

Southern California Renal Disease Council, Inc.

ESRD Network 18

Emergency Preparedness & Response Project with Innovative Dialysis Systems, Inc.

Project Summary

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Purpose: To help ESRD Providers develop and implement Emergency Preparedness & Response Plans.

Objectives: To have all ESRD Network 18 facilities have a formal written Emergency Preparedness & Response Plan in place by December 31, 2007.

Methods: In Fall 2006 the Network partnered with a small group of facilities (Innovative Dialysis Systems, Inc) to conduct a rapid-cycle improvement project (RCIP) utilizing materials developed by the National Coalition (The Kidney Community Emergency Response Coalition) and local resources. The kick-off meeting took place on September 27, 2006, and initial planning began. 5 (five) facilities participated in this project. The QI Director provided Emergency Preparedness & Response Training to the facility managers on October 12, 2006 during their annual facility directors meeting. On October 31, 2006, the Network QI held a meeting with the facility directors and the CQI Coordinator Vallorie Clarke, RN, MPA, CPHQ.

Timeline:

- ❑ November 1-16, 2006 – assessment of facility readiness
- ❑ November 16, 2006 – Conference Call #1
- ❑ November 17- 27th, 2006 - Employee training
- ❑ November 30, 2006 – Conference Call #2
- ❑ December 1- 31, 2006 – patient education
- ❑ December 21, 2006 - Conference Call # 3
- ❑ January 18, 2007 – Conference call #4 – summarize the project and lessons learned.

Summary:

The project ended in January 2007, with the completion of all preparedness components of the project (facility readiness, employee educations, and patient education). The group had a conference call to review the project and discuss lessons learned during this time. All facility managers completed the facility preparedness checklist (the same checklist was filled out during the baseline measurement). All participants agreed that after conducting this RCIP their facilities are better prepared to handle any type of emergency than they were three months ago before they started the project.

Mission Statement

To provide leadership and assistance to renal dialysis and transplant facilities in a manner that supports continuous improvement in patient care, outcomes, safety and satisfaction.

Lessons learned:

- ❑ Emergency preparedness is a continuous process, which has to be reviewed consistently (for both facility staff and patients);
- ❑ Lobby fairs for patients are great, but one-on-one education is more worthwhile, although it is a time-consuming process;
- ❑ Coordinate emergency preparedness day on the same day with the quarterly “clamp-and-cut” review with patients. Patients should be asked to perform a return demonstration once a year on clamp-and cut review. It is a good time to talk to patients and remind them about their emergency diet, numbers, and checklist. On the same day, a designated staff at the facility needs to review the facility preparedness checklist, emergency box supply kit, update patient information and numbers, and perform staff inservice.
- ❑ Positive feedback was received from all participating facilities – the staff members expressed that during this project they assessed an individual family readiness and took some steps towards emergency preparedness for their households.
- ❑ One of the facility managers reported that the project helped his facility handle the water system breakage and successfully dialyze their patients in a sister facility (they had enough supply on hand and all patient information updated).
- ❑ It is a good idea to have the local city emergency numbers available – they will be able to refer to local shelters depending on the nature of disaster after it occurs.