



ESRD PROGRAM GOALS

JANUARY 1, 2016 - NOVEMBER 30, 2020

Each facility agrees to participate and cooperate with the goals and activities, including quality improvement activities (QIAs), as set forth by IPRO ESRD Network of New England as stated in 42 CFR Part 494.180.V772 (i) of Centers for Medicare & Medicaid Services (CMS) regulations.

Any changes to key staff and emergency contacts must be updated in CROWNWeb and reported to the Network five (5) business days. Goals are reviewed annually, and are subject to change based on CMS Statement of Work (SOW) modifications. Please refer to the Network website <http://network1.esrd.ipro.org> for the most current information on the SOW and QIAs.

PATIENT SERVICES & COMMUNITY OUTREACH

- **Patient and Family Engagement/Patient and Family Centered Care:** Facilities will support active involvement of patients and their families in the design of new care models, and in decision-making about individual options for treatment. Facilities will provide care that is respectful of and responsive to individual patient preferences, needs, and values, and ensuring that patient values guide all clinical decisions.
- **Disaster and Emergency Preparedness:** Facilities will have contingency plans in place, including a back-up facility for treatment that is shared with physicians, staff members, patients, and the Network. As per the CMS Emergency Preparedness Rule, facilities must conduct exercises (full-scale and table-top) to test the emergency plan at least annually. Facilities must notify the Network in the event of a closure, delayed opening, or altered treatment schedule. Facilities are required to contact their local emergency management offices at least annually.
- **Conflict Resolution:** Dialysis facilities will follow the Conditions for Coverage related to conflict resolution, internal grievance process, patients' rights and responsibilities, patient transfer and involuntary discharge. Facilities must notify the Network and State Agency prior to all Involuntary Discharges.
- **Network, Patient Rights & Responsibilities & Grievance Posters, Performance Score Card (Quality Incentive Program related):** Every dialysis facility will display the poster(s) and report(s) in a prominent location within all of the patients view.
- **Qualified and Trained Staff:** The facility staff must meet personnel qualification and demonstrated competencies needed to perform the specific duties of their positions.
- **Psychosocial Status:** Facilities are required to survey physical & mental functioning of patients as outlined in the Quality Incentive Program.
- **Educational Information:** Resources developed by the Network can be made available to all ESRD patients and staff by contacting the Network at 203-387-9332 or <mailto:esrdnetwork1@ipro.us>.



QUALITY IMPROVEMENT

- **Monitoring of Clinical Outcomes and Quality Incentive Program (QIP) Scores:** Facilities are required to monitor quality measures to meet standards of care and CMS goals, which determine a facility's performance score. Please refer to the Measures Assessment Tool and ESRD Quality Incentive Program information available on the Network website.
- **Quality Assessment and Performance Improvement (QAPI):** Dialysis facilities will measure, analyze, and track quality indicators, per the Conditions for Coverage. Patient participation in QAPI meetings is strongly encouraged by CMS.
- **All patients will be provided with education on all available modality options annually** (including CAPD/CCPD, In-Center/Home HD, transplant options, and palliative care)

INFORMATION MANAGEMENT

- **Forms:** Facilities are expected to be accurate and timely with their submission of the 2728 (Eligibility) and 2746 (Death) forms in CROWNWeb.
- **CROWNWeb:** Electronic submission or verification of clinical data before the close of clinical months in CROWNWeb. Perform monthly validation of patient census under PART verification in CROWNWeb. **Maintain accurate list of staff contact information in CROWNWeb.** Complete all action items in CROWNWeb.
- **EIDM:** All facilities must maintain an adequate number of CROWNWeb user accounts, with at least a primary user and one back-up user per facility.
- **Quality Incentive Program (QIP):** Facilities should maintain an adequate number of users that have access to the QIP portion of CROWNWeb. Download and comment on Performance Score Reports and Dialysis Facility Reports in a timely manner. Performance Score Certificates must be downloaded and posted per annual requirement.
- **DialysisData.org:** Facilities must maintain access to the Dialysis Facility Reports website and update Master Account Holder (MAH) information.
- **National Healthcare Safety Network (NHSN):** Facilities must enroll in NHSN to report infection data on a monthly basis and comply with CMS Quality Incentive Program requirements.