



## Five Steps to Developing a Vascular Access Improvement Plan (VAIP) for Your Facility

- ⇒ *Targeting your facility's internal barriers to improving VA outcomes*
- ⇒ *Focusing on strategies to address facility-specific VA opportunities for improvement*

**Step 1: Medical Director, Nurse Manager and VA Coordinator complete Barrier Assessment Tool**

**Step 2: Assess percent of facility's VA outcomes by type using VA Algorithm**

**Step 3: QAPI Team reviews Barrier Assessment Tool and agrees on facility's primary internal barrier**

- Download VA Toolkit that corresponds to facility's internal barrier
- VA Toolkits available on NW #14 website at [www.esrdnetwork.org](http://www.esrdnetwork.org) – Professionals – Fistula First
- Assign QAPI Team members to review VA Toolkit components and to identify the following for development of the VA Improvement Plan (VAIP)
  - ✓ Specific action to be taken by staff
  - ✓ A way to measure how well action is implemented
  - ✓ Most appropriate staff person to complete the action
  - ✓ Tentative date action could feasibly be implemented
  - ✓ Length of time needed for completion of action
  - ✓ When measurements should occur during implementation of action
  - ✓ A way to determine if action resulted in a positive change
  - ✓ Plan for continuing action if needed (if improvements resulted from action)
  - ✓ Revisions to action plan if needed

**Step 4: QAPI Team reviews VA Algorithm to identify need to implement improvement activities for outlier VA outcomes (i.e., High Catheter rates, High AVG rate with patients presenting with dysfunctional AVGs and/or high Facility Thrombosis Rate)**

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**Step 5: a) Prioritize improvement actions needed for primary internal barrier and outlier VA outcomes  
b) Using VA Template - list improvement actions to be implemented by priority  
c) Complete VA Template using information developed in Step 3 and Step 4 above.**