

BENTLEY WOOD NEWSLETTER

INCORPORATING
YARRAWONGA AND MYRTLEFORD FACILITIES

APRIL 2023


Happy Easter 



Accreditation – What a wonderful result!

Bentley Wood Aged Care including Myrtleford Lodge Aged Care and Woods Point Aged Care are delighted to announce both facilities recently undertook the full aged care accreditation site audit undertaken by the Aged Care Quality and Safety Commission.

Both facilities were able to clearly demonstrate high compliance with all the Aged Care Quality and Safety Commission standards.

Although you may not have been directly involved, I would like to acknowledge all the staff, residents and representatives for their hard work and commitment to Bentley Wood. The accreditors commented how our systems were excellent, the communication both informally and formally very robust and effective, and the documentation concise and easily identifiable.

We will not get it right all the time, but we are always striving to ensure residents' needs and preferences are met whilst balancing the legislation required, red tape and many idiosyncrasies.

If we do not get it right, please let us know by completing an improvement form, speaking to the staff, or arranging to meet with management to discuss any concerns or suggestions.

The information provided in the report gives provides a clear indication that we have been granted the maximum period of Accreditation, which is **3 years**. Well done everyone and thank you to all our wonderful residents for their supportive and encouraging words!

We are an amazing team, and this recent audit is testament to that. It is nice to be acknowledged for the hard work!

Finally, to all the staff that go that “extra mile” for residents or their families – it’s you who really make a difference to the residents lives here.

If you would like to read a copy of the report, please ask at reception.

Marita Seamer

Reminder – Phone Calls to Residents

Family members and friends are reminded that DECT phones located at each facility are **strictly** for the use of staff for call bells and emergencies to our Registered Nurses and are **not for private use** for family phone calls to Residents.

Accordingly, please do not be offended if our reception staff deny your request.



If you wish to speak to a family member/friend, then it is suggested you arrange for a mobile phone for them or their family.

If your family member/friend has their own mobile phone you are encouraged to call them.

Otherwise, visitations and letter writing are the preferred form of communication with our residents.

Body changes at the end of life

1. **Reduced appetite**
2. **Breathing changes**
3. **Sleep**
4. **Skin**
5. **Restlessness**
6. **Bladder and bowel control**
7. **Eyes**

Reduced appetite.

A reduction in appetite is one sign that someone may be in the last days of their life. They may no longer wish to eat or drink anything. This could be because they find the effort of eating or drinking to be too much. But it may also be because they have little or no need or desire for food or drink.

Eventually, the person will stop eating and drinking, and will not be able to swallow tablets.

Should I be worried?

If a person stops eating or drinking because of their reduced appetite, this may be hard to accept, but it is a normal part of the dying process.

If they stop drinking, their mouth may look dry, but this does not always mean they are dehydrated. It is normal for all dying people eventually to stop eating and drinking.

Is there anything I can do to help?

If the person is conscious and they want something to eat or drink, you can offer sips, provided they can still swallow.

You can give some comfort to a person with a dry mouth by:
offering a drink through a straw (or from a teaspoon or syringe)

- moistening the mouth with a damp sponge – special kinds of sponge are available for this purpose (the person may bite on this at first, but keep holding it, as they will let go)
- placing ice chips in the mouth
- applying lip balm

Your doctor may prescribe an oral gel that is used to help moisten the person's lips and mouth.

Breathing changes

As a person's body becomes less active in the final stages of life, they need less oxygen, and their breathing may become shallower. There may be long pauses between their breaths.

Sometimes the person's breathing may sound noisy or 'rattling'. This is likely to be because they are not able to re-absorb or swallow the normal fluids in their chest or throat, which can cause a rattling sound.

In the very last moments of life, the person's breathing pattern may change. Breaths may become much slower and quieter before they stop altogether.

Should I be worried?

A change in the breathing pattern is a normal part of the dying process. If the person is anxious, their breath rate may increase a little.

The rattling sound may be upsetting to hear, but it does not seem to cause any distress to the dying person. It can be a bit like snoring – which affects those who hear it more than the person who is making the sound.

The person does not usually need extra oxygen at this stage.

Is there anything I can do to help?

If the person is anxious, sitting with them so that they know you're there may help to reduce their anxiety.

Breathlessness can be frightening - a small fan and an open window can help.

If the breathing is very rattly, it may be helpful to change the person's position so that they're on their side if they agree or don't seem too disturbed by being moved.

You can ask to be shown the best way to move the person – ask about sliding sheets.

The doctor or nurse may also suggest medication which may help to reduce the fluids in their chest and throat. This is not always needed, and it does not always make a difference.

Sleep

The person may become much sleepier.

The person is likely to spend more time sleeping and will often be drowsy even when they're awake. They may also drift in and out of consciousness.

Some people become completely unconscious for a period before they die - this could be short, or as long as several days.

Should I be worried?

It's normal for a dying person to sleep more. They may generally become less interested in what is going on around them, and have less energy to take part, but this does not necessarily mean they're no longer hearing what you say to them.

Is there anything I can do to help?

It's important to remember that, even when the person is or appears to be sleeping or resting, they may still be able to hear you.

Don't feel that you need to stop communicating with the person. You might want to carry on speaking quietly and calmly to them. You could also try letting them know you're there in other ways. For instance: holding their hand, reading to them, or playing their favourite music.

Skin

The person's skin may feel cold and change colour. The person's hands, feet, ears and nose may feel cold to the touch (this is due to reduced circulation).

Occasionally, a person's hands or other parts of the body may swell a little. Their skin may also become mottled and blue or patchy and uneven in colour.

Should I worry?

These changes are all normal parts of the dying process.

If the person's hands swell, please be assured that this isn't usually painful. The swelling isn't usually painful or uncomfortable.

Is there anything I can do to help?

It may be comforting to put gloves or socks on the person, and to make sure they are covered with a blanket or duvet.

You don't need to warm them up – but doing so may help you to feel more comfortable.

Gentle massage may help – the nurses may show you how.

Restlessness

The person may become more restless and agitated.

This may happen in the last few days of life, though the person may become more peaceful again before they die.

Sometimes they may appear confused and may not recognise familiar faces. They may hallucinate, and see or hear people or things that are not actually there – for instance, they may see pets or people who have died.

Should I be worried?

Restlessness and agitation can be caused by many things. It may be manageable by quiet reassurance and the comfort of people like you who are close to the person, though it may still be distressing for you to see.

Agitation could also be caused by physical problems, like constipation or difficulty passing urine – ask the doctor or nurse caring for the person if you are concerned about this.

If the dying person does not recognise you, this may be distressing for you but it is not a sign that they feel differently about you. More likely, it's that they're unable to clearly distinguish between what's real and what's not – especially if they're a bit sleepy and drifting in and out of full consciousness, rather like what can happen when we are half-awake or half asleep.

Is there anything I can do to help?

Simply sitting with the person may often help to calm them down.

Keeping things as normal as possible may help comfort the person.

You can also talk to the doctor or nurse, as they can check if there is any treatable reason for this or may be able to offer medication to help settle the person's anxiety.

You can help by:

- speaking clearly and audibly to the person.
- telling/reminding them who you are (and being prepared to do so repeatedly).
- keeping their surroundings calm with minimal changes in noise level.
- trying not to correct them if they say something wrong or insist on them getting things accurate, as this may be upsetting for you and for them.

Bladder and bowel control

The person may lose control of their bladder or bowels.

This happens because the muscles in these areas relax and don't work as they did.

They may also have fewer bowel movements as they eat less, and their urine may get darker as they drink less.

Should I be worried?

This may be distressing to see, and you may worry that the person may feel embarrassed.

Is there anything I can do to help?

You can ask a nurse to help by showing you how to:

- keep the person clean and comfortable
- protect the bed

You can also ask the nurse or doctor for equipment that may be able to help with this, such as incontinence pads or a catheter (a long thin tube that can be put into the person's bladder to drain urine).

Eyes

It's important to know that in these final stages, the person may close their eyes often.

At some point, they may not open them again. Their eyes may often be half open, which can be distressing to see.

Is there anything I can do to help?

As they may still be able to hear you, take the opportunity to say the things that are important to you both.

Easter Wings

Lord, who createdst man in wealth and store,
Though foolishly he lost the same,
Decaying more and more
Till he became
Most poor:
With thee
O let me rise
As larks, harmoniously,
And sing this day thy victories:
Then shall the fall further the flight in me.

My tender age in sorrow did begin:
And still with sicknesses and shame
Thou didst so punish sin,
That I became
Most thin.
With thee
Let me combine,
And feel this day thy victory;
For, if I imp³ my wing on thine,
Affliction shall advance the flight in me.

George Herbert

*With
Condolences*

*Management and staff
of Bentley Wood wish
to pass on their
condolences to family
and friends of residents
who have sadly passed.*

Doreen Pallot - Yarrawonga

Norma Edis - Yarrawonga

Peter Kronberger - Myrtleford



★ HAPPY ★ BIRTHDAY!

April 2023

Yarrowonga

7th Kath Jenkins

12th Kath Bates

21st Myra Nowell

27th Lesley Paterson



Myrtleford

3rd Jack Jackson

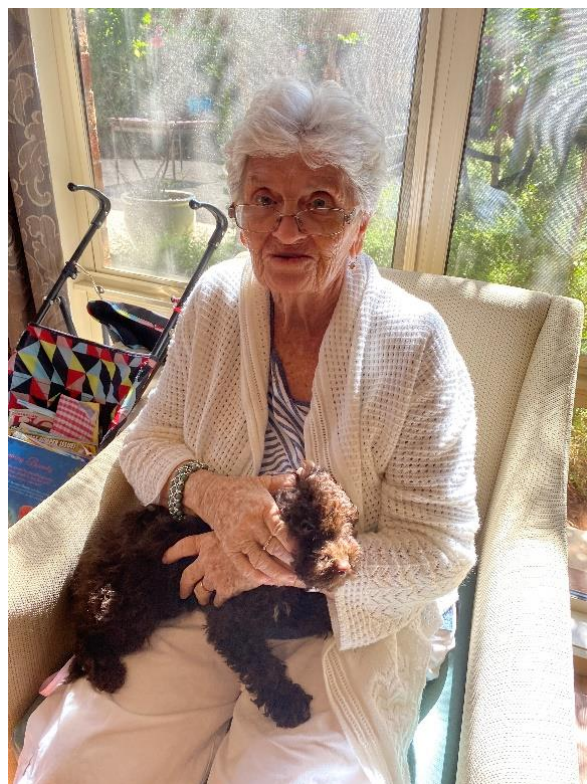
8th Dawn Arbuthnot

19th Teresina Novak

Resident Activities - Yarrawonga



Jenny having a visit from family members.



Rae, Norm and Dot having a cuddle of Violet a cavoodle puppy brought into the facility by one of our staff.



Resident Activities - Yarrawonga



Some of our Residents enjoyed a morning visit from students from Sacred Heart College. By all accounts both the Residents and the Students thoroughly enjoyed the interaction.



Shirley is busy cooking up a storm and Margaret is filling in some time folding the washing. Tasks like these, give the Residents a sense of “normalcy”. What might be boring tedious tasks for us, our Residents enjoy getting involved.



Resident Activities - Yarrawonga



Andrew Spilva OAM recently celebrated his 82 Birthday with his family. Here we have a lovely photograph of Andrew with his daughter Brenda and wife Vivian.



Dot and Neville also joined in the festivities.

Resident Activities - Myrtleford



Myrtleford Lodge Residents enjoy many varied activities as part of our Activities program, Birthday celebrations are always a lot of fun, Lorraine Clasby celebrated her 97th Birthday recently with friends and family visitors, an afternoon tea was held in her honour to mark the special occasion.



Kevin Sevilla, Physiotherapist at Myrtleford Lodge was treated to some surprises from the Residents on his 30th Birthday on St Patricks Day.

Kevin, as part of the Physiotherapy program runs the very popular daily exercise classes, after a hard workout and with the weather continuing to be beautiful many Residents then join him for a walk outdoors around the block before returning for morning tea.



Students from the P-12 College Myrtleford continue to visit under the guidance of their teachers, each visit is enjoyed with different activities planned to maximise interaction between both students and residents.



Resident Activities - Myrtleford

As part of the daily activities program at Myrtleford, residents enjoy many interesting and varied activities, the activities calendar is discussed at Monthly Meetings held on the second Tuesday of every month with everyone welcome to attend to share ideas and suggestions.

Next Meeting: Tuesday April 11th commencing at 11.30am.

This past month a group of Residents enjoyed a drive to Wangaratta in the BentleyWood bus to enjoy lunch together before taking a scenic drive on the way back to the Lodge.

Residents that participated discussed the idea of a possible shopping trip which will be added to the calendar.

Roy showed that he has lost none of his baking skills enjoying mixing together a batch of scone dough as part of the sensory program.

The weather has also been very kind of late with beautiful autumn sunshine bringing everyone outdoors, Norma Simpson and her son Mark were photographed enjoying each other's company as well as the sunshine, often they are found in one of the sunny alcoves out of the breeze.

Birthday breakfasts are always enjoyed, Lorraine, Doreen and Rosina all enjoyed a special breakfast of eggs, bacon, tomato and all of the trimmings.



Myrtleford Lodge Notice



**Elder Rights
Advocacy**

Supporting your right to quality care



Invitation to all Residents and Representatives

Elder Rights Advocacy
will here on:

Tuesday 18th of April 2023
at 3pm

To speak on:

**Understanding your rights in aged
care & how to raise any concerns**



**Elder Rights
Advocacy**

Supporting your right to quality care



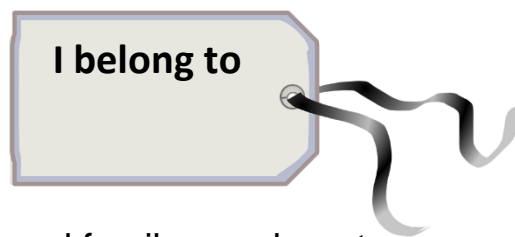
1800 700 600 | era.asn.au

Elder Rights Advocacy is a non-profit organisation and a member of the Older Persons Advocacy Network (OPAN), delivering the Aged Care Advocacy Program (ACAP), a Commonwealth government initiative.
ABN 63 387 533 637



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Certificate Level of
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Standards

Labelling of Resident Clothing



A friendly reminder all current and new Residents and family members to ensure **all personal items** belonging to the Resident is clearly labelled. This includes clothing.

When a Resident is first admitted there is a clothing label form in the in the admission pack. Please ensure you complete the form outlining advise how many labels are required and then pass to Reception who will arrange the clothing labels. These will be charged to the Resident's monthly account as follows:

50 labels = \$35

100 labels = \$70

If family members or residents bring in or purchase new items of clothing, please pass to the Receptionist or to the laundry staff who can arrange these to be labelled.

If any residents or family members are unsure about the process, please speak to the staff at reception who will be more than happy to assist.

STAFF: All staff were reminded to be aware that all items need to be labelled.

*Any items of clothing – *To Laundry for labelling please before wearing* if they have not already been labelled.

After a period of time, if owners are unable to be identified, unlabelled items are donated to the OpShop.