

Florida Kidney Disaster Coalition

MINUTES

Date: 3/03/09	Time: 10:30 – 2:00	Location: Tampa, FL	
Members Present:			
Jenni Binns FMQAI: The Florida ESRD Network	Nancy Blackburn Fresenius Medical Care	David Bobish Sarasota Physician's Dialysis	Sherilyn Burris FMQAI: The Florida ESRD Network
Linda Carroll Network 7 MRB	Michael Christensen Fresenius Medical Care	Emily Carbone AAKP	Don Cranston TECO
Sally Gore FMQAI: The Florida ESRD Network	Stephanie Hull Fresenius Medical Care / Suncoast ANNA	Sarah Knott Fresenius Medical Care	Susan Kreuter CNSW / North Beach Dialysis
Ryan Pedigo (Keelie – representative in his place) Hillsborough County Emergency Management	Jane Petruccelli All Kids	Penny Pursley Fresenius Medical Care	Denise Soto NKF of Florida

TOPIC	DISCUSSION	PLAN OF ACTION	RESPONSIBLE
Welcome & Introductory Remarks	Sally Gore welcomed all the members to the meeting and introductions were made.		

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Open Discussion: Miami Dade	<p>Susan Kreuter led this open discussion. The group discussed the following issues/topics:</p> <ul style="list-style-type: none"> • Ms. Kreuter attended a Community Partner Meeting in Miami Dade. Over 50 people attended and the response from the meeting was good. The meeting was positive and stakeholders were engaged. The new EOC representative is proactive, understands dialysis, and wants to help. The EOC partnered by adding new slides to the FKDC PowerPoint and a representative from the Board of Health spoke, as well. • One task that came out of the meeting was to update the FKDC <i>Who to Contact</i> form to add numbers specific to Miami Dade as a county specific resource. • The use of patients dialing 311 was discussed. 311 is health information line providing county specific information. Patients may utilize this number after a disaster. United Way funds this number. • Ms. Kreuter requested that FKDC come up with a few questions for the operators to ask the patients when they 	<p>Develop 311 scripts for Miami – Dade. Send draft script out on listserv for review</p> <p>Update Who to Contact Form with Miami-Dade specific numbers (independents / regional)</p>	<p>Sally Gore/Susan Kreuter</p> <p>Sally Gore / Susan Kreuter</p>

	<p>do utilize the 311 number. Here are the questions that were suggested: 1) Have you contacted your dialysis unit? 2) Are you in distress? 3) When was your last treatment? 4) Do you have the emergency number for your dialysis facility?</p> <ul style="list-style-type: none"> • Ms. Kreuter stated that during the meeting, Emergency Management noted that they knew of 36 dialysis providers; however there are 41 centers in the Miami Dade area. Ms. Kreuter provided them with updated information. They have also indicated that dialysis providers will now be prioritized under hospitals. • A meeting participant from Fresenius offered to volunteer her time in assisting with future Community Partner Meetings, including those in Broward County. • Ms. Carroll & Ms. Knott discussed the fact that not all counties are as proactive as Miami-Dade. Ms. Knott sent out a small questionnaire to Fresenius facilities to identify in which counties dialysis providers are able to contact their EOCs and in which counties this has been difficult. FKDC could provide education (Community Partner Packets) to those that have not been able to engage their emergency management agency. 	Share results of Fresenius scan	Sarah Knott
<p>Lavender ID Cards</p>	<p>Sherilyn Burris led the group through this agenda item.</p> <ul style="list-style-type: none"> • Ms. Burris sent out a faxblast regarding the KCER Lavender Patient ID Cards to dialysis facilities, requesting their feedback on the usage of the cards. Only half of the facilities received the cards and Ms. Burris indicated that this may be because the shipment was not sent to a specific person and just to the facility, and possibly because it was sent via regular mail. • The Lavender Patient ID Cards were not intended to be used for just a specific disaster, such as a hurricane, they were intended to be used for all disasters. However, many of the responses indicated they would not use the cards until the start of the Hurricane Season. • Some of the FKDC members felt the cards may be too difficult or time consuming to fill out. Ms. Burris suggested to just attach the Lavender Cards to the form that they use (i.e. print out of dialysis prescription) so medical staff will see the color lavender, which is intended to indicate that this is a dialysis patient. 		

Action Item Status			
	<p>Ms. Carroll led the group through this agenda item. A detailed list of tasks assigned and persons responsible follows:</p> <ol style="list-style-type: none"> 1. Conditions for Coverage: Develop matrix comparing new Conditions for Coverage with FKDC resources. <i>Previously, the group agreed that developing a mailing with resources was the best approach to providing education and promoting FKDC resources. Ms. Gore & Ms. Burris have created a detailed matrix of FKDC resources, broken down by the Interpretative Guidelines V-tags. The group commented that this was an excellent resource.</i> <p>Ms. Carroll noted that a disclaimer should be added to the mailing stating that using the contents of the mailing will not guarantee a facility to pass an inspection; these are only resources and suggestions. The group requested the mailing be sent to all dialysis facilities (Attn: clinical manager) at the end of April. A follow-up faxblast could then be sent during May (Hurricane Preparedness Week).</p> <p>The following should be included in the mailing: The Hazard Vulnerability Analysis (Ms. Gomez has additional comments to be incorporated), Conditions for Coverage pamphlet/brochure, and Hazard Vulnerability Analysis. The mailing should include a letter about FKDC and state in the letter that the Hazard Vulnerability Analysis is a new tool. Language should also be added into the letter encouraging providers to discuss emergency preparedness in CQI meetings.</p> <ol style="list-style-type: none"> 2. Communication with special needs shelters. <i>Ms. Gore shared the clinical PowerPoint, as well as other resources, with Mr. Wood so that he could share with the Department of Health. FKDC was hoping this PowerPoint would be a resource the Department of Health would use to educate shelter nurses regarding dialysis. The contacts at the Department of Health reviewed the PowerPoint and made edits and suggestions for improvement. The feedback will be incorporated and the course will be tweaked to make it more feasible for an online CEU course. Once the course is complete the coalition will market it to the Department of Health again, specifically as a potential CEU course for shelter nurses.</i> 3. FKDC newsletter. <i>The next FKDC newsletter has been created and is ready for distribution. The group agreed</i> 	<p>Finalize CfC mailing and distribute to all Florida providers in April</p> <p>Disseminate follow-up faxblast in May (Hurricane Preparedness Week)</p> <p>Update PowerPoint and get approved for CEUs</p> <p>Explore possibility of creating newsletter word</p>	<p>Sally Gore/Sherilyn Burris</p> <p>Sally Gore</p> <p>Sally Gore/Sherilyn Burris</p> <p>Sally Gore</p>

	<p>this should be distributed via the FHA and sent to other Networks as well. Discussion also ensued regarding how the newsletter could be marketed to patients. Several suggestions were made, including:</p> <ul style="list-style-type: none"> ▪ Send to facilities with directive to distribute to the patients. This will require significant re-work to make the newsletter appropriate to patients. ▪ Another suggestion was to have a contest and have patients create a preparedness word search. The instructions would be posted on the website and the winner of the contest would have their word search posted in the FKDC Bulletin. <p>4. Develop a Community Partner Packet for utility companies. During previous meetings, discussion ensued regarding developing a Community Partner Packet for electric/utility companies. Mr. Cranston suggested that the coalition work with the hospitals on this, as they have influence with electric companies. If a trauma hospital tells the electric company that this is a group of patients that electric companies need to plan for because the hospitals cannot handle an influx in an emergency, they will likely pay more attention. Partnering with emergency management will also help. Ms. Gore reported that she and Ms. Burris had outlined the contents of the packet, but were still having trouble identifying appropriate contacts to send the packets to. Mr. Cranston agreed to assist with contact information.</p> <p>5. Conduct dialysis meetings in counties with large populations of ESRD patients. Mr. Bobish reported out regarding his upcoming meeting in Sarasota, scheduled for March 12. This meeting was difficult to set up and he encountered many obstacles in arranging this meeting. Ms. Carroll will attend the meeting on behalf of FKDC. Mr. Bobish will report out on the meeting during the next FKDC meeting.</p> <p>The group also discussed other areas that would be appropriate for Community Partner Meetings, including Jacksonville, Lee County and Collier County. Ms. Knott stated she thought there may have been a recent meeting in Jacksonville and she will look into this and report back to the group. Mr. Christensen also noted that there have been several meetings in Palm Beach and Broward Counties.</p>	<p>search contest and making edition suitable for patients</p> <p>Provide list of utility contacts to Sally Gore</p> <p>Finalize packet & distribute in mid-April</p> <p>Assist in reviewing introduction letter</p> <p>Attend Sarasota meeting representing FKDC</p> <p>Send Community Partner materials to David Bobish</p> <p>Look into any recent meetings in Jacksonville</p>	<p>Don Cranston</p> <p>Sally Gore/Sherilyn Burris</p> <p>Don Cranston</p> <p>Linda Carroll</p> <p>Sally Gore</p> <p>Sarah Knott</p>
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	<p>6. Hurricane Preparedness Week. The group discussed the possibility of adding the FKDC website to the locally published Hurricane Guide. No one was quite certain who put the guide out. Keelie, the representative from the Hillsborough EOC, stated that she may have a contact for this.</p> <p>7. Patient from Network Patient Advisory Committee interested in joining FKDC. Ms. Knott noted that she could assist in providing travel reimbursement. As the next meeting will be a conference call, this will not be needed immediately.</p> <p>8. Transportation Resources. As transportation was a major obstacle during the 2008 Hurricane Season, the group had previously discussed posting a list of transportation resources to the website. Ms. Knott talked to ACHA but was not getting the needed response. It appears this list may be too county specific of an approach.</p> <p>9. FKDC Website & Conditions for Coverage. The group advised restructuring the tools section to more clearly outline resources that are linked to the new Conditions. This is now in progress. The new set-up will follow the Conditions for Coverage matrix that was developed. The group did suggest making a more prominent link to FREE CEUs on the main page. Ms. Gore will ask everyone to review the completed website in advance of the next meeting and will take any other suggestions for improvements then.</p>	<p>Follow-up to obtain contact for Hurricane Guide</p> <p>Provide patient member information to Sarah Knott for reimbursement follow-up</p> <p>Send out email to coalition once new website complete</p> <p>Review website and provide feedback</p>	<p>Sally Gore</p> <p>Sally Gore</p> <p>Sally Gore</p> <p>All</p>
<p>New Business</p>	<p>The group discussed the current structure of the FKDC meetings. Currently, all meetings (held on a quarterly basis) are in-person in Tampa. With the troubled economy, some of the FKDC members no longer have in their budgets to travel to Tampa for the meetings. The group explored options for keeping all stakeholders involved in the meetings.</p> <p>Mrs. Gore suggested that there be two conference calls and two in-person meetings each year so we all members can provide input and we are not exclude those members that are not local to Tampa. Many of the members felt it would be difficult to have the meetings via conference calls but they are willing to give it a try. Suggestions for making the calls successful included:</p> <ol style="list-style-type: none"> 1. The calls will need to be more structured. Possibly an agenda sent out prior to meeting with the speaker's name 		

	<p>and the time they will be speaking, the key will be to hold to the time. After a review/report out on the Action Item Status list, there could be a brief time allotted to open discussion.</p> <p>2. The meeting time was also discussed. Members felt that changing the time to 1:00 -2:30pm would work better and also this would mean that a lunch sponsor does not need to cater the meeting. The conference calls should be kept short, to 1 ½ hours.</p> <p>Ms. Gore asked for suggestions on a date for next meeting. The group suggested having the meeting prior to hurricane season starting, probably in mid-May.</p>	Email date of next meeting	Sally Gore
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