

Japitana, Edgardo Q. (CMS/WC)

From: Helen.Archer-Duste@kp.org
Sent: Friday, July 28, 2006 11:13 AM
To: Japitana, Edgardo Q. (CMS/WC)
Cc: Christine.Robisch@kp.org; Romero, Deborah C. (CMS/WC); Linda.M.Mann@kp.org; Soria, Renie A. (CMS/WC)
Subject: RE: Provider # 05-2312 Plan of Correction Addendum
Attachments: Tag V 494 pg 47 final July 24 2006.doc; Tag V 494 pg 48 final.doc; Tag V 494 pg 47 final July 28 2006.doc; Tag V 494 pg 48 final.doc

Thank you for calling me today. The attached revised documents reflect the change you requested. I look forward to your reply.

Helen Archer-Duste, RN, MS, CHC
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Helen Archer-Duste

To: "Japitana, Edgardo Q. (CMS/WC)" <Edgardo.Japitana@cms.hhs.gov>
cc: "Romero, Deborah C. (CMS/WC)" <Deborah.Romero@cms.hhs.gov>, "Soria, Renie A. (CMS/WC)" <Renie.Soria@cms.hhs.gov>, Christine Robisch/CA/KAIPERM@KAIPERM, Linda M Mann/CA/KAIPERM@KAIPERM
07/24/2006 04:31 PM Subject: RE: Provider # 05-2312 Plan of Correction Addendum [Link](#)

Thank you for your guidance. Attached please find newly revised Tag V 494. I look forward to hearing your response.

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07/28/2006

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED
STREET ADDRESS, CITY, STATE, ZIP CODE				
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
V 481	Continued From page 46 Further record review revealed that authorization for kidney transplants at TC2 were also extended to 9-17-04 following a request made by the OPO to until "regional crossmatch trays expire on September 17, 2004 at 5:00 p.m." During the same interview on 5-11-06, TC2 staff stated that certain transplants were allowed past this date such as dual organs but not for single, cadaveric kidney transplants. During an interview on 5-9-06, TD1 stated that , she was aware of several kidney transplants that were authorized for member patients to be performed outside of the RTC even after the 9-1-04 deadline. TD1 added that approval was based on communication between the RTC and the centers involved. Review of documents however revealed the lack of written evidence of MS1's involvement in any communication with TC1 and TC2 of this possibility and of certain situations where this might be considered and authorized.	V 481		
V 494	405.2171(c) RTC: DIETETIC SERVICES The renal transplantation center ensures that each patient is evaluated as to his nutritional needs by the attending physician and a qualified dietician (405.2102) who has an employment or contractual relationship with the facility. This Standard is not met as evidenced by: Based on interview and review of medical records and policy and procedures manuals, the RTC did not ensure that each patient was evaluated as to his/her nutritional needs by a qualified dietitian who has an employment or contractual relationship with the RTC.	V 494	The RTC hired a qualified dietician on June 12, 2006 and completed orientation on June 22, 2006. Based on medical record review, patients who required a dietary evaluation were identified and a prioritized process developed for their receiving an evaluation. In addition, the patients identified by the statement have all received dietetic consultations by June 16, 2006. All patients will have a dietary evaluation in the RTC medical record. Confirmation of a dietary evaluation in the medical record is completed as a component of the transfer process to TC1 and TC2.	June 22, 2006 June 12, 2006 June 16, 2006 July 31, 2006 May 24, 2006 and ongoing

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V 494	<p>Continued From page 47</p> <p>Findings include:</p> <p>1. Review of ten of 17 medical records revealed the lack of evidence that a dietary evaluation had been conducted and that the patient's dietary needs relative to transplantation would be communicated to the ESRD facility or patient's physician to trigger a notice to the transplant center and/or contraindicate transplantation once the patient had been selected for transplantation.</p> <p>The policy and procedure manuals did not contain a policy, process or procedure for a patient care plan or long-term program that included dietary evaluation.</p> <p>2. During an interview on 5-9-06 at 9 a.m., TD2 stated that the RTC did not have a full time dietitian following her appointment as Renal Program Director two months prior. TD2 added that a hospital dietitian spends about 0.5 hours in the RTC.</p> <p>During another interview on 5-9-06 at 3:30 p.m., a hospital registered dietitian stated that evaluations were conducted on a consultation basis only. She added that she only follows transplant patients when there is a request for consultation from the physician or a nurse, when a renal diet is ordered, or following the 11th inpatient hospital stay.</p> <p>Review of the job description revealed that the Clinical Dietitian was responsible for the development, coordination, and performance of clinical nutritional activities to meet the needs of pre and post renal transplant recipients as well as living donors in the inpatient and outpatient settings.</p>	V 494	<p>The RTC has implemented a policy and procedure that addresses dietetic evaluations. The Renal Transplant Center collaborates with the nephrologists, RN renal case managers and dialysis centers to assure integrated multidisciplinary care planning occurs. The plan of care for all dialysis patients is completed as a component of this community based care. The plan of care for non-dialysis patients is developed by the primary treating nephrologists.</p> <p>A presentation will be given to the Kaiser Permanente Northern CA Region Renal Case Managers peer group to confirm their accountability for providing the current dietetic evaluations and collaborating with RTC staff. <u>Accountable Party:</u> CEO</p> <p>A presentation will be made to the Kaiser Permanente Northern CA Region Chiefs of Nephrology to confirm their accountability. <u>Accountable Party:</u> CEO and Medical Director</p> <p>Policies and procedures were approved by the RTC Area Manager on June 21, 2006. <u>Accountable Party:</u> Area Manager</p> <p><u>Monitoring</u></p> <p>Audit of medical records for evidence of dietetic evaluations by Compliance Officer/designee.</p>	<p>June 22, 2006</p> <p>June 29, 2006</p> <p>July 5, 2006</p> <p>June 22, 2006</p> <p>July 31, 2006</p>

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