

MARYLAND COMMISSION ON KIDNEY DISEASE

OPEN SESSION MEETING VIA GOOGLE MEET

Website: health.maryland.gov/mdckd

Meeting Minutes October 28, 2021

The Maryland Commission on Kidney Disease held an Open Meeting on Thursday, October 28, 2021 via Google Meet, a virtual platform.

Dr. Adam Berliner, Chairperson of the Commission, called the meeting to order at 2:05 P.M. Commissioners Dr. Donna Hanes, Dr. Jeremy Yospin, Dr. Sonal Korgaonkar, Dr. Nadiesda Costa, Dr. Sumeska Thavarajah, Susan Leon, RN, Andrene Townsend, RN, Jacqueline Hires, LCSW NSW-C, Raymond Harris, Tisha Guthrie, LMSW, and Jerome Chiat were in attendance.

Commission staff present: Eva Schwartz, Executive Director and Donna Adcock, RN, Surveyor

Commission Counsel present: Leslie Schulman, AAG

MDH staff present: Carol Manning, Chief KDP

The Commission expressed their appreciation acknowledging the large number of virtual attendees representing the renal healthcare provider community.

I. RATIFY APPROVAL OF THE MINUTES OF THE PUBLIC SESSION OF April 29, 2021

Commissioner Thavarajah motioned to ratify the approval of the Public Minutes from the January 28, 2021 session. Commissioner Korgaonkar seconded the motion and the Commission voted unanimously to ratify the approval of the Minutes of the April 29, 2021 Public Session.

II. CHAIRMAN'S REPORT – Dr. Adam Berliner

Dr. Berliner welcomed everyone to the meeting and thanked them for attending. He provided an update on the NKF/ASN Task Force on Reassessing the Inclusion of Race in Diagnosing Kidney Diseases. (See slide presentation attached.) The new equation, CKD-EPI (2021), is a creatine based GFR estimating equation that is spread evenly across race/ethnicities, without disproportionately biasing against any one group. Dr. Berliner noted that the final recommendations for immediate implementation of the CKD-EPI (2021) equation were published last month and can be accessed on the NKF website. Discussion ensued.

III. Vice Chairman's Report

Dr. Thavarajah provided a preview of her January 2022 meeting presentation. She reported that she will update the community on changes to the kidney allocation system. She noted that the last change was implemented on 2014. The changes aim to make kidney transplantation more equitable and increase allocations.

IV. EXECUTIVE DIRECTOR'S REPORT

Mrs. Schwartz reported on the Commission's policy and process for investigating, evaluating, and resolving complaints, involuntary discharges, and survey deficiencies that come before the Commission. She noted that the administrative closed session would focus on the internal administrative process for assigning Commissioners as lead liaisons to evaluate and investigate cases and recommending resolution to the full Commission.

V. NEW BUSINESS

A. Kidney Disease Program (KDP)

Ms. Manning presented the KDP budget and statistics.

Ms. Manning reported on two requests received by the KDP from the Maryland Department of Health. The Department requests partnership with the Commission to implement the Diabetes Action Plan activities. Interested Commissioners should contact Carol for more information.

Ms. Manning reported that the KDP is part of the Prevention and Health Promotions Administration (PHPA). The PHPA has partnered with students from the University of Maryland to develop a fact sheet on chronic kidney disease (CKD). The PHPA is requesting that the Commission review the submitted information for accuracy. Dr. Hanes and Dr. Berliner volunteered to review the information.

B. Network Update

Ms. Bova-Collis shared updates from the Network. She noted that communication with the dialysis facilities indicates continuation of the stress of COVID-19. Ms. Bova-Collis reported that facility staff need extra support and that the Network has been hosting events highlighting resources and providing feedback. She reported staff shortages and burnout are major concerns.

Ms. Bova-Collis provided a report on grievance information and noted that the number of grievances and complaints are at a decade high. She noted that the Network expects to be kept in the loop when facilities experience issues with patients. The Network works with the facilities in order to attempt to avert involuntary discharges. She noted that facilities should include staff in their zero tolerance policies noting that patients aren't always feeling their best in the dialysis facility.

C. Facility Administrator in Training Program

Mrs. Adcock reported that one of the large dialysis organizations hires administrators without dialysis experience. Some of the hires are without healthcare experience. Years ago, a workgroup consisting of the staff from the OHCQ, Commissioners and stakeholders worked on regulations concerning facility Administrators. At that time, the decision was made to allow a waiver for the requirements for the administrator subject to the entity having an administrator in training program. The organization's curriculum along with supporting materials were initially reviewed and approved by the OHCQ. Any substantive changes to the training program were supposed to be submitted for prior approval.

Ms. Adcock reported that the organization at issue had made changes to its administrator in training program without submitting the documentation to OHCQ for review and approval.

There has been a lot of turnover of administrators in this organization's facilities. Ms. Adcock noted that management turnover inevitably leads to direct patient care staff turnover which adversely affects the patients.

Ms. Adcock suggested that the Commission request that the organization submit its program documentation for review to ensure that the inexperienced administrators are supported for the entire year that they are in training.

Discussion ensued. The Commission will discuss its concern regarding training program documentation with the OHCQ.

D. Facility Closures and Late Openings Due to Lack of Nurse/Staff

Mrs. Adcock updated the Commission on facility closures and facility late openings due to the lack of having a registered nurse to open the facility(s). She noted that these facilities serve a large number of patients and were planning to open with one nurse. Ms. Adcock recommended that facilities have a backup plan to prevent late openings or closures. She noted that these events ultimately place patient welfare in jeopardy and unduly burden the healthcare system.

Proposed 2022 Commission Meeting Dates

Dr. Berliner reported that the Commission has approved the following dates for next year’s meetings:

- January 27
- April 28
- July 28
- October 27

E. Newly Certified Facility

Dr. Berliner reported that FKC Lexington Park certified with the Commission as of 7/1/2021.

F. Closed Facility

Dr. Berliner noted that FMC Salisbury reported permanent closure as of 4/17/2021.

G. Citation Free Facilities

Dr. Berliner congratulated FMC Merritt Boulevard on their citation free survey.

H. Categories of Complaints

Dr. Berliner reported that the Commission received and resolved the following written and verbal complaints since the April 2021 meeting:

a. Written

1. Complaint regarding transportation service
2. Staff complaint regarding patient behavior
3. Involuntary Discharges (4)
4. Facility closure for a day due to staffing (no nurse)
5. Complaint regarding care and physical environment at a facility
6. Facility opening late due to staffing (no nurse to open)

b. Verbal

1. Patient complaint regarding facility’s COVID-19 policy
2. Case worker complaint regarding inability to place a patient in an outpatient facility
3. Complaint regarding facility staffing
4. Patient complaint regarding denial of services
5. Network concern regarding anonymous complaint
6. Patient complaint about a nurse
7. Family member complaint regarding patient care
8. Complaint regarding social distancing, masking in a dialysis facility waiting area

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

Dr. Berliner reported that the Commission received and approved the following out of state transplant prior approvals for KDP reimbursement purposes:

Hospital	Granted	Refused
Georgetown University Hospital	5	0
Inova Fairfax Transplant Center	1	0

K. Surveys (21)**Citations**

Citations	July/October 2021	April 2021	January 2021	April - October 2020
Compliance with Federal, State and Local Laws and Regulations	0	0	0	0
Infection Control	18	11	14	9
Water and Dialysate Quality	8	5	4	5
Physical Environment	8	6	5	2
Patient Rights	0	0	0	0
Patient Assessment	0	0	0	1
Patient Plans of Care	2	1	1	2
Care at Home	0	0	0	0
Quality Assessment and Performance Improvement	0	0	1	0
Laboratory/Affiliation Guidelines	0	0	0	0
Personnel Qualifications/Staffing	11	10	13	7
Responsibilities of the Medical Director	0	0	0	0
Medical Records	2	2	1	2
Governance	4	0	1	1

The categories and total number of citations are reported above and trended for informational purposes. Dr. Berliner summarized the citations and noted that infection control remains the leading area for improvement followed by Water and Dialysate Quality and Personnel Qualifications/Staffing.

L. Surveys Completed

The following 21 facilities have been surveyed since the April 2021 meeting:

Davita Bowie	FMC Greater Baltimore
Davita Mercy	Davita Middlebrook
Davita Catonsville North	FMC Pikesville
FMC Caroline	FMC Germantown
Davita Livingston Village	Davita Caroline County
FMC Broadway	Davita LaPlata
Davita LaPlata	Davita Glen Burnie
Davita Rockville	FMC Merritt Blvd.
FMC Ft. Washington	FMC Brightseat
Davita Chestertown	ARA Universal
Davita Greenspring	

Late Addition – Commissioner Guthrie voiced concerns regarding adequate staff in the dialysis facilities and asked how the Commission could reach out to nursing programs at area universities to expand interest in nephrology nursing to promote more recruitment opportunities.

Discussion ensued. Commissioner Leon reported on ANNA's efforts to promote awareness of nephrology nursing and expand interest in the field.

Mrs. Schwartz requested that Commissioner Leon work with her as she reaches out to the Maryland Board of Nursing to promote opportunities in the field of dialysis.

There being no further public business, upon motion made by Commissioner Yospin and seconded by Commissioner Hanes, the Commission unanimously voted to adjourn the Open Meeting Session at 3:22 P.M. Immediately thereafter, Chairman Berliner convened an Administrative Session in accordance with the Open Meetings Act, Md. Code Ann., General Provisions Section 3-103(a)(1)(i) for the purpose of discussing the internal administration of the Commission's process for evaluating and deciding involuntary discharge complaints, Plans of Correction, and survey deficit resolution. The Commission members present at the Public Meeting continued to participate in the Administrative Session.