



Better healthcare,
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Promote Appropriate Home Dialysis

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January 31, 2018

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We ask that you be:

- Present and engaged in our speaker presentations
- Remain open-minded and respectful in hearing other's opinions
- Actively participate in the discussion
- Speak up on the line, send in comments in the Q and A

Agenda

Project Overview:

- Project Goals and Scope
- Home Modality Statistics and Benefits
- Inclusion Criteria
- Project Plan
- LAN participation
- Patient Ambassador Program
- Heightened awareness on disparity in Healthcare
- Project Paperwork/ Site Visits

Project Goal/Scope: Increase Patients Dialyzing at Home

CMS 5 year goal:

- By 2023 to increase the number of patients dialyzing at home from the current national average of 8% to 16%

2018 Promote Appropriate Home Dialysis QIA

- Work with 30 % of all clinics in the Network service area (185 clinics)
- Include clinics from all states in the Network
- Improve the rate of patients who start home dialysis training by 10 percentage points



Benefits of Dialyzing at Home

- Improved Clinical Outcomes
 - Ability to achieve better Kt/V
 - Better phosphorus control
 - Symptom reduction of co-morbid states
- Higher Quality of Life
 - Ability to work and go to school
 - Ability to travel
 - More time with loved ones
 - Fewer diet and fluid restrictions
 - Increased patient control of therapy
- Decreased Mortality
 - For both PD and HHD
 - Five year survival rates with HHD approach those of transplant
- Lower Healthcare Costs “no one takes better care of you than YOU”
 - Fewer infections
 - Decreased hospitalizations



Current Home Modality Statistics

- Only 8% of all dialysis patients currently chose home modalities
- 500 medical directors surveyed: 88% stated they would select home modalities as their first choice for their personal option
- 90% of all incident patients choose ICHD
- 93% of all incident patients have no medical contraindications that would prevent a home modality choice
- Network 9 current Home dialysis training initiation rate = 7.8%

Why is my clinic in the Appropriate Home Dialysis QIA?

Facilities selected based on:

- Potential for improvement based on current home referral rate.
- Ready access to a home program for referral.
- Facility census and number of patients who could be impacted by referral to home.
- Facilities will be removed from this project when they have 40% trained or in training for home dialysis

****There are no patient exclusions for this project**:**



Steps to Home Modality Training

7 Steps to Home Dialysis Utilization

1. Patient interest
2. Educational session to determine patient's preference
3. Patients suitability for home dialysis as determined by the nephrologist
4. Assessment for appropriate access placement
5. Access placement
6. Patient accepted for home dialysis training
7. Home training initiated



Learning and Action Network Participation (LAN)

LAN Participation

Participation in the Learning Action Network(LAN)- why?

- Improve spread information communications in the nation
- Increase awareness of and the implementation of best practices to move through 7 steps to home modality initiation

Participants

Participating facilities

Free standing or stand alone home dialysis training centers

Patients/ family members of care givers from each state

QIN-QIOs

State Surveying agencies

Dialysis facility regional leadership

Patient Ambassadors

What is a Patient Ambassador?


- CMS believes that the patient is the most valuable player on the healthcare team. Building interventions centered around the patient is the goal of every CMS project.
- Facilities to designate a minimum of one patient ambassador
- Healthcare that results in the best outcomes revolves around team work. Be part of the team!




Patient Ambassador

Who should we chose?

What is their role?



ESRD NCC
NATIONAL COORDINATING CENTER



PEER MENTORSHIP TRAINING PROGRAM
ESRD National Coordinating Center (NCC)

National Patient/Family Engagement
Learning and Action Network (N-PFE LAN)
Published: July 2015



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.
- CONNECTORS** 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
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Patient Ambassador Program

Improving the CMS Customer Experience

- Building on OY1 successes!
- Every patient focused QIA will have Patient Ambassadors (PA)
- Provide the patient perspective to quality improvement
- Network training and coaching provided
- Planned tasks to bolster patient interest at the facility level
- Several platforms to support QIA goals will be offered
- Ambassadors will report to the facility QAPI teams

Disparity in Healthcare

What is a Disparity?



Dictionary definition is the lack of similarity or equality

Health disparity

higher burden of illness, injury, disability or mortality experienced by one population group relative to another.

Health care disparity

differences between groups in health insurance coverage, **access to and use of care**, and quality of care.

Paperwork Requirements

Project Reporting

Redcap survey via email to contact, monthly

- Progress through the seven steps
- Update facility contact as needed



REDCap Registration

How to Register

- You will receive an email invitation to join REDCap from the Network
- Use the project lead email as the user name
- Your password will be home2018

What will you report ?

- Your eligible patients movement through the 7 steps to wait listing
- Total facility census

Home Dialysis Quality Improvement Activity Survey

The Network is conducting a quality improvement activity to increase rates of patients on Home Dialysis. The Network is conducting this survey to obtain information to select facilities for this QIA.

CCN

* must provide value

Name of person entering information

* must provide value

Email of person entering information

* must provide value

Currently have a home program

* must provide value

- Have a Home Program and is Growing
- Have a Home Program and is Maintaining
- NA

[reset](#)

PD Supplier

* must provide value

Do you monitor any or all of the 7 steps of the referral to training process? Select as many as applicable.

* must provide value

- Patient interest in home dialysis,
- Patient's preference of home modality
- Patient suitability for home modality
- Assessment for access placement
- Placement of appropriate access
- Patient accepted for home modality training
- Patient begins home modality training.

Questions?



Thank You For Joining this webinar



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