



Sharing Your Successes and Processes

The following success stories and processes were shared with the Network during last month's open forum. Please take the time to review. This may be able to assist you in future work!

- **Frequent Flyer**- We have one patient who was a frequent flyer at the hospital and the patient admittedly preferred the hospital over where she lived (nursing home) because the food was better, and the people were nicer. When the patient wasn't in the hospital, she missed treatment (Tx) for long enough to where she would be hospitalized. It was a continuous cycle. We did unstable Care Plans, IDT met, worked with the nursing home where she lived, heavily involved the Nephrologist, had one on ones with the patient when she came, and tried incentives to get her to come to Tx... nothing worked. That is until one day her transportation company couldn't bring her anymore (schedule conflict) and a new transportation company started going to pick the patient up. Before long, the patient came to Tx after Tx after Tx... and she was SHOCKED. We were trying to figure out what happened?! We realized that this new transportation company showed this patient so much compassion and care and made the patient look forward to coming to Tx. They didn't just take her stating no as an answer when the patient would refuse to go to Tx when they would go to pick her up. They would talk to her about it and sell her on going to dialysis and they would converse with her on the way to the clinic and after they picked her up. These transportation people changed this woman's life! Now we have learned something new to look at to get patients to come to Tx. **NW6 GA 112839 U.S. RENAL CARE CUMMING DIALYSIS (US Renal Care, Inc.)**
- **Collaboration**-Acute Unit staff tracks patients who are admitted or go to the ER for fluid-related issues and feeds that information back to the outpatient units who will do a deeper dive into the chart and offer an additional IUF treatment plus extra education to the patient. **NW1 VT 472300 University of Vermont Medical Center Dialysis (Independent)**
- **Patient-centered Care**- Our practice is person-centered, so in the event, a patient has an appointment or is unable to make the regular scheduled day and time, we allow the patient flexibility options, which include an earlier or later shift or rescheduling for another day and time. We offer extra treatment when warranted/required. PRBCs are admin. in the unit. We work well with the Access Center in getting patients same-day or 24-hour service for thrombectomy and have them return to the unit. **NW2 NY 332346 NYC HEALTH + HOSPITALS/KINGS COUNTY (Independent)**
- **Collaboration**-Our facility has developed a working relationship with the physicians and case management in local hospitals to help us aid the patient in getting what they need. We also track it in our charting system and report monthly on this with our IDT team and discuss ways we can improve them. Staff also speak to patients and see if there was anything not listed in their discharge paperwork that we can help with. **NW9 KY 182643 Dialysis Clinic Inc (Other)**
- **Transportation**- As many have already stated, working closely with physicians and nurse practitioners is always useful. As a facility, we also spend time educating the transportation drivers that bring patients to us. For instance, yesterday our transportation drivers brought a patient for treatment that they almost took to the ER but instead brought her to us for evaluation first. The transportation driver remembered a conversation I had about bringing the patient to treatment if they were stable enough for transport and having the nurses assess the patient and decide if they are stable for treatment or need a higher level of care. We were able to treat this patient and keep her out of the ER and possible hospitalization. This reminded me to ensure to have more discussions without transportation drivers and that those conversations I have had with them do have an impact on patient care and hospitalizations. **NW6 SC 422661 DaVita Cypress Gardens Dialysis (DaVita)**
- **Communication**-We encourage patients and caregivers to call our clinic to speak with a nurse before sending patients to ER. We try to avoid ER visits and hospitalizations as much as possible. We try to reschedule patient's that call off to

come in the next day so that they don't miss treatments and avoid hospitalizations. We give them a chair time so that they don't have a chance to change their minds. We schedule patients for UF treatments. Our RN, PCTS, and RD educate our patients about the importance of compliance with treatments as well as educating about signs/symptoms of fluid overload. We also educated our patients about the importance of hand washing to prevent infections. We follow up with our patients after they are hospitalized to see if there were med changes. We also follow up with patients after they attend any of their medical appointments to see if they went and to see if additional follow-up is needed. **NW9 OH 362628 DaVita Western Hills Dialysis (DaVita)**

- **Communication-** We are in constant communication with our nephrologist. We encourage patients to reschedule any missed appointments and we offer additional IUF treatments for patients with fluid overload. Also being based in a hospital we can sometimes get other specialists (cardiology, endocrinology, oncology) to see patients while they are in our dialysis unit. For example, we were able to get the cardiology to come up to our unit to make changes to a patient's pacemaker rather than send the patient to the ED. **NW1 VT 473500 UNIVERSITY OF VERMONT MEDICAL CENTER DIALYSIS BERLIN (Independent)**
- **Missed TX Champion-** My Charge RN is very diligent about getting our patients to come to dialysis. She will set up extra treatments or reschedule them as needed. Some of our patients are on four-times-per-week treatments. We do have some "frequent flyers" and we try to work with them to avoid an ER visit, but you cannot fix everyone. We do have patients that will go to the ER seeking pain medication. Some patients will go to the ER for a headache or the common cold. We try to educate our patients to keep up with their Primary Care Physicians and any other physicians that they might be seeing. ER visits should be used as a last resort. **NW2 NY 332551 Pure Life Renal of Buffalo Inc. (Independent)**
- **NW9 OH 362717 Center for Dialysis Care, Oakwood (Center for Dialysis Care)**

