**Dialysis**

**Competency**

General Information

**Dialysis**

**General Information**

**F684 Quality of Care**

“§ 483.25 Quality of care Quality of care is a fundamental principle that applies to all treatment and care provided to facility residents. Based on the comprehensive assessment of a resident, the facility must ensure that residents receive treatment and care in accordance with professional standards of practice, the comprehensive person-centered care plan, and the residents’ choices”[[1]](#footnote-1)

**F698 Dialysis**

“§483.25(l) Dialysis. The facility must ensure that residents who require dialysis receive such services, consistent with professional standards of practice, the comprehensive person-centered care plan, and the residents’ goals and preferences.”[[2]](#footnote-2)

**Description**

It is a requirement that the facility assures that each resident receives care and services for the provision of hemodialysis and/or peritoneal dialysis consistent with professional standards of practice including the:

* “Ongoing assessment of the resident’s condition and monitoring for complications before and after dialysis treatments received at a certified dialysis facility;
* Safe administration of hemodialysis at the bedside and/or peritoneal dialysis in the nursing home provided by qualified trained staff/caregivers, in accordance with State and Federal laws and regulations;
* Ongoing assessment and oversight of the resident before, during and after dialysis treatments, including monitoring the resident’s condition during treatments, monitoring for complications, implementing appropriate interventions, and using appropriate infection control practices; and
* Ongoing communication and collaboration with the dialysis facility regarding dialysis care and services.”[[3]](#footnote-3)

**Suggestions for Resources/Data to Support the Competency**

A resource for expectations for providers on the Dialysis Program include the CMS State Operations Manual, Appendix PP, Guidance to Surveyors for Long Term Care Facilities.

Suggested competencies for staff will include:

* Licensed Nurse(s):
  + Assessment Process
  + Person-Centered Care Plan for Dialysis
  + Communication
  + Oversee Implementation
  + Demonstration/Evaluation
  + Documentation
* CNA’s:
  + Implementation of Person-Centered care plan interventions for dialysis
  + Communication
  + Documentation and reporting of weight/vital signs
  + Identification and Reporting of Change of Condition
* Interdepartmental Employees
  + Based on facility policy and procedure

**F-Tag Reference General Information**

Examples of (Federal) F tags that could be cited during a survey inspection that are related to dialysis consider:

* F550: Dignity
* F552: Right to be informed and make treatment decisions
* F558: Accommodation of needs
* F561: Advance Directives
* F578: Right to refuse
* F580: Notification of change
* F659: Be provided by qualified persons
* F686: Pressure ulcer
* F698: Dialysis
* F692: Nutrition and Hydration)
* F725: Sufficient Nursing Staff
* F726: Competent Nursing Staff
* F757: Unnecessary Medications
* F880: Infection Control
* F841: Medical director
* F842: Resident Records
* F868: QA&A QAPI

**Link to Critical Element Pathway**

Use the Dialysis Critical Element (CE) Pathway along with the interpretive guidelines when determining if the facility meets the requirements for providing care and services for a resident receiving dialysis services, in accordance with professional standards of practice, and the comprehensive person-centered care plan.

Summary of Investigative Procedure Briefly review the most recent comprehensive assessments, comprehensive care plan and orders to identify whether the facility has recognized, assessed, provided interventions and implemented care and services according to professional standards of practice in order to meet the resident’s dialysis care needs under investigation. This information will guide observations and interviews to be made in order to corroborate concerns identified. In addition, investigate to assure that there are sufficient numbers of trained, qualified and competent staff to provide the interventions identified for a resident receiving dialysis care and services.

If the resident has been in the facility for less than 14 days (before completion of all the Resident Assessment Instrument (RAI) is required), review the baseline care plan which must be completed within 48 hours to determine if the facility is providing appropriate care and services based on information available at the time of admission. In addition, review to determine whether the comprehensive care plan is evaluated and revised based on the resident’s response to interventions.

Interviews lead the surveyor to discuss with both staff and resident/resident representation if services are provided, if they understand, refusals, supervision, encouraging resident participation, pain management, assistive devices, resident decline and more.

Record Review identifies improvement decline, care plan revisions, implementation documentation, significant change, appropriate level of need matching the record and communication of identified changes in condition.

**References and Resources**

* Centers for Medicare & Medicaid Services State Operations Manual, Appendix PP – Guidance to Surveyors for Long Term Care Facilities (Rev. 173, 11-22-17): <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf>
* LTC Survey Pathways (Download) Critical Element Pathways

<https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforlawsandregulations/nursing-homes.html>

* Centers for Medicare & Medicaid Services Long-Term Care Facility Resident Assessment Instrument 3.0 User’s Manual, Version 1.16. October 2018: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/MDS30RAIManual.html>

1. 1,2,3 Centers for Medicare & Medicaid Services State Operations Manual, Appendix PP – Guidance to Surveyors for Long Term Care Facilities (Rev. 173, 11-22-17): <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf> [↑](#footnote-ref-1)
2. [↑](#footnote-ref-2)
3. [↑](#footnote-ref-3)