

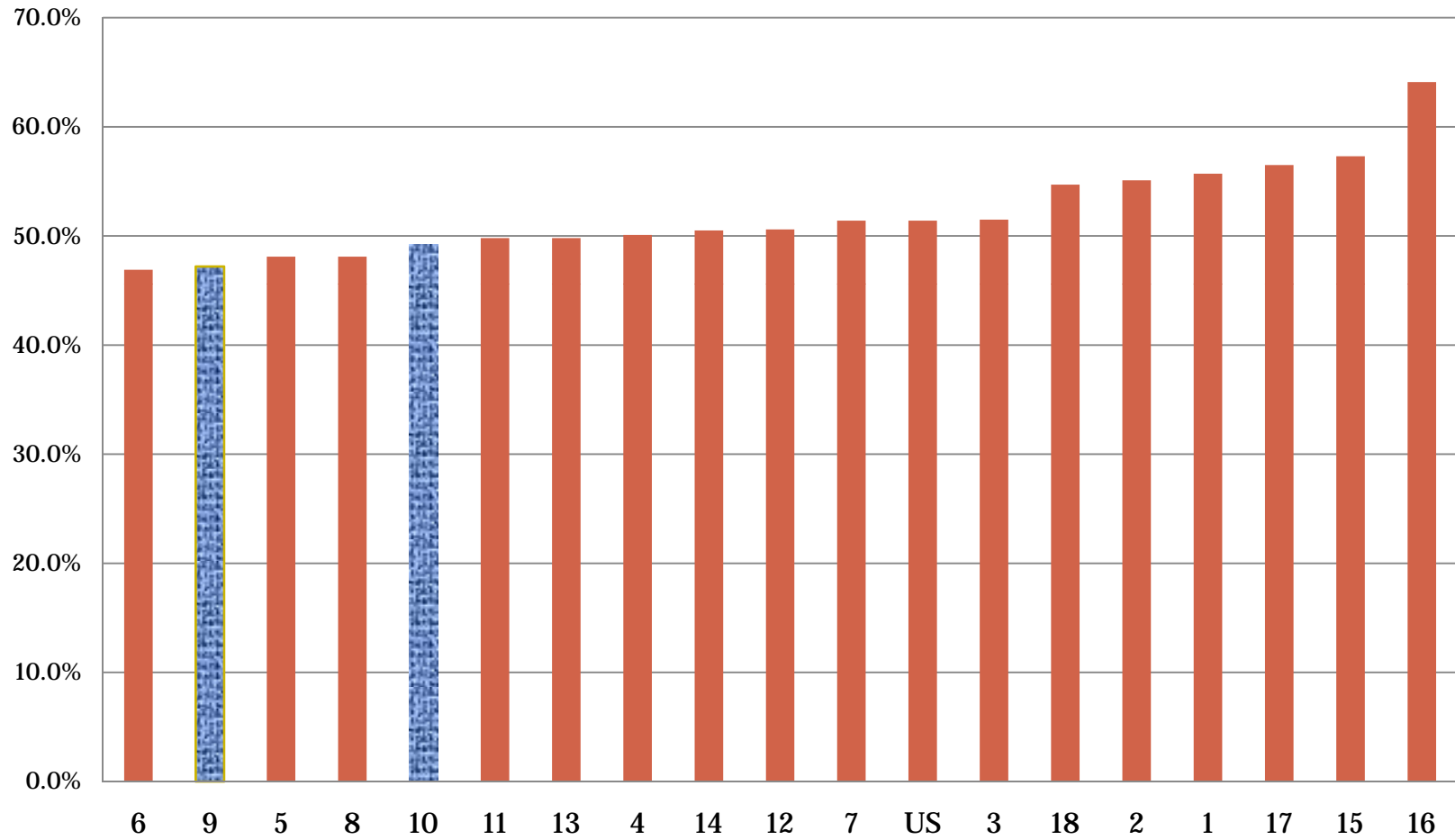
**Vascular Access
Quality Assessment and Performance
Improvement (QAPI)**



§494.110 CONDITION

**SUSIE STARK
EXECUTIVE DIRECTOR
THE RENAL NETWORK, INC.**

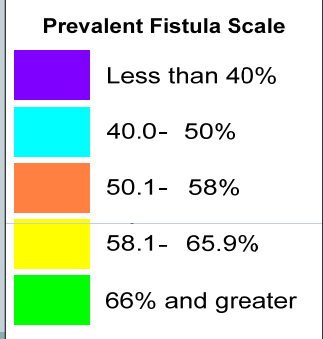
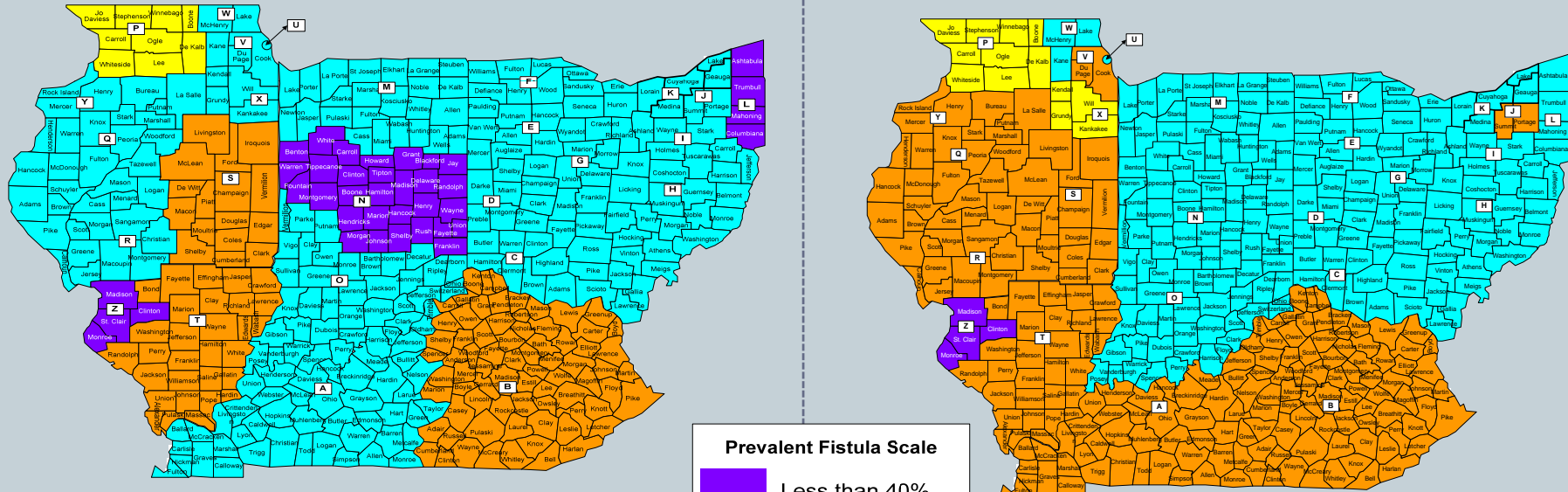
November 2008 Fistula Rates By Network-Ranked



Vascular Access Prevalent Fistula Rates

December 2007

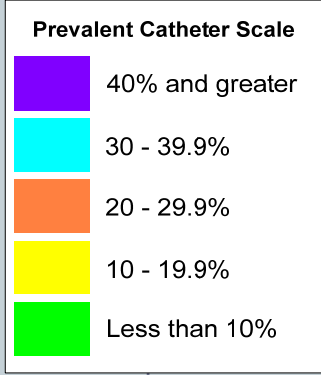
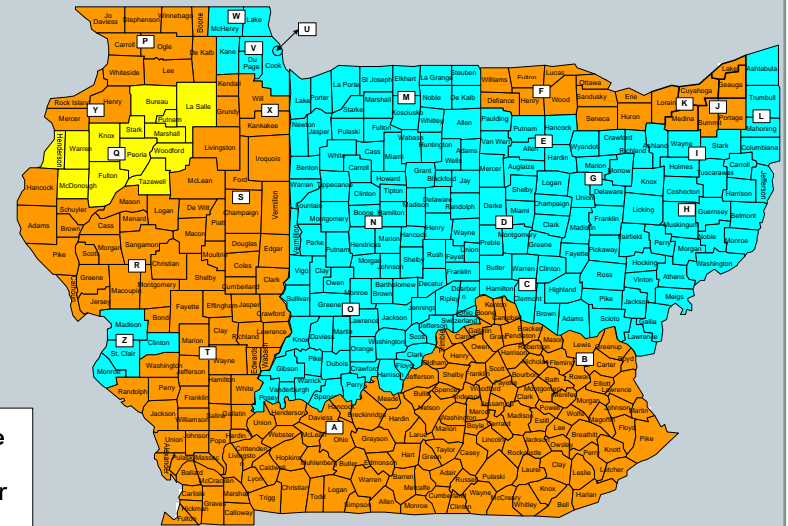
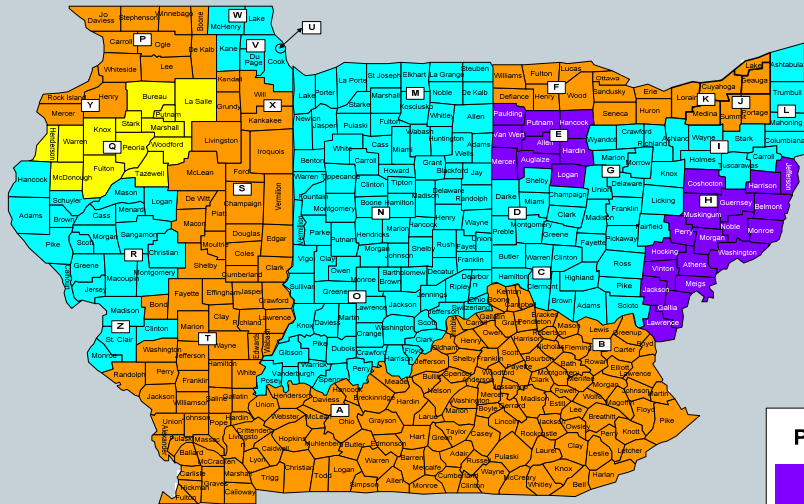
December 2008



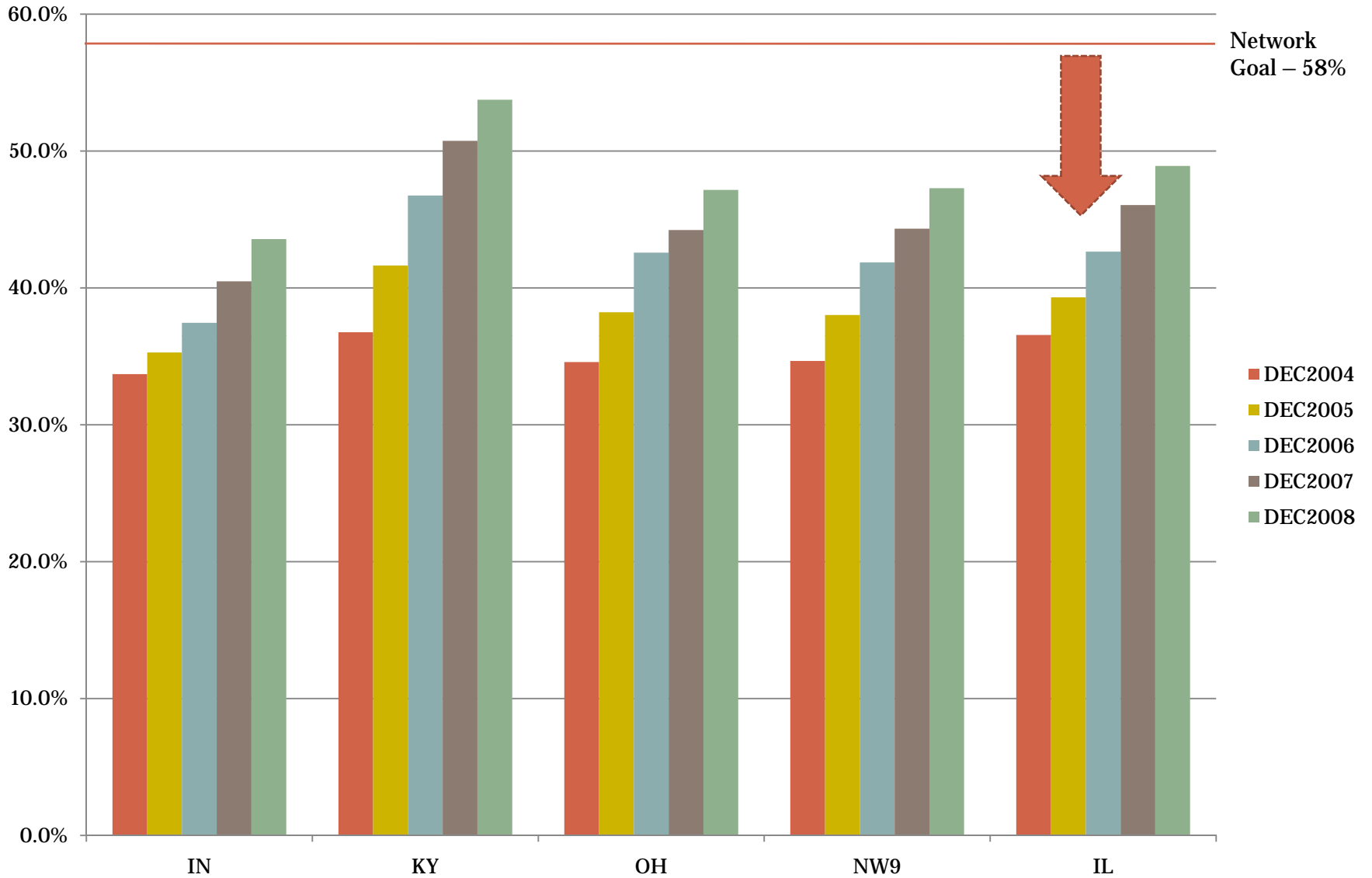
Vascular Access Prevalent Catheter Rates

December 2007

December 2008



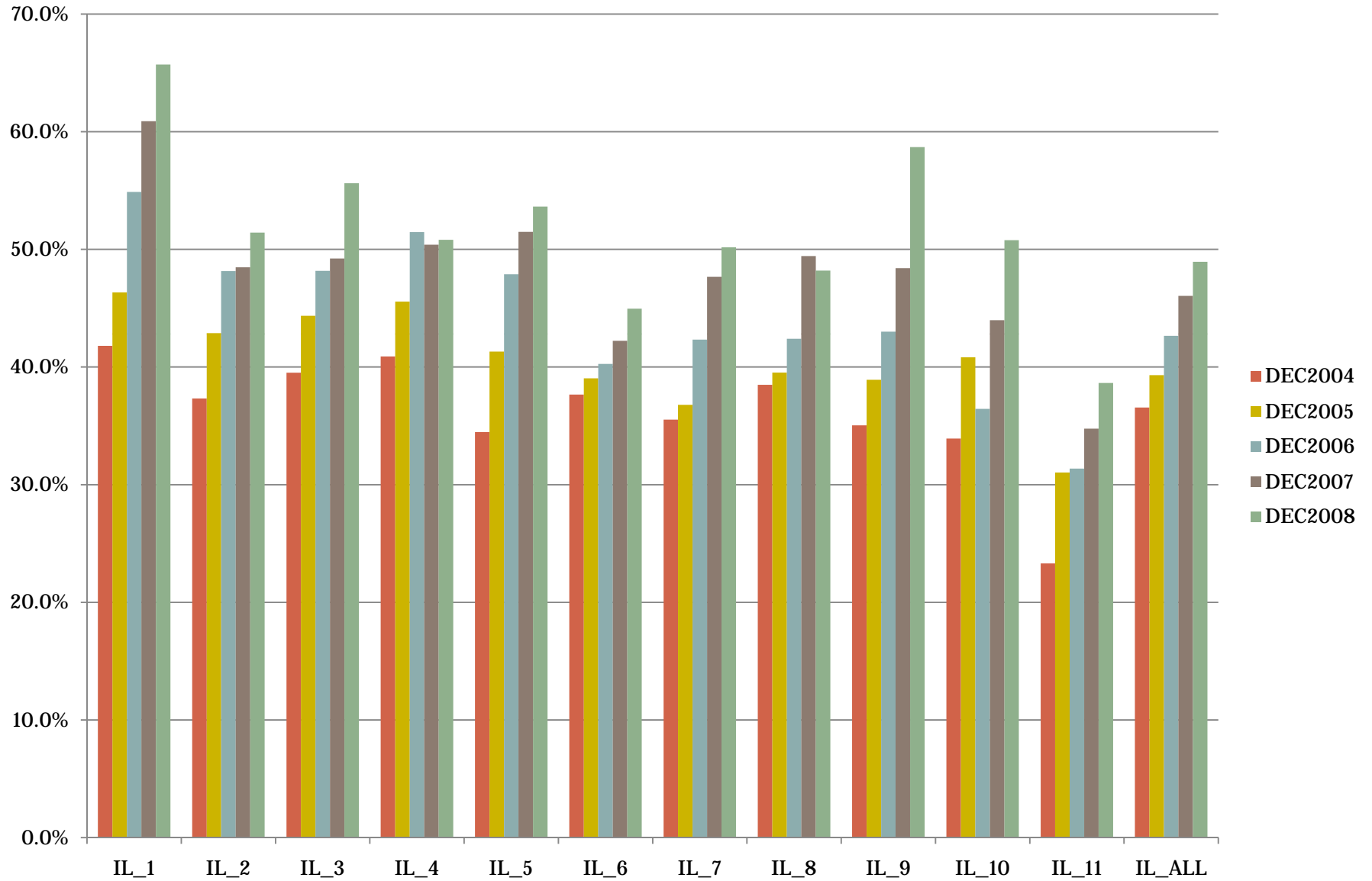
% Prevalent Patients Using a Fistula by State & Network



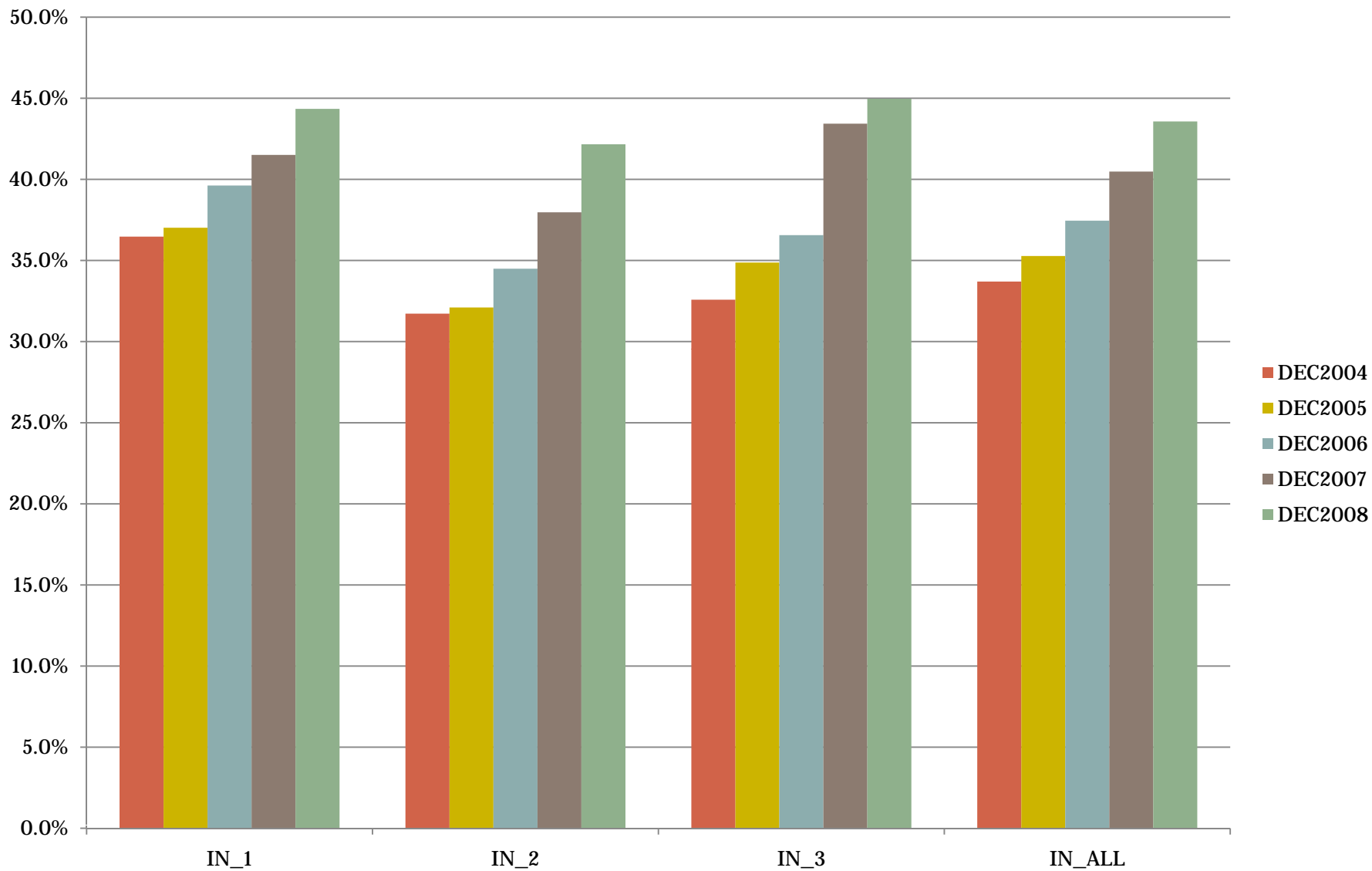
Network Goal – 58%

- DEC2004
- DEC2005
- DEC2006
- DEC2007
- DEC2008

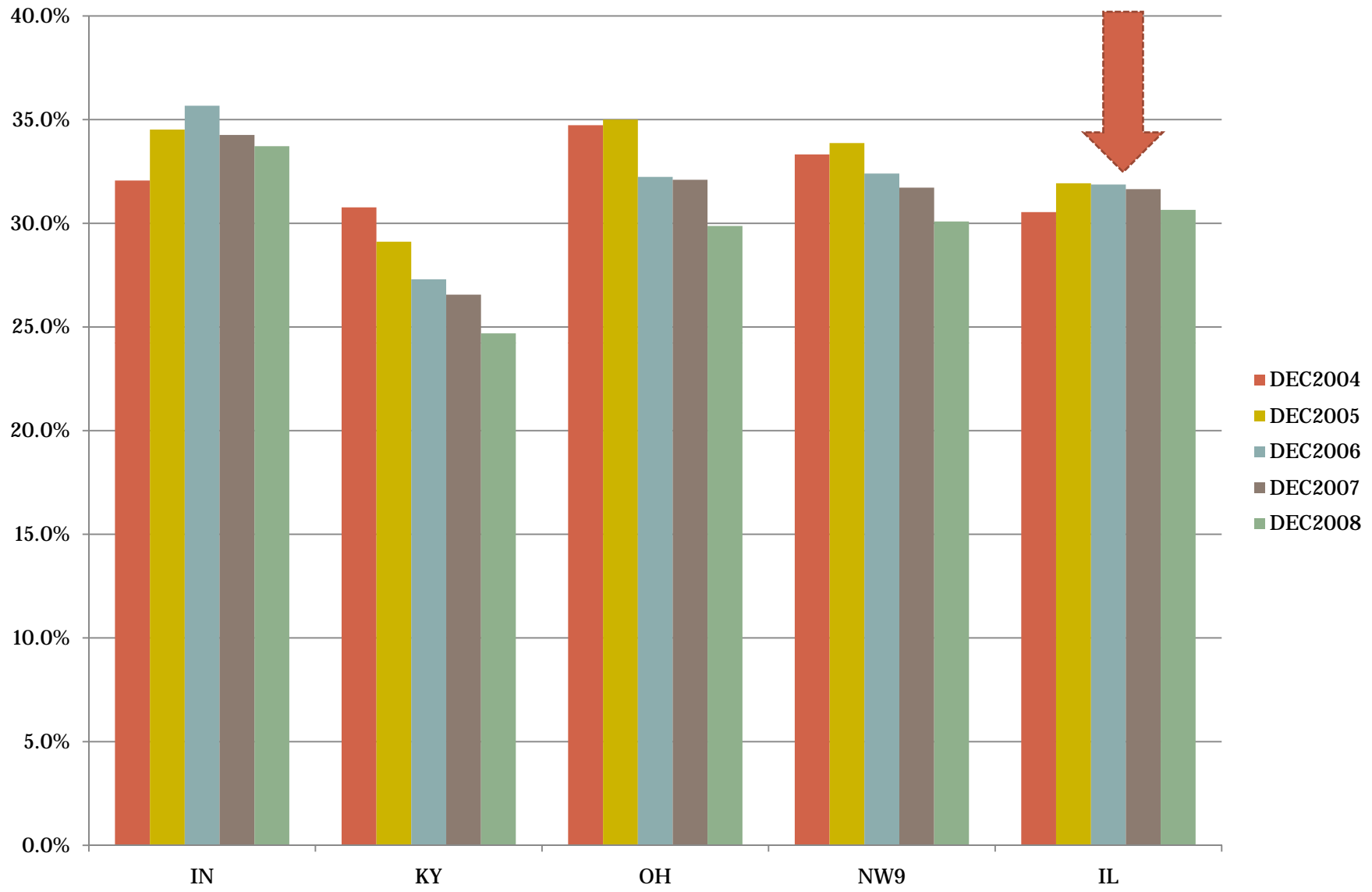
% Prevalent Patients Using a Fistula by HSA Illinois



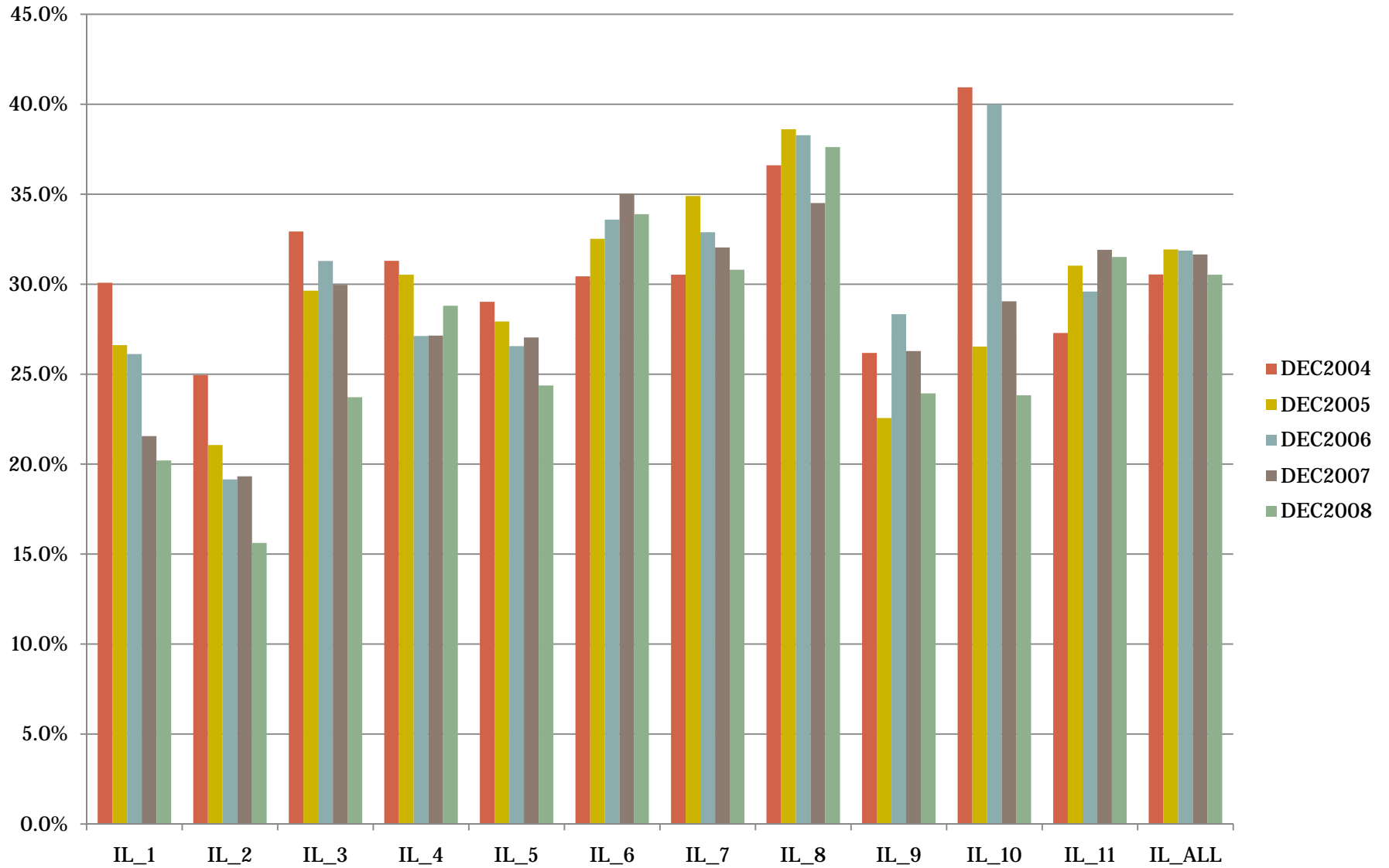
% Prevalent Patients Using a Fistula by HSA Indiana



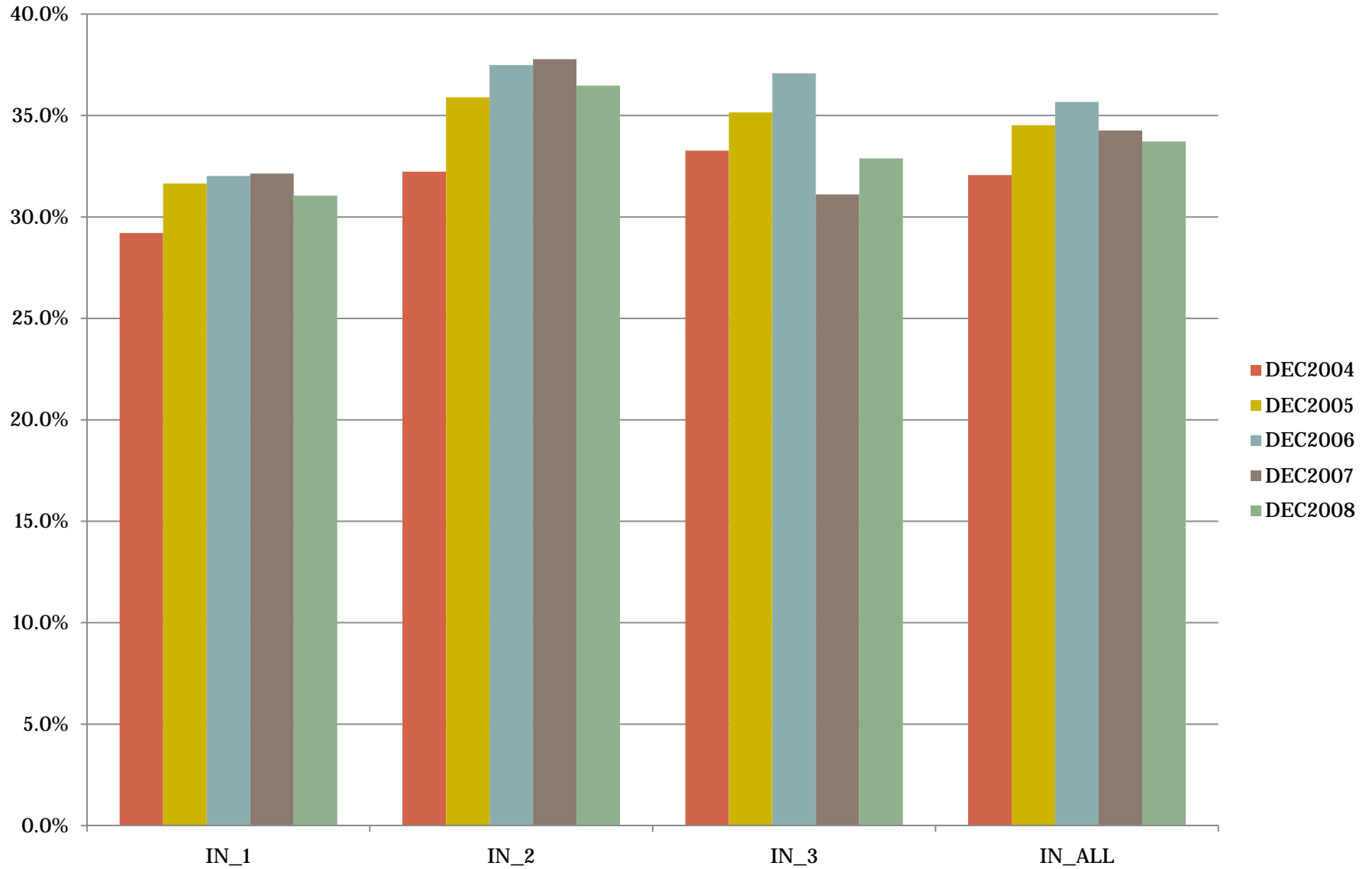
% Prevalent Patients Using a Catheter by State & Network



% Prevalent Patients Using a Catheter by HSA Illinois



% Prevalent Patients Using a Catheter by HSA Indiana



Quality Assessment & Performance Improvement Condition §494.110



- Facilities must develop, implement, maintain and evaluate an effective, data-driven, quality assessment and performance improvement program.
- All professional members of the interdisciplinary team must participate.
- Program must reflect the complexity of the facility's organization & services (including services provided under arrangement)

Termination of Medicare Coverage

§488.604



- (a) ...failure of a supplier of ESRD service to meet one or more conditions for coverage set forth in part 494 will result in the termination of Medicare coverage
- (b) ... [can be] based solely on supplier's failure to participate in network activities and pursue network goals as required at §494.180(i) of this chapter

Quality Assessment & Performance Improvement



The facility must:

- Must have a written plan describing QAPI scope, objectives, organization, responsibilities, participants & procedures
- Continuously monitor its performance
- Take actions that result in performance improvement
- Track to assure improvements are sustained over time



The facility Medical Director is ultimately responsible for the program!

Operational Responsibility for QAPI



- Review Quality Indicators
- Education of facility medical staff in QAPI objectives
- Review method of prioritizing QI projects
- Inclusion of all staff in QAPI
- Communication with governing body
- Participation in evaluation of effectiveness of QAPI



Medical Director Responsibilities



- The Medical Director is assigned operational responsibility for the QAPI program
- The Medical Director must continuously communicate with the governing body about the status of QAPI activities, particularly when resources are required to address program improvements.
- Materials documenting the QAPI program should include evidence of active participation and oversight by the Medical Director

QAPI: Facility-Based Assessment and Improvement of Care



- **Compliance determined by**
 - Review of clinical outcomes
 - Data & records of QAPI activities
 - Interviews of responsible staff including MD
- **Failure**
 - Absence of an effective QAPI program
 - Failure to recognize & prioritize major problems
 - Failure to take action to address identified problems



QAPI Requirements

Facility must measure, analyze and track quality indicators that reflect process of care & facility operations – including (but not limited to)

(V629) Adequacy	Kt/V, URR
(V630) Nutrition	Albumin, body weight
(V631) Bone disease	PTH, Ca+, Phos
(V632) Anemia	Hgb, Ferritin
(V633) Vascular access	↑Fistula, ↓catheter rate
(V634) Medical errors	↓Frequency of specific errors
(V635) Reuse	↓Adverse outcomes
(V636) Pt satisfaction	↑Survey scores
(V637) Infection control	↓Infections, ↑vaccination status

Network QI Staff Are Available



- **Assist in problem solving**
- **Data analysis**
- **QAPI design and implementation**
 - Templates
 - Statistical consultation
- **Resources for resolving patient-provider conflict**
 - assist in grievance resolution
 - Involuntary discharge
- **Patient Education Literature**
- **Staff Education and Training**

QAPI Templates



Developed by The Renal Network, Inc. to assist dialysis facilities in meeting § 494.110

- It is not mandatory for facilities to use these QAPI templates (unless participating in a Network project)
- Facilities may use these templates or adapt them to better fit their specific needs.
- Templates will be posted on The Renal Network website www.therenalnetwork.org as they are completed.

QAPI Template Objectives



- To help facility staff understand and meet the requirements of §494.110 condition.
- Provide tools necessary for an evidence-based quality improvement program.
- Provide tools to assist facilities in sustaining improvements.
- Provide an appropriate format for a facility to demonstrate evidence of its quality assessment and performance improvement program.

Vascular Access Template



Components Of VA Template Include:

- CQI Action Plans
- Barriers Questionnaire
- Data Collection Tool which includes facility, Nephrologist and Surgeon reports.
- Needs Assessment Tool



Facilitates the achievement of optimal wellness for renal disease patients.

<http://www.therenalnetwork.org/>

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Welcome!

New and Noteworthy

- New [ESRD Program Interpretive Guidelines](#)
- [State Survey Training Manual](#)
- [NANT Offers Study Package for Dialysis Technician](#)
- Patient nominations now being accepted for for the [Robert Felter Memorial Awards](#)
- Click on link to view an online WebEx recording of [QAPI Meeting Condition 5494.110 of CMS Conditions for Coverage](#) (Click on link to view [QAPI Templates](#))
- Introducing [Keeping Kidney Patients Safe](#) Web site
- [Infection Control Requirements for Dialysis Facilities and Clarification Regarding Guidance on Parenteral Medication Vials](#) (August 15, 2008)
- [HHS Takes New Steps to Accelerate Adoption of Electronic Prescribing](#) (July 21, 2008)
- [2007 Annual Statistical Report](#)

Upcoming Network Meetings

- [Medical Directors Meeting - October 21, 2008](#)
- [DPC WebEx Training](#) - November 12, 2008
- [2008 QI Learning Sessions](#) - October 30 (Chicago IL), November 18 (Cleveland OH) and November 20 (Indianapolis)
- [2008 Preparing for CROWNWeb](#) - Informational WebEx session to be offered on September 23, 24; October 7, 8, 16, 21, 22, 29; November 5
- [2009 Network Council Meeting](#) - March 9, 2009
- [2009 Nephrology Conference](#) - March 10 & 11, 2009

QUESTIONS ?

