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## **ARCHIVES DIVISION**

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# PERMANENT ADMINISTRATIVE ORDER

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**CHAPTER 333 OREGON HEALTH AUTHORITY PUBLIC HEALTH DIVISION** 

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FILING CAPTION: Standards for the certification of hemodialysis technicians

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## **RULES:**

333-275-0001, 333-275-0010, 333-275-0020, 333-275-0030, 333-275-0040, 333-275-0045, 333-275-0050, 333-275-0060, 335-275-0060, 335-275-0060, 335-275-0060, 335-275-0060, 335-275-0060, 335-275-0000, 335-275-0000, 335-275-0000, 335-275-0000, 335-275-0000,275-0060, 333-275-0070, 333-275-0080, 333-275-0085, 333-275-0087, 333-275-0090, 333-275-0100, 333-275-0110, 333-275-0120, 333-275-0130, 333-275-0140, 333-275-0150, 333-275-0160, 333-275-0170, 333-275-0175, 333-275-0170, 335-0170, 335-0170, 335-0170, 335-0170, 335-0170, 335-0170, 335-0170, 335-0170, 335-0170, 335-0170, 335-0170, 335-0170, 335-0170, 335-0170, 335-0170333-275-0180, 333-275-1000, 333-275-1010

AMEND: 333-275-0001

**RULE TITLE: Purpose** 

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Amend 333-275-0001 – Minor corrections made for readability and added reference to scope of practice. Updates rule number references.

## **RULE TEXT:**

The purpose of OAR 333-275-0001 through 333-275-1010 is to establish standards for the training, testing, certification, and scope of practice of hemodialysis technicians. These rules are adopted pursuant to ORS 688.625 through 688.665.

STATUTORY/OTHER AUTHORITY: ORS 688.635, 688.640, 688.650, 688.665

STATUTES/OTHER IMPLEMENTED: ORS 688.625 - 688.665

**RULE TITLE: Definitions** 

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Amend 333-275-0010 – Amends definitions for clarity. Removes definition for "Division" and replaces with "Authority." Aligns definitions with statute. Adds definition for "Criminal records check," "Declared emergency," "Hemodialysis Services," "Provisional certificate," and "These rules." Adds definitions for provider types. Removes definitions that are not used in rule or are no longer needed.

#### **RULE TEXT:**

As used in OAR chapter 333, division 275, unless the context requires otherwise, the following definitions apply:

- (1) "Abbreviated training program" means a training program consisting of a minimum of 16 hours of theory related to hemodialysis or supervised clinical learning experiences to train a hemodialysis technician or demonstrate the clinical competencies of an experienced hemodialysis technician.
- (2) "Authority" means the Oregon Health Authority, Public Health Division.
- (3) "Certificate" means a document issued by the Authority identifying the legal privilege and authorization to perform the specific functions and procedures of a hemodialysis technician in the State of Oregon.
- (4) "Certified hemodialysis technician" (CHDT) means a person certified by the Authority under ORS 688.650.
- (5) "Competency" means the demonstration of knowledge in a specific area and the ability to perform specific skills and tasks in a safe, efficient manner.
- (6) "Continuing education" is planned learning experiences beyond a basic technician educational program designed to promote the development of knowledge, improve skills and develop attitudes for the enhancement of patient care relevant to dialysis.
- (7) "Criminal records check" means obtaining and reviewing criminal records and includes any or all of the following:
- (a) A check of criminal offender information and driving records conducted through use of the Law Enforcement Data System (LEDS) maintained by the Oregon State Police (OSP), in accordance with the rules adopted and procedures established by the OSP;
- (b) A check of Oregon or other state criminal offender information, including through fingerprint identification or other means, conducted by the OSP at the Authority's request; or
- (c) A nationwide check of federal criminal offender information, including through fingerprint identification, conducted by the OSP through the Federal Bureau of Investigation (FBI).
- (8) "Declared emergency" means:
- (a) An emergency declared by the Governor under ORS 401.165;
- (b) A public health emergency declared under ORS 433.441; or
- (c) An emergency declared by the President of the United States and a public health emergency declared by the Secretary for Health and Human Services, and when the Centers for Medicare and Medicaid Services (CMS) has approved temporary modifications and waivers that apply to Oregon under Section 1135 of the Social Security Act.
- (9) "Dialysis" means a process by which dissolved substances are removed from a patient's body by diffusion from one fluid compartment to another across a semipermeable membrane. The two types of dialysis that are currently in common use are hemodialysis and peritoneal dialysis.
- (10) "Dialysis facility or center" means a place awarded conditional or unconditional status by the federal Centers for Medicare and Medicaid Services (CMS) to provide dialysis services.
- (11) "Direct supervision" means that a registered nurse, nurse practitioner, or physician is physically present in the dialysis facility or center, is actively involved in the direct oversight and training of the trainee hemodialysis technician or CHDT, and is accessible in the immediate patient care area and available to intervene, if necessary.
- (12) "Extended training program" means a training program designed for the minimally experienced or inexperienced trainee hemodialysis technician to gain the skills necessary to become a CHDT.
- (13) "Hemodialysis services" means the provision of health services related to dialysis and includes but is not limited to

any of the activities described in OAR 333-275-0090.

- (14) "National certification" means certification by a national credentialling organization approved by the Authority.
- (15) "National certification exam" means an examination that has documented validity, reliability, and interrater reliability, is provided on a national level, and is approved by the Authority.
- (16) "Nurse practitioner" has the meaning given that term in ORS 678.010.
- (17) "Physician" means a physician as defined in ORS 677.010 licensed by the Oregon Medical Board under ORS chapter 677.
- (18) "Provisional certificate" means a document issued by the Authority identifying the legal privilege and authorization to perform the specific functions and procedures of a hemodialysis technician in the State of Oregon prior to the certificate holder passing a national certification exam.
- (19) "Registered nurse" means a person licensed by the Oregon State Board of Nursing in accordance with ORS chapter 678.
- (20) "Registry" means the list of Oregon certified hemodialysis technicians maintained by the Authority.
- (21) "These rules" means OAR 333-275-0001 through 333-275-1010.
- (22) "Trainee hemodialysis technician" means an uncertified hemodialysis technician enrolled in an abbreviated or extended training program, working under the direct supervision of a nurse educator or hemodialysis technician educator.

STATUTORY/OTHER AUTHORITY: ORS 688.635, 688.640, 688.650, 688.665

STATUTES/OTHER IMPLEMENTED: ORS 688.625 - 688.665

RULE TITLE: Hemodialysis Technician Certification Required

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Amend 333-275-0020 – Removes dates that are no longer relevant. Clarifies that a person cannot function as a hemodialysis technician unless certified by the Authority. Specifies minimum qualifications. Reference to the national certifying organizations approved by the Authority were moved from OAR 333-275-0010 (Definitions) to this rule.

## **RULE TEXT:**

- (1) An individual must have a current, valid Oregon CHDT certificate and be listed on the CHDT registry prior to providing hemodialysis services.
- (2) A person must meet the following minimum qualifications to be eligible for a certificate:
- (a) Earned at least a high school diploma or equivalent, as indicated by proof of the following:
- (A) Completion of high school or an equivalent educational level;
- (B) Passage of an approved high school equivalency test, including but not limited to the General Education Development (GED) test; or
- (C) Graduation from a post-secondary institution; and
- (b) Current national certification or successful completion of a national certification exam.
- (3) If applying for a provisional certificate, an applicant is not required to have successfully completed a national certification exam but instead must have successfully completed training and skills competency requirements in OAR 333-275-0110.
- (4) Licensed health providers are not required to obtain a CHDT certificate if provision of hemodialysis services falls within their licensed scope of practice.
- (5) National credentialling organizations that certify hemodialysis technicians and offer national certification exams approved by the Authority may be found at www.healthoregon.org/hflc and include, but are not limited to:
- (a) The Board of Nephrology Examiners for Nursing and Technology (BONENT); and
- (b) The Nephrology Nursing Certification Commission (NNCC).

STATUTORY/OTHER AUTHORITY: ORS 688.640, 688.650, 688.665

STATUTES/OTHER IMPLEMENTED: ORS 688.630, 688.640, 688.650, 688.665

RULE TITLE: Application for Hemodialysis Technician Certificate

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Amend 333-275-0030 – Clarifies application requirements. Requires a fingerprint-based, national criminal records check in certain circumstances, such as if the applicant resides out-of-state, and if the applicant is subject to a fingerprint-based records check, the applicant is responsible for paying the cost. Requires an applicant who is licensed or certified by a health professional regulatory board to provide proof of licensure and disclosure of any actions or sanctions taken or pending against the license or certificate. Establishes that the Authority may use criminal records history or information obtained from a health professional regulatory board to determine fitness for certification. Specifies when the Authority may deny an application and allows the Authority to determine an application incomplete and reject the applications.

## **RULE TEXT:**

- (1) An applicant for a hemodialysis certificate must:
- (a) Provide documentation that the applicant meets the qualifications specified in OAR 333-275-0020. Sufficient documentation includes a diploma or other document, or by facts, circumstances, or other indicators deemed sufficient by the Authority;
- (b) Submit a complete application prescribed by the Authority;
- (c) Submit the applicable fee specified in OAR 333-275-0180;
- (d) Consent to a criminal records check in accordance with ORS 181A.195, ORS 181A.200 and OAR chapter 125, division 7; and
- (e) If the applicant is licensed or certified in a health-related occupation by a health professional regulatory board defined in ORS 676.160, provide proof of licensure and disclosure of any actions or sanctions taken or currently pending against the licensee.
- (2) The Authority may use the information obtained through criminal history records, or a public query to a health professional regulatory board, to determine suitability for certification.
- (3) The Authority shall deny any applicant who fails to provide written consent for a criminal records check or fails to complete requirements necessary for fingerprinting, where required.
- (4) They Authority may deny any applicant who submits fraudulent or misrepresented information.
- (5) The Authority may deem an application incomplete if it does not include the information required by the Authority or is not accompanied by the appropriate fee.
- (6) The Authority may reject an application that is incomplete.
- (7) The applicant is responsible for the cost of a fingerprint-based criminal records check if a fingerprint-based criminal records check is determined necessary by the Authority. The cost charged to the applicant shall not exceed the cost charged to the Authority.

STATUTORY/OTHER AUTHORITY: ORS 688.640, 688.665

RULE TITLE: Application Review and Approval

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Amend 333-275-0040 – Identifies the application review and approval process. Clarifies that the Authority shall conduct a fitness determination in accordance with OAR chapter 125, division 7 and repeals the crimes tables that specify types of crimes that are or may be a mandatory exclusion. Clarifies that the Authority may conduct an investigation based on the information obtained and to determine fitness.

#### **RULE TEXT:**

- (1) The Authority shall conduct a criminal records check of an applicant in accordance with OAR chapter 125, division 7.
- (2) Using the information obtained through the criminal records check and in accordance with OAR chapter 127, division 7, the Authority shall determine whether the applicant is fit to perform the functions of a hemodialysis technician.
- (3) If the applicant meets the requirements in ORS 688.625 through 688.665 and these rules, the Authority will issue the certificate.
- (4) If the applicant does not meet the standards for a certificate, or the fitness determination results in a denial, the Authority may deny the application on the basis of information provided in the application or conduct an investigation in accordance with OAR 333-275-0120.
- (5) Following an investigation, the Authority may:
- (a) Deny the application;
- (b) Grant the application but place practice restrictions on the CHDT; or
- (c) Grant the application.
- (6) Nothing in this rule precludes the Authority from taking an action authorized in ORS 688.655 and 688.660.

STATUTORY/OTHER AUTHORITY: ORS 688.650, 688.665

STATUTES/OTHER IMPLEMENTED: 688.665, ORS 181A.195, 181A.200, 670.280, 688.655

ADOPT: 333-275-0045

RULE TITLE: Denial of Certified Hemodialysis Technician Application

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Adopt 333-275-0045 – Clarifies that if the Authority denies an application, it shall issue notice in accordance with ORS chapter 183.

## **RULE TEXT:**

If the Authority intends to deny an application, it shall issue a Notice of Proposed Denial of License Application in accordance with ORS 183.411 through 183.470. Final actions taken by the Authority in denying an application or placing restrictions on a CHDT's practice shall be done in accordance with ORS chapter 183.

STATUTORY/OTHER AUTHORITY: ORS 688.665

STATUTES/OTHER IMPLEMENTED: ORS 688.655, 688.660, 688.665

RULE TITLE: Hemodialysis Technician Certification Expiration

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Amend 333-275-0050 – Minor corrections made for readability.

**RULE TEXT:** 

Each certification issued, unless sooner suspended or revoked, shall expire on June 30 of odd numbered years.

STATUTORY/OTHER AUTHORITY: ORS 688.650, 688.665

RULE TITLE: Hemodialysis Technician Certification Renewal

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Amend 333-275-0060 – Clarifies steps necessary for annual renewal of certificate. Adds back minimum employment and continuing education hours for renewal. Modifies requirements for reinstatement of certification after certificate has expired. Allows an applicant that provides evidence of active military duty additional time to meet renewal requirements. Specifies continuing education must be relevant to dialysis care, documentation requirements, and information necessary to show proof of completion.

## **RULE TEXT:**

- (1) An applicant for a renewal certificate must:
- (a) Submit a completed application prescribed by the Authority along with the required fee specified in OAR 333-275-0180:
- (b) Consent to a criminal records check in accordance with ORS 181A.195, ORS 181A.200 and OAR chapter 125, division 7 or a fingerprint-based check if determined necessary by the Authority; and
- (c) Provide documentation of current national certification; or
- (d) Provide proof of employment and continuing education as follows:
- (A) Required work hours prorated by certification date and expiration:
- (i) 19-24 months = 1,000 hours;
- (ii) 13-18 months = 750 hours;
- (iii) 7-12 months = 500 hours;
- (iv) 1-6 months = 250 hours.
- (B) Required continuing education hours prorated by certification date and expiration:
- (i) 19-24 months = 1,000 hours;
- (ii) 13-18 months = 750 hours:
- (iii) 7-12 months = 500 hours;
- (iv) 1-6 months = 250 hours.
- (2) Application for renewal must be postmarked before midnight on May 31 of the renewal year.
- (3) A hemodialysis technician's certificate shall automatically lapse if the CHDT fails to submit a complete application, required fee, and documentation in section (1) of this rule by the appropriate renewal date and an individual who fails to renew by this deadline is considered delinquent.
- (4)(a) The Authority may reinstate a certificate that is expired for less than 90 calendar days upon submission of the documents in section (1) of this rule including the delinquent fee.
- (b) A CHDT who submits an application for renewal more than 90 calendar days after expiration but within 12 months of expiration must:
- (A) Comply with subsections (1)(a) and (1)(b) of this rule and submit the delinquent fee; and
- (B) Complete an abbreviated hemodialysis technician training program and provide evidence of completion to the Authority; or
- (C) Provide proof of current licensure or certification in another state or provide evidence of current national certification.
- (c) A CHDT who submits an application for renewal 12 months or more after expiration must submit an initial application for certification pursuant to OAR 333-275-0030.
- (5) If a CHDT has been on active military duty for more than six months of a certification renewal period which prevented the CHDT from accessing continuing education or obtaining employment hours, the Authority may approve the certificate renewal.
- (a) Documentation of active military duty status must be provided to the Authority prior to the Authority approving the certificate renewal.

- (b) The CHDT shall have 90 calendar days to complete any remaining continuing education hours.
- (c) If the CHDT does not complete the requirements in subsection (5)(b) of this rule within 90 calendar days, the Authority may revoke the certificate in accordance with OAR 333-275-0150.
- (6) The continuing education specified in paragraph (1)(d)(B) of this rule must be relevant to dialysis care and the Authority shall determine the appropriateness of the continuing education. For purposes of continuing education requirements, hour for hour credit shall be granted for:
- (a) Attending training seminars, educational conferences, and continuing education classes within the CHDT's scope of practice;
- (b) Attending a live webinar, or interactive online course relevant to dialysis care. For purposes of this rule, a webinar or interactive online course must have the ability to give, receive, and discuss information in real time; or
- (c) Online continuing education that provides a certificate of completion and is approved by a national certifying organization specified in OAR 333-275-0020.
- (7) It is the responsibility of the CHDT to ensure the continuing education hours obtained meet the requirements in subsections (6)(a) through (c) of this rule.
- (8) A CHDT is responsible for retaining verifiable and accurate records, and submitting documentation at time of renewal, that show:
- (a) Successful completion of continuing education hours; and
- (b) The number of hours worked as a CHDT which must be verified by the owner, administrator, or supervising manager of a dialysis facility or center.
- (c) Pay stubs that reflect the number of hours worked during the renewal time period may be submitted in lieu of the documentation required under subsection (8)(b) of this rule.
- (9) Acceptable records that show proof of successful completion of continuing education include, but are not limited to:
- (a) Course roster;
- (b) Certificate of course completion; or
- (c) Computer generated printout history of the CHDT's continuing education record. The agency responsible for the printout must verify the accuracy of the record by memo or signature.
- (10) The documents specified in section (9) of this rule must include the following information:
- (a) The full name of the CHDT attending the course or for which the computer-generated history applies;
- (b) The name of the institution hosting or conducting the course;
- (c) The course topic;
- (d) The date(s) of the course(s); and
- (e) The length of each course.

NOTE: Documents referred to in this rule are available at: healthoregon.org/hflc

STATUTORY/OTHER AUTHORITY: ORS 688.650, 688.665

STATUTES/OTHER IMPLEMENTED: ORS 688.640, 688.650

REPEAL: 333-275-0070

RULE TITLE: Requirements for Renewal of Certification

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Repeal 333-275-0070 – Rule text for renewing certification, and the employment and continuing education requirements necessary were moved to OAR 333-275-0060.

#### **RULE TEXT:**

- (1) A complete application form must be submitted for recertification.
- (2) Employment Requirements for Renewal of Certification:
- (a) At the time of certification renewal, the applicant must be prepared to provide evidence of a minimum of 1,000 hours worked as a CHDT during the twenty-four (24) month period immediately preceding certification renewal;
- (b) An applicant who is unable to provide evidence of the minimum 1,000 hours worked as a CHDT during the twenty-four month period immediately preceding certification renewal or the prorated required hours worked as a CHDT according to the chart under section (4) of this rule, shall satisfy all of the requirements of a new applicant to obtain certification:
- (c) Applicable hours worked as a CHDT are not limited to hours spent providing direct patient care but may include a variety of other tasks commensurate with the individual's abilities and job description.
- (3) Continuing Education Requirements for Renewal of Certification:
- (a) At the time of certification renewal, the applicant must be prepared to provide evidence of a minimum of twenty (20) contact hours of Division-approved continuing education accrued within the twenty-four (24) months immediately preceding renewal. The Oregon Public Health Division shall determine the appropriateness of all continuing education programs. For those CHDTs completing the training program, the training program hours may be applied towards the continuing education requirement as outlined in OAR 333-275-0110;
- (b) An applicant who is unable to provide evidence of the minimum 20 hours of Division-approved continuing education during the twenty-four month period immediately preceding certification renewal, or the prorated required hours of Division-approved continuing education hours according to the chart under section (4) of this rule, shall satisfy all of the requirements of a new applicant to obtain certification.
- (4) Prorated Requirements Based on Testing Schedule: The following table shall be applied to prorate the required number of hours worked as a CHDT and the required number of continuing education contact hours for those CHDTs receiving a certification less than twenty-four (24) months prior to the June 30 renewal date as per OAR 333-275-0050. See OAR 333-275-0180 Fees for the proration of the certification fee. [Table not included. See ED. NOTE.] [ED. NOTE: Tables referenced are available from the agency.]

STATUTORY/OTHER AUTHORITY: ORS 688.625 - 688.665

STATUTES/OTHER IMPLEMENTED: ORS 688.645 & 688.650(3), (4)

RULE TITLE: Hemodialysis Technician Provisional Certificate

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Amend 333-275-0080 – Removes dates that are no longer relevant. Clarifies requirements for obtaining provisional certification. Specifies document requirements and that the Authority will review and approve the application in accordance with 333-275-0040. Specifies that a provisional certificate holder has 12 months to pass national certification exam. Clarifies that if a provisional certificate holder does not pass the national exam within one year, it must be reported to the Authority. Specifies that a provisional certificate holder whose certificate was suspended for failure to obtain certification within one year must complete an abbreviated training program. Defines the term "educational institution."

## **RULE TEXT:**

- (1) A provisional certificate may be issued to a person who has successfully completed a hemodialysis technician education and training program offered by an educational institution or an education and training program that meets the requirements specified in OAR 333-275-0110, and who is waiting to take a national certification exam.
- (2) An applicant for a hemodialysis technician provisional certificate must provide documentation that the applicant meets the qualifications specified in OAR 333-275-0020 and submit a complete application in accordance with OAR 333-275-0030.
- (3) The Authority will review and approve an application for a provisional certificate in accordance with OAR 333-275-0040.
- (4) A provisional certificate is valid for six months and may be renewed one time.
- (5) A CHDT with a provisional certificate must:
- (a) Apply for renewal of the certificate in accordance with OAR 333-275-0085; or
- (b) Apply for full certification in accordance with OAR 333-275-0030, if eligible.
- (6) A CHDT who holds a provisional certificate has a maximum of 12 months from the date the original certificate was issued to pass a national certification exam specified in OAR 333-275-0020.
- (a) A CHDT must report to the Authority if they have failed a national certification exam within the time period specified.
- (b) The Authority shall revoke a provisional certificate pursuant to ORS 688.650 and ORS chapter 183 when a CHDT fails to pass a national certification exam within the time period specified in this rule.
- (c) A CHDT whose provisional certificate has been revoked for failure to pass a national certification exam:
- (A) May work as a trainee hemodialysis technician in accordance with OAR 333-275-0100 until the next scheduled examination: and
- (B) Must complete an abbreviated hemodialysis technician training program.
- (7) As used in this rule, "educational institution" means a community college, college or university, or a licensed vocational school that is authorized or licensed by the Higher Education Coordinating Commission.

STATUTORY/OTHER AUTHORITY: ORS 688.640, 688.650, 688.665

STATUTES/OTHER IMPLEMENTED: ORS 688.640, 688.650

ADOPT: 333-275-0085

RULE TITLE: Hemodialysis Technician Provisional Certificate Renewal

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Adopt 333-275-0085 – Clarifies requirement for renewing a provisional certificate. Modifies requirements for reinstatement of provisional certification if application for renewal is submitted after expiration.

#### **RULE TEXT:**

- (1) An applicant to renew a provisional certificate must submit a complete provisional certificate renewal application and fee specified in OAR 333-275-0180 at least three calendar weeks prior to the expiration date of the original provisional certificate.
- (2) A CHDT provisional certificate shall automatically lapse if the CHDT fails to timely comply with section (1) of this rule and an individual who fails to renew by this deadline is considered delinquent.
- (3) The Authority may reinstate a provisional certificate that is expired for 90 calendar days or less upon submission of a complete provisional certificate renewal application and payment of the past unpaid renewal fee and delinquent fee.
- (4) An applicant who submits a complete provisional certificate renewal application after 90 calendars from the date of expiration is not eligible for renewal.

STATUTORY/OTHER AUTHORITY: ORS 688.650, 688.665

STATUTES/OTHER IMPLEMENTED: ORS 688.655, 688.665

ADOPT: 333-275-0087

RULE TITLE: Temporary Authorization to Practice for a Military Spouse

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Adopt 333-275-0087 – Adds a provision for the Authority to issue a temporary license to a military spouse and requirements for issuing.

#### **RULE TEXT:**

- (1) As used in this rule, "military spouse" is the spouse of a member of the Armed Forces of the United States who is stationed in Oregon.
- (2) Pursuant to ORS 670.400, a temporary certificate to practice as a hemodialysis technician may be issued to a military spouse who:
- (a) Consents to a criminal record's check in accordance with OAR 333-275-0030(1);
- (b) Provides proof of current licensure or certification as a hemodialysis technician in another state and be in good standing with that state's licensing or certifying body; or
- (c) Provides proof of current national certification.
- (3) A temporary certificate issued under this rule is valid until the earliest of the following:
- (a) Two years after the date of issuance;
- (b) The date the term of service of the military service member ends in Oregon;
- (c) The date the license or certification from the authorizing state expires; or
- (d) The date the Authority revokes or suspends the temporary certificate, or the certificate is surrendered.
- (4) A temporary certificate issued under this rule may not be renewed. A person may not continue to provide services as a CHDT unless the person is issued a full certification in accordance with OAR 333-275-0030.

STATUTORY/OTHER AUTHORITY: ORS 670.400, 688.640, 688.650

STATUTES/OTHER IMPLEMENTED: ORS 670.400, 688.640, 688.650

RULE TITLE: Scope of Practice of Hemodialysis Technician

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Amend 333-275-0090 – Minor corrections made for readability. Clarifies that patient data collected must be communicated to the registered nurse. Removes reference to a licensed practical nurse being able to direct the administration of oxygen by a hemodialysis technician. Clarifies that altering any treatment prescribed by a physician is prohibited.

## **RULE TEXT:**

- (1) A CHDT who holds a full or provisional certificate by the Authority may, under the direct supervision of a physician, nurse practitioner, or a registered nurse:
- (a) Perform venipunctures for dialysis access;
- (b) Collect and communicate patient data, such as pre-weight, complaints, and vital signs, to the registered nurse;
- (c) Obtain lidocaine from a stock source and inject intradermal lidocaine in preparation for dialysis access;
- (d) Obtain heparin from a stock source and administer a heparin bolus;
- (e) Administer a bolus of normal saline;
- (f) Connect a dialysis access to normal saline or heparinized normal saline;
- (g) Initiate or discontinue dialysis treatment via central lines; and
- (h) Administer oxygen on the basis of standing orders, dialysis facility or center protocol, or at the direction of a physician, nurse practitioner, or registered nurse.
- (2) A CHDT who has been certified by the Authority is prohibited from:
- (a) Administering medications by oral, intramuscular, intravenous, or subcutaneous routes except as specified in section (1) of this rule;
- (b) Performing arterial punctures outside of dialysis access;
- (c) Determining the frequency or duration of dialysis treatments;
- (d) Administering blood or blood products;
- (e) Accepting verbal or telephone orders from a physician or a physician's representative or altering any treatment prescribed by a physician; or
- (f) Performing hemodialysis on a hospitalized intensive care unit patient.
- (3) A dialysis facility or center may elect to further limit the scope of practice of a CHDT working in the dialysis facility or center. If a dialysis facility or center limits the scope of practice of a CHDT, then the CHDT shall comply with that dialysis facility or center's limited scope.

STATUTORY/OTHER AUTHORITY: ORS 688.635, 688.665

STATUTES/OTHER IMPLEMENTED: ORS 688.635, 688.665

RULE TITLE: Trainee Hemodialysis Technician

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Amend 333-275-0100 – Minor corrections made for readability. Adds definition for 'directly supervised.'

#### **RULE TEXT:**

- (1) A trainee hemodialysis technician may perform the duties of a CHDT only when it is an integral part of the training program, and the trainee hemodialysis technician is working under the direct supervision of a nurse educator or hemodialysis technician educator meeting the requirements in OAR 333-275-0110.
- (2) The duties of a trainee hemodialysis technician are limited by the scope of practice of a CHDT as defined under OAR 333-275-0090 and the job description of a hemodialysis technician of the dialysis facility or center in which the clinical training occurs. The job description and duties of a trainee hemodialysis must not exceed the scope of practice of a CHDT.
- (3) A trainee hemodialysis technician must be selected without discrimination as to age, race, ethnicity, color, religion, gender identification, sexual preference, national origin, or marital status.
- (4) A person working as a trainee hemodialysis technician because the person failed to pass the certification exam as provided in OAR 333-275-0080 is subject to all of the requirements of a trainee and must be directly supervised by a nurse educator or hemodialysis technician educator.
- (5) "Directly supervised" means supervision of dialysis treatment in the same room in which treatment is being performed and immediately available to furnish assistance and direction.

STATUTORY/OTHER AUTHORITY: ORS 688.635, 688.640, 688.665

STATUTES/OTHER IMPLEMENTED: ORS 688.640, 688.665

RULE TITLE: Hemodialysis Technician Training Programs

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Amend 333-275-0110 – Clarifies training program requirements and specifies that a dialysis facility must have its abbreviated and extended training programs approved by the Authority. Separates training program requirements into separate rules for readability. Removes the clinical preceptor as a person who may conduct training programs. Clarifies documentation requirements.

## **RULE TEXT:**

- (1) A dialysis facility or center may provide an abbreviated training program or extended training program if the program complies with the requirements specified in this rule and by March 1, 2024 is approved by the Authority.
- (a) An abbreviated training program is a program designed to train a CHDT with previous experience or assess the clinical competencies of an experienced CHDT;
- (b) An extended training program is a program designed for the minimally experienced or inexperienced trainee hemodialysis technician to gain the skills necessary to become a CHDT.
- (2) An abbreviated training program and extended training program must include the core curriculum criteria identified in Appendix A, "Approved Core Curriculum for Abbreviated and Extended Training Programs."
- (3) An abbreviated training program must include at a minimum, 16 hours of theory or supervised clinical learning experiences related to hemodialysis, as it is performed in a hemodialysis facility or center.
- (4) An extended training program must include at a minimum:
- (a) 80 hours of classroom study; and
- (b) 160 hours of supervised clinical experience.
- (5) An abbreviated training program or extended training program shall be conducted by a nurse educator or hemodialysis technician educator meeting the following requirements:
- (a) A nurse educator shall:
- (A) Be a registered nurse whose license is unencumbered;
- (B) Have at least two years of nursing practice experience including at least one year of nursing experience in dialysis. Previous nursing experience in critical care and nursing education is desirable; and
- (C) Have a minimum of nine hours of continuing education annually in nephrology or hold a current national certification.
- (b) A hemodialysis technician educator must:
- (A) Work under the supervision of a nurse educator;
- (B) Possess a current national certification;
- (C) Have at least two years' experience in hemodialysis services; and
- (D) Hold a current Oregon CHDT certificate.
- (6) A CHDT under direct supervision of a nurse educator may be assigned to assist with the clinical experience or orientation of a hemodialysis technician trainee.
- (7) A dialysis facility or center with an abbreviated training program or extended training program must document the requirements specified in section (5) of this rule for each educator.
- (8) An abbreviated or extended training program must meet the following minimum standards:
- (a) Administration and Organization: The hemodialysis technician training program shall employ a nurse educator to administer the training program who shall be responsible for the development, implementation, and evaluation of the training program, arrangements for and supervision of trainee hemodialysis technicians' clinical experiences, and communications with the Authority.
- (b) Objectives: There shall be written objectives for the training program, which serve as the basis for planning, implementing, and evaluating the program. The training program faculty shall develop the objectives. The training program objectives shall describe the knowledge and skills expected of a CHDT, and shall be consistent with the

authorized functions of a CHDT and the required core curriculum criteria identified in Appendix A.

- (c) Evaluation: The training program's nurse educator shall develop a written systematic plan for curriculum and program evaluation.
- (d) Training Program Record Retention Requirements:
- (A) The dialysis facility or center shall maintain an employee orientation checklist and any appropriate certification documentation in each employee's personnel file as part of the permanent file.
- (B) The nurse educator shall submit the objectives of each training program, the names and qualifications of the nurse educator(s) and hemodialysis technician educator(s), the program curriculum, the program schedule, and the program evaluation plan to the Authority upon request.
- (e) Curriculum:
- (A) The curriculum shall extend over a period of time sufficient to provide essential, sequenced learning experiences, which enable the trainee hemodialysis technician to develop competence and shall show evidence of an organized pattern of instruction consistent with principles of learning and sound educational practices.
- (B) Supervised clinical experience shall provide opportunities for the application of theory and for the achievement of stated objectives in a patient care setting and shall include clinical learning experiences to develop the skills required by technicians to provide safe patient care. The nurse educator must be physically present and accessible to the trainee hemodialysis technician when the trainee is in the patient care area.
- (9) A dialysis facility or center licensed on or before July 1, 2023 that offers an abbreviated or extended training program must submit the curriculum standards identified in section (8) of this rule for Authority review no later than January 1, 2024.
- (a) The Authority will review the material submitted and provide notification of approval or preliminary approval.
- (b) Approval is based only on the material submitted for review and which the Authority approves. Any substantive changes to the material must be resubmitted to the Authority for review and approval.

NOTE: Appendices referenced in this rule are available at: healthoregon.org/hflc.

STATUTORY/OTHER AUTHORITY: ORS 688.640, 688.650, 688.665

STATUTES/OTHER IMPLEMENTED: ORS 688.640, 688.650

# OAR 333-275-0110 Appendix A APPROVED CORE CURRICULUM FOR ABBREVIATED AND

**EXTENDED TRAINING PROGRAMS** 

| 1. Procedural / Administrative                  |                              |                           |
|---|------------------------------|---------------------------|
| Administrative                                  | Abbreviated Training Program | Extended Training Program |
| Patient care philosophy                         |                              | X                         |
| New patient admission                           |                              | X                         |
| Patient rights and responsibilities             | X                            | X                         |
| Advance directives                              |                              | X                         |
| Patient orientation                             |                              | X                         |
| Care plans                                      |                              | X                         |
| Consent for dialysis & reuse                    |                              | X                         |
| Patient grievance                               | X                            | X                         |
| Staff grievance                                 | X                            | X                         |
| Abuse reporting                                 | X                            | X                         |
| Confidentiality                                 | X                            | X                         |
| Job description                                 | X                            | X                         |
| Understanding of primary nurse responsibilities |                              | X                         |
| Workplace violence                              |                              | X                         |
| Ordering supplies                               |                              | X                         |
| Incident reports / adverse patient outcomes     | X                            | X                         |
| Employee health visit – lab work, Hepatitis B   |                              | X                         |
| Emergency equipment checklists                  |                              | X                         |
| Safety committee                                |                              | X                         |
| OSHA requirements for dialysis                  |                              | X                         |
| Long term care plan & care plan review          |                              | X                         |

| Medication and common medications for patients at home   |   | X |
|--|---|---|
| Visiting hours and visitor control   |   | X |
| Bacteriology and infectious disease  |   | X |
| Prevention & control of hepatitis and contagious disease   |   | X |
| Universal Precautions  | X | X |
| Handwashing  | X | X |
| Wears appropriate personal protective equipment  | X |   |
| Isolation room preparation   | X | X |
| Isolation technique  | X | X |
| HIV & hepatitis policies / procedures  |   | X |
| Unit safety inservices:<br>MSDS, fire, evacuation,<br>disaster, eyewash, oxygen<br>shutoff, and phones       |   | X |
| Emergency evacuation kit   | X | X |
| Emergency procedure: oxygen administration, crash cart, use of portable suction, and obtaining monitor strip | X | X |
| Power failure  | X | X |
| Communication skills – team building   |   | X |

| 2. Water Treatment | With Return Demonstrations |                   |
|--------------------|----------------------------|-------------------|
|                    | Abbreviated Training       | Extended Training |
|                    | Program                    | Program           |
| Filter System      |                            | X                 |

| RO water                      |   | X |
|-------------------------------|---|---|
| Testing / QA                  |   | X |
| Chlorine I chloramine testing |   | X |
| Complications                 |   | X |
| Role in monitoring water      | X | X |
| quality                       |   |   |
| Role of AAMI / AAMI           |   | X |
| standards                     |   |   |
| Disinfect central RO          |   | X |
| Rinse out central RO          |   | X |

| 3. Dialysate Preparation                       | As defined by facility duties. With return Demonstrations |                           |
|--|---|---------------------------|
|  | Abbreviated Training Program                              | Extended Training Program |
| Storage system                                 |   | X                         |
| Contents of acid concentration                 | X   | X                         |
| Changing potassium concentration               | X   | X                         |
| Mixing bicarbonate                             | X   | X                         |
| Filling the tanks                              |   | X                         |
| Quality control monitoring                     |   | X                         |
| Documentation                                  |   | X                         |
| Complications                                  | X   | X                         |
| Bleaching and disinfection of bicarbonate loop | X   | X                         |
| Flushing out bicarbonate loop                  | X   | X                         |
| Rinsing out bicarbonate                        | X   | X                         |
| Using Bicarts (Cabe machine only)              | X   | X                         |
| Mixing acetate                                 | X   | X                         |
| Pumping concentrate                            | X   | X                         |

| 4. Machine checks and setup   | With Return Demonstrations   |                           |
|---|------------------------------|---------------------------|
|   | Abbreviated Training Program | Extended Training Program |
| Extracorporeal blood circuit  | X                            | X                         |
| Mode description  |                              |                           |
| Screens   | X                            | X                         |
| Locate equipment and supplies   |                              | X                         |
| Prescription parameters & screens (time, hourly heparin, UF parameters, sodium setting, BP alarm limit) | X                            | X                         |
| Verify machine alarm check  | X                            | X                         |
| Reporting mechanism for machine problems  | X                            | X                         |
| Verify dialysate I bicarbonate and connect  | X                            | Х                         |
| PH, conductivity, temperature monitors and checks   | X                            | X                         |
| Bypass mode   | X                            | X                         |
| Blood circuit monitors  | X                            | X                         |
| UF controller   |                              | X                         |
| Setup extracorporeal tubing using aseptic technique   | Х                            | X                         |
| Residual disinfectant testing   | X                            | X                         |
| Verify dialyzer and place in holder (ID dialyzer verification & initials)                               | X                            | X                         |
| Prime system: new dialyzer, rinse reprocessed dialyzer  | Х                            | X                         |
| Complete machine checks   | Χ                            | X                         |
| Accessory equipment: Na+ modeling, auto BP  | Х                            | X                         |
| Document  | X                            | X                         |

| 5. Reuse Procedures      | For those units practicing reuse only |                           |
|--------------------------|---------------------------------------|---------------------------|
|                          | Abbreviated Training Program          | Extended Training Program |
| Dialyzer preparation     | X                                     | X                         |
| procedure                |                                       |                           |
| Calibrating equipment    | X                                     | X                         |
| Preprocessing dialyzers  | X                                     | X                         |
| Reprocessing dialyzers   | X                                     | X                         |
| Disinfecting reuse       | X                                     | X                         |
| equipment                |                                       |                           |
| Disinfectant indicator I | X                                     | X                         |
| residual test            |                                       |                           |
| Documentation dialyzer   | X                                     | X                         |
| reuse log                |                                       |                           |

| 6. Pre-dialysis observation   |                              |                           |
|-------------------------------|------------------------------|---------------------------|
|                               | Abbreviated Training Program | Extended Training Program |
| Inspection for volume status  | X                            | X                         |
| (Hypovolemia,                 |                              |                           |
| hypervolemia, envolemia)      |                              |                           |
| General patient condition     | X                            | X                         |
| Calculating target loss       | X                            |                           |
| Dry weight criteria           | X                            | X                         |
| Automatic BP & monitoring     | X                            | X                         |
| BP                            |                              |                           |
| Physical observation          | X                            | X                         |
| Weighing                      | X                            | X                         |
| Vital signs                   | X                            | X                         |
| Symptoms of distress          | X                            | X                         |
| Access evaluation (bruit &    | X                            | X                         |
| thrill, visual inspection, ID |                              |                           |
| arterial vs venous sides, and |                              |                           |
| aseptic preparation)          |                              |                           |
| Laboratory orders             | X                            | X                         |
| Medication orders             | Χ                            | X                         |
| Reporting mechanism           | X                            | Х                         |

| Complete documentation X | X |
|--------------------------|---|
|--------------------------|---|

| 7. Initiation of treatment  |                              |                           |
|---|------------------------------|---------------------------|
|   | Abbreviated Training Program | Extended Training Program |
| Implements correct dialysis prescription  | X                            | X                         |
| Determines correct ultrafiltration goal   | X                            | X                         |
| Determining blood flow rate   | X                            | X                         |
| Lidocaine administration & complications  | X                            | X                         |
| Prepares access   | X                            | X                         |
| Double needles  | X                            | X                         |
| Double lumen catheters  | X                            | X                         |
| Inserts fistula needles (Cannulation of fistula, cannulation of synthetic graft)                                | X                            | X                         |
| Pre-dialysis lab draw (Lab draw: Hematocrit, blood glucose, monthly lab, special lab, lab processing procedure) | X                            | X                         |
| Connects correctly to subclavian catheter   | X                            | X                         |
| Properly implements and maintains heparinization  | X                            | X                         |
| Dumping blood circuit saline, if allowed  | X                            | X                         |
| Connection of extracorporeal circuit (Connecting needle lines and blood lines)                                  | X                            | X                         |
| Blood pump start-up   | X                            | X                         |
| Setting correct prescription parameters (prescribed BFR)  | X                            | X                         |

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| Dialyze mode                  | X | X |
|-------------------------------|---|---|
| Patient condition & comfort   | X | X |
| Manual recirculation test     | X | X |
| Set pre-determined OF goal    | X | X |
| Complete initiation checklist | X | X |
| Post-initiation BP, pulse     | X | X |
| Verification complete         |   | X |
| Documentation complete        | X | X |

| 8. Monitoring on dialysis  |                              |                           |
|--|------------------------------|---------------------------|
|  | Abbreviated Training Program | Extended Training Program |
| Patient tolerance  | X                            | X                         |
| Vital signs  | X                            | X                         |
| Correctly responds to  | X                            | X                         |
| machine alarms   |                              | V                         |
| Alarm codes  |                              | X                         |
| Documents observation and response to patient status   | X                            | X                         |
| Vital signs taken as indicated   | X                            | X                         |
| Machine parameters checked   | X                            | X                         |
| Machine adjustments  | X                            | X                         |
| Monitoring & troubleshooting alarm conditions (Low or high arterial pressure, low or high venous pressure, blood in dialysate, air in blood, maximum TMP, reverse TMP, power failure, low or high conductivity, low or high bicarb conductivity, and high temperature) | X                            | X                         |
| Heparinization initiated and monitored / (calculating the dose, loading dose,  | X                            | X                         |

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| maintenance dose,<br>complications, heparin<br>pump, tight heparin, heparin<br>free, pork vs. Beef heparin,<br>and PTT [clotting times]) |   |   |
|--|---|---|
| Appropriate report of change in status   | X | X |
| Administer normal saline appropriately   | X | X |
| Epogen history and application to ESRD patients  |   | X |
| Recirculating blood in blood lines   | X | X |
| Removing air from blood lines  | X | X |
| Documentation complete   | X | Χ |

| 9. Termination of   |                              |                           |
|---|------------------------------|---------------------------|
| Treatment   |                              |                           |
|   | Abbreviated Training Program | Extended Training Program |
| Check medication are given  – Calcijex given by RN                              | X                            | X                         |
| Post treatment lab work drawn   | X                            | X                         |
| Vital signs documented – <b>BP</b> (sitting & standing), pulse, and temperature | X                            |                           |
| Post treatment discharge vitals, weight, temperature                            | X                            | X                         |
| Machine parameters: liters processed, time dialyzed, time off, fluid removed    | X                            | X                         |
| Return blood safely   | X                            | X                         |
| Removal of access needles   | X                            | X                         |
| Holding & dressing access sites   | X                            | X                         |

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|                              | T |   |
|------------------------------|---|---|
| Needle site hemostasis       | X | X |
| Access care for discharge    | X | X |
| Discharge of patient         | X | X |
| Condition of dialyzer For    | X | X |
| those units practicing reuse |   |   |
| <u>only</u>                  |   |   |
| Patient's tolerance of       | X | X |
| treatment                    |   |   |
| Completion of                | X | X |
| documentation (Completion    |   |   |
| of treatment record)         |   |   |
| Appropriate disposal of      | X | X |
| dialyzer & blood lines       |   |   |
| Machine disinfection         | X | X |
| Residual disinfectant test   | X | X |
| Clean & disinfect machine &  | X | X |
| station (Cleaning chair)     |   |   |
| Cleaning exterior of         | X | X |
| machine                      |   |   |
| Preparation for next use     | X | X |
| Machine off                  | X | X |
| Disposition of linen         |   |   |
| End of day closing           | X | X |
| procedure                    |   |   |

| 10. Special procedures    |                              |                           |
|---------------------------|------------------------------|---------------------------|
|                           | Abbreviated Training Program | Extended Training Program |
| Recirculate blood         | X                            | X                         |
| Removing air from lines   | X                            | X                         |
| Blood leak                | X                            | X                         |
| Clotted dialyzer or blood | X                            | X                         |
| lines                     |                              |                           |
| Manual operation of blood | X                            | X                         |
| pump                      |                              |                           |
| Replacing a defective     |                              | X                         |
| machine during treatment  |                              |                           |

| Changing a dialyzer during dialysis |   | X |
|-------------------------------------|---|---|
| Troubleshooting machines            |   | X |
| for problems                        |   |   |
| Bathroom privileges during dialysis |   | X |
| Emergency transfer I patient        |   | X |
| personal effects                    |   |   |
| Arterial bloodline failure          | X | X |
| Venous bloodline failure            | X | X |
| Set-up hemodialysis                 | X | X |
| machine in critical care            |   |   |
| Intraoperative dialysis set-        |   | X |
| up                                  |   |   |
| Early discontinuation –             | X | X |
| routine, clamp & cut                |   |   |

| 11. Patient Complications   |                              |                           |
|-----------------------------|------------------------------|---------------------------|
| •                           | Abbreviated Training Program | Extended Training Program |
| Prompt RN or MD             | X                            | X                         |
| notification of observed    |                              |                           |
| patient complications       |                              |                           |
| Clotted access – procedure  |                              | X                         |
| for referral to surgeon     |                              |                           |
| Itching                     |                              | X                         |
| Headache                    |                              | X                         |
| Cramping                    | X                            | X                         |
| Restless legs               |                              | X                         |
| Seizures                    | X                            | X                         |
| Weakness                    |                              | X                         |
| Nausea & vomiting           |                              | X                         |
| Shortness of breath         |                              | X                         |
| Hypotension – administering | X                            | X                         |
| normal saline,              |                              |                           |
| Trendelenburg position,     |                              |                           |
| minimum UFR, and re-        |                              |                           |
| evaluation of BP            |                              |                           |

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| Γ                             | T  |   |
|-------------------------------|----|---|
| Hypertension                  |    | X |
| Angina                        |    | X |
| Arrhythmias                   |    | X |
| Allergic reaction             | X  | X |
| Cardiac / respiratory arrest  | X  | X |
| Anaphylactic reaction         | X  | X |
| Pyrogen reaction – vital      | X  | X |
| signs & patient support,      |    |   |
| blood cultures, early         |    |   |
| discontinuation of treatment, |    |   |
| and dialysate cultures        |    |   |
| Dialyzer reaction – first use | X  | X |
| syndrome                      |    |   |
| Air foam embolus              | X  | X |
| Hemolysis of blood in circuit | X  | X |
| Renalin reaction / infusion   | X  | X |
| Dialysis disequilibrium       |    | X |
| syndrome                      |    |   |
| Fistula' needle problems /    | X  | X |
| complications during dialysis |    |   |
| Exsanguination                | X  | X |
| Hypovolemic shock             | X  | X |
| Identify risk factors in      |    | X |
| dialysis and follows CDC      |    |   |
| guidelines for infection      |    |   |
| control                       |    |   |
|                               | I. | 1 |

| 12. Access Inspection and Care          |                              |                           |
|---|------------------------------|---------------------------|
|   | Abbreviated Training Program | Extended Training Program |
| AV and graft access inspection          | X                            | X                         |
| Subclavian catheter inspection and care | X                            | X                         |
| Femoral catheters                       | X                            | X                         |
| Insertion of needle                     | X                            | X                         |

| Responding to needle infiltration                        | X | X |
|--|---|---|
| Recognizing and reporting aneurysms                      | X | X |
| Utilize appropriate technique for recirculation study    |   | X |
| Responds appropriately to clotted access                 | X | X |
| Appropriate response to needle problems intradialyticaly | X | X |

| 13. Laboratory specimen processing |                              |                           |
|------------------------------------|------------------------------|---------------------------|
|                                    | Abbreviated Training Program | Extended Training Program |
| Correctly relates lab tubes        |                              | X                         |
| to lab test                        |                              |                           |
| Handles, spins, and                |                              | X                         |
| packages specimens to be           |                              |                           |
| sent                               |                              |                           |
| Performs hernatocrit               |                              |                           |
| Performs blood glucose test        | X                            | X                         |
| Blood and other cultures           |                              | X                         |
| Performs ACT's correctly           |                              | X                         |
| Recognizes role of CLIA            |                              | X                         |
| regulations                        |                              |                           |
| HIV antibody testing               |                              | X                         |
| Type and crossmatch for            |                              | X                         |
| transfusion                        |                              |                           |
| Venipuncture                       |                              | X                         |
| Drawing blood samples from         | X                            | X                         |
| fistula needles                    |                              |                           |
| Obtaining blood samples            | Χ                            | X                         |
| from subclavian catheter           |                              |                           |
| Frozen specimens                   |                              |                           |

| 14. Dietary intervention |  |
|--------------------------|--|

|                              | Abbreviated Training Program | Extended Training Program |
|------------------------------|------------------------------|---------------------------|
| Identify role of dietitian   |                              | X                         |
| Influence of fluid and       | X                            | X                         |
| electrolyte balance on       |                              |                           |
| treatment                    |                              |                           |
| Influence of protein balance | X                            | X                         |
| in patient outcomes          |                              |                           |
| Role in achieving accurate   | X                            | X                         |
| kinetic modeling results     |                              |                           |
| Kinetic modeling protocol    | X                            | X                         |
| The renal diet               | X                            | X                         |

| 15. Social services intervention                      |                              |                           |
|---|------------------------------|---------------------------|
|   | Abbreviated Training Program | Extended Training Program |
| Role of social services                               |                              | X                         |
| identify support services available                   |                              | X                         |
| Identify psycho-social issues common to ESRD patients |                              | X                         |
| Transportation issues                                 |                              | X                         |
| Define advance directives                             |                              | X                         |
| Discuss boundaries in your role in ESRD environment   |                              | X                         |
| Grievance procedure                                   |                              | X                         |

| 16. Medical records                 |                              |                           |
|-------------------------------------|------------------------------|---------------------------|
|                                     | Abbreviated Training Program | Extended Training Program |
| Treatment flow form – monitor sheet |                              | X                         |
| Standing orders                     |                              | X                         |
| Doctor orders / verification        |                              | X                         |
| Patient assessment form             |                              | X                         |
| Progress notes                      |                              | X                         |

| Transfusion records        |   | X |
|----------------------------|---|---|
| Accurate documentation     | X | X |
| Identifies appropriate     | X | X |
| information to document    |   |   |
| Enters information into    |   | X |
| computer system accurately |   |   |
| Appropriate signatures     |   | X |
| Makes corrections          |   | X |
| according to policy        |   |   |
| Handles records            |   | X |
| confidentially             |   |   |
| Handwriting is legible     |   | X |
| Teaching sheet             |   | X |

| 17. Home services                                      | If offered by facility.      |                           |
|--|------------------------------|---------------------------|
|  | Abbreviated Training Program | Extended Training Program |
| Home care resources for                                |                              | X                         |
| both in facility and home service patients             |                              |                           |
| Home patient calls after hours                         |                              | X                         |
| Home hemodialysis patient back-up                      |                              | X                         |
| Access care for discharge                              | X                            | X                         |
| Discharge of patient                                   | X                            | X                         |
| Condition of dialyzer For those units practicing reuse | X                            | X                         |
| only   |                              |                           |
| Patient's tolerance of treatment                       | X                            | X                         |
| Completion of  | X                            | X                         |
| documentation (Completion of treatment record)         |                              |                           |
| Appropriate disposal of                                | X                            | X                         |
| dialyzer & blood lines                                 |                              |                           |
| Machine disinfection                                   | X                            | X                         |
| Residual disinfectant test                             | X                            | X                         |

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| Clean & disinfect machine & station (Cleaning chair) | X | X |
|--|---|---|
| Cleaning exterior of machine                         | X | X |
| Preparation for next use                             | X | X |
| Machine off  | X | X |
| Disposition of linen                                 |   |   |
| End of day closing                                   | X | X |
| procedure  |   |   |

| 10. Special Procedures  |                              |                           |
|-------------------------|------------------------------|---------------------------|
|                         | Abbreviated Training Program | Extended Training Program |
| Recirculate blood       | X                            | X                         |
| Removing air from lines | X                            | X                         |

**RULE TITLE: Investigation** 

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Amend 333-275-0120 – Clarifies when the Authority may investigate an applicant and what the Authority may do during an investigation.

#### **RULE TEXT:**

- (1) The Authority may conduct an investigation of an applicant or a CHDT if:
- (a) The Authority receives a report in accordance with ORS 688.655 or a complaint concerning an applicant or an CHDT;
- (b) The Authority suspects that the applicant or CHDT has failed to meet the requirements necessary for certificate renewal:
- (c) Personal or criminal history questions arise during a review of an application that raises questions about the applicant or a CHDTs ability to safely perform the duties of a hemodialysis technician;
- (d) A reportable action is received pursuant to OAR 333-275-0140;
- (e) The Authority receives any information that appears to show that an applicant or CHDT is or may be:
- (A) Medically incompetent;
- (B) Guilty of unprofessional or dishonorable conduct in accordance with OAR 333-275-0130;
- (C) Mentally or physically unable to safely function as a CHDT; or
- (D) In violation of ORS chapter 688.625 through 688.665 or these rules.
- (2) During an investigation the Authority may:
- (a) Request additional information from the applicant or CHDT; or
- (b) Conduct an interview by electronic and telecommunication technologies such as video communication, teleconference, landline and wireless communications or in-person.
- (3) If during its investigation the Authority finds evidence that indicates that the continued practice of the CHDT constitutes an immediate danger to the public, the Authority may temporarily suspend the CHDT's certificate in accordance with ORS chapter 183.

STATUTORY/OTHER AUTHORITY: ORS 688.665

STATUTES/OTHER IMPLEMENTED: ORS 670.280, 688.655

RULE TITLE: Unprofessional or Dishonorable Conduct Contrary to Recognized Standards for a Hemodialysis Technician

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Amend 333-275-0130 – Updates terminology and includes reference to unprofessional conduct. Specifies that soliciting money, gifts or other items from a patient is considered unprofessional or dishonorable conduct. Adds failing to cooperate with an Authority investigation and failing to comply with the Authority's request for an assessment as unprofessional or dishonorable conduct. Additional minor corrections made for readability.

## **RULE TEXT:**

A CHDT whose conduct fails to conform to the standards for a CHDT, or that may adversely affect the health, safety, and welfare of the public, may be found to have committed unprofessional or dishonorable conduct for a CHDT. Such conduct shall include, but is not limited to, the following:

- (1) Conduct related to the patient's safety and integrity:
- (a) Failing to report through proper channels facts known regarding the incompetent, unethical, unsafe, or illegal practice of any health care provider;
- (b) Failing to respect the dignity and rights of patients, regardless of social or economic status, age, race, ethnicity, color, religion, gender identification, sexual preference, national origin, marital status, nature of health problems or disability;
- (c) Engaging in sexual contact with a patient; or
- (d) Soliciting money, gifts or other items or services from a patient.
- (2) Conduct related to other federal or state regulation violations:
- (a) Abusing a patient. The definition of abuse includes, but is not limited to, intentionally causing physical or mental harm or discomfort, striking a patient, intimidating, threatening, or harassing a patient;
- (b) Neglecting a patient. The definition of neglect includes, but is not limited to, carelessly allowing a patient to be in physical discomfort or be injured;
- (c) Failing to report actual or suspected incidents of patient abuse through the proper channels in the workplace and to appropriate state agencies;
- (d) Aiding, abetting, or assisting an individual to violate or circumvent any law, rule or regulation intended to guide the conduct of a CHDT or other health care provider.
- (3) Conduct related to communication:
- (a) Falsifying a patient or agency record including, but not limited to, filling in another person's omissions, signing another person's name, recording care not given, or fabricating data or values;
- (b) Altering a patient or agency record that includes, but is not limited to, changing words, letters, or numbers from the original document to mislead the reader of the record; adding to the record after the original time or date without indicating a late entry;
- (c) Destroying a patient record or agency record; or
- (d) Directing another person to falsify, alter, or destroy a patient or agency record.
- (4) Conduct related to clinical practice including, but not limited to, performing acts beyond the authorized scope of practice.
- (5) Conduct related to impaired function:
- (a) Practicing as a CHDT when unable or unfit to perform procedures or make decisions due to physical impairment as evidenced by documented deterioration of functioning in the practice setting or by the assessment of a health care provider qualified to diagnose physical condition or status;
- (b) Practicing as a CHDT when unable or unfit to perform procedures or make decisions due to psychological or mental impairment as evidenced by documented deterioration of functioning in the practice setting or by the assessment of a health care provider qualified to diagnose mental condition or mental status;
- (c) Practicing as a CHDT when physical or mental ability to practice is impaired by use of drugs, alcohol, or mind-altering

## substances.

- (6) Conduct related to certification violations:
- (a) Allowing another person to use one's CHDT certificate for any purpose;
- (b) Resorting to fraud, misrepresentation, or deceit during the application process for a certificate, while taking the national certification exam, or while obtaining an initial certificate or renewal of a certificate;
- (c) Impersonating an applicant or acting as a proxy for an applicant in any national certification exam; or
- (d) Disclosing the contents of a national certification exam or soliciting, accepting or compiling information regarding the contents of the exam, before during or after its administration.
- (7) Failing to cooperate with the Authority in an investigation, including failure to comply with a request for information or documentation.

STATUTORY/OTHER AUTHORITY: ORS 688.665

STATUTES/OTHER IMPLEMENTED: ORS 688.655, 688.665

**RULE TITLE: Reporting Obligations** 

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Amend 333-275-0140 – Clarifies the reporting obligations of a dialysis facility, provider, or hemodialysis technician including arrests, charges, or convictions; disciplinary restrictions placed on a hemodialysis technician; any actions taken by a health professional regulatory board; any legal action filed against a hemodialysis technician alleging misconduct; or a change in physical or mental health which may affect a hemodialysis technician's job performance.

## **RULE TEXT:**

- (1) Any dialysis facility or center, any hemodialysis technician certified under ORS 688.625 through ORS 688.665, any physician, nurse practitioner, or any registered nurse shall, using a written or electronic form prescribed by the Authority, report to the Authority within 10 calendar days of receiving or becoming knowledgeable of any information that appears to show that a CHDT is or may be:
- (a) Medically incompetent;
- (b) Guilty of unprofessional or dishonorable conduct; or
- (c) Mentally or physically unable to safely function as a CHDT.
- (2) A CHDT shall report to the Authority the following:
- (a) Any arrest, charge or conviction;
- (b) A disciplinary restriction placed on the scope of practice of the CHDT by a dialysis facility or center;
- (c) Any action or sanction taken by a health professional regulatory board against the CHDT if the CDHT is licensed or certified in a health-related occupation;
- (d) A legal action being filed against the CHDT alleging misconduct or malpractice; or
- (e) A change in physical or mental health which may affect the CHDT's ability to perform the duties of a hemodialysis technician.
- (3) After receiving a report described in this rule, the Authority may conduct an investigation in accordance with OAR 333-275-0120.
- (4) A CHDT's failure to comply with the reporting requirements specified in section (1) or (2) of this rule may result in disciplinary action against the CHDT.
- (5) In accordance with ORS 688.655, a person who reports or provides information to the Authority under this section and who provides information in good faith shall not be subject to an action for civil damage as a result thereof.

STATUTORY/OTHER AUTHORITY: ORS 688.665

RULE TITLE: Grounds for Denying, Suspending or Revoking Certificate

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Amend 333-275-0150 – Minor corrections for readability and updates to terms. Specifies that failure to retain national certification is grounds for denying, suspending or revoking a certificate.

## **RULE TEXT:**

In the manner prescribed in ORS chapter 183 for a contested case hearing, the Authority may deny, suspend, or revoke the certificate of any CHDT for the following causes:

- (1) Failure to consent to a criminal records check;
- (2) The use of fraud or deception in receiving a certificate;
- (3) Use of any alcohol or drugs to an extent or in a manner sufficient to impair the ability of the certificate holder to conduct safely the duties of a CHDT or that could pose a risk to the public;
- (4) The presence of a mental health condition that demonstrably affects a CHDT's performance, as certified by two psychiatrists retained by the Authority;
- (5) Conviction of a criminal offense deemed by the Authority to be related to the fitness of the CHDT to practice hemodialysis;
- (6) Suspension or revocation of a hemodialysis technician certificate or license issued by another state;
- (7) Gross negligence or repeated negligence in rendering hemodialysis care; or
- (8) Engaged in unprofessional or dishonorable conduct as outlined in OAR 333-275-0130.

STATUTORY/OTHER AUTHORITY: ORS 688.665

RULE TITLE: Disciplinary Action and Civil Penalty

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Amend 333-275-0160 – Clarifies that actions taken by the Authority will be in accordance with ORS chapter 183. Removes extraneous information. Updates civil penalties that may be imposed.

#### **RULE TEXT:**

- (1) Upon completion of an investigation, the Authority may take one or more of the following actions:
- (a) Close the investigation and take no action;
- (b) Issue a letter of reprimand;
- (c) Place the CHDT on probation;
- (d) Suspend the CHDT's certificate;
- (e) Revoke or deny the CHDT's certificate;
- (f) Place limitations on the ability of the CHDT to practice hemodialysis in Oregon;
- (g) Assess the cost of disciplinary proceedings, not to exceed \$1,000, as a civil penalty or assess a civil penalty not to exceed \$1,000.
- (2) Any disciplinary action taken by the Authority will be done in accordance with ORS chapter 183.
- (3) A civil penalty not to exceed \$1,000 may be imposed as provided in ORS 183.745, in addition to disciplinary action against the CHDT's certificate. Disciplinary action against the CHDT certificate does not preclude imposing a civil penalty. Criminal conviction does not preclude imposition of a civil penalty for the same conduct.
- (4) Civil penalties may be imposed pursuant to ORS 183.745 according to the following schedule:
- (a) Gross negligence or repeated negligence in rendering hemodialysis \$500-\$1000.
- (b) Use of any alcohol or drugs to an extent or in a manner sufficient to impair the ability of the certificate holder to conduct safely the duties of a CHDT or that could pose a risk to the public \$250–\$1000.
- (c) Committed unprofessional or dishonorable conduct \$100-\$1000.

STATUTORY/OTHER AUTHORITY: ORS 688.665

REPEAL: 333-275-0170

**RULE TITLE: Hearings** 

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Repeal 333-275-0170 – Rule is unnecessary given language adopted in other rules that the

Authority will comply with ORS chapter 183.

## **RULE TEXT:**

An applicant or CHDT shall have an opportunity for a hearing on any decision to deny an application, to suspend or revoke a certificate, or to impose a civil penalty. Hearings are governed by ORS 183.310 to ORS 183.500. Requests for hearings must be in writing and sent to: Section Manager, Health Care Regulation and Quality Improvement, Suite #640, Oregon Public Health Division, PO Box 14450, Portland, OR 97293-0450.

STATUTORY/OTHER AUTHORITY: ORS 688.625 - 688.665

ADOPT: 333-275-0175

RULE TITLE: Responsibility to Notify the Authority of Changes

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Adopt 333-275-0175 – Creates requirement that hemodialysis technician must keep the Authority informed of any changes to legal name, contact information, current employer of record and contact information. Information must be reported within 30 days of change. Specifies that name changes must be accompanied with legal proof of name change. Specifies that the Authority may take disciplinary action if information is not reported.

## **RULE TEXT:**

- (1) In addition to the reporting obligations specified under OAR 333-275-0140, a CHDT must keep the Authority informed of the following:
- (a) The current legal name of the CHDT which shall be considered the name of record;
- (b) Current contact information, including mailing address, primary phone contact number, and electronic mail address; and
- (c) Current employer(s) of record and the employer(s) mailing address(es).
- (2) Any change to the information specified in section (1) of this rule must be submitted to the Authority no later than 30 calendar days after the change.
- (3) To change the name of record, the CHDT must submit legal proof of the name change.
- (4) Failure to report this information may result in disciplinary action against the CHDT.

STATUTORY/OTHER AUTHORITY: ORS 688.665

RULE TITLE: Fees for Hemodialysis Technician Certification and Certification Renewal

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Amend 333-275-0180 – Removes the reference to the fee table and incorporates fee language into the rule text. No changes to fees have been made.

#### **RULE TEXT:**

- (1) Initial certification (based on months between initial certification until renewal):
- (a) 19-24 months \$150.
- (b) 13-18 months \$112.50.
- (c) 7-12 months \$75.
- (d) 1-6 months \$37.50.
- (2) Provisional certification:
- (a) Initial valid for 6 months \$37.50.
- (b) Renewal valid for additional 6 months (one time only) \$37.50.
- (3) Certification renewal- \$150.
- (4) Delinquent (late fee) \$25.
- (5) Duplicate or replacement certificate fee \$25.
- (6) As authorized by ORS 688.645, an application for certification renewal submitted or postmarked after May 31st of the renewal year must include a \$25 delinquent fee in addition to the certification renewal fee.
- (7) Fees established in this rule are non-refundable.

STATUTORY/OTHER AUTHORITY: ORS 688.640, 688.665

RULE TITLE: Provisional Certification During Declared Emergency

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Amend 333-275-1000 – Makes amendment to language including referencing "declared emergency" which is defined under 333-275-0010. Removes specific dates and replaces with time frame. Minor corrections to terms used.

## **RULE TEXT:**

During a declared emergency, the following provisions apply:

- (1) A provisional certificate issued under OAR 333-275-0080 that was valid three months prior to an emergency declaration shall continue to be valid for a period determined by the Authority, not to exceed six months or until the state of emergency is terminated, whichever is earlier. If the emergency still exists after six months, the Authority may renew or continue the certification for a time period determined by the Authority or until the state of emergency is terminated, whichever is earlier.
- (2) A provisional certificate that expired 90 calendar days or less prior to an emergency declaration may be renewed under OAR 333-275-0080 except that:
- (a) The applicant must complete and submit documentation of completion of an Authority-approved abbreviated training program consisting of a minimum of 16 hours of theory and 16 hours of supervised clinical learning experiences related to hemodialysis as it is performed in a particular facility or dialysis facility or center.
- (b) The applicant must be endorsed and submit an endorsement letter from the medical director of the sponsoring dialysis facility or center that intends to immediately employ the individual, in a paid or volunteer capacity.
- (c) A certificate renewed under this section shall be valid for a period determined by the Authority, not to exceed six months or until the state of emergency is terminated, whichever is earlier. If the emergency still exists after six months, the Authority may renew or continue the certification for an additional time period determined by the Authority or until the state of emergency is terminated, which is earlier.
- (3) The Authority may deny, suspend, or revoke a certificate issued or renewed under this rule for any reason that it may deny, suspend, or revoke a certificate in ORS 688.625 through 688.665 or these rules.
- (4) This rule is not in effect when the state of emergency or public health emergency is terminated.

STATUTORY/OTHER AUTHORITY: ORS 401.165, 401.168, 401.990, 413.042, 431A.005, 431A.010, 431A.015, 433.441, 688.635, 688.640, 688.650

STATUTES/OTHER IMPLEMENTED: ORS 688.640, 688.650

**RULE TITLE: Emergency Certification** 

NOTICE FILED DATE: 11/28/2022

RULE SUMMARY: Amend 333-275-1010 – Minor corrections to terms used. Specifies that the Authority may require a criminal history check regardless of the home certifying state conducting a criminal history check.

## **RULE TEXT:**

- (1) Definitions:
- (a) "Home certifying state" means the state that currently licenses or certifies an individual as a CHDT who is seeking an emergency certificate from the Authority.
- (b) "Emergency certificate" is a short-term certificate issued under this rule during a declared emergency or public health emergency to an applicant who is primarily licensed or certified as a CHDT in another state.
- (2)(a) During a declared emergency, the Authority may grant an emergency certificate to an individual who:
- (A) Is validly and currently licensed or certified as a CHDT in another state;
- (B)(i) Has completed an Authority-approved hemodialysis technician training program; or
- (ii) Has been employed as a certified or licensed CHDT in another state for a minimum of 1,000 hours within the preceding 24-month period;
- (C) Is not subject to any adverse actions related to certification or licensure;
- (D) Passed an Authority-approved national certification exam;
- (E) Is sponsored by a dialysis facility or center that intends to immediately employ the individual, in a paid or volunteer capacity;
- (F)(i) Is not disqualified after completing the required criminal history check in OAR 333-275-0040; or
- (ii) Demonstrates that the home certifying state conducted a criminal history check, the home certifying state is authorized to conduct both state and federal criminal history checks, and the applicant was not disqualified from certification; and
- (G) Submits the required fee(s) in accordance with OAR 333-275-0180.
- (b) An emergency certificate issued under this rule shall be valid for a period determined by the Authority, not to exceed six months or until the state of emergency is terminated, whichever is earlier. If the emergency still exists after six months, the Authority may renew or continue any emergency certificate for an additional six months.
- (c) The Authority may request any other information or verification prior to issuing an emergency certificate and may require a criminal history check under OAR 333-275-0040 notwithstanding subparagraph (2)(a)(F)(ii) of this rule.
- (3) To apply for an emergency certificate, an applicant must submit:
- (a) A complete application in a form provided by the Authority including, but not limited to, the following:
- (A) The applicant's name, permanent address, electronic mail address and telephone number;
- (B) The name and contact information of the sponsoring dialysis facility or center; and
- (C) Attestation that the applicant is not subject to any adverse actions related to certification or licensure.
- (b) A copy of their current CHDT license or certificate from their home certifying state;
- (c) Documentation that the applicant has passed an Authority-approved national certification exam;
- (d) Documentation that the applicant has:
- (A) Completed an Authority-approved hemodialysis technician training program; or
- (B) Been employed as a certified or licensed CHDT in another state for a minimum of 1,000 hours within the preceding 24-month period;
- (e)(A) Written consent for a criminal record check and a completed fingerprint card for a Federal Bureau of Investigation (FBI) check, where required, and any associated fees; or
- (B) Documentation demonstrating that the home certifying state conducted a criminal history check, the home certifying state is authorized to conduct both state and federal criminal history checks, and the applicant was not

disqualified from certification; and

- (f) All required fees in accordance with OAR 333-275-0180.
- (4) The Authority may deny, suspend, or revoke an emergency certificate for any reason that it may deny, suspend, or revoke a certificate in ORS 688.625 through 688.665 or OAR chapter 333, division 275.
- (5) An individual with an emergency certificate must comply with ORS 688.625 through 688.665 and all rules adopted thereunder.
- (6) This rule is no longer in effect when the declared emergency is terminated.

STATUTORY/OTHER AUTHORITY: ORS 401.165, 401.168, 401.990, 413.042, 431A.005, 431A.010, 431A.015, 433.441, 688.635, 688.640, 688.650

STATUTES/OTHER IMPLEMENTED: ORS 688.640, 688.650