# November 2016

# Jelica's Link

# An independent newsletter for people interested in Aged Care

In this issue:	4 YEAR CERTIFICATION
<ul><li>4 year</li><li>Going pink</li></ul>	
<ul> <li>D Mannose</li> </ul>	I am very pleased to mention more facilities achieving
End of life	4 year certification.
Governance v	4 year certification.
management	I didn't hear from anybody achieving 4 years. I hope that
Caffiene?	
Food safety	doesn't mean nobody achieved it!!
<ul><li>submission</li><li>Christmas</li></ul>	For my friends, who have an audit this month, all the best!
activities	
Bulk supply	If you are one of the very few achieving this then please let me know as it deserves a
medication	special place and recognition! If you don't let me know I can not publish it.
Silver Rainbow	
Grey Matter	THERE IS STILL TIME!!
November	
Paraprosdokian	
<ul><li>Scoping project</li><li>Training</li></ul>	THANK YOU FOR THE GENEROUS DONATIONS.
QA Programme	If you planned to donate and haven't done some there is still time.
Back issues	n you planned to donate and haven t done some there is still time.
Helpful	The haircut day is the <b>11<sup>th</sup> of November</b> and it would be nice to reach the \$1500!!
websites	If all my readers donated \$1 I would get to that amount twice!
Emailed to.	I hope you support me in this and help raise that amount as it will do so much good for all
Emailed to: 1552 readers	the people affected by breast cancer. I am sure you do not have to look far to find
and counting	somebody affected in that way.
and counting	
Welcome to my	I am very pleased that I do this with a friend who will also cut her hair
overseas readers.	See below some fact and statistics. I am thanking you in advance for even taking out the time to read this.
09jelica@gmail.com	Eight women a day are diagnosed with breast cancer in New Zealand. The money raised
	from my walk will be used to fund vital research projects and support women recovering
mobile: 021 311055	from and living with breast cancer in New Zealand.
	Please consider donating today so we can help improve the quality of life for hundreds of
1/3 Price Crescent	New Zealand women. I cannot do this alone but with your help we can make a difference.
Mt Wellington Auckland 1060	Please visit my page: Hold down the ctrl key and then click the below link!
	http://pinkstarwalk.co.nz/page/jessicabuddendijksfundraisingpage
	Visit my page after the 11 <sup>th</sup> of November as photos will be posted. (I hope
	it will be a little bit warmer by that time.)
	HOPE

	D-MANNOSE FOR UTI PREVENTION VALIDATED IN A CLINICAL TRIAL
	Hi All,
	Thought I'd pass on this article. I have seen a gentleman recently who was having chronic UTIs and resistant to all antibiotics used. Dr. John Nealie MOSS Urology, trialled D-Mannose tablets (not funded) and he has not suffered another UTI since.
	Apparently D-Mannose is an active ingredient of Cranberry juice, but is 10-15 x stronger and D-Mannose does not convert to glycogen or get stored in the liver –see section on What About Cranberry Juice for UTIs?
	http://articles.mercola.com/sites/articles/archive/2014/04/28/d-mannose-uti-
	prevention.aspx
	Regards, Joy Owen (MHPr) Gerontology Nurse Specialist, Older Adults & Home Health Waitemata DHB
	END OF LIFE RESOURCES FOR RESIDENTIAL AGED CARE
You will never speak to	The end of life resources that the RACIP Work group has worked on this year are all finalised.
anyone more than you speak to yourself in your head, be kind to yourself.	<b>Planning for End of Life Care in Residential Aged Care</b> This resource supports you to gather all the important information onto one form so that staff don't need to go hunting through the resident's file looking for vital information.
	What to expect when someone is dying – RAC This resource is for the families of residents who are dying. It helps prepare them for what they can expect.
	Congratulations to the RACIP Work Group and the subcommittee members: Alka Chetty and Esther van Diest of Kumeu Village: Jean Colbeck and Chris Beckett of Bupa Beachhaven: Linda Goodwin of Evelyn Page: Rosemarie Driver of Eversleigh: Trish Flemming West Auckland Hospice: Carol Wales, Jessica Ponen and Raewyn Jarvis-Hall of North Shore Hospice and Tania Charlton WDHB Palliative care nurse specialist.
	Feel free to use these resources and pass them on. I will have them put on the
	RACIP web site with all our other resources: www.wdhb-agedcare.co.nz
	Thank you Janet Parker RN NP Gerontology Nurse Practitioner Community and Residential Aged Care. Nga Kaitiaki Kaumatua
	Look out for soon to be published new resources in booklet format. More in the newsletter when they come out.

#### **GOVERNANCE V MANAGEMENT**

I have been asked the difference between governance and management. For managers working under this structure it can be difficult sometimes to know the boundaries. Below my interpretation of the two roles.

Governance is the role of leading an organisation and management is its day-to-day running or operating.

Governance is the job of the governing body, (i.e a board), to provide direction, leadership and control.

Management is the job of a manager and his/her staff.

The governing body's role is to oversee management, not to manage. It must be satisfied that the management team is doing its job in accordance with policy and resources

# For women, caffeine could be ally in warding off dementia

#### My kind of good news research!!

Date: October 3, 2016 Source: Oxford University Press USA Summary: Among a group of older women, self-reported caffeine consumption of more than 261 mg per day was associated with a 36 percent reduction in the risk of incident dementia over 10 years of follow-up. This level is equivalent to two to three cups of coffee per day!

"The mounting evidence of caffeine consumption as a potentially protective factor against cognitive impairment is exciting given that caffeine is also an easily modifiable dietary factor with very few contraindications," said Ira Driscoll, PhD, the study's lead author and a professor of psychology at the University of Wisconsin-Milwaukee. "What is unique about this study is that we had an unprecedented opportunity to examine the relationships between caffeine intake and dementia incidence in a large and well-defined, prospectively-studied cohort of women."

The findings come from participants in the Women's Health Initiative Memory Study, which is funded by the National Heart, Lung, and Blood Institute. Driscoll and her research colleagues used data from 6,467 community-dwelling, postmenopausal women aged 65 and older who reported some level of caffeine consumption. Intake was estimated from questions about coffee, tea, and cola beverage intake, including frequency and serving size. In 10 years or less of follow-up with annual assessments of cognitive function, 388 of these women received a diagnosis of probable dementia or some form of global cognitive impairment. Those who consumed above the median amount of caffeine for this group (with an average intake of 261 mg per day) were diagnosed at a lower rate than those who fell below the median (with an average intake of 64 mg per day). The researchers adjusted for risk factors such as hormone therapy, age, race, education, body mass index, sleep quality, depression, hypertension, prior cardiovascular disease, diabetes, smoking, and alcohol consumption.

**Story Source:** Materials provided by <u>Oxford University Press USA</u>. *Note: Content may be edited for style and length.* 

Journal Reference: Ira Driscoll, Sally A. Shumaker, Beverly M. Snively, Karen L. Margolis, JoAnn E. Manson, Mara Z. Vitolins, Rebecca C. Rossom, Mark A. Espeland. Relationships Between Caffeine Intake and Risk for Probable Dementia or Global Cognitive Impairment: The Women's Health Initiative Memory Study. *The Journals of Gerontology Series A: Biological Sciences and Medical Sciences*, 2016; glw078 DOI: <u>10.1093/gerona/glw078</u>

Never blame anyone in your life. Good people give you happiness. Bad people give you experience. Unkind people give you a lesson and the awesome people give you memories

	HAVE YOUR SAY ON FOOD SAFETY RULES
	Date: 25 Oct 2016 Media contact: MPI media team
	The Ministry for Primary Industries (MPI) is calling on food businesses and others to have their say on changes to food safety rules.
	The rules are part of the new Food Act, which came into effect in March this year. The Food Act introduces a risk based approach to managing food safety, setting different rules for higher and lower risk businesses and putting more emphasis on what people do to keep food safe.
	Fiona Duncan, Director Food and Regulatory Policy at MPI says, "As the new law is rolled out, we monitor and evaluate how things are going and listen to feedback from businesses and others. These proposals make improvements where needed, to make sure the new law works as intended."
	"We propose reducing requirements for some lower risk businesses, giving them fewer records to keep and fewer procedures to follow.
	Another proposal makes it easier for businesses to organise their first food safety check, known as a verification"
If you don't cut	"We have also reviewed some old food safety laws that are still in effect, and are revoking those that are no longer necessary and keeping the parts we still need", says Duncan.
the cake in pieces, and just eat the whole cake, then you only had one piece	The consultation includes a number of other minor changes to help the new law work more smoothly. Businesses can find full details on the MPI website, along with several ways they can have their say, from filling in a quick survey to making a formal submission.
	MPI is also working with councils around the country to run free workshops on the Food Act. Workshops give businesses a chance to ask questions about the new law, as well as to give feedback on anything they think could be improved.
	Your views sought MPI is consulting on proposed changes to food safety regulations and notices.
	Existing regulations and notices were consulted on last year and set out what businesses need to do to comply with the law.
	As the new law is rolled out, we monitor and evaluate the changes. The proposals in this consultation make improvements where needed to make sure the new law works as intended.
	The Ministry for Primary Industries (MPI) is proposing some changes to food safety rules – and calling on businesses and others to give them feedback.
	MPI has been monitoring the new law, and listening to feedback from businesses. We are now making changes to help the new law work better.
	Changes include reducing record keeping requirements for some lower risk businesses, getting rid of outdated rules, and making it easier for businesses to organise their first verification.
	To find out about all the changes, see the MPI website. You can have your say in several ways, from making a formal submission to filling in a quick survey.
	http://mpigovtnz.cwp.govt.nz/news-and-resources/consultations/have-your-say-about- food-safety-rules/

## **CHRISTMAS ACTIVITIES**

Christmas is always a fun time of year and always looked forward to. Festive sights, sounds and smells that aren't around the rest of the year.

You're looking for new and interesting Christmas Activities to do with your residents then here are a few ideas.

#### My personal favourites:

Take residents out during the evening for a van ride to enjoy the many houses decorated with Christmas lights.

Ask residents to talk about their memories of Christmas. How did they celebrate Christmas when they were young and with their own family? Specific traditions etc.

#### CRAFTS

#### **CD Sun catcher**

Glue two old cd's together with Christmas ribbon or beaded thread running through the middle, then using glue that dries clear add a ring of small flat beads around the outside. You can make this as simple or difficult as you wish. Hang on a tree or by a window and watch it sparkle!

This does not have to be only a Christmas sun catcher. It works well throughout the year

#### GAMES

Don't worry if plan A fails, there are 25 more letters in the alphabet

#### **GUESS THE CHRISTMAS COOKIE**

Have the resident's bake a few different batches of cookies: chocolate chip, oatmeal raisin, and chocolate are some ideas. Be sure to have plenty for everyone! When the game begins, have a holiday tin can to hide a cookie in. Without the resident's seeing, place a cookie in the tin can and have a blindfolded resident smell the cookie to see if they can guess what it is. Make sure someone is keeping score! If they can't guess by smell, taste is the last try! Each resident should be able to eat their game cookie!

#### **GUESSING GAME: CHRISTMAS CANDY JAR**

Using a holiday plastic cookie or candy jar (inexpensive from a dollar store), fill it with some colourful holiday goodies like holiday coloured M&Ms, peppermints, gum drops, etc. Display the jar wherever the party is going to be held and add a sign that the resident's can decorate explaining the game.

"Guess how many candies are in this jar, and win it!"

#### ANTLER GAME

First make 2-4 teams

Then give each team a pair of pantyhose and one/two balloons to each person on the team. Each team should have eight balloons. When you say "go", the teams will try to make reindeer antlers by blowing up the balloons and then stuffing them into the pantyhose. Then one team member wears the "antlers" and sings the first verse of "Rudolph, the red nose reindeer"



The first one to do this wins for their team.

Have fun and thank you all for making Christmas special for your residents Share any good ideas so that I can publish them in December issue

## **BULK SUPPLY MEDICATION**

Last month I published an email I received regarding the use of bulk supply. As a result I received a number of emails asking me if this also included CD. I emailed Ann Marie with that question and received the following. I have informed Ann Marie that I had published her first answer but that I would inform everybody that there is an update to come. I will keep you updated.

#### Hello Jessica

My apology I have been on leave- we will be sending out an update with clarification shortly regarding bulk supply for all relevant parties- inclusive of CD usage, and when bulk supply can be used etc. Until this is completed please do not use the information you have received so far.

Regards Ann Marie Bailey Senior Advisor, HealthCERT

#### SILVER RAINBOW

Always run away from temptations.... but slowly, so they can catch up to you



#### Lesbian, Gay, Bisexual, Trans and Intersex (LGBTI) Education for Caregivers

Silver Rainbow is offering a discount for any bookings made for December, a wopping 20 percent!

So if you book a workshop in your facility it will be \$400, if you want to gain the Silver Rainbow Seal - again \$400 and if you want to attend a public workshop in Greenlane on 5 December it will be \$40!

If you are interested please contact Julie.Watson@affinityservices.co.nz

# HAVE YOU HEARD ABOUT GREY MATTER?

We'd like to introduce you to another newsletter that the Ministry of Health Library prepares.

The <u>Grey Matter</u> newsletter provides monthly access to a selection of recent NGO, Think Tank, and International Government reports related to health. Information is arranged by topic, allowing readers to quickly find their areas of interest.

If you'd like to subscribe to Grey Matter, email library@moh.govt.nz

	ABOUT THE MONTH OF NOVEMBER
	In the Georgian calendar, the calendar that most of the world uses, November is the eleventh month of the year.
	Below are some fun facts about November:
Do not stress	The birthstone for November is the topaz. The zodiac signs for November are Scorpio (October 23 - November 21) and Sagittarius (November 22 - December 21) The birth flower for November is the chrysanthemum.
	Movember: Men's Health month 5+ a day month Epilepsy awareness month
	<ul> <li>World vegan day 1 November</li> <li>Diwali: Wednesday, 30 October to 3 November 2016</li> <li>Guy Fawkes: 5 November</li> <li>Parkinson's awareness week 1-7 November</li> <li>Buddy day-child matters 11 November</li> <li>Diabetes awareness week 11-17 November</li> <li>World Diabetes Day: 14 November</li> <li>World CPOD day- 16 November</li> </ul>
over how far you have to go,	<ul> <li>The world day of remembrance for road traffic victims – 20 November</li> <li>Universal Children's Day: 20 November</li> <li>"White Ribbon Day" for the Elimination of Violence against Women 25 November</li> </ul>
instead focus on how far you have become.	PARAPROSDOKIAN
	It is a literary term for a sentence with an unexpected or surprising ending I never heard of the word so that was my lesson fr the day. Thanks Sue. Great now I know what it is called. Here are some examples and I hope it put a smile on your face as well.
	<ul> <li>"They fell in love and lived happily ever after, just not with each other."</li> <li>"Good things come to those who wait, so procrastinate."</li> <li>"Always borrow money from a pessimist. He won't expect it back."</li> <li>Where there is a will, I want to be in it</li> </ul>
	<ul> <li>Since light travels faster than sound, some people appear bright – until you hear them speak</li> <li>The early bird might get the worm, but the second mouse gets the cheese</li> </ul>
	If I agreed with you, we would both be wrong
	<ul> <li>War does not determine who is right- only who is left</li> <li>Knowledge is knowing that tomato is a fruit, wisdom is not putting it in a fruit salad</li> </ul>
	<ul> <li>To steal ideas from one person is plagiarism, to steal from many is research</li> <li>I didn't say t was your fault, I said I was blaming you.</li> </ul>
	<ul> <li>In filling out an application where it says "in case of an emergency notify", I put "Doctor"</li> </ul>

	SCOPING PROJECT
All generalisations are false, including this one	The University of Auckland is conducting a scoping project to investigate how a homecare robot might be useful for individuals with mild cognitive impairment (MCI) or mild dementia (MD). I'm passing on this information for the research team who are recruiting participants for the study. They want to speak to people who have expertise in the area of MCI and MD (e.g. clinicians, homecare providers or managers of care facilities). They also want to speak to people living with MCI or MD and carers/relatives of individuals with MCI or dementia. The research team are speaking to participants from November 2016 to January/February 2017. If you are interested in taking part in the study or would like more information, please contact <b>Dr Margot Darragh, on Tel: 027 204 7325 or</b> m.darragh@auckland.ac.nz
	TRAINING SESSIONS
	If you need training provided on site please let me know as I am available to provide this on non clinical topics such as:
	Cultural Safety, Spirituality, Sexuality & intimacy, Privacy, Rights, Confidentiality, Choice, Communication and Documentation, Quality and Risk Management, Abuse and Neglect prevention, Restraint Minimisation and Safe Practice, Managing behaviour that challenge us, Complaints Management, Open Disclosure, EPOA, Advance Directives, Informed Consent, Resuscitation, Health and Safety, Ageing process, Mental Illness, Civil defence, dementia care, Bullying in the workplace.
	If you are looking for a topic not listed here please drop me a line. I am happy to facilitate different times to suit evening and night staff.
	References available on request. Jessica
	TOTAL QUALITY PROGRAMME
	Are you struggling with your policies and procedures? Find it difficult to keep up with all the changes? Come audit time you realise that information is not up to date?
	If the answer to the above is yes then
	Join hundreds of other aged care providers
	This totally tried and tested Quality Programme tailor-made for aged care has been around since 1990!
	All policies and procedures, including the related work forms, are written in a very user friendly manner and understandable to all staff. The programme comes on CD and you are in charge to personalise it for your facility.
	For more information and to receive the order form and licence agreement, contact me on 09 5795204, 021 311055 or 09jelica@gmail.com

	NEWSLETTERS BACK ISSUES	
Time is precious, waste it wisely	Remember there is an alphabetical list of topics from all my newsletters available on my website which refers to the related issue. This website is available to everybody: <u>www.jelicatips.com</u> No password or membership required.	
	I believe in having the data available to everybody as it is important that as many people as possible get the information and that we help each other as much as possible in this very challenging sector. I don't mind sharing this information but I don't agree anybody making financia gain from this information!	S
	HELP ME KEEPING THE DATABASE UP TO DATE!	
	Changing positions? New email address? Let me know if your details are changing so I car keep the database up to date.	n
	If you know anybody else who would like to receive the newsletter please let me know and I will be happy to add them to our growing readers' base.	v
	Thank you all for your contribution each month.Jessica	

#### Some interesting websites:

www.careassociation.co.nz;www.eldernet.co.nz,www.insitenewspaper.co.nz,www.moh.govt.nz;www.careerforce.org.nz,www.dementiacareaustralia.com;www.advancecareplanning.org.nzhttp://www.bpac.org.nz/Public/admin.asp?type=publication&pub=Best,http://www.open.hqsc.govt.nz;www.safefoodhandler.com;www.learnonline.health.nz;www.nutritionfoundation.org.nz/about-nznf/Healthy-Ageing;www.glasgowcomascale.orgwww.glasgowcomascale.org

Please note these sites are not necessarily endorsed by Jelica nor is it responsible for the contents within them.

The information contained in this publication is of a general nature and should not be relied upon as a substitute for professional advice in specific cases.

#### **REMEMBER!**

Send your feedback, suggestions and articles showcasing your local, regional and workforce activities for publication in future issues.

This brings me to the end of this issue. I hope you enjoyed reading it and welcome any feedback you have. With your help I hope to keep this a very informative newsletter with something for everyone.

#### CONFIDENTIALITY AND SECURITY

- I send this with due respect to, and awareness of, the "The Unsolicited Electronic Messages Act 2007".
- My contact list consists ONLY of e-mail addresses, I do not keep any other details unless I have developed personal contact with people or organisations in regard to provision of services etc.
- E-mail addresses in my contact list are accessible to no one but me
- Jelica Ltd uses Trend Micro antivirus protection in all aspects of e-mail sending and receiving

Signing off for now.

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- · If you do not wish to continue to receive emails from me, all you need to do is e-mail me and write "Unsubscribe". I will then remove you from my contact list (though I will be sorry to lose you from my list).
- · If you know of others who you think would benefit from receiving my newsletter, please pass on my details and have them sending me an email with the subscribe request.

Jessica