

ACTION PLAN FOR INCREASING AV FISTULA USE



DUE DATE: December 7, 2007

COMPLETION STEPS

1. Assess your current AV Fistula Outcomes
2. Identify the root causes / barriers to AV Fistula use
3. Identify procedural changes to be made
4. Complete your action plan
5. Return worksheets and Action Plan to the Network

Step One

Graph the % of your patients dialyzing via AV fistula reviewed by the CQI committee

Assess your current AVF outcomes

Facility Name _____ Facility Provider Number _____ Date _____

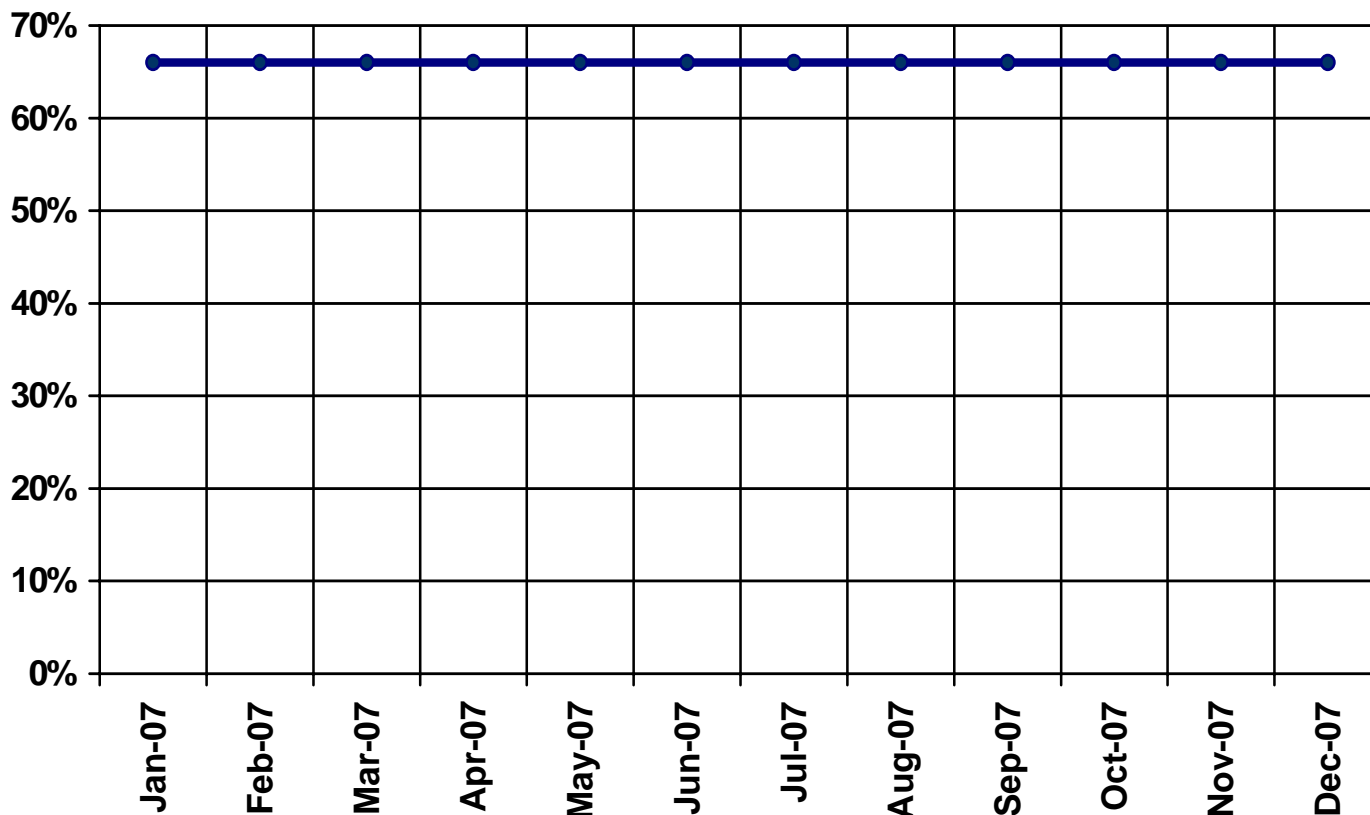
1. Calculate your current fistula rates
2. Using the attached report and the data here, graph your fistula rate below

Month	Total patients dialyzing on last treatment day of each month	Of the patients in the first column, what percentage dialyzes via the following access types?					
		AV Fistula		AV Graft		Catheter/Port	
		#	%	#	%	#	%
Aug 07							
Sep 07							
Oct 07							

% = # of patients dialyzing via the access divided by total number of patients

% of Patients Dialyzing via AV Fistula

—● CMS/KDOQI Goal: 66%



Our AV Fistula Rate is _____ percentage points Above / Below the 66% CMS/KDOQI goal

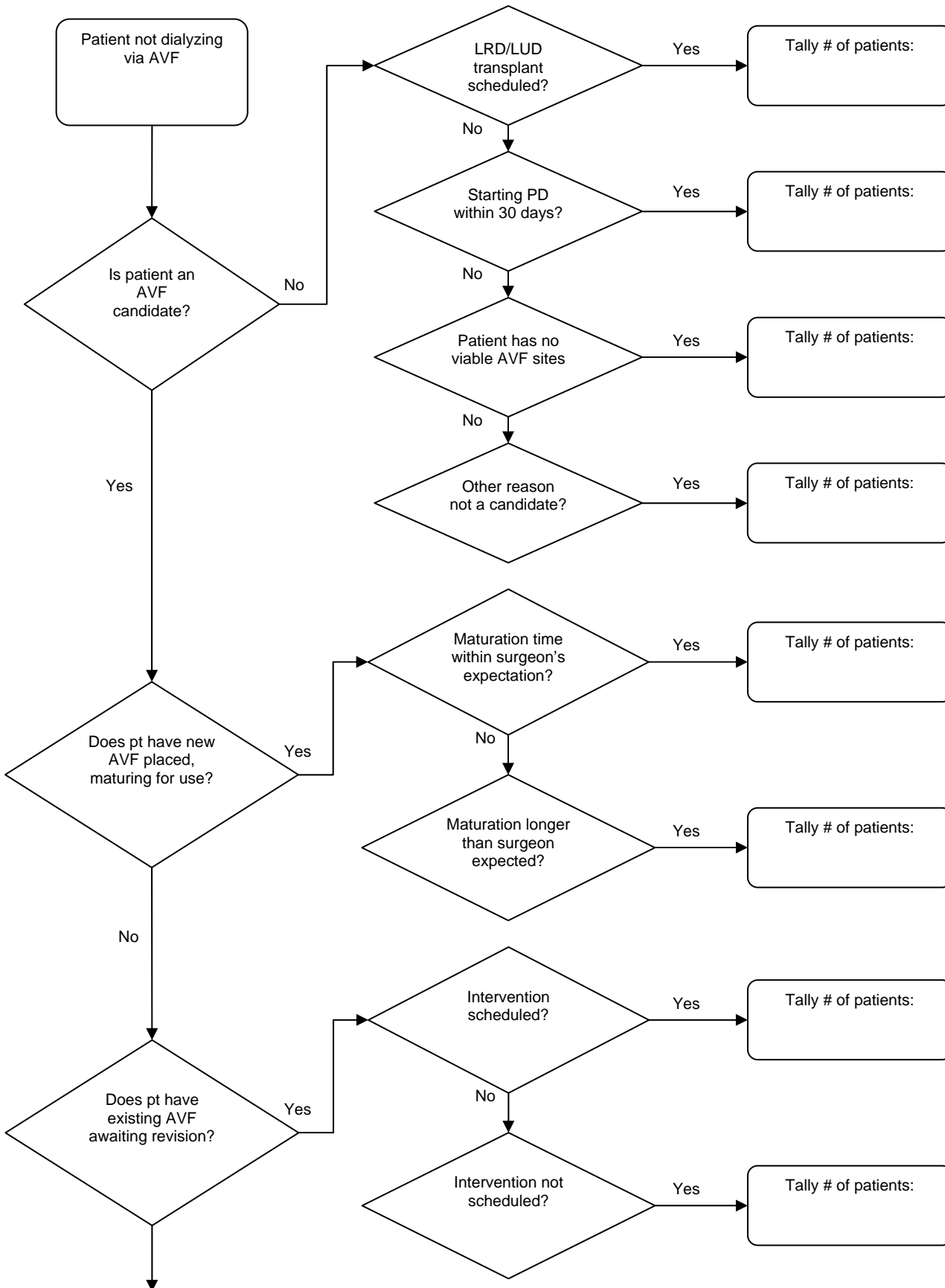
Our AV Fistula Rate is Increasing Decreasing Staying the same

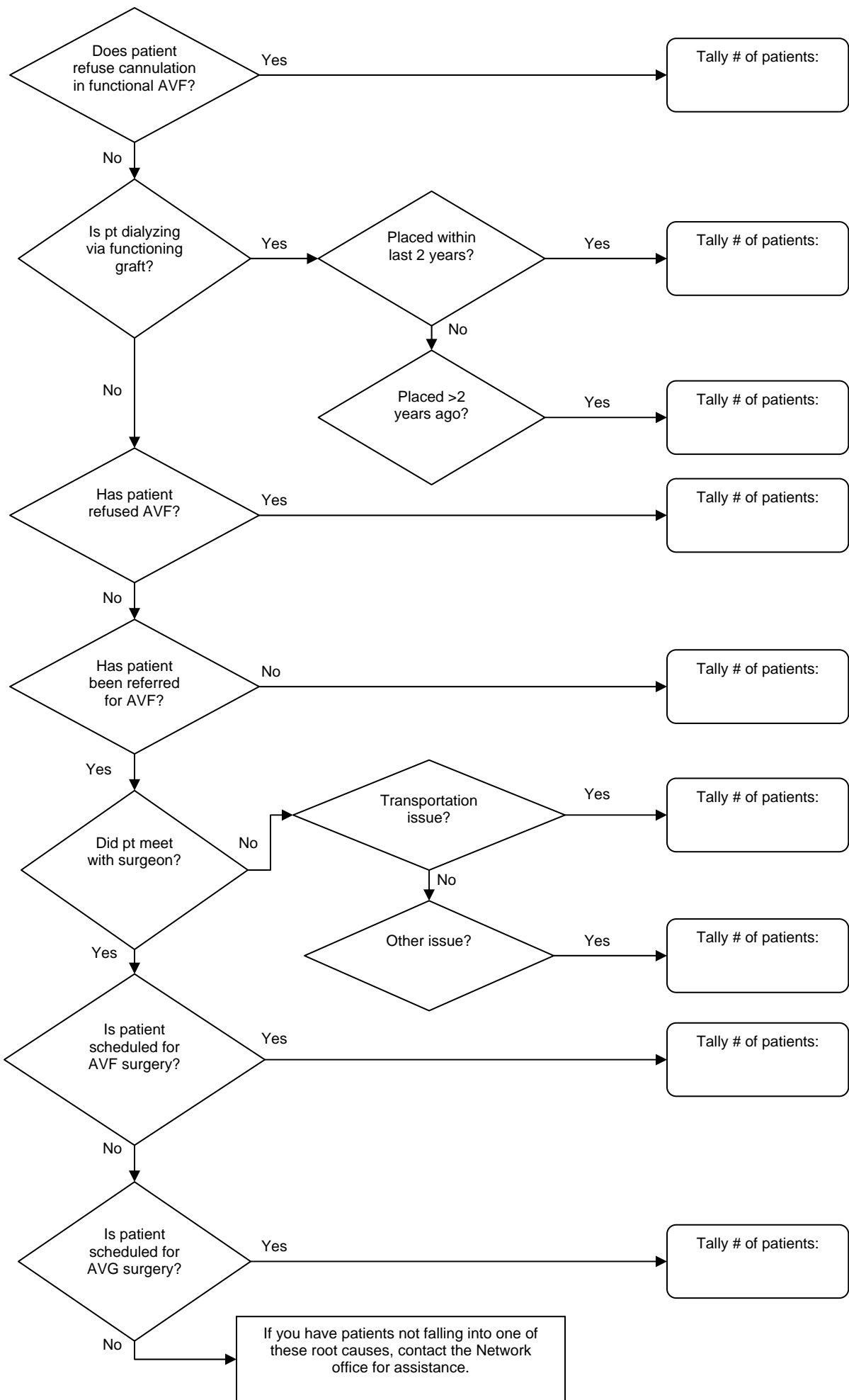
MD signature _____

Step Two

Review each patient who did not dialyze via AVF on the last day of October 2007 and count them below by the primary reason. Count each pt only once.

Assess your current AVF outcomes





Step Three

Under which Root Causes in Step
Two did you report the most patients?
What procedure changes will you
make to address those issues?

Identify
procedure
changes

Find the box on your root cause assessment with the highest number of patients reported. State that as a problem statement.

Examples:

“73% of our patients have not been referred for an AVF.”

“12% of our patients have a failed AVF each month”

“26% of our patients have refused to have an AVF placed.”

Repeat for the 2nd and 3rd most frequently reported causes.

Root Cause #1: (Example - Cannulation training scheduled)

What procedure(s) will you implement or change to address this root cause?

Root Cause #2: (Example – Process to refer new patients to surgeons upon admission for A-V fistula)

What procedure(s) will you implement or change to address this root cause?

Root Cause #3: (Example – Process to convert failed grafts to A-V fistula)

What procedure(s) will you implement or change to address this root cause?

**Step
Three
(cont.)**

Here are some tips to help you identify processes related to root causes

Identify procedure changes

Patients have no viable AV Fistula Sites
<ul style="list-style-type: none">▪ What can you do to preserve existing AVFs for other patients?▪ Do you have a program for cannulation training and retraining?▪ Seek surgeon able to place AVF▪ Do you conduct vessel mapping?▪ Have you trained staff on the buttonhole technique?
Patients have fistulas placed; waiting for them to mature
<ul style="list-style-type: none">▪ What are your procedures for AVF evaluation and revision referral?▪ What is your new patient referral program?▪ Do you have a program for pre-ESRD education and fistula placement?
Patients have functioning grafts instead of AV Fistula
<ul style="list-style-type: none">▪ Are these recently placed?▪ Is/are your surgeon(s) fistula-friendly?▪ What is your surgeon referral procedure?▪ Are you converting failed grafts to fistulas?▪
Patients refuse to have fistula placed or refuse to let you cannulate their fistula
<ul style="list-style-type: none">▪ What education does your facility provide to patients? To staff?▪ Is there a common theme on why patients refuse?▪ What role does the nephrologist play in counseling patients on fistula placement?▪ Do you promote self-cannulation?▪ Do you use the buttonhole technique?▪ Do you use topical ointment?
Patients haven't been referred for AVFs
<ul style="list-style-type: none">▪ What is the procedure for referring patients?▪ What is the procedure for following up on referrals and surgeon appointments?▪ Who is responsible for follow up?
Patients can't get transportation to surgeon
<ul style="list-style-type: none">▪ What assistance do you provide?▪ Is the Social Worker involved in AVF referral?▪ Does your referral process address transportation issues?▪ Does your referral process include involving the family and/or nursing home in transportation?

Step Four

Develop a plan to address the necessary process changes and meet your goals. Set measurement dates and assign responsibility.

Complete Action Plan

Problem Statement: Our AV Fistula Rate is _____ percentage points <input type="checkbox"/> Above / <input type="checkbox"/> Below the 66% CMS/KDOQI goal Our AV Fistula Rate is <input type="checkbox"/> Increasing <input type="checkbox"/> Decreasing <input type="checkbox"/> Staying the same						Facility Name: <hr/> Person completing report: <hr/> Date: <hr/> Medical Director Signature: <hr/>
Outcome Measures: <ul style="list-style-type: none"> •By December 31, 2007, our rate of patients dialyzing via AVF will be _____% •By March 31, 2008, our rate of patients dialyzing via AVF will be _____% •By June 30, 2008, our rate of patients dialyzing via AVF will be _____% •By September 30, 2008, our rate of patients dialyzing via AVF will be _____% 						
Data Required-Needed Resources:						
The Medical Director will play the following role in this Action Plan:						
Action Plan <small>(Steps – be specific and include activities already underway)</small>	Responsible <small>Team Member</small>	Start <small>Date</small>	Estimated <small>Completion Date</small>	Checkpoint <small>Dates</small>	Date <small>Completed</small>	Comments <small>(Status, outcomes, disposition, etc)</small>

Action Plan (Steps – be specific and include activities already underway)	Responsible Team Member	Start Date	Estimated Completion Date	Checkpoint Dates	Date Completed	Comments (Status, outcomes, disposition, etc)