



KIDNEY KRONICLE: SPECIAL EDITION COVID-19 October 2020



MESSAGE FROM THE PFAC CHAIR



Betty Clinton

Hello,

My name is Betty and I am the chair of your Patient Family Advisory Committee. We have created this special addition of the Kidney Kronicle to focus on COVID-19, based on feedback to our committee that you would like more information. My hope is that you find the information shared on the precautions that are being taken for your health and safety helpful.

Due to the COVID-19 pandemic, the PFAC in-person visits to the Hemodialysis and Satellite units were stopped. We miss these visits as it would give us an opportunity to meet with you and talk

about any non-medical problems we could assist with and gain feedback to report to our council concerning your patient experience. Since we are now doing all of our meetings virtually, which means there is no need to travel to London for meetings, I would like to encourage all of our patients to consider joining this council as ***it is your council!*** We have some of the best people involved with this council. For example, in attendance at every meeting, is the Director of the renal program April Mullen and the renal Manager Lesley Pringle, who leads and is committed to the patient experience. We also have committed and experienced patients and family members on our PFAC who would love the opportunity to support new members. We need you to join so our PFAC can grow and continue to bring the patient perspective to the excellent work of the renal program.

The next page has information on how to become a patient and family advisor. Please feel free to reach out to me for information on how you can add your voice to this council at:

bettycpfac@gmail.com

Stay safe!

Betty C





Patient and Family Partners Program

The Patient & Family Partners Program at LHSC and the Children's Hospital connects patients, families and caregivers to projects across the hospital seeking to include the patient perspective.

Who is a Patient or Family Partner?

A person who has had recent experience (generally within 3 years) being a patient, or the loved one of a patient, and who is interested in partnering with staff, physicians and/or leaders to provide direct input into policies, programs and practices which affect patient care and services.

Patient and Family Partners are selected through a screening process inclusive of an interview; vulnerable screen check; and attendance at an LHSC Advisor Orientation.

What are engagement opportunities?

Each is unique and depends on the needs of a particular project. Some examples of opportunities include:

- Joining advisory committees, quality improvement councils, and working groups
- Helping develop programs and resources
- Telling personal healthcare stories at workshops, conferences, and other hospital-led events
- Participating in surveys, focus groups and other ways of providing feedback

I want to learn more! Where do I start?

To learn more about the renal PFAC:

Email: bettycpfac@gmail.com or renaladvisor@lhsc.on.ca
Telephone: 519-685-8500 ext. 34411

The Patient and Family Partners Program: <https://intra.lhsc.on.ca/patient-experience/patient-engagement/patient-and-family-partners-program>

MESSAGE FROM THE DIRECTOR



This special second edition of the Kidney Kronicle is focused on providing you with information about how our program is here to safely support your renal care during these troubling times of the COVID-19 pandemic. We recognize and acknowledge that the pandemic has been frightening for people on dialysis, those with transplants, those immunocompromised or immunosuppressed, and others with advanced chronic kidney disease, as well as families, loved ones, and friends. Our hope is that this edition of the Kidney Kronicle will meet your information needs and offers support to you and your families.

Some of our program strategies to prevent the spread of infection include:



- Masks for all patients and staff
- Contact and droplet precautions
- Grouping COVID positive and COVID suspected patients for treatment in a single area
- Testing patients, particularly those from long-term care homes
- Maximum physical separation of the most vulnerable patients
- Maintaining appropriate social distancing in dialysis units and clinic waiting rooms
- Offering virtual care options where possible
- General Nephrology clinics, Multi-Care Kidney Clinics (MCKC) and Glomerulonephritis (GN) & Pregnancy clinics, and Home Dialysis clinics are using virtual platforms (video conferencing or telephone)
- In-person visits continue for MCKC patients who are starting/will soon require dialysis treatments

What is the Ontario Renal Network doing in response to COVID-19?

COVID-19 Teleconferences – Weekly meetings with kidney programs to discuss challenges, opportunities, and share information about good practices.

COVID-19 Information & Resources for Patients and Families – A resource for patients and families on COVID-19.

<https://www.ontariorenalnetwork.ca/en/kidney-care-resources/living-with-chronic-kidney-disease/covid19>

COVID-19 Travel Program – As of March 11, 2020, the ORN has provided funding for alternative travel arrangements when some transportation services were discontinued due to COVID-19 to ensure patients can continue receiving dialysis treatments.

COVID-19 Case Tracker – A data collection tool was developed to support frequent tracking of chronic dialysis and acute kidney injury patients with COVID-19.

COVID-19 Surveillance & Testing in In-Centre Hemodialysis Units – COVID-19 testing (swabbing) was offered to all dialysis staff and in-centre hemodialysis (ICHD) patients across all kidney programs during June 8-30, 2020.

COVID-19 Infection Control Practices – A data collection tool was developed to support tracking of practices in in-centre hemodialysis (ICHD) units during COVID-19.

Stay safe and stay well,

April Mullen



Covid-19 Practices Update:

First, we must say thanks to you, our patients, for your commitment to keeping yourselves, your peers, and your caregivers safe and well. With your great efforts, we safely navigated the first wave of the COVID pandemic. We all worked together and tolerated the difficult situation of rapidly changing rules and guidelines. We all worked through limitations on visiting, food and drink and pre-screening calls. Let's take a minute to congratulate ourselves for a job well done!

The Middlesex Health Unit this week has identified that the London region is now in the beginning of the second wave of COVID infections. The health unit reports that the peak of infections will likely be within the next 2-3 weeks.

The key to keeping the dialysis unit safe continues to be knowing who is coming for treatment that may be unwell, or who has been exposed to someone who is sick or unwell. Currently we are relying on all dialysis patients to “**Self-Screen**”. This means taking a moment every day to assess for any symptoms that may or may not be related to COVID-19.

Should you have any of the symptoms that are listed on the following page, or are feeling unwell in any way, **please call into the dialysis unit**. This helps us prepare for someone who might be unwell and plan for them to be assessed as soon as they arrive. Report to the front door screeners that you are unwell.

Here are some things you can do to help keep our dialysis unit healthy:

- 1) Please continue to fully participate with self-screening.
- 2) Wear a mask while in public and avoid crowded spaces.
- 3) Wash your hands well and frequently.
- 4) Only bring accepted items from home into the unit with you (a phone, a tablet or a book).

Thank you for your continued patience and flexibility in this challenging time. You inspire us every day with your courage and resilience!

Your Renal
Team



Self-Screen prior to coming to dialysis!



COVID-19

Do you have any of the following:



Fever



Cough



Difficulty breathing



Sore throat,
trouble swallowing



Runny nose



Loss of taste or
smell



Not feeling well



Nausea, vomiting,
diarrhea



Have you been in close contact with someone who is sick or has confirmed COVID-19 in the past 14 days?



Have you returned from travel outside Canada in the past 14 days?

Should you answer yes to any of the above questions please call the dialysis unit.

It is important that we know if you are unwell prior to arriving to dialysis.

*Image from Toronto Public Health

Believing you can

Being a renal patient has taken extra resilience since March, when the Covid-19 virus started changing things. There is a whole new awareness around the need to keep ourselves safe, and this can be a mental weight to carry every day. Things have changed and we no longer can have our loved ones attend appointments and treatments with us, and what we are allowed to bring along to make us comfortable and keep us occupied has been restricted. Maybe our normal routines, visits, and favourite outings have changed significantly too – all making us miss and grieve over what used to be and forcing us to adjust even more when things aren't very easy in the first place.

You are not alone. So many people are feeling this way. These changes stretch us. They cause us stress at times, and distress at other times.

So, what makes us resilient? And how can we stay resilient through this period that we hoped would be long over by now but just keeps on going?

One of the key tools needed to be resilient in the face of adversity is **self-efficacy**. This means you have to believe you can do this! Having renal disease and with the Covid pandemic upon us, you understand that the world and your life is particularly challenging right now. But you will get through it. You will be able to succeed despite all the challenges.

Self Efficacy: This involves a high level of self confidence and a self belief that one can meet any challenge. Self efficacy includes the understanding that although the world is challenging, one has the ability to succeed despite these challenges.

You, like every other normal person will have days when it all seems so much. But even in your fear about getting sick, in your stress about how long Covid will go on, in your sadness about the losses you have experienced, and your anger about how much things have changed, having self-efficacy means that underneath it all, you feel confident in yourself and your ability to endure it.

But what if you aren't feeling so confident in yourself right now? Fear and anxiety can undermine our trust in ourselves. How do you actively try to improve your feelings of self-efficacy?

Here are a few things you can try:

- 1. Positive self-talk:** Set aside a few minutes each day to praise yourself and repeat affirmations like – “I am trying hard”, “I can overcome this”, “I am doing good.” This can help in creating a strong sense of self. Try showering compliments, motivating yourself to keep trying hard or asking yourself what is making you happy or sad.
- 2. Look back at past achievements:** Instead of focusing on times you've messed up or struggled, focus more on what you have gained and how you have succeeded. Recalling achievements and past successes reignite self-confidence and make us feel that if we could do it then, we can do it now. You've been through some pretty difficult stuff in your lifetime. Make a list or jot some notes about how you came through those times and keep it on hand to prevent yourself from losing perspective.
- 3. The Three Things Exercise:** This is a self-help measure that allows us to keep track of our daily activities and how they make us feel. It is also a great way to stay goal-oriented which is crucial to self-efficacy and helps us prioritize our tasks without much effort. The practice is simple as the following explains:

List three things that you did in the past week that went well?

1. _____
2. _____
3. _____

How did they make you feel?

1. _____
2. _____
3. _____

What are the three things/achievements that you wish to accomplish in the next few weeks/months?

1. _____
2. _____
3. _____

How would you feel after you have accomplished them all?

1. _____
2. _____
3. _____

Being a renal patient has never been easy, and it is certainly more challenging now. You all are doing so great being resilient and adapting to all the changes. Give yourself some self-love and recognize this. Let us know how we can continue to support you in these far from normal times.

Selena Buma, MSW, RSW
Renal social worker



Home Dialysis Hotspot!

Introducing a new feature to the Kidney Kronicle...The Home Dialysis Hotspot ! Stay tuned for more interesting features about home dialysis!

Did you Know....

25% of people on dialysis in our region are on home dialysis?

- At LHSC we have 157 people on peritoneal dialysis, and 50 people on Home hemodialysis.
- Since April 1, **49 people** have trained to do their treatments at home!



Home Hemo dialysis



Peritoneal dialysis machine

If you are already on hemodialysis and would like to know more about Peritoneal dialysis or home hemodialysis please ask any of our dialysis team members, or feel free to call or flag down our home dialysis case managers.



Carolyn Ingram

UH, KCC and satellites
519 685 8500 ext. 34483
Carolyn.ingram@lhsc.on.ca



Louise Turk Harron

VH, KCC and satellites
519 685 8500 ext. 75606
Louise.TurkHarron@lhsc.on.ca



(KIDNEY-FRIENDLY) PERFECT FALL RECIPES

“I Can’t Believe It’s Not Pumpkin Pie!”

Ingredients:

- 3 cups (750 mL) carrots, boiled
- 1 egg white
- 150 ml half and half cream
- 1 Tbsp (15 mL) all purpose flour
- 1 tsp (5 mL) vanilla extract
- 1 Graham cracker pie crust



Preparation:

In blender, container or large mixing bowl, cover and blend or beat all ingredients except crust until well blended. Pour into crust. Bake on bottom rack of preheated 375°F (190°C) oven until knife inserted near center comes out clean, about 55 to 60 minutes. Cool on wire rack. Serve warm or chilled with a dollop of whipped cream or Cool Whip. ENJOY!

Makes 6 servings.

Using your renal poster, each serving counts as:

- 1 Fruits and Vegetables
- 1 Grains and Starches



Mashed Cauliflower

Ingredients:

- 5 cups of boiled and drained cauliflower
- 1 Tablespoon of olive oil
- 1 medium clove of garlic
- 3 teaspoons of parmesan cheese

Preparation:

To make the cauliflower:

- In a sauce pan, bring water to boil.
- Add the cauliflower and cook until it’s tender and soft.
- Reserve ¼ cup of the cooking liquid.
- Drain the cauliflower .

To make the Mashed Cauliflower:

- Transfer the cauliflower to a food processor.
- Add the olive oil and garlic.
- Blend it until smooth while adding the reserved liquid, one table spoon at a time.
- Sprinkle with parmesan cheese to serve.



Include each serving (¾ cup) as:
1 Fruits and Vegetables

FALL WORD SEARCH

Fall Word Search

C U W V B F K S Q S W H A R V E S T H G
O Y S M A N T A T O U U O G K R P M L E
A C F D F O O T B A L L W B T Q W O Z B
S E E Z Z A G E R Y N T U E N I B E X R
W J P N X T B U W A A P P L E C I D E R
E A U O A H U D C N U T U U U N C T A Q
A P R V S A U U R K K P P Z M H R B C T
T P L E A N N O J Y S R P C U P A G I C
E L E M J K C A D B E F W K E U K Y M K
R E A B U S K F Y O P L I O H Z E I Y B
P S V E L G P H L N T Z H P S J S Q N O
Q Q E R S I Q A W F E Y E M U W E Q J O
J N S O M V V C N I M C O Q N R M W K T
T B M E K I F Z B R B R Y C F K N L J S
V Y A P N N Q K G E E A V G L U T A A O
V N R R D G H N A B R U Q T O O N I G V
C Y A O O P I Q O N H T X F W J Z Y P E
L C X F E A L T K O E U W Z E S U P P B
R D E F I D C W K O Q M Z Q R B F Z U S
D R Q R J O V Z O Y W N C J G R K N E U



CORN

AUTUMN

BONFIRE

BOOTS

OCTOBER

RAKE

THANKSGIVING

HARVEST

LEAVES

CARNIVAL

APPLES

APPLE CIDER

PUMPKIN

FOOTBALL

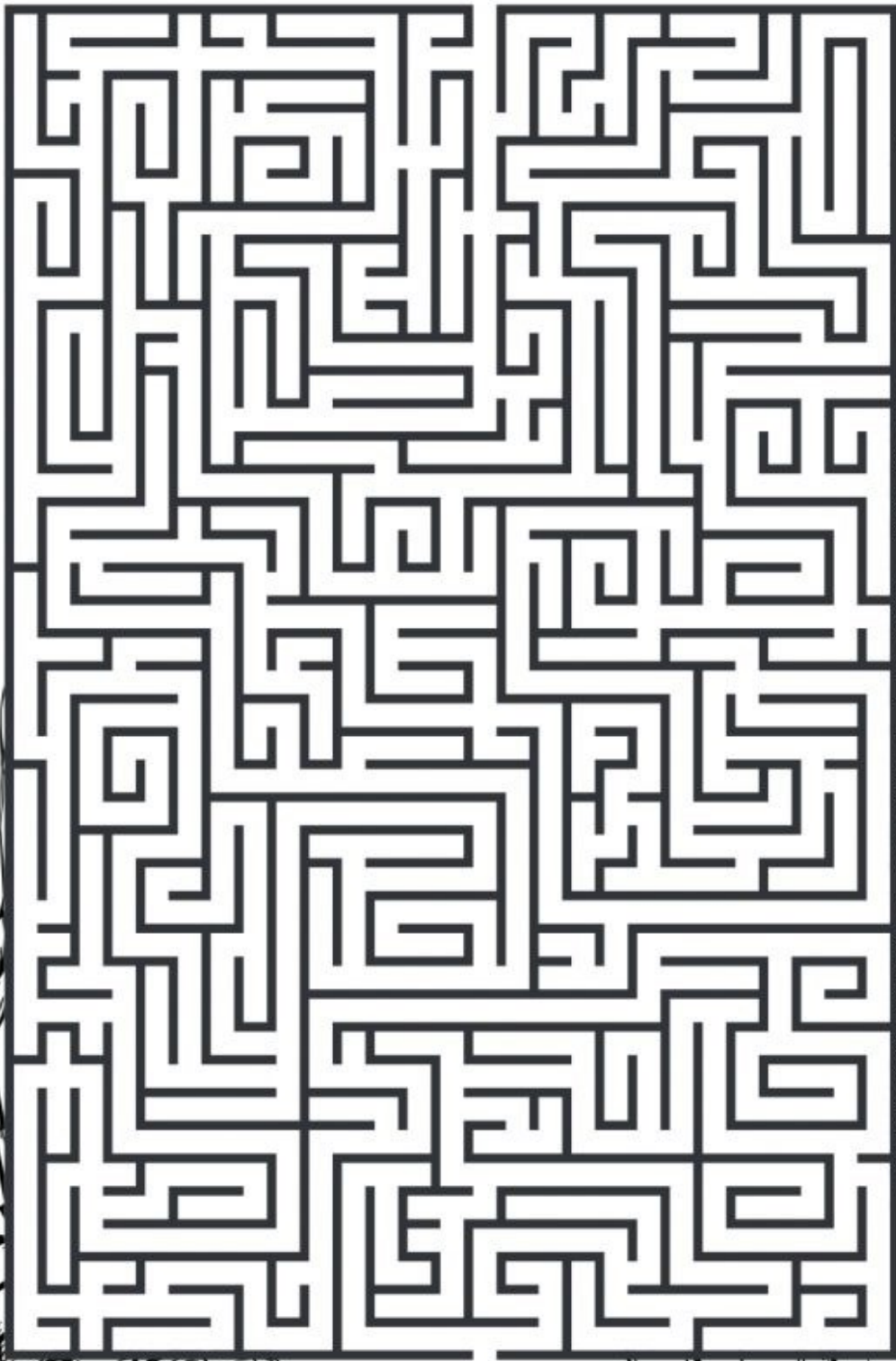
SWEATER

NOVEMBER

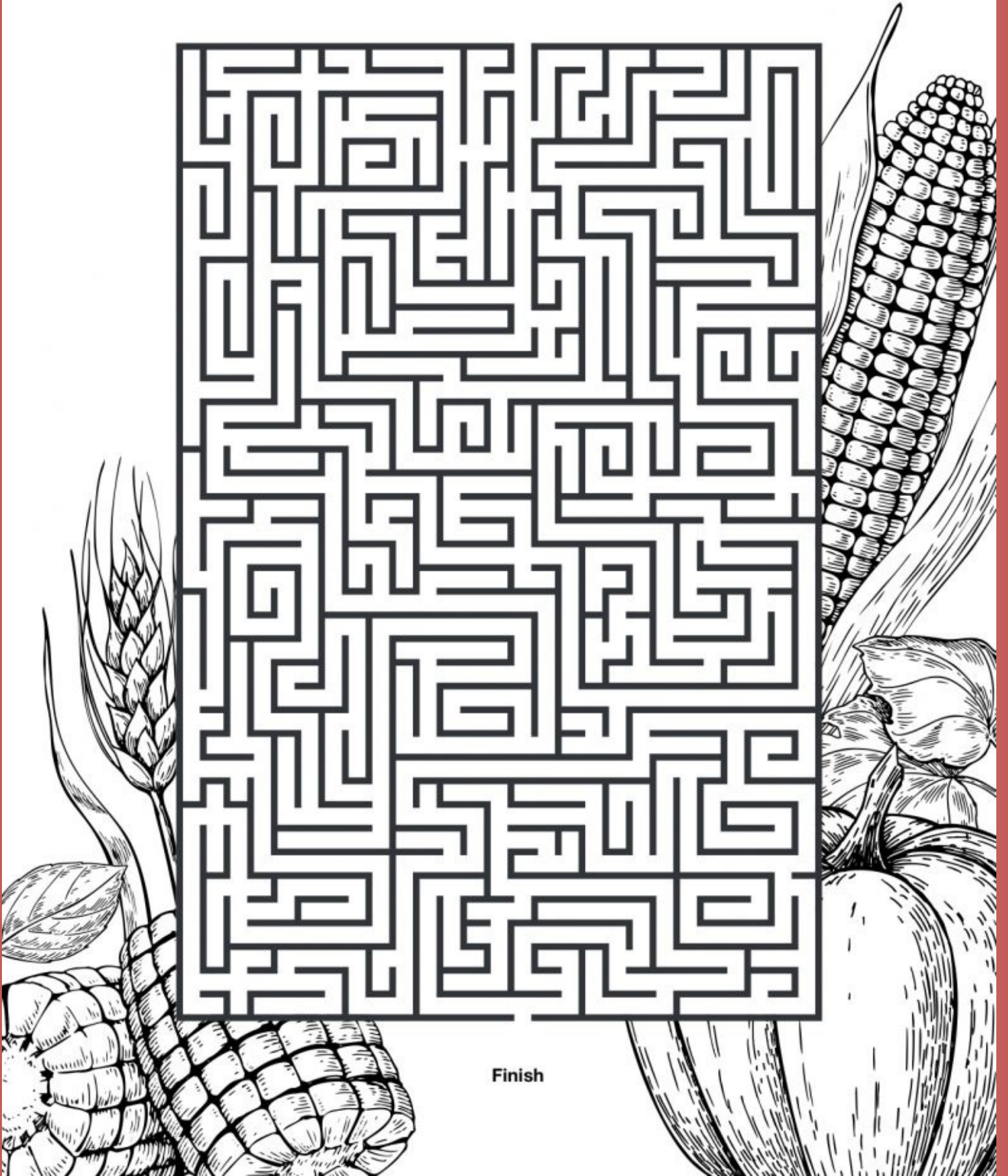
SEPTEMBER

SUNFLOWER





Finish





happy fall Y' ALL

The renal program will be the focus of an upcoming media communication feature recognizing how quickly services pivoted to adapt to the pandemic in March. Dr. House, April Mullen and Betty Clinton led the response and planning for the renal program. Early adaptation to the new environment enabled the program to continuously provide life-giving care to patients and families at LHSC and the program’s eight satellite sites in Southwestern Ontario to ensure that patients continued to receive the care they needed when and where they needed it.



Pictured above: Left - Dr. Andrew House, Chair/Chief Western University Division of Nephrology, Centre – Betty Clinton, PFAC Chair, Right – April Mullen, Director South West Regional Renal Program.



www.lhsc.on.ca/renal

Newsletter brought to you by the Renal Patient & Family Advisory Council at London Health Sciences Centre