

TRANSDERMAL PATCH ALERT

In this issue:

- Transdermal patch alert
- How to apply for court orders
- Conversations that count
- National Dementia cooperative
- Reportable events
- Quality of life
- QA programme
- **Bouquet**
- Back issues
- Relay for Life

jelica@woosh.co.nz

www.jelicatips.com

mobile: 021 311055

1/3 Price Crescent
Mt Wellington
Auckland 1060



HEALTH QUALITY & SAFETY
COMMISSION NEW ZEALAND
Kōwhiri Tūwhiriwhiri Hauora o Aotearoa
PO Box 25496
Wellington 6146
New Zealand
T: +64 4 816 2333
www.hqsc.govt.nz

Re: Transdermal patch alert

Two versions of this alert have been issued today:

1. an alert that details the required actions for staff who prescribe, dispense or administer transdermal patches.
2. an alert that details the required organisational actions.

The alerts are accompanied by an action plan to be completed and returned to the Health Quality and Safety Commission. The time frame and details for returning the completed action plan are included on the action plan.

The Funding and Planning Manager or the contract manager for aged residential care are requested to ensure the required actions are carried out in the suggested timeframe and to return the completed action plan to the Commission by 30 June 2014.

Aged residential care facility managers should be asked to display the alert **'for the attention of all staff who prescribe, dispense or administer transdermal patches'** in their clinical areas.

A separate action plan and a copy of the organisational alert and the alert for the attention of all staff who prescribe, dispense or administer transdermal patches has been sent to DHB Quality and Risk Managers for their action within the provider arm.

Additionally, the alerts have been circulated to the Chairs or secretaries of DHB Medicines Advisory Committees or Medication Safety Committees and DHB Chief Pharmacists for their information.

Kind Regards

Beth Loe

Medication Safety Specialist

Health Quality and Safety Commission

On behalf of the Medication Safety Expert Advisory Group

Beth.loe@hqsc.govt.nz 09 580 9160

NOTE:

Please find attached to this newsletter the alert poster.

GUIDANCE ON HOW TO APPLY FOR COURT ORDERS

Some guidance on the process for applying for court orders. A couple of brief pointers might help.

Patients who lack decision making capacity can be provided health and disability services with:

- (i) The consent of an enduring power of attorney (for care and welfare)
- (ii) The consent of a court appointed welfare guardian
- (iii) A treatment specific court order
- (iv) Other legal authority such as the Mental Health (CAT) Act
Or, in default of those
- (v) Under Right 7(4) of the Code of Rights (and co-existing common law doctrine of necessity)

When should orders under the Protection of Personal and Property Rights Act 1988 be sought?

Where there is no EPOA or welfare guardian for an incapacitated patient, providers should consider carefully whether court orders are required. There is no set threshold, but an application for orders is certainly sensible where ongoing coercion is required, treatment is controversial or high risk, family member oppose care, and of course where Right 7(4) does not apply.

Who applies for orders?

Family members should be encouraged to apply and the DHB will apply in some cases. Anyone can apply with leave of the Court. The identity of the applicant is less important than the orders proposed.

What kind of orders are there?

There are four kinds of order: appointment of a welfare guardian; personal order (such as placement in a facility or treatment); appointment of a property manager; and appointment of an administrator (where assets are under \$5k or \$20k income). A trustee corporation can act as property manager / administrator. The welfare guardian must be a natural person (usually a family member or friend).

How is an application made?

An application for orders requires a number of forms, as a minimum a) an application for orders b) a supporting affidavit and c) an information sheet. The affidavit tells the story. A medical report and other relevant documentation can be annexed to the affidavit. It is important to propose a solution, in other words put forward a practical outcome for the Court's endorsement. A proposed welfare guardian or property manager must consent to appointment. The relevant forms can be found at <http://www.courts.govt.nz/courts/family-court/forms/list-of-forms/forms-for-proceedings-under-protection-of-personal-and-property-rights-act-1988> The process can appear intimidating however most of the work is required up front. It is a lot easier the second time through. A lawyer is not required for simple applications. In our experience legal support can be helpful 1/ for some initial guidance (e.g. reviewing a draft application) and 2/ where the application is contested.

How is an application determined?

Once an application is filed, the Court will appoint an independent lawyer to represent the patient. A hearing may be required. Urgency can be requested however the process can take some months. The Court may make interim orders for up to six months.

Peter Le Cren Claro Law

There comes a point in your life when you realize, Who matters, who never did, who won't any more, And who always will. So don't worry about people from the past, There's a reason why they didn't make it to your future.

CONVERSATIONS THAT COUNT

Conversations that count community toolkit for volunteers – train-the-trainer opportunity (<http://www.hqsc.govt.nz/assets/Other-Topics/QS-challenge-reports/Conversations-about-death-and-dying-Toolkit.pdf>)

Conversations that Count is a peer education programme to encourage conversations in the community about advance care planning. It was piloted in 2012 by Auckland District Health Board. The toolkit that was developed needs trained volunteers to use it and engage with groups in the community. The plan now is to develop a train-the-trainer programme for district health boards and community groups so they can train volunteers in their own areas on how to use the toolkit and run sessions in the community.

We are seeking expressions of interest from an experienced train-the-trainer to:

1. Develop fresh content for the peer education modules
2. Help develop a workable model for delivering the train-the-trainer programme
3. Write content for the train the–trainer modules
4. Deliver train the trainer modules

The successful person would need to be experienced, competent, good at managing complex and fluid situations and comfortable talking about sensitive issues.

We would like to develop and deliver the train the trainer programme by end June 2014.

If you have experience in developing ‘train-the-trainer’ programmes and are passionate about supporting wider social change through enabling the development of informed discussions about advance care please contact me.

Expressions of interest are sought by 15 February.

Kindest regards

Leigh Manson, Programme Manager

National Advance Care Planning Cooperative

(09 307 4949 ext 22873 | (022 646 2817 | * leighma@adhb.govt.nz

When you free yourself from negative people you free yourself to be YOU and being YOU is the only way to truly live

NATIONAL DEMENTIA COOPERATIVE UPDATE

📄 Alzheimers NZ is seeking your input to help inform the programme for their 2014 Conference in November. You can find their very short survey here <https://www.surveymonkey.com/s/66CRYXP> Please complete it by Monday 3 February.

📄 Melbourne is hosting the 5th Annual National Dementia Congress on 20-21 February. For further details <http://www.healthcareconferences.com.au/healthcare-conferences/healthcare/national-dementia-congress>

📄 The University of Tasmania's *Understanding Dementia* 11-week massive open online course (MOOC) is free and anyone can register. It is recommended by Ruth Thomas, Midland's Regional Dementia Coordinator. The next course starts in March 2014, [registrations of interest](#) are now open.

📄 Our forum proceedings are starting to look impressive, thanks to those speakers who sent in a written version of their presentation. Some more final checking and formatting to be done...

Please forward this update to others who have an interest in improving care for people with dementia. As always, if you have any questions, do contact me.

Marja Steur

National Coordinator National Dementia Cooperative

The Princess Margaret Hospital, Christchurch DDI 03 337 8691

Marja.Steur@cdhb.health.nz

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

REPORTABLE EVENTS



Health and Disability Services (Safety) Act 2001: Section 31(5) Reporting Guidelines

Scope:

These Guidelines apply to all New Zealand health and disability service providers who have obligations under section 31 of the Health and Disability Services (Safety) Act 2001 (HDSS Act).

Disclaimer

It is important to note that these Guidelines are to give general guidance to those reporting under section 31(5) to know what type of events to report. These Guidelines do not cover every reportable event under section 31(5) and those reporting must use their discretion when assessing what must be reported. These Guidelines do not cover every type of reportable event. The Ministry does not take reliance on these Guidelines to be a defence for any lack of reporting.

Safety of Reporting:

- consumers and staff must be empowered to report events without fear of retribution;
- events that are reported must be investigated with a focus on determining the underlying system failures and not blaming or punishing individuals;
- providers must ensure a just culture prevails so individuals are not held accountable for system failures;
- incidents that involve a criminal act or substance abuse by the health practitioner, a deliberate unsafe act, or deliberate consumer harm will be managed in a separate process and may involve the relevant regulatory authorities.

Background

The HDSS Act section 31(5) requires that:

“A person certified to provide health care services of any kind must promptly give the Director-General written notice of –

- (a) any incident or situation (for example, a fire, flood, or failure of equipment or facilities) that has put at risk, may have put at risk, puts at risk, or may be putting at risk the health or safety of people for whom the person was or is providing the services; and*
- (b) any investigation commenced by a constable into any aspect of the services, their provision, or any premises in which they were provided; and*
- (c) any death of a person to whom the person was providing the services, or occurring in any premises in which they were provided, that is required to be reported to a coroner under the Coroners Act 2006.”*

Too much of a
good thing can
be truly
wonderful

Continued reporting guidelines

Guidelines for Reporting

Common themes for reporting under these categories are:

Section 31(5) :	Examples: Note: These do not cover every reportable event under section 31(5), and those reporting must use their discretion when assessing what must be reported.
Subsection (a) Health & Safety	<ul style="list-style-type: none"> - Evacuations - Fire - Natural Disaster - Flood - Equipment failure which puts at risk; <ul style="list-style-type: none"> ➤ health or safety of residents ➤ communication systems
Subsection (b) Police investigation commenced by a constable	<ul style="list-style-type: none"> - Intruders/trespassers/harassment - Assault - Missing medication - Theft - Missing residents - Suspicious Deaths
Subsection (c) Coroner's report	<ul style="list-style-type: none"> - Sudden Deaths - Death certificate unsigned - Death of a resident who is under a Compulsory Treatment Order (Mental Health)

QUALITY LIFE!

Hello and welcome to Quality Life!

If you are involved in the Aged Care, Disability or Mental Health sectors either as a Diversional Therapist, Recreational Therapist, Activities person, Allied professional, Home-based carer, family member or friend of someone using these services then you are in the right place!

Everyone is a unique combination of mind, body and soul with individual, recreational needs that when appropriately met allow the individual to lead inspiring, creative and fulfilling lives. For those with Dementia, Aged Related Frailty, Mental or Physical Health and Disability issues, finding fulfilment in life can be more challenging but at Quality Life we believe all things are possible and are dedicated to enhancing lives through meaningful, therapeutic activity.

Most importantly we want to make it easy for you to enrich the lives of the people in your care by providing a "one stop shop" for all your needs whether it be information, products or support. Saving you time and stress and making Recreation time fun and fulfilling for all!!

We hope you enjoy your visit and will come again soon! Please feel free to give us your feedback because that is what will help us grow and develop into what you and those in your care need.

Sincerely, Linda and Eddie Hoogenboom www.qualitylifeonline.co.nz
qualitylife@hotmail.co.nz

Aspire to
inspire before
you expire

Quality Assurance 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

Here is a total tried and tested Quality Programme tailor-made for aged care!

It is imperative to have the right policies and procedures implemented to ensure compliance of our service.

All policies and procedures, including the related work forms, are written in a very user friendly manner and understandable to all staff.

All users of the programme become part of keeping the programme up to date which means that a lot of health care professionals have input into the programme.

Each policy also becomes a training tool for your staff. This is not only cost effective but also ensures that staff receives consistence training relating to your own procedures and service.

The programme comes on CD and can be personalised for your facility. It is then a straightforward matter to put the policies and procedures into practice in your facility.

This gives you total control of policies and procedures and you can personalise and change as many times as you like. After the initial purchase **you don't pay anything anymore.**

This programme was first developed in 1990 and has been constantly updated to reflect current requirements. It covers each area of the relevant services within a facility and includes the following manuals with policies and procedures: Nursing, Staffing, Administration, Quality System, Health and Safety, Fire and Emergencies, Cleaning, Laundry, Food, Gardening and Maintenance, Internal audits.

If you decide to purchase the programme, or parts thereof, you receive FREE updates through email whenever and as long as I can.

I invite you to contact me if you have problems with just one or two policies as I am happy to help you out.

For more information and to receive the order form and licence agreement, contact me on 09 5795204, 021 311055 or jelica@woosh.co.nz

BOUQUETS



A very personal bouquet this month.

This one goes to my beautiful sister who after a two year, bravely fought fight, gave up her struggle with Motor Neuron Disease today

**For every
minute you are
angry you lose
sixty seconds of
happiness**

<p>What have you done today to make you feel proud?</p>	<p>RELAY FOR LIFE</p>
	<p style="text-align: center;">DID YOU KNOW THAT IN NEW ZEALAND</p> <p style="text-align: center;">22 PEOPLE PASS AWAY EACH DAY OF CANCER!</p> <p style="text-align: center;">Just take a minute to think about that.</p> <p>I have been up close and personal with many people during my numerous years as volunteer chair and I get inspired every year listening to the stories of these brave and dedicated people. So look around and see whom you can Relay for!</p> <p>For more info: http://www.relayforlife.org.nz/index/about or drop me a line.</p> <p>If you cannot join the Relay you can always donate. Please visit my Relay page below. https://aucklandnorth.everydayhero.com/nz/jessica-1</p> <p>A big THANK YOU for the generous people who have already donated towards this cause.</p> <p>Thanking you in advance. <i>Jessica</i></p>
	<p>NEWSLETTERS BACK ISSUES</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: 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>

Some interesting websites:

www.careassociation.co.nz; www.eldernet.co.nz, www.insitenewspaper.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>,

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.

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.