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Patient-Centered Care

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Advances in healthcare allow individuals to live longer and have a better quality of life, but individuals must be able to manage these advances. For the ESRD patient, this includes a complex drug, diet, and treatment regimen over the course of his/her lifetime. In order for ESRD patients to do this, they must be engaged in their care.

Medicine is changing from a paternal, authoritative style to a model of patients having a say in their own care and thus having improved outcomes. The ESRD Networks and CMS have joined efforts to address and promote patient engagement through a variety of strategies.

These strategies include:

- Promoting patient and family engagement at the facility level
- Establishing a Patient Engagement Learning and Action Network (PE LAN)
- Involving more patients and family members in Network Board and Committees
- Looking to our patients as Subject Matter Experts (SMEs)

The Network defines engagement as “actions individuals must take to obtain the greatest benefit from the health care services available to them.” More specifically, patient engagement is the patient being aware of his/her own role in the success of his/her treatment. Patients are our greatest natural resource, yet the most untapped in the ESRD community.

More information on patient-centered care can be found in the Network’s January 2013 professional newsletter. To locate a copy, go to the Network’s website at www.esrdnetwork.org → Our Network Newsletters → Professional Newsletters → Special Edition—January 2013.



Continued on page 2...



...Continued from page 1

The Network has also created a new page on our website to house Patient-Centered Care and Patient Engagement Resources. The page can be located on the Network's website at www.esrdnetwork.org -> Our Network -> Patient Centered Care and Patient Engagement. There is a page for both professionals and patients. On March 22, the Network hosted a Patient-Centered Care and Patient Engagement webinar featuring a patient speaker and Dori Schatell, Executive Director of the Medical Education Institute (MEI). If you were unable to attend the live webinar a recording is available on the Patient-Centered Care webpage. CEUs and CNEs are available for those that view the webinar recording, complete the attendance record and evaluation and return to the ESRD Network. As part of the Network's efforts to assist providers in adjusting to the heightened focus of Patient-Centered Care and Patient Engagement, mail outs will be sent to all facilities containing resources for both professionals and patients. The first Patient-Centered Care and Patient Engagement mail out was sent to all facilities the week of April 9.

For more information contact Anna Ramirez at aramirez@nw14.esrd.net or 469-916-3800.

Community Corner

2013 Virtual Council Meetings Webinar Series Hosted by the Mid-Atlantic Renal Coalition

In 2013, the Mid-Atlantic Renal Coalition will host a series of educational webinars, which will replace the Back to School workshops offered in years past. The 2013 series will consist of 1-hour webinars, most of which will be conducted during lunchtime. Webinars are \$25 per facility, per webinar, for continuing education credit. The \$25 covers CE credits for every participant in the facility.

Next Session:

Buttonhole Cannulation

Presenter: Lynda Ball MSN, RN, CNN

Vascular Access Specialists, Fresenius Medical Care

Tuesday, June 18, 2013

12:00 noon - 1:00 PM, Eastern

Course Objectives:

- Describe Buttonhole Cannulation Technique
- Demonstrate Buttonhole Cannulation Technique
- Identify barriers to using Buttonhole Cannulation Technique

For questions or for a list of the webinars contact Terri Cally at 804.320.0004 or tcally@nw5.esrd.net



FDA Alerts

Nationwide Recall of One Lot of 0.9% Sodium Chloride Injection Due to Brass Particulates

Hospira, Inc. announced it is initiating a voluntary nationwide user-level recall of one lot of 0.9% Sodium Chloride Injection, USP, 1000 mL, Flexible Container, NDC 0409-7983-09, lot number 25-037-JT (the lot number may be followed by a -01 or -90). This action is due to one confirmed customer report where brass particulate was identified in the primary container in the form of several small gray/brown particles. To date, Hospira has not received reports of any adverse effects associated with this issue for this lot and has not identified any quality issues with retention samples for this lot. This recall is being conducted as a precautionary measure. Anyone with an existing inventory should stop use and distribution, quarantine the product immediately, and call Stericycle at 1-888-480-2853 between the hours of 8am to 5pm EST, Monday through Friday, to arrange for the return of the product. Replacement product from other lots is available.

Affymax and Takeda Announce a Nationwide Voluntary Recall of All Lots of OMONTYS® (peginesatide) Injection

Affymax, Inc. (Nasdaq: AFFY) and Takeda Pharmaceutical Company Limited (Takeda) decided to voluntarily recall all lots of OMONTYS® (peginesatide) Injection at the user level as a result of new postmarketing reports regarding serious hypersensitivity reactions, including anaphylaxis, which can be life-threatening or fatal. Dialysis organizations are instructed to discontinue use. Customers will be provided instructions on how to return the product to the manufacturer for a refund. For customers with questions, please call 1-855-466-6689 [9:00 a.m. to 5:00 p.m. Eastern Standard Time, Monday through Friday].

Clinical Specialties Compounding Pharmacy Announces Voluntary Nationwide Recall of All Lots of Sterile Products Repackaged and Distributed by Clinical Specialties Compounding Due to Lack of Sterility Assurance

Clinical Specialties is voluntarily recalling all lots of all sterile products repackaged and distributed by the pharmacy due to lack of sterility assurance. The expanded recall follows the firm's initial recall of Avastin due to reports of five patients who have been diagnosed with serious eye infections associated with the use of the product. Sterile products covered under this recall were distributed nationwide between October 19, 2012 and March 19, 2013. Until further notice, health care providers should stop using all sterile products distributed by Clinical Specialties Compounding and return them to the company. Consumers or health care providers with questions regarding this recall may contact Clinical Specialties by phone at 1-866.880.1915 or by e-mail Monday through Friday between the hours of 10 am to 5 pm EST at clinicalrx@bellsouth.net. Patients who have received any product distributed by Clinical Specialties Compounding and have concerns should contact their healthcare provider.



NuVision Abbott Initiates Voluntary Recall of FreeStyle Insulinx® Blood Glucose Meters in the United States

Abbott announced it is initiating a voluntary recall of FreeStyle Insulinx® Blood Glucose Meters in the United States. The company has determined that at extremely high blood glucose levels of 1024 mg/dL and above, the FreeStyle Insulinx® Meter will display and store in memory an incorrect test result that is 1024 mg/dL below the measured result. No other Abbott blood glucose meters are impacted by this issue. For anyone that has one of these meters, customers can access a software update to resolve the issue at www.freestyleinsulinx.com/swupdate1. The software update will allow customers to maintain settings and historical data on their meter. They can also contact Abbott Diabetes Care Customer Service at 1-866-723-2697 to expedite return and replacement of their FreeStyle Insulinx® meter at no charge. Replacements are available, and Abbott will send meters to customers immediately upon request.

ApothéCure, Inc. Announces Voluntary Nationwide Recall of All Lots of All Sterile Products Compounded, Repackaged, and Distributed by ApothéCure, Inc. Due to Sterility Assurance Concerns

ApothéCure, Inc. is voluntarily recalling all lots of sterile products compounded by the pharmacy that are not expired at the user level. The recall is being initiated due to the lack of sterility assurance and concerns associated with the quality control processes. The sterile products include all injectables with the clear message, "Independently tested for sterility," noted on the vials, as well as the ApothéCure name. Consumers or health care providers with questions regarding this recall may contact ApothéCure, Inc. by phone at 1-800-969-6601 or 972-960-6601 between the hours of 9:30AM-6PM CST Monday-Friday or by e-mail at pharmacist@apothecure.com.

Balanced Solutions Compounded Sterile Products: Recall Due To Lack of Sterility Assurance

Balanced Solutions Compounding Pharmacy, LLC announced a voluntary recall of all lots of sterile products compounded by the pharmacy that are not expired. The recall is being initiated due to concerns associated with quality control processes, which present a lack of sterility assurance. Patients are at increased risk for infections in the event a sterile product is compromised. Consumers or health care providers with questions regarding this recall may contact Balanced Solutions Compounding Pharmacy, LLC by phone at 407-936-2998 or 1-877-306-0008 between the hours of 9:30AM-6:00PM EST Monday-Friday or by e-mail at pharmacist@bshrx.com.



Cook Medical to Initiate Voluntary Global Recall of Zilver® PTX® Drug Eluting Stent

Cook Medical has initiated a voluntary nationwide/global recall of its Zilver® PTX® Drug Eluting Peripheral Stent. Cook received 13 complaints of delivery system tip separation with an occurrence rate of 0.043 percent. Two adverse events, including one death, occurred in cases where a tip separation was reported. Potential adverse events that may occur in cases where inner delivery catheter breakage occurs include: possible surgery to remove the catheter tip; vascular occlusion due to an unretrieved catheter tip; thrombosis; amputation; and possible cardiac arrest. These devices were distributed to medical institutions in the United States between December 13, 2012 and April 16, 2013. Cook initiated a voluntary global/nationwide recall of all sizes, diameters and lot numbers (Catalog number ZIV6*****PTX). Consignees should stop using the device, quarantine any inventory and return it for credit. For more information go to <http://www.fda.gov/Safety/Recalls/ucm349421.htm?source=govdelivery> or contact 1-800-457-4500 or CustomerrelationsNA@cookmedical.com.

All Compounded Sterile Products by Nora Apothecary and Alternative Therapies: Recall - Lack of Sterility Assurance

Nora Apothecary and Alternative Therapies announced a voluntary multi-state recall of all sterile drug products compounded by the pharmacy that have not reached the expiration date listed on the product. The recall is being initiated due to concerns associated with quality control processes that present a lack of sterility assurance and were observed during a recent FDA inspection. The recall includes sterile products that were supplied to patients and offices of licensed medical professionals. Specifically, the recall includes products supplied to medical offices located within Indiana, Illinois, Ohio, Florida, and Tennessee. The compounded products that are subject to the recall are those products within their expiration date that were compounded and dispensed by the pharmacy on or before Friday, April 19, 2013. To date, Nora has received no reports of injury or illness associated with the use of their sterile products. Consumers or health care providers with questions regarding this recall may contact Nora Apothecary and Alternative Therapies by phone at 1-800-729-0276 or 317-251-9547 between the hours of 9:30AM-6:00PM EST Monday through Friday, or at the following e-mail address: pharmacist@noraapothecary.com.

NuVision Pharmacy Announces Voluntary Nationwide Recall of All Lots of All Lyophilized Products Compounded by NuVision Pharmacy Due to Sterility Assurance Concerns

NuVision Pharmacy is voluntarily recalling all unexpired lots of lyophilized compounds HcG 5000IU-5ml and Sermorelin/GHRH6-5ml at the user level. The recall is being initiated due to a lack of sterility assurance and concerns associated with the quality control processes identified during the FDA inspection. In the event a sterile product is compromised, patients are at risk for serious and possible life threatening infections. To date, NuVision Pharmacy has received no reports of injury or illness associated with the use of their sterile products. Consumers or health care providers with questions regarding this recall may contact NuVision Pharmacy by phone at 1-800-914-7435 Monday through Friday between the hours of 10 am to 6 pm CST, or by e-mail at pharmacist@nuvisionpharmacy.com.



Network Corner

Nephrology Today & Tomorrow 2013

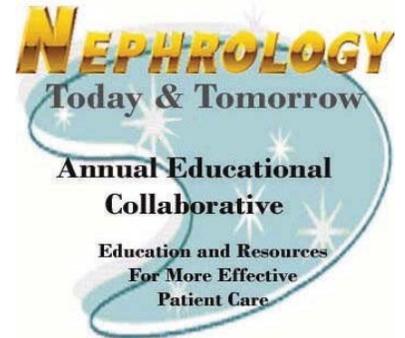
SAVE THE DATE!

ESRD Network of Texas, Inc. Annual Meeting for 2013

October 25—8:30am to 5:30pm

October 26—8:00am to 12:00 noon

Omni Mandalay Hotel, Irving, Texas



The meeting will highlight CMS and the Network focus for the renal community and practical strategies for all disciplines. A free patient breakout session will be offered on Saturday. Over 50 vendors will be available to discuss their services and/or products.

Meeting brochure and registration information will be available later in the summer.

Open Position: Quality Improvement Analyst

The Quality Improvement Analyst will assist in the implementation and monitoring of quality improvement projects and special studies by organizing, collecting, validating, analyzing, and reporting results of special projects and studies with effective data management techniques. Experience needed in methods of data transmission, data display, and data management; proficiency in project design; expertise in quality improvement approaches and techniques; excellent interpersonal skills and the ability to interact professionally with a varied population; excellent written and oral communication ability; proficient in English both in written and oral communication. Bi-lingual in Spanish not required but a plus. Proficiency in MS Word, MS Excel, MS Access, MS PowerPoint, and Outlook required. Knowledge in statistical analysis methods such as SAS is desired. Organizational ability and capability to coordinate a number of ongoing projects simultaneously needed. To apply send cover letter and resume to info@nw14.esrd.net or fax to 972-503-3219. No phone calls please. EEO

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HHSM-500-2013-NW014C

End-Stage Renal Disease Network of Texas, Inc. (aka: Network 14)

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PRESS RELEASE

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Past Chair, Medical Advisory Council

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Denise Van Valkenburgh, RN, BA
Fresenius Medical Care

David Van Wyck, MD
DaVita, Inc.

Dee LeDuc
Forum Coordinator

April 2013

The Forum of ESRD Networks announces the third annual Creating a Culture of Quality Conference, to be held on September 17 and 18, 2013, at the Sheraton Baltimore City Center Hotel. The title of this year's conference is "Creating a Culture of Quality and Safety: The Critical Role of Communication in Improving ESRD Patient Safety." The speakers and panelists will include kidney patient representatives, and experts from academic settings, dialysis organizations, the Networks, and CMS. The objectives include:

- using improved communication to understand barriers to safe care transitions;
- replacing standard handovers with processes and tools that ensure patient safety between settings;
- establishing a culture of quality and safety that values communication by both staff and patients;
- how to use complaints, errors and "near misses" to improve safety and quality outcomes; and
- how providers and patients can partner in making health care decisions in improving safety.

Critical to this conference is the importance of including the voice of the patient to the discussions, and partnering with patients to improve safety and quality of care without diluting or minimizing the expertise of providers.

The conference is a collaboration of renal community stakeholders including the Forum of ESRD Networks, the Renal Physicians Association, the Beneficiary Advisory Council of the Forum of ESRD Networks, Fresenius, DaVita, Dialysis Clinic Inc., the American Nephrology Nurses Association and the National Renal Administrators Association.

The meeting will consist of three major sessions. The first will expand on many of the discussions held at the 2012 conference regarding safe care transitions, and will include patient perspectives on transitions, many of which will be new to care providers and those who design care transition processes. The objective will be to enable providers to create tools to ensure safe and appropriate care transitions.

The second session will be focused on identifying and changing the culture of blame that exists in many settings, in which providers blame each other and even blame patients when things go wrong, rather than digging deeper and understanding that there are often processes that require change. We will examine means of encouraging the productive use of complaints, errors and reporting of "near misses" to improve safety and quality and create a "just" culture.

Registration will be open in mid-July. Additional information will be available on the Forum of ESRD Networks' website at: www.esrdnetworks.org.

Jay Ginsberg, MD, MMM, Chairperson, on behalf of the Planning Committee
Creating a Culture of Quality: Listen ~ Hear ~ Empower ~ Change: The Critical Role of Communication in Improving ESRD Patient Safety



SAVE THE DATE

CREATING A CULTURE OF QUALITY & SAFETY:

Listen ~ Hear ~ Empower ~ Change

The Critical Role of Communication in Improving ESRD Patient Safety

DATE: September 17 - 18, 2013

LOCATION: Sheraton Baltimore City Center Hotel

CONFERENCE OBJECTIVES:

- Present multiple perspectives on barriers to safe transitions of care
- Replace standard hand-overs with effective processes and tools to ensure patient safety between settings
- Envision a culture of Quality and Safety free of blame that encourages patients and staff to report complaints, errors and near misses without fear of reprisal
- Describe practices that use the reported complaints, errors and near misses to improve safety and quality outcomes
- Present action steps that providers and patients can use to partner in making health care decisions
- Describe methods that increase patient participation in identifying safety challenges

WHO SHOULD ATTEND: We want to learn from patients, dialysis facility staff, physicians, and administrators, as well as from quality improvement staff from dialysis organizations, the ESRD Networks and CMS. We encourage attendance of kidney disease patients and everyone who participates in their care.

A renal community collaboration presented by the Forum of ESRD Networks in partnership with DaVita, DCI, Fresenius, the Renal Physicians Association, the American Nephrology Nurses Association, the National Renal Administrators Association, and the Forum's Beneficiary Advisory Council.



Overnight rooms are available at a rate of \$189.00/night at this hotel:
Sheraton Baltimore City Center
101 West Fayette Street, Baltimore, MD 21201
Phone: (410) 752-1100

For further information, please visit www.esrdnetworks.org



Network 14's 5-Diamond Patient Safety Program



5 DIAMOND LEVEL

- Biotronics Kidney Center of Orange
- Childress Regional Medical Center Dialysis
- Christus Children's Kidney Center
- DaVita Carrollton
- DaVita Dallas North
- DaVita East
- DaVita Huntsville
- Dialysis Center of Victoria
- FMC Greenway Kidney Center
- FMC Village II Dialysis
- FMC West Seguin
- Garland Dialysis
- Grand Prairie Dialysis Center
- Harlingen Dialysis
- Kaufman Dialysis
- Kerrville Dialysis
- Kidney Treatment Center
- Kidney Treatment Center East
- Moncrief Dialysis Center
- New Century Dialysis Center of Jasper
- NNA Marble Falls
- Orange County Dialysis
- Plaza Drive Dialysis
- RCG Center Dialysis
- Reeves County Hospital Dialysis
- Renal Center of Carrollton
- RRC East Fort Worth
- RSA Schertz Kidney Center
- Satellite Dialysis Kyle
- SOHUM Houston Dialysis, LLC
- South Arlington Dialysis Center
- South Austin Dialysis
- Stafford Dialysis
- Valley Dialysis of McAllen
- Wilbarger General Hospital Dialysis of Vernon

4 DIAMOND LEVEL

- Cuero Lakeview Dialysis
- Edna Dialysis Center
- Katy Cinco Ranch Dialysis
- UTSW Oakcliff Dialysis

3 DIAMOND LEVEL

- Angelo Kidney Connection
- DaVita Weslaco
- Renal Solutions
- Satellite Dialysis Manor
- SNG San Augustine Dialysis Clinic
- USRC Delta Dialysis
- UTSW Dallas Dialysis

2 DIAMOND LEVEL

- DCI Nacogdoches
- Dialysis Services of West Texas
- FMC Austin North
- FMC Calallen
- Nederland Dialysis
- Satellite Dialysis Round Rock
- The Dialysis Cottage
- USRC Mid Valley Weslaco

1 DIAMOND LEVEL

- AmeriTech Kidney Center
- AmeriTech Kidney Center HEB
- Bay Area Dialysis Southside
- DSI Greenwood Holly
- Edinburg Kidney Center
- FMC Ennis
- FMC Mt. Pleasant Dialysis
- Southeast Texas Kidney Center
- USRC Bellaire
- USRC Tarrant Dialysis Cleburne
- Woodville Dialysis

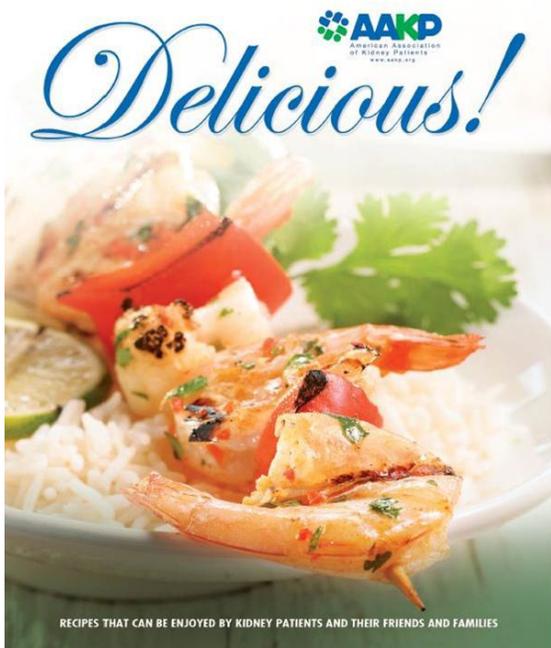


Patient's Corner—

Facility staff – post both the English and Spanish flyer by the patient scales as well as near the sink that the patients use to wash their accesses and in the lobby/waiting room.

AAKP Delicious!

You'll Love the Recipes



This cookbook was created by AAKP to support you and your family in your effort to take charge of your health care through nutrition. This first issue of AAKP Delicious is just the start of your recipe collection. more recipes are to come!

Order your AAKP Delicious recipe book today by calling 1-800-749-2257 ext 3!
Each book is just \$10.

This kidney-friendly cookbook and its educational materials have been favorably reviewed by Renal Dietitians, a dietetic practice group of the Academy of Nutrition and Dietetics, and is proudly sponsored by Abbott Renal Care.

To file a grievance, please contact
Network 14 at 1-877-886-4435



The End Stage
Renal Disease
Network Of Texas

CROWNWeb—Empowering Patients Through Data Collection

On June 14, 2012, the Centers for Medicare & Medicaid Services (CMS) released CROWNWeb, a secure web-based data-collection system that is used by Medicare-certified dialysis facilities to report patient treatment and clinical data in real time. *For more information on CROWNWeb and how its data reporting capabilities benefit the ESRD patient population, visit:*

*www.projectcrownweb.org/patients
or at the ESRD Network of Texas Patient QIP page at:
<http://www.esrdnetwork.org/patients/QIP-patients.asp>*



CROWNWeb: What's In It for You (ESRD Patients)

By: Oniel Delva, BA

With a commitment to advance the quality of care for ESRD patients, CMS is improving the renal community's ability to view important patient treatment data by changing dialysis facilities' data submission methods.

"Reprinted with permission from the National Kidney Foundation"

Accurate patient care analysis. Flawless transfer of treatment records. Improved communication with the End Stage Renal Disease (ESRD) patient population. These are just three of the many factors that inspired the Centers for Medicare & Medicaid Services (CMS) to transform the method by which Medicare-certified dialysis facilities submit and access vital patient treatment data.

CMS has a longstanding mission to improve the quality of care for ESRD beneficiaries through the timely collection and analysis of treatment data and development of a clearer communication channel about the patient population. To help with this effort, CMS in 2009 released CROWNWeb, a web-based data collection system that is changing how CMS and dialysis facilities are able to access patient information. CROWNWeb is giving CMS and dialysis care providers throughout the nation a way to better analyze trends and identify information that could be used to improve patient outcomes. While CROWNWeb will not be used directly by patients, the system contains many features that are designed to benefit the ESRD patient population.

What is CROWNWeb?

CROWNWeb is a data-management system that allows Medicare-certified dialysis facilities to safely submit facility and patient data to CMS. It is also designed to reduce the time it takes for dialysis facilities to evaluate clinical performance, thereby providing facilities with up-to-date healthcare information for their patients. Data obtained from CROWNWeb will also help empower patients with a way to identify better healthcare value and quality. CROWNWeb could help eliminate potential treatment interruptions, such as those caused by missing treatment data, by giving facilities a system to access a patient's records once that patient is admitted to another facility.

Making an Informed Decision

In 2001, in an effort to assist persons who have (or may develop) ESRD and their caregivers with making educated decisions regarding treatment options, CMS developed and launched Dialysis Facility Compare (DFC) an online tool that provides information on facility characteristics and quality measures for more than 5,600 dialysis facilities in the United States (available at www.medicare.gov). Since its release, DFC has been used by patients to find and compare information about the services and quality of care provided at dialysis facilities in all states. CMS intends to use CROWNWeb to enhance the quality of information available via the DFC website by incorporating facility quality measures data. Since CROWNWeb will reduce the time it takes CMS to receive patient treatment data, the information via the DFC website can be a more timely and accurate representation of the quality of care available in the dialysis community.



Transfer of Treatment Records

CROWNWeb helps improve facilities' ability to access clinical data for patients who were previously dialyzed at another clinic. The system maintains an archive of treatment data and seamlessly transfers that information from one unit to another if the patient relocates to another facility. This immediate access to treatment data provides the admitting facility with up-to-date information on the type of treatment the patient was receiving. The new facility can now determine whether the patient was receiving hemodialysis (HD) or peritoneal dialysis (PD) treatment, review details on weekly sessions, and identify whether care was being administered in a facility or at home.

Transient Patient Data

In 2005, Hurricane Katrina forced thousands of ESRD patients on life-sustaining dialysis out of New Orleans and the surrounding region of the United States. Dialysis centers across the country immediately took in thousands of evacuees who needed treatment, but in the days and weeks following the catastrophic event, hundreds of those patients were unaccounted for. Through the efforts of ESRD Networks and dialysis providers, the majority of the displaced patients were eventually located. However, this took months to accomplish.

Hurricane Katrina is a prime example of major events that can have a dramatic impact on dialysis patients in a short period of time. Learning from this catastrophe, CMS designed CROWNWeb with a "Transient Patient" feature. This feature assists facilities with their ongoing patient care efforts by providing a better means of tracking their patients' temporary whereabouts. This feature offers the ability to admit patients to a facility on a short-term basis. For example, in the case of a disaster such as Hurricane Katrina, receiving facilities will be able to admit displaced patients via CROWNWeb as transients. This will enable patients' original dialysis units, the ESRD Networks, and CMS to better track their location and confirm that the displaced patients are still receiving treatments. With little time to evacuate an area due to an emergency, dialysis patients often leave behind key information, such as treatment records and other essential paperwork. CROWNWeb will also assist these patients by housing an electronic archive of critical information. Once a receiving facility admits a patient via CROWNWeb, it will have immediate access to the patient's treatment summary. While it is ideal for patients to provide their own treatment information when relocating to new facilities, this system will help ensure that patient treatments are not missed due to insufficient or missing data.

Patients and CROWNWeb

ESRD patients who want to obtain more information on the CROWNWeb system or learn about how their treatment information will be reported can visit the Project CROWNWeb website at www.projectcrownweb.com. Information regarding the system is also available at CMS' CROWNWeb site at www.qualitynet.org via the ESRD tab. The work on which this publication is based was performed under Contract Number HHSM-500-2011-00157G, titled "CROWNWeb Outreach, Communication, and Training," funded by the Centers for Medicare & Medicaid Services, Department of Health and Human Services. The content of this publication does not necessarily reflect the views or policies of the Department of Health and Human Services, nor does mention of trade names, commercial products, or organizations imply endorsement by the U.S. government.

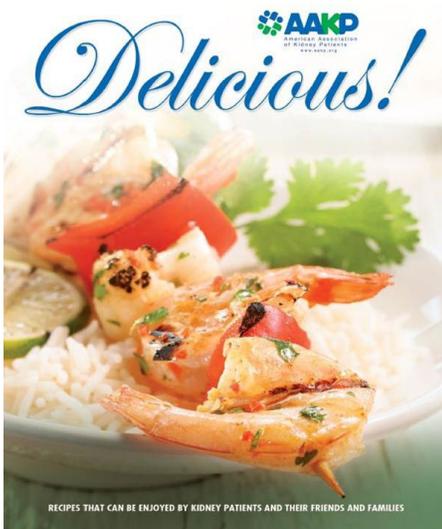


Rincón del Paciente—

Instrucciones al Personal de las Instalaciones – Coloque los volantes en inglés y español cerca de las básculas de los pacientes y también cerca del lavabo que usan los pacientes para lavarse los accesos y en el vestíbulo/sala de espera.

AAKP Delicious! [“¡Delicioso!”]

Le encantarán las recetas



Este Recetario de AAKP fue creado para apoyarles a usted y a sus familiares para tratar de tomar cargo de su cuidado de salud mediante la nutrición. Esta primera edición de AAKP Delicious es solamente algo para comenzar su colección de recetas. ¡Van a llegar más recetas!

¡Llame hoy para ordenar su Recetario "Delicioso!" de AAKP a 1-800-749-2257 ext. 3!

Cada libro cuesta solamente \$10.00.

Renal Dietitians (Dietistas Renales), un grupo de práctica de dietistas de la Academia de Nutrición y Dietistas, orgullosamente patrocinada por Abbott Renal Care han aprobado este recetario y sus materiales educativos para pacientes renales.

Presentar una queja por favor contacte
a la Red 14 a 1-877-886-4435.



The End Stage
Renal Disease
Network Of Texas

CROWNWeb—Los Pacientes Ejercen Poder con la Recopilación de Datos

El 14 de junio de 2012, los Centros de Servicios de Medicare y Medicaid (CMS) abrieron el CROWNWeb, un sistema seguro de recopilación de datos, basado en el Web, que se usa en las instalaciones de diálisis que cuentan con la certificación de Medicare, para reportar el tratamiento de pacientes y datos clínicos en tiempo real.

Para mayores informes sobre CROWNWeb y el beneficio de su capacidad de recopilar datos para los pacientes ESRD, visite:

www.projectcrownweb.org/patients

o la página QIP para pacientes de la Red de ESRD de Texas a:

<http://www.esrdnetwork.org/patients/QIP-patients.asp>



CROWNWeb: Los Beneficios Para Ustedes (Pacientes de ESRD)

Por: Oniel Delva, Licenciada

Con su compromiso para avanzar la calidad de cuidados que reciben los pacientes de ESRD, CMS facilita a los pacientes renales el acceso a los datos importantes de tratamiento, con cambios de métodos usados por las instalaciones de diálisis para subir datos.

"Reimpreso con permiso de la Fundación Nacional del Riñón"

Análisis acertado de cuidado del paciente. Traslado perfecto de fichas clínicas. Mejoramiento de comunicación con los pacientes de Enfermedad Renal en Etapa Terminal (ERET). Son solamente tres de los factores múltiples que han inspirado los Centros de Servicios de Medicare y Medicaid (CMS) para transformar el método usado para que las instalaciones de diálisis con certificación de Medicare puedan introducir y acceder datos vitales sobre el tratamiento de los pacientes.

CMS tiene una meta continua de mejorar la calidad de los cuidados que reciben los pacientes de ESRD, con la recopilación oportuna y análisis de datos de tratamiento y el desarrollo de vías de comunicación más claras sobre los pacientes. Para ayudarles a lograr esto, CMS inició CROWNWeb en 2009; este es un sistema de recopilación de datos, basado en el Web que cambia el acceso a la información sobre pacientes; que se utiliza en CMS y las instalaciones de diálisis. CROWNWeb provee a CMS y al proveedor de diálisis en la nación una manera mejor para analizar las tendencias e identificar información que se puede usar para mejorar los resultados de pacientes. Los pacientes no usan directamente los datos de CROWNWeb, pero el sistema cuenta con muchas características que se diseñan por el beneficio de los pacientes de Enfermedad Renal en Etapa Terminal [ESRD].

¿En qué Consiste el CROWNWeb?

El CROWNWeb es un sistema de administración de datos, que permite que en las instalaciones de diálisis certificadas por Medicare, se ingresen datos sobre instalaciones y pacientes en forma segura a CMS. También se diseña para reducir el tiempo que duran las instalaciones de diálisis para evaluar el desempeño clínico; por ende, se les provee información médica actualizada para cuidar a sus pacientes. Los datos que se obtienen del CROWNWeb también ayudarán a fortalecer a los pacientes con una herramienta para identificar el cuidado médico de mejor valor y calidad. CROWNWeb podría ayudar a eliminar la posibilidad de interrupciones de tratamiento, como las que se ocasionan por falta de datos de tratamiento, ya que las instalaciones tienen un sistema para acceder los expedientes del paciente cuando le ingresen al paciente a otra instalación.

Tome Una Decisión Informada

En 2001, con el fin de ayudar a las personas que tienen (o puedan desarrollar) la ESRD, y a sus cuidadores para que tomen decisiones educadas referente a opciones de tratamiento, CMS desarrolló y lanzó Dialysis Facility Compare (DFC) [Comparación de Centros de Diálisis]. Es una herramienta en línea que provee información sobre características y medidas de calidad para más de 5,600 instalaciones en los Estados Unidos (vea www.medicare.gov). Desde el inicio del portal, pacientes han usado DFC para buscar y comparar información sobre los servicios y calidad de cuidado proveído en los centros de diálisis en todos los estados. CMS tiene el objetivo de usar CROWNWeb para mejorar la calidad de información disponible, con el uso del sitio web de DEC mediante la incorporación de datos para determinar la calidad del centro. Como CROWNWeb reduce el tiempo de transmisión de datos sobre pacientes, la información del sitio web DFC pueda ser una representación más oportuna y exacta de la calidad de cuidado disponible para pacientes de diálisis.



Traslado de Expedientes de Tratamiento

CROWNWeb ayuda a facilitar el acceso del centro a los datos clínicos para pacientes que han recibido diálisis anteriormente en otra clínica. El sistema mantiene un expediente de datos de tratamiento y facilita el traslado de esa información de una unidad a otra si el paciente cambia de centro. Este acceso inmediato a la historia de tratamiento previo del paciente permite que el centro adonde se ingrese cuente con la información actualizada. El centro nuevo ahora puede determinar si recibía hemodiálisis (HD) o tratamiento de diálisis peritoneal (DP), revisar detalles sobre sesiones semanales, e identificar si se cuidaba en un centro o en la casa.

Datos de Pacientes Transeúntes

En 2005, el Huracán Katrina obligó a miles de pacientes con ESRD que dependen de la diálisis para poder vivir a salir de Nuevo Orleans y sus alrededores de los Estados Unidos. Los centros de diálisis en todas partes de centros inmediatamente recibieron a miles de los evacuados que necesitaban tratamiento, pero durante los días y las semanas después del evento catástrofe, había cientos de estos pacientes cuyos paraderos se desconocían. Con los esfuerzos de las Redes ESRD y proveedores de diálisis, la mayoría de los pacientes desplazados se localizaron. Sin embargo, duró meses lograr localizarlos.

El Huracán Katrina es un ejemplo excelente de los eventos principales que pueden impactar dramáticamente a los pacientes de diálisis dentro de poco tiempo. CMS aprendió de este catástrofe y diseñó el CROWNWeb con una característica de "Paciente Transeúnte". Esta característica presta ayuda a los centros para rastrear el paradero temporal de sus pacientes. Esta característica permite que el centro reciba pacientes por corto plazo. Por ejemplo, en el caso de un desastre, tal como el Huracán Katrina, los centros pueden admitir pacientes desplazados, en calidad de transeúntes con el uso del CROWNWeb. Este va a permitir que las unidades originales de diálisis, las Redes de ESRD, y CMS determinen su paradero y confirmen que los pacientes desplazados continúen el tratamiento. Como los pacientes cuentan con poco tiempo para evacuar un área, debido a una emergencia, frecuentemente se olvidan de información clave, como expedientes de tratamiento y otros papeles esenciales. El CROWNWeb también ayudará a estos pacientes ya que cuenta con un archivo electrónico de información crítica guardada. Cuando un paciente la clínica ingresa a través del CROWNWeb, tendrá el acceso inmediato al sumario del tratamiento del paciente. Aunque sea ideal que los pacientes tengan su propia información de tratamiento cuando se desplazan a un centro nuevo, este sistema ayudará a asegurar que los tratamientos del paciente no se omitan debido a datos insuficientes o que faltan.

Pacientes y CROWNWeb

Para mayores informes sobre el sistema de CROWNWeb, o el reporte de su información de tratamiento pueden acudir al portal de Project CROWNWeb a www.projectcrownweb.com. También se dispone información sobre el sistema al portal de CMS' CROWNWeb sito a www.qualitynet.org en el enlace del ESRD tab. Se realizó el trabajo de esta publicación bajo Contrato Numero HHSM-500-2011-00157G, entitulado "CROWNWeb Outreach, Communication, and Training," con fondos de los Centros de Servicios de Medicare y Medicaid, Departamento de Salud y Servicios Humanos. El contenido de esta publicación no necesariamente constituye la opinión o las políticas del Departamento de Salud y Servicios Humanos. Tampoco la mención de marcas, productos comerciales u organizaciones implica que el gobierno estadounidense los endose.