

National Vascular Access Quality Improvement Initiative: Implementation Tracking Tool

Information about facilities

	Rating*	Comments:
All non-AVF accesses are investigated as part of CQI		
Routine in-servicing of staff in AVF cannulation techniques		
Screening of AV graft patients for possible 2 ⁰ AVF; documenting and communicating with nephrologist/surgeon		
Screening all catheter patients for AVF options; documenting and communicating with nephrologist/surgeon		

Information about nephrologists

	Subtotal	
Nephrologists document AVF plans for all potentially eligible patients		
Nephrologists specify “AVF only” in referrals to surgeons for evaluation and placement		
Nephrologists select surgeons based on willingness, skill, and outcomes with AVFs		

Information about surgeons and interventional radiologists/interventional nephrologists

	Subtotal	
Surgeons receive and track data on their vascular access rates and outcomes		
Interventional radiologists/interventional radiologists and surgeons utilize specific criteria to determine allowable degree of intervention before referring for new access		
Surgeons are supportive and skilled in placing 2 ⁰ AVFs		

***Rating:** Select the score that best matches the current situation:

- 1 = Not under consideration
- 2 = Under consideration, not started
- 3 = In start-up process
- 4 = Working, at least in part
- 5 = Working well

Subtotal

TOTAL