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CENTERS FOR DIALYSIS CARE NEWSLETTER | SUMMER 2014

this issue

- 1 Welcome
- 2 Treatment Choices
- 3 MOTTEP News
- 4 Creative Arts News
- 6 For the Fun of It
- 7 Patient Profile
- 9 Healthy Eating

CDC

Centers for Dialysis Care

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Centers for Dialysis Care Newsletter
Summer 2014
Editor: Marilyn Hahn
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This newsletter is a publication for the patients at the Centers for Dialysis Care. Articles are contributed by staff and patients from all the facilities. If you are interested in having an article published, please contact the Volunteer Services office at (216) 229-6170, ext. 130.

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.



On the Cover
It's Something Else, Mixed Media
Julia Boyd
CDC at Cityview
Courtesy of CDC Art Therapy



The Centers for Dialysis Care (CDC) is an independent provider of dialysis and related health services to individuals with kidney disease. CDC offers 18 locations across northeast Ohio, including CDC Access Care.

Welcome



Hopefully you are enjoying the warm weather and spending time outdoors. Since the children are out of school many people go on vacation. Dialysis patients can travel as well however it is necessary to plan ahead to make arrangements. Contact your social worker who can help you.

Patient Advocacy

CDC actively participates on a state and national level to educate and inform our legislators and regulators about the issues that impact dialysis patients. We feel that it is very important that patients always have choices and access to care at high quality dialysis facilities. Each year the National Renal Administrators Association, NRAA, has a Day on the Hill when we visit the legislators on Capitol Hill in Washington DC. As I have done in the past I took a patient with me. Debby F. from CDC Garfield accompanied me and CDC's Chief Financial Officer David Oppenlander, a member of the

NRAA Board of Director's, to 4 offices in DC. We met with the staff from Senators Brown and Portman and Representatives Marcia Fudge and Tim Ryan. Having patients tell their story about their health issues that led to dialysis and how they cope with this chronic disease has an incredible impact on the legislators and they are always welcome. We also attended a Kidney Disease Research Program that was hosted by several legislators interested in the ESRD program. A couple of physicians gave reports about their research and a 30 year old patient who has had kidney disease most of her life told her story which was very impactful as was her positive attitude in spite of the numerous surgeries and complications she had endured. She was a true inspiration to everyone.

Patient Safety

During the past several years CDC has been working in numerous ways to improve the safety of everything we do. As a way to measure our success we conducted a Corporate Safety Culture survey of the staff in late 2011 and in the spring of 2014. We are very happy to report that we improved significantly in every aspect identified in the survey. In 2013 all of the CDC dialysis facilities achieved the ESRD Five (5) Diamond status. This is a safety program designed for dialysis facilities and includes numerous activities that facilities must complete in order to achieve

this status. On an on-going basis other activities must take place in order to keep this status.

Patient Scheduling

One very important piece of patient safety involves the patient schedule. CDC is in the process of testing a new computerized patient scheduling system at CDC Garfield. This will

CDC CARES

Customer Service

Accountability

Relationships

Excellence

Safety

allow us to schedule a different amount of time between the time patients go on and come off dialysis based upon the needs of the patients. We will use 3 categories, short, medium and long. The goal is to make sure that the patient care technicians and nurse have enough time to perform all of the procedures exactly the way they are written which includes time for all of the safety checks and time to do all of the documentation prior to moving to the next patient. Safety is our highest priority.

In addition we are working with several professors from Cleveland State University who have learned the procedures that the staff perform and they are spending a lot of time observing what the staff do at Garfield. They will help us to determine if there are more efficient ways to do the work and tell us how much time is needed in between patients going on and coming off dialysis in each of the three categories. This will end up with making some changes to the scheduled time for patients and we need your cooperation and flexibility. Once we have determined the schedule it will be very important for the staff and patients to follow it. Chances are this will be a work in process and we will continue to make improvements along the way.

We plan to continue to test and evaluate the process at Garfield. Once we are happy with it, we will start it at other facilities. The goal is to have all facilities on the new schedule by the end of the year.

The plan is for all patients to have a 2 week notice about changes in their scheduled time. If you have any specific requirements let your Social Worker or Facility Manager know so that we can do our best to accommodate your special needs. In order for this to work and to assure your safety, I thank you for your flexibility. This is another example to show you that **CDC CARES**.

Treatment Choices

Choosing a treatment for Kidney Disease

Learning about your treatment choices for kidney disease will help you decide which one is right for you. There are 5 treatment options from which patients can choose to replace kidney function. No single treatment is right for every person. Which one you choose will depend on your body, lifestyle and health.

In-Center Hemodialysis

- Treatments are 3 times per week for 3-5 hours in a dialysis facility
- Uses a dialyzer (filter) and a dialysis machine to clean your blood
- Need an access to your blood stream
- Your blood is carried from your body to the dialysis machine (where it is cleaned) and returned to your body
- Trained facility staff are responsible for your care
- Must stick to a schedule & follow facility policies

Home Hemodialysis

- Treatments are usually 5-6 times per week
- Same process as in-center hemodialysis
- Need an access to your blood stream
- It is done by you and a partner at home

- Able to place your dialysis needles for treatment
- Trained by a dialysis nurse
- Allows for more independence
- Need space for machine & supplies

Peritoneal Dialysis

- Done at home every day, seven days a week
- The lining of your belly is the filter
- A catheter is placed in your belly or abdominal cavity
- Your blood is cleaned inside your body
- Trained by a dialysis nurse
- Dialysis can be done by hand (manually), or using a machine (cycler) or a combination
- Must be done under very clean conditions
- More independence
- Need clean area & space for supplies

Transplant

- Kidney transplants use a deceased donor(cadaver) or a living related or unrelated donor kidney
- Must go through testing prior to being listed for a transplant

- Not a cure – requires taking medications every day for life
- Medications may have side effects
- Waiting list for deceased donor kidney may take years

Medical Management without dialysis

- Some people choose not to have dialysis
- Other serious medical conditions in addition to kidney disease are a reason people with kidney disease may choose not to have dialysis
- Without dialysis you may live for several days to several weeks
- The healthcare team will do everything possible to keep you comfortable

Please contact your social worker if you would like more information about any of these treatment options.

MOTTEP News

Sharing the Gift of Life: Organ, Eye and Tissue Donation

With more than 121,000 men, women and children in desperate need of lifesaving or healing transplants, it is imperative to register more donors to save more lives. Now is a time when the donation and transplant community focuses on the important role faith plays in many people's lives and how it influences the decision to help another human being through the gift of organ, eye and tissue donation.

We invite you to share the message of donation with your pastor and church members and encourage them to register as organ, eye and tissue donors. Research has shown that one of the main reasons people fail to register as organ and tissue donors is the belief that it is against their religion. In fact, all of the world's

major religions consider organ donation to be a final act of kindness and generosity. With your help, we can eliminate this very common misconception and prevent needless suffering and death.

If you would like to become an advocate for organ, eye and tissue donation; have your church or faith-based organization participate in Cleveland MOTTEP's faith-based outreach program and receive free materials, please contact Linda D. Kimble at lindad.kimble@cdcare.org or call 216-229-6170x137

To find out more about Cleveland MOTTEP's programs, visit www.clevelandmottep.org



"Like" us on Facebook:

www.facebook.com/pages/Cleveland-Mottep/338427276244121



Creative Arts News

Introducing Our New Art Therapist

**Welcome to our new Art Therapist,
Lu Higginbottom
(MA, AT, NCC,IPC)**

Lu has a Master's in Art Therapy and a Bachelor of Fine Arts. She completed her clinical training at Lutheran Hospital, the Art Studio and in the Alternative Public School system with at risk teens. She most recently worked as a therapist infusing art-therapy as an essential element in her practice. She wholeheartedly believes in the power of art... to open doors, provided perspective, evoke reaction and encourage expression. She is very active in the local arts community, and in Community Arts/Outreach Organizations. Lu works Monday, Tuesday, Wednesday, and Thursday at CDC East and Friday at CDC Shaker.

The stained glass project was one of her first projects. Everyone seemed to enjoy it.

Make your Own!

1. Remove backing from a glass picture frame that has metal tabs that you push down to hold glass in place.
2. Select an image and tape down to bottom of glass or use your own image.
3. Begin leading using liquid lead and let dry 24 hours. Clean up any mistakes with old eraser or paintbrush
4. Apply glass-type paint to unleaded area of glass.
5. Spray sealer on glass and embellish with hook-eye chains to hang.



Artist in Focus

Keir Pollard,
CDC of Shaker

Keir is 43 years old and has been on dialysis almost two years. She said her dad named her Keir after a star in his favorite movie, “2001, A Space Odyssey.” The actor was Keir Dullea but she does not mind having a man’s name.

Keir started on dialysis at Regency Hospital. She came to CDC-Shaker after being on dialysis for 2 months. When asked what caused her to be put on dialysis, she said it was primarily congestive heart failure. She also has hypertension and diabetes. Kidney failure and dialysis run in her family. Her grandmother was the first black woman to have a kidney transplant in this country. Her brother has been on dialysis for 4 years.

Keir noticed that she was gaining excessive weight and had put on 217 pounds of water. To date she has lost nearly 200 pounds. She feels so good that she is now able to walk without

a cane. She is starting the evaluation process for a kidney transplant. One of her relatives is a match. She has two children, Maurice, 23, a student at Tri-C and Cleveland State and is a licensed genealogist, and Karliea, a junior at Lutheran East. The kids encourage her to eat healthy so she can get a transplant. Her mother and father help her a lot. They call themselves the “Food Patrol” and don’t allow her to have salt, just herbs. She watches her sugar and eats fish, chicken and turkey.

Keir loves art therapy and has always been involved in art. She learned to draw from her Uncle Ronnie who is a hand blown glass artist. She brings home her projects from CDC. Keir also likes to build doll houses, needlepoint and crochet. Her passion is painting and has recently finished a picture of a violin done on four canvases. She has also done some acrylic paintings inspired by Georgia O’Keefe.

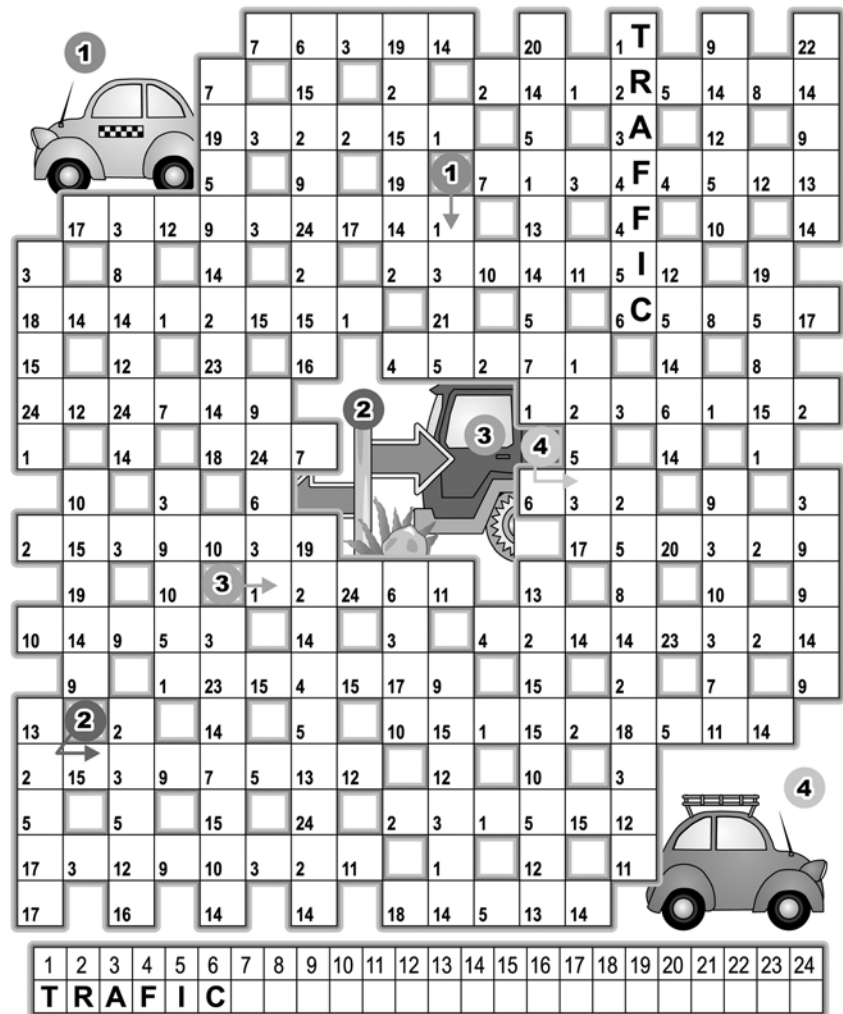


Keir considers herself a spiritual person but it got to the point that she almost lost her faith. She asked “Why me?” Dialysis has been a real life change but she has come to accept it. She now can walk up the stairs and drive a car. She really misses working as an STNA at University Hospitals where she worked for 14 years and before that 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? She said to keep the faith, keep doing things and don’t stop living your life. Dialysis is the step to another better life.

For the Fun of It

Word Puzzle



1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24

T R A F F I C

ANSWER: 1-T, 2-R, 3-A, 4-F, 5-F, 6-I, 7-C, 8-T, 9-R, 10-A, 11-C, 12-T, 13-R, 14-A, 15-F, 16-C, 17-T, 18-R, 19-A, 20-F, 21-I, 22-C, 23-T, 24-R.

Codebreaker (or Codeword) Word Puzzle

The number in each square corresponds to a letter. The same number represents the same letter. Crack the code and fill the grid by determining which letter relates to which number. To help you get started, four word entries have picture clues, and six letters are already in place.

Sudoku

		7	4	9		5		
					6	7		
1	9				5			6
	7	6		3				5
2			5		7			3
5				2		4	7	
7			3				5	2
		3	7					
		2		6	9	1		

	9	6				1	2	7
				2				6
2		3	1		4	7		9
		1		8		9		
	4		9		1		6	
		9		7		3		
5		8	6		3	2		1
1				9				3
	3	2				6	4	

Patient Profile



DEBORAH JACKSON

CDC of Mentor
T-Th-S 2nd Shift

Deborah Jackson is a laid back, unassuming, kind-hearted person with a great outlook on life. She started dialysis two years ago after having known that her kidneys were failing due to complications from high blood pressure and diabetes. The time to start on dialysis arrived while she was hospitalized for double pneumonia. Like most folks starting on dialysis, Deborah struggled with the impact kidney failure would have on her life, but only briefly.

Deborah's quick acceptance of life on dialysis can be attributed to her unwavering faith and the counsel of a fellow pastor. She is an ordained minister and serves as the pastor of Grand Valley Church of the Nazarene in Orwell. Currently, she is working towards completion of her Bachelor's Degree in Pastoral Ministries through online classes at Nazarene Bible College. Deborah shared that education is her hobby and can often be found studying at CDC.

She also enjoys reading Mary Higgins Clark's psychological thriller books when not reading textbooks.

She was born in Manhattan, New York, but was raised in Jacksonville, Texas. Deborah met and married her husband of forty-one years when she was sixteen years old. They married young and have a family with one son and two daughters. In 1998, Deborah and Sam filled what they could get into a U-Haul trailer and left everything else behind to pursue a job opportunity for Sam. He worked in the injection mold plastic industry at that time. Initially, they were living in Lorain County, but moved to Ashtabula County when Deborah was assigned as the Pastor in Orwell. Sam has since

"Dialysis does not define me; it is a condition I live with. When I'm at dialysis I concentrate on dialysis. When I'm not on dialysis, I concentrate on living the life I was called to live."

retired and has a hobby of rebuilding old computers to give to those who cannot afford them. Sam has some serious health issues, but he and Deborah credit their Creator for the continued strength and grace to serve others.

Deborah and Sam remain very close with their children's families, which includes eight grandchildren. Two of the families live in South Carolina with the youngest child in Texas.

Deborah and Sam are planning a trip this summer to visit them. This will not be Deborah's first time having dialysis out of state as she has gone to Texas, Virginia, and other locations for church events. It will not be the last trip either!

Deborah has a wonderful attitude about dialysis, sharing that "dialysis does not define me; it is a condition I live with. When I'm at dialysis I concentrate on dialysis. When I'm not on dialysis, I concentrate on living the life I was called to live." She encourages fellow patients to "trust the people who take care of you, follow the plans they make, and come for treatments." She also offers, "It is best to take it one day at a time,

and to trust that God knows what He is doing." May we all take to heart Deborah's words of wisdom.

Patient Profile



PATRICIA FUTURE

CDC of Garfield

Monday, Wednesday, Friday, 2nd shift

Patricia Future is a ray of sunshine with her warm smile and cheerful personality. Patricia also brightens up CDC with wonderful crafts she loves to make. Currently the Garfield lobby features a vase of tissue and tulpe flowers that Patricia made in celebration of the warmer weather. She has a passion for crafting and welcomes the opportunity to teach folks how to make things or suggest ideas for favors or decorations for a party they may be having.

Thanksgiving of 2013 was a turning point for Patricia, when she was hospitalized for kidney failure. She was warned a few years earlier that her kidneys were failing, but wasn't willing to face the reality despite all of the health problems she was having including fatigue and significant

weight gain. She even fought seeing a doctor when her co-workers thought she was having an allergic reaction as she knew the problem was related to her kidneys. Patricia is very grateful to her daughter for insisting that she go to the ER.

No stranger to dialysis, Patricia's sister, Deb, who currently is a patient at CDC of Garfield and her mother, who has passed, was also on dialysis.

As a fairly new patient, Patricia has made the transition very well and is amazed at how well she now feels. She shared that she lost 45 pounds of fluids when hospitalized for her first dialysis treatments.

Patricia comes from a large, close-knit family. Raised on the boarder of Cleveland and Garfield Heights, she graduated from John F. Kenney high school and went on to cosmetology school. She worked as a hair stylist for 20 years, while also working as

an STNA. Patricia is also the proud mother of 3 and is currently raising her 2 year old granddaughter.

Patricia comes to dialysis with a positive attitude, sharing that she wakes each day reminding herself it is going to be a better day. Many of her friends don't know that she is on dialysis as she does not want anyone feeling sorry for her. Her optimistic outlook can be attributed to her strong faith and supportive family. Patricia encourages fellow patients to "keep a positive mind and positive things will happen." Motivating words from an inspirational woman.

"Her optimistic outlook can be attributed to her strong faith and supportive family."

Healthy Eating



Chocolate Balsamic Fruit Kabobs with Coconut-Lime Yogurt Dip

Serving size is one kabob (serves 15)
Recipe may be adjusted to the amount you would like to serve at one time.

Ingredients

Kabobs:

- 15 wooden skewers
- 1/4 cup dried unsweetened toasted coconut (*optional*)
- 1 pint strawberries, pitted
- 1 cup blueberries
- 1/2 fresh pineapple (*canned pineapple may be substituted*)
- 2 apples
- 30 grapes
- 1 container of blackberries
- 1 tablespoon butter

Marinade:

- 1/4 cup balsamic vinaigrette
- 2 teaspoons dark cocoa powder
- 2 teaspoons honey
- Pinch of cayenne pepper (*optional*)

Yogurt Dip:

- 1 cup plain non-fat Greek yogurt
- 2 tablespoons honey
- 1 teaspoon vanilla
- 2 teaspoons lime juice
- 1/2 teaspoon coconut extract
- 1/3 teaspoon cinnamon

Recipe on Back

Recipe adapted from recipe written by Beth Michaels, RD, LDN taken from the May/June, 2014 issue of Food and Nutrition Magazine

Fluid Management in the Summer Months

Fluid intake and fluid gains can be a very hard thing for a dialysis patient to manage. This becomes even harder in the hot summer months. The 4 points below will help you to better manage your daily fluid intake, fluid gains between dialysis treatments, and thirst.

How much fluid can I have each day?

- Daily fluid allowance is based on urine output (if you have any) and your body size.

- Most patients are allowed 4 cups a day. If you are smaller, the amount may be less. However, if you are a larger person, you could drink a little more.
- Your dietitian can help you identify how much you can drink each day.

What should I count as fluid?

- Anything you drink (i.e. coffee, tea, soda, water, broth, etc.)
- Anything that melts at room temperature (i.e. popsicles, ice, pudding, yogurt, ice cream, etc.)



Chocolate Balsamic Fruit Kabobs with Coconut-Lime Yogurt Dip



Preparation

1. Soak wooden skewers in water for at least 15 minutes before grilling.
2. Wash all fruit and cut pineapple, apples and any large strawberries into roughly 1-inch pieces. Add fruit to skewers.
3. Whisk all marinade ingredients together in a small bowl and set aside.
4. Combine dipping sauce ingredients along with 2 tablespoons of the toasted coconut in another small bowl and set aside.
5. Adjust grill to medium-high heat and brush lightly with butter. Layer skewers onto the grill, brushing all sides with the marinade.
6. Turn gently after fruit is seared and lightly cooked, approximately 2–3 minutes per side.
7. Sprinkle kabobs with remaining toasted coconut and serve with dip.

Note: 1/2 cup fruit = 1 fruit serving; 1/2 cup yogurt dip = 1 milk serving

How is the amount of fluid I drink and the weight I gain between dialysis treatments related?

- Every patient has a “dry weight” set by their doctor. Your dry weight is the target weight aimed for at the end of your treatment.
- The difference between your weight at the end of your last treatment and your weight at the start of your next treatment is called your fluid gain.

- It is important to be aware of how much fluid you are gaining between each dialysis treatment. Discuss your fluid gains with your dialysis care team so you know if your fluid gains are too high.
- Drinking too much fluid can cause you to gain too much weight between dialysis treatments.
- Dialysis helps to remove fluid, however, removing too much fluid, too fast, can be dangerous for your heart. It can also affect your blood pressure and your leg muscles may cramp.

TIPS TO COMBAT THIRST

- Avoid salt and salty foods because they will make you thirsty. Examples include potato chips, hot dogs, sausage, pickles, canned soup, and deli meats.
- Sip fluids, do NOT gulp!
- Use hard candy, chewing gum, or small pieces of frozen fruit to produce saliva and combat thirst.
- Try over the counter “dry mouth” sprays or mouthwashes. Two common brands are Oasis and Biotene.

