



Campaign Update

Kidney Care Partners' Performance Excellence and Accountability in Kidney Care (PEAK) Campaign continues to make progress as a result of the efforts of our members and members of the kidney community in implementing many of the initiative's Best Practices.

As noted at the PEAK Campaign launch and in previous PEAKPOINTS e-newsletters, KCP, with the assistance of research partners at Brown University and Quality Partners of Rhode Island, created three expert panels to identify valuable, first-hand perspectives from kidney care experts, researchers, clinicians, and patients themselves on how to improve first-year survival rates.

In this edition, we focus on several of the key Patient Best Practices recommended by the Patient/Family Engagement Panel and illustrate some examples of how our members are disseminating and utilizing the "Tools of Engagement" within their organizations to make a difference in the lives of kidney patients.

While KCP continues to further advance the PEAK Campaign and implementation of the Best Practices, this communication is to help you educate your members regarding the kidney community's efforts to reduce mortality and, where appropriate, help you better incorporate the spotlighted Best Practices into your organization's efforts.

Featured Best Practices: Partnership and Self-Management of Dialysis Care

All too often, the onset of chronic kidney disease (CKD) is gradual and undetected, leaving patients especially vulnerable once the disease is recognized. Helping patients understand their disease and manage it appropriately is an essential ingredient to high quality care for newly diagnosed patients and a central component of the PEAK Campaign.

Once an individual is diagnosed with kidney failure, extensive information and support are provided to the patient by the nephrologist, dialysis facility, caregivers, and even numerous patient and kidney care advocacy and support groups.

Research has shown that a broad range of interventions early in a patient's life on dialysis can strongly influence patient outcomes and successfully reduce mortality. Thus, the PEAK Campaign to reduce mortality in the first year focuses on patient education and key clinical care activities to achieve its goal, including, case

management, nutrition, anemia management, dialysis adequacy, catheter use, and psychological and social support.

Research also finds that patients who take an active role in their care plan often have the most success. In this edition, we spotlight three of the patient-focused Best Practices recommended by PEAK that emphasize active patient engagement, as well as the importance of understanding kidney failure and working with the entire caregiving team, including:

- **Educate Patients to Improve Their Understanding of Kidney Disease to Empower them to Make Decisions and Choices About Their Care (Patient Best Practice #3);**
- **Educate Patients on the Benefits of Partnering with Their Interdisciplinary Team (Patient Best Practice #5); and**
- **Support Patient Self-Management (Patient Best Practice #6).**

While all of the Best Practices emphasized by PEAK work together for the greatest success, these Best Practices, which support patients' ability to play an integral role in their care, particularly go hand-in-hand toward achieving positive outcomes.

“Through Renal Support Network, we strive to educate and empower patients (and their family members) to take control of the course and management of their disease,” said Lori Hartwell, RSN founder and a dialysis and transplant recipient. **“PEAK’s emphasis on partnership and self management will go far in improving the quality of life of dialysis patients and lead to more successful patient outcomes.”**

How Do You Achieve These Best Practices?

To ***educate patients to improve their understanding of kidney disease—including dialysis, nutrition, health promotion, modality options, co-morbidities and other related health matters—to empower them to make decisions and choices about their care***, PEAK recommends:

1. Educate patients to improve their understanding of kidney disease, including renal replacement options, treatment of co-morbidities, and health promotion strategies that enhance self-efficacy of taking an active role in making decisions about their care. Improve communication with patients who have limited health literacy;
2. Identify and provide learning opportunities via varying formats, delivery vehicles and settings; and
3. Solicit feedback and questions on all aspects of educational content and delivery and understanding of educational material.

Nancy Scott, Dialysis Patient Citizens (DPC) Board President, who also serves on the PEAK Patient/Family Expert Panel, said, “The information gathered by PEAK includes important tools and resources readily available from Dialysis Patient Citizens, as well as many other groups, to educate and empower patients.”

Scott, also a dialysis patient, added, “I wish PEAK had been formed 7 years ago when I started dialysis. I believe that with the tools and resources provided by PEAK my transition to dialysis would have been so much easier.”

To ***help caregivers educate and coach patients on the principles, techniques and values of partnering with their inter-disciplinary health care team, empowering them to become an integral part of that team***, PEAK recommends:

1. Coach patients on how to work with a health care team to be part of developing a plan of care for their family member;
2. Teach communication skills to patients, professionals and other staff so they can become effective partners: Such skills include being able to negotiate, share decisions, solve problems together, establish goals and clarify roles and responsibilities;
3. Teach patients the defining attributes of partnership; and
4. Treat patients as “self-experts” and respect their (and their families’) participation in care. The patients’ self expertise complements the health care providers’ expertise about the chronic condition and treatments.

And, finally, to **support patient efforts to live the best possible quality of life through self-management**, PEAK recommends:

1. Monitor and support new dialysis patients by implementing a case management model that focuses on self-management and takes into account the patient’s stage of adjustment, barriers to accessing care promptly, rehabilitation, screening for depression, and/or any diabetic needs;
2. Support self management through knowledge-building: Evidence has shown that patients achieve optimum treatment and health outcomes by working with the provider to understand CKD progression, treatment, and self-management options (e.g., self-monitoring and decision-making) (FistulaFirst Breakthrough Initiative, Change Concept # 13);
3. Assess self efficacy (a person’s belief or expectation that he/she has the capacity to accomplish certain tasks in order to achieve desired goals): Evidence indicates that increased self efficacy in people experiencing chronic disease is associated with improved health outcomes (Lev & Owen, 1998; Loring, Gonzalez, & Ritter, 1999; Loring & Holman, 2003; Loring, Sobel, et al, 1999; Zrinyi, et al, 2003);
4. Use specific educational techniques to encourage, enhance, and support patient self-management: Techniques may include motivational interviewing, health coaching, and other evidence-based patient empowerment strategies and techniques. (FistulaFirst Breakthrough Initiative, Change Concept # 13);
5. Encourage patients to use a Personal Health Record (PHR) and any other tools that assist them in managing their health information.

The nonprofit Northwest Kidney Centers, based in Seattle, Washington, provides in-center, home and hospital kidney dialysis. Dr. Leanna Tyshler, a nephrologist with Northwest Kidney Centers and its Chronic Kidney Disease Medical Advisor and Transplant Liaison, said the PEAK Best Practices are consistent with Northwest Kidney Centers' mission and philosophy to promote the optimal health, quality of life and independence of people with kidney disease through patient care, education and research. Northwest Kidney Centers has had a pre-dialysis patient education program called "Choices" in place since 2008, but since PEAK's launch has been expanding its focus on education to include the first 120 days.

"We've already been focusing on how we can get patients that start dialysis prepared and stable and knowing their treatment options," said Dr. Tyshler. "But PEAK has reinforced our belief that the focus should be on the first year – if we can make a difference in patients' health early on, it will make a difference in first-year and overall survival."

Tools of Engagement:

For each of the Best Practices recommended by the PEAK Campaign, the [Patient/Family Engagement Panel](#) also presents interventions—or Tools of Engagement—to achieve the practice. Specifically, PEAK offers audio, web-based, and printed tools and resources for patients, healthcare professionals, and providers to implement these Best Practices and improve outcomes.

Examples of patient resources for **Best Practice #3** (*Improving Patients' Understanding of Kidney Disease to Empower Them to Make Decisions and Choices About Their Care*) include:

- **Health Literacy Assessment:** Annals of Family Medicine Quick Assessment of literacy in primary care: The Newest Vital Sign (<http://www.annfammed.org/cgi/content/abstract/3/6/514/>)
- **Manual for Clinicians:** American Medical Association Guide on Health Literacy and Patient Safety: Help Patients Understand (<http://www.amaassn.org/ama1/pub/upload/mm/367/healthlitclinicians.pdf>)
- **Helpline:** A Community Service Lifeline from American Kidney Fund [providing information for patients and family members about kidney disease and treatment](http://www.kidneyfund.org/kidney-health/helpline.html) (<http://www.kidneyfund.org/kidney-health/helpline.html>)
- **KidneyTalk:** Radio show, written materials, and videos from Renal Support Network (www.rsnHOPE.org)
- **Dialysis Patient Citizens Classroom:** Web-based courses for patients on topics such as nutrition, cardiovascular health, and taking an active role in treatment (www.dpcclassroom.org)

Examples of patient resources for **Best Practice #5** (*Engaging Patients as Partners in Care*) include:

- **DPC Partners in Care:** A program to help dialysis professionals (nurses, nephrologists, social workers, dieticians, patient care technicians) improve and increase communication with caregivers and patients, understand patients' perspectives on issues important to their care, and encourage patients to take a more active role in their care (www.dialysispatients.org/partners-in-care)
- **Connecting With Your Physician (Podcast):** Communicating effectively with your physician can improve your relationship and ultimately your care. Dr. Michael Lazarus, then Medical Director for Fresenius Medical Care, discusses how patients can connect with their physicians and what physicians need from patients to make the most of their office visit. (www.rsnHOPE.org)
- **Your Dialysis Care Team:** Overview of different dialysis health care professionals and their roles in treatment from National Kidney Foundation (<http://www.kidney.org/atoz/content/dialcareteam.cfm>)

Examples of patient resources for **Best Practice #6** (*Encouraging Patients' Self-Management*) include:

- **The Kidney School:** 16 "live" self-management modules from the Medical Education Institute (<http://www.kidneyschool.org/mods/>)
- **Partnering in Self-Management:** A Toolkit for Clinicians from *New Health Partnerships* (<http://www.newhealthpartnerships.org>)
- **Centers for Medicare and Medicaid Services (CMS) Personal Health Record Programs:** A description of PHRs and frequently asked questions about their use (<http://www.medicare.gov/phr/>)

All Tools of Engagement can be found at the following link:
<http://www.kidneycarequality.com/CampLearnCenter.htm>

#