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**Emailed to:**  
**1645 readers**  
**and counting**

**Welcome to my**  
**overseas readers**

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**4 YEAR CERTIFICATION**

I am very pleased to mention more facilities achieving

**4 year certification**

My compliments and congratulations to:

**Switzer Residential Care -Kaitaia**

For my friends, who have an audit this month, all the best!

*If you are one of the very few achieving this then please let me know as it deserves a special place and recognition! If you don't let me know I can not publish it.*

**FOOD PLAN**

Although HealthCert is still in negotiation with MPI regarding the auditing of food services, you will need to register your food plan by March 2018.

It looks daunting to start with but when you follow the steps and answer the different questions you will find that it is not so bad.

Follow the below link to the website.

<http://www.mpi.govt.nz/food-safety/food-act-2014/food-control-plans/steps-to-a-template-food-control-plan/create-your-template-food-control-plan/>

Then Click on [Start creating your food control plan](#)

To create your plan:

- answer a series of yes or no questions
- add some more details after you've answered all the questions
- print or save the plan to your computer
- get it registered.

*From MPI website*

**IT'S A WRAP: PREPARING FOR CHRISTMAS**

**Whatever tradition you celebrate**, holiday activities for residents can add a little special fun. Crafts, parties, holiday decorations, holiday treats and food - These are part of the excitement.

Some crafts and ideas may vary depending on how active people are, or if they need modifications and extra help.

**It can be a difficult time** for some residents, especially if loved ones have passed on, or if they are alone.

So it is especially important to involve them in some fun and meaningful things to do.

**Studies have shown** that the stimulation activities can provide is crucial for our physical, mental and emotional health, plus our memories.

## PREPARING FOR CHRISTMAS

**Make Art To Music** -- Music can be very soothing, and so can doing art. So combine the two! Get out some paper (large sized is great), some colored chalk pastels, water colors, even crayons. Put on some calming music (it can still be a little peppy if you'd like) and have your group just do whatever they feel.

Tell them they can't go wrong - it's about doing art with feeling, rather than trying to create a masterpiece. The music will create the feeling. Afterwards you might be able to cut out the appropriate size for a Christmas card to send to the resident's loved ones.

**Making Easy Planters** -- When you grow gardens, consider another fun project - creative planter ideas by making and/or finding unusual planters. Use them as unique gifts and give-aways, show off heirloom and vintage items, plus see how to give them a hand crafted touch. Like an old boot from a family member as a planter.

**Make A Simple Centrepiece** -- making a nice centrepiece can be great for give-aways, raffles, silent auctions, decorating the dining room tables etc. Helping to make centrepieces can be a very fulfilling project. And they make excellent gifts. Use items you already have around.



*The following can also be used to have residents making gifts for their family, friends etc.*

**Puddle Painting** -- One of the easiest kinds! You need good watercolour paper and watercolour paints, with a few brushes, water, etc. First just paint a puddle, with plain water, of a general flower (or bird, etc.) shape onto the paper.

Then load a brush with bright paint and dab it onto the edge of the water puddle. Dab another colour onto another edge, and watch the colours spread. You can also lightly brush a bit of paint into the middle of the shape. Later you can paint on a stem and simple leaf.

Also just make random designs the same way all over the paper. Let it dry. Then cut them into strips and laminate as **book marks**. If you do a painting on a paper sized 8x10 or larger, you could also laminate them and use them as **place mats**.

### Strawberry bouquets

These strawberry bouquets/desserts have your choice of topping and are also easy gifts you can make. Do it the super easy way or make chocolate covered strawberries.

This is both a food and craft project so perfect for senior activities. The result will be an attractive centrepiece, door prize, or gift – sure to please. And satisfying to make and give.

The project is easy to modify and to give extra help to those who may need it. Simple items are used, and you may already have some around.



© Mary S. Schulte

*I hope this has given you some idea to prepare for a fun filled Christmas!*

We can't  
always choose  
the music life  
plays for us,  
but we can  
choose how we  
dance to it.

*Unknown*

## ANTIBIOTIC RESISTANCE

What if an ordinary antibiotic cure, for example, a bladder infection no longer helps? Or if you can die of a simple infection? Or if you cannot undergo a normal hip surgery without the risk of a life-threatening complication? Sickening bacteria have always had antibiotics as opponents. But these means are becoming less successful because of the bacteria resistance.

Antibiotic resistance is among the top three of the most worrying developments in the world. Worldwide, 700,000 people die every year of infections that are no longer responding to antibiotics. The WHO, the World Health Organisation, calls for action

Then I watched this amazing interesting Dutch programme and heard about the **BACTERIOPHAGE** therapy as an alternative to antibiotics.

A bacteriophage is a virus that infects the bacteria and causes the bacillus to explode. Phages are in natural balance with the bacteria that live in our body. They can be found everywhere and grown to size. Each bacterium has a phage that can explode the bacterium.

The Eliava Institute in Georgia has been using this technique since the 1920's. They have a phage library. They can match up each bacterium with their own "enemy" phage. The institute in Tblisi was founded in 1923. It is quite normal to choose a phage treatment. The waiting room is full of Georgians with the most varied ailments. But for a few years now, there are also patients from the United States, France, India, Switzerland and even Uruguay who choose for phage treatment as their last resort. They come from countries where antibiotic use is excessive and as a result resistance to antibiotics as well.

In the military hospital Queen Astrid in Brussels, Dr. Jean Paul Pirnay is the head of the phage laboratory. He produces phages for people who cannot be treated anymore as antibiotics do not work for these patients anymore. He uses the Helsinki Declaration (Article 37), which allows them with patient approval to administer an experimental medicine when nothing else helps. Dr. Pirnay can develop phages in his lab, initially for "hopeless cases" and for controlled studies. If these applications are successful, Pirnay hopes that industry will produce these phages on a larger scale.

Since I heard this information I have done some more searching on it and have come across Dr Heather Hendrickson, a lecturer in molecular biosciences, has spoken about her research into bacteriophage therapy on the Naked Scientists show.

Dr Hendrickson is an advocate for bacteriophage therapy as an alternative to antibiotics. <http://www.radionz.co.nz/national/programmes/naked-science>

Back to the TV programme that got my interest:

They showed a person with a very large infected wound and started to prepare the patient for amputation as AB treatment wasn't effective anymore. So as a last resort the patient went to Georgia where they matched a phage to the bacteria and treated him successfully. The wound healed beautifully and no amputation was required!

Wouldn't it be great to get to a stage where the days of taking an antibiotic with broad-spectrum killing of the important and beneficial microorganisms in our bodies are behind us and that infections will be handled by taking a small dose of your enemies' enemy?

I hope we soon see bacteriophage therapy as an alternative in NZ so we don't have to fly to Georgia!

Jessica

You must expect  
great things of  
yourself before  
you can do them

Michael Jordan

<p><b>The positive thinker sees the invisible, feels the intangible and achieves the impossible.</b>  <i>Winston Churchill</i></p>	<p align="center"><b>FROM THE THE PURE FOOD CO DESK</b></p>
	<p>This month at the NZ Food Awards, we were lucky enough to win the MPI Food Safety Culture Award 2017. We were up against some tough competition but managed to come out on top thanks to our ongoing collaboration with iMonitor and all of our teams hard work. Pure Foods &amp; iMonitor have put in place a temperature monitoring system to keep track &amp; monitor the entire food manufacturing process - receipt of raw ingredients to the packaged end product. The iMonitor system is incorporated into our extensive food safety control plan to ensure we are consistently hitting CCP's &amp; producing high quality, safe food.</p> <p><b><i>Congratulations to Sam and the whole team at the Pure Food Company.</i></b></p>
	<p align="center"><b>PARKINSON'S DISEASE AND SWALLOWING</b></p>
	<p><b><i>By Renee Taylor - Speech Language Therapist (Pure Food Co Newsletter)</i></b></p> <p>In Renee's (Speech Language Therapist) blog this month she discusses Parkinson's Disease and its effect on people's swallow. Swallowing and saliva difficulties are common symptoms that are associated with Parkinson Disease which can greatly impact quality of life. Renee provides some handy tips for swallowing, saliva management &amp; dry mouth.</p> <p>Parkinson's Disease (PD) is one of the more well-known progressive neurodegenerative conditions due in part to Mike J Fox and Muhammad Ali. Attention often focuses on the motor/movement features of PD, however non-motor features may also become involved e.g. changes in behaviour, sleep, and sensation (1).</p> <p>Swallowing and saliva difficulties are common symptoms that are associated with PD which can greatly impact quality of life (2). Some people find that eating and swallowing can be difficult due to a change in muscle strength and coordination. However swallowing difficulties aren't always obvious to someone with PD. If food or fluid enters the windpipe then our body should reflexively cough to prevent it from entering the lungs. However some people with PD have SILENT ASPIRATION which means that food and fluid may enter the wind pipe and lungs without any sign of coughing/choking. This can lead to aspiration pneumonia.</p> <p>Drooling and a dry mouth are also common complaints in PD. People with PD produce less saliva, this combined with some medications can contribute to developing a dry mouth (3) Despite having a dry mouth, many people with PD also report 'excess' saliva or drooling. This has to do with the automatic swallowing mechanism which starts to slow down and can result in pooling of saliva in the mouth. So, it is not that there is an increase in saliva production, but rather that it is not swallowed and cleared as regularly (3). These are all normal but frustrating symptoms of PD, and although there is no cure for the condition, there are environmental, therapeutic, and medical interventions that can assist in relieving some of these difficulties.</p> <p>It is important to know that there is help to overcome swallowing and saliva difficulties. Your Speech-language Therapist, GP, and Parkinson's NZ, can provide you with the support and information you will need.</p> <p><b>Tips when swallowing:</b></p> <ul style="list-style-type: none"> <li>• When you swallow, try to squeeze hard with all of the muscles in your mouth and throat. This will help to get food down into your stomach.</li> <li>• Try licking with your tongue round your mouth to check all the food is gone</li> <li>• Try refilling your cup or glass when it is half empty, so you do not have to tilt your head back to drink. Tilting your head backwards can sometimes make food or fluids go down the wrong way.</li> </ul>

## PARKINSON'S DISEASE AND SWALLOWING Cont'd

- You can also use modified cups that are shaped to allow you to drink without tilting your head. Your Occupational Therapist can advise you on this.
- Very cold liquids can stimulate a swallow and can be useful first thing before breakfast or with a meal. Thicker drinks move more slowly and are easier to control for some people. Your Speech-language Therapist will be able to assess you and advise on this.
- You may need to consider having softer foods. Your Speech-language Therapist will be able to assess you and advise on this.

### Tips for saliva management:

- Practice sucking in the corners of your mouth. Swallow any saliva present.
- Develop a habit of sucking and swallowing every few minutes to remove saliva from your mouth.
- Try to keep your lips closed to keep the saliva in your mouth. Practice pressing your lips hard together.
- Keep your head upright, not dropped forward. Think 'tall'.
- Always swallow before speaking, or changing your position e.g. leaning forward or standing up.
- Try to avoid continually wiping your mouth, as this can make it sore. Suck and swallow instead. If you do need to wipe your mouth or chin, 'dab' or 'blot' rather than wipe.

### Tips for a dry mouth:

- Chew some sugar free gum or suck a sweet to encourage saliva production.
- Use mouth washes to cleanse and relieve the dryness. You can make a simple but effective mouth wash by dissolving ¼ teaspoon each of bicarbonate of soda and table salt in warm water.
- Use lip salve on your lips to prevent them from becoming cracked.
- Take regular sips of fluid throughout the day. Avoid strong tea and coffee, as these act as diuretics.
- Artificial saliva is available in spray and gel forms from the pharmacy.

### References

1. Edwards LL, Quigley EM, Pfeiffer RF. Gastrointestinal dysfunction in Parkinson's disease: frequency and pathophysiology. *Neurology* 1992; 42: 726–732.
2. Wang CM, Sheih WY, Weng YH, Hsu YH, Wu YR. Non-invasive assessment determine the swallowing and respiration dysfunction in elderly Parkinson's disease. *Parkinsonism & Related Disorders* 2017; available online 26 May.
3. Proulx M, De Courval FP, Wiseman MA, Panisset M. Salivary Production in Parkinson's Disease. *Movement Disorders* 2005; 20: 204-207

**Renee Taylor**



*Thank you Sam*

*Make today so  
awesome that  
yesterday gets  
jealous.*



## HAZARDOUS SUBSTANCES REGULATIONS

Most of the requirements under the new Hazardous Substances Regulations will come into force on 1 December 2017.

The Hazardous Substances Toolbox has practical tools and guidance including:

- The [Hazardous Substances Calculator](#) (currently called the HSNO Calculator)
- The [Practical Guide to Working with Hazardous Substances](#)
- A [workbook](#) to help you create an inventory
- [Animated videos](#) about the safe management of hazardous substances
- [Information for workers](#) on staying safe around hazardous substances

The [Hazardous Substances Calculator](#) is a valuable, time-saving tool available free of charge that you can use to create, edit and access your inventory online. It allows you to:

- Create a compliant inventory
- Identify the majority of requirements you must comply with for the substances in your workplace
- Access guidance material and legislation

The Toolbox and Calculator are available at [www.hazardoussubstances.govt.nz](http://www.hazardoussubstances.govt.nz).

They will be updated to reflect the new Regulations, but now is a good time to familiarise yourself with the Calculator. Your saved inventory will be accessible when the Calculator is updated, but you will need to update the information to create a compliant inventory.

The Hazardous Substances and New Organisms (HSNO) Act will still have an essential role from 1 December. Hazardous substances will continue to be approved and classified under HSNO by the Environmental Protection Authority (EPA).

Additionally, the rules for the content and format of hazardous substances labels and safety data sheets; the rules for packaging, disposal and to protect the environment; and to protect people outside of the workplace will continue to be set under HSNO

### Protecting workers from hazardous substances

Hazardous substances are a major cause of work-related illness, with the effects of exposure often unseen until it is too late.

Short-term effects include headaches, dizziness, nausea, and irritation of the eyes, lungs and skin. Long-term effects may not be as obvious, but can be more serious, even fatal. They include personality changes, memory loss, cancer, damage to internal organs, and genetic or physical deformities.

There are three main ways people can be exposed to harm from hazardous substances:

- Breathing in toxic vapours, dusts, mists, gases or fumes
- Absorption through the skin into the blood stream
- Accidentally swallowing or ingesting, including by eating or smoking after contact

Hazardous substances include common chemicals, such as glues, cleaning solutions, acids and pesticides. They are present in one in three businesses. It's vital workers are protected from the harm they can cause

In December, new rules come into force aimed at reducing harm from the work-related use, handling, manufacture and storage of hazardous substances. The Health and Safety at Work (Hazardous Substances) Regulations 2017 will bring an increased focus to safely managing these substances at work.

Stay up to date: <http://www.worksafe.govt.nz/worksafe/information-guidance/guidance-by-industry/hsno/hazardous-substances-regulations>

Worksafe New Zealand

If you fail,  
never give up  
because F.A.I.L  
means:

"First attempt  
in learning"

End is not the  
end, in fact  
E.N.D means  
"effort never  
dies"

If you get No as  
an answer,  
remember N.O.  
means "Next  
Opportunity".  
So let's be  
positive.

A.P.J Abdul Kalam

<p><i>As long as you make mistakes, you're still human. And as long as you keep trying, there's still hope</i>  <i>Womenworking.com</i></p>	AUCKLAND CIVIL DEFENCE APPLICATION
	<p>Stay informed and receive early warning messages from Civil defence.  <b>Download the App:</b> <a href="http://www.aucklandcivildefence.org.nz/alerting/get-the-applications/">http://www.aucklandcivildefence.org.nz/alerting/get-the-applications/</a></p>
	HAVE YOU HEARD ABOUT GREY MATTER?
	<p>We'd like to introduce you to another newsletter that the Ministry of Health Library prepares.</p> <p>The <a href="#">Grey Matter</a> 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.</p> <p>If you'd like to subscribe to Grey Matter, email <a href="mailto:library@moh.govt.nz">library@moh.govt.nz</a></p>
	TOTAL QUALITY PROGRAMME
	<p><b>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?</b></p> <p>If the answer to the above is yes then  <a href="#">Join hundreds of other aged care providers</a></p> <p>This totally tried and tested Quality Programme tailor-made for aged care has been around since 1990!</p> <p>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.</p> <p>For more information and to receive the order form and licence agreement, contact me on 09 5795204, 021 311055 or <a href="mailto:09jelica@gmail.com">09jelica@gmail.com</a></p>
	TRAINING SESSIONS
	<p>If you need training provided on site please let me know as I am available to provide this on non clinical topics such as:  Please be aware that I am based in Auckland. Very happy to travel but it will add to your cost. You might be able to talk to facilities in your area to get together and share the costs.</p> <p>Cultural Safety, Spirituality, Sexuality &amp; 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.</p> <p>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.</p> <p style="text-align: right;"><i>Jessica</i></p>

<p><b>The best things in life are free: hugs, smiles, kisses, friends, family, love, laughter, and good memories</b></p>	<p align="center"><b>NEWSLETTERS BACK ISSUES</b></p>
	<p>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: <a href="http://www.jelicatips.com">www.jelicatips.com</a> No password or membership required.</p> <p>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.</p> <p>I don't mind sharing this information but I don't agree anybody making financial gain from this information!</p>
	<p align="center"><b>HELP ME KEEPING THE DATABASE UP TO DATE!</b></p>
	<p>Changing positions? New email address? Let me know if your details are changing so I can keep the database up to date.</p> <p>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.</p> <p>Thank you all for your contribution each month.</p> <p align="right"><i>Jessica</i></p>

#### Some interesting websites:

[www.careassociation.co.nz](http://www.careassociation.co.nz); [www.eldernet.co.nz](http://www.eldernet.co.nz), [www.insitenewspaper.co.nz](http://www.insitenewspaper.co.nz), [www.moh.govt.nz](http://www.moh.govt.nz);  
[www.careerforce.org.nz](http://www.careerforce.org.nz), [www.dementiacareaustralia.com](http://www.dementiacareaustralia.com); [www.advancecareplanning.org.nz](http://www.advancecareplanning.org.nz)  
<http://www.bpac.org.nz/Public/admin.asp?type=publication&pub=Best>, <http://www.open.hqsc.govt.nz>;  
[www.safefoodhandler.com](http://www.safefoodhandler.com); [www.learnonline.health.nz](http://www.learnonline.health.nz); [www.nutritionfoundation.org.nz/about-nznf/Healthy-Ageing](http://www.nutritionfoundation.org.nz/about-nznf/Healthy-Ageing); [www.glasgowcomascale.org](http://www.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 Avast antivirus protection in all aspects of e-mail sending and receiving

Signing off for now.

*Jessica*

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- 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.