

A One-Year Assessment of Quality Indicators within an Apheresis-Only Center Operated by a Large Dialysis Provider

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Introduction

- Little information has been published about actual safety procedures and quality indicators in the provision of apheresis treatments.
- Our goal was to collect patient data at each apheresis treatment in an effort to:
- improve patient safety,
- enhance communication among patient care teams,
- understand the nursing care given,
- optimize clinical outcomes for patients, and
- partner with hospitals for optimal Joint Commission survey results.
- The nurses of a large dialysis organization (LDO) completed an Acute Clinical Outcome Indicators (ACOI) form for each apheresis treatment within an apheresis program for 2010.
- We present key indicators of clinical outcomes and process of care measures using the ACOI form data from each treatment.

Methods

- Twelve hospitals contracted with a large dialysis organization submitted data for their apheresis programs (Table 1).
- Data were collected by 6 apheresis RNs between January 2010 and December 2010 (Figure 1).
- Data were reported and assessed monthly.
- Random chart audits were performed to ensure consistency between the ACOI form and treatment flow sheet.
- As the majority of treatments were performed in the outpatient setting, responses related to hospital communication were not reported in this poster.
- Questions were based on 2010 Joint Commission Standards.

Results

Table 1. Treatment Distribution in the Apheresis Programs

	Number	Percent
Total Treatments	1206	
Therapeutic Plasma Exchanges	1157	96%
Red Cell Exchanges	19	1.6%
White Cell Depletions	27	2.2%
Platelet Depletions	3	0.2%

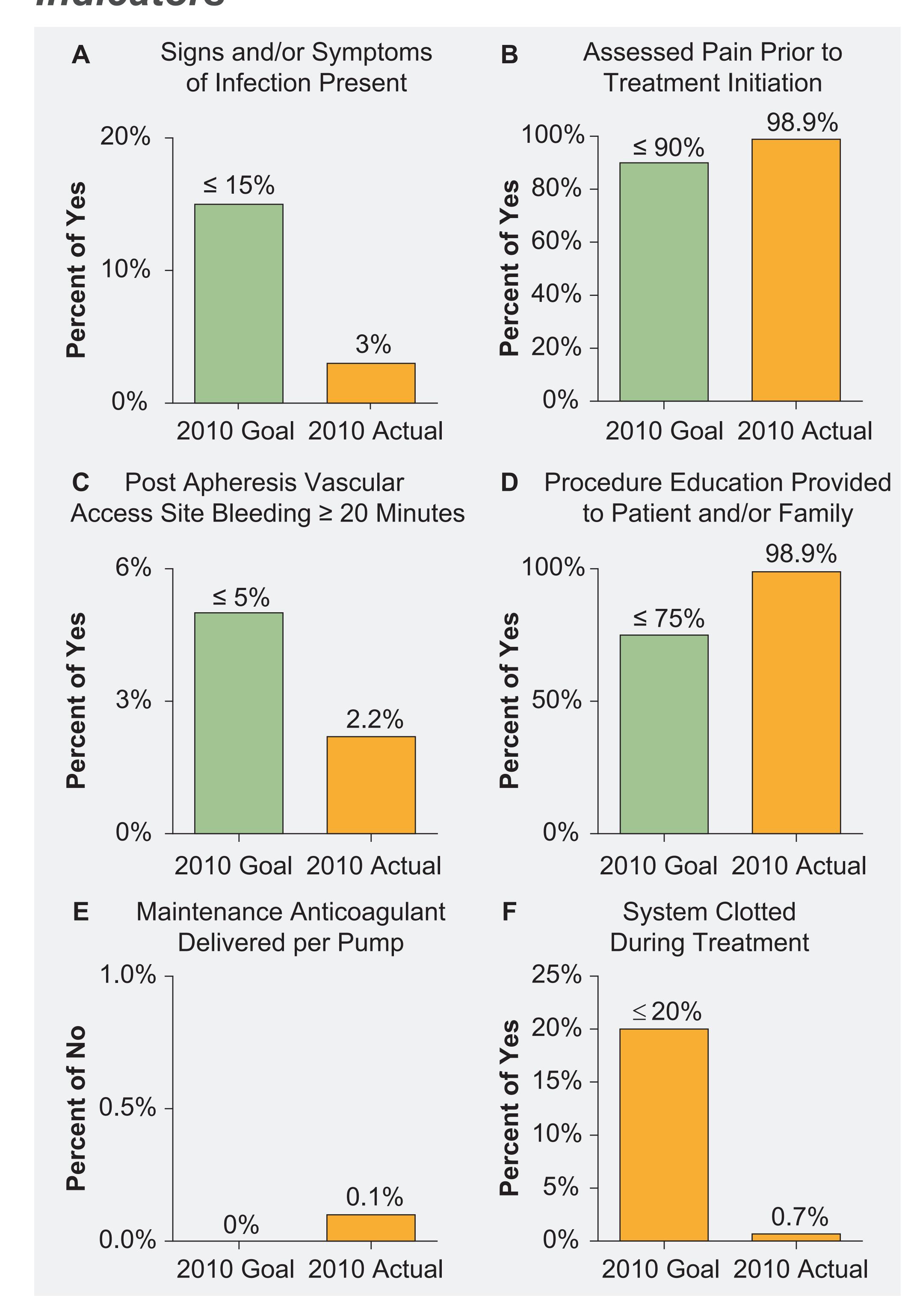
Figure 1. Information Collected on the Acute Clinical Outcomes Form

- Diagnosis and site of vascular access
- Location of treatment within the hospital
- Vascular Access Site evaluation
- Infection present
- Physician notified of access problems
- Apheresis Prescription
- Treatment completed as ordered
- Consent obtained by physician
- Treatment ordered for new diagnosis or recurring condition needing treatment as soon as medically possible
- Hypotensive episode during treatment
- Blood pressure stable post-treatment
- System clotted during treatment
- Patient Assessment
- Pain assessed prior to treatment
- Medication
- Maintenance anticoagulant delivered per pump
- Patient Education
- Treatment/disease education provided to patient and/or family
- Communication
 - Pre-treatment report from hospital nurse
 - Post-treatment report to hospital nurse
- Safety
 - Time-Out/Safety Process per LDO P&P performed

Lab

- Hb < 9 m/dL
- Physician notified of critical lab results if received during treatment time

Figure 2. Select 2010 Acute Clinical Outcome Indicators



Limitations

• As the majority of treatments were performed in the outpatient setting (57.2%), responses related to hospital communication were not reported in this poster.

Conclusions

- Our 2010 ACOI goals were met (Figure 2).
- The ACOI form:
- allowed tracking of pertinent clinical outcomes during apheresis treatments.
- can be used to assure patients, payers and healthcare providers of the value of the prescribed therapy.

Next Steps

- This 12-month data set will be used to establish a benchmark to allow assessment of future quality initiatives.
- Development of Continuous Quality Improvement projects to improve patient safety and enhance clinical outcomes.

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