are released once they have achieved and sustained at least a 25% relative improvement for three consecutive months

# Facilities	# Patients	# Facilities with PDSA Established	# Facilities Meeting Goal	Goal (Nov 2017)
10	774	0	0	8

# KCER Updates

*Activities and Collaboration Opportunities*



# National Lead for the KCER Program

- Maintain and enhance the infrastructure of the KCER Program to ensure efficient and effective operations
- Collaborate with local, state, national, and federal partners
- Serve as the central coordination point for the ESRD community during all phases of emergency management:
  - Hazard mitigation and preparedness
  - Emergency/disaster response
  - Emergency/disaster recovery

# Foster Patient and Family Engagement in Emergency Planning at the National Level

- Convene National KCER Patient and Family Engagement Learning and Action Network (N-KPFE-LAN)
  - Develop a LAN Campaign
  - Participate in workgroups
  - Provide feedback for KCER educational plan

# Emergency Education/Technical Assistance for Networks, Facilities, and Patients

- Provide resources, best practices, and tools through the KCER website ([www.kcercoalition.com](http://www.kcercoalition.com)) and social media
- Develop a needs assessment to guide development of an educational plan
- Address critical topics including:
  - Active Shooter
  - Transportation

# How Can We Help You?

- Share best practices on effective patient engagement tools and resources, and the most effective communication strategies
- Provide provider tools and resources related to all phases of emergency management
- Present/exhibit at educational webinars or conferences

# How You Can Get Involved

- Participate on KCER committees and workgroups
  - Response Team Workgroups
  - Educational Plan
  - Summit Planning
- Recommend and recruit patient subject matter experts
- Be active participants in national campaign and encourage facility participation

# Questions



# Network 7 and KCER Contacts

Sally Gore, MSW, MBA, PMP

Executive Director

813.865.3133

[SGore@hsag.com](mailto:SGore@hsag.com)

Helen Rose, MSW, LCSW

Quality Improvement Director

813.865.3321

[HRose@nw7.esrd.net](mailto:HRose@nw7.esrd.net)

Peter Traub

KCER Coordinator

602.665.6615

[PTraub@hsag.com](mailto:PTraub@hsag.com)

Beverly Whittet, RN, CDN

Patient Services Director

813.865.3317

[BWhittet@nw7.esrd.net](mailto:BWhittet@nw7.esrd.net)

Donna Debello, RN

Quality Improvement Coordinator

813.865.3363

[DDebello@hsag.com](mailto:DDebello@hsag.com)

HSAG: The Florida ESRD Network (Network 7)

3000 Bayport Drive, Suite 300, Tampa, Florida 33607 • Phone: 813.383.1530 • Fax: 813.354.1514



# Thank you!

This material was prepared by ESRD Network 7, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy nor imply endorsement by the U.S. Government. FL-ESRD-7GR004-07052016-01