



MEMORANDUM

To: «HNURSNAME», Clinic Manager  
CCN: «PROVNUM» «PROVNAME»

From: Harriet L. Edwards, Executive Director  
Shean Strong, Quality Improvement Manager  
Jenna Freeman, Patient Services Manager  
Svetlana Lyulkin, Data Manager

Subject: **Network Mailing**

Date: October 31, 2011

Please review the mailing for the following enclosed items:

ITEM	DESCRIPTION/INSTRUCTIONS	ACTION
News from the Network Newsletter: Volume 7	This newsletter will provide you with information regarding Network updates, information, activities, and projects.	Review and share with staff.
Fistula First Breakthrough Initiative (FFBI) Reports & Resources	These reports represent vascular access rates for incident and prevalent patients in your facility. Review the data provided for your facility's progress and opportunities for improvement as well as comparison with others in the Network.  Enclosed: Fistula First Reports: <ul style="list-style-type: none"> <li>• Vascular Access Status Report;</li> <li>• Vascular Access Used in Prevalent Patients;</li> <li>• Fistula Use and Placement Rates in Incident Patients;</li> <li>• Champion Vascular Access Facilities.</li> </ul>	<ul style="list-style-type: none"> <li>• Review data for opportunities for improvement. Please take note of all vascular access trends.</li> <li>• Network staff may follow up to discuss your facility's results.</li> </ul>
2012 Network Clinical Performance Goals	Clinical Performance Goals provides a measurement tool to assess facility patient care processes and outcomes, and identify opportunities for improvement. The Network goal is used to combine efforts with renal facilities to improve performance in the delivery of quality patient care.  Enclosed: 2012 Network Clinical Performance Goals.	Facilities that do not meet either the Network or national mean/proportions for each indicator will be monitored by the Network and may be selected to participate in Network-driven QAPI projects.
Blood Sample Error Report: May-August 2011	The blood sample error data used to develop this report was obtained from local transplant facilities and/or their affiliated laboratories in which your facility has submitted blood samples. Please note the types of errors being submitted and	Submission of any laboratory specimens must be 100% accurate at all times.

**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.*

ESRD NETWORK 18

	<p>ensure that they are corrected prior to submitting future blood samples.</p> <p>Enclosed: Facility-specific Blood Sample Error Report</p>	
<p>Shining Stars: July-September 2011</p>	<p>Enclosed please find your facility-specific <i>Delinquent Form Submission Report</i> for July-September 2011. The forms listed were received after the original due date or were never received by the Network. Please review the report for areas to improve in timely data submission.</p> <p>Enclosed: Shining Stars Flyer (July-September 2011)</p>	<p>Review report and improve timely data submission in necessary areas.</p>

Should you have any questions, please contact the Network 18 office at (323) 962-2020.