The following is a compilation of concerns reported to the Champaign County Health Care Consumers by dialysis patients and family members since 2001. Renal Research Institute (RRI) local and regional management staff have been presented with these concerns directly on several occasions, including at meetings on Thursday, March 6, 2003, and Thursday, July 17, 2003. Additionally, Maureen Schlereth, an “area administrator” for RRI was presented with these concerns during a meeting on Tuesday, September 16, 2003.

Patients and family members have reported these concerns and numerous incidents to RRI local and regional management, as well as to The Renal Network, and these concerns have gone unaddressed to date.

**Staffing**

- Unit appears to be understaffed, especially in the evenings. At times there is only one RN on the floor for as many as 13 patients and sometimes up to 20 patients. The Nurse Manager does not function as a nurse providing clinical services directly to patients.

- Unit is primarily staffed by technicians, many of whom seem to not have adequate training or experience.

- Nurses and technicians appear to be overworked and must endure long shifts. Nurses and technicians are called in to work even when they are very sick, because the unit seems to be understaffed.

- Patients and family members have reported delays staff responding to patients in need, including when pumps have stopped and alarms go off.

**Infection Control**

- Failure to properly use and change gloves, and wash hands per CDC guidelines for infection control in hemodialysis facilities.

- Ungloved actions on machines and tubing.

- Many reports of recurrent staph or other infections and resulting hospitalizations and surgeries on access area.
• No consistent or permanent dedicated medical housekeeping staff trained in universal infection control techniques. RRI appears to contract with a “cleaning service,” but does not appear to have dedicated housekeeping staff members.

• Nurses cleaning bathrooms.

• Failure to provide linens and blankets, forcing patients to provide and transport their own blankets. This is not only an incredible hardship to patients, but is an infection control and public health concern, because patients frequently leave with blood on their blankets, and may not be properly washing linens and blankets before returning to the dialysis facility.

• Ice cups handled with bare hands on rim.

• Bloodstains on chairs and electrolyte jugs and lids.

• Failure to provide patients with “arm washing” written instructions (written instructions for proper “hand washing” have been provided. Patient reports that they were never instructed on the need to conduct arm washing prior to dialysis.

**Quality of Care Complaints**

(NOTE: Many patients/families attribute quality of care problems to staffing levels and inadequate training of staff.)

• Reports of grafts getting infiltrated.

• Rough handling of patients. Example: Staff are not securing end of catheter that goes into body when cleaning or manipulating. Many patients also report that staff do not seem well-trained in how to “stick” people; some patients report having to be “stuck” 5 times before a successful try is achieved.

• Problems with staff who “add” when they should be “subtracting” in their calculations.

• Taking too much fluid off underweight patients; not paying attention to “dry weight.”

• Staff asking patients or family members what size or gauge needles to use.

• Patients not receiving medications at proper time during their runs.

• Staff forget to manually push heparin on broken machines.

• Technicians administering medications (such as Heparin), or in the absence of a nurse, asking patients to push the plunger themselves, thereby asking patients to administer their own medications.
• Machine settings, such as temperature not customized or programmed.
• Arterial pressure criteria not strictly adhered to.
• Fevers of unknown origin; failure to investigate and determine cause.
• Unexplained diarrhea; failure to investigate and determine cause.

**Communications with Patients and Family About Concerns: Fear of Retaliation**

This is one of the most problematic areas. Many patients and family members report that they are afraid of retaliation or punishment if they speak out about their concerns or if they have a complaint. Several families have reported that they were threatened with expulsion from the unit if they continued to express their unhappiness. CCHCC produced a handout on “Dialysis Patients’ Rights and Grievances” in order to inform patients of their rights under federal Medicare regulations.

Patients and family members report that they have been belittled, ridiculed, silenced, threatened, pathologized, and ignored when they repeatedly raise concerns or express dissatisfaction with the quality of care provided. Patients and family members who have turned to the Department of Public Health have been publicly berated by staff who blame them for the unit’s decertification by CMS.

Likewise, staff report that they are afraid of reprimands or firing for expressing concerns or advocating on behalf of patients and family members.

One of the most damaging dynamics is the sense that patients and family members have that their concerns are not substantively addressed. Patients and family members express a lack of confidence in the care at this unit. They feel that they must be very vigilant, but then when they are vigilant and they point out problems or express concerns, they feel that they are punished. Patients who keep logs are frequently questioned by staff.

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Helping the people of Champaign County who have problems with the health care system and working to change the system so that everyone has access to quality affordable health care!