

An independent newsletter for people interested in Aged Care

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Emailed to:
1872 readers and counting

Welcome to my overseas readers

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4 YEAR CERTIFICATION

It give me great pleasure to publish the below facilities who achieved

4 years certification

My compliments and congratulations to:

Bryant House Rest Home & Dementia Care in Taradale Napier

HealthCERT routine audits (certification audits, surveillance audits, partial provisional, and provisional audits) will recommence as per the Designated Auditing Agency handbook.

SPECIAL DAYS THIS MONTH

10 July - Teddy Bear Picnic Day
30 July - International Day of Friendship

PARENTAL LEAVE

Source: From New Zealand Employment

See: <https://www.employment.govt.nz/leave-and-holidays/parental-leave/eligibility/>

Changes to paid parental leave from 1 July 2020

From 1 July 2020, the duration of parental leave payments will extend from 22 weeks to 26 weeks and the maximum weekly rate for eligible parents will increase from \$585.80 to \$606.46 gross. The minimum payment rate for self-employed parents increases from \$177.00 to \$189.00 gross per week, which is equal to 10 hours of the current adult minimum wage

What's happening in the Courts, litigation and dispute settlement at level 1?

Below an introduction to Kalev who is a lawyer at Shieff Angland. Shelley Eden has been a regular contributor to my newsletter and will keep doing that but from another firm. So, I will mix and match, to make it interesting and provides you with as much info as possible. At the end of the article I will also add Shelley's details for your information. It is good to have different people to contact in case of employment and other legal issues.

Kalev is a keen surfer, dad of 7, has worked as a litigation lawyer for 30 years and is a partner at Shieff Angland Lawyers
So, hello everyone. As a recent subscriber to Jessica's wonderful newsletter I was lucky enough to have my cheeky request for a spot in this fine publication accepted. So here I am sharing my life as a working court lawyer. I hope I can provide a blend of the irreverent and the informative that will keep some of you interested.

Well, I was back in the saddle last month for some liquidators – a 3-day live hearing in the High Court with a clever judge, breathing witnesses in the flesh and an opponent after my life.

What's happening in the Courts, litigation and dispute settlement at level 1? Cont'd

We were of course “spaced out” as Jacinda recommended and did the case in one the Auckland High Court building’s largest courtrooms. This made it difficult in the sense that my trusty junior Jesvin could not easily shuffle notes to me which normally helps me look polished and accomplished. But on the plus side I did not have any opposing counsel’s usual tscking and hushed guffawing within earshot as sometimes happens in the shark tank of corporate litigation.

And then it was painful limp up to the District Court for a criminal defence matter. The limp occasioned on the first morning of Level 3 when yours truly promptly injured himself off Beachhaven channel whilst engaged in 2020’s hot new sport – wing foiling (google it). I had escaped the house for the water like a bat out of hell after a couple of months of being confined to biking and surfskateboarding. Surgery has now removed three pieces of broken of bone that were currently partying up my left knee joint big time. But all in all, it is great to see the Courts back to being in full swing. Respect and thanks must go to those wonderful court staff and security people that have steadfastly carried on the critical jobs to keeps the wheels of justice turning – not to mention our judges as well. We really do have some solid people in our country working not only in our courts, but medical centres, chemists and supermarkets and of course our care homes and facilities.

As to business disputes, I would observe that if you are a defendant there are a myriad of available excuses to delay your impending case. And if you are a plaintiff I am afraid things are more difficult – as well as delays that can be juiced from our Lockdown, there are new temporary laws that directors of companies, mortgagors, tenants, debtors can invoke to keep creditors at bay (call us for more info). But probably fair enough; though such persons do need to be able to link their impecuniosity to the Lockdown to take advantage of such laws. Quite aside from that the reality is that liquidity is flowing as freely as water firing out of waterblaster on another sunny Auckland weekend (not) – though hopefully this weekend’s deluges gave us some respite. As such, I would counsel business people to recognise our new economic order.

You might have a great case but if your defendant cannot pay a judgment or tenant cannot pay then it’s refraining us back to AC/DCs anthemic Dirty Deeds Done Dirt Cheap scenario. Plaintiffs, you want to a cut deal quickly and most likely take a hit. Defendants, just focus on the achievable; don’t bother arguing the merits in your settlement dialogue. I saw a few good offers to settle disputes made shortly pre-covid get hooked back once the party offering it quickly re-evaluated their financial position. But the same still applies now. Those around in ‘87 will remember that it got bad then got worse through 88-91. So, unless you can sit on your position for a couple of years (and collect up now pretty valuable statutory interest rates) see a street-smart lawyer or accountant to help you settle your business disputes. There are a few hungry mediators with lower fees now and also working remotely – learning as we all did how easy these video meetings and conferences can be. Clearing off these disputes will increase your bandwidth to focus on how you are going to turn a dollar in our new environment.

As to the employment world, we have certainly had a lot of calls and given advice about restructurings and redundancies. The existing law remains as before. So real care must be exercised in changing your staffing levels. It is critical that you involve your workforce in these agonising decisions. We are happy to chat to people through the things you must adhere to, so you don’t end up in hot water. *Thank you. Kalev*

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**Learn from
yesterday, live
for today, hope
for tomorrow**

COVID 19

Protect your customers and staff in Level 1

Display an official QR code poster wherever people enter your premises to support contact tracing with the NZ COVID Tracer app

How it works

Go this site: <https://qrform.tracing.covid19.govt.nz/createposter/verify-identity>

1. Verify your identity

You'll need a valid New Zealand driver licence to verify your identity.

2. Enter your location details

Provide the physical address and contact information of your location

3. Get your official NZ COVID Tracer QR code poster

Receive your QR code poster via email once it's ready

4. Display the poster at your entrances

Print out copies and display them wherever people enter your premises

Advise your relatives, visitors, suppliers to down the app from:

<https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-resources-and-tools/nz-covid-tracer-app>

The secret of change is to focus all your energy not on fighting the old but on building the new.

Socrates

HEALTH AND WELLBEING POST COVID 19

Monday 22 June 2020

Source: <https://www.otago.ac.nz/news/news/otago738849.html>

As older New Zealanders have borne the brunt of the Covid-19 pandemic, an Otago researcher warns there needs to be an emphasis on addressing older people's future needs and to help reduce ageing inequities.

University of Otago scientist, Associate Professor Louise Parr-Brownlie, is also Director of the Ageing Well National Science Challenge, one of the country's 11 national science challenges.

She highlights the fact the pandemic has disproportionately affected older New Zealanders who have experienced the strictest social distancing guidelines along with significant suffering and impact - most of the 22 people dying as a result of Covid-19 in New Zealand are aged over 70 years.

"Somehow, media have portrayed our older citizens in a negative light, taking up hospital beds and emphasising their vulnerability. This is harmful," Associate Professor Parr-Brownlie says.

"Most kaumātua (older people) have been stoic and resilient. They nonchalantly share that they have survived worse and they will get through this as well. They weren't complaining about not getting takeaways, needing a fancy coffee or wanting to party with friends. They are getting on with life and things that really matter."

But as the number of older adults in New Zealand is expected to double in the next 20 years, the Otago scientist with a special interest in Parkinson's disease, advocates for

HEALTH AND WELLBEING POST COVID 19 cont'd

continued funding for quality research among this age group to ensure culturally safe and equitable care for all older New Zealanders.

In recent research published in US journal *The Gerontologist*, Associate Professor Parr-Brownlie says currently research focused on older New Zealanders is fragmented and only partially addressed within other priorities such as noncommunicable diseases.

“A significant risk is that the research on the health and wellbeing of older New Zealanders could fall between priorities, leading in turn to uncoordinated, piece-meal health service delivery.”

Despite publicly funded health and welfare support for older citizens, the aging experience differs markedly across ethnic groups with Māori dying seven years younger than other ethnicities.

The projected growth in the older New Zealand population (aged over 65) over the next 20 years is greater for Māori (130 per cent), Pacific (120 per cent) and Asian (190 per cent) ethnicities than Pākehā (50 per cent).

“These population changes have been projected for decades, yet, they are rarely discussed,” Associate Professor Parr-Brownlie explains.

“For example, we need more residential care facilities. We need flexible and responsive policies that allow families to support and later care for, their older members in the way that they want it. One size rarely fits all.”

Preliminary findings from a recent study funded by Ageing Well found that New Zealand residents moving into retirement villages were older and frailer, in parallel, the aged residential care sector has dramatically changed since the Government’s nationwide funding model was put in place more than 20 years ago.

“People are going into care at a later age, with multiple long-term conditions and disability-related dependencies that require specialised, around-the-clock care,” Associate Professor Parr-Brownlie says.

“The number of older Māori and Pacific people living in retirement villages and aged residential care is disproportionately low – the majority of residents are currently of European descent. This disparity means Māori and Pacific needs are underestimated and culturally appropriate services are limited and hard to access.”

We must continue to advocate for changes to policies throughout health and wellbeing, socioeconomic, justice and education sectors to address the roots of aging inequities, she says.

“Once this is achieved, all older New Zealanders will receive culturally appropriate care in place, facilitating strengths-based positive aging.”

Associate Professor Louise Parr-Brownlie Email: louise.parr-brownlie@otago.ac.nz

MOBILE HEALTH WEBINARS

It can be challenging for health professionals to access education and training. That’s why we run a regular webinar series designed specifically for rural & Urban health professionals. The topics are chosen based on requests we receive so if there is a topic you would like contact us: <https://mobilehealth.co.nz/webinars/>

**Just be
yourself. Let
people see the
real, imperfect,
flawed, quirky,
weird,
beautiful,
magical person
that you are.**

Mandy Hale

REPORTING

"If it's not written down, did it happen?"

The purpose of clinical record-keeping is to facilitate the planning and delivery of safe and effective care.

This is not always easy, especially when you are so busy actually delivering that care. Poorly written clinical notes undermine the quality of care, increase workload and make facilities and nurses vulnerable to legal and professional problems.

According to the Nursing Council of New Zealand's Code of Conduct for Nurses, nurses must practice in accordance with Standard 4, Principle 4.8 of the Code: **Keep clear and accurate records.**

The Code provides some guidance:

- Keep clear and accurate records of the discussions you have, the assessments you make, the care and medicines you give, and how effective these have been.
- Complete records as soon as possible after an event has occurred.
- Do not tamper with original records in any way.
- Ensure any entries you make in health consumers' records are clearly and legibly signed, dated and timed.
- Ensure any entries you make in health consumers' electronic records are clearly attributable to you.
- Ensure all records are kept secure and not accessible by unauthorised people.

When writing notes keep in mind: SOAP

- Subjective information – information the client or others give you.
- Objective information – what you can see, hear and measure (e.g. observations and investigations).
- Assessment – what can you conclude from the information you have?
- Plan – what are you going to do about it? Then document this information and the outcome/effect on the client. If it needs following up ensure that the next person is aware of this.

Terminology can be:

1. Satisfactory: the client is in expected state of physical and mental health as per care plan assessment.
2. Fair: Minor infections/malaise/upsets
3. Unwell: There has been deterioration in the client's physical or mental health. This has compromised the client's ability to perform their "normal" activities of daily living e.g., infection, mental episode, pneumonia, fracture etc.
4. Seriously Ill: The illness is of such severity that there is cause for immediate concern but there is no imminent danger to life.

GUIDELINES FOR REPORTING

Mobility - Assistance required to the resident, e.g., any changes to the clients function which require additional support such as, exercises, physio, wandering, falls, /slips, trips

Continence - Toileting, assistance required to toilet, pad changes, urinary output, bowel movement, constipation, diarrhoea, any loose motion, and use of commode.

Hygiene - Showers given, sponge, level of assistance with hygiene care, oral and hair care.

Grooming - Any changes to clients' normal patterns, e.g. refusal to shave, in need of a hair cut or in need of certain items of clothing.

Medication - any refusal or difficulty with taking medication. Changes to medications as result of GP visit. How did the client respond to it. (effect)

Be strong when
you are weak,
brave when
you are scared,
and humble
when you are
victorious

REPORTING CONT'D

Diet - Changes in portion size and type of food eaten and the level of assistance provided. Any changes to the clients' ability to swallow or chew food. clients loosing or gaining weight.

Psycho-Social - attendance at church, level of interaction with others, any conflict, or inappropriate interaction including sexual behaviour. Special occasions e.g. birthday or other celebrations.

Sensory and Communication - Any perceived changes to speech or ability to express or communicate with others. Changes to sight or hearing.

Sleep/Comfort - Any changes in typical sleeping pattern and also any interrupted sleep.

Pain Management - Any expression of pain for the Registered nurse to follow-up. Note any pain relief administered and time of same, route and post pain relief assessment score (i.e., effectiveness of analgesia)

Memory Loss or Confusion - Any changes to the client's presentation of confusion and provide examples of what was said or done indicating exacerbation of same.

Behaviour - Any social or inappropriate behaviour, sun-downing, aggression, lethargy anxiety, confusion, tearfulness, or changes in mood levels.

Injury - Any changes in eyesight, any falls, or any increase in falls risk. Ensure all falls are documented on appropriate forms including all observations made following fall or injury.

Wound/ Skin/ Management - Note any redness or irritation of pressure point, note any bruising, swelling, redness or unusual hot skin areas. Note any use of lotions or wound dressing, use of hip or leg protectors.

Respirations - Note any shortness of breath, asthma attacks, or other difficulties with breathing or any interventions

Visitors/Phone Calls: Any visitors or phone calls for the client. Did behaviour change after that.

Complaints/Concerns: Any complaints or concerns voiced either verbal or written. Ensure reporting to the person to follow up and complete form.

COMPLIANCE REQUIREMENTS

The following guidelines are provided to ensure that progress notes documentation complies with requirements for resident's records.


- All written information must be based on factual information.
- All written information must have dated, time, signature, and designation.
- No personal judgements, meaningless phrases, or irrelevant speculation.
- The use of illegal erasures is not permitted
- If information has been written incorrectly a single line must be ruled through this error and a note made "WRITTEN IN ERROR" signed and dated.
- The removal and rewriting of pages is not permitted
- Only approved abbreviations to be used.
- Only use black or blue pen to write reports.

All staff should be aware that if an investigation is undertaken, they may be called on to explain their notes ---**therefore ensure you write clearly and objectively**

Jessica

Failure is not
the opposite of
success.
It is part of
success

Be in love with
your life.
Every minute
of it

AWARDS
<p>In other exciting news, the Minister of Health has issued a call for nominations for the annual Volunteer Awards.</p> <p>This is a wonderful way to recognise and celebrate individuals who are doing incredible work.</p> <p>I am confident that you will know worthy recipients in the health sector and I encourage you to nominate them for an award.</p> <p>More information can be found at https://www.health.govt.nz/new-zealand-health-system/minister-health-volunteer-awards</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 Grey Matter 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 library@moh.govt.nz</p>
TOTAL QUALITY PROGRAMME
<p>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?</p>
<p>If the answer to the above is yes, then Join hundreds of other aged care providers</p> <p>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.</p> <p>For more information and to receive the order form and licence agreement, contact me on 09 5795204, 021 311055 or 09jelica@gmail.com</p>
SILVER RAINBOW
<p>Lesbian, Gay, Bisexual, Trans and Intersex (LGBTI) Education for Caregivers</p>  <p>If you are interested, please contact</p> <p>Julie on Julie.Watson@kahuitukaha.co.nz to find out how you can book Silver Rainbow education for your organisation.</p>

<p style="color: #4f81bd; font-style: italic;">“Goodbyes are not forever, Goodbyes are not the end. They simply mean I’ll miss you, until we meet again.”</p> <p style="font-size: small; color: #4f81bd;">Author Unknown</p>	NEWSLETTERS BACK ISSUES
	<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: www.jelicatips.com 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>
	HELP ME KEEPING THE DATABASE UP TO DATE!
	<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. <i>Jessica</i></p>

Some interesting websites:

www.careassociation.co.nz; www.eldernet.co.nz, www.moh.govt.nz; www.careerforce.org.nz, www.dementiacareaustralia.com; 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; www.learnonline.health.nz; www.nutritionfoundation.org.nz/about-nznf/Healthy-Ageing;
www.glasgowcomascale.org; <https://www.health.govt.nz/our-work/disability-services/disability-publications/disability-support-services-newsletter>; <https://worksafe.govt.nz/>

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 antivirus protection in all aspects of e-mail sending and receiving

Signing off for this month!!

Jessica

SUBSCRIBE OR UNSUBSCRIBE

- 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.