

# BEST PRACTICES

## for Engaging Patients in Facility QAPI Meetings



*This document was developed from feedback shared by dialysis social workers with successful processes for the active inclusion of patients as partners in Quality Assurance Performance Improvement (QAPI) in ESRD Networks 5 and 11.*

### **BARRIER:** Concerns about HIPPA and what data discussions to have with patients present

- BEST PRACTICES:**
- ✓ Discuss patient-level data in a separate part of the meeting when the patient can be excused.
  - ✓ Review only non-identified patient data and facility progress toward CMS/Network goals.

### **BARRIER:** Patients not interested in attending

- BEST PRACTICES:**
- ✓ When unable to get patient attendance, consider using a bulletin board with the facility's top three QAPI issues. Request patient feedback using a suggestion box or questionnaire. Then, review at QAPI meetings. Be sure to share the outcome with patients.
  - ✓ Help patients understand that involvement helps drive their plan of care and provides input on clinical barriers.
  - ✓ Have the team identify patients that would be good candidates. Have the medical director personally invite the patient. Post the position in case other patients are interested.
  - ✓ Pick a patient familiar with meeting decorum and agendas, who talks a lot with other patients, and is willing to contribute at meetings. Patients with business, teaching, or health care backgrounds are familiar with these processes.
  - ✓ Explain to interested patients how meetings flow. Show an example of the report with trends and the clinic's goals.
  - ✓ Ask patients to join one meeting to see what it is about - no commitment or need to talk.

### **BARRIER:** Patient unable to be present at QAPI meeting

- BEST PRACTICES:**
- ✓ Give patients the option to participate by phone or video conference or offer the patient to stay for a portion of the meeting. A staff member could sit with the patient during the call and explain what the team is talking about in real-time.
  - ✓ Offer the opportunity to review the information outside of the meeting and give a patient perspective that is reviewed during QAPI. Identify one staff member who would solicit this input and provide feedback to the patient after the QAPI meeting.

### **BARRIER:** Language

- BEST PRACTICES:**
- ✓ Build trust with patients and families.
  - ✓ Use interpreters. (e.g., language line, family, staff)

### **BARRIER:** Leadership/staff do not support patients being in QAPI meetings

- BEST PRACTICES:**
- ✓ Educate leadership regarding the valuable role patients play in informing IDT of what motivates patients to make changes that impact outcomes/measures.
  - ✓ Have supportive leadership from sister clinics to share value of having patients in QAPI.
  - ✓ Have staff who are reluctant to have a patient present at QAPI identify patients to invite.