

# THE RAM PAGE

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## OVERVIEW OF RAM

Membership of the Renal Advisory Meeting (RAM) is made up of a Kidney specialist, a nurse from the Greater Southern Area Health Service, a dietitian, a social worker, a senior nurse from each Renal Service, a patient carer and patient representatives from CCDC, Northside dialysis unit, Ward 8A Acute dialysis Unit, Home dialysis, peritoneal dialysis and transplantation.

CCDC has two patient representatives on the Renal Advisory meeting (RAM). They are Mary Ann Kilpatrick and Louise Blue.

RAM meets on the first Tuesday of each month at 9:20am at the Canberra Hospital (TCH).

The Renal advisory meeting objectives are to provide a forum where information, advice and assistance can be shared between staff, carers and patients of the renal unit at the TCH. We aim to improve the services by:

- ◆ understanding the needs of all stakeholders in the renal service
- ◆ identifying initiatives that may improve patient care and well being
- ◆ provide a forum where open communication can be established and distributed through various networks
- ◆ improve the services that are provided by ensuring that they are consumer driven and focussed on improving outcomes.

Kidney patients at CCDC are encouraged to talk to their representatives on RAM if they have any issues that are concerning them. Messages can be left with the administration staff at CCDC or patients are welcome to contact Louise Blue on 043 811 6818.

Louise Blue



## WHAT'S NEW AT HOME

As you are all aware the Home Therapies Team has a new face. Tim Keun left our service to use his considerable talents in another area of the hospital. His position has been filled by Anne Maguire.

The team has met and developed some goals for 2012 and we are very excited about this year. Our goals are:

1. Restructure our training program to offer as many clients as possible the opportunity to take control of their health and undertake self care at home or in a self care facility
2. Complete training of Ward 8B staff in PD bag changes, line changes, exit site dressings and peritonitis protocol
3. Review and create Standards of Practice (SOP) documents for both Home Haemodialysis and Peritoneal Dialysis
4. Work towards the co- location of the two Home Therapies modalities both philosophically and physically. There is a planning committee underway
5. Attend Home Therapies conference in March and present poster on the Self Care Unit model

We plan to focus on the first of these goals as a priority as we feel that this is an area which offers our clients the ability to ensure that dialysis fits into their lives and does not rule their existence. We wish to support those people in our service who aim to stay at work

or who have commitments during the day which require them to have a flexible dialysis schedule, something which is difficult in a large satellite unit.

Our Peritoneal Dialysis Program offers the choice of Continuous Ambulatory Peritoneal Dialysis (CAPD), a daytime system, or Automated Peritoneal Dialysis (APD), a night time system which leaves your day time free. If you are interested to know more about this therapy, please call 6244 2680

### NOCTURNAL DIALYSIS AND SELF CARE

As you know Nocturnal haemodialysis offers the best results for clients in the haemodialysis program as it allows for long dialysis which means cleaner blood and people feel so much better as a result. We want as many people as possible to discover this feeling! So if this idea sounds like something too good to be missed please contact us on 6244 4280. We will come and visit and book you in to hear from the teams involved how you too can join our group of inspiring clients who dialyse at home.

In order to achieve this goal we have advertised a new position in our unit and hope to be able to introduce a new colleague in the near future.

We are also looking at adapting our training times to meet the needs of clients who are working during the day.

					
					
					
					
					
					
					
					
					
					
					
					
					
					
					
					
					
					
					
					
					
					

## REFERRALS FOR DENTAL CARE AND MENTAL HEALTH SERVICES

Patients with a chronic medical condition, whose oral health is impacting on their general health, can be referred by their GP for Dental Services. GPs must use the *Referral Form for Dental Services* under Medicare (see [www.health.gov.au/dental](http://www.health.gov.au/dental)).

Dental services can be provided by dentists, dental specialists and dental prosthetics and eligible patients can receive up to \$4,250 in Medicare benefits for dental services over two consecutive calendar years, although in some cases patients may have out-of-pocket expenses.

Patients being managed by their GP under a GP Management Plan or Team Care Arrangements may access Mental Health services through a similar pathway after discussing and designing a mental health plan with their GP.

Further information: The *Medicare Benefits schedule* is available at [www.health.gov.au/mbsonline](http://www.health.gov.au/mbsonline)  
*Medicare Benefits Schedule Dental Services* book is available at:  
[www.health.gov.au/dental](http://www.health.gov.au/dental)

GPs can call the Medicare Provider Enquiry Line on 132 150 for further information about the referral process and patient entitlements.

## EXPRESSION OF INTEREST NORTHSIDE & PERITONEAL DIALYSIS REP

Are you currently dialysing at the  
Northside dialysis center

or are you a Peritoneal Dialysis (PD) patient?

Would you like to be a voice for the people like you?

Would you like to make changes?

If you answered yes to these questions  
please contact

Elizabeth Hallam

Ph: 6244 2920

Email: [Elizabeth.Hallam@act.gov.au](mailto:Elizabeth.Hallam@act.gov.au)

We'd love to hear from you!

## INTRODUCTION TO

## THE NEW RENAL SOCIAL WORKER

ALISON COX

My name is Alison Cox and I am the new Renal Unit Social Worker. I am available to inpatients and outpatients of the Renal Unit operating out of the Canberra Hospital, the Canberra Community Dialysis Centre, and by phone to the Northside Dialysis Centre. My primary experiences as a Social Worker before moving to Renal have been in Rehabilitation and Aged Care, however I look forward to building my knowledge base in Renal and getting to know many of the patients who use the service.

Social Work services available in the Renal Unit include:

- ◆ Assessment: identifying with you the issues, concerns or areas where you feel you need assistance and the personal and community resources that may be able to support you
- ◆ Counselling: a change in your health status may raise new issues you want to discuss with a social worker
- ◆ Discharge planning from an inpatient stay: Where you have complex discharge needs, the social worker can discuss these with you and help arrange appropriate services.
- ◆ Advocacy: The social worker can help you represent your issues and needs to other health care providers and to services in the community.
- ◆ Provision of information and resources especially around entitlements and subsidy schemes

## DOCTOR DOCTOR

PATIENT My doctor says I need to watch what I eat.  
Now I eat all my meals in front of the mirror!



*Don't worry, she's new.  
She'll get the hang of it soon.*

## DO YOU NEED SUPPORT?

WE ARE HERE TO HELP YOU

RENAL SOCIAL WORKER

Phone: 6244 2316

YOU CAN CONTACT THE RENAL SOCIAL WORKER,  
OR REQUEST TO SEE THE SOCIAL WORKER  
THROUGH A MEMBER OF YOUR TREATING TEAM

*Pastoral Care*

Phone: 6244 3849

Manager: 6244 3743

YOUR CONSUMER  
REPRESENTATIVES

*They Represent You on the  
Renal Advisory Committee*

John Scott  
CO-CHAIR OF RAM

Mary Kilpatrick  
CANBERRA COMMUNITY  
DIALYSIS CENTRE

John Kelly  
CARERS

Nick Clarke  
HOME HAEMODIALYSIS

*Currently Vacant*  
NORTHSIDE DIALYSIS

*Currently Vacant*  
PERITONEAL DIALYSIS

Jenny Watson  
TRANSPLANTATION  
&  
ACUTE HAEMODIALYSIS

## RENAL RECIPE

Apple Tart (Serves 6)

## DOUGH

1 cup plain flour

1/3 cup salt reduced margarine

5 to 8 tablespoon of ice water



## FILLING

3 Apples, peeled, cored and sliced

1/4 cup caster sugar / sweetener replacement (e.g. cooking splenda /equal / stevia)

2 tablespoon corn flour

1/2 teaspoon cinnamon

1/4 teaspoon mixed spice

1/4 cup apricot jam

## METHOD

Cut the butter into the flour until it becomes small pieces, the size of walnuts. Make a well in the centre of the flour mixture and add 5 tablespoons of ice water. Fold the flour mixture over the ice water until the dough sticks together, if the dough is still dry, add more ice water. Wrap dough in plastic wrap and let rest in the refrigerator for 1/2 hour. Roll out dough on a floured surface and place in a tart pan.

Mix sugar, cornstarch, cinnamon and mixed spice together, sprinkle over sliced apples. Layer apples in the tart pan. Bake at 180 degrees for 30 to 40 minutes, or until the crust is browned and the apples are soft.

Let tart cool then soften jam in microwave and brush over the apples.

*This dessert is a great treat for those with CKD or on dialysis.*

## Anne Maguire Clinical Nurse Consultant in Renal Home Therapies

*As the new CNC of Renal Home Therapies I know a lot about each of my clients and feel that you should know something about me! Here is my story.*

I started out in nursing in 1975 at The Royal Canberra Hospital. I quickly realised my interest in Renal nursing and undertook a Renal Diseases and Dialysis course at the Royal Newcastle Hospital the year after graduation. I worked in peritoneal dialysis and haemodialysis (including training of home dialysis clients) for several years until I left to marry a Canadian and went to live in Canada 1983. I worked in a busy hospital in the renal ward and haemodialysis unit in Calgary for several years.

We had three children and left for Amsterdam when my youngest was 6 months old.

I undertook a refresher course and some language courses and was soon working as an RN in the haemodialysis unit at the Free University Hospital.

In 2002 I decided to return to Australia and my family in Canberra. One of the reasons was that I wished to study and could not manage that in the Dutch language! I completed a Masters Degree in Advanced Nursing Practice in 2008 and am currently undertaking a Diploma of Management.

I have had several different roles in the Renal Service Department in the last nine years including Clinical Development Nurse and CNC of CCDC.

I have recently moved to the home therapies unit to undertake a new challenge. For many years I have watched clients come into our service and realised that by virtue of the treatment regimes, it is easy for them to lose control of their lives. I strongly believe that taking control of what happens to you is the right and responsibility of each individual and the Home Therapies philosophy aims to foster that. I wish to be able to support people in their quest to take control of life, albeit a very hard one, and flourish.

I hope to be able to guide my team to form meaningful partnerships with our clients and continue to make self care a reality in many people's lives. I have inherited a very committed team and it is a pleasure to be working with them.

Anne Maguire