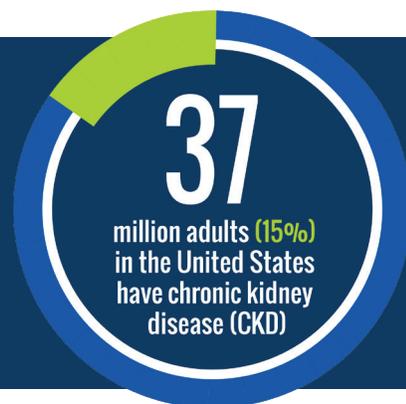


# New e-Learn Series: Reducing Disparities and Improving the Management and Identification of Chronic Kidney Disease

**More than 37 million (15%) adults in the United States have chronic kidney disease (CKD)** and one out of three American adults is at risk for CKD. People with hypertension and/or diabetes are at greatest risk. Additionally, social determinants of health (SDOH), defined as “the conditions under which people are born, grow, live, work and age,” are significant contributors to health disparities among people with CKD. While CKD is a health burden for people living with the disease, it is also an economic burden for the U.S. health care system.

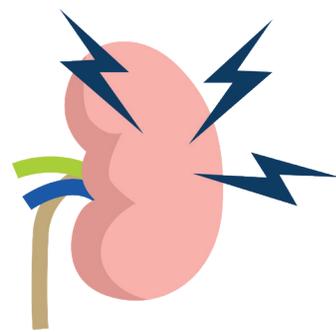


**Primary care providers can help guide patients through early detection of CKD, chronic disease management, and preventive care. Providers also have an opportunity to be early adopters and advocates of SDOH tools and models that can help patients.**

Quality Insights' Kidney Care project has developed a new, interactive six-course e-learning series that uses best practices and practical experience from a diverse group of patient subject matter experts and exemplars in the fields of nephrology, health equity, nutrition, pharmacy, primary care and medical coding. The series aims to accompany the Centers for Medicare & Medicaid Services' *Chronic Kidney Disease Disparities: Educational Guide for Primary Care*.

## Overview of Courses

Courses are 60 minutes in length and include interactive scenarios, additional handouts and resources. Attendance certificates are available upon completion. Free nursing, physician, pharmacist and dietitian continuing education credits\* are also available for each course.



## Identifying CKD: Leveraging EHRs and Improving Detection Rates

Learn how to use specific quality indicators that can be applied to most electronic health records (EHRs) and health systems to improve CKD detection rates.

## Approaches to Identifying CKD: Promoting Detection at Every Opportunity

Learn techniques to incorporate CKD risk identification and early detection into a regular workflow, tools for staging, and how to enhance patient care management and reduce disparities in care for CKD.

# Addressing Social Determinants in CKD: Quality Indicators for Patient-Centered Care

Learn to identify key social determinants of health (SDOH) for people with or at-risk for CKD along racial, ethnic and socioeconomic lines. Explore specific tools and techniques to improve care and outcomes for patients with or at-risk for CKD.

## Managing CKD: The Pharmacist's Role in Team-based Kidney Care

Explore the integration of ambulatory care pharmacists into a team-based approach to kidney care, which can help slow or stop the progression of CKD and improve patient health outcomes, quality of life and cost of care. Two medication management interventions will be discussed.

## Managing CKD: The Dietitian's Role in Team-based Kidney Care

Incidence and progression of CKD are influenced by nutrition-related factors. Explore the benefits of medical nutrition therapy, roles and responsibilities of the dietitian and core care team, dietary differences for CKD Stages 3 and 4 and how to prioritize dietary treatment based on four factors.

## Managing CKD: Timely and Appropriate Referral to Nephrology

Timely referral to a nephrologist and coordinated care with primary care providers can optimize medical care for patients with or at-risk for CKD. Learn about the role of the nephrologist with the PCP to co-manage patient care.

To get started, visit [www.ediscolearn.com](http://www.ediscolearn.com) and select the "Kidney Care" catalog.

## Target Audience

All courses are appropriate for health care professionals, especially those who work in or collaborate with primary care physician practice settings. This includes, but is not limited to, the following disciplines: nurses, physicians, nurse practitioners, physician assistants, pharmacists, dietitians, care coordinators, office managers and staff.



Quality  
Insights

Quality Insights has no conflicts of interest in the development of course content.

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### \*Accreditation Information

**Disclosure:** Information concerning faculty, speaker and planning committee relationships will be available upon request. The presenters have disclosed that no commercial relationships exist.



In support of improving patient care, this activity has been planned and implemented by Quality Insights and CAMC Health Education and Research Institute. CAMC Health Education and Research Institute is accredited by the American Nurses Credentialing Center (ANCC), the Accreditation Council for Pharmacy Education (ACPE) and the Accreditation Council for Continuing Medical Education (ACCME), to provide continuing education for the healthcare team.

Nursing: Quality Insights is accredited as a provider of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation.

Physicians: The CAMC Health Education and Research Institute designates this internet enduring material activity for a maximum of 1 AMA PRA Category 1 Credit(s).<sup>™</sup> Physicians should only claim credit commensurate with the extent of their participation in the activity.



Pharmacy: The CAMC Health Education and Research Institute is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education. To receive credit, participants must complete the sign-in sheet, attend each session and complete an evaluation. ACPE credits will be posted online to the CPE Monitor within six (6) weeks following the activity. This internet activity enduring knowledge based activity provides 1 contact hour.



Dietitian: Completion of this RD/DTR profession-specific or IPCE activity awards CPEUs (One IPCE credit = One CPEU). If the activity is dietetics-related but not targeted to RDs or DTRs, CPEUs may be claimed which are commensurate with participation in contact hours (One 60 minute hour = 1 CPEU). RDs and DTRs are to select activity type 102 in their Activity Log. Performance Indicator selection is at the learner's discretion.