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

2017 Holiday Schedule

Thanksgiving Week Schedule—Closed Thursday, November 23, 2017

Mon/Wed/Fri Patients
Sunday, November 19, 2017
Tuesday, November 21, 2017
Friday, November 24, 2017

Tues/Thurs/Sat Patients
Monday, November 20, 2017
Wednesday, November 22, 2017
Saturday, November 25, 2017

Christmas Week Schedule—Closed Monday, December 25, 2017

Mon/Wed/Fri Patients
Sunday, December 24, 2017
Wednesday, December 27, 2017
Friday, December 29, 2017

Tues/Thurs/Sat Patients
Tuesday, December 26, 2017
Thursday, December 28, 2017
Saturday, December 30, 2017

New Year’s Week Schedule—Closed Monday, January 1, 2018

Mon/Wed/Fri Patients
Sunday, December 31, 2017
Wednesday, January 3, 2018
Friday, January 5, 2018

Tues/Thurs/Sat Patients
Tuesday, January 2, 2018
Thursday, January 4, 2018
Saturday, January 6, 2018
The holiday season gives us all a time to reflect on the past year. We are personally thankful to have had the opportunity, as CDC’s CEO & President, to be a part of an organization that has an ongoing commitment to our CARES values—Customer Service, Accountability, Relationships, Excellence and Safety.

CDC exists to provide the safest, highest quality health care and the best patient care experience possible to our patients. This is what we strive for every day and we sincerely hope that we have accomplished this in the past year. You will again have the opportunity to provide your feedback during the Fall ICH CAHPS survey. Starting in November, you may receive a patient care experience survey. You will receive 2 mailings and someone may contact you by phone to complete the survey. We encourage you to complete the Fall 2017 survey. Please have your voice heard, and provide us with your input.

CDC believes that continuing education for our staff is important and essential to our ability to continue to deliver high quality care. During the month of October, CDC offered interdisciplinary staff retreats on enhancing the patient care experience and emergency preparedness. Over 400 staff members were able to participate in the training. We wanted to personally thank the following patients for giving of their time to participate in patient panels during the retreat.

Perry Hall – Oakwood
Jami Bell – Oakwood
Steve Robinson – East
Jacqueline Arthur – Eliza Bryant
Linda Walker – Euclid
Leno Elfers – West
Jon Alexander – Euclid
Gwendolyn Snell – Euclid

We appreciate each member of the CDC team and recognize we would not be where we are without the contributions made by each and every one of our employees. During the month of November we will be celebrating employee appreciation week as well as recognizing the CDC Compliance Program. Steve Lindsay is CDC’s Compliance...
Officer. CDC has a Compliance Plan, a Code of Ethics & Business Conduct, and many policies which provide guidance on how employees conduct business and interact with patients. In addition, employees and patients have the ability to report any compliance or safety issues.

As part of our commitment to making a difference, we continue to be a proud supporter of the Kidney Foundation of Ohio (KFO). The KFO Harvest Walk and 5K were held this past October and raised $43000.00 which goes directly to provide support to patients in the surrounding community. CDC was also able to recycle 20 wheel chairs that needed to be retired. Jeff Marusic, Director of Support Services, arranged the collection of wheel chairs from CDC facilities. The wheel chairs were donated to Joni and Friends, a local collection site who assists in delivering wheel chairs for restoration.

We strive to make a difference in our communities by generously giving of our time, expertise, knowledge, and personal donations. CDC Shaker coordinated a bottled water drive for victims of national disasters and was able to donate 90 cases of bottled water to the American Red Cross. We wanted to thank Jackie Powers and Deborah Lewis for organizing this initiative as well as the staff for their contributions. We are truly inspired by the caring culture that is exemplified by our team.

Looking ahead, the CDC is poised to continue to provide the highest level of quality, safety and positive patient care experience. In order to sustain this commitment to you, we have innovative plans in place that will help us ensure this type of care will continue and improve, well into the future. We are excited about the future of CDC and the positive impact it will surely have on the well-being of our patients and the communities we serve for many years to come.

We would like to extend our warmest wishes to you and your family for a safe, healthy and happy holiday season and a wonderful new year!

Diane P. Wish, CEO
Gary Robinson, President
Diabetes Awareness Starts with YOU!

November is National Diabetes month, but we know awareness and taking care of you and your family’s health happens all year round. One in 10 Americans has diabetes – that is more than 30 million people. Another 84 million adults in U.S. are at high risk of developing type 2 diabetes.

The good news is people who are at high risk for type 2 diabetes can lower their risk if they make healthy changes.

You or a member of your family can reduce risks for several complications by taking the following precautions:

**Don’t smoke** – Smoking is bad news, especially if you have diabetes. It raises your blood sugar and weakens your body’s ability to respond to insulin. It can make vision problems develop faster, and it hurts your lungs and your heart. In fact, people with diabetes who smoke are three times more likely to die of heart disease or stroke than those who don’t smoke.

**See your doctor regularly** – Your doctor, or primary care physician, is a compass. Primary care physicians provide care if you are ill, hurt or in pain. They are also there to prevent you from getting sick by providing physicals, mammograms and other preventive health services.

**Visit the eye doctor at least once a year** – An eye doctor can spot problems with your vision early and help prevent them. Tell the eye doctor if you have diabetes, and make sure the exam includes dilating your pupils.

**Don’t forget the dentist** – Having kidney disease means you are at higher risk of cavities and gum disease, so be sure to see your dentist every six months. And don’t forget to brush and floss regularly.

**Take care of your feet** – Keep your feet dry and clean. Don’t use shoes that are too tight or rub against your feet, as those may cause sores. Check your feet every day for sores. Use a mirror or have someone check them. Diabetes can damage your nerves so you might not be able to feel if you have a sore. If you do, let your doctor know right away.

**Listen to your body** – If you don’t feel well, or something just doesn’t seem right, contact your doctor to help you figure out what’s wrong, and what you should do about it.

Having kidney disease puts you at a higher risk for developing other health problems. However, if you understand the risks, you can take steps now to lower your chance of kidney-related complications. But don’t rely on your healthcare team to identify areas of concern—you need to play an active role in reducing your risk. Make an effort to learn about complications and consistently track your overall health.
For the Fun of It

Patient Emergency Kit Word Search

Are you prepared for an emergency? Find and circle the supplies in this jumble of letters in the grid below. These are the kind of supplies you and your family should have ready in case of an emergency. Put a check mark by each supply as you find it.

- BATTERIES
- BLANKETS
- BOTTLED WATER
- CAN OPENER
- CANNED FOOD
- CASH
- FIRST AID KIT
- FLASHLIGHT
- MOIST TOWELETTES
- PHONE CHARGER
- PORTABLE RADIO
- PRESCRIPTIONS
- WARM CLOTHES
- WHISTLE

F T R E G R A H C E N O H P J F L K W Z
O U P R E S C R I P T I O N S R Q N H H
P F W A R M C L O T H E S V C E L X Q R
X E W U W W H X S M B Z V O A Q K M D Q
X S X D L M Z N F V W X S C O F D X Z K
G W H I S T L E O C C B Q Q A M Z C C P
O L X Y W Y T A T H M Y M T S S L M A D
W N Y O Y S D K O Y V M C Z T V H O N K
S Z Y M I S E I R E T T A B V W I A N N
U Q L N L S T E K N A L B G Z J D Z E K
D O I D A R E L B A T R O P X B Z H D R
T X L J J D A G D X S O C A Z V S C F K
M O I S T T O W E L L E T T E S L B A O X
T R C I Z N J T K T D Z B N U B J N O O
M H D F I R S T A I D K I T N P E O D V
Q T T I Z S M D E W S G L X V T I P H K
F R E B O T T L E D W A T E R V R E M F
E C V J G Z S B D I A O S U Z Y J N R A
U M Y D W T H G I L H S A L F J D E X T
Q V W E I D D P U H J U F E N H B R B B
Patient Interview: My Role with the Patient Advisory Council

Sharon Thomas, Executive Director of Clinical Operations had the opportunity to talk with Jami Bell, a patient at our Oakwood facility, who has been an active member of the Oakwood Patient Advisory Council since its inception. Here are some of her views and insights on Patient Advisory Councils.

What does the Patient Advisory Council mean to you?
Jamie says that she participates because it makes her feel like she has a little more control over her situation. When she started dialysis, she felt like she lost a lot of control, but this has brought some of that back. She also says that this is a better way to communicate with the facility staff.

What are the benefits of the Advisory Council for you and for all patients?
This is a forum that gives patients a voice. This helps them communicate problems and needs to the facility staff. This is also a forum that has a voice in solving problems.

Why should patients participate in a Patient Advisory Council?
It is important that patient’s participate so that they can have a voice. It is a good forum to know what is going on at the facility, what improvements are being made especially in the arena of patient safety.

What plans does the Council at Oakwood have for helping other patients?
We want to become mentors for new dialysis patients. We want to help them navigate dialysis. We want to set up a time to meet with new patients, answer their questions and tour them through the dialysis facility. We would like to sit with them on a 1:1 basis and share our story. We would share the difficulties we had as new dialysis patients. All of us probably thought of dialysis as a death sentence, but we have found that there is life after dialysis. We want to share that insight with new patients. An experienced patient gave me advice when I first started and that really helped get me through my early days of dialysis.

How can patients get their voices heard?
Attend meetings. Don’t be afraid to speak up to the staff or manager. Go to a member of the Advisory Council. But, it should be more than just a complaint. Be constructive and not destructive criticism. Bring suggestions and bring compliments.

Some other things that the Oakwood Patient Advisory Council feel are important are the ability to designate the technicians that cannulate them and the security of the facility. In the meetings, they worked with facility leadership to be able to designate technicians, when possible, to care for them. They feel this has led to better treatments. They also instituted locking the doors to the facility so that anyone off of the street cannot just walk into the unit. They said that this change has made them feel much safer while they are dialyzing.
Homecare Rocks – Listen to the Patient!

Interview with Jennifer Walker, CDC Home hemodialysis patient

Jennifer Walker is currently a CDC Euclid Home Care Home Hemodialysis patient who has transitioned from receiving her dialysis treatments 3 days a week at the dialysis center to doing dialysis herself in the comfort of her home. Jennifer Walker has been on hemodialysis for four years, three years at the dialysis unit and the past year on home hemodialysis. She chose Home Care due to the convenience of doing dialysis in her home and being able to spend more time with her family. The transition was very scary at first for Jennifer as she was unsure if she was capable of sticking herself with dialysis needles. “I was trained along with my partner and was very impressed with how knowledgeable, understanding, and patient the homecare staff were with me. I feel more involved with my dialysis care and I receive more time with my Doctor, Dietitian and Social Worker when I come for my monthly clinic visits. The Home Care team really CARES. They have a nurse available 24 hours a day I can call. Overall this is the BEST decision I have made. I am now happy, healthier and have resumed quality in my life.

Jennifer says there are more pros to homecare than cons of doing home hemodialysis.

The pros of Homecare:
1. I am not drained of all my energy after each dialysis treatment like I was at the dialysis center. I would be completely exhausted and need to go home and lay down.
2. I am able to run errands, clean my house and do things I enjoy immediately after my dialysis treatment. I love the fact I have more energy!
3. The freedom to do dialysis on my time is great!

The Cons of Homecare:
1. Lots of supplies delivered to your home and at times it can feel overwhelming.

Let us show you how you can take control of your dialysis treatments. Give us a call at CDC Euclid Home Care at (216) 732-3750 and ask for Stephanie Campbell, Home Care Coordinator; CDC Youngstown Home Care at (330) 758-0995 and ask for Stepanie Punjantas, Home Care Coordinator; or contact Wanda Johnson at the CDC of Mentor Home Care Unit by calling 440-951-3602 or 216-536-7169.
Creative Art Therapies: Focus on Music Therapy

Kathleen Brown, Music Therapist sat down with Brian Gardner, a CDC East patient since 2005, to discuss his love of music. Brian occasionally participates in the Creative Arts Therapies program in group art and music activities. Music plays a big part in Brian’s life – he is a professional musician, whose interest in music started at a very young age, being influenced by family - his parents listened to all kinds of music; his dad played baritone for a while, his aunt and uncle were professional music educators. As a result, he likes all kinds of music – jazz, country, classical as well as gospel/church.

Brian started learning musical instruments early: piano lessons 2nd grade, clarinet lessons in 5th grade. In high school, he studied saxophone and flute, and at University, bassoon. His music teacher aunt encouraged him to start singing. She would have students teach different techniques and he would be the student. He didn’t want to sing or be a soloist, but sometimes was called to do that by others. He prefers playing instruments over singing. His parents’ involvement in his music education helped him develop the discipline required of a serious musician.

Brian earned the following degrees: Bachelor of Science in Music Education, Master of Music Education, and a Bachelor in Biblical Studies. For the first years of his career he traveled as a performer, gave private lessons and would help out in workshops and music clinics. He is also an ordained minister.

Since going on dialysis and facing other life situations, he continues to make music: writing, performing in ensembles, leading and performing church music. He listens to music for enjoyment and relaxation, and prefers that over watching television. He listens especially to the performer’s technique and the musical elements, loving the harmony and color in the music.

At CDC, one can often hear Brian discussing music movies, styles, songs, and artists with staff and other patients. He said, “During treatment, music calms and soothes me and keeps my mind occupied. It is the most aesthetic thing I can use or think of for my soul.” He said that with out music he would have “no life.”

Brian’s recommendation to other patients is “Don’t say to yourself “I coulda, woulda, shoulda...” because it tears your physical, mental, emotional, and spiritual self apart.”
Artist in Focus
The featured cover art for this newsletter was created by Melissa Brito, a CDC East patient.

Melissa has made art since she was a child and is inspired by things she sees everyday. Before coming to CDC, Melissa worked in wood, clay, and drawing. Her imagery was based on “Dia de la Muertos” (Day of the Dead) from her Mexican heritage.

After starting dialysis in December, 2016 she began using watercolor and acrylic paints. “The art therapist has encouraged me to try landscapes.” What has changed about Melissa’s art this past year is the subject matter and the way she looks at her art. She says, “Art is an expression of what I am going through at any particular time.”

Before Melissa had a stroke she was creative in other areas of her life, she loved to cook and listened to music to keep her self calm. “I wanted to learn how to play the piano and guitar.” She played the trumpet in high school and played in a jazz band. Melissa is now looking forward to working with the Music Therapist.

The most satisfying part of creating art for Melissa is “seeing when its all done gives me a sense of accomplishment.” Making art at CDC “helps me pass the time and I have a focus on something that does not bore me. I can create what I want and I am supported by the art therapist.” Melissa’s advice to those who want to try art or music therapy is “Do what you feel! That is the BEST part of it. Do what you want, the way you want to; your choices.”

Truths about Breakfast
You have probably heard that Breakfast is the most important meal of the day. Research suggests that it’s true. Here is why Breakfast should be a part of you routine.

1) Breakfast may lower your risk of heart disease and help protect against type 2 Diabetes. Skip the fatty meats and pastry.

2) Breakfast helps you meet your nutrient needs. Balancing the morning meal that has several food groups—including lean protein, grains and fruit/vegetables packs in nutrients your body needs. Studies indicate Breakfast eaters are more likely to meet their overall nutrition needs.

Try a veggie and cheese omelet with toast.

3) Breakfast can enhance performance. Without a morning meal it can be tough to concentrate and more likely to be irritable and tired.

5) To curb cravings-crack some eggs. They are high in protein and takes your body longer to digest than cereal or fruit. A high protein breakfast can help you feel fuller for the rest of the day and may keep you from reaching for fatty snacks in the evening.

4) Breakfast may help you lose weight and prevent you from overeating the rest of the day. According to recent research eating a high protein breakfast may help shed pounds and prevent hunger pangs. This may reduce cravings and help lose weight while maintaining lean muscle mass.

6) Fewer people eat a regular breakfast. One reason maybe we eat more snacks in place of meals because 20-30% of people skip breakfast.

7) Breakfast helps give you energy and allows you to burn more calories through out the day. Get crackin’ and try these recipes!
Coffee Cup Scramble

Yield: 1 serving  
Prep time: 1 minute  
Cook time: 45 to 60 seconds

Ingredients
2 eggs
2 t. milk
2 t. shredded cheddar cheese
Salt and pepper

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Farmers Market Omelet

Yield: 2-4 servings  
Prep time: 10 minutes  
Cook time: 15 minutes

Ingredients
4 eggs
¼ cup water
2 t. grated Parmesan cheese
1½ t. dried basil leaves
1¼ t. garlic powder
2 t. butter

Filling
½ cup sliced mushrooms
½ cup thinly sliced yellow summer squash
½ cup thinly sliced zucchini
1¼ cup chopped red bell pepper
2 t. water

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Healthy Eating

Instructions:
1. Coat 12-oz microwave-safe coffee mug with cooking spray. ADD eggs and milk, beat until blended.
2. MICROWAVE on HIGH 45 seconds, stir MICROWAVE until eggs are almost set, 30 to 45 seconds longer.
3. TOP with cheese, season with salt and pepper.

Microwave ovens vary. Cooking times may need to be adjusted.

Instructions:
1. COMBINE filling ingredients in 7 to 10-inch nonstick omelet pan or skillet. COOK and stir over medium heat until water has evaporated and vegetables are crisp-tender, 3 to 4 minutes. REMOVE from pan, keep warm. CLEAN pan.
2. BEAT eggs, ¼ cup water, cheese, basil and garlic powder in medium bowl until blended. HEAT butter in same pan over medium-high heat until hot. TILT pan to coat bottom. POUR in ½ of the egg mixture. Mixture should set immediately at edges.
3. GENTLY PUSH cooked portions from edges toward the center with inverted turner so that uncooked eggs can reach the hot pan surface. CONTINUE cooking, tilting pan and gently moving cooked portions as needed.
4. When top surface of eggs is thickened and no visible liquid egg remains, PLACE ½ of the filling on one side of the omelet. FOLD omelet in half with turner and slide onto plate, keep warm. REPEAT with remaining egg mixture and filling to make second omelet. SERVE immediately.