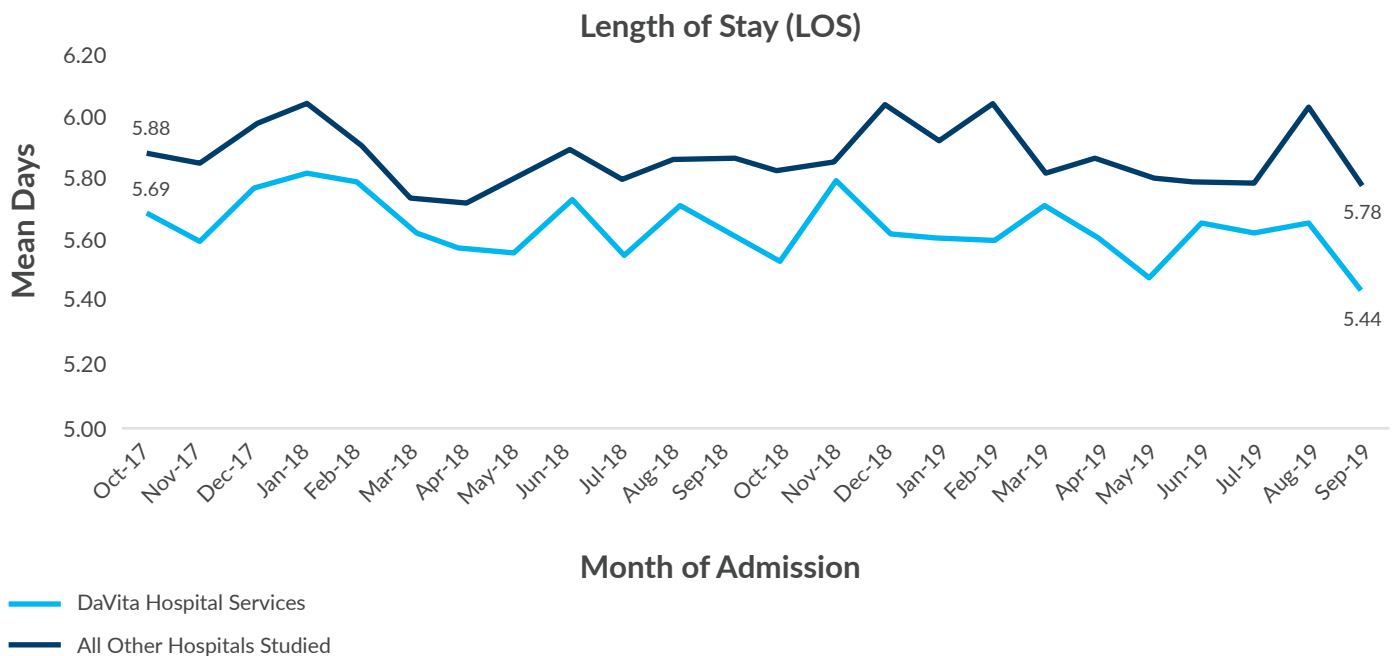


Reduced Lengths of Stay Offer Your Patients With End Stage Kidney Disease More Time at Home



DaVita Hospital Services is committed to helping dialysis patients spend more time with their families and loved ones by working to reduce the length of their inpatient stays. Patients with end stage kidney disease (ESKD) spend on average approximately 11 days in the hospital each year,¹ but **DaVita Hospital Services** has demonstrated a shorter length of stay (LOS) in hospitals that partner with DaVita for acute dialysis care compared with all other hospitals—meaning for every 30 hospitalizations, Hospital Services patients are spending 10 fewer days in the hospital.²



1. Source: United States Renal Data System. 2018 USRDS annual data report: Epidemiology of kidney disease in the United States. National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases, Bethesda, MD, 2018.

2. Based on September 2019 study data.

LENGTH OF STAY (LOS) STUDY

In this study, we analyzed 500,000 ESKD patient admissions from January 2017 through September 2019 across DaVita partner hospitals and other acute care hospitals. The results compared mean LOS between the two hospital groups and revealed DaVita partner hospitals outperformed others regardless of three key parameters:

- Hospital type (academic institutions or level 1 trauma centers)
- Size of hospital (more than 400 beds or 400 beds or fewer)
- Source of hemodialysis (insourced with hospitals providing their own dialysis or outsourced)

ADVANTAGES FOR HOSPITALS

In addition to potential LOS reductions for dialysis patients, hospitals that partner with DaVita could benefit from our commitment to clinical quality and safety in other ways. Guided by the DaVita® Patient Quality Pyramid—our framework for enhancing overall patient care—we have developed clinical initiatives and comprehensive programs proven to improve mortality, reduce hospitalizations and improve patient compliance and experience.³

DaVita Hospital Services creates customized solutions to address hospitals' specific challenges, including reducing LOS without sacrificing quality. These solutions include:

- Enhanced communication with and education of hospital staff to reduce or eliminate blood-stream infections that are common in dialysis patients
- Discharge planning and placement services to improve operational efficiency and patient care transitions to local, outpatient providers
- Reduced avoidable dialysis on the day of hospital discharge
- Enhanced analytics and reporting on key program and discharge metrics
- Education offered bedside in the hospital setting to help patients learn about their diagnosis; topics include infection, dialysis access, diet, missed treatments, and working and insurance

Shorter hospital stays not only improve quality of life for dialysis patients but increase capacity and reduce costs for the hospital, as well.⁴

To learn how DaVita Hospital Services can support your hospital and reduce length of stay for patients with ESKD, please visit [DaVita.com/Hospitals](https://www.davita.com/Hospitals) or email hospitals@davita.com.

3. Nissenson AR. Improving Outcomes for ESRD Patients: Shifting the Quality Paradigm. CJASN. Feb 2014, 9 (2) 430-434.

4. Kshirsagar AV, Hogan SL, Mandelkehr L, Falk RJ. Length of stay and costs for hospitalized hemodialysis patients: Nephrologists versus internists. JASN. August 2000, 11 (8) 1526-1533.

5. As of August 2019.

Impact on Length of Stay

For every 30 hospitalizations, DaVita Hospital Services patients spend 10 fewer days in the hospital.

About DaVita® Hospital Services

- First and longest national Joint Commission-accredited provider of inpatient kidney care and apheresis therapies
- > 900 hospital partners⁵
- > 1.3 million annual procedures⁵
- > 12 years of expertise and infrastructure

Patient Quality Pyramid

