

## In this issue:

- 4 year certification
- Obituary
- Infection control Snippets
- Snippets:
- Unlawful discrimination
- NZ aged care workforce survey launch
- Audit outcomes
- Tea break legislation
- Palliative and end of life care
- Audits
- Training
- QA Programme
- Back issues
- Helpful websites

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## 4 YEAR CERTIFICATION

I am very pleased to mention more facilities achieving

**4 year certification.**

My compliments and congratulations to:

**TERRA NOVA'S JERVOIS RESIDENTIAL CARE HERNE BAY**  
**EASTCARE RESIDENTIAL HOME HAMILTON EAST**  
**VILLAGE AT THE PARK. WELLINGTON**

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 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.*

## Obituary Judy Forrest



It is with sadness that I share news of the passing of Judy Forrest, from Bug Control. Judy graduated from the Sydney Hospital Infection Control Course in the early 1990s. Subsequent to her graduation Judy contributed to early days of professionalising infection control in Sydney and throughout Australia. In 1995 she established her private consultancy company, Bug Control. After visiting NZ in 2002 Judy decided it was the place to live and moved her family and business over this side of the Tasman. Through Judy's hard work, vision and focus Bug Control thrived. As it expanded she focused almost exclusively on work with aged-care providers. Judy was diagnosed with a terminal illness in May 2014. She fought with dignity and great courage, her struggle ending on 17 April 2015 at home in NZ. My sympathy goes to Lyndon and the family and Judy's many colleagues and friends. Rest in Peace dear Judy.

*Thank you Julie*

## 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*

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|--|--|
| <p>Always believe something wonderful is about to happen</p> | <p style="text-align: center;"><b>INFECTION CONTROL SNIPPETS (Bug Control)</b></p>   |
|  | <p>I keep coming across this little problem in our audits and thought it might be a tip that could go out to everybody</p> <p><b>Infection Prevention and Control Cleaners Tip</b><br/> From a Workplace Health and Safety perspective, <b>spray</b> bottles of chemicals and powdered chemicals in shaking containers should not be in use. If bottles of chemicals are used ensure that the bottles are turned to the '<b>stream</b>' mechanism not the '<b>spray</b>' mechanism, this reduces the potential for aerolisation of chemicals and risk for inhalation by cleaning staff.</p> <p>Bug Control have a series of Cleaning, Catering and Laundry half day seminars coming up around NZ in May and June. Visit <a href="http://www.bugcontrol.co.nz">www.bugcontrol.co.nz</a> for details.</p> <p style="text-align: right;"><i>Julie Sparks (managing Director) Bug Control NZ Ltd Tel: 64 3 3047027</i></p>   |
|  | <p style="text-align: center;"><b>SNIPPETS</b></p>   |
|  | <p><b>QUALITY SYSTEMS AND SERVICE IMPROVEMENTS</b><br/> The continuous improved quality activities should include the following</p> <ul style="list-style-type: none"> <li>➤ <b>Monitoring:</b> the collection of information about important aspects of resident care and service delivery standards and processes.</li> <li>➤ <b>Assessment:</b> The periodic assessment of this information in order to identify trends or important problems in resident care and opportunities to improve care.</li> <li>➤ <b>Action:</b> When critical issues are identified in service delivery or opportunities to improve care are identified, actions are taken within an agreed time frame</li> <li>➤ <b>Evaluation:</b> the effectiveness of actions taken is evaluated to ensure improvement.</li> <li>➤ <b>Feedback:</b> The results of audits/surveys and investigations are communicated to all appropriate people i.e staff, residents, family, stakeholders.</li> </ul> <p>~~~~~</p> <p><b>ABBAY PAIN SCALE VERSUS PAINAD TOOL</b><br/> I have received some feedback regarding the above two tools and would like to get some more feedback on this.<br/> Which tool do you use and which one do you think does the pain assessment best?</p> <p>You can find both tools on the internet:</p> <p><a href="http://www.geriatricpain.org/Content/Assessment/Impaired/Pages/PAIDADTool.aspx">http://www.geriatricpain.org/Content/Assessment/Impaired/Pages/PAIDADTool.aspx</a></p> <p><a href="http://www.racgp.org.au/your-practice/guidelines/silverbook/tools/abbey-pain-scale/">http://www.racgp.org.au/your-practice/guidelines/silverbook/tools/abbey-pain-scale/</a></p> |

|  | SNIPPETS CONT'D  |
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| <p><b>Don't let the noise of other people's opinions drown out your inner voice</b><br/>Steve Jobs</p> | <p><b>NEURO OBSERVATIONS</b><br/> <i>It is good and safe practice to check a resident for any head injuries after a fall especially if the fall has been un-witnessed and there is a potential head injury.</i></p> <p>To be completed every 15 minutes for 1<sup>st</sup> hour then every half hour for 4 hours as clinically required (as per Glasgow Coma Score guidelines)</p> <p><a href="http://www.traumaticbraininjury.com/symptoms-of-tbi/glasgow-coma-scale/">http://www.traumaticbraininjury.com/symptoms-of-tbi/glasgow-coma-scale/</a></p>  |
|  | <p><b>MINIMUM WAGES</b><br/> Workplace Relations and Safety Minister Michael Woodhouse recently announced that from April 1 2015:</p> <ul style="list-style-type: none"> <li>the adult minimum wage will increase from \$14.25 to \$14.75 an hour</li> <li>the starting-out and training hourly minimum wages will increase from \$11.40 to \$11.80 an hour.</li> </ul>  |
|  | <p><b>STAFFING LEVELS AND SKILL MIX</b><br/> The manager, or delegated person, should have discretion to extend hours and staff numbers to respond in certain situations i.e special events, emergencies, resident acuity issues, outbreaks.<br/> The staffing level reflects: number and mix of residents, acuity of residents, residents care levels, lay out of facility, staff skills and experience.</p> <p>The appropriate skill mix is reflected on the roster. The manager is responsible to ensure that each shift is filled by a staff member with the appropriate experience and skills.<br/> Junior staff will always be supervised by a senior staff member and not work by themselves until deemed competent.<br/> Staff working in senior positions have the necessary qualifications and competence to do so.</p> <p>Staff levels reflect resident's assessed needs.<br/> Each shift should be covered by at least one staff member with a first aid and CPR certificate.<br/> In cases of emergencies, major outbreaks or when a large number of staff is unable to fulfil their duties, appropriate replacements will be sought and if needed catering service used to provide meals.</p> <p><b>MAKING THE MEAL EXPERIENCE A LITTLE BIT MORE SPECIAL!</b><br/> When I visited Milton Court in Orewa I witnessed something that impressed me and I thought it to be a brilliant idea. I have asked Dennie if I could share this and she was happy for me to do so.</p> <p>Instead of just writing the menu down the cook announced the menu when all residents were in the dining room. He explained what each course was and made it a real restaurant like experience. It sounded inviting and professional.<br/> Thanks Dennie for sharing this very nice idea with us all</p> |

A pessimist sees the difficulty in every opportunity

An optimist sees the opportunity in every difficulty

Sir Winston Churchill

UNLAWFUL DISCRIMINATION

The Human Rights Commission has legal authority to investigate and/or settle complaints of unlawful discrimination under the Human Rights Act 1993.

**WHAT IS UNLAWFUL DISCRIMINATION?**

Discrimination occurs when a person is treated unfairly or less favourably than another person in the same or similar circumstances. Discrimination is unlawful if it is based on one or more of the following grounds:

|                            |                    |
|----------------------------|--------------------|
| Sex                        | Disability         |
| Marital status             | Age                |
| Religious belief           | Political opinion  |
| Ethical belief             | Employment status  |
| Colour                     | Family status      |
| Race                       | Sexual orientation |
| Ethnic or national origins |                    |

**Note:** These grounds cover past, present and assumed circumstances, direct and indirect discrimination. (Indirect discrimination occurs as a result of some action or policy that is at first glance, apparently neutral.)

LAUNCH OF THE NEW ZEALAND AGED CARE WORKFORCE SURVEY 2014

*I was very pleased to be invited to the launch of this independent report on Tuesday the 28<sup>th</sup> of April.*

This Survey offers a valuable snapshot of New Zealand’s aged care workforce and raises important questions about the value we place on the care of the elderly.

**Dr Katherine Ravenswood** Says low pay, high workloads, an ageing workforce and an increasing demand for aged care add to a concerning picture for the sector.

New Zealand needs a sustainable aged care workforce. One that is stable, well trained and healthy. This report details findings from the **New Zealand Aged Care Survey 2014** covering employees in both residential and home/community aged care. It highlights areas of concern for employees and their managers such as OSH, skills and qualifications, work conditions and job satisfaction.

Authors:

**Dr Katherine Ravenswood** is a senior lecturer in the Department of Management and co-leader of the Wellbeing & Performance Research Group at AUT University. Her research areas include work conditions in the aged care sector.

**Dr Julie Douglas** is a senior lecturer in the Department of Management whose research in employment relations has included the construction of health care occupations and professions.

**Professor Stephen Teo** is Head of the Department of Management with research expertise in strategic human resource management and change management.

Report is available on <http://www.workresearch.aut.ac.nz/agedcareworkforce>

|   | HOW TO ACHIEVE 4 YEARS  |
|---|---|
| <p>Next time you think of beautiful things don't forget to count yourself in.</p> | <p><i>I often receive this question: "How do we achieve 4 years certification?" The following is my interpretation of the decision tool and potential audit outcome.</i></p> <p>Healthcert assesses the results of the audit against the standards along with any other information, and makes a decision on the period of certification. Healthcert considers a number of factors when determining a period of certification, including:</p> <ul style="list-style-type: none"> <li>• The number of standards and criteria identified at audit achieving continuous improvement (CI), fully attained (FA) or partially attained (PA) as well as the associated risk ratings. (high, moderate, low, negligible)</li> <li>• Certification history</li> <li>• Comments from any investigations i.e DHB, HDC.</li> <li>• Substantiated complaints</li> <li>• Other relevant matters</li> </ul> <p>Healthcert applies the audit evidence to a decision tool. This tool has 18 aspects and a score is applied to each of these aspects. The total score indicates the period of certification.</p> <p>To achieve 4 years you have to achieve 400 points. This sounds like a lot but it is achievable especially if you know which criteria are highly weighted.</p> <p>For instance you can achieve 50 points for staffing (1.1.8, 1.2.7, 1.2.8) and medication (1.3.12) if the outcome is CI or FA with evidence demonstrating links to quality systems and service improvements across Standards.</p> <p>In the decision tool there are aspects in which a number of criteria are "clustered". So if there is a situation in which you have one criterion in that cluster rated PA and another criterion in that cluster CI then there is a risk that the PA takes precedent which could mean the difference of a significant number of points and achieving 3 instead of 4 years.</p> <p>As HealthCert only have the auditor's report to go on it is absolutely important to check the draft report to ensure that everything is reflected clearly, especially the linkage of your exception reporting to the quality systems and any service improvements made.</p> <p>We already know that medication is an important standard to get absolutely right. Aim to get at least 40 points here which means the standard is fully attained and there is a link to your quality system.</p> <p>For instance;</p> <ul style="list-style-type: none"> <li>• A medication error is reported.</li> <li>• Document the investigation, outcome and the corrective action</li> <li>• Link to reporting process i.e meeting to inform all staff</li> <li>• Review after the appropriate time and document outcome.</li> </ul> <p>Completing regular medication audits is also a good way to demonstrate links to quality system. A quick internal audit on a sample size of medication signing charts will not take long but might provide you with valuable information. The next time you can do a similar check to ensure that GP has completed 3/12 reviews etc.</p> <p><i>I hope this helps somewhat. Constructive feedback welcome. Jessica</i></p> |

| <p>The key to happiness is having dreams. The key to success is making your dreams come true</p> | <p>WHAT YOU NEED TO KNOW ABOUT THE NEW ‘TEA-BREAK’ LAW</p>  |
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|  | <p>The amendments to the Employment Relations Act came into effect on 6 March, and there are some important changes to rest and meal break regulations that you need to be aware of.</p> <p>Make sure you stay compliant with the new rules by familiarising yourself with these FAQs:</p> <p><b>Are my employees still entitled to rest and meal breaks?</b><br/> Yes. Your employees are still entitled to the breaks that were agreed upon and included in their employment agreements before the new law came into effect. The new law means employees are entitled to rest and meal breaks that “give them a reasonable chance during work periods to rest, refresh and take care of personal matters.” Any changes to current rest and meal break rights must be agreed with employees.</p> <p><b>So what’s new about break entitlements?</b><br/> Under the new law, the duration and time of breaks is no longer strictly regulated. In the past, stringent rules governed how long rest and meal breaks had to be, and when they had to be given. Under the new legislation, there are no specific rules for how long, or when, rest and meal breaks should be.</p> <p><b>How do I decide when to give breaks now that there are no rules to guide me?</b><br/> The new law allows breaks to be taken at flexible times that are practical for your workplace. Best practice mandates break schedules be designed to allow for optimized business service while still taking into account the health, safety and well-being of your employees.</p> <p><b>Can my employee and I agree to forego breaks?</b><br/> You and your employee can agree to compensation instead of breaks, <b>but you can’t contract out of the right to rest and meal breaks.</b> An employment agreement that requires an employee to take no breaks, does not provide compensatory measures, and excludes the employee’s entitlements is unlawful. <b>In other words, an employee either gets a break or a compensatory measure; you cannot fail to give either.</b></p> <p><b>What if it is not practical for me to give my employees’ breaks?</b><br/> You do not have to give rest and meal breaks if they cannot reasonably be given because the workplace environment or position makes it impractical (for example, a sole-charge retailer or medical emergency staff). You must, however, appropriately compensate your employees if this happens.</p> <p><b>What is considered appropriate compensation for missed breaks?</b><br/> There are no set rules as to what appropriate compensation is. The law only stipulates that the compensation be “reasonable” and of a similar value to the break. Examples of reasonable compensation include giving your employee time-off equivalent to the missed break (for example, letting your employee go home 10 minutes early but paying them until the end of their shift) or providing your employee with extra remuneration.</p> |

| <p><b>You cannot hang out with negative people and expect to live a positive life.</b></p> | WHAT YOU NEED TO KNOW ABOUT THE NEW 'TEA-BREAK' LAW  |
|--|--|
|  | <p><b>Am I required to negotiate a new meal break schedule with my employees?</b><br/>The amendment requires employers and employees to negotiate for rest and meal breaks in good faith. If an agreement cannot be reached, the employer can determine when the breaks will be taken as long as the break schedule is reasonable.</p> <p><b>What if my employee is unhappy with my decision about breaks?</b><br/>Schedule a time to meet with your employee to discuss the issue. Let them know they can bring a representative with them to the meeting. You must listen to and consider your employee's arguments, but as long as you are allowing for reasonable rest and meal breaks (or compensation if breaks are not possible) the final decision about length and timing of breaks is ultimately yours.</p> <p><b>What do I need to do right now to get compliant?</b></p> <ul style="list-style-type: none"> <li>• Check to see if your employment agreements already stipulate expectations for meal/rest breaks. If they do, you need to honour these obligations or negotiate a new agreement with your employee. As an employer, you can't change the terms of the employment agreement without agreement from your employee.</li> <li>• If you are going to change their existing rest and meal break schedule, meet with your employees ASAP to negotiate the break schedule going forward.</li> <li>• After carefully considering employee feedback and taking into account health and safety factors, inform your employees about the new break schedule.</li> <li>• Decide how you will reasonably compensate employees for missed breaks, and discuss the compensation plan with them.</li> <li>• Update your policy documents to reflect your new break schedule and compensation policy.</li> </ul> <p>If you are unsure if you are meeting your rest and meal break obligations, you can contact the Ministry of Business Innovation and Employment Contact Centre on 0800 20 90 20.</p> <p><b><i>My comment here is that it is important to look after your staff and be fair and reasonable.</i></b></p> |
|  | AUDITING   |
|  | <p>I am sure I have mentioned this before but I still receive comments from providers regarding the audit time on site.</p> <p>Before you appoint a Designated Auditing Agency (DAA)</p> <p>Check and compare!</p> <ul style="list-style-type: none"> <li>• How long they plan for the auditors to be on site for a certification audit and a surveillance audit.</li> <li>• Do they have auditors who will understand your philosophy e.g. Eden, Spark of Life etc.</li> <li>• Do they have auditors who understand your setting e.g. small rural stand alone owner operator facility or large dual facility.</li> <li>• Make the DAA aware of the fact that you will not accept negative auditors.</li> <li>• Price</li> </ul>   |



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| <p><b>There are four things you cannot recover in life.</b></p> <p><b>The stone after it's thrown</b></p> <p><b>The word after it's said</b></p> <p><b>The occasion after it is missed</b></p> <p><b>And the time after it is gone.</b><br/><b>So live life to the fullest and regret nothing</b></p> | <p align="center"><b>TE ĀRAI PALLIATIVE CARE AND END OF LIFE RESEARCH GROUP</b></p>   |
|   | <p>Come hear about the latest findings from the School of Nursing's Te Ārai Palliative Care and End of Life Research Group. The conference marks the launch of Te Ārai's bi-cultural palliative care and end of life research group and will feature sessions on the group's latest research topics including:</p> <ul style="list-style-type: none"> <li>* Culturally appropriate palliative care for Māori</li> <li>* Palliative care in aged residential care</li> <li>* Palliative care in hospitals</li> </ul> <p>The afternoon sessions will explore the palliative care sector's research needs (bring your questions, answers and ideas) as well as suggestions for New Zealand's research priorities.</p> <p>The day will be a great opportunity for networking, collaborating with colleagues, and exploring research opportunities.</p> <p>25 June 9am-4pm Tamaki Innovation Campus, the University of Auckland.</p> |
|   | <p align="center"><b>TRAINING SESSIONS</b></p>  |
|   | <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:</p> <p>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.</p> <p>If you are looking for a topic not listed here please drop me a line.<br/>I am happy to facilitate different times to suit evening and night staff.<br/>References available on request.</p> <p align="right"><i>Jessica</i></p>  |
|   | <p align="center"><b>TOTAL QUALITY PROGRAMME</b></p>  |
|   | <p align="center"> <b>Are you struggling with your policies and procedures?</b><br/> <b>Find it difficult to keep up with all the changes?</b><br/> <b>Come audit time you realise that information is not up to date?</b> </p> <p>If the answer to the above is yes then</p> <p align="center"><b>Join hundreds of other aged care providers</b></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.<br/>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 09<a href="mailto:jelica@gmail.com">jelica@gmail.com</a></p>                                 |
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|   | NEWSLETTERS BACK ISSUES  |
|---|--|
| <p><b>There's no limit to what a man can achieve, if he doesn't care who gets the credit.</b><br/>Laing Burns Jr.</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> |

#### 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.healthedtrust.org.nz](http://www.healthedtrust.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.learneonline.health.nz](http://www.learneonline.health.nz); [www.bugcontrol.co.nz](http://www.bugcontrol.co.nz); [www.nutritionfoundation.org.nz/about-nznf/Healthy-Ageing](http://www.nutritionfoundation.org.nz/about-nznf/Healthy-Ageing)

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.