

Network #15/ CMS
2010-2011 Quality Assessment and Performance Improvement
Measures Goals

494.110 Quality Assessment & Performance Improvement (QAPI): The dialysis facility must develop, implement, maintain, & evaluate an effective, data-driven QAPI program with participation by the professional members of the IDT. The program must reflect the complexity of the organization & services (including those under arrangement), & must focus on indicators related to improved health outcomes & the prevention & reduction of medical errors. The dialysis facility must maintain & demonstrate evidence of its QAPI program including continuous monitoring form CMS review. Refer to your ESRD Network's goals for targets for aggregate patient outcomes.

Condition/Standard	QA Measure	Goals	MRB Recommendations
Health outcomes: Physical and mental functioning	Survey adult /pediatric patients KDQOL-36 survey annually or more often as needed	<ul style="list-style-type: none"> Achieve & sustain appropriate status ↑% completing survey 	Facility set goals
Health outcomes: Patient hospitalization	Standardized mortality ratio (1.0 is average, > 1.0 is worse than average, < 1.0 is better than average)	<ul style="list-style-type: none"> ↓hospitalizations 	Facility set goals based on DFR report results
Health outcomes: Patient survival	Standardized mortality ratio (1.0 is average, > 1.0 is worse than average, < 1.0 is better than average)	<ul style="list-style-type: none"> ↓mortality 	Facility set goals based on DFR report results
Adequacy HD: Adult (monthly)	HD: Adult (patient with ESRD ≥ 3 mo) Kt/V ≥ 1.2 (single pool) or URR ≥ 65%	<ul style="list-style-type: none"> ↑% with single pool Kt/V ≥ 1.2 or URR ≥ 65% if 3 times/wk HD sp Kt/V>2.0 if 5-6 times/wk HD single pool Kt/V > 2.0 if 5-6 times/week HD 	MRB / QIP Goal: At least 96% of patients achieve a URR ≥ 65% or Kt/V urea of ≥ 1.2 (single pool)
Adequacy PD: adequacy (Rolling average, each patient tested ≤ 4 mths)	PD: Adult weekly Kt/V _{urea} Perform adequacy tests at least q 4 months and prn for adult patients Perform adequacy tests at least q 3 months and prn for pediatric patients	<ul style="list-style-type: none"> ↑ % with weekly Kt/V_{urea} ≥1.7 (dialysis + RKF) 	MRB Goal: 100% of adult PD patients achieve 1.7 weekly Kt/V _{urea} 100% of all pediatric patients achieve 1.7 or 1.8 weekly Kt/V _{urea}
Nutritional Status	Serum albumin rate of 4.0/3.7 gm/dL (BCG/BCP) *The large majority of facilities use labs that compute albumin levels using the BCG method	<ul style="list-style-type: none"> ↑% of patients within target range on albumin and other nutritional parameters set by the facility (see V509) 	Facility set goals At least 35% of all HD & PD patients should achieve an albumin rate of 4.0/3.7 gm/dL (BCG/BCP)

Condition/Standard	QA Measure	Goals	MRB Recommendations
Mineral metabolism/ Renal bone disease	Serum calcium, phosphorous, & PTH	<ul style="list-style-type: none"> ↑% in target range monthly Ranges (KDOQI) : Ca: 8.4-9.5 mg/dL P: 3.5-5.5 g/dL Ca x P product: ≤ 55 mg ² /dL ² PTH_{intact}: 150-300 pg/mL <small>KDIGO b/w 2 and 9 x normal limit</small>	This information is subject to change due to clarification of the evidence grading system and inclusion of newly published evidence.
Anemia Patients taking ESAs &/or patients not taking ESAs	Mean hemoglobin (patient with ESRD ≥ 3 mo) Mean hematocrit Serum ferritin & transferrin sat or CHR	<ul style="list-style-type: none"> ↑% with mean 10-12 g/dL ↑% with mean 30-36% Evaluate if indicated 	MRB Goal: 85% of all patients have a Hgb b/w 11-12 gm/dL QIP Goal No more than 2% < 10 gm/ dL and No more than 26% >12 gm/ dL CMS goal: Hgb 10-12 gm/dL
Vascular Access (VA) Evaluation of VA problems, causes, solutions (Includes patients on dialysis for ≤ 90 days)	Cuffed catheters > 90 days AVFs used for dialysis- 2 needles Thrombosis episodes Infections per use-life of access VA patency	<ul style="list-style-type: none"> ↓ to < 10% ↑ to ≥ 65% or ≥ 66% ↓0.25/pt yr for AVF ↓0.50/pt yr for AVG ↓ to < 1% for AVF, < 10% for AVG ↑ % with AVF > 3 yr and AVG > 2 yr 	MRB Goal: 66% AVF <u>used</u> for hemodialysis- 2 needles
Medical injuries and medical errors identification	Medical injuries & medical errors reporting	<ul style="list-style-type: none"> ↓ frequency through prevention, early identification & root cause analysis 	Facility set goals
Reuse	Evaluation of reuse program including evaluation & reporting of adverse outcomes	<ul style="list-style-type: none"> ↓ adverse outcomes 	Facility set goals
Patient satisfaction & grievances	Report & analyze grievances for trends using CAHPS In-Center Hemodialysis Survey or any patient satisfaction survey	<ul style="list-style-type: none"> Prompt resolution of patient grievances ↑% of patients satisfied with care 	Facility set goals
Infection control For general purposes the CDC recommends that you track infections/100 patient months for patients with each type of vascular access. For PD monitor both exit site infections (ESIs) and episodes of peritonitis (EOP). EOP: episodes/ pt mth or yr ESI: episodes/ pt mth or yr	Analyze & document incidence for baselines & trends.	<ul style="list-style-type: none"> Minimize infections & transmission of same Promote immunizations 	Facility set goals based on DFR reports, CDC reports or facility-specific trends

Condition/Standard	QA Measure	Goals	MRB Recommendations
Vaccinations	Hepatitis B, influenza, & pneumococcal vaccines Influenza vaccination by facility or other provider	<ul style="list-style-type: none"> • ↑ % of patients vaccinated on schedule • ↑ % of patients receiving flu shots 10/1-3/31 	MRB Goal: 90% of all patients should be vaccinated for Hepatitis B, influenza and pneumococcal pneumonia

These recommendations are designed to assist you in your decision-making. They are not intended to define a standard of care, nor should they be interpreted as prescribing an exclusive course of management. The MRB feels that units able to achieve the stretch recommendations above are providing care that exceeds the current standards of practice. These are not the only indicators that determine the quality of care provided to dialysis patients. The annual E-Lab Summary Report and the National Kidney Foundation's Kidney Disease Outcomes Quality Initiative (K/DOQI) provide many additional clinical outcome goals that are now recommended for dialysis patients. Additionally, please check periodically for updates to the CMS Measures Assessment Tool (MAT) which is posted on www.esrdnet15.org.