

# LETTER FROM MANAGEMENT

# Staff Changes

Brain Chu our Nursing Care Manager has left us for another company. Brian had been with us for over 10 years and in the role as Nursing Care Manager for the last 5 years. We are excited for Brian in the opportunities his new position will give him but we will all miss him.

Gihon Balan our Residential Services Manager from our sister facility Algester Lodge has stepped into the new role of Residential Services Manager of Bundaleer Lodge. Gihon has been with us for over 10 years and she has been the role as Residential Services Manager at Algester Lodge for 6 years. We welcome Gihon into the new position at Bundaleer Lodge.

Jane Ding has moved from Bundaleer Lodge into the Clinical Manager role at Algester Lodge. We are all sad to see Jane move from Bundaleer Lodge and we thank her for her dedication and support. Janet Yau has moved from a Clinical Nurse role to Clinical Manager at Bundaleer Lodge. Staff have undergone training and handovers for their new positions.



Janet Yau & Gihon Balan

# COVID19 Vaccine Rollout

Bundaleer Lodge Nursing Home staff who wanted the COVID-19 vaccination have completed their second dose. This was rolled out in a very successful manger. We have 93% of our residents vaccinated and 95% of staff vaccinated at Bundaleer Lodge. Staff all have their flu vaccination up to date.

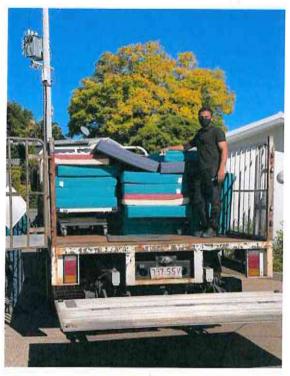


# Vaccination Day Photos



# Bundaleer Lodge Donation

Some of you may have noticed we have new beds and mattresses at Bundaleer Lodge. The old beds have been donated. Arjo Australia Pty Ltd organised the collection of our old beds and mattresses and they are being sent to a rural hospital in Sri Lanka. Once the shipment is received at the Colombo Harbour, the beds will be distributed to rural hospitals that require them. Local volunteers in Sri Lanka will be helping the distribution and transport. With the new strains of COVID causing havoc in the country, the need for medical beds has never felt so critical and urgent. The hospitals that receive these beds are in so much appreciation of the donors. It is wonderful we were able to help.









# Bundaleer Lodge Accreditation

We were issues with a six-month extension on accreditation and we expect an accreditation visit for Bundaleer Lodge in the coming months. We will keep you informed when that are at the facility.

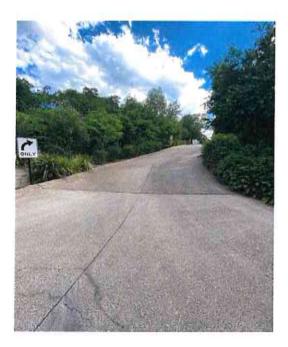
# Bundaleer Lodge New Highway Billboard

We have a new billboard sign on the Warrego Highway at Haigslea.



### **BUNDALEER LODGE DRIVEWAY EXIT**

Just a reminder that the exit driveway is now open, please do not exit the facility via the entrance driveway. Please follow the signs.









### VISITING

Visiting hours are now between 9am and 4pm Monday to Friday. Saturday and Sunday visiting hours are between 9am and 12noon for entry. One you have signed in, you may stay as long as you like. If you are unable to visit during these times please contact Management to make alternative arrangements.

From Monday 30<sup>th</sup> May 2021, all people entering aged care facilities must have proof of a current 2021 Influenza Vaccination or Letter of Exemption from their GP. Please bring a copy with you on your next visit. Y

Please be mindful of shift change times (2-3pm) as this may extend the time you need to wait for screening as staff get priority to gain access for their nursing shift. We appreciate your consideration with regard to this and thank you in advance for waiting patiently. You must enter via reception for screening. To keep up to date with COVID-19 restrictions and visitation updates please ensure you are on our email list. Leave your email address with reception to be added to the email list if you have not already done so.

## **FACEBOOK & INSTAGRAM FOR BUNDALEER LODGE**

Bundaleer Lodge has a Facebook account and Instagram account. You can keep up with what the residents have been doing on our Facebook account.

#### Facebook

https://www.facebook.com/Bundaleer-Lodge-Nursing-Home-169519596581097/

#### Instagram

https://www.instagram.com/bundaleerlodge/

#### Website

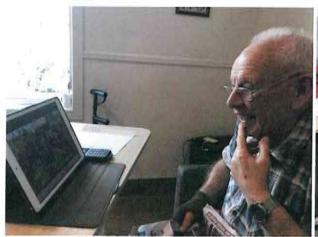
https://www.bundaleerlodge.com/

### NBN

Bundaleer Lodge Nursing Home has now been changed over to the NBN. Thank you to all staff for your patience and understanding while this process was taking place.

### SHARING SPACES PROGRAMME

Residents from Bundaleer Lodge Nursing Home and Pre-Prep students from Ipswich Junior Grammar School have been participating in an intergenerational learning programme called Sharing Spaces. This partnership programme with Junior Grammar Early Education Centre and Bundaleer Lodge Nursing Home involved residents traveling to Junior Grammar EEC to enjoy a morning of activities and fun with the children of the EEC in pre COVID times. Bundaleer lodge residents interact with the children from the school through story time, craft activities, and cooking experiences. During COVID times the children and residents have missed each other and the children have sent video messages to the residents. These photos show the residents enjoying their video messages from the children.









## **ROUND SQUARE PROGRAM**

The Round Square project partnership formed between Bundaleer Lodge and Ipswich Grammar School is important to our residents. Since the visits to Bundaleer Lodge have been postponed due to Covid19, the boys in year 9 at IGS have sent some written letters to residents instead of the inperson visits. By doing this the IGS boys and residents can still be connect. The photos show the enjoyment these letters give the resident at Bundaleer Lodge.







#### MEET & EAT CAFE

The Café has closed during the COVID outbreaks as soon as we are safely able to open this service, we will let you know.

#### A BETTER VISIT APP

Dementia Australia has developed an App for iPads and Android Tablets called "A Better Visit". The new app by Dementia Australia aims to assist people in connecting and communicating when visiting loved ones living with dementia. "A Better Visit" App is free and it includes a number of games designed to be interactive, stimulating and fun. Games on the app are designed to engage dementia residents and are suitable for residents at many stages of dementia. It can be challenging to come up with different things to do and talk about with relatives with dementia, especially as symptoms progress. Playing naughts and crosses with some classic songs key to your moves or using

the window washing game to reveal images of iconic Australian locations can't help but prompt further conversations or enjoyment of play. These games are designed to be a shared experience. The games sound and functions are designed for play by people living with dementia. Dementia Australia research found that more than 60 percent of people said they didn't know what to say to someone with dementia. By playing the games in the app carers and other family members could be inspired to engage with the person with dementia through the interaction, images and sounds enhancing their enjoyment and discussions.



"A Better Visit" is available free for iPad from the App Store and Android from the Google App Store.

We now have an iPad in the secure unit which is available for loan from the RN. The visitor can request the use of the iPad to use during a visit. This iPad has "A Better Visit" app installed and ready to play. Please ensure you return the iPad before you leave. The therapy staff also have an iPad with the app ready for use in the therapy room. If you require some assistance in using this please see Therapy staff.

#### CHARTER OF AGED CARE RIGHTS ANNOUNCED

Providers required to provide and explain signed Charter to new and existing consumers

The Federal Government has announced new laws to compel all aged care providers to sign and conform to a single Charter of Aged Care Rights.

From 1 July 2019, providers must give new consumers a copy of the new Charter signed by the provider, and ensure that the consumer or their authorised person has been given a reasonable opportunity to sign a copy of the Charter.

The new Charter will apply to all care recipients receiving Commonwealth-subsidised aged care, including residential care, home care packages, flexible care and services provided under the Commonwealth Home Support Programme and the National Aboriginal and Torres Strait Islander Flexible Aged Care Program.

According to the Government the purpose of requesting the consumer's signature is to allow them to acknowledge they have received the Charter and had assistance to understand it. Consumers are

not required to sign the Charter and can commence, and/or continue to receive care and services, even if they choose not to sign the Charter.

The Charter is a component of the Single Aged Care Quality Framework and replaces the four separate charters for residential care, home care and short term restorative care.

#### RESIDENT CODE OF CONDUCT & CHARTER OF AGED CARE RIGHTS

#### Each resident of a residential care service has the duty:

- To respect the rights and needs of other people within the residential care service, and to respect the needs of the residential care service community as a whole
- To respect the rights of staff and the proprietor to work in an environment free from harassment
- To care for his or her own health and well-being, as far as he or she is capable
- To inform his or her medical practitioner, as far as he or she is able, about his or her relevant medical history and current state of health.
- Each resident has the obligation to respect the thoughts and actions of other residents and not deprive them of their rights
- To assist the facility in maintaining accurate records and information through prompt notification
- Informing the facility of changes to contact next of kin details.

#### Charter of Aged Care Rights:

#### I have the right to:

- Receive safe and high-quality care and services
- Be treated with dignity and respect
- Have my identity, culture and diversity valued and supported
- Live without abuse and neglect
- Be informed about my care in a way I understand
- Access all information about myself, including information about my rights, care and services.
- Have control over and make choices about my care, and personal and social life, including where the choices involve personal risk
- Have control over, and make decisions about, the personal aspects of my daily life, financial
  affairs and possessions
- · My independence
- Be listened to and understood
- Have a person of my choice, including an aged care advocate, support me or speak on my behalf
- Complain free from reprisal, and to have my complaints dealt with fairly and promptly
- Personal privacy and to have personal information protected
- Exercise my rights without it adversely affecting the way I am treated

### **BUNDALEER BUILDING SITE HISTORY**

Some may remember the old kitchen and laundry were demolished and the site was cleared and the builders started construction work.





View of Bundaleer Lodge showing the cleared site from the old Kitchen and Laundry and new construction











New Waratah Comfort Room





New Waratah

New Waratah Courtyard



New Waratah Lounge August 2019



New Waratah Comfort Room August 2019



New Waratah Hallway December 2019



Waratah Bedrooms December 2019

# WORK HAS BEEN PROGRESSING ON THE RENOVATED UNIT AND NEW BUILD

The building work in the old kitchen and laundry area is now complete. We are now waiting for Council approval on the new build section. Due to COVID and changes in Council, this process is now taking a lot longer than before. We have however, been able to open 7 renovated bedrooms in the Banksia hallway as this is part of the existing building. In January, people moved back in to this old area and are very happy to be home.

## INDEPENDENT LIVING UNITS

Bundaleer Lodge Nursing Home at North Ipswich now offers ILUs (Independent Living Units) onsite. Our ILUs are architect designed modern retirement living. Built to offer low maintenance living with high quality finishes. There are 9 independent living units which offer one or two bedrooms. Some offer a small terrace with garden views. These are fully self-contained units with a dedicated car parking space. The units consist of an open plan dining lounge kitchen, laundry and one or two bedrooms with a disabled accessible bathroom. The units have the following facilities: airconditioning, fans, fridge, oven, stove, washing machine, clothes dryer, call bell point and fire alarm and sprinkler system. Residents can continue their independent lifestyle while offering nurse call bell points within the unit in the case of an emergency only. These units are available for a weekly rent which includes the furniture, electricity and water charges. Residents from our ILUs have access to the Bundaleer Meet & Eat Cafe near reception, the onsite hairdressing salon and meals can be supplied at a nominal fee. Please contact 07 3201 8772 for a tour and further information.



ILU Kitchen



**ILU Bedroom** 



**ILU Dining Room** 



**ILU Lounge Room** 

If residents or residents families wish to hold a function for a resident in the facility please book with the Diversional Therapy staff. This will ensure a suitable location for the size of the function is not double booked. Speak to the Therapy staff about what locations are deemed suitable. As other residents use the lounge areas, these are not suitable locations for family events. There are other areas within the facility which will not impact other residents while holding your function. When you hold the function you must clean up after your event.



Residents are reminded to review the menu and let staff know of any changes you would like in your meal choices.

When family visit ensure that young children are monitored so as not to cause excessive noise and disruption of other residents.

We will be installing the 4-hole putting green in the courtyard near the old main reception at Bundaleer Lodge. This work will be carried out when this section is renovated.



Jasmine wing has a large covered outdoor area where we have installed an outdoor pool table. We have installed a cabinet to house the pool balls and other equipment. Therapy will set up the table each weekday for use and pack away the equipment at the end of the day. On a weekend please ask the Jasmine RN for access to the equipment.



The kitchen uses a cook chill kitchen operation and this required a complete update to all menus. The new system requires all meals to be precisely measured for even heating. With the new system those that have a large meal will be served two meals as one large meal will not heat adequately. If

the food is not laid out correctly on the plate the food will either burn or under heat. Kitchen staff have had extensive training to make the change over as seamless as possible.

Please tell therapy or kitchen staff if there are any other condiments you would like us to trial in addition to those currently on offer.

Any low care residents are reminded that they can get a referral letter from their GP so they can access 5 free specialist visits via the EPC program. This will allow the low care resident to access for example 5 free podiatry consultations or they can use them for physiotherapy/occupational therapy/dietitian consultations. Speak to the Nursing Care Manager about this service.

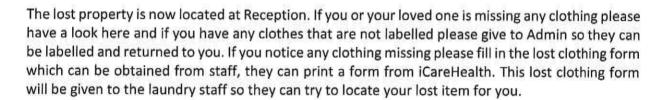
With the change in seasons, we can get colder or warmer weather so we take this opportunity to remind resident and family to remember to dress appropriately for the weather. Check the recommended clothing list to see what clothing you may need.

Can those family members or residents who get a residents' Medicare card sent to them, make sure you bring the new Medicare card into administration. If your card is still sent to your old address please advise Medicare of your change of address. We cannot organize bulk billing if we do not have this information. Could residents or family members check the expiry date for the Medicare card. If family members or residents wish to keep their own card then please make a photocopy and hand this copy to reception for our records. If the card is about to expire please apply for a new one. Then make a copy for the facility if you do not wish us to hold the card for the resident. If you would like the facility to hold the card for the resident please hand the card to reception.

Any clothes that need to be labelled must be dropped to the new administration office Monday to Friday between 9am and 4pm. If this cannot be done, please call

Reception on (07) 3201 8772 to arrange an alternate drop off location and time.

For new admissions please ensure all clothes are marked with a permanent marker prior to labelling, this is to ensure that clothing is not lost. Any new clothing items to be placed in a bag with the residents' name and handed to staff in the administration office.



Bundaleer Lodge no longer takes clothing donations due to Government Auditors seeing this as a privacy issue. When a resident moves from the facility their items must be collected within 24 hours or the items will be taken to life line and a fee of \$100 will be charged to the final account.

Bundaleer Lodge has a web site that can be accessed from a computer with Internet access at <a href="http://www.bundaleerlodge.com">http://www.bundaleerlodge.com</a>. We are striving to improve our website by adding more information and links to other sites which may hold valuable information for you. We have a picture gallery which will be updated when new features are installed.



The flu season is nearly here again so see your Doctor about the flu vaccination if you have not already done so. Due to gastrointestinal outbreak and flu illness in the community we wish to remind relatives to not visit residents if they are ill or within the 48 hours after they show the last symptoms. This helps protect the residents from flu, colds and gastrointestinal illnesses. We also remind relatives to wash their hands at our facility before visiting the residents and to wash their hands after visiting the residents. This also helps stop the spread of communicable illness in the community. Remember that washing hands saves lives.

If family are cancelling escorts arranged for appointments without the sufficient notice period (72

hours) or if the resident refuses to go to the appointment on the day and the escort arrives for the appointment then the resident will be charged for the service. The notice period of 72 hours MUST be adhered to for cancellations and the notification given to Tina in the administration office during office hours. The family can also call the escort company to cancel the appointment within the notice period. The family must then notify Kylie in administration of the cancellation within office hours.



The Department of Health wants us to inform relatives about call bells, particularly what they are used for. There are different types of calls on our system. There are call bells next to the bed, call bells in the bathroom, call bells in hallways and call bells in common areas. The hallways and common areas are for EMERGENCY situations and IMMEDIATE response. The bedroom and ensuite call bell is for general calls for assistance. The EMERGENCY call bell overrides all other calls to give an IMMEDIATE response. The bedroom/ensuite call bells are logged at the time of the call and are responded to in order. Hence if there is a high volume of calls then the wait time may be longer than at a time when there is a low volume of calls. If someone is in a room with no call bell, staff can use their DECT phones to dial 333, this will call ALL phones throughout the Facility phone system and someone will answer.

Bundaleer Lodge has a no lift policy to prevent injuries from unsafe lifting practices to patients and staff. Therefore, special equipment and techniques are used to move or transfer residents safely from one position to another.

People of all ages are at increased risk of falling while in care due to the unfamiliar surroundings, unsteady balance, poor eyesight, wearing of unsafe footwear, medical conditions and some medications and can result in a serious injury and or loss of confidence. The following can assist in falls prevention.

- Become familiar with the surrounding
- Have a falls risk assessment completed
- Be consulted about the plan to reduce your falls risk, if required. This may include a review by a pharmacist of physiotherapist for further information and support.
- Preventative measures include avoidance of long dressing gowns and nightwear.
- Footwear should fit securely; have a flat or low heel and a non-slip grip.
- Residents may be fitted with anti-embolism stacking and these can increase the risk of slipping or falling when walking. It is therefore important to wear slippers or other footwear if you are using these stockings.

The Facility supports students across multiple disciplines (nursing, medical and allied health) through partnership with tertiary education institutions and other registered training Organizations. All medical interns and other students are supervised while at the Facility. The Facility continues to have a strong commitment to teaching the healthcare professionals of the future.



The Broadband for Seniors Kiosk is now set up in the Internet Kiosk in Frangiphani. This Internet Kiosk is a Government Funded initiative taken up with the help of the facility staff and Bundaleer Lodge. Check the Therapy schedule to find when the next Internet/Computer tutorial will be held or ask your Diversional Therapists. Those residents who have their own computer and use the internet, it is advisable to keep your internet security software up to date to help protect your information on the computer.

Unwanted fire alarm activation. If a resident or resident representative causes a fire alarm to be activated causing a false alarm call out by the Fire Brigade, then the resident will be charged for the call out fee. False alarm activation can be caused by burning toast in resident toasters, burning food in resident microwaves,

smoking in rooms, aerosol sprays and fine powders dispersed in the air around the detector or other wilful activation methods. The cost of a call out is approximately \$1200.



We would like to remind visitors to the secure unit to not let anyone out, no matter how convincing or young they look. Refer them to the staff on duty should they want to exit the area.



We have had some issues with telemarketers confusing residents who have their own phones. We recommend residents or their family members have residents personal phones added to the DO NOT CALL REGISTER so telemarketing calls will not be put through to their phone. Call your phone service provider to organize this.

The basic daily fee increased on the 20<sup>th</sup> March 2021. The rate is set by Department of Health and Aging. This rate changes twice a year on the 20<sup>th</sup> March and 20<sup>th</sup> September.

Please remember to give Lynette Dresselhaus your email details for easier communications. If you have not already done so, you can drop this into administration.

Susan Dreyer & Lynette Dresselhaus

# MESSAGE FROM JANET (CM)

Hello everyone, my name is Janet Yau and I have just moved into the role of Clinical Manager at Bundaleer Lodge Nursing Home. My role as a Clinical Manager will be responsible for overseeing Care Planning and The Aged Care Funding Instrument (ACFI) for all our residents at Bundaleer Lodge. I will also assist our Residential Service Manager, Gihon Balan in the role of On-Call Manager outside of normal working hours. Please feel free to contact me if you want to discuss or make changes with your care plan.

I hope to see you all around!

Kinds Regards Janet Yau

# TRANSLATING AND INTERPRETING SERVICE (TIS)

Thousands of non-English speaking Australians face a communication gap every day. Across Australia, the Translating and Interpreting Service (TIS National) helps bridge that gap. TIS National has more than 50 years' experience in the interpreting industry and access to more than 3000 contracted interpreters speaking more than 160 languages across Australia. Whenever English speakers and non-English speakers need to communicate, TIS National can provide an interpreter to help 24 hours a day, every day of the year.

#### Who needs interpreters?

Australia is a dynamic and culturally diverse society; whose population speaks hundreds of different languages. In Australian society interpreters are not only required by non-English speakers, but also by the English speakers who need to communicate with them. In short, interpreters provide the language link that bridges the communication gap between English and non-English speakers.

There are a variety of reasons why non-English speakers need interpreters. Initially, the Australian Government introduced a phone interpreting service (now known as TIS National) to provide interpreting assistance to meet migrant information and welfare needs.

TIS National continues to deliver this service and is available to any person or organisation in Australia who needs an interpreter. TIS National provides interpreting assistance to enable non-English speakers to access government agencies and services, police and legal services, education, healthcare and community groups, as well as services offered by private businesses. English speakers are increasingly seeking to engage interpreters to communicate with non-English speakers. Services provided by TIS National are to individuals and agencies who recognise the importance of reaching out to non-English speakers to further business opportunities, satisfy community needs and provide accessible and equitable government and other services.

#### How can I access an interpreter?

Call the TIS National Contact Centre on 131 450 at any time, day or night, to access an immediate phone interpreter. The TIS National Contact Centre can connect you with an interpreter in more than 160 languages over the phone, every day of the year. TIS National's immediate phone interpreting service can be accessed directly by both English speakers and non-English speakers, just say the language you need.

Phone interpreting services can also be booked in advance, which ensures an interpreter will be available in the language you need and to cater for any special requirements. TIS National can also arrange for an interpreter to attend a specific location anywhere in Australia (subject to interpreter availability), known as on-site interpreting.

## KITCHEN UPDATE

We have a five-week rotating menu with alternatives for both lunch and dinner. These are listed on the menu. If you find there is something that you dislike or would simply like the alternative this is possible. In April we updated the menus and added some new options such as Caesar Salad and Steak & Bacon Pie. Please keep an eye out for the new options as we would love to hear your feedback.

We have found that there are quite a few residents who are requesting an item that they previously disliked. The Therapy staff have been busy reviewing and updating the dislikes list with a number of residents to reflect their choices.

When looking at the menu there are two different meat options listed. The first option is the standard and the second option is the alternative. If you would like the alternative then you simply have to circle it. If you want the standard option then just leave it blank and you will receive the standard. Once you have made your selections for the week please inform your RN or Therapy staff and they will notify the kitchen for you.

If you have a permanent change or dislike please also inform your RN and they can do a kitchen notification form for this, that way you do not have to remember to write it on your menu each week. If you would like some assistance in filling out the menu please ask your RN or Therapy staff to help.

If you would like to keep a copy of the menu you submit to the kitchen, please hand the completed menu to your RN or Therapy staff and ask from for a copy of it to keep. They can photocopy and then give one copy to you and one to the kitchen.

Families are also welcome to order meals from the kitchen. For \$5.00 you will receive the main meal and dessert as listed on the menu. All visitor meals must be ordered at least two days prior to ensure that the kitchen cook enough. Money is to be paid in cash at Reception. If you have set days that you would like meals, we can also make it a standing order so you do not have to notify the kitchen every time.

If at any time you have any suggestions or feedback about the menu please feel free to contact Admin and let them know. Feedback is always welcome.



## **RESIDENT MEETING UPDATES**

Resident meetings, albeit spur of the moment, have commenced again this year in between lockdowns. All residents and families are welcome to request a copy of the minutes from the DT staff (Tash, Linda, Easter or Rhiannon) at any time. If resident's are unwell or do not wish to attend the meeting but they would like something to be discussed they can tell Tash or Linda beforehand and they can discuss on their behalf.

We have provided a brief outline on some of the main issues that have been discussed over the past couple of months.

#### July:

- Lost property some residents commented that they were missing some items of clothing.
   Residents were informed that the lost property has been moved to Reception and they (along with families) are welcome to have a look through these items. If they find something that belongs to them please give it to Reception so that it can be labelled.
- Several residents commented that they are not being offered condiments when they are eating meals in their bedrooms. HR have done a memo to staff and also discussed in the AN meetings.
- Some menu suggestions were made. These were forwarded onto the Catering Manager for consideration.
- Some residents raised some meal preferences. Kitchen notification forms were completed and given to the kitchen.
- Several residents commented that their bedrooms were quite cool even with the heaters on. Since turning the temperature up to 24, there have been no further issues.
- Unit 1 nursing staff are noisy when coming on shift in the mornings.
- A few maintenance issues were raised. These have been forwarded onto the Maintenance Officer to be fixed.
- Discussed current changes in Management with residents. CM Jane has moved to Algester and NCM Brian has left. Introduced new RSM Gihon. Also informed residents that CN Kerry will also be leaving us.

#### August:

- Lost property is an ongoing issue. Residents were reminded about lost property at Reception. Multiple residents also mentioned that they often receive other peoples clothes in their wardrobe. Management have discussed this with the laundry staff and asked them to pay extra attention.
- Ongoing issues with condiments not being offered to residents when eating in bedrooms and staff are noisy when they come on shift.

#### **Upcoming meetings:**

Dates to be advised

# **RESIDENT FOCUS GROUPS**

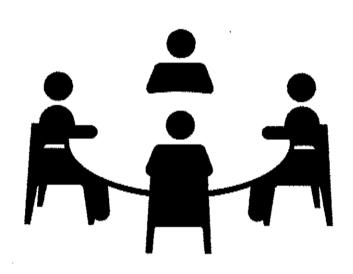
Thank you to the residents who participated in the last focus groups which talked about incident management. For example, if an incident was to happen to you how would you like it managed?

We received some good feedback, most commonly you feel it is most important to you that we engage your NOK/family in any discussions following an incident. This is reassuring to hear as our current practice is to engage yourselves and your primary NOK, so we will continue to do this.

Another reassuring point to note is that most of you feel confident to report any incidents to staff, whether they happen to you or you witness an event. This is an important point as it is essential that residents feel supported if an incident occurs and comfortable to report it to staff or to a member of the management team.

Our next focus group will be on Staffing. For example; what traits from our staff is important to you — that they are friendly; that they are well trained; that they respond to your needs quickly etc. Do you feel we have enough staff to meet your needs, e.g. Registered Nurses or Assistant Nurses?

If you want to be part of a focus group, please see Therapy staff.



# **BIRTHDAY'S**

| September               |                      | Kathleen Borchert   | 16th Oct             |
|-------------------------|----------------------|---------------------|----------------------|
| Lloyd Thompson          | 4 <sup>th</sup> Sep  | Pamela Hohenhaus    | 18 <sup>th</sup> Oct |
| Patrick Bond            | 6 <sup>th</sup> Sep  | Dennis Smith        | 19th Oct             |
| Mauricio Diaz           | 8 <sup>th</sup> Sep  | Mary Van'twout      | 20th Oct             |
| Margaret Kovacic        | 11 <sup>th</sup> Sep | Jeanette Brotherton | 21st Oct             |
| Geraldine Cook          | 11 <sup>th</sup> Sep | Leslie Geebung      | 23rd Oct             |
| Shirley Russell         | 11 <sup>th</sup> Sep | Wendy Wynne         | 25th Oct             |
| Lionel Schmidt          | 12 <sup>th</sup> Sep | Brent McCarroll     | 25th Oct             |
| Esma Spresser           | 13 <sup>th</sup> Sep | Graham Bell         | 27th Oct             |
| Reginald Mitchell       | 18 <sup>th</sup> Sep | Doreen Raabe        | 29th Oct             |
| Kerry Strahan           | 19 <sup>th</sup> Sep |                     |                      |
| <b>Desmond Anderson</b> | 21st Sep             | November            |                      |
| Erika Kelly             | 24 <sup>th</sup> Sep | Desmond Navie       | 2 <sup>nd</sup> Nov  |
| Trevor Grandin          | 26 <sup>th</sup> Sep | Marta Hentzl        | 4th Nov              |
| Ronald Higgins          | 28 <sup>th</sup> Sep | Aileen McCarroll    | 8th Nov              |
| Josephine Di Rosa       | 29 <sup>th</sup> Sep | Carol Archer        | 8 <sup>th</sup> Nov  |
| Alexander Pollock       | 29 <sup>th</sup> Sep | Dorothy Todd        | 13th Nov             |
|                         | 8                    | Darryl Austin       | 15 <sup>th</sup> Nov |
| October                 |                      | Leslie Wynne        | 18th Nov             |
| Merle Grandfils         | 4 <sup>th</sup> Oct  | Richard Jenkyn      | 21st Nov             |
| Katheen McGrath         | 7 <sup>th</sup> Oct  | Allan Lee           | 21st Nov             |
| lan Pocock              | 13 <sup>th</sup> Oct | Johannes Van Duuren | 21st Nov             |

# The Diversional Therapy Department wish all of these residents a very Happy Birthday!



# HELLO FROM YOUR BUBBLY BUNDALEER THERAPIST GIRLS

Hello from your Diversional Therapy Team. We trust everyone has been keeping safe during these ever-changing times. Bundaleer's activities have been just as exciting, and as busy as ever during and in between lockdowns. Our team is always kept on their toes with residents needs changing and being able to support the residents during these COVID times, especially when they are away from their loved ones. We are always on the hunt to bring new and engaging activities to the residents wanting to be involved in activity programs. Our calendar may change quickly and frequently due to changes in rules and regulations around social distancing however we try our very best to continue with what was planned on the day but with a few tweaks to keep everyone safe.

State Of Origin was celebrated with dressing up in team colours and Happy Hour where there were many competitive conversations had between residents arguing which team was better.

Concerts have been still continuing with outstanding attendance numbers. These are held in our outdoor areas to abide with government standards. The residents are enjoying sitting outdoors with fresh air and songs from the past.

Our resident gardens are in full bloom in Unit 2 & 3. We have many green thumbs here at Bundaleer who take pride in caring for the gardens, weeding and watering. If anybody has any clippings or plants, they would like to donate please know they would be greatly appreciated by the residents and can be given to the therapy team.





Pet therapy is still very much a favourite activity with the residents. Both The Australian Light Horse Association and Therapigs visit on a monthly basis. Residents of all abilities show positive body language when having a furry visitor.

Some residents participated in NAIDOC week activities within the facility due to restrictions that were in place then, unfortunately the guest speakers we had invited to come along and be apart of the activities were unable to come due to a last minute lockdown.

Elvis visited the building on the 16<sup>th</sup> August to remember the king of music who has been gone 44 years. The residents reminisced about their favourite Elvis songs and celebrated his life with a special afternoon tea that was Elvis themed.

The Brisbane Ekka may have been cancelled this year but that didn't stop show fever here at Bundaleer. Residents were able to enjoy beloved Ekka foods such as strawberry sundaes, dagwood dogs, popcorn and fairy floss. A competition was held for best dressed unit. Our bubbly Jasmine staff won. Thankyou, to all those who dressed up to make this day fun and memorable for the residents.



On the 18<sup>th</sup> of August some residents went on a bus trip for lunch to the CSI at North Ipswich. Residents chose from the menu for lunch. This has been our first trip out into the community for a few months due to the recent lockdowns. We can hopefully continue with further excursions each month moving forward.

Coming up for spring is Father's Day. There is a raffle at the front entrance as you sign in if you would like to purchase a ticket. All proceeds go towards special events held for residents.

Keep an eye out for spring calendar coming up. To keep up to date with what's happening at Bundaleer please join our Facebook page.

Sometimes we inspire our residents; more often they inspire us

Kind Regards, Tash, Linda, Easter and Rhiannon

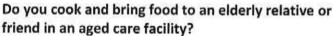
## FOOD INFORMATION

This is a reminder for all family members to be aware of the procedures for bringing food from home or from outside of the facility. Any food brought in should be served to the resident at the correct temperature. This is if the food is to be served cold then it must be below 5 degrees or if the food is to be served hot then it must be over 60 degrees. Food served between these temperatures is classed as dangerous and can cause food poisoning. If food is to be stored in the fridge in the kitchenettes then it must be labelled with the supplied stickers with name and date. Any food kept in a resident's own fridge in bedroom will only need a use by date. This is requirement of the Australian Food Standards Code. Do not share the food you bring in with other residents. It is prohibited to provide other residents with food you have brought into the facility. When you bring food into an aged care facility for a relative or friend it is you and not the staff who take responsibility for its safety.

Residents wishing to keep extra food in their rooms are welcome to do so, but it must be kept in airtight containers and the container must be labelled with expiry date of the food or the date the item was cooked. Perishable foods must be kept in the refrigerator in marked containers with name of resident and the date the item was cooked or purchased. If the food is not dated it will be thrown out. This is a food safety, health requirement. A brochure regarding this regulation can be obtained from administration should you require more information.

Food must be labelled. The label will be attached to the fridge. The information required is:

Name of resident Food received from Food description Date received Discard



This fact sheet has been kindly sponsored by Compass Group (Australia) as a service to aged care facilities.



It's really nice to show you care by cooking special favourite meals for the resident of an aged care facility - perhaps culturally specific food or a family favourite which is not normally available in that facility. But if you do, you really wouldn't want to make them sick, so there are some things you need to know. Our immune systems get weaker as we get older. Also our stomachs produce less acid which makes it easier for harmful germs to get through the digestive system and invade our bodies. If elderly people do get food poisoning, they are also likely to suffer more severe consequences. These can range from mild dehydration to neuromuscular dysfunction or even death. Older people also take longer than most of us to recover from food poisoning. There are some foods that pose a higher risk than others, particularly of passing on a Listeria infection which is dangerous for the elderly.

#### What are the higher risk foods?

Cold meats Cooked or uncooked, packaged or unpackaged e.g. roast beef, ham etc. Cold cooked chicken Purchased whole, portions, sliced or diced Pate Refrigerated pate, liverwurst or meat spreads Salads Pre-prepared or pre-packaged fruit, vegetables or salads e.g. from salad bars, retail

outlets etc. Chilled seafood Raw or smoked ready-to-eat e.g. oysters, sashimi or sushi, smoked salmon or trout, sandwich fillings, pre-cooked peeled prawns such as in prawn cocktails and salads Cheese Pre-packaged and delicatessen soft, semi soft and surface ripened cheeses e.g. brie, camembert, ricotta, feta and blue Ice cream Soft serve Other dairy products Unpasteurised dairy products e.g. raw goats milk, cheese or yoghurt made from raw milk For full details please refer to the pamphlet 'Listeria and food' on the FSANZ website, <a href="http://www.foodstandards.gov.au/srcfiles/Listeria.pdf">http://www.foodstandards.gov.au/srcfiles/Listeria.pdf</a> Foods made with raw egg such as homemade egg mayonnaise, hollandaise sauce, uncooked cakes and desserts and eggnog can also be dangerous for the elderly.

The elderly person may also have special dietary requirements or restrictions of which you are unaware. Please check with the staff before providing food to an elderly resident.

#### What precautions should I take when preparing foods?

There are no special rules for cooking for elderly people – you just need to be even fussier than normal. If you plan to take chilled or frozen food you have cooked yourself, make sure that the food is cooled quickly in your refrigerator: never at room temperature. Always wash your hands well under running water using soap and dry thoroughly before handling food. You can get information on preparing food safely from the fact sheet 'Protecting Tiny Tummies and Sensitive Systems' and other fact sheets on the Food Safety Information Council website, www.foodsafety.asn.au.

### How can I transport food safely for an elderly person?

You will need to transport your food to the aged care facility so take care that it is protected from contamination during transport and, if it is chilled food, it is kept cool or if you are taking it hot, you keep it hot during the journey. Food should be kept at 5 degrees Celsius or cooler or, for hot food, at 60 degrees Celsius or hotter. Between 5 and 60 degrees is known as the temperature danger zone because harmful bacteria multiply to dangerous levels in food when it is kept between these temperatures. Put cold food into a cooler with ice packs when travelling to visit your relative or friend. Don't pack food if it has just been cooked and is still warm. Coolers cannot cool food they can only keep cold food cool. Always cover pre-prepared foods securely and pre-chill them, for example, keep in the refrigerator overnight. Other perishable foods and drinks, such as deli products, cooked chicken and dairy products must also be cold when put in the cooler. Hot food is difficult to keep hot and is best avoided if you are travelling long distances. It is best to chill the food overnight and reheat it at the residence. If you must take hot food on a longer journey, an insulated jug, preheated with boiling water before being filled with the steaming hot food, can be used. If you are unsure whether the jug will keep the food above 60 degrees Celsius, try filling it with water at 90 degrees Celsius, seal and test the water temperature after the length of time you expect your journey to take. If it is still above 60 degrees then you can use the jug. You will need a food thermometer to do this test. If any perishable food you bring is not eaten immediately, make sure it is refrigerated before you leave.

#### Reheating food

Different aged care facilities will have different rules about reheating food provided by friends or relatives. In some, staff will reheat the food, in others, staff are not permitted to do so. In some facilities, the elderly person can reheat the food themselves, in others the person providing the food must do the reheating. Check with the staff to find out the rules in that facility. Make sure that staff know that you have brought in food and ask them how to go about re-heating it. Food needs to be reheated to a minimum of 75 degrees Celsius or 70 degrees Celsius for two minutes to kill any bacteria or viruses that might be present in the food.

#### Reheating food in a microwave oven

If you are reheating food in a microwave, you need to be especially careful that the food is heated evenly. Food heated in a microwave oven does not heat uniformly and unwanted germs may survive in portions of poorly heated food. Manufacturers recommend standing times to help alleviate the problem of uneven heating. Many microwaveable meal packs carry the instruction to stir the food part way through the cooking process. Items such as lasagne that can't be stirred should be allowed standing time to allow the whole product to reach a uniform temperature. How evenly the food will heat will also depend on the thickness of portions and on the composition and moisture content of the food. Frozen food needs to be completely thawed before reheating. If you are reheating a commercially prepared food, read and follow all the manufacturers' microwaving instructions.

#### Storage of the food you bring in

If any perishable food you have provided is not eaten immediately, tell the staff and ask them about storing the food in a refrigerator. Some elderly people like to keep extra food in their rooms in drawers or bedside tables for eating later. While this is okay for shelf-stable foods like cakes, biscuits and chocolates, this can be very risky with perishable food such as cold meats, custard or cream filled cakes and cooked vegetables and meat dishes. Leaving perishable food in the temperature danger zone for too long before eating can result in food borne illness. Food which can cause food poisoning may not look or taste spoiled. Sometimes elderly people can also forget how long the food has been there. If you bring commercially prepared food make sure the elderly person is aware of any 'best before' or 'use by' date on the food. Make sure you tell the staff if the elderly person has some perishable food in their room.

#### Remember:

If you are cooking for an elderly person, please check the fact sheet 'Protecting Tiny Tummies and Sensitive Systems' under 'publications' on the Food Safety Information Council's website www.foodsafety.asn.au for more information on preparing food safely.

#### Food Safety Information Council

The Food Safety Information Council is a non-profit group with representatives of State and Federal governments, food industry and professional associations. Membership is open to any organisation with an interest in promoting safe food handling practices for consumers. We aim to reduce the over five million cases of food poisoning in Australia each year by educating consumers to handle food safely from the time it leaves the retailer until it appears on the plate. We organise Food Safety Week each November as part of our campaign to pass on simple messages to improve consumers' knowledge of how to handle, store and cook food safely. For more information Telephone Project Co-ordinator: 0407 626 688 (mobile)

Email: info@foodsafety.asn.au Website: www.foodsafety.asn.au

Relatives are able to order a lunch time meal. The price is \$5 and must be paid to Kylie at Reception. The meal must be ordered two days before. Orders can be phoned into the facility on the facility number. If at any time the resident wishes to make a change to the meal preference or inform the kitchen of your dislikes, please see the Registered Nurse or Therapy staff to have the kitchen speak with you.

### The process for suggestions on improvements is as follows.

- 1) To make a suggestion or inform management of a problem an improvement log is completed.
- 2) The forms are located on iCare under Policies and Procedures. They are also located at Reception, in the Frangipani Internet Café and the Diversional Therapy team has forms for residents to complete.
- 3) Forms are completed and returned to the Nursing Care Manager (NCM) office.
- 4) The suggestion or problem are reviewed and if urgent, acted on immediately.
- 5) A bi monthly meeting is held consisting of management to discuss improvement logs. The actions are discussed and if able evaluations made.
- 6) If evaluations are effective the improvement log is closed out.



### Facility Mechanism for Complaints

We would like to advise residents / relatives of the facilities mechanism for handling complaints.

(a) We encourage residents/relatives to bring any concerns or complaints to the attention of the Nursing Manager or Administration. Relatives/Visitors Do Not take complaints to the RN or other nursing staff please. Follow the policy on making a complaint, if you are a relative or resident the procedure is different. A resident can make a complaint to the RN but visitors or relatives must make the complaint to the NCM/CN at BLNH and RSM/N&DC at AL. The visitor or relative is able to make an appointment with these staff during working hours or make the complaint in writing. If the complaint is urgent and after hours then contact the Team Leader on duty who can phone the NCM/CN at BLNH or RSM/N&DC at AL. Post or drop the written complaint under the managers locked door. Alternatively, you can also put it into the letter box at the front of the facility. Emails may also be sent to the following:

NCM (Nursing Care Manager Bundaleer Lodge) <u>bundaleerlodge@bigpond.com</u> RSM (Residential Services Manager Algester) **Human Resources Officer** Director

rsm@algesterlodge.com hr.bundaleer@bigpond.com Imsd@bigpond.com.au

- (b) All complaints are investigated and processed and the person advised of the outcome.
- (c) Each resident/relative has the right to exercise their right, provided it does not infringe on the rights of other people.

The mechanism for grievance and complaints is through:

- (1) Raising the issue at the resident committee meeting.
- (2) Advising the Nursing Care Manager at BLNH, RSM at AL or Administration.
- (3) Completing P256 Complaints Form or Continuous Improvement Form found at the sign in desk. Ask a staff member to show you where the forms are held and how to complete the form. The response to the problem will either be recorded in the Continuous Improvement Form or you may be spoken to directly, depending on the confidentiality of the complaint.
- (4) If after speaking to the NCM at BLNH or RSM at AL you are still not satisfied you can direct your problem/grievance/complaint to the Administrator or Director of the Nursing Home.
- (5) Residents / relatives should also be aware that they have the right to bring complaints to the Department. If the grievance/complaint cannot be solved or suitably attended to, you can make a complaint to The Department of Health. A brochure outlining the Departments Complaints mechanism is given on admission and extra copies are located at reception.

(6) There address is as follow:

Aged Care Quality and Safety Commission G.P.O Box 9819 Brisbane Qld 4001 Tel: 1800 951 822

Log a complaint online at <a href="www.agedcarequality.gov.au">www.agedcarequality.gov.au</a>
Every effort will be made by staff and management to solve grievances and complaints.

# LAUNDRY INFORMATION

It is important when new clothes or shoes are purchased, it is labelled with the residents name before using. This will ensure lost clothing items are minimized. Laundry Staff and Nursing Staff will automatically remove clothing which is worn, needs repair, is stained, or no longer fits. Relatives will be informed via phone that there is clothing in the office to be collected. If clothing is not collected within 2 weeks it will be placed in a Life Line Bin.

It is the responsibility of the relatives / guardians to ensure that there is an adequate supply of suitable clothing. All items are to be clearly marked using name tags sewn onto clothes or heat press machine labels. It is not permitted to use a marking pen to mark resident's clothes on a permanent basis. After numerous washes the name fades off and then the clothes are unnamed and become lost. CLOTHING MUST HAVE SEWN LABELS OR HEAT PRESS MACHINE LABELS.

Management can order cloth labels at a reasonable price if requested. The labels take approximately 1 week to arrive once ordered. The admin staff can arrange for the labels to be machine heat pressed onto the resident's clothes. If the admin staff are to organize the label application the clothing must be handed to the administration staff. There is a small cost and this covers labelling of all items of clothing and any additional items during the resident's stay until all the labels have been used. Please consult with administration staff, the Nursing Manager or management if you would like to order labels, and/or have labels heat pressed onto the resident's clothing.

Ensure that shoes and slippers are clearly marked as well as hats or beanies. If supplying a bedspread or knee rug have a label on to identify the item. All new articles of clothing purchased after admission must be labelled. Ensure relatives are aware of this especially when clothes are given as gifts. **NO WOOLEN CLOTHING TO BE SUPPLIED.** 

- 1. It is recommended no woollen jumpers or woollen jackets be brought as clothing, due to the laundry washing and drying at very high temperatures, which causes the items to shrink.
- The turnaround time for clothing to be returned from the laundry is approximately 4 days, it is important to ensure the resident has a sufficient number of clothing to cover this period.
- 3. Whilst all care is taken with washing and drying of residents clothing, the Management will take no responsibilities for the loss or damage of clothing.



# RESIDENT STORAGE INFORMATION

A reminder that when a resident leaves the Facility, their personal items will be held for 24 hours ONLY, due to lack of onsite storage. The Facility cannot offer longer storage options for residents' personal items. If the items have not been collected within 24 hours of permanent departure from the Facility, the items will be donated to a charity and a fee charged. No responsibility will be taken for the residents' personal items while awaiting pick up during the 24 hours; it is up to the resident or family members to ensure the security of these personal effects.

Residents and Relatives are reminded to ensure items are stored securely. There is a locked draw in every room, please use this for those items of importance or sentimental value. Should residents require even more security it may be advisable to purchase your own safe and move this into your room. Another alternative is to leave the items with relatives who can store them in a secure place. It is not advisable to leave precious items with residents in the secure unit. Residents in this unit may not be able to remember where they placed items of importance; they may even accidentally discard them. If you bring your own wheel chair or shower chair into the facility you must ensure the item is labelled with the residents' name, it is also useful for you to photograph any items owned by residents to ensure they can be identified if they go missing. If the items are stolen you can use



these photographs for the police report and your personal insurance claim if you have taken out insurance. Relatives should also check and clean all personal knickknacks and precious items every time they visit so they can be found quickly if they are missing. The Facility cleaners do not clean/dust personal items brought into the facility. If you notice any residents' equipment missing let the NCM and all your relatives know, in case one relative has taken home items for safe keeping and others do not know. If the item continues to be missing let the NCM know so the police can be informed as soon as possible. The nursing home takes no responsibility for lost personal property.

# RESIDENT PERSONAL ITEMS CLEANING

It is important to remember that the electric razors do require professional cleaning and replacement of cutting blades every 6 months. This is the resident's responsibility. A resident refrigerator in the resident's room must be kept clean and all food discarded if not labelled or in date. This is the responsibility of the resident or resident's family. The staff of the Facility will not clean these refrigerators. All other personal furniture and knickknacks brought into the facility are the responsibility of the resident or resident's family to dust and keep clean. The Facility cleaners

do not clean or dust personal items brought into the facility. If you need assistance getting a cleaner for these personal items please ask the NCM (Nursing Care Manager) and a cleaner can be organized and billed to the resident. If you want our cleaner to clean behind resident's personal furniture then the resident or resident's family must organize the moving of the furniture and have booked a time with the NCM for our cleaners to clean behind these items. The NCM can also assist to organize movers to move the furniture and the cost billed to the resident.

