



DIALYSIS DIALOGUE

Welcome to this edition of *Dialysis Dialogue*, a newsletter published by the North Dakota Department of Health, Division of Health Facilities. *Dialysis Dialogue* is designed to help dialysis departments stay up-to-date on various issues. Please share with your dialysis staff.

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Most Commonly Cited Deficiencies

Following is a breakdown and summary of the most common deficiencies cited in the North Dakota ESRD program, listed in order of citation frequency from Oct. 1, 2008 to Sept. 30, 2009. Please refer to the Part “494 Conditions for Coverage for End Stage Renal Disease Facilities” for additional information.

FEDERAL ESRD DEFICIENCIES

V187

The facility must have a schematic diagram of the water treatment system that identifies components, valves, sample ports and flow direction.

Pipes in the water room must be labeled to indicate the contents of the pipe and the direction of flow.

Major water system components must be labeled to identify device, function, performance verification, and what actions to take if performance is not within an acceptable range.

V190

If the facility has water softener tanks that automatically regenerate, staff must check the timers at the beginning of each day.

Facility staff must check the brine tank for a sufficient supply of undissolved sodium chloride.

V403

All equipment must be maintained in safe, functional working condition and operated in accordance with the manufacturer’s recommendations.

Equipment, work surfaces and patient treatment chairs must be maintained to allow effective cleaning/disinfection.

Torn upholstery on chairs must be repaired and/or replaced.

Facility staff must ensure expired supplies are not available for use.

V407

Facility staff must ensure patient access sites and bloodline connections are visible.

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V113

Facility staff must wear disposable gloves when caring for the patient or touching the patient's equipment at the dialysis station. Staff must remove gloves and wash hands between each patient or station.

**V114**

Facility staff must not place used or contaminated items, or drain used items into the same sink used for hand washing.

V147

Facility staff must wear a mask when initiating or discontinuing dialysis on patients with intravascular catheters.

V180

Facilities must test dialysate monthly for endotoxin concentration.

V191

Facility staff must perform water hardness testing at the end of each treatment day.

V196

The water treatment system must be operating for at least 15 minutes prior to testing water for chlorine and chloramines.

V250

Facilities must follow manufacturer's directions for use and check dialysate conductivity and pH with an independent method prior to starting patient treatment.

Take a look at your facility to see if it is deficient in any of these areas. If so, take corrective action to fix the problem.



Questions and Answers (Q&A) Compiled by CMS

The Centers for Medicare and Medicaid Services (CMS) provides specialized technical ESRD training courses for state surveyors, as well as an annual ESRD update. During these training courses, surveyors from across the country ask CMS staff members questions regarding the survey process. Although the questions and answers do not represent official CMS policy, they contain valuable information regarding the survey process. The Q&A is a regular feature of the Dialysis Dialogue newsletter.

Must staff change gloves between “setting up” the machine and initiating the patient’s treatment?

Yes. Initiation of treatment is a point where there is high risk for contamination of the vascular system. New clean gloves are required to be used to initiate patient treatment.

If a staff member carries an item, such as a syringe containing heparin to the dialysis station, but does not put it down (no contamination), can it be returned to the common supply area?

No. Medications that are taken to a dialysis station cannot be returned to a common supply area.

Do gowns worn as personal protective equipment (PPE) need to be impermeable?

Yes.

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If a facility has a storage tank where the stored water is used at the start of the day, is the water system required to run for 15 minutes before testing?

Yes. The purpose for running the water system before testing is to guard against sampling water that has been in the carbon bed for an extended period. Testing the water being processed at the time, even if the water in the storage tank is currently being used, ensures water safety as the newly processed water fills the tank.

Are staff required to use face shields, or is wearing glasses sufficient eye protection?

The staff member's mucous membranes must be protected from possible contamination by spurts or splashes of blood or body fluids. Glasses alone would not protect the wearer's nose or mouth, nor provide protection from splashes coming from the side. Glasses with or without side panels do not provide sufficient eye protection. Appropriately fitted safety goggles could be used with a mask covering the mouth and nose for protection. Face shields are the preferred method of protection for potential splashes.

Can sinks used to drain saline bags, disinfect clamps, prime buckets, etc., be used for hand washing?

No. Hand washing sinks should not be used for discarding of saline from used bags, as the fluid is considered potentially contaminated by patient blood or body fluids.

Can qualified staff members use a patient's bag of saline to draw up saline at the patient's chairside?

Yes. Qualified staff members may use a patient's bag

of saline as a source to draw up saline at the patient's chairside. Careful attention to infection control techniques is expected to prevent any potential contamination of the saline bag. Facilities that reprocess dialyzers must not use the saline bag used for rinsing the dialyzer free of germicide as a source for saline irrigation and flushing.

What resource document refers to the catheter hub caps or bloodline connectors being soaked for three to five minutes in povidone iodine and then allowed to dry prior to separation?

The NKF KDOQI Guidelines 2000 Guidelines for Vascular Access, Guideline 15, Table –III-10.

Considerations for Accessing the Bloodstream Using Catheters provides this recommendation.

May fans be used in the treatment area to control or maintain a comfortable temperature?

No. Fans present an increased risk of infection due to the spread of dust and potential spread of microorganisms. The fan cord also may pose a safety hazard for trips and falls.

If patients refuse to keep their vascular accesses uncovered, is having the patient sign a waiver acceptable?

Patients have the right to refuse aspects of their treatment plans. If the patient refuses to keep his/her access uncovered, the facility would be expected to educate the patient about the risks associated with covering the access during dialysis; assess the patient's reasons for the decision; and develop a plan of care to address the issue. Having a patient sign a waiver does not remove the responsibility of the facility to monitor the patient's access.

Our office recently asked CMS a question regarding collection of water samples. Below is our question and the response from CMS.

Can water sample taps be disinfected with alcohol prior to collecting samples for culture/LAL?

“While it is true that the regulation adopted RD 52 in total, there is extraneous language in the full RD 52 document that we considered confusing to both the provider and the surveyors. We worked directly with the AAMI Committee that developed RD 52 in making the edits and determining what to put in the regulation column. The AAMI Committee approved of our final document. The facility should not disinfect the sample ports prior to collecting the samples. They should follow the direction at V252, according to the AAMI reference of 7.2.2.”

NEW SURVEY AND CERTIFICATION LETTERS

CMS transmits memoranda, guidance, clarifications and instructions to state survey agencies and CMS regional offices through use of survey and certification (S&C) letters. Below is a list of the new S&C letters affecting dialysis facilities since Sept. 4, 2009. The S&C letters are available at www.cms.hhs.gov/SurveyCertificationGenInfo/PMSR/list.asp#TopOfPage.

- S&C 10-03 Approval of State and National Certification Programs for Dialysis Technicians Under New ESRD Conditions for Coverage (CfC).

The new ESRD CfC require dialysis patient care technicians (PCTs) who have been employed since Oct. 14, 2008, be certified by either a state or a national PCT certification program by April 15, 2010. PCTs hired after Oct. 14, 2008, must be certified within 18 months of their date of hire.

- S&C 10-08 Phasing Implementation of Life Safety Code (LSC) Surveys in ESRD Facilities for Calendar Year 2010.

LSC surveys are being phased into the ESRD survey program in two phases. Phase I includes the implementation of initial surveys for new facilities, relocation surveys for existing facilities that move to a new location, and complaint surveys that include allegations related to LSC requirements. LSC surveys for existing ESRD facilities will be implemented following the development of Interpretive Guidance specific to those surveys, an ESRD LSC survey protocol, and a specific training module for ESRD LSC. In this memorandum, CMS describes the procedures for implementing the LSC provisions of the new ESRD Conditions for Coverage. While major portions of the ESRD regulation became effective Oct. 14, 2008, the LSC component became effective Feb. 9, 2009. The ESRD regulation provides certain exceptions to the LSC provisions, including sprinkler systems, Essential Electrical Systems and fire drills. The regulation also provides for specific LSC waivers based upon an “unreasonable hardship.”

- S&C 09-56 Frequently Asked Questions (FAQs) Related to the New ESRD Conditions for Coverage.

In order to promote common understandings and consistency of standards and expectations regarding the new ESRD Conditions for Coverage, CMS is distributing a series of FAQs that are related to those CfC. The first of this series of questions and answers (Wave One) is available at the above website.



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