

**MARYLAND COMMISSION ON KIDNEY DISEASE
OPEN SESSION MEETING MINUTES
Thursday April 21, 2011
4201 Patterson Avenue
Room 108-109**

Vice-Chairman William Frederick, RN called the Open Session meeting of the Commission on Kidney Disease to order at 2:10 p.m., on Thursday, April 21, 2011 at 4201 Patterson Avenue. Commission members Drs. Edward Kraus, Matthew Weir, Kulwant Modi, Bernard Jaar and Paul Light, RN, Kim Sylvester, RN and, Margery Pozefsky were also present. Also attending was Commission staff, Eva Schwartz, Executive Director and Donna Adcock, RN, Surveyor. Commission Counsel, Leslie Schulman, AAG was also present.

DHMH staff present: Carol Manning, Chief KDP, Barbara Fagan, Program Manager, Office of Health Care Quality and Pat Okin, RN and Brenda Petersen, RN Surveyors, Office of Health Care Quality

Guests present were:

Chris Simon, IDF	Kim Zuber, PA
Naomi Elcock, Community Dialysis	Katie Painter, FMC
Kim Clarkson, FMC	Katie Ingram, Davita
Genevieve Agusta, Star Maintenance	Tracey Sease, WMHC
Pam Earll, Davita	Michael Przwara, Davita
Judith Akoh-Arrey, FMC	David Smith, Davita
David Kaplan, Davita	Amy Lane, Davita
Tamara Plunkett, FMC	Monifa Kopano, Community Dialysis
Michael Walker, Davita	Sylvia Romero, Davita
Cathy Springfield, Davita	James Harrison, Davita
Mary Whittaker, Medstar	Teiir Jenkins, Advanced Dialysis
Jeannette LaChat, Davita	Ane Gaffney, FMC
Renee Morant, Davita	Paula Hollinger, DHMH
Sharon Bloom, DHMH	Kristen Neville, DHMH
Zarita Pearson, Advanced Dialysis	

I. APPROVAL OF January 20, 2011 MINUTES

The Commission voted unanimously to approve the minutes of the January 20, 2011 Public Session with the addition of Dr. Jaar's name to the attendance.

II. CHAIRMAN'S REPORT

Mr. Frederick, Vice Chairman presided over the meeting and presented the Chairman's report. He noted that in light of the Renal Community's inundation with cuts and regulations that having employee buy in and decreasing staff turnover was very important to the facilities. He suggested that the guests read an article in this month's edition of *Renal Business.com* titled *Employee Engagement in Dialysis Care*.

III. EXECUTIVE DIRECTOR'S REPORT

Mrs. Schwartz deferred her report until the discussion of Prevention of Bloodstream Infections in the Dialysis Setting.

IV. OLD BUSINESS

No old business to report.

V. NEW BUSINESS

A. Kidney Disease Program - Stats and Budget

Ms. Manning presented the KDP budget. She reported that the KDP Portal now contains provider eligibility verification for patients. Ms. Manning encouraged facilities to sign up for access to the portal. She stated that the user would be able to access the same information as KDP staff. The web address is www.dhmf.eclaims.org. Users should print the user agreement, complete and send it to the KDP. The User will receive log in information from the KDP. She noted the KDP staff would be able to assist new users with initial use of the Portal.

Ms. Schwartz requested the KDP budget allocation for next fiscal year. Ms. Manning stated that she would contact Ms. Schwartz with the information.

B. Prevention of Bloodstream Infections (BSI) in the Dialysis Setting

Mrs. Schwartz reported that Secretary Sharfstein is very interested in how the dialysis facilities are managing BSI. She noted that she, Drs. Gimenez, Kraus and Jaar along with a representative from Johns Hopkins Medical Institutions, and telephonically with Nancy Grimm, Director of OHCQ, met with Secretary Sharfstein and some of his staff, to discuss his concerns. Mrs. Schwarz reported that OHCQ and the Commission may have to promulgate regulations to mandate all the facilities to collect and submit the relevant data for analysis.

Mrs. Schwartz noted that the Commission is sponsoring an Infection Control Symposium on October 4, 2011, where representatives from CMS, CDC, the Network and some dialysis entities representatives will be presenting. The symposium will provide training and education regarding Infection Control, and will incorporate the issue of BSI. The target audience will be nurses and CNA-DT's.

Mr. Frederick noted that in 2009 a CDC Collaborative was formed and representatives from all over the country are participating. He reported the more information was available at www.makingdialysissafe.org. He encouraged facilities to join the collaborative.

- **NKF – KDOQI Clinical Guidelines for Vascular Access**
- **Proposed Core Interventions for CDC Dialysis Collaborative**

Mr. Frederick directed the guests' attention to the informative attachments.

Discussion ensued regarding the National Healthcare Survey Network form and the issues associated with collecting and reporting the BSI related data.

C. Staffing Ratios for Nocturnal Dialysis – Kim Zuber, PA

Ms. Zuber, PA, advocating for patients in Prince George's county reported on the hardships of some of the patients in their practice. These patients weigh 350-500 pounds and were dialyzing in a nocturnal program in Lorton, VA. Nocturnal programs provide dialysis at slower blood pump speeds and longer treatment times. She noted that due to transportation costs these patients had to resume dialysis in Maryland at facilities that do not offer nocturnal dialysis. She noted that FMC requires a 5 patient to 1 (5:1) staff member ratio for nocturnal dialysis to be financially viable and that the current staffing ratios in Maryland for staff assisted hemodialysis would prohibit the ratio. She proposed that the ratio for nocturnal dialysis of 5:1 be considered.

A discussion on the topic ensued.

Ms. Fagan suggested that Ms. Zuber write a letter to the Office of Health Care Quality regarding staffing. Mrs. Schwartz requested that a copy of this letter be sent to the Commission as well.

D. Concerns for Contamination During Patient Restroom Breaks

Mrs. Adcock reported that a complaint was submitted to the Commission regarding a facility's policy to not allow patients to visit the bathroom during dialysis due to potential contamination. She requested guest input and information about bathroom policies at other facilities.

A discussion ensued. Most facilities allowed patients to visit the bathroom, if they are stable, with an escort, during treatment.

E. Fall Seminar – Infection Control and Prevention in the Dialysis Setting

The Commission is planning a seminar on October 4, 2011. Details to follow.

F. Medical Orders for Life Sustaining Treatments (MOLST) – Explanatory Guide

Mrs. Adcock directed the guests' attention to the MOLST Explanatory Guide. The Guide was emailed to the community and some copies were available at the meeting. She noted that the legislation would become effective on October 1, 2011.

A discussion ensued. The guests had questions regarding the requirements for implementation in the dialysis facilities. The Commission will invite Dr. Nay to the July meeting for clarification of the regulations.

G. Newsletter

Mr. Frederick directed the guests' attention to the attached Commission Newsletter.

H. Citation Free Facilities

- **Good Samaritan at Lorien Frankford**

Mr. Frederick commended the facility for their citation free survey.

I. Facility Applying for Certification

- **ARA – Universal Dialysis**

Mr. Frederick noted that the facility has been approved for certification by the Commission.

J. Categories of Complaints

Mr. Frederick reported that the Commission has received the following types of complaints since the last meeting:

- **Written**
 - Facility complaint regarding a disruptive patient
- **Verbal**
 - Patient complaint regarding being “recruited” to a new facility
 - Patient complaint regarding facility temperature
 - Patient family complaint regarding discharged patient
 - Health Department complaint regarding transporting a patient across county boundaries
 - Patient complaint regarding physician weekly rounding
 - Anonymous complaint regarding lack of a social worker and nurse manager at the facility
 - Patient complaint regarding facility’s bathroom visit policy
 - Patient complaint regarding facility’s scale

K. Example of Resolution of Complaint

Mrs. Schwartz directed the guests’ attention to the sample of a complaint received and resolved by the Commission this quarter.

- **Complaint against Facility**
Patient’s husband called to voice his concern about the new scale at his wife’s dialysis facility. He noted that the scale reads one weight and prints out another weight. He noted that on April 12, 2011 his wife weighed out at a higher weight than her pre treatment weight.

The Nurse Manager was contacted to investigate the complaint. She verified that a few patients have voiced concerns about the scale and that the scale distributor/contractor was to be called for service. The surveyor requested that the scale issue be corrected today or that another scale be put into use so that patient weights would be accurate.

Disposition – The Facility Administrator reported that the contractor was working on the issue with the new scale, another scale was available for use and that facility staff were also available to assist patients with obtaining weights. The patient’s husband was contacted and noted that he is satisfied with the facility’s efforts to correct the problem.

L. Commission Approval/Disapproval for KDP Out of State Transplant Reimbursement

No requests for out of State transplant approvals were received this quarter.

Hospital	Granted	Refused
Inova Fairfax	0	0
Christiana Hospital	0	0
Washington Hospital Center	0	0

M. Surveys (22)

The Commissioners reviewed the results of the surveys and the deficiencies noted:

Citations

Compliance with Federal, State and Local Laws and Regulations	0
Infection Control	15
Water and Dialysate Quality	8
Reuse of Hemodialyzers/Bloodlines	1
Physical Environment	4
Patient Rights	0
Patient Assessment	1
Patient Plan of Care	6
Care at Home	1
Quality Assessment and Performance Improvement	5
Laboratory/Affiliation Guidelines	0
Personnel Qualifications/Staffing	16
Responsibilities of the Medical Director	4
Medical Records	1
Governance	2

Mr. Frederick noted the numerous Infection Control and Personnel Qualifications/Staffing citations. Mrs. Adcock reported that review of treatment sheets and observations during the survey often leads to the citations as patient treatments are not delivered as prescribed and nurses often do not document assessments of patients during treatment when vital signs are not within normal ranges. She noted that often the CNA-DT's provide interventions such as saline boluses without the nurse's knowledge.

N. Surveys Completed (22)

The following facilities have been surveyed since the last meeting:

- | | |
|------------------------------------|------------------------------|
| Charing Cross Dialysis | RAI - Clinton |
| Davita - Baltimore County | FMC - S. Annapolis |
| USRC – W. Baltimore | Holy Cross - Woodmore |
| Davita – Baltimore Geriatric Ctr. | ARA - Adelphi |
| Good Samaritan at Lorien Frankford | Community Dialysis |
| Davita – Laurel | Davita – Lakeside |
| FMC – Pikesville | FMC – QCDC Southern Maryland |
| Davita – Cedar Lane | IDF Calvert |
| FMC Waldorf | FMC Whitemarsh |
| Davita Lanham | IDF Chestnut |
| Deer's Head | FMC Salisbury |

On motion made by Commissioner William Frederick, RN and seconded by Bernard Jarr, MD, the Commission unanimously voted to move into closed session to discuss confidential investigations and confidential patient complaints pending before the Commission.

There being no further public business, the Open Session Meeting was adjourned at 3:20 p.m.