

## ON THE GRAPEVINE

Welcome to the February Edition of;  
“ On the Grapevine”  
The Myrtleford Lodge Residents and  
Representatives Monthly Newsletter.



*St Valentine's Day is an annual  
festival to celebrate romantic  
love, friendship and admiration.*

*Every year on 14 February  
people celebrate this day by  
sending messages of love and  
affection to partners, family and  
friends.*



Each month we are profiling some of the expected outcomes of the Accreditation Standards. This month we focus on Expected Outcome

### **STANDARD 3.10: RESIDENT SECURITY OF TENURE AND RESPONSIBILITIES**

**This expected outcome requires that:**

***Residents have secure tenure within the residential care home, and understand their rights and responsibilities.***

***This information is provided to clarify Security of Tenure responsibilities of Aged Care facilities:***

Under the legislative provisions for security of tenure, a provider may only ask a resident to leave if:

- the aged care service can no longer provide accommodation and care suitable for the resident, having regard to the resident's long-term assessed needs, and the provider has not agreed to provide the care that the resident presently.
- the resident no longer needs the care provided through the aged care service, as assessed by an Aged Care Assessment Team (ACAT).
- the resident has not paid any agreed fee to the provider within 42 days after the due date, for a reason within the resident's control
- the resident has intentionally caused serious damage to the aged care service, or serious injury to the provider, an employee of the aged care service, or to another resident.



- the resident is away from the aged care service for a continuous period of at least seven days for a reason other than permitted by the Act or an emergency. Social leave is permitted.

The provider must give written notice if the resident is required to leave the service and must give the notice to the resident or his or her representative at least 14 days before the resident is to leave.

### **Four steps—asking a resident to leave**

There are four steps that the provider must follow in asking a resident to leave.

#### **Step 1—providing written notice**

The written notice from the approved provider must include:

- the decision
- reasons for the decision
- when the resident is to leave (which must be at least 14 days after the notice is given);
- the resident's rights about leaving, including his/her access to complaints resolution mechanisms; independent complaints processes; and 1 or more representatives of an advocacy service.

#### **Step 2 – considering suitable alternative accommodation**

The approved provider should discuss with the resident whether they wish to find their own alternate accommodation. However, ultimately it is the approved provider's responsibility to ensure that accommodation is available for the resident, before the resident can be required to leave.

The suitability of the alternate accommodation is linked to the assessment of the resident's long-term care needs—for example, a service that provided only low level care would not be suitable alternate accommodation for a resident who was assessed as requiring a high level of care.

The alternate accommodation does not necessarily have to be the preferred accommodation of the resident who is being asked to leave. However, the alternate accommodation does have to be available and able to provide care which is suitable to meet the needs of the resident. Some alternate accommodation may not be considered suitable, such as a service where there are sanctions in place or a service that is a great distance from the existing service. The resident must be able to afford the suitable alternate accommodation—for example, an extra service facility may not be appropriate for a concessional resident.

Hospital is not considered to be suitable alternate accommodation.

### **Step 3—assessing the resident's long-term needs**

Where the resident is asked to leave because the aged care service can no longer provide accommodation and care suitable for the resident's long-term assessed needs, and the provider has not agreed to provide the care that the resident presently needs, the long-term needs of the resident must be assessed by:

- an ACAT
- or at least two medical or other health practitioners who meet the following criteria

- one must be independent of the provider and the aged care service and chosen by the resident and both must be competent to assess the aged care needs of the resident.



After such an assessment, if those conducting the assessment consider that the present accommodation and care cannot continue to meet the care needs of the resident, then the process associated with requiring the resident to leave must be undertaken.

#### **Step 4—when the resident is no longer required to leave**

If the decision requiring the resident to leave was based on their behaviour, and since giving the original notice to leave, the approved provider has agreed with the resident that the resident should stay because their behaviour has changed, then the approved provider should give the resident a notice stating that they are no longer required to leave.

#### **Security of place within the residential service—moving residents**

It is important that residents feel secure in their room or bed within an aged care service. Accordingly, a resident can only be moved to another bed or room in the following circumstances:

- if the resident asks to be moved
- if the resident agrees to move, after being fully consulted and without any pressure

- if the move is necessary on genuine medical grounds as assessed by an ACAT or at least two medical or other health practitioners one of whom is independent of the provider and the aged care service and chosen by the resident
- both of whom are competent to assess the aged care needs of the resident
- if the place occupied by the resident becomes an extra service place and the resident elects not to pay the extra service fee
- if the move is necessary because repairs or improvements to the aged care service need to be carried out and the resident has the right to return to the bed or room, if it continues to exist as a bedroom for residents, once the repairs or improvements are completed.

Whilst we are very reluctant to ask residents to move rooms on some occasions this may be unavoidable. If you have any questions about security of tenure please see Marita.

All residents need to feel safe and secure at Myrtleford Lodge Aged Care and only under extreme circumstances are residents asked to leave.

Since the opening of Myrtleford Lodge, there has been only one resident required to find more suitable accommodation so you can be rest assured you security of tenure is maintained at Myrtleford Lodge Aged Care.

Marita Seamer  
Director of Nursing



# UPcoming EVENTS

7th February ~ Weekly Craft outing recommences.

8th February ~ Cooking for Happy Hour

9th February ~ Happy Hour



" This is your life" with Ted Fenn.

10th February ~ Sing-along with Lynn Smith

13th February ~ Shrove Tuesday. ( pancake day )

~ Residents/Representatives Meeting @3.15pm.

14th February ~ Ash Wednesday

~ Valentines Day

16th February ~ Chinese New Year.

" Year of the dog"



23rd February ~ Happy Hour

Everyone is Welcome;

Every Tuesday afternoon ~ Movie afternoon

Episodes of Downtown Abbey to be shown  
throughout February; Series 1

Episodes 1,2,3 & 4



## Visitors to Myrtleford Lodge



Myrtleford Lodge are fortunate to receive many visitors through our doors on a daily basis however during the holiday season with families coming together to enjoy Christmas and New Year we enjoyed the company of generations of families.

Our resident gardener, Ted Fenn was captured with his daughter, Linda, grandchildren and great grandchildren who had come to visit.



Betty and Kevin Pigdon also enjoyed four generations of family. Gorgeous little Morgan pictured on Kevin's knee is Betty and Kevin's great granddaughter.



## New activities at Myrtleford Lodge

Myrtleford Lodge Residents and Activities staff discuss new ideas for the monthly calendar of events both informally during daily activities as well as at the scheduled monthly meetings.

'This is your life" has been reintroduced with one Resident each month to give a little talk on their background, hobbies etc prior to coming to Myrtleford Lodge.



Pictured above is Lorna Wills who spoke about her travels after retirement.



Thelma Jones and Gwenyth Millar were captured enjoying the newly introduced "Chair dancing" although their love of music enticed them out of the chairs and onto the dance floor.

## Pet Therapy

Several volunteers from the Community Visitors Scheme visit Residents at Myrtleford Lodge Aged Care which further enhances our daily activities program.



Julie from the visitors scheme brought in her dog recently, much to the delight of Gen Keat and Johanna VanDoodewaard.



## Birthday surprise

Bill and Gwen Naughton enjoyed a ride on the back of a Harley Davidson out to Lake Buffalo for morning tea, a belated 90th Birthday gift for Bill from his family.

## Valentines Day Craft

Look out for the Lodge turning a sea of red roses and hearts as Valentines Day approaches.

Our craft group has been very busily making items to adorn the dinning and activities rooms.

It seems Love is in the air!



## Carpet Bowls

Carpet bowls continues to be one of the most enjoyed activities on the calendar.

John Debruyne enjoyed a game against Mary Pedder as two teams of players went head to head with John part of the team of champions on this occasion.

*In Loving Memory;*

*Ronald Andrew ~ 4th January*

*Elizabeth Luke ~ 6th January*

*Giovanna Tollardo ~ 24th January*

*Allan Smart ~ 31st January*

*Myrtleford Lodge Residents and Staff send sincere condolences to families and friends during this sad time.*

*Our thoughts and prayers are with you all.*

*“A beautiful garden now stands alone,  
missing the one who nurtured it  
But now she is gone,  
Her flowers still bloom, and the sun it still shines,...”*

Fresh seasonal fruit



Residents are reminded that the kitchen has a supply of fresh seasonal fruit available each day.

Please ask one of the Catering Staff for assistance.

## Staying Hydrated in the warmer weather

As summer rolls on, so too are warmer days. Heat-related illnesses, particularly dehydration, can affect anyone—no matter age or medical history.

Dehydration is more prevalent in warm weather, due to the loss of water and salt from the body. Dehydration occurs when a person's body temperature rises and the body tries to cool itself down by sweating.

### Why do we need to drink water?

Our bodies comprise of 70 to 75 per cent of water, which is responsible for maintaining blood circulation as well as supplying our bodies with essential nutrients and removing waste.

Drinking water also maintains blood volume and ensures our blood pressure is maintained.

### How do I know if I'm dehydrated?

The most common symptoms of dehydration are a dry mouth and feeling thirsty. Other symptoms include:

- Headache
- dry skin
- passing less urine than normal
- Tiredness
- Dizziness
- cramping in the arms and legs



- If these symptoms worsen or last for more than an hour, immediate medical attention is highly advised.

## *A note from the Administration Desk*

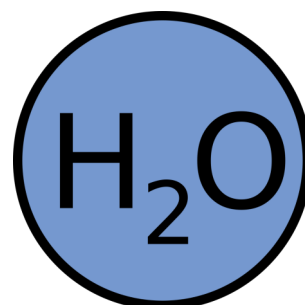
### Helpful hints to stay hydrated

Ensure your staying hydrated during the warmer months by following these tips:

- Pay attention to the colour of your urine as this is a good way to monitor fluid loss. Your urine should be pale yellow and not dark yellow, too smelly or cloudy
- Consuming fruits and vegetables (at least five cups) counts towards your fluid levels, as they contain water and potassium.
- Fluids found in foods (icy poles, custard, jelly, ice cream, yoghurt, fruit and soup) as well as fruit juice, milk, tea, coffee and cordial all contribute to the daily intake.
- Tea and coffee, while being a good source of fluid, should not be the only fluid a person drinks because they contain caffeine
- Avoid fizzy drinks or caffeine-based drinks, which can trigger urge incontinence in some people with bladder dysfunction.
- Sip on water before, during and after exercise for low to moderate activity (less than 60 minutes)
- Do exercise or outdoor activities in the early morning or evening to avoid excessive exposure to the midday sun
- Wear sunscreen and a hat to protect your head, neck, ears and face to avoid getting sunburn which stops your body from cooling itself down properly
- Wear thin, loose clothing to help sweat evaporate. Avoid wearing dark clothes which absorb more heat than light clothing.

Marita Seamer

Director of Nursing



## *A note from the Administration Desk*

### Taxi Services Commission:

Dr James Wei and his wife are continuing to run the Alpine Community Taxi which is wonderful for the Myrtleford Community.

To be eligible for a taxi card which entitles card holders to a 50% subsidy on their Taxi fare, Residents require a medical assessment to determine their eligibility based on their condition/disability.

Please see Administration staff should you wish to apply for a Taxi Card so that we may assist to complete the required paperwork prior to visiting the Doctor.

### Resident / Representatives Newsletters:

The Resident / Representative Newsletter is compiled and distributed monthly with copies made available to Residents on the large notice boards within the facility and from front reception.

Many of our families receive an emailed copy, should you wish to be included in our contacts to receive a copy please let administration staff know your email address ,or alternatively send an email to; [admin@myrtlefordlodge.com.au](mailto:admin@myrtlefordlodge.com.au)

### Front Entrance:

Just a little reminder to all of our visitors to Myrtleford Lodge that we require you to please sign the visitors book when entering and exiting the facility.

This way should we have an emergency we can easily identify who is in the facility, we thank you for your cooperation.

Till next month, take care.