



The CMS/HRSA Kidney Donation and Transplant Initiative



ESRD Treatment Choices Learning Collaborative The CMS/HRSA Kidney Donation & Transplant Initiative

members spent time with leaders from our Patient & Donor Family (PFR), KODA, Illinois Neurological Institute and Volunteers of America Mid States in an inspiring pacing event focused on the benefits of organ donation to the donor family.

This summer, we placed renewed focus on getting the right people on QI team meeting calls. Having the right team member on the call allows for rich dialogue. Please review the topic in advance of the meeting and consider inviting a relevant internal team member!! In July, the TAQIL Team began one-on-one calls to each Transplant Center in the collaborative, as part of our pursuit to address the Aim 2, non-use goal. These conversations are intended to open the dialogue around current acceptance practices, review individual facility data, and allow the TAQIL team to hear about the great work being done to improve kidney utilization.

Join the new
[ETCLC Page on
LinkedIn](#)

ETCLC CALL TO ACTION: In the Fall, Transplant Center Reports will be emailed to each program with a letter of support from CMS, HRSA & CMMI. The first reports were emailed to all Transplant Centers in December. Please review and compare the differences as well as individual targets provided to each program.

Reminder: Please continue to report on the work of your initiatives by the 10th of each month via the Progress Tracker. Thank you for your commitment to the collaborative and to each other!

Aim	Current	Projected	Target	Status
Aim #1. Increase Deceased Kidney Transplants	21,380	21,888	21,232	🟢
Aim #2a. Decrease Non-Use Rate KDPI <60	8.7%	8.4%	8.2%	🟡
Aim #2b. Decrease Non-Use Rate KDPI >=60	48.6%	48.8%	40.0%	🔴
Aim #3. Increase percentage of >=60 KDPI recovered for Transplant	13,458	14,124	12,074	🟢

All counts and rates are based on a 12-month lookback ending in last month of available data. Projections, based on predictions from LOESS regression models, are compared to targets to determine status by the end of August 2023.

ETCLC NATIONAL AIMS 2022 - 2023

The ETCLC identifies highly effective practices currently in use to spread throughout the organ donation, recovery, kidney care, and kidney transplant community to achieve the bold Aims of the ETCLC.

ETCLC Patient & Donor Family Representative (PFR)

Over the Summer, the PFR group provided feedback on their participation during QI Team calls, reviewed their roles and reviewed other ways for PFR can contribute to the ETCLC project. They also reviewed and approved two educational resources on *Better Than Dialysis Kidneys* and *What I Need to Know About Donating My Loved Ones Organs*. This week the PFRs

If you missed the July 19th Patient and Donor Family focused Pacing Event, "Healing You, Healing Me", please check the KSP to watch the replay.

We are grateful for your passion and commitment to sharing your experiences; you keep patients and families at the center of our work.

July Health Equity Assessment Highlights

Acknowledging there are significant barriers that exacerbate inequities throughout the kidney transplantation process, ETCLC set out an environmental scan to participating transplant centers and OPO members in July. Among these barriers, racial and ethnic disparities and low socioeconomic status play pivotal roles that contribute to inequities in kidney transplantation. The ETCLC has shared two, one-page resource sheets via email. The first underscores the prominent barriers, while the second delineates actionable steps to mitigate the disparities arising from these impediments. If you would like the resources resent to you, please contact us at TAQILInfo@hsag.com.

ETCLC Health Equity Highlights Needs Assessment:

- 55% have a systematic process for screening for health related social needs
- 38% track referrals to community-based organizations
- 39% have measures to evaluate transplant equity
- 72% indicated needing current data trends and issues that highlight health equity gaps

From our LCC Partners

- eGFR OPTN Implementation must be completed by January 2024. "Everything You Wanted to Know", a 2-Page Flyer is available from the Alliance. For more information, visit [The Alliance Insight Series](#)
- AAKP. [Research Uncovers Patient Insights into What is Important to them in Accepting a Donor Kidney - YouTube](#)
 - CJASN Article [Patient Preference for Waiting Time and Kidney Quality](#)
- August is [National Multiethnic Donor Awareness Month](#)
- The Alliance: [National Critical issues Forum focused on Logistics and Reducing Organ Loss](#). September 12-13 – Kansas City, MO
- 2023 AMAT Annual Conference. [Rise Up-Breaking Barriers Throughout the Donation and Transplantation Ecosystem](#)
- [ASN Kidney Week 2023](#). November 2-6 – Philadelphia, PA

In Case You Missed It (ICYMI)

The End of Year 2 Learning & Action Network (LAN) call was held on July 26th. During the call the collaborative recognized the ETCLC high performers, looked back at the year and reviewed insights from the QI Teams, organizational initiatives and the 2023 Insights & Experiences Change Packages that are [now available](#). The recording is available on the KSP.

Congratulations to the July ETCLC Gamechangers & Innovators!

These organizations were recognized during the July 26th End of Year 2 (LAN) and will receive a Certificate via email. Thank you for your commitment to kidney patients and donor families.

From April 2022 – March 2023, these high-performing organizations have achieved better than median outcomes (SRTR).

Organ Procurement Organization Partners

Gift of Hope
LiveOnNY
Mid-America Transplant
Mississippi Organ Recovery Agency
We Are Sharing Hope SC

**Achieved in January and July*

Donor Hospital Partners

AdventHealth Orlando*
Akron City Hospital, Summa
ARUA-UAMS The University Hospital of Arkansas*
Atrium Health Wake Forest Baptist*
Aurora St. Luke's Medical Center*
Banner University Medical Center - Tucson
St. George Regional Hospital (formerly Dixie Regional Medical Center)
Froedtert Hospital*
Henry Ford Hospital
Intermountain Medical Center
Methodist University Hospital
OU Health – University of Oklahoma Medical Center*
Prisma Health Richland Hospital
Saint Thomas West Hospital
Sharp Memorial Hospital
SSM Health Saint Louis University Hospital*
St. Joseph's Hospital and Medical Center*
Sutter Roseville Medical Center
Tampa General Hospital
Temple University Hospital
University Hospitals Cleveland Medical Center*
UofL Health - Jewish Campus
Upstate University Hospital
West Virginia University Hospitals

Transplant Center Partners

Banner-University Medical Center Phoenix*
Beth Israel Deaconess Medical Center*
Doctor's Hospital at Renaissance
Hackensack University Medical Center*
Henry Ford Hospital*
Integrus Baptist Medical Center*
Mayo Clinic Hospital Arizona
Montefiore Medical Center*
NYU Langone Health*
OSF Saint Francis Medical Center
Rush University Medical Center*
Saint Barnabas Medical Center
Saint Thomas Hospital
State University of New York Upstate Medical University*
State University of New York, Downstate Medical Center*
Tampa General Hospital*
UMass Memorial Medical Center
University of California Irvine Medical Center
University of Colorado Hospital / Health Science Center*
University of Michigan Medical Center
University of Texas Medical Branch at Galveston
University of Toledo Medical Center*
VCU Health System Authority, VCUMC
Wake Forest Baptist Medical Center*

We would like to thank our early Summer 2023 pacing event and case study presenters. **We are grateful for presenters** from T06E, D23W, T05E and T01E, specifically Dr. Scalea from Medical University of South Carolina and Dr. Goldstein from Hackensack University Medical Center. Additional kudos to our “Consultancy” volunteers, panelists from the “Healing You, Healing Me” event, and our End of Year 2 Learning & Action Network where we recognized the ETCLC high performers and game changers. In August, Dr. Watkins and the Tampa General Team brought forth their work to increase offer acceptance by using pumps and Dr. Mistry's team from Sanford Health, showed us the power of “Creating a Culture of Yes to Ensure Every Kidney Offered Has the Greatest Chance of Being Accepted.” Thank you all for sharing your knowledge and expertise to support the work and changes taking place in the collaborative. *Recordings of all events are available on the KSP.*

CALENDAR OF ETCLC & LCC EVENTS

Events and presenters are subject to change without notice. [Click Here](#) to log into the KSP for real time updates.

Day/Date	Time (ET)	Event Type	Audience/Estate
Wed, August 23 rd	1:00 – 2:00 pm	ETCLC Year 3 Kick-off Call	All Members Welcome
Wed, Sept 6 th	1:00 – 2:00 pm	Pacing Event “Nothing Happens if you don’t get the Yes” – Securing Black Authorization	All Members Welcome
Fri, Sept 8 th	Monthly PR	Progress Reporting Due via Progress Tracker	Progress Reporters
Tues, Sept 13 th	1:00 – 2:00 pm	Pacing Event Transplant Psychology (TX) with Kristin Kuntz, PhD	All Members Welcome
Tues, Oct 10 th	Monthly PR	Progress Reporting Due via Progress Tracker	Progress Reporters
Wed, Oct 18 th	4:00 – 5:00 pm	Special Event Physician Practice Roundtable	Special Invitation to all ETCLC Participating Surgical Teams & Fellows

Promising Practices from our Quality Improvement Teams

The QI Team Meetings focused on surfacing learnings from high-performing organizations and the stories that can be told with Progress Tracker and SRTR data. Below, we've highlighted some of the promising practices that emerged from these discussions over the Summer.

Below, we celebrate a handful of the exciting and effective ways our QI participants are working to achieve the collaborative's bold aims!

Predictive Analytics	→	ChristianaCare shared that they have been utilizing Predictive Analytics via DonorNet Mobile during patient conversations. The tool provides useful, intuitive predictions regarding patient outcomes that can support decision-making around kidney offers.
OPO and Transplant Center Relationship	→	Mid-America Transplant presented its intentional process for maintaining excellent relationships with the transplant centers with whom they work. Their relationship management approach cycles through identification, acquisition, engagement, and evaluation with key transplant partners. They've found this process to support effective, efficient allocation.
Informal Education	→	Lifesharing reported that they have had success in improving the reach of their education. They have prioritized checking in with and educating those they interact with during their hospital rounds. They leverage their existing connections within a unit to identify those in need of education. These efforts have worked to mitigate knowledge loss due to staff turnover and one-on-one education seems to promote buy-in to organ donation.
Multi-Faceted Approach to Discard Rate	→	Midwest Transplant Network (MTN) attributed their record-breaking Spring success with kidneys transplanted to a multi-faceted approach, including real-time huddles, weekly organ utilization reviews, and a formalized and standardized process for expedited kidney offers. In addition to their success with kidney transplant volume, they have seen a steady decline in their organ non-use rate.
NRP Protocol	→	MTN also had success with their NRP protocol, leveraging a local think tank who authored a white paper in support of NRP, as well as an attorney to address legal concerns. Other organizations, including Iowa Donor Network, are including donor family members in committees related to NRP in order to ensure that procurement practices best honor the gift of life.
Bottom-Up Process Improvement	→	HonorBridge has created a Microsoft Form to seek staff feedback from the entire organization. They report that this has been going well, and they are excited to be including all levels of staff in process improvement.
Health Equity	→	Two organizations on the Pediatric team, Children's Hospital of Philadelphia, and Phoenix Children's, have initiated major efforts to support health equity in transplant, donation, and evaluation.
eGFR Notifications	→	Emory Transplant Center utilizes a pre-recorded voicemail that helps mitigate confusion stemming from eGFR notification emails.
Patient Activation	→	Stanford Health Care shared that their team has met its goal of preparing 15 or more pre-transplant patients for transplant through use of distinct activation criteria, a transplant activation clinic, and split staff to address listing and pre-transplant.
Patient Navigation	→	Mayo Clinic in Arizona shared that they employ a Native American patient navigator to assist Native American patients in understanding the transplant process.
Referral Screening	→	Ohio State University's Wexner Medical Center reports that a referral screening tool is guiding patients to the proper team for the first visit, and based on early data, it appears to be reducing the number of second appointments needed and opening more clinic time.
Patient Portal	→	Albert Einstein Medical Center shared their practice of requiring a patient, or caregiver proxy, to sign up for their patient portal to ensure this line of communication is open for all patients.

Thank you to our volunteer Members, Coaches, National Faculty, LCC, and ESRD Networks for your leadership & collaborative support.

***Please share your celebrations and organizations in action!
Send your photos from NMDAM activities to tdinkel@hsag.com or TAQILInfo@hsag.com***

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New to ETCLC? Here are some FAQs – For more information, visit etclc.org

Who is involved in the ETCLC? During the Fall of 2021, the ESRD Treatment Choices Learning Collaborative enrolled more than 80% of US transplant centers, 90% of Organ Procurement Organizations (OPOs), plus the donor hospitals in each OPO's donor service area. Together, these groups represent more than 400 organizations, working in 25 separate Quality Improvement (QI) Donation and Transplant Teams, including one Pediatric Team. Professional organizations and patient advocacy groups are organized into the Leadership Coordinating Council (LCC), while the National Faculty provides oversight on the work to enhance the ETCLC Kidney Donation and Kidney Utilization Change Packages.

What is the difference between an ETCLC Case Study and a Pacing Event? Pacing Events offer a Best Practice, Process, or Procedure and are available bi-weekly. A Case Study refers to a specific Clinical Case or Barrier Discussion and is offered twice monthly. (Learning Sessions are available most Wednesdays throughout the Year and led by QI Teams.)

Using the Progress Tracking System – What is in it for us?

The Progress Tracking System (<https://etclc.healthcarecommunities.org>) is a valuable tool to helping your organization achieve your goals and objectives in four ways:

1. Monitor and track your QI Initiatives and create accountability to deliver results.
2. Evaluate your organizational performance on the National Aims over time and compare them to your peers.
3. Understand the national performance on each aim and see the trends over time.
4. Stay current with other ETCLC information including the newsletter and other important information about the collaborative.

Look for additional enhancements that have been made including computation of organizational targets for the aims (Organizational Comparison) and an updated projection methodology for the National Aims Dashboard. Coming soon we will be including access to meeting archives (Pacing Events, Case Studies and Special Events) so that you can access and share them when your schedule permits!

The Progress Tracker system is open to every individual in the collaborative. Don't have an account yet? Simply visit etclc.org, top right corner, and [Click Here](#) to **Register for the ETCLC Progress Tracking System** to create your User Name and Password.

Did You Know: Your Slack account will deactivate if you do not log in regularly.

Please log into [Slack](#) at least **once per month** to stay current with ETCLC discussion taking place in the collaborative.

"In order to comply with CMS policy, any accounts that have not logged into QualityNet Slack and Confluence in the last 180 or more consecutive days will have their QualityNet Slack and Confluence Entitlement removed. Please remember to log in on a regular basis if you would like to retain access to your account."

If your account has been deactivated, please visit <https://harp.cms.gov/login> to re-request the roles QualityNet Slack Entitlement. Instructions for re-requesting: Click the [Slack Confluence space](#) Getting Started tab."

You will only need to reinstate your roles; you will not need to go through the HARP registration process again.

RESOURCES & LINKS

ETCLC PARTICIPANT SITES | Accessibility is limited to participating ETCLC organizations

[Knowledge Sharing Platform \(KSP\)](#) | Available to one representative per participating organization to access QI Team resources, calendar events, and recordings & materials from all Pacing Events & Case Studies (requires a [HARP](#) account).

[ETCLC Dashboard](#) | Provides monthly progress updates on the Three Aims (requires a [HARP](#) account).

[Slack](#) | This peer-to-peer, searchable platform, offers a collaborative space to discuss special topics when members want to communicate; available 24/7/365 (requires [HARP](#) access, open to all participants). Submit your request to [join Slack here](#). QI Teams are engaging in exciting dialogue around topics such as increasing utilization and decreasing discard rates. There is also a great opportunity to ask questions of patient and donor family representatives. Request a Slack account – **open to all ETCLC participants** – to join the conversation, collaborate with peers, and ask questions of the community on [Slack!](#)

Do you have questions about a HARP ID, the KSP, or Slack? Email us for assistance today at TAQILInfo@hsag.com.