The Centers for Dialysis Care (CDC) has provided the information in this newsletter to inform you and your loved ones.

CDC
Centers for Dialysis Care

The Centers for Dialysis Care (CDC) is a leader in providing patient-centered quality care to all individuals with kidney disease.

Did You Know...

Did you know that transplant standards vary at different transplant centers? If you are not sure why you are not eligible for a kidney transplant speak to your social worker or kidney doctor. If you are interested in learning more about kidney transplantation, you can call one of the transplant centers below:

University Hospitals Transplant Institute: (216) 844-3689
Cleveland Clinic Kidney Transplant Program: (216) 444-6996

Did you know that peritoneal dialysis or PD is another way to clean your body and blood of water and toxins. Peritoneal dialysis (PD) is done at home! This means less trips to the dialysis facility and you might be able to have a machine do your dialysis while you sleep. If you want to know more about peritoneal dialysis (PD) you can call (216) 732-3727 and ask for the Home Care Coordinator, Stephanie Myers or (330) 758-0995 and ask for the Home Care Coordinator, Stephanie Potjunas.
Well Wishes

There’s nothing quite like the energy and excitement of the seasonal transition from late spring to early summer. The start of warm sunny days and the baseball season for the Cleveland Indians. I am excited that Centers for Dialysis Care (CDC) is starting a new model of care for some of our patients.

In January, CDC was awarded the opportunity to participate in the Comprehensive End-Stage Renal Disease (ESRD) Care Demonstration Program, CEC, also known as the End-Stage Renal Disease Seamless Care Organization, ESCO, which is the nation’s first disease specific shared savings program. Centers for Medicare and Medicaid Services (CMS) align Medicare Beneficiaries to the program each month. The name of our program is Northeast Ohio Renal Alliance, LLC. It is designed to identify, test and evaluate new ways to improve care for patients diagnosed with ESRD. Patients will benefit from these innovations in care delivery while retaining their full Medicare benefits and the freedom to choose providers.

As you know, CDC is a strong advocate for patients on a state and national level. CDC is uniquely positioned to change how we care for kidney failure patients. This program allows us to provide Care Managers to those patients that are in the ESCO. By expanding the traditional role of the dialysis team we can deliver a more comprehensive approach to the health care needs for our patients. This means that the Care Managers will help ESCO patients with more than just dialysis needs. For example, they can help coordinate care with physicians other than your nephrologist. We believe it is very important that patients always have choices and access to care at high-quality dialysis facilities. Thank you for the privilege of caring for your health care needs.

Although not everyone at CDC is in the ESCO, we are working hard to make some resources available to all CDC patients. We are very early in this process, but as we learn from the ESCO we want to expand the lessons learned for all of our patients.

Some of you may know Derwin Martin, a former patient at CDC East as well as one of the patient representatives. Derwin received a successful kidney transplant last year. I am happy to announce that Derwin recently joined the ESCO Board of Managers as the ESCO Beneficiary. Derwin will be part of an Innovation Team to improve kidney transplant rates. If you would like more information regarding the ESCO or have questions or concerns, you can:

1) Call us at (216) 295-7003 extension 151 or bring it up next time you are in your provider’s office.
2) Call (800) MEDICARE (800-633-4227) and tell the representative you are calling about ESCOs. TTY users should call (877) 486-2048.
3) Visit www.neorenal.org or www.medicare.gov for more information.

Diane P. Wish
CEO
We believe that your experience regarding the care at CDC is central to everything that we do and the decisions we make. As you can see from the picture, we are working to continually improve upon 5 key areas that relate to your healthcare experience as part of the CDC family.

Your patient care experience is more than just your satisfaction with your dialysis treatment. Your patient care experience includes things like how well the nephrologists and staff communicate, your knowledge of treatment options, the handling of patient problems, and being provided information. We assess your patient care experience with a survey. The survey information is collected by an outside company with a survey called the CAHPS (Consumer Assessment of Health Providers Survey). The survey is given in the Fall and Spring of each year. I know the survey may be difficult to complete twice a year, but CDC uses the results of these surveys to improve your patient care experience.

We recently received the results of our CAHPS Fall 2016 survey. Personally, I want to thank each and every one of you for taking the time to complete this survey and have your voice heard. In this issue of the patient newsletter, we are highlighting some of what we are doing as a result of your feedback. I encourage you to complete the Spring 2017 survey. Please have your voice heard, and provide us with your input.

Gary Robinson
President

Patient Rights
CDC cares about you as a person. It is our goal to treat you with respect and dignity; recognizing your individuality and personal needs. To achieve this goal, CDC considers every patient to have the following rights.

• To be informed of all treatments for kidney disease including peritoneal dialysis (PD), home hemodialysis and kidney transplantation
• To receive safe and competent care
• To be treated in a safe environment
• To have your medical records kept confidential
• To review and have access to your medical records
• To privacy and confidentially during your treatment
• To know the credentials of all those who care for you
• To understand what is happening to you during your treatment
• To have clear communication with the staff

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ALWAYS… Wash Your Access

Why do I have to wash my access before starting dialysis? I bathed before I came to dialysis and I am not dirty.

Actually, there are several reasons why washing your arm before treatment protects you.

1. As a dialysis patient, you are at greater risk for developing an infection.

People on dialysis have a weaker “immune system.” This means your body does not protect you from infection like it did when you did not have kidney disease. This means you are at increased risk of getting an infection. Vascular access infection is a common cause of infection in hemodialysis patients. People with catheters have the highest infection rate! Fistulas have the lowest infection rate. Cleaning your access is the best way to prevent an infection.

2. The bacteria that protects your skin, may infect you if it gets into your blood.

Everyone has bacteria on their skin called ‘Staph.’ However, people on dialysis usually have more Staph on their skin than others. As long as the Staph does not get inside of your body it does not cause an infection. When you wash your access in the unit, you remove a lot of the Staph at a time that is close to the time of your treatment. The dialysis technician does a final cleaning of your access to remove more of the staph just before your needles are placed.

3. Cleaning your access

It is important to make sure the area where the needle will enter the skin is disinfected. First wash your access with soap and water. Next, you will be asked to use a wipe to clean your access once you are seated in your chair. The dialysis technician will rub a special antiseptic solution in a circular motion over the area selected. Remember that the needle breaks the skin, opening a door for bacteria to enter. Absolute cleanliness is required to reduce your chances of infection.

This is why it is important to wash your access after you arrive at the dialysis unit even if you washed it at home!

Remember, your access is your lifeline so prevention of infection is the key.

Patient Rights (continued from page 4)

- To refuse or discontinue treatment
- To get additional medical opinions
- To have your personal beliefs, so long as they do not disturb your care or others
- To be informed of internal and external grievance processes without reprisal or denial of services
- To be treated with sensitivity to psychological needs
- To refuse to participate in experimental research
- To be informed about isolation policies
- To be a participant in your care plan meeting
- To receive an individualized care plan
- To have the opportunity for private conversation
- To be able to question procedures or staff performance without fear of reprisal
For the Fun of It
Memorial Day Word Search  See if you can find the words below in the puzzle.

Words:
Afghanistan
Air Force
American
Revolution Army
barbecue
battle
bugle
casualty
cemetery
ceremony
civil war
Coast Guard
commemorate
country courage
Decoration Day
defend
family fireworks
flag
flowers freedom
grave
half-staff
hero
holiday
honor
independence
Iraq
Korea
liberty
Marines
May
memorial
memory
military
Monday
Navy
parade
patriotic
peace
picnic
poppies
remember
remembrance
respect
salute
service
soldier
solemn
speech
summer
taps
tombstone
tribute
troops
vacation
valor
veteran
Vietnam
World War I
World War II
wreath
You Spoke:

Your safety, opinion and well-being matters to us! Our goal is to provide you the best quality care. Twice a year you receive a survey called CAHPS and have a chance to tell us how we are doing in providing your care. We make decisions based on what this survey tells us. Here are some of the results from the 2016 survey regarding how we provide information to you.

- 88.7% of patients know how to take care of their access
- 57.3% of patients know why they are not eligible for a kidney transplant
- 75.5% of patients reported having their rights reviewed with them
- 51.8% of patients received information about peritoneal dialysis
- 83.6% of patients are involved in choosing the treatment that is right for them
- 80.2% of patients know what to do if they had a health problem
- 75.7% of CDC patients reported receiving information about the right treatment for them
- 86.6% of CDC patients reported knowing how to get off the machine in an emergency
- 86.8% of patients reported getting a copy of their rights

We Listened:

Here is what CDC is doing to provide information to you.

- All new and current patients will receive a copy of the My Start Smart Kidney Guide.
- The guide teaches you about the Touch-Look-Care approach to care for your access.
- The guide addresses common health problems you might have at home.
- The guide reviews all your treatment options and much more!
- Every year the social worker reviews your rights and responsibilities with you.
- A copy of your rights is included on pages 4-5 of the patient newsletter.
- A copy of your rights is also posted in the dialysis lobby.
- Four times a year, your dialysis technician reviews how to get off the machine in an emergency.
- If you are still not sure what to do in an emergency, please let the staff know.
Please share your experience with us!

We are taking part in a very important survey initiative sponsored by CMS (Centers for Medicare and Medicaid).

You may receive a survey through the mail or a call from DSS Research to conduct a satisfaction survey over the phone. Your answers to this survey are very important to us. Your feedback will help us to improve the quality of care we provide to our patients.

Survey takes 15 minutes to complete, and all answers are confidential.

Thank you!
Artist in Focus

The featured cover art for this newsletter was created by Keir Pollard, a CDC Shaker patient. Keir is 45 years old and was named after Keir Dullea who starred in her Dad’s favorite movie, “2001: A Space Odyssey.”

Keir has a family history of kidney disease and started dialysis due to heart failure, high blood pressure and diabetes. Her brother has been on dialysis for 4 years and her grandmother was the first black woman to receive a kidney transplant. She has started the kidney transplant evaluation process. Her children encourage her to eat healthy so she can get listed for a kidney transplant as one of her relatives may be a good match. Keir loves art therapy and learned to draw from her Uncle Ronnie who is a hand blown glass artist. She likes to build doll houses, needlepoint and crochet but her passion is painting. She uses a lot of bright colors in her work. Her art is inspired by Georgia O’Keefe, Picasso, and Paul Klee. She has even set up a studio in her dining room.

She considers herself a spiritual person but it got to the point that she almost lost her faith. She asked herself, “Why me?” Dialysis has changed her life and has been a challenge but she has accepted it. She now can walk up the stairs and drive a car. She really misses work as an STNA at University Hospitals where she worked for 14 years. She worked at the VNA for 10 years. She says art has taken the place of her work.

What advice would Keir give other dialysis patients? “Keep the faith, keep doing things and don’t stop living your life.”

National Mental Health Month

National Mental Health Month is recognized in May and raises awareness about mental illness. Mental health is essential to your well-being and the ability to live a full and productive life. Nearly 30% of all dialysis patients experience symptoms of depression. If you are feeling overwhelmed a significant amount of time this could be a sign of depression.

Signs of depression include:
- Little interest or pleasure in doing things
- Feeling down
- Trouble falling asleep, staying asleep, or sleeping too much
- Feeling tired all the time
- Little energy
- Poor appetite or over eating
- Trouble concentrating on things

If you are feeling any of these signs, contact your social worker. The social worker is trained to provide counseling or can make a referral to community resources. Depression can be treated!
Reviewing Your Renal Diet

There are basically 3 important nutrients that people with kidney disease need to control. These include sodium, potassium, and phosphorus. Always discuss with your doctor or renal dietitian your specific and individual diet needs.

SODIUM
Sodium is a mineral found in salt. Salt is one of the most commonly used seasonings. Unfortunately, reducing its intake is an important tool in controlling your kidney disease.
1. Do not use salt when cooking or put it on food when you eat.
2. Be sure to read food labels. Avoid foods that have salt or sodium in the first 4 or 5 items in the ingredient list.
3. Do not eat ham, bacon, sausage, hot dogs, lunch meats, or regular canned soups. You may eat soups labeled reduced sodium. Eat only 1 cup – not the whole can.
4. Only eat canned vegetables which say no salt added.
5. Do not use garlic salt, onion salt, seasoned salt, kosher salt or sea salt.
6. When buying your favorite foods, look for lower salt or no salt added options.

POTASSIUM
Potassium is a mineral which helps muscles work. When kidneys are not working properly, potassium builds up in the blood. This can cause changes in how the heart beats which can possibly lead to a heart attack. Potassium is found mainly in fruits and vegetables. It can also be found in milk and meats. You will need to avoid certain ones and limit the amounts of others. Here are some potassium rich foods which are best to be avoided:
1. Melons such as cantaloupe and honeydew (watermelon is okay)
2. Bananas
3. Oranges and orange juice
4. Grapefruit juice
5. Prune juice
6. Tomatoes, tomato juice, and tomato sauce
7. Dried beans
8. Pumpkin
9. Winter squash
10. Cooked greens, spinach, kale, collards, and Swiss chard

Other foods to avoid include bran cereals, granola, salt substitute or lite salt. Also avoid potatoes unless they are prepared by cutting them into small pieces and soaking in large amounts of water for at least two hours. They then need to be drained and rinsed before preparing them to eat.

PHOSPHORUS
Phosphorus is another mineral that when you have kidney disease can build up in your blood. When phosphorus builds up in your blood it can cause calcium to be pulled from your bones and collect in your skin and blood vessels. This can cause broken bones, heart damage and itchy skin.
1. Dairy foods are the major source of phosphorus in the diet. Limit dairy to one serving per day.
2. Some vegetables also contain phosphorus. These include dried beans, broccoli, mushrooms, and brussel sprouts. If you have any of these, limit them to 1 cup per week.
3. Certain cereals need to be limited to 1 serving per week. These are bran, wheat cereals, oatmeal and granola.
4. White bread is better than whole grain breads.
5. Soft drinks contain phosphorus. If you drink them only drink the clear ones. Do not drink Mountain Dew (any kind), colas, or root beer. Also avoid Hawaiian Punch, Fruitworks, Cool iced tea and Aquafina tangerine pineapple.
6. Avoid all kinds of beer. They all are high in phosphorus.

Adapted from the Cleveland Clinic.
Healthy Eating

Asparagus Hazelnut Risotto Rice
Serves: 6

Ingredients
1 ½ Cups fresh asparagus tips
3 Tablespoons fresh lemon juice
2 Tablespoons extra virgin olive oil
1 Small yellow onion, chopped
2 Cloves garlic, peeled and minced
3 Cups unsalted or low sodium chicken broth
1 Cup white wine (table wine, not cooking wine)
1 ½ Cups Italian Arborio rice
1 Cup fresh peas
½ Cup parmesan cheese
¼ Cup hazelnuts, toasted
2 Tablespoons fresh chopped parsley

Broiled Garlic Shrimp
Portions: 5
Serving Size: 2.5 ounces

Ingredients
1 lb. Shrimp in shells
½ Cup unsalted margarine, melted
2 Teaspoons lemon juice
2 Tablespoons chopped onion
1 Clove garlic, minced
1/8 Teaspoon pepper
1 Tablespoon fresh parsley, chopped
Healthy Eating

Preparation
1. In a frying pan, warm the olive oil and sauté onion until soft.
2. Add garlic and sauté 1 minute.
3. Add the asparagus tips, fresh peas, the chicken broth, rice, white wine and water.
4. Cook over low heat until the liquid is absorbed.
5. Add the lemon juice, parmesan cheese, hazelnuts and parsley.

Approximate Analysis per serving:
- Protein: 8 grams
- Sodium: 267 mg
- Fat: 16 grams
- Potassium: 334 mg
- Carbohydrate: 12 grams
- Calcium:
- Calories: 318 kcal
- Phosphorus: 156 mg

Preparation
1. Preheat broiler. Wash, peel and dry the shrimp.
2. Pour margarine in a shallow baking pan and add lemon juice, onion, garlic and pepper. Add shrimp and toss to coat.
3. Broil for 5 minutes. Turn and broil for 5 more minutes.

Analysis:
- Calories: 264
- Sodium: 135
- Fat: 20
- Carbohydrates: 2
- Potassium: 189
- Protein: 19
- Phosphorus: 192

Renal and Renal Diabetic Exchanges:
2 meats, 1 starch, 1 low potassium vegetable