



Canberra Region Kidney Support Group

# Kidney News

The views expressed in this newsletter are not necessarily those of the CRKSG

## Renal Health Services Plan 2010-2015

Published below is the Executive Summary of the Renal Health Services Plan. The full document can be accessed at <http://www.health.act.gov.au/c/health?a=dlpubpoldoc&document=2002>

The ACT Renal Health Services Plan 2010-2015 provides strategic direction for the provision of renal services over the next five years with a longer term ten year vision.

For the purposes of this plan, renal services are taken to encompass all services related to the identification, prevention, treatment and management of Chronic Kidney Disease (CKD). CKD is influenced by life style and behaviour and invariably results in irreversible loss of kidney function.

The objective of the ACT Renal Health Services Plan 2010-2015 is to articulate a model of service delivery that will meet increasing demand by drawing together strategic directions for the provision of clinical services in the ACT and a model of care for adult renal services.

Core to the Plan are the following principles, drawn from ACT Health's Ambulatory Care Framework and Kidney Health Australia's Patient Charter. Services will be:

- Patient centred.
- Multidisciplinary and collaborative.
- Accessible.
- Safe and high quality; and have a
- Population health approach.

Key health factors identified in the Plan include:

- The number of people in the ACT with CKD is projected to significantly increase in the future.
- In the general Australian population, there is up to a threefold increase in the risk of the people where disadvantaged developing end stage kidney disease (ESKD).
- In the Aboriginal and Torres Strait Islander population, there is a 30-fold increased risk of ESKD compared to the general population and Aboriginal and Torres Strait Islander people are 6 times as likely to be receiving dialysis or to have had a kidney transplant.
- Whilst there is no cure for CKD, the disease is preventable and treatable and progression can be slowed.

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Merry Christmas  
and  
Best Wishes for the New Year

## ACT Health Consumer Representative 'Thank You' Awards

25 November 2010

**ACT Minister for Health, Katy Gallagher MLA took the opportunity today to thank all the consumer representatives who work tirelessly to ensure safe, quality and timely healthcare is provided in the ACT.**

Ms Gallagher was addressing the ACT Health Consumer Participation Celebration.

A consumer representative is a trained representative from the community who sits on an ACT Health committee providing consumer perspective.

“Consumer participation and feedback is highly regarded within ACT Health,” Ms Gallagher said.

“I encourage all healthcare consumers to provide feedback about the health services across ACT Health that they've recently used.”

“It's this feedback that enables us to improve the delivery of quality and safe health care, and that's why consumers are active on 80% of ACT Health committees.”

“These representatives provide a significant voice from the consumer perspective, which is integral to ACT Health's decision-making process and therefore to its service provision,” the Health Minister said.

The consumer representatives were presented with certificates of appreciation to acknowledge their valuable contribution.



ACT Minister for Health,  
Katy Gallagher MLA

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## Organ Donor Registration

If you are viewing this newsletter on-line, click on the link below to register as an organ donor. Organ donor registration is completely voluntary. If you register you will receive a donor card similar to the one shown here.

<https://www2.medicareaustralia.gov.au/pext/registerAodr/Pages/DonorRegistration.jsp>

Alternatively register by calling: 1800 777 203.



## Calendar of Events

### Quarterly Meetings

Meeting dates for 2010/11 are as follows:

- 11th December 2010,
- 12th March 2011,
- 11th June 2011,
- 13th August 2011, and
- 10th December 2011

**Please note, the meeting on 13th August will probably be the AGM. All welcome**

*(Continued from page 1)*

- The majority of people with CKD are managed in the community by General Practice.
- CKD in its early stages is often symptom free and difficult to diagnose
- Where appropriate, transplantation is the preferred and most effective treatment for
- ESKD. However, the average wait time for a kidney transplant is four years.

Key directions for ACT Renal Services over the next five years:

- The establishment of an ACT Renal Services Network to:
  - ◇ Develop targeted health promotion/awareness strategies for high risk groups.
  - ◇ Increase community awareness of CKD risk factors
  - ◇ Provide support for strategies to address information, training and ongoing support for primary health care professionals on CKD.
  - ◇ Establish nurse practitioner /allied health run clinics for the close monitoring of patients away from the acute setting.
  - ◇ Create a care coordination framework for renal services in the ACT.
  - ◇ Establish effective/optimal communication channels with Greater Southern Area Health Service to facilitate proposed planning initiatives.
- The provision of addition dialysis capacity in the ACT.
- Encourage and support national strategies to increase the rate of organ donation.
- Support for the establishment of homelike community settings where patients can 'self dialyse' where dialysis at the patient's home may be unsuitable.

The strong clinical overlap between diabetes, cardiovascular disease and chronic kidney disease requires that all programs developed for CKD be established and delivered in a collaborative fashion with other chronic disease programs.

The ACT Health Chronic Diseases Strategy 2008-2011 has been developed to provide the overarching framework for the provision of appropriate programs and supports to address the increasing prevalence of people at risk of, or living with, chronic disease in our community. The Strategy highlights opportunities for improved programs associated with Renal Services.

The ACT Renal Health Services Plan 2010-2015 provides an opportunity to plan for integrated services that will better meet the needs of people with, or at risk of, chronic kidney disease who also have other chronic conditions.

## Light Summer Sandwich

INGREDIENTS - Serves 4

- 1 x 200g punnet The Original(TM) grape tomatoes
- 1 Treviso(TM) radicchio
- ½ rockmelon
- Turkish bread
- 8 slices prosciutto
- Pesto
- Ground pepper



1. Cut the Turkish bread into four, then cut each piece in half.
2. Toast the Turkish bread.
3. Spread pesto on the inside of each piece of the toasted Turkish bread.
4. Wash and dry the radicchio leaves and spread them on the bottom half of the bread.
5. Place two slices of prosciutto on the radicchio leaves for each sandwich.
6. Peel the rockmelon and cut it into thin slices across the diameter of the half melon.
7. Place the slices of rockmelon on the prosciutto.
8. Wash and cut The Original(TM) grape tomatoes in half and spread over the rockmelon.
9. Season the tomatoes with ground pepper.
10. Close the sandwiches with the top of the toasted Turkish bread.

NUTRITION	
Nutrient	Per serve
Energy (kJ)	503
Protein (g)	9
Fat - Total (g)	7
Carbohydrate - Total (g)	5
Sodium (mg)	1205
<b>Potassium (mg)</b>	<b>435</b>
<b>Phosphorus (mg)</b>	<b>175</b>

Recipe supplied by Perfection Fresh

Recipes from a CD entitled, Healthy Eating with the Renal Recipe Bank. Produced by Janssen-Cilag for the Government of South Australia.

Disclaimer: Always consider your individual circumstances when using this resource. The information contained herein is of general nature and is not intended to replace the advice of an Accredited Dietician or Renal Physician. Please consult an Accredited Dietician for individual dietary advice.

## The Economic Impact Of End-Stage Kidney Disease In Australia — Projections to 2020

Published below is the Executive Summary of 'The Economic Impact of End-Stage Kidney Disease in Australia — Projections to 2020' from Kidney Health Australia. The complete document may be viewed at — <http://www.kidney.org.au/LinkClick.aspx?fileticket=i759hVXpJI0%3d&tabid=635&mid=1837> or via the Newsletters page of the Support Group's website at <http://www.crksg.org.au/>.

5 November 2010

### Key messages

- In 2008, 2,476 Australians of all ages commenced renal replacement therapy (RRT). At 31 December 2008, there were 17,578 Australians receiving RRT, of whom 7,516 had a functioning transplant and 10,062 were receiving dialysis.
- By 2020 it is projected that between 3,335 and 4,472 Australians of all ages will commence RRT, an increase of 35% to 81% over 2008 numbers.
- The total number of patients receiving treatment for end-stage kidney disease (ESKD) in Australia in 2020 is projected to lie between 27,013 and 30,293 based on the same models, an increase of 54% to 72% above 2008 numbers.
- The cumulative cost, in today's dollars, of treating all current and new cases of ESKD from 2009 to 2020 is estimated to be between approximately \$11.3 billion and \$12.3 billion.
- Increasing the utilisation of home-based dialysis (home haemodialysis and peritoneal dialysis) over this period would lead to estimated net savings of between \$378 and \$430 million.
- After factoring additional costs associated with increasing organ donation, increasing the rate of kidney transplantation by 50%, to match rates currently achieved in the United States and numerous European countries, would be associated with cost savings and with greater health benefits. Performing more kidney transplants would be both less expensive and more effective than current practice.
- The projected growth in the burden of ESKD necessitates a 'whole of government' approach to chronic disease prevention, early identification and intervention. Social, behavioural and biological determinants of health should be addressed within the framework of an overarching national chronic disease strategy.
- Priorities in renal service planning include developing strategies to overcome the financial and structural barriers affecting the ability to shift dialysis treatment from the hospital sector to home-based care and to increase the availability of organs for transplantation.

**If Undelivered Please Return To:**

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Garran ACT 2605

Phone: 02 6290 1984  
E-mail: crksg@shout.org.au  
Web: http://www.crksg.org.au



**MEMBERSHIP APPLICATION/RENEWAL**

Canberra Region Kidney Support Group Inc  
PO Box 5051 GARRAN ACT 2605.  
ABN: 77 396 063 641

**Last Name:** ..... **First Name:** .....

**Address:**.....

**Email:** .....

**Phone No:** .....

I would like to make a voluntary donation to CRKSG for the amount of: \$..... Membership is free. All donations \$2 or more are tax deductible. Cheque/Money Order payable to CRKSG Inc. Please accept this application for membership of the Canberra Region Kidney Support Group Inc.

**Signature:** ..... **Date:**.....

Post Form to:

The Treasurer  
Canberra Region Kidney Support Group Inc  
PO Box 5051  
GARRAN ACT 2605.

NOTE: This form may also be used to notify a change of address/contact details.