



Patient Voice: Caring for Myself—Michael C.

I first learned about in-center self-care from my clinic staff in Dec. 2018 after being on in-center hemodialysis for only one month. I decided to move forward with self-care because I wanted more control over my treatment. I chose to remain in-center instead of doing home hemodialysis because I live alone and was concerned about having an emergency at home. Though I am good at mechanical things and am comfortable with technology, it still took me about one year to become fully trained. There was quite a bit to learn!

Some examples include:

- Taking my own vitals and listening to my bruit with a stethoscope.
- Setting up and priming the machine.
- Self-cannulating and monitoring my treatment.
- Entering data into the dialysis company’s system.
- Pushing medications.
- Returning my blood and disconnecting myself from the machine.
- Cleaning the machine.



Self-care is currently the best fit for me because I am still young and healthy enough to perform all the self-care tasks and, if there is an emergency, I know what to do. Self-care has increased my confidence for handling other health problems, such as atrial fibrillation, infections, and blood clots. Doing self-care in-center also makes it easier to consider doing home hemodialysis if I change my mind in the future. If you’re considering doing self-care in your dialysis center, talk to your medical team and to other self-care patients to get their perspective.

For additional information on in-center self-care dialysis visit

<https://lifeoptions.org/assets/pdfs/icv4n3.pdf>.

Top Tips to Care for your Vascular Access Site



Vascular Access Type	Care Tips
Fistula and Graft	<ul style="list-style-type: none"> • Wash your access site before you are seated in your treatment chair for dialysis. • Always wash your hands with antimicrobial soap before touching your access. • Feel for a pulse (also called a thrill) daily. Ask your nurse or patient care technician how to check for a thrill. • Do not sleep on your access arm, carry more than 10 pounds with your access arm, or wear tight jewelry or clothing over your access site.
Catheter	<ul style="list-style-type: none"> • Keep your catheter dressing dry and intact. • Do not remove the dressing between treatments.
All Accesses	<ul style="list-style-type: none"> • Report any redness, swelling, drainage, pain, scabbing, or warmth to your dialysis care team. • Protect your access to avoid bumping or injuring your access. • Prevent anyone from drawing blood or doing any other procedures, such as taking your blood pressure, with your access arm or catheter.

You can find out more about the ESRD Network in your area by visiting www.hsag.com/esrd-networks.

Can You Be Discharged From Your Dialysis Facility?

Yes, dialysis patients can be involuntarily discharged (IVD) or transferred (IVT) from a dialysis facility. Medicare believes IVDs and IVTs should be rare and outlines very specific situations that allow a facility to discharge someone. Patients can be discharged or transferred from the dialysis facility for the following reasons:

- If they harm or threaten to harm others.
- If the facility cannot meet their medical needs.
- If the facility is not getting paid.
- If a patient's behavior is so disruptive or abusive that it disturbs the working of the facility.

The doctor and management at the facility must agree on discharging or transferring a patient and then follow a specific process outlined by the Network. The Network and the State Survey Agency review IVD and IVT documentation to make sure facilities follow the process. When an IVD or IVT occurs, the facility must assist the patient with placement at another outpatient dialysis facility. If placement is not possible, the patient will need to go to a hospital emergency room for treatment. Going to a hospital for dialysis can be stressful for patients, and they do not always receive the same services they receive in an outpatient facility.

- Talk to your dialysis facility if you have any questions or are facing a possible IVD/IVT. You can also reach out to your ESRD Network or the State Survey Agency in your area.

What is the ICH-CAHPS Survey?

The In-Center Hemodialysis Consumer Assessment of Healthcare Providers and Systems (ICH-CAHPS®)* survey asks in-center hemodialysis patients about the experience of the care they receive from their dialysis facility and staff. Surveys are sent by mail twice a year. Additional information patients should know:

- All facilities with over 30 adult patients treated in a year are required by Medicare to have their patients surveyed.
- Surveys are administered by companies not connected to the dialysis facility.
- Survey questions focus on kidney doctors' communication and caring, quality of dialysis center care and operations, and providing information to patients.
- Survey results are given to the dialysis center, but patient names are not shared.
- Dialysis facility staff cannot help patients answer the questions or attempt to influence answers, and facilities cannot offer incentives for high ratings.

Do not throw the survey away, your voice matters! You can also contact ichcahps@rti.org or call 866.245.8083 for more information.

Source: <https://ichcahps.org/>

*CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

Feedback!

Let us know how we're doing:

<https://www.surveymonkey.com/r/esrdptnewsletter>



If you have questions about how to voice a concern or grievance, check out this helpful tool created BY patients FOR patients: www.esrdnetworks.org/resources/toolkits/patient-toolkits/dialysis-patient-grievance-toolkit-1. To file a grievance, please contact your network below:

Network 7: Florida

T: 800.826.3773

E: NW7info@hsag.com

www.hsag.com/ESRDNetwork7

3000 Bayport Dr., Suite 300

Tampa, FL 33607

Network 13: Arkansas, Louisiana, Oklahoma

T: 800.472.8664

E: NW13info@hsag.com

www.hsag.com/ESRDNetwork13

4200 Perimeter Center Dr., Suite 102

Oklahoma City, OK 73112

Network 15: Arizona, Colorado, Nevada, New Mexico, Utah, Wyoming

T: 800.783.8818

E: NW15info@hsag.com

www.hsag.com/ESRDNetwork15

3025 S. Parker Rd., Suite 820

Aurora, CO 80014

Network 17: American Samoa, Guam, Hawaii, Northern California, Northern Mariana Islands

T: 800.232.3773

E: NW17info@hsag.com

www.hsag.com/ESRDNetwork17

533 Airport Blvd., Suite 400

Burlingame, CA 94010

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