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1326 readers
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4 YEAR CERTIFICATION

I am very pleased to mention more facilities achieving
4 year certification.

I haven't heard from anybody achieving 4 years which of course doesn't mean that nobody achieved this.

It seems really hard for smaller stand alone facilities to achieve this which is a real pity as so much great work is done.

I would like to hear from you if you have fully attained all criteria and also achieved CI's. It will be interesting to see if there is a trend.

Let's do our own tracer methodology!

I would like to mention that achieving 3 years is still a great outcome so if you have received 3 years then please celebrate that and receive my congratulations for that achievement.

And for all of you, who have an audit this month, all the best!

INFECTION CONTROL SNIPPETS (Bug Control)

IT'S THAT TIME OF YEAR!

We only need to open the paper to see the effect the flu is having on the general population to remind us of the problems this nasty illness can cause to residents.

It's time to focus on this problem: train staff in outbreak management, run hand hygiene education, put up posters and ensure high standards of cleaning are being achieved. Being proactive to stop the spread before it gets a hold is a much better option. The following Australian web link has some great free resources, one of which is a Handbook for Outbreak Coordinators to help navigate through the flu season. (as long as you can overlook the Aussie references).

<https://www.dss.gov.au/our-responsibilities/ageing-and-aged-care/publications-articles/resources-learning-training/gastro-info-gastroenteritis-kit-for-aged-care/gastro-info-outbreak-coordinators-handbook>

Julie Sparks

HELP ME KEEPING THE DATABASE UP TO DATE!

Changing positions? New email address? Let me know if your details are changing so I can keep the database up to date.

Jessica

SNIPPETS

CONTROLLED MEDICATION

Advice on prescribing controlled drugs

The Ministry of Health has received inquiries about interpretation of clauses in the Medicines Act 1981, Misuse of Drugs Act 1975 and associated Regulations relating to verbal orders for controlled drugs.

Ministry of Health position statement

Verbal orders for controlled drugs are not currently allowed in the legislation*. The Ministry of Health advises the following alternative ways controlled drugs can be prescribed under current legislation:

- Anticipatory prescribing - a range of pro re nata (PRN) doses of controlled drugs are prescribed using the medication chart
- Controlled drugs are prescribed using Standing Orders as per the Medicines (Standing Order) Regulations (2002)
- Use of approved eMedicines systems where available.

This guidance may be used to support DHBs, health care providers and professional organisations to review and update policies relating to prescribing and administration of controlled drugs.

* The only exception is in the case where a prescriber communicates an oral prescription for a controlled drug in an emergency, pursuant to regulation 34 of the Misuse of Drugs Regulations 1977.

Ref: <http://www.health.govt.nz/our-work/regulation-health-and-disability-system/medicines-control/controlled-drugs/advice-to-dhbs>



"A TIME FOR CHANGE"

Changes we can make today in caring for people living and dying with dementia

We are excited to announce two world-renowned keynote speakers:

Professor Richard Faull, University of Auckland

Dr Stephen Judd, CE Hammond Care, Sydney

They will be joined by other experts who will share their knowledge on how to improve the palliative care needs of people with dementia.

Key themes for Changing Minds 2015:

Transforming attitudes: The bigger picture

Embracing **creativity** in the workplace: Kick the drug habit

Having **courage** to balance risk: Take up the challenge

Making a **difference** today: Work "on the floor"

Date: Friday 4th September 2015 **Venue:** Little Theatre, Lower Hutt

Early Bird Registration only \$180 incl GST now extended until 7th August

For programme updates and online registration please visit www.teomanga.org.nz

Choose friends who you are proud to know, people you admire, who love and respect you, people who make your day a little brighter simply by being in it. Life is too short to spend time with people who suck the happiness out of you.

ABOUT THIS NEWSLETTER

I have been writing this Link now for over 4 ½ year and looking at the monthly responses I receive the Link is appreciated by many of its 1326 readers. I don't claim to hear from all of them but I get a fair amount of feedback for which I am grateful as it motivates me to keep writing them.

The Link is not a place to advertise. But if you have something that you believe others might benefit from then write a good story about and I will look at it and see if it is worth publishing. If I start advertising then the newsletter will be full of it and I don't want that to happen.

The Link is send out in the first couple of days of each month so anything after that will have to wait until the next newsletter.

Jessica

HUMAN CAPITAL RISK - WHAT IS IT AND WHAT DO WE DO ABOUT IT?

When you are in the process of assessing your business risk and putting together your risk management plan, make human capital risk one of your focus areas.

Human capital risk is a term which covers whatever arises out of not managing an organisation's human capital well. This includes:

- Catastrophic workplace events such as disabling illness, injury or death
- Losing staff to rapid turnover
- A team member committing fraud or misappropriating assets
- Negligent hiring or retention, such as where an employer fails to complete necessary background checks on a new hire and, as a result, employs someone who is dangerous or untrustworthy.

When you review the risk management strategy for your business, assessing risk is not so much about analysing how likely or unlikely it may be for an event to occur. Over the last few years we've certainly witnessed that extreme and unlikely events occur far too often for comfort. It helps to analyse what the cost to the business would be if any of these risks occurred. Could the business take the hit or do you need to have strategies in place either to avoid them altogether or cushion the blow? And what sort of strategies might be appropriate?

Whatever your assessment of business risk, a risk management strategy that meshes with every aspect of the business is crucial. Regular review and energetic follow through will help to minimise risk and create a stronger organisational culture alert to possibility and adaptive to change.

Moore Stephens Markhams Auckland

MAKE IT EASY FOR PEOPLE TO FIND YOU. The last few years have seen a new wave breaking in the marketing world.

The bedrock of marketing was always outbound strategy: the print advertisement, the billboard, the commercial on TV. Market share used to be heavily influenced by how much you could afford to spend on advertising. Smaller competitors had to be a lot craftier, the quality of their products or services had to be outstanding and their appeal to niche markets was often their secret weapon.

Today's customers are much more proactive about seeking out services for themselves. They're more likely to begin their search on Google before they reach for the yellow pages. They look at customer reviews.

By the time they email, pick up the phone, or complete the online form on your website, they're more than likely well informed about you, your business and what you have to offer. And they're already inclined to use your services.

The message for your online strategy is: make it easy for customers to find you. Make it enticing to stay and play. Create opportunities to interact with potential customers so your web presence is less of a billboard and has more potential to personalise future contact.

Moore Stephens Markhams Auckland

The trouble with having an open mind, of course, is that people will insist on coming along and trying to put things in it.

Terry Pratchett

NZ DEMENTIA COOPERATIVE MEMBERSHIP UPDATE

NZ DEMENTIA SUMMIT

Dementia – Dilemmas and Debates

The NZ Dementia Summit is being held at Te Papa in Wellington, 5 – 6 November 2015. The Summit is jointly hosted by the NZ Dementia Cooperative, Alzheimers NZ and Carers NZ. The purpose of the Summit is to stimulate discussion and debate among multiple stakeholders across the dementia sector on the future approach to dementia care, with the aim of producing recommendations for future policy and practice that the sector and consumers support. The Summit will host two major workshops involving all the attendees. As well as these workshops, there will be speakers on identity, ethics and economics, which are core issues to consider in the care of people with dementia and their families/whanau. 2 key areas of focus for the workshops are:

Diagnosis & Beyond – The Primary Care/Specialist Continuum. This workshop will focus on the need for better integration of clinical care and support throughout the journey that people with dementia and their families take from diagnosis to end of life care.

Strategic direction – The Community/Residential Care Continuum. This workshop will focus on the broadening of the model of care from a purely medical model, and the integration of health and social services needed in this shift. It will look at how policy, planning, funding and service models can deliver better outcomes for people with dementia and the people who care for them

This is a key national event. Further information and registration will be released shortly. Numbers will be limited, so to register your interest in attending the Summit, please click nzdc@composition.co.nz.

NZDC WEBSITE

Tech Management Group is currently developing our new website. We're very excited about this as it will function as a communications platform, and allow us to undertake wide range of interactive activities that are not available on our current website. We hope to have this tested and up and running in the next few months.

In the meantime, the NZDC website continues to be hosted as a microsite on the MOH HIIRC site. Some changes have recently been made to your access to the site. The Ministry has been examining alternative options for this site, and intends to publicise these over the next few months, but a decision was made to convert all currently public facing microsites to private login only sites from 1 July 2015. Users of our website will need to register to access it. Registration for the site is easy and is simply a matter of entering a user name and password, then responding to a verification email. However, this change has been causing some confusion. So, to clarify – you don't have to be a member of the NZDC to access the site, it is open to all if you enter your registration details. If you're not a member of the NZDC, and you register on the site, this doesn't mean you have become a member of the NZDC. You have only gained access to the website. To become a member of the NZDC you need to contact me on info@nzdementia.org and I'll add you to the database.

Shereen Moloney

National Director

New Zealand Dementia Cooperative

MOB: 021 409 909

Email: info@nzdementia.org

<http://ndc.hiirc.org.nz>

Don't be afraid
to change, you
may lose
something
good but you
may gain
something
better

NEW ZEALAND SHAKEOUT



<http://www.shakeout.govt.nz/businesses/>

Everyone, everywhere should know the right action to take before, during and after an earthquake.

Thursday 15 October is the International ShakeOut Day of Action. New Zealand will be the first country to participate this year, at 9:15am!*

Participating in New Zealand ShakeOut is a great way for employers and the people who work for them to learn the right actions to take before, during and after an earthquake. It's easy as 1, 2, 3!

1. Sign up now! It only takes two minutes.
2. Spread the word (share with friends, family and workmates via word of mouth, Facebook, Twitter and email).
3. Do the Drop, Cover and Hold drill at 9:15am, 15 October 2015*.

Check out the information below for basic instructions on how your care home can get prepared, do the drill and find out more.

* If you cannot do the drill at 9:15am, 15 October 2015, you can choose a time to suit you within two weeks of the drill (and still be counted).

Once you've signed up:

- Note the time and date in your diary (9:15am, 15 October 2015)
- Learn about the earthquake (and tsunami) risk in your area and other parts of New Zealand
- Download the Get Ready to ShakeOut at Work fact sheet
- Consider what may happen when an earthquake shakes your area. Plan what your care home will do now to prepare, so that when it happens you will be able to recover quickly.
 - Do you know how to contact your staff, client relatives, suppliers and key customers if your IT system is down and you cannot get into your office?
 - Do you have alternative contact information for when landline or mobile networks are down?
 - Does anyone else in your organisation know where to find this information if you are not there?
 - Do your staff and their families have a plan for communicating in a crisis?
- Talk to other care homes about what they have done, and encourage them to join you in getting more prepared.
- Display posters and flyers about New Zealand ShakeOut in communal areas and on notice boards and intranets.
- Include information about New Zealand ShakeOut in your communication to staff and stakeholders
- Include a link to www.shakeout.govt.nz on your website – we have banner ads you can include too, email newzealand@shakeout.org
- Give your staff information on how they can be more prepared – at work and at home – hold preparedness morning teas, Friday drinks or staff meetings and provide information on your intranet and notice boards.

Why is Monday so far from Friday and Friday so near to Monday?

SHAKEOUT

9:15am, 15 October 2015:

Signal the start of the drill: there are lots of ways to start the drill, like listen to the radio, blow a whistle, shout 'earthquake!' or watch official videos (more information to come later), use an intercom, intranet or wardens (don't use your fire alarm).

Do the Drop, Cover, and Hold drill for 30-45 seconds:

- DROP down on your hands and knees. This position protects you from falling but allows you to still move if necessary.
- COVER your head and neck (and your entire body if possible) under a sturdy table or desk (if it is no more than a few steps away from you). If there is no shelter nearby, get down near an interior wall (or next to low-lying furniture that won't fall on you), and cover your head and neck with your arms and hands.
- HOLD on to your shelter (or your position to protect your head and neck) until the shaking stops. Be prepared to move with your shelter if the shaking shifts it around.
- If you will be in an elevator, outside, or in other situations during your drill or in an actual earthquake, you can adjust these steps.
- Instructions are also available for people with disabilities or special requirements.

While you are doing the drill, imagine that it is real and what might be happening around you. Think about what you might need to do before a real earthquake happens to help protect yourself and your staff (and clients).

Practise what you will do after the shaking stops. If you live in a coastal area, you could practise your tsunami evacuation plan.

After your drill is complete, have discussions about what you learned and, if necessary, make changes to your business' emergency management plan.

Share your ShakeOut photos, videos, and stories on the Share the ShakeOut page.

So Sign up now! It only takes two minutes.

HOW TO ACHIEVE A CONTINUOUS IMPROVEMENT (CI) RATING.

CI Definition: having fully attained the criterion the service can in addition clearly demonstrate a review process including analysis and reporting of findings, evidence of actions taken based on these findings, and improvements to service provision and consumer safety, or satisfaction as a result of the review process.

These systems need to be embedded to achieve that CI. (long term continuous evidence)

According to the MOH handbook to achieve a CI there needs to be evidence.

Evidence includes:

How your achievement is beyond the expected fully attainment.

That a review process occurred, including analysis and reporting of findings.

The evidence of action taken based on findings and improvement to service provision.

How consumer safety has been measured as a result of the review process or that consumer satisfaction has been measured as a result of the review process.

More in September!

Jessica

Life always offers you a second chance. It's called tomorrow.

DAFFODIL DAY



Friday 28th August 2015

Daffodil Day is the Cancer Society's annual flagship event and one of the most important fundraising and awareness campaigns in the country. As well as providing an opportunity to raise awareness of cancer in New Zealand, Daffodil Day is a major funding source for the Cancer Society.

This year we are celebrating the **25th nationwide Daffodil Day** and we want to make it our most successful appeal yet. We are proud to be regarded as one of the country's most trusted charities and this year's Daffodil Day will celebrate the work the Cancer Society has done over many years.

The daffodil is one of the first flowers of spring, whose bright yellow blooms remind us of the joys the new season will bring. It represents the hope there is for the 1 in 3 New Zealanders affected by cancer.

The donations we receive go towards vital scientific research into the causes and treatment of all types of cancer, as well as providing a wide range of support services, information, health promotion and education programmes to reduce cancer risk, awareness campaigns and programmes for people affected by cancer. **Please support the Cancer Society [give a hand](#) or [donate generously](#)**

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, Privacy, Rights, Confidentiality, Communication and documentation, Abuse and neglect prevention, Restraint minimisation and safe practice, Behaviour management, Complaints and risk management, open disclosure, EPOA, Advance directive, informed consent and resuscitation, Health and Safety, Ageing process, mental illness.

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

Knowledge is
knowing that a
tomato is a
fruit; wisdom is
not putting it in
a fruit salad
Miles Kington

NEWSLETTERS BACK ISSUES

A best friend is like a four leaf clover, hard to find, lucky to have.

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.

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 financial gain from this information!

Some interesting websites:

www.careassociation.co.nz; www.eldernet.co.nz, www.insiteneewspaper.co.nz, www.moh.govt.nz; www.healthedtrust.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.learneonline.health.nz; www.bugcontrol.co.nz; www.nutritionfoundation.org.nz/about-nznf/Healthy-Ageing; 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 Norton antivirus protection in all aspects of e-mail sending and receiving

Signing off for now.

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.