ASN Dialysis Advisory Group

ASN DIALYSIS CURRICULUM
Staffing in Dialysis Units

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- Affiliations:
  - DaVita, Inc. (employee)
What Determines Staffing Needs?

• Centers for Medicare and Medicaid (CMS) Conditions for Coverage (CfC)
• State Regulations
• Patient Acuity
CfC Staffing Requirements

- The CfCs have standards for each of these staffing categories
  - Medical Director
  - Facility Administrator
  - Nurses
  - Technicians
  - Dietitians
  - Social Workers
Medical Director Qualifications - CfC

• Board certified in internal medicine or pediatrics by a nationally recognized professional board
  • Board Certification in nephrology in lieu of internal medicine or pediatrics is permitted (I. Guidance)

• Completion of a board-approved nephrology training program

• 12 months experience in caring for dialysis patients, including time spent in nephrology training
The Role of the Medical Director

- Responsible for the delivery of patient care and outcomes
- Accountable to the governing body for the quality of medical care provided to patients
- Responsible for Quality Assessment and Performance Improvement (QAPI) program
- Ultimately responsible for all staff education, training, and performance
- Responsible for developing, periodically reviewing and approving a “Patient Care Policies and Procedures Manual”
- Responsible for ensuring that all individuals who treat patients in the facility, including attending physicians and non-physician providers, adhere to all policies relative to
  - Patient admissions
  - Infection control
  - Safety
- Responsible for ensuring that the Interdisciplinary Team adheres to discharge and transfer policies and procedures
Facility Administrator

- **Governing Body or person responsible must appoint an individual who serves as the facility’s CEO or administrator. He/she exercises responsibility for the management of the facility and provision of all dialysis services, including, but not limited to:**
  - Staff appointments
  - Fiscal operations
  - The relationship with End-Stage Renal Disease (ESRD) networks
  - Allocation of necessary staff and other resources for QAPI
Facility Administrator Qualifications

• Qualifications for the Facility Administrator are not specified in CfC, but should be defined in policy and include sufficient educational and practical experience to fulfill the responsibilities listed under governance.

• The position may be held by a staff member holding a different role, e.g., Nurse Manager or Medical Director, as long as the duties of each position are effectively managed.
Nursing Qualifications - CfC

• **Nurse Manager - Registered Nurse (RN)**
  • Must be a full time employee of the facility
  • Must have 12 months of clinical nursing experience and an additional 6 months of experience in dialysis
  • Oversight and direction of all direct care staff
  • A 24-hour responsibility position

• **RN in Charge of Self-Dialysis Care Training**
  • Must have 12 months clinical nursing experience and an additional 3 months experience in the specific modality for which he or she is providing training
The Role of the Nurse Manager

• The RN serving as Nurse Manager works closely with the Medical Director and Interdisciplinary Team (IDT) to ensure quality patient care and outcomes. Such responsibilities include:
  • Leadership in QAPI program
  • Assessments/Plans of Care with IDT
  • Outcomes Management (Anemia, Adequacy, etc.)
  • Patient and Staff Education
  • Medication Administration
  • Patient Care Conferences
Patient Care Technicians - CfC Qualifications

• Must have a High School Diploma

• All Patient Care Technicians (PCTs) must be certified within 18 months of their hire date - if they switch providers the original hire date still applies

• Certification will be accepted if:
  • There is a standardized test
  • The state test reflects the same content listed in the regulation
  • The test is administered in a proctored environment unrelated to any dialysis facility
The Role of the PCT

- PCTs are responsible for performing dialysis treatments. They initiate, monitor, terminate, and document dialysis under the supervision of the Charge Nurse. PCTs may also be cross-trained to perform other functions in the unit, such as:
  - Reuse of dialyzers
  - Administrative duties
  - Inventory
The facility must have a dietitian who meets both the following criteria:

- Be a registered dietitian with the Commission on Dietetic Registration
- Have a minimum of 1 year professional work experience in clinical nutrition as a registered dietitian
The Role of the Dietitian

- The Renal Dietitian is part of the IDT (core team) of the facility. They must participate in the QAPI meetings and patient care conferences. Other responsibilities may include:
  - Nutritional counseling and support
  - Management of mineral bone disease
  - Assessment and plan of care
Social Worker Qualifications - CfC

• The facility must have a social worker with a Masters of Social Work who meets the following criteria:

• Masters of Social Work with a specialization in clinical practice from a School of Social Work accredited by the Council on Social Work Education (CSWE)

• The curriculum of masters-level program in schools accredited by the CSWE, include courses in human behavior, family dynamics, diagnosis, mental health treatment, conflict management, and ethics - anyone whose degree is from a school accredited by the CSWE is presumed to have a “specialization in clinical practice”
The Role of the Social Worker

- Social workers are part of interdisciplinary care team. They must participate in the QAPI meetings and patient care conferences. Other responsibilities may include:
  - Psychosocial support, including assessment using the Kidney Disease Quality of Life (KDQOL) Assessment/Plan of Care
  - Financial counseling/insurance support
  - Transportation and travel arrangements
Beyond CfC - State Requirements

• The CfC defines minimum qualifications for staff but does not address the ratio of patients to staff. Some states have defined patient-to-staff ratios, for example the nurse-to-patient ratio or dietitian-to-patient ratio.

• The following states have specific ESRD regulations:
  • Texas
  • Georgia
  • South Carolina
  • California
  • Louisiana
  • Washington, DC
  • Maryland
  • Oregon
  • Connecticut
  • Ohio
  • Utah
  • Mississippi
Other Roles Not Defined by CfC

• Administrative Assistant/Unit Secretary
• Reuse Technician
• Biomedical Technician
  • Responsible for maintenance of all equipment including dialysis machines, water treatment and reuse
  • May also assist with facility maintenance
• Inventory Technician
• Biller
• Insurance Specialist
General Staffing Considerations

• **Size**
  - Smaller units tend to cross-train staff to perform multiple roles

• **Location**
  - Rural or urban

• **Ownership**

• **Patient Acuity**
  - Catheter patients require more nursing time
  - Nursing home patients may have a need for acute care
Typical Staffing - 18 Station Facility

- An 18 station facility can dialyze a maximum of 108 patients utilizing all stations 6 days per week, 3 patient shifts per day. At full capacity typical staffing would include:
  - Administrator (may be a full- or part-time position)
  - Nurse Manager
  - Charge Nurses - RN/Licensed Vocational Nurse on every staff shift
  - Medication Nurse
  - PCTs - typically a 4:1 ratio
  - Full-time Social Worker
  - Full-time Dietitian
  - BioMed Technician
  - Unit Secretary