

Dialysis Clinic Advisory Committee Meeting Minutes

Date: 12/17/13	Convened: 1:07 p.m. Adjourned: 2:50 p.m.	Room: C1D	Minutes Prepared by: Nancy Brown
Meeting Called By: Judy Hughes		Facilitator: Judy Hughes	
Purpose of Meeting: Monthly meeting of Dialysis Clinic Advisory Committee			
Stakeholder Attendees: Tracy Flitcraft, Archie Jones, Cathy Meyer, Stuart Senkfor, Deb Sizer (by phone), Darlene Rogers, Tamyra Warmack CDPHE Attendees: Carol Cambria, Judy Hughes, Jennie Pike, Laurie Schoder, Lorraine Dixon-Jones			

Handouts

- Copies of minutes of November 19, 2013 meeting
- Agenda for December 17, 2013 meeting
- Proposed amendments to Chapter XV – Dialysis Treatment Clinics – dated 12/16/13

Introductions

Discussion

- November 19, 2013 minutes were approved as presented.
- The group discussed the proposed amendments to Chapter XV: Dialysis Treatment Clinics dated 12/16/13. The proposal responds to the statutory changes made by Senate Bill 13-46. Following is a summary of the discussion.

Section 2. **DEFINITIONS.**

2.3 It was noted that the definition of Dialysis Treatment Clinic in the chapter matches the statutory definition. To include peritoneal dialysis, as had been recommended by the committee in a previous meeting, will require a clean-up bill.

Section 6. **PATIENT/CLINIC FUNCTIONS.**

6.1 This paragraph indicates that a clinic may only treat non-end stage renal dialysis patients based on a nephrologist referral that includes professional judgment that hospitalization is no longer required. It was noted that the language comes directly from statute so it must be incorporated into the regulation as written.

The following changes were also discussed.

Section 6.5.9 **PATIENT CARE**

6.5.9(A)(1) thru 6.5.9(A)(3) Changes were made to clarify that this section only concerns admission criteria as well as to clarify who reviews the patient's medical records to determine appropriate admission.

6.5.9(A)(4). This paragraph was struck since training is already addressed in Section 5.6.6. The word "should" will be changed to "shall" in Section 5.6.6 and elsewhere in the chapter where it appears.

6.5.9(C)(1) Changes were made to ensure an initial nursing assessment is conducted promptly, particularly since the care for acute care patients may be very short term.

6.5.9(C)(1)(a) Language regarding patient education was struck because it was determined to be redundant.

6.5.9(C)(2) The highlighted language in the following sentence was added to reflect CMS requirements. "Within thirty (30) days of admission or 13 treatments, whichever is longer, the facility shall develop a written patient care plan that includes treatment goals."

6.5.9(C)(3) The highlighted changes in the following sentences were made. "The care plan shall be **personalized individualized** to reflect the patient's ongoing **medical**, psychological, social, dietary and functional needs. The

care plan shall be reviewed and updated as indicated by any change in the patient's medical, nutritional or psychosocial ~~condition~~ ~~status~~ at least annually."

6.5.9(C)(4) This section addressed providing evidence in care plans that the facility coordinated with other service providers. It was determined that this requirement fits best under medical records and so the language was moved to Section 6.3.3, under the medical records provisions.

6.5.9(C))(5) now (4) Wordsmithing change was made so that instead of the patient care plan being "shared with" the patient or his or her representative, it is "reviewed with".

6.5.9(E) was renumbered to 6.5.9(D). The title was changed from "Medical Supervision and Emergency Coverage" to "Medical Supervision and On-Call Coverage." Instead of the patient being under the supervision of a physician, the draft was amended to provide that the patient is to be under the continuing oversight of a nephrologist. Further, the staff on call was changed from physicians to nephrologists and mid-level practitioners.

Laurie Schoder informed the group that the final draft of the revised regulation goes before the Board of Health in approximately 6 weeks.

- Next meeting is scheduled for Tuesday, January 21, 2013, 1:00 p.m. in Room C1D.