



# Project FACT

## Fluid Accountability and Control Task



### Facility Selection

The Network has reviewed CMS claims data from all dialysis facilities to determine areas where additional intervention and support is needed. Facilities with five or more fluid-related hospitalizations over the past 12 months will participate in Project FACT between June – November 2025. Please utilize this project packet to assist your facility with Project FACT's goals, expectations, and best practice interventions.

### Intended Goals

- Increase awareness surrounding fluid overload and potential consequences to patients and staff.
- Implement interventions to prevent fluid overload.
- Reduce the number of ED visits and hospitalizations related to fluid overload.





# Intervention Requirements

**Note: Some of the timelines for completion will vary based on your facility workflow. You will have the autonomy to determine when you complete some of the tasks, however, all must be completed prior to the end of the measurement period (October 31, 2025).**

Throughout the project period, you will complete the following interventions.

## Patient Education and Awareness

- ☐ Distribute the [Facts About Fluid FAQ \(Spanish version here\)](#) material to all patients and review for understanding using the teach-back method, having the patient repeat back the information after thoroughly reviewing the content.
  - ☐ Utilize materials in Appendix A to ensure patients understand the importance of choosing low sodium foods.
- ☐ Display an educational fluid bulletin board in a high-traffic area for patients and staff to view (i.e. lobby). Sample materials and resources are available in Appendix A.
- ☐ Designate a staff member to review fluid control monthly with each patient, using a fluid report card.

## Staff Education and Awareness

Review the current processes for addressing fluid overload with patients. Determine if the processes are working well, or if there are steps that can be added to decrease the number of patients experiencing fluid overload. Select at least one of the following best practices listed below to implement or re-educate the staff at your facility.

- ☐ Ensure post-treatment assessments are completed fully and include the following:
  - Evaluate the patient's dry-weight and fluid removal, using proper techniques.
  - Check blood pressure, using proper technique.
  - Evaluate patient for signs of fluid overload, such as edema and shortness of breath.
- ☐ Discuss patients at-risk for fluid overload during daily huddles.



- ☐ Train staff using sample scripts in Appendix A to avoid missed treatments that can lead to fluid overload.
- ☐ Increase staff's knowledge on the importance of a low-sodium diet and monitoring daily fluid intake, including fluids within foods such as soups, popsicles, jello, etc.
- ☐ Obtain orders to schedule extra or longer treatments or add one hour of ultrafiltration, as needed, if a patient is identified as a high fluid gainer.
- ☐ Designate one or two open chairs throughout the day to accommodate any reschedules that need to be completed.

## Other Staff Participation Requirements

- ☐ At least one staff member attends the monthly Qsource ESRD Network FACT education sessions:
  - **Project FACT Kickoff:** June 18, 2025 (12 p.m. CT)
  - **Pre- and Post-Treatment Assessments:** July 2025 (Date/Time TBD)
  - **Missed Treatments:** September 2025 (Date/Time TBD)
  - **Project Wrap-Up:** November 4, 2025 (12 p.m. CT)
- ☐ To ensure project requirements are met, complete the brief surveys emailed by the Network each month.



## Reporting and Data Review

Over the course of the project, Network and facility staff will review and monitor both internal and external data related to hospital utilization as a result of fluid overload, as the data becomes available.

Interim tracking is crucial to ensure that processes are effective in decreasing the number of patients experiencing fluid overload.





Examples below can assist in monitoring effectiveness of patient and staff-focused interventions:

- Conduct floor audits while patients are weighing to ensure the proper technique is used to prevent inaccurate weights and fluid overload.
- Document, track, and trend the number of missed treatments.
- Track the number of audits, screenings, and staff completing education.
- Track the number of fluid overload at-risk patients that received education and/or received monthly touchpoints from staff regarding the fluid report cards.



## Tips for Success

---

- Identify a specific staff member to champion each intervention/task. You are not meant to do this work alone.
- Set intermittent goals for the facility to complete interventions (ie: we will have bulletin board completed by [insert date]).
- Include discussion of interventions during QAPI meetings (use this time to update everyone on the progress made).
- Keep track of the number of audits, screenings, and staff completing education. You will need to report these during monthly email surveys. You can use the tracking tool provided or track this another way of your choosing.
- If you are having trouble completing the activities, experiencing barriers with patients or staff, or need to brainstorm other ideas, please reach out to the Network to schedule a 1:1 technical assistance call.

### **Stacy Dorris, MBA, RHIA, CPHQ**

Quality Improvement Advisor

ESRD Network 10

[sdorris@qsource.org](mailto:sdorris@qsource.org)

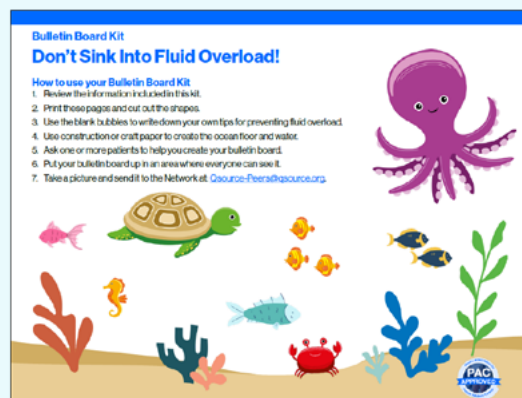
### **Meghan VanSlyke, RD, CSR, LD**

Quality Improvement Advisor

ESRD Network 12

[mvanslyke@qsource.org](mailto:mvanslyke@qsource.org)

# Appendix A



## Don't Sink Into Fluid Overload Bulletin Board Kit

[Download](#)

## Other Bulletin Board Kits

- [Missed Treatment Bulletin Board Kit](#)

## Fluid Overload Materials

- [Tips to Help Control Fluid \(Spanish\)](#)
- [Missed Treatment and Reducing Hospital Visits Workbook](#)
- [Why Does Fluid Matter](#)
- [Script for Missed Treatments](#)
- [Dry Weight Tracking](#)
- [Blood Pressure Measurement Instructions](#)
- Don't Sink into Fluid Patient Packet-Coming Soon!

## Diet

- [Making Health Food Choices \(English/Spanish\)](#)
- [Making Healthy Choices When Dining Out](#)
- [Fast Food Tips for Healthy Living](#)



**Stacy Dorris, MBA, RHIA, CPHQ**

Quality Improvement Advisor

ESRD Network 10

[sdorris@qsource.org](mailto:sdorris@qsource.org)

**Meghan VanSlyke, RD, CSR, LD**

Quality Improvement Advisor

ESRD Network 12

[mvanslyke@qsource.org](mailto:mvanslyke@qsource.org)

**[esrd.qsource.org](http://esrd.qsource.org)**

This material was prepared by Qsource, an End-Stage Renal Disease (ESRD) Network under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS..25.ESRD.05.081