

MARYLAND COMMISSION ON KIDNEY DISEASE
OPEN SESSION MEETING MINUTES
Thursday January 29, 2009
4201 Patterson Avenue, Room 108-109

The Open Session meeting of the Commission on Kidney Disease was held on Thursday, January 29, 2009 at 4201 Patterson Avenue in room 108-109. The Chairman, Dr. Roland Einhorn called the meeting to order at 2:06 PM. Commission members present were: Drs. Dean Taylor, Ken Yim, Kulwant Modi and Luis Gimenez and William Frederick, RN, Kim Sylvester, RN and Margery Pozefsky. Commission staff present were: Eva Schwartz, Executive Director and Donna Adcock, RN, Surveyor. Commission council present: Leslie Schulman, AAG.

DHMH staff present: Carol Manning, Chief KDP, Barbara Fagan and Maria Krasnansky, RN, Office of Health Care Quality.

Guests present were:

Micki Misiaszek, Genzyme	Joan Rogers, IDF
Elena Balovlenkov, Davita	Paula Hollinger, DHMH
Pam Earll, Davita	Lorrie Flannery, Davita
Mary Williams, FMC	Stuart Lessner, Union Memorial
Eileen Lynch, Davita	Genny Murray, Davita
Funmi Achu, FMC	Catherine Beers, FMC
Kathleen Kelly, FMC	Wayne Fitzgerald, Western MD Hospital
Tracey Sease, Western MD Hospital	Tracey Stanford, Davita
Justin Enoch, Davita	Teresa Killar, Davita
Sarrah Johnson, RAI	Tracey Mooney, IDF
Eileen Jagielski, FMC	Donna Reeves, FMC
Tara Matthews, Davita	Pam Pacheco, DCA
TriDonna Brandford, Davita	Kathy Lijewski, FMC

I. APPROVAL OF OCTOBER 23, 2008 MINUTES (Attachment A)

The minutes were approved as submitted.

II. CHAIRMAN'S REPORT

Dr. Einhorn welcomed and thanked everyone for coming to the Commission's quarterly meeting. He noted that 2008 was a very busy year with the election of a new President and the introduction of the new ESRD Conditions for Coverage (CFC). He reported that the community is struggling with full compliance with the new regulations and that we are currently in a period of transition. Dr. Einhorn stated that the Commission is looking at their regulations and will be updating the regulations to assure consistency with the CFC as well as the new Office of Health Care Quality regulations.

III. EXECUTIVE DIRECTOR'S REPORT

Mrs. Schwartz thanked everyone for coming. She requested nominations for the open social work commission member position as Ms. Soltis has recently moved to New York. Mrs. Schwartz reviewed Commission member responsibilities.

IV. OLD BUSINESS

A. Proposed Amendments to COMAR 10.30

Dr. Einhorn reported that a Commission workgroup consisting of Mrs. Schwartz, Mrs. Adcock, Mrs. Sylvester, Mr. Frederick and Dr. Taylor have presented a draft of the updates for the Commission regulations. He thanked them for their time and efforts. He noted that these are proposed regulations and will not be final until later this year.

Mrs. Schwartz reviewed the proposed regulations. She noted that the proposed changes are mostly incorporation of the new ESRD Conditions for Coverage and the Office of Health Care Quality's (OHCQ) recent updates. Mrs. Schwartz noted that the transplant portion will also be updated and that the Commission will continue to survey the transplant centers on a limited basis but deferred the specifics to the Executive Session. She stated that the changes are necessary for consistency and that the regulations are more detailed and specific than the CFC. Mrs. Schwartz reported that the commission is always available

to assist facilities with compliance and that we are being patient with the surveys. She reported that the regulations will be posted in the Maryland register and that there will be a formal comment period.

Mrs. Mooney requested a side-by-side comparison of the old and new regulations, that the proposed regulations are sent to the entire community and that the community is alerted when the regulations are posted in the Maryland Register.

Mrs. Adcock stated that it would not be possible to provide a side-by-side comparison of the old and new regulations. Mrs. Schulman noted that this informal notification was done out of courtesy. She stated that when the regulations are officially proposed the Commission will vote on them, the regulations will be published in the Maryland Register and there will be a 45-day comment period. The current document is a work product only. The Commission will keep the community informed of the process.

B. CNA-DT – Requirements for Certification

Mrs. Schwarz reported that the Commission staff and staff from the OHCQ have meet with Barbara Newman and Pamela Ambush-Burris from the Maryland Board of Nursing regarding the new CMS requirements for technician certification. This group has been working on a letter that once approved by the MBON will be sent to the training centers. This letter will address the proctor, off-site location and keeper of the exam requirements in the new CFCs. She noted that the group is working diligently to obtain CMS acknowledgement of our existing CNA-DT certification process. She reported that we are awaiting BON approval of the letter.

C. MARC Quick Tips

Mrs. Adcock directed the guests' attention to the attached document, which is a collation of the Mid Atlantic Renal Coalition's Quick Tips. These tips were sent out over the past 3 months to educate and help facilities comply with the new CFCs. They will also be posted on the Commission's website.

V. NEW BUSINESS

A. Kidney Disease Program

Ms. Manning presented the KDP budget. She noted that the KDP has funds through April and that the Department is working on a supplemental budget. She stated that she is not aware of any cuts to the FY 2010 KDP budget.

Mrs. Mooney requested to be able to correspond with the KDP regarding the supplemental budget. Mrs. Manning reported that she would keep the Commission updated.

B. Governor's Report

Mrs. Schwartz presented the Commission's annual report to the Governor. Mr. Frederick noted an error in the date on page 2 which will be corrected. Mrs. Schwartz noted the once completed, the report will be a public document and that the Commission is mandated by law to generate this annual report. We are awaiting the KDP portion of the document. The Commissioner's voted to accept the Commission's portion.

C. MRSA in Dialysis Patients -CDC Surveillance

Mrs. Schwartz reported that Dr. Laura Herrera, Deputy Health Commissioner contacted the Commission regarding the increased rates of MRSA in Baltimore. Dr. Herrera could not attend the meeting but sent a paper – *Patterns and Trends in Invasive MRSA in Baltimore, 2004-2007*. A copy of the paper was provided to the Commissioners and guests. The Health Commissioner is considering proposing additional reporting mechanisms for the dialysis community. Mrs. Schwartz noted that she has reported to Dr. Herrera that the new CFC requires very strict infection control procedures and reporting of infections in each facility's quality assurance meetings.

D. CFC Requirements for Vascular Access Care and Monitoring

Mrs. Schwartz noted that the Heath Department is also looking at vascular access monitoring. She noted that the new CFC requires facilities to address vascular access with the patient assessments and plans of care. Mrs. Schwartz stated that the lack of available specialists handling dialysis vascular access, lack of follow-up and issues with surgeons not wanting to work on other surgeon's accesses has been problematic. She requested that facilities make referrals and document follow-up or lack of follow-up for the patient and surgeon. She noted that the nephrologists might need to communicate with the vascular surgeons.

E. CFC Survey Tips

Mrs. Adcock directed the Commission and guests' attention to the attached document. The document was developed to assist facilities with compliance with the CFC, and includes the Measures Assessment Tool and the Reuse Interview of Technician and Observation Guide. The document was reviewed with all attendees at the meeting.

F. Monitoring Guidelines for Water Purification Systems

Mrs. Adcock directed the Commission and guests' attention to the attached document. The document includes the monitoring guidelines for water purification equipment and distribution systems and dialysate and a decision tree that can be used to evaluate culture results.

G. Dialysis Facility Disaster Plans

Mr. Frederick noted that after water main breaks and issues surrounding the Inauguration he feels that the dialysis community should come together to address emergency plans for the units in the event of a disaster. A discussion ensued. The Commission decided to form a workgroup to explore options and develop plans. An email will be sent out requesting volunteers.

H. Hepatitis B Isolation/Staffing

Mrs. Adcock noted that a complaint prompted the need to review how facilities with isolation stations for HBV antigen positive patients staff those stations. The regulation was provided for review. Facilities should not staff susceptible staff members to care for or monitor HBV antigen positive patients unless the facility does not have any staff that are immune. In that case, strict infection control and isolation procedures must be followed.

I. Staffing Exception Reports

Mrs. Adcock directed the guest's attention to the Internal Staffing Exception Report. She noted that facilities should be utilizing this report when they are not in compliance with the State staffing ratios including the free charge nurse where applicable. These forms should be reviewed in the quality assurance meetings and be available for review by the surveyors during surveys.

J. Transition of Renagel to Renvela

Mrs. Misaszek noted that Renagel would not be available in the U.S. after September 30, 2009. She stated that many wholesalers are not stocking Renagel. Mrs. Schwartz reported that Renvela has been added to the KDP formulary. Mrs. Misaszek stated that currently Renvela is 25% less expensive than Renagel.

K. Citation Free Survey

- Davita Bel Air

Dr. Einhorn acknowledged and commended the facility for their citation free survey.

F. Complaints

Mrs. Schwartz noted the Commission has received the following types of complaints since the last meeting:

- Written
 - Patient complaint regarding staffing at a facility
 - Social worker complaint regarding KDP application timeliness
 - Patient's complaint regarding a staff member's unprofessional behavior
 - Staff member's concern regarding HBV isolation staffing
- Verbal
 - Facility complaint regarding patient payment for services
 - Staff member's complaint regarding staffing at a facility
 - Patient's complaint regarding communication at a transplant center
 - Social Worker's complaint regarding KDP certifications
 - Patient complaint regarding facility staffing
 - Patient complaint regarding infection control issue

G. Commission Approval/Disapproval for KDP Transplant Reimbursement

The following hospitals have been granted out of state transplant approvals:

Hospital	Granted	Refused
Washington Hospital Center	1	0
Georgetown University Hospital	1	0
Christiana Hospital Transplant Center	2	0

H. Surveys (20)

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

Deficiencies

Compliance with Federal, State and Local Laws and Regulations	0
Infection Control	10
Water and Dialysate Quality	11
Reuse of Hemodialyzers/Bloodlines	1
Physical Environment	9
Patient Rights	0
Patient Assessment	--
Patient Plan of Care	--
Care at Home	0
Quality Assessment and Performance Improvement	3
Laboratory/Affiliation Guidelines	0
Personnel Qualifications/Staffing	11
Responsibilities of the Medical Director	3
Medical Records	6
Governance	6

I. Surveys Completed (20)

The following facilities have been surveyed since the last meeting:

Davita Takoma Park	DCA Chesapeake
FMC Baltimore	Davita Harbor Park
IDF Arundel	Davita Landover
FMC Rockville	Davita Falls Road
FMC PG County	Davita Owings Mills
Davita Chestertown	Davita Rolling Road
FMC Washington	Davita Wheaton
Davita Bel Air	ARA Ellicott City
RAI Hyattsville	Davita Harford Road
Good Samaritan Hospital Dialysis	Davita Howard County

CLOSED SESSION: Pursuant to Maryland State Government Annotated "10-508", on a motion made by Dr. Roland Einhorn, the Commission unanimously voted to close its meeting on January 29, 2009 at 3:35 p.m., for the purpose of complying with the Maryland Medical Practice Act that prevents public disclosures about particular proceedings or matters.