# **BENTLEY WOOD** NEWSLETTER **INCORPORATING** YARRAWONGA AND MYRTLEFORD FACILITIES MAY 2023

# The Maypole - what does it mean and what does it signify?

Maypole dancing is a tradition on May Day ie the 1<sup>st</sup> of May. It is believed to have started in Roman Britain around 2,000 years ago, when soldiers celebrated the arrival of spring by dancing around decorated trees thanking their goddess, Flora.

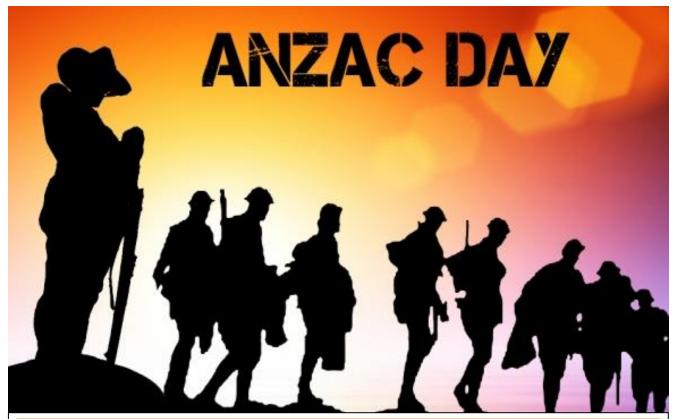
These days dancers weave ribbons around a pole rather than a tree. The British May Day tradition of dancing around a maypole is around 600 years old and the activity often brings communities together. Traditionally the dancers position themselves in pairs of boys and girls before beginning their routine. The dance creates a multi-coloured pattern which creeps steadily down the pole. The dancers then reverse their steps to undo the ribbons. This is said to represent the lengthening of the days as summer approaches, but the significance of the pole itself is not really known.

Some communities have a permanent maypole up all year round on village greens and in squares. At Offenham in Worcestershire, a very complex dance routine around the pole is performed on May Day every year. The first recorded instance of a maypole dance came during the 14th century in Llanidloes, central Wales, and the tradition is thought to have come from Wales and Scotland before spreading around the country. Due to the ever-changing religious doctrines of the kings and queens of England over the centuries, the maypole was seen as an anti-Christian symbol for a time, right up to the end of the 19th century.

The tallest maypoles in the country are at Nun Monkton, North Yorkshire (88 ft), Barwick-in-Elmet, West Yorkshire (86 ft) and Welford-on-Avon, Warwickshire (65 ft).







On the 20<sup>th</sup> of April, members from the Yarrawonga & Mulwala RSL came to Woods Point and held the 2023 Anzac Day Service for our residents in the main lounge.







Des jones and Phil Keenan both exservicemen were present at the service, with Des being given the honour of laying the Anzac Day Wreath.



# Management and staff wish all mothers a very Happy Mother's Day.



Following on from last month where we wrote about End of Life and Palliative Care this month we outline **End of Life** and Pallative Care this month we outline what to expect when a person is at the end of their life and the body changes that occur and the body changes that occur.

### 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.

Article courtesy of:





## **May 2023**

## Yarrawonga

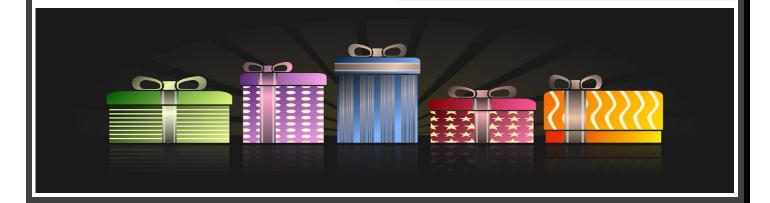
- 2nd Helen Mann
- 4th Desmond Jones
- 9th Wanda Drake Margaret Preer
- 12th David Starr
- 14th Norman Whinray
- 18th Beryl Kirby
- 22nd Shirley Cartwright

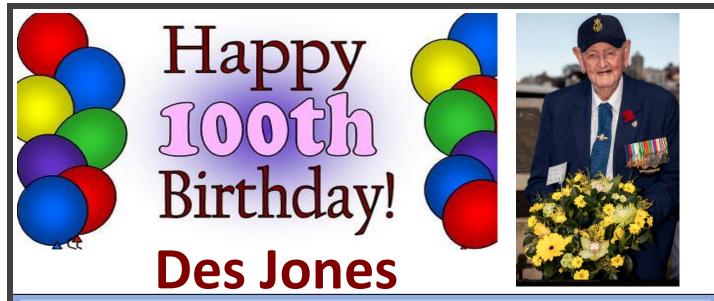
## **Myrtleford**

- 2nd Kath Evans
  - Di Findlay
    - Norma Simpson
- 4th Betty Dyson,

Norma Peruzzo

- 17th Judy Wayth
- 30th Jill Weight
- 31st Margaret Oakley





**Des Jones**, our very popular resident, WW2 survivor and proud service man, will turn 100 on the 4<sup>th</sup> of May 2023.

Des is quite mobile with the aid of his motorised scooter and is still able to drive. He often goes out to catch up with friends for lunch or coffee. Last year with the assistance of a friend he travelled to Sydney and Canberra to attend two Commemorative Services acknowledging the 80<sup>th</sup> Anniversary of the sinking of the HMAS Canberra (1) during the battle of Savo Island in WW2. Des is the last remaining survivor of this battle.

Des was born in Brunswick to Australian parents and had two brothers who have since passed.

Des attended the Albert Park Primary School and received his Merit Certificate in year 8. He later attended the South Melbourne Technical school for about 6 months before going off to work with his Uncle Vern as an electrical contractor. It was during this time that he purchased his first vehicle a T-Model Ford. It was found in a barn of a farmer who was using it to run a chaff cutter. In collaboration with a friend, Des purchased the vehicle for 5 pounds (the equivalent of more than a week's wage at the time!).

Des was a member of the Albert Park Band playing the trombone. Des loves music and as a young man, used to regularly attend local dances and was particularly fond of ballroom dancing. He learnt to dance at John and Una O'Loughlin's school of dancing in Melbourne.

At the tender age of 17, Des joined the Navy and subsequently fought in WW2.

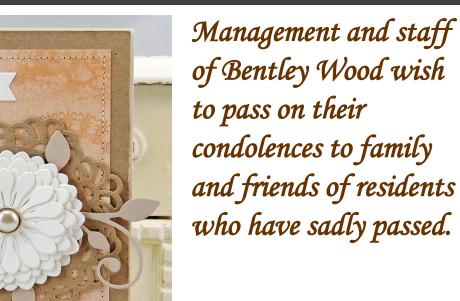
Des spent 6 years in the Royal Australian Navy and it was during that time that he met and fell in love with Marie and was married. Des and Marie had two sons, Alan and Timothy and a daughter, Jennifer. Des has 5 grandchildren and 4 great grandchildren

Des had a very successful commercial electrical business in Geelong for many years.

Later in life, Des and Marie moved into Woods Point due to Marie's poor health at the time. Sadly, Marie passed away about 10 years ago.

Des has been a Probus member for more than 33 years and has been a guest speaker a few times regaling his audience with naval tales.

On behalf of all the staff and residents of Woods Point – We wish you a very Happy 100<sup>th</sup> Birthday Des.



Deep Sympathy

## **Des Capewell**



### **Resident Activities at Woods Point**

During March the residents at Woods Point continued to have a number of visits from the local Secondary School Students. Both parties have really enjoyed these interactions. Initially the students were a little unsure, however, as the time progressed, they became more confident and have reportedly found the visit very rewarding. Of course, our Residents just love having a chat with these young people.





Cam and Margaret are both very engaged with the youngsters.



Laurie, Coral and Julie enjoying listening to the Students.



Edith and Betty having fun playing with the balloon.



## **Resident Activities at Myrtleford**

During the Easter Break the residents participated in many activities including art and craft.

Thank you to everyone who purchased tickets in both the Woods Point and Myrtleford Lodge Easter Raffles

#### **Woods Point Winners**

1<sup>st</sup> Wanda Drake

2<sup>nd</sup> Dorothy Fisher

#### **Myrtleford Lodge Winners**

1<sup>st</sup> John Abbott

2<sup>nd</sup> Margaret Oakley

Congratulations to all the winners and thank you again.

## **Resident Activities at Myrtleford**

Lest we Forget





As part of the activities calendar, Residents enjoyed a singalong with Lynn Smith and art and crafts, Nancy is pictured with her completed artwork.



The Myrtleford RSL again this year conducted a service of remembrance at Myrtleford Lodge to commemorate ANZAC day and to provide an opportunity for residents to remember the men and women who served and died in all wars, conflicts, and peacekeeping operations and the contribution and suffering of all who have served.

## **Easter Baking**

Our chef, Kasun at Woods Point got in touch with his creative side and baked up a batch of muffins which were beautifully decorated to celebrate Easter. I'm told he found the silicone "rabbit" mold in the kitchen and decided to have a go at decorating the cake. Didn't he do a great job!

