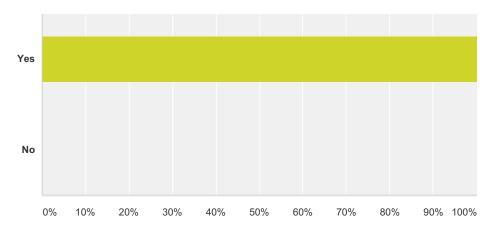
Q1 Do you invite patients to attend care conferences?

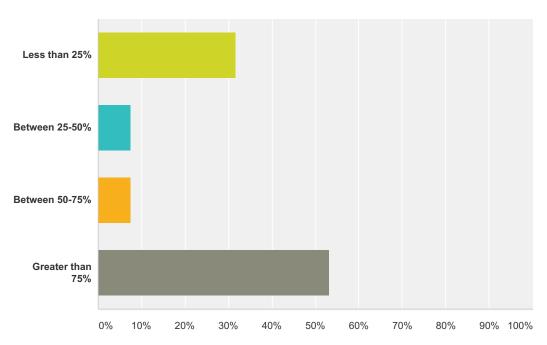




Answer Choices	Responses	
Yes	100.00%	120
No	0.00%	0
Total		120

Q2 If yes, approximately what percentage of patients actually attend care conferences?





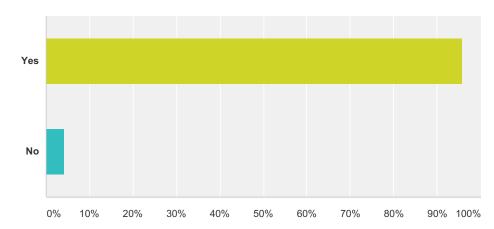
Answer Choices	Responses	
Less than 25%	31.67%	38
Between 25-50%	7.50%	9
Between 50-75%	7.50%	9
Greater than 75%	53.33%	64
Total		120

#	Comment	Date
1	almost all patients choose to do at chairside	3/5/2015 11:28 AM
2	we do care conferences chair side	3/5/2015 8:12 AM
3	All our patients attend their care plans	3/2/2015 10:18 AM
4	we do many chair side	3/2/2015 7:15 AM
5	The only ones who don't participate have a mental illness and just are not comfortable with careplans-view it as stressful to go thru and we respect their wishes.	2/27/2015 6:14 PM
6	done chairside	2/27/2015 11:31 AM
7	we do all care conferences chairside usually	2/27/2015 10:46 AM
8	I would have to do an audit to know for sure, but the majority of our patients attends care confernces.	2/27/2015 9:32 AM
9	This question needs to be reworded/clarified; all pts. attend Care Conferences because we offer to hold them chairside vs. a formal mtg. before or after tx. in the Conference room.	2/27/2015 9:14 AM
10	I focus on the older patients who live with their children and non-Englsih speaking pts.	2/27/2015 8:37 AM

11	We make sure to have the care conferences either before or after their tx time so they are able to attend. We also do them chairside if pt requests.	2/27/2015 7:41 AM
12	We hold care conferences chairside due to patient preference, but do offer private conferences as needed or requested	2/27/2015 6:51 AM
13	the apathy is consistent with both dialysis tx, diet, fluid mgmt and medication (including Insulin) non-compliance, poor pt motivation to actively participate in their health care mgmt is the only thing consistent with many pts	2/27/2015 6:15 AM
14	Care conferences are generally done on a day that the patients are at the dialysis clinic for their dialysis treatment.	2/26/2015 4:41 PM
15	Transportation is an issue for many of our patients	2/26/2015 4:24 PM
16	We make it mandatory for patient and families, but it is challenging getting them scheduled. Some families harder than others with work schedules, etc.	2/26/2015 4:07 PM
17	Doctor comes for rdg and conferences that day as scheduled by the MSSW.	2/26/2015 3:58 PM
18	transportation is a hinderence	2/26/2015 3:49 PM
19	We do care plans chairside	2/26/2015 3:44 PM

Q3 Do you invite family members or caregivers to attend patient care conferences?

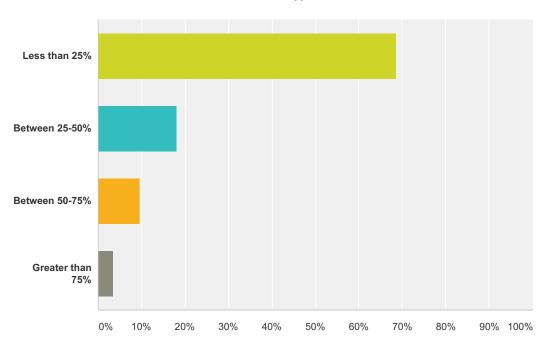
Answered: 119 Skipped: 1



Answer Choices	Responses	
Yes	95.80%	114
No	4.20%	5
Total		119

Q4 If yes, approximately what percentage of family members for caregivers attend care conferences?

Answered: 115 Skipped: 5



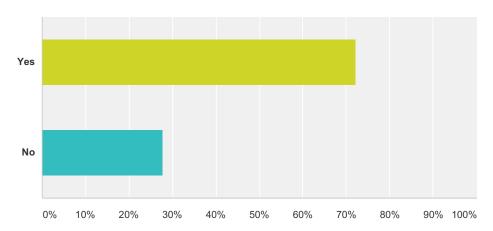
Answer Choices	Responses
Less than 25%	68.70% 79
Between 25-50%	18.26% 21
Between 50-75%	9.57% 11
Greater than 75%	3.48% 4
Total	115

#	Comment	Date
1	Not all pts want their family invited; for those that do, generally then family will attend.	3/2/2015 12:13 PM
2	We invite family when pt relies on them for decision making, so most of the time we invite pt only.	3/2/2015 9:06 AM
3	About 20% for our long time patients. For the new patients, more like 50%.	2/27/2015 6:14 PM
4	It is typically up to the patient to invite caregivers or family but I always encourage them to do so.	2/27/2015 2:50 PM
5	If Pt. agrees to have them come!	2/27/2015 10:11 AM
6	For question 3, I invite family or caregivers only at pt request, but do let patients know that support persons are welcome at hte care conference.	2/27/2015 9:32 AM
7	Family generally not present when we present invite.	2/27/2015 9:32 AM
8	pts are told family members are welcome to attend but we do not make a seperate invitation to patient famly members.	2/27/2015 9:17 AM

9	Most of our pts. use some form of Medicaid or public transportation, which will not wait for more than 2-5 minutes for the pt. to come out to the van/bus.	2/27/2015 9:14 AM
10	This is part of what I do routinely with new patients; some family's really engage and are part of pts. daily treat. Two families was present for every rounding since last year.	2/27/2015 8:37 AM
11	such a We are such a small Unit that we have daily interaction with patient's family as needed or requested. Meetings are often informal and spontaneous in immediate response to family and patients.	2/27/2015 7:55 AM
12	I'm not sure why this turn out is low. The time frame may not fit family member's who are working etc.	2/26/2015 4:41 PM
13	Many of our patients do not own cars	2/26/2015 4:24 PM
14	Once our patients are 18, we invite the parents, but do not require them to attend.	2/26/2015 4:07 PM
15	MSSW also calls SWs at NH or others involved in their care.	2/26/2015 3:58 PM
16	patients must give consent for them to attend	2/26/2015 3:49 PM

Q5 Do you conduct patient care conferences via monthly interdisciplinary rounds?

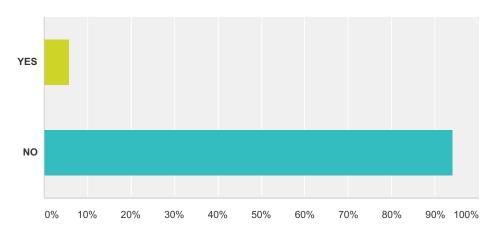
Answered: 115 Skipped: 5



Answer Choices	Responses
Yes	72.17% 83
No	27.83 % 32
Total	115

Q6 Do you invite patients to attend your Quality Assessment and Performance Improvement (QAPI) meetings?

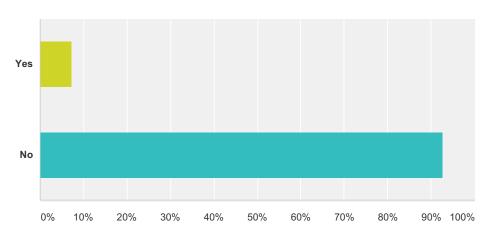




Answer Choices	Responses	
YES	5.83%	7
NO	94.17%	113
Total		120

Q7 Do patients or family members serve on your governing board?



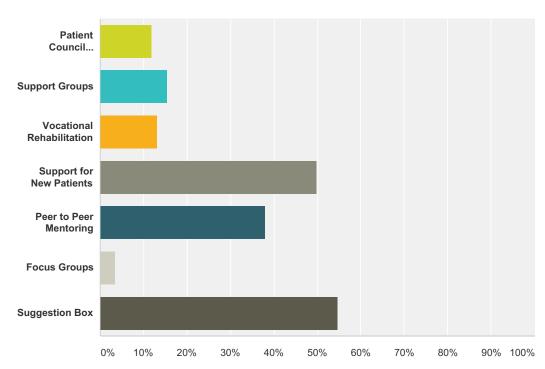


Answer Choices	Responses	
Yes	7.41%	8
No	92.59%	100
Total		108

#	Other (please specify)	Date
1	unknown	3/2/2015 11:41 AM
2	not sure, in the past yes	3/2/2015 7:18 AM
3	We had discussed the possibility of a patient or family member attend our QAPI mtgs and found it to be too difficult due to the content that is discussed which would be in direct conflict of HIPPA laws. Many times have invited family members to attend after and were refused.	2/28/2015 12:24 PM
4	patients and family may participate in bi-monthly Patient Advisory Council intended to facillitate communication, and patient/family participation.	2/27/2015 4:52 PM
5	I am not sure I could call it a governing board but we do have an official consumer/patient representative.	2/27/2015 2:50 PM
6	I don't think we have a governing board?	2/27/2015 2:20 PM
7	I'm not sure who is on our governing board besides the doctors & administrator.	2/27/2015 12:19 PM
8	at times they have.	2/27/2015 10:11 AM
9	unsure	2/27/2015 9:32 AM
10	I do not know the anser to this question.	2/27/2015 9:14 AM
11	Not sure	2/27/2015 8:04 AM
12	We are such a small Unit that we have daily interaction with patient's family as needed or requested. Meetings are often informal and spontaneous in immediate response to family and patients.	2/27/2015 7:55 AM
13	not to my knowledge, thought QAPI & governing board was confidential???!!!	2/27/2015 6:15 AM
14	Our dialysis unit is managed by a health board in which they oversee the management of the dialysis clinic.	2/26/2015 4:41 PM
15	I don't know	2/26/2015 4:24 PM

Q8 In which of the following ways does your facility engage patients or family members in facility activities? Check all that apply.

Answered: 84 Skipped: 36



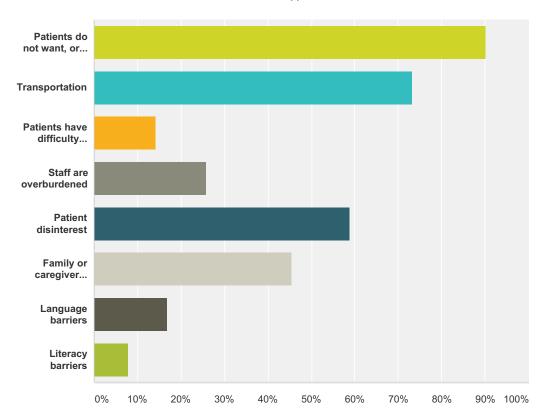
Answer Choices	Responses	
Patient Council Meetings	11.90%	10
Support Groups	15.48%	13
Vocational Rehabilitation	13.10%	11
Support for New Patients	50.00%	42
Peer to Peer Mentoring	38.10%	32
Focus Groups	3.57%	3
Suggestion Box	54.76%	46
Total Respondents: 84		

#	Other (please specify)	Date
1	We offered support groups and only two people showed up. Will try offering again in April when weather is better.	3/3/2015 10:27 AM
2	We invite family to play bingo if they are here. Staff do a really nice job of getting to know family when family stops into the unit.	3/2/2015 9:06 AM
3	We have Holiday parties including patient families to attend, outside barbecues, etc. Christmas Mrs Santa and Mr Santa visit with family and patients. We hold kidney smart classes and invite family members to educate.	2/28/2015 12:24 PM

4	peer mentoring just beginning	2/27/2015 4:52 PM
5	We recently had 2 patients initiate creating a patient to patient support group but it has not yet been implemented.	2/27/2015 2:50 PM
6	Our patients interact with each other in the lobby, during tx and communicate any issues with SW, CM, MD, RN's, RD, PCT's.	2/27/2015 12:40 PM
7	Bulletin boards, written information in lobby. Perr-to-peer mentoring is occasional (on as-needed basis)	2/27/2015 12:19 PM
8	bulletin boards and printed material	2/27/2015 12:10 PM
9	Summer Patient/Family Picnic	2/27/2015 11:05 AM
10	working on getting Peer to Peer mentoring started.	2/27/2015 10:11 AM
11	patient satisfaction surveys	2/27/2015 9:17 AM
12	Vocational Rehab for those patinets who are interested.	2/27/2015 9:08 AM
13	with HIPPA we have to be very careful about even talking about another name so this is very hard.	2/27/2015 8:54 AM
14	Regular discussions over the phone or when family brings or picks up patient	2/27/2015 8:41 AM
15	We have not formalized this areas in my facilities, however any time family wants to be part of the pts' treatment their involvement is welcomed and encouraged.	2/27/2015 8:37 AM
16	Wall of Fame, Caregiver Appreciation picnics, NKF Events	2/27/2015 8:26 AM
17	Patient Satisfaction Survey	2/27/2015 8:16 AM
18	We are such a small Unit that we have daily interaction with patient's family as needed or requested. Meetings are often informal and spontaneous in immediate response to family and patients.	2/27/2015 7:55 AM
19	We are going to start peer to peer mentoring.	2/27/2015 7:41 AM
20	Support Groups would be a great idea but pt motivation/participation might be the problem	2/27/2015 6:15 AM
21	Manager does monthly patient rounding-asks about quality of care and updates each patient on facility activities and answers questions.	2/27/2015 4:43 AM
22	Support is provided by dialysis staff that are involved in direct care.	2/26/2015 4:41 PM
23	Patients have not wanted a council or support group when surveyed in the past about getting a group started	2/26/2015 4:29 PM
24	Transition to Adult Transplant Center	2/26/2015 4:24 PM
25	The hospital does have a Patient Family Council we can suggest to parents of dialysis patients to join/attend.	2/26/2015 4:07 PM
26	none	2/26/2015 4:01 PM
27	Tried a support group last year but it fizzled out due to lack of attendence.	2/26/2015 3:58 PM
28	Conversations with their primary nurses.	2/26/2015 3:50 PM
29	None of these	2/26/2015 3:44 PM

Q9 Which of the following are barriers to patient and family engagement? Check all that apply.

Answered: 112 Skipped: 8



ver Choices	Responses	
Patients do not want, or are unable, to meet outside of their treatment time	90.18%	10
Transportation	73.21%	8
Patients have difficulty communicating with family members or caregivers	14.29%	1
Staff are overburdened	25.89%	2
Patient disinterest	58.93%	6
Family or caregiver disinterest	45.54%	5
Language barriers	16.96%	1
Literacy barriers	8.04%	
al Respondents: 112		

#	Other (please specify)	Date

1	patients coming in for treatment are already working through several hurdles to be there,including family responsibilities,work schedules,transportation issues,financial concerns;decrease in energy to do everything they were able to do before and several co- morbid conditions; few have only kidney failure as a diagnosis;pts at times have expressed displeasure in being asked to participate in a meeting or project or to complete another survey; in addition to this,many families are not cohesive or pts do not want family members involved in their decisions;invitations to participate should be done but we need to recognize and respect pt choice to be involved;	3/3/2015 11:39 AM
2	We are fortunate that many of our pts are comfortable with taking an active role in their own care. Family or NH is involved when pt is not independent.	3/2/2015 9:06 AM
3	Patient and family disinterest is the main reason.	2/28/2015 12:24 PM
4	We had a support group at one time in our area. Patients &family DID come and LOVED IT. A former patient of mine who volunteers now with NKF recently called me about getting it restarted. I feel too overburdened to lead it right now but I found a nearby social worker who hopefully will lead it with the NKF peer mentor. I will enthusiastically get my patients to it.	2/27/2015 6:14 PM
5	Patients are most often anxious to leave the clinic once their treatment is finished, and most of our patients are dependent upon subsidized transportation so making changes in scheduling is difficult, and they typically are afraid to make such changes because it often means disruption due to trips being re-routed to alternative vendors ect.	2/27/2015 2:50 PM
6	Family members are working during that time and many of our patients are nursing home patients.	2/27/2015 1:07 PM
7	Staff are too busy, not necessarily overburdened.	2/27/2015 12:19 PM
8	The conferences are on the same day as patient treatment day to eliminate transportation issues. Often family members can not attend because they work. Also, occasionally the patients do not want their fmily members invited they dont seem to see a need for it.	2/27/2015 9:08 AM
9	Family memebrs may be busy working to support the famlily, retired spouses stay at home and some have been present for every treatment.	2/27/2015 8:37 AM
10	Relatively new dialysis unit so don't yet have some activities up and running yet	2/27/2015 8:03 AM
11	such a small Unit that we have daily interaction with patient's family as needed or requested. Meetings are often informal and spontaneous in immediate response to family and patients.	2/27/2015 7:55 AM
12	Support groups have failed in the past d/t patients not wanting to come outside of their tx time.	2/27/2015 7:41 AM
13	Family's work and unable to take time off or don't want to take time off	2/27/2015 6:58 AM
14	Patients do not want to spend more time in dialysis than they have to	2/26/2015 4:29 PM
15	We have patients who speak arabic, spanish, vietnamese, and english	2/26/2015 4:24 PM
16	Administrators seem to want play down ideas of pt involvement. Did not like it when social worker coordinated a support group. I think its a "power" or "control" thing.	2/26/2015 3:58 PM
		1

Q10 What suggestions or best practices do you have for increasing patient and family engagement?

Answered: 41 Skipped: 79

#	Responses	Date
1	Pts and families appear to be most engaged but overwhelmed at the beginning of treatment when everything is new; as time goes on,they appear to be more reluctant to get involved in new programs because dialysis has already consumed so much of their time; the projects they seem to be more interested in are with family/friends in social and fun settings; actually there is more involvement in kidney walks at a local zoo because they are able to go with friends and family and have a good time in socializing	3/3/2015 11:39 AM
2	We have been offering the care conf on their dialysis days. This has increased participation.	3/3/2015 10:27 AM
3	Put both names on the invitations.	3/2/2015 1:57 PM
4	we do try to maintain excellent phone communicatin with family members regarding labs or things we are seeing at dialysis	3/2/2015 12:42 PM
5	encourage pt's to invite family to care conference	3/2/2015 10:56 AM
6	hold meetings on date and times convenient for patients	3/2/2015 10:47 AM
7	none	3/2/2015 10:35 AM
8	Open and supportive enviroment for family to communicate	3/2/2015 9:35 AM
9	We offer to call patient or family members on the phone.	3/2/2015 9:14 AM
10	celebrations at the clinic for unique "holidays"	3/2/2015 9:07 AM
11	Help make family feel welcomed at the dialysis unit. You want to encourage communication when there is a need not only at careplan meeting.	3/2/2015 9:06 AM
12	Most patients prefer to meet at chairside during treatment.	3/2/2015 7:18 AM
13	changing patient boards frequently, staff engaging patient participation	3/1/2015 8:45 AM
14	Schedule more meetings	2/28/2015 6:50 PM
15	Family/patient picnics. We have a once a year home programs luncheon we provide away from the facility.	2/28/2015 12:24 PM
16	At our center, we do get a lot of good ideas from our suggestion box and patients are pretty active about giving us suggestions.	2/27/2015 6:14 PM
17	patient advisory council, semi annual patient luncheons at Lions Club, Local Church "adopted" our dialysis patients as their Christmas Family	2/27/2015 4:52 PM
18	I have found that offerring conferences via phone is sometimes very helpful. It allows patient and family to interact with team from comfort of their own home with complete privacy. Face to face is usually best, but this does really work well for some patients. I also encourage patients to take home educational dvds and cds. I have found some family members are able to hear information differently when it is coming from another dialysis patient vs patient him/herself or a staff member. It also offers them opportunity to take in material in comfort of their own home.	2/27/2015 2:50 PM
19	I try to talk to the patient when I see they have a family member or caregiver with them, and therefore engage them in conversation regarding the patient.	2/27/2015 2:20 PM
20	Develop relationships with patients/caregivers by talking with them on regular basis.	2/27/2015 12:19 PM
21	communicate partnership of hc and family in treating individuals	2/27/2015 10:46 AM
22	Introduced to family members by Pt. staff. Making ourselves present and visible to Pt. and family when coming in and going out.	2/27/2015 10:11 AM

23	none come to mind	2/27/2015 9:35 AM
24	More MSW time has recently been allotted to us & has helped considerably with more pt. input	2/27/2015 9:32 AM
25	We invite pts. to have their family members attend Care Conferences, bring any issues/concerns to the attention of the Soc. Worker or FA. It often seems, but not every pt. is often on their own, even if they live with someone, this is no insurance the family member will be engaged. I have a very large Arabic population, and even they, due to language barriers, no return calls, lack of interest??? are limitedly involved with pts./don't seem to want to be bothered?	2/27/2015 9:14 AM
26	We let the patients know that there family members can be included in there POC, Patients that include their family members we typically see them on a regualr basis and they let us know that they want to be present during this process.	2/27/2015 8:58 AM
27	We have had the 5 diamond training and will be implementing this in 2015.	2/27/2015 8:49 AM
28	I created a Patient Resource Booklet for both of my facilities. When I am present and doing the intake, my manner is energetic as I show family where to sign and how to ask for a new lab coat, I educate the family how important it will be for them to understand their loved one's dietary changes and when possible educate them on resources of NKF, AKF, our website for safe foods.	2/27/2015 8:37 AM
29	as the social worker i try and get the family/caregivers to come in at the onset of dialysis for a conference. At that time I go over all the questions they may have regarding the unit, i stress the availability of the MSW in the unit for all concerns, needs etc. I take them on a tour of the unit to familiarize them with the unit itself. I answer all concrete questions regarding insurance, transporation, rx, fears of the unknown. Building that initital trust is crucial.	2/27/2015 8:28 AM
30	Staff having the time to engage with patient's and family members on a routine bases without looking rushed or overburden.	2/27/2015 8:12 AM
31	Call caregivers at home who are interested in care but unable to stay for dialysis run	2/27/2015 8:03 AM
32	We are such a small Unit that we have daily interaction with patient's family as needed or requested. Meetings are often informal and spontaneous in immediate response to family and patients.	2/27/2015 7:55 AM
33	Making sure that you are accommodating the patients. The patients already spend 3 days a week at the facility and do not want to have to come an additional day. We make sure we plan care conferences on their scheduled day and either immediately before tx or after tx. 90-95% of our patients attend their care conferences annually.	2/27/2015 7:41 AM
34	Patient newsletter based on topics picked by patients. Peer mentoring program	2/27/2015 6:39 AM
35	involving pts/caregivers in monthly lab & diet reviews	2/27/2015 6:15 AM
36	We encourage the patient and family member's to ask questions at any time when there issues that are not clear, misunderstood etc.	2/26/2015 4:41 PM
37	Try education sessions or Ed Fairs in lounge on modalities, diet, cooking, or topics of interest Contests were tried on phos with some success in past but this takes a great deal of effort from staff who are already over burdened with direct patient care staff with low results	2/26/2015 4:29 PM
38	We have a regular lecture series for patients and family members called 'Kidney Talk'. Our faculty speak on a variety of topics and patients and family members have also given presentations in conjunction with the faculty.	2/26/2015 4:24 PM
39	Patient Care binders, monthly clinics to review treatments, medications and plans of care	2/26/2015 4:07 PM
40	Schedule care conference during dialysis treatments or if they prefer privacy, offer to meet before or after dialysis.	2/26/2015 3:58 PM
41	We have an annual meet and greet on a non dialysis treatment day and offer informational sessions on various dialysis related topics.	2/26/2015 3:49 PM

Q11 Do you have additional comments about patient and family engagement?

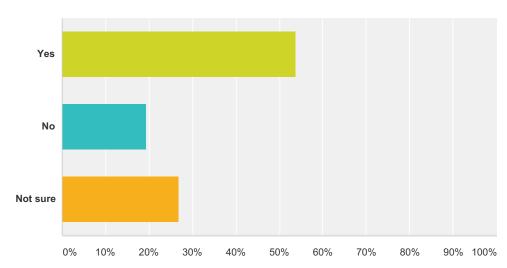
Answered: 34 Skipped: 86

#	Responses	Date
1	facility that we are housed in has recently began a family engagement council.	3/4/2015 12:32 PM
2	pts have complained about too many surveys,too many meetings,too many questionaires;	3/3/2015 11:39 AM
3	Seems as though our patients have so many other illnesses that they are busy outside of dialysis with medical apts and don't want to come back for anything.	3/3/2015 10:27 AM
4	Family members of new patients are more likely to attend.	3/2/2015 1:57 PM
5	We are an out patient office and only require pt/family care conferences when an issue has arisen that cannot be solved another way. We use these conferences as one way to measure a patient/family member's committment to transplant and the care required.	3/2/2015 10:35 AM
6	None.	3/2/2015 9:06 AM
7	I wish the IDT had more time available to meet and discuss POC and meet with pt.	3/2/2015 7:18 AM
3	none	3/1/2015 8:45 AM
9	would like to know more about 5 Diamond Patient Safety Program.	2/28/2015 6:50 PM
10	none	2/28/2015 12:24 PM
11	Our patient and family engagement is active but largely informal. Our patients and families socialize with each other a lot outside of the unit go out to eat together, visit each other's churches, etc. I see a real sense of mutual caring between patients and families in our lobby. Our patients are comfortable telling clinic staff what we are doing wrong and what we are doing right, and patients usually state that they have already talked this over with the other patients. I suppose we could formalize it, but I feel the informal system is working.	2/27/2015 6:14 PM
12	One of our patients completed Michigan's Annual Labor Day Mackinaw Bridge Walk (5 miles) last Fall, so we are planning to organize an annual "Dialysis Patient Walk" this year to raise community awareness and encourage family participation.	2/27/2015 4:52 PM
13	I believe it is important to be flexible and creative and to always ask what would work best for them and then try to create something that can work.	2/27/2015 2:50 PM
14	When talking to patients with English as a second language, it is almost mandatory to involve younger family members that speak English betterwe have Marti for translating for patients, but most patients prefer to have family members help translate for them	2/27/2015 2:20 PM
15	Families are busy not only taking care of their own needs ie. children, school work that it makes it difficult for them to manage one more thing to do.	2/27/2015 1:07 PM
16	our patients, in this County, have a very solid support system with their family/friends.	2/27/2015 12:40 PM
17	I encourage patients to go the the Renal Support Network web-site for information & to network with other patients.	2/27/2015 12:19 PM
18	Very important!!	2/27/2015 10:11 AM
19	none come to mind	2/27/2015 9:35 AM
20	See Above	2/27/2015 9:14 AM
21	I think our facility should have a family =caregiver education night or afternoon without the patient present. Just like with many other health issues the family does not appeart to be fully educated and it impacts the dynamics of the family and patients relationships.	2/27/2015 9:08 AM

00		0/07/0045 0 50 444
22	Offer family members the option of conference call during POC if they can't come to the clinic, or just givivg them updates by phone, only if they patient wants them to be apart of it, sometimes patients are private and do not want there family members included.	2/27/2015 8:58 AM
23	Patients who are disengaged rarely give permission to dialysis to to speak to family members	2/27/2015 8:41 AM
24	5 years ago when I started in this type of social work, I was surprised at the lack of family involvement for this medical appointment and wondered if it was a symptom of a trend in chronic care normalization, or family members busier with work, making ends meet, and did notice the kind of family who generally had extended family present were ones with long marriages and intact families from earlier generations when health care caused family to come together.	2/27/2015 8:37 AM
25	keeping open lines of communication with patients and family is the crux of good quality care.	2/27/2015 8:28 AM
26	We don't do enough because of time constraints.	2/27/2015 8:12 AM
27	We are such a small Unit that we have daily interaction with patient's family as needed or requested. Meetings are often informal and spontaneous in immediate response to family and patients.	2/27/2015 7:55 AM
28	You cannot invite patients to QAPI meetings because at those meeting numerous other patients are discussed. HIPPA violation. We do not have the time to discuss all the QAPI concerns with a patient then turn around and have another multidisciplinary QAPI meeting to review it all over again.	2/27/2015 6:39 AM
29	See above comments	2/27/2015 6:15 AM
30	As staff here at the tribal dialysis unit we are always reassessing patient needs and adjusting their care as needed. We let the patient know what the care changes are and remind them to let their family member know so they can support the patient with the care that is recommended by the dialysis staff.	2/26/2015 4:41 PM
31	I try to get patients to do self care but many are un motivated and want the staff to wait on them. Due to infection control it's hard to have family on the unit but at times useful at the chairside and some want to be involved so they should be allowed.	2/26/2015 4:29 PM
32	We have a very active Nephrology Patient Advisory Council.	2/26/2015 4:24 PM
33	SW office is right off the lobby so patients can have easy and private access to the SW. A live interpreter is arranged and present at care conferences when necessary.	2/26/2015 3:58 PM
34	We have only one nephrologist that makes rounds with the interdisciplinary team. The other 5 just show up and expect staff to be available. We are working to try and change this but nephrologists are the ones that don't want to change.	2/26/2015 3:44 PM

Q12 Does your facility participate in the 5-Diamond Patient Safety Program?

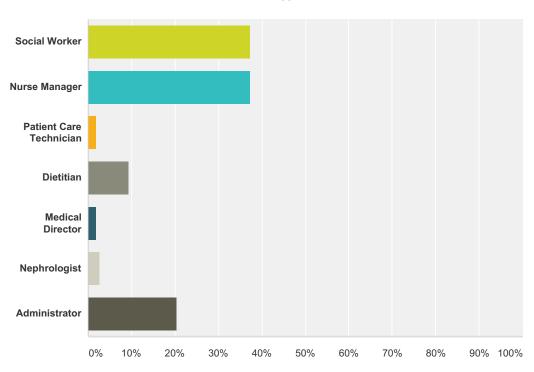




Answer Choices	Responses	
Yes	53.78%	64
No	19.33%	23
Not sure	26.89%	32
Total		119

Q13 What is role in the facility?

Answered: 107 Skipped: 13



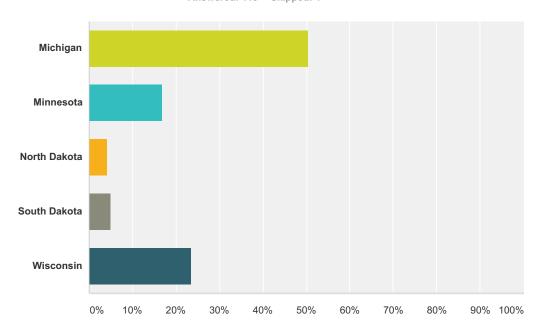
Answer Choices	Responses	
Social Worker	37.38%	40
Nurse Manager	37.38%	40
Patient Care Technician	1.87%	2
Dietitian	9.35%	10
Medical Director	1.87%	2
Nephrologist	2.80%	3
Administrator	20.56%	22
Total Respondents: 107		

#	Other (please specify)	Date
1	RN	3/2/2015 10:35 AM
2	charge nurse	3/2/2015 5:06 AM
3	Manager	2/27/2015 12:41 PM
4	Head Nurse	2/27/2015 8:25 AM
5	Correct English would be 'What is your role in the facility'	2/27/2015 6:15 AM
6	Sorry. The question is not clear. What is "role" in the facility? I am the administrator which is my role.	2/26/2015 4:41 PM
7	RN	2/26/2015 4:29 PM

2/26/2015 4:22 PM

Q14 In which state is your facility?

Answered: 119 Skipped: 1



Answer Choices		Responses	
Michigan	50	0.42% 60	
Minnesota	16	6.81% 20	
North Dakota	4.5	.20% 5	
South Dakota	5.0	.04% 6	
Wisconsin	23	3.53% 28	
Total		119	

#	Other (please specify)	Date
1	3 in WI 1 in MN	3/2/2015 10:56 AM
2	and ND	2/27/2015 12:09 PM
3	We are such a small Unit that we have daily interaction with patient's family as needed or requested. Meetings are often informal and spontaneous in immediate response to family and patients.	2/27/2015 7:55 AM
4	Administrators have toyed with the idea of just setting up a 2-3 hr window for patients to come and meet with the team on off dialysis days. Clinics that go that rout, and many do, have far less pt attendennce. It should be offered on dialysis days.	2/26/2015 3:58 PM