

HSAG: ESRD Network 15 Facility Patient Representative (FPR) Guide

An Introduction to Being an FPR

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Congratulations on Your Decision to Participate in the Network 15 FPR Program!

Thank you for choosing to volunteer with us. The role of an FPR is an important one. This guide will explain more about what your role as an FPR will entail, including:

- Why you were selected.
- How you can help.
- What is expected of you.
- What the Network is.
- What the Network, with your help, hopes to achieve.

Your time and effort are greatly appreciated. Thank you for your willingness to work with us as an FPR. After you have had an opportunity to read this guide, please let us know if you have any questions. We look forward to getting your input.

Why Were You Selected?

Maybe, you were nominated to be an FPR by a facility staff member. Or maybe you saw the information in the patient newsletter and decided to apply. If you were nominated, then the staff member who nominated you believed that you would have much to contribute about the patient experience.

What Is the FPR Program?

The FPR Program uses a patient-centered approach to:

- Help spread educational information to other patients.
- Provide peer-to-peer support for patients.
- Offer additional support for staff members at the dialysis facility.

The FPR Program is intended to help communicate information from the Network and other sources directly to patients. The FPR Program is an essential link between Network 15, your dialysis facility, and fellow patients.

Who Are the FPRs?

FPRs are individuals who are on dialysis and who:

- Have chosen to volunteer to assist their facility.
- Have the desire to help improve the patient experience of care.

- Are available to meet with patients to discuss questions, challenges, or concerns related to their personal adjustment to dialysis.
- Are willing to represent the patient voice.
- Should be a positive example in their facilities.

The Network 15 FPRs come from Arizona, Colorado, New Mexico, Nevada, Utah, and Wyoming.

Who FPRs Are Not ...

FPRs **are not** staff members, and are never expected to be:

- Distributors of medical advice.
- Contact persons for patient grievances for care being provided at the facility.
- Go-betweens for staff members and patients to relay **all** requests and information to address their needs.
- Substitutes for staff members for required care team patient education, assessment, or evaluation.
- Persons responsible for posting or sharing information at the facility that has not been previously approved by the facility staff members.
- Permitted to share concerns of another patient without that patient's permission.

If you feel that you are ever being asked to act in any of these capacities, speak to your facility administrator immediately.

Your Role as an FPR

The FPR and facility determine the FPR's level of involvement. Below are some participation ideas. Consider assisting the Network by:

- Sharing its educational materials at your facility. (Example: passing out flyers to patients with staff permission)
- Verifying the posting of required posters in your facility lobby.
- Helping your facility social worker distribute patient newsletters.
- Writing a "patient voice" article for the patient or provider newsletters.
- Providing the patient perspective on quality improvement activities (QIAs) in which your facility may be participating.
- Participating in Quality Assurance and Program Improvement (QAPI) meetings.
- Supporting new patients at your facility. (Example: helping establish a support group or new patient adjustment group)

- Helping staff members decorate for special events/holidays.
- Helping with Lobby Day education.
- Developing a patient bulletin board.

As an FPR, you offer a unique perspective, and you are not limited to these activities. We encourage you to discuss additional ideas you have with your facility staff members.

What Is Expected of You?

There are certain policies and processes that guide FPR involvement. FPRs:

- Will be sent communication primarily through the facility staff member responsible for the quality improvement activity.
- May receive additional communication/resources via email.
 - FPRs are required to have an email address and to check it regularly.
- Reflect the Network and the facility, and are always expected to act in a respectful manner.
 - This includes refraining from offensive language regarding race, gender, ethnicity, and/or sexual orientation.
- Must report changes in contact information, including phone, email, and mailing address to the Network's Patient Services staff in a timely manner.
 - This is so we can stay in touch with you.

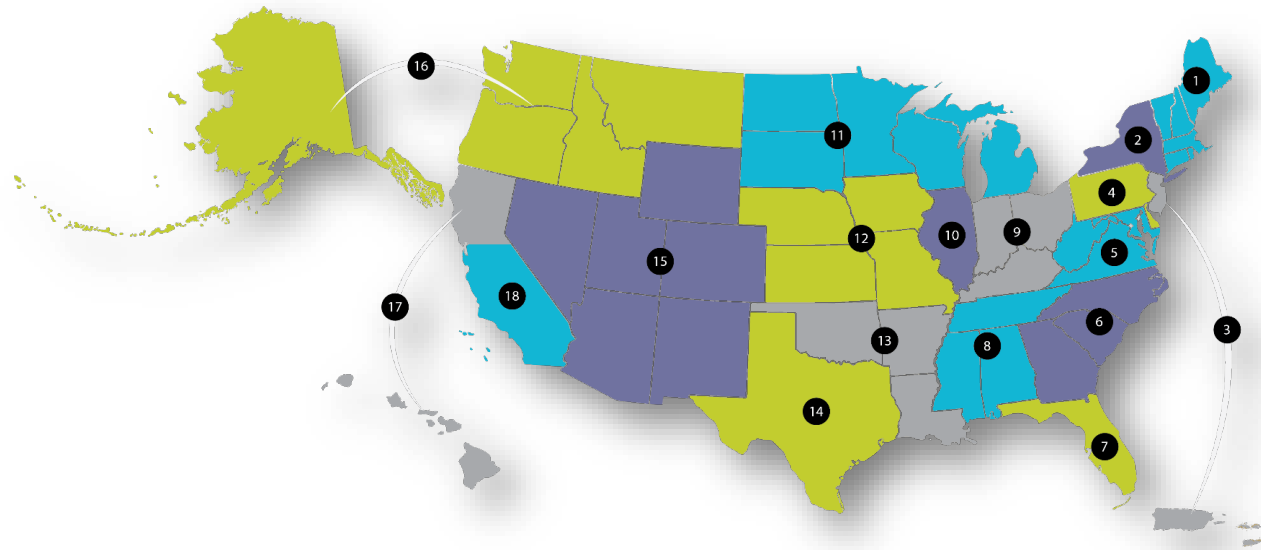
We encourage you to meet with the facility staff member who nominated you to discuss your role and agree on the activities in which you will participate as an FPR. With his or her help, *you* will decide how *you* can make a difference at your facility. For more details on common terms used to describe FPR and the ESRD arena, refer to the Acronym Guide on page 8.

What Is My Commitment as a Volunteer?

As a volunteer, we value your time and understand that life and your health can sometimes limit your involvement. There is much to do; there may be more than one FPR per dialysis facility to help carry the load. More FPRs mean more patient engagement at the facility level! We ask that you serve as FPR for at least one year. If you decide you are no longer able to volunteer, please notify your facility so you can discontinue your agreement and be relieved of volunteer FPR duties. This will allow your facility to find a replacement FPR to take on your role.

What the Network Is

Prior to 1972, Medicare did not pay for any care specific to End Stage Renal Disease (ESRD). Patients had to pay for their own treatments. Then, in 1972, Congress passed section 1881 of the Social Security Act (SSA). The SSA established the ESRD Program. The ESRD program is under contract with the Centers for Medicare & Medicaid Services (CMS). Under the ESRD Program, Medicare pays for dialysis and transplant services and oversees all ESRD care. There are 18 ESRD Networks across the country that efficiently and effectively increase the quality of care and quality of life for ESRD patients, and all HSAG ESRD Network activities are focused on promoting patient-centered care as well as patient and family engagement at the provider level.



Health Services Advisory Group (HSAG): ESRD Network 15 covers Arizona, Colorado, New Mexico, Nevada, Utah, and Wyoming.

What the Network Hopes to Achieve

The goals of the ESRD Network Program are to:

- Empower patients and doctors to make decisions about their healthcare.
- Support state flexibility and local leadership to meet patient needs.
- Support innovative approaches to improve quality, accessibility, and affordability.
- Improve the CMS customer experience.

What Is HSAG?

HSAG is responsible for managing several of the ESRD Networks (20% of the ESRD patient population nation-wide), including:

- Network 7
- Network 13
- **Network 15**
- Network 17

HSAG is contracted by CMS. Our job is to improve the quality of healthcare for Medicare patients. We do that by keeping patients, like you, at the center of all healthcare decisions.

HIPAA and the Privacy of Medical Information

What Is HIPAA?

HIPAA is the Health Insurance Portability and Accountability Act of 1996. This Act protects the healthcare privacy of all Americans. Basically, it means that all information about your health is private and should be kept private.

Sharing Your Medical Information With Other Patients

You may choose to share your health information with others, but that is up to you. If someone shares their health information with you, you must keep it confidential.

Do Not Give Medical Advice

As kidney patients, you have a lot to teach each other, and you are free to share your own experiences. But be careful! **Never** act as an authority regarding medical information. **Never** give medical advice. Medicines or a diet that works for you may be dangerous or even deadly to another patient. Even a tiny difference in a person's medical condition can make a difference. Remember, you are the expert on being a patient. Medical professionals are the experts on healthcare. The best help you can give to another patient is to send them to the right staff member.

Resources

HSAG: ESRD Network 15	www.hsag.com/esrdnetwork15
American Association of Kidney Patients (AAKP)	www.aakp.org
American Kidney Fund (AKF)	www.kidneyfund.org
Dialysis Facility Compare	www.medicare.gov/dialysisfacilitycompare
Forum of ESRD Networks	www.esrdnetworks.org
National Kidney Foundation (NKF)	www.kidney.org
ESRD National Coordinating Center	www.esrdncc.org
KCER	www.kcercoalition.com
Renal Support Network (RSN)	http://www.rsnhope.org/
Medical Education Institute (MEI)	https://meiresearch.org/
In-Center Hemodialysis CAHPS	https://ichcahps.org/
United Network for Organ Sharing (UNOS)	https://unos.org/
National Living Donor Assistance Center (NLDAC)	https://www.livingdonorassistance.org/home/default.aspx

Acronym Guide

2728	ESRD Medical Evidence Report
A	
AAKP	American Association of Kidney Patients
AKF	American Kidney Fund
APRN	Advanced Practice Registered Nurse
AVF	Arteriovenous Fistula
AVG	Arteriovenous Graft
B	
BFR	Blood Flow Rate
BMI	Body Mass Index
BOD	Board of Directors
BP	Blood Pressure
BSI	Bloodstream Infection
BUN	Blood Urea Nitrogen
C	
CAPD	Continuous Ambulatory Peritoneal Dialysis
CCHT	Certified Clinical Hemodialysis Technician
CCN	CMS Certification Number (Previously MPN)
CCPD	Continuous Cycling Peritoneal Dialysis
CDC	Centers for Disease Control and Prevention
CDN	Certified Dialysis Nurse
CEU	Continuing Education Unit
CfC	Conditions for Coverage
CHT	Certified Hemodialysis Technician
CKD	Chronic Kidney Disease
CM	Clinic Manager
CMS	Centers for Medicare & Medicaid Services
COPD	Chronic Obstructive Pulmonary Disease
COR	Contract Office Representative
CW	CROWNWeb
D	
DFC	Dialysis Facility Compare

E	
EMR	Electronic Medical Record
EMTALA	Emergency Medical Treatment and Labor Act of 1986
EPO	Epogen or Erythropoietin
ESRD	End Stage Renal Disease
ESRD NCC	End Stage Renal Disease National Coordinating Center
F	
FA	Facility Administrator
FOIA	Freedom of Information Act
H	
HAI	Healthcare-Associated Infection
HbsAb	Hepatitis B Surface Antibody
HbsAg	Hepatitis B Surface Antigen
HBV	Hepatitis B Virus
HD	Hemodialysis
HGB	Hemoglobin
HHD	Home Hemodialysis
HIPAA	Health Information Portability and Accountability Act of 1996
HSAG	Health Services Advisory Group, Inc.
I	
ICHD	In-Center Hemodialysis
ICH CAHPS	In-Center Hemodialysis Consumer Assessment of Healthcare Providers and Systems
IDT	Inter-Disciplinary Team
IVD	Involuntary Discharge
IVT	Involuntary Transfer
K	
KCER	Kidney Community Emergency Response
KDOQI	Kidney Disease Outcomes Quality Initiative
KDQOL	Kidney Disease Quality of Life Survey
Kt/V	Method to Measure Adequacy of Dialysis: K = the Dialyzer Clearance T = Time on Dialysis V = Volume of Water in the Patient's Body

L	
LAN	Learning and Action Network
LDO	Large Dialysis Organization
LTC	Long-Term Catheter
M	
MRB	Medical Review Board
N	
NC	Network Council
NCC	National Coordinating Center
NKF	National Kidney Foundation
NPFE LAN	National Patient and Family Engagement Learning and Action Network
O	
OCR	Office for Civil Rights (Organization within HHS)
P	
PA	Physician Assistant
PAC	Patient Advisory Committee
PCP	Primary Care Physician, Primary Care Provider, Primary Care Practitioner
PCT	Patient Care Technician
PD	Peritoneal Dialysis
PEP	Performance Evaluation Program
PFE	Patient and Family Engagement
POA	Power of Attorney
POC	Plan of Care
PPE	Personal Protective Equipment
PSC	Patient Services Coordinator
PSC/PSR	Performance Score Certificate or Performance Score Report
PSD	Patient Services Director
Q	
QAPI	Quality Assessment and Performance Improvement
QI	Quality Improvement
QIA	Quality Improvement Activity
QIC	Quality Improvement Coordinator
QID	Quality Improvement Director

R	
RCA	Root Cause Analysis
RD	Registered Dietician
REMIS	Renal Management Information System
RN	Registered Nurse
S	
SME	Subject Matter Expert
SSA	State Survey Agency
SSDI	Supplemental Security Disability Insurance, Social Security Disability Insurance
SSI	Supplemental Security Income
SSN	Social Security Number
T	
TPS	Total Performance Score
U	
UNOS	United Network of Organ Sharing
UPI	Unique Patient Identifier

Contact Information

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