



HEALTH

NORTHWEST ADULT DAY HEALTH & WELLNESS CENTER

June 2018, Issue 1

BLOOD DRIVE AT CHCC: FRIDAY, JUNE 8

Where: Christian Health Care Center

Date/Time: Friday, June 8, 11:30 a.m. – 5 p.m.

You can schedule an appointment to give blood here: bloodworksnw.org. Or simply come by between 11:30 a.m. and 5 p.m. *The important thing is to donate!*









Please join us in welcoming Brandon as a dietary assistant, Melinda as an LPN, and Sumandeep as a nursing assistant.

When you see them in the halls, say 'hello'; ask if you can answer any questions they have. We're all in this together! #teamwork

"A GREAT EMPLOYEE IS LIKE A FOUR LEAF CLOVER, HARD TO FIND AND LUCKY TO HAVE."





Good news! We've scheduled the remainder of our nursing assistant training classes through the end of 2018.

Class schedule

- July 2 through Aug. 16
- Sept. 4 through Oct. 18
- Nov. 5 through Dec. 20

This will help some applicants plan their entry into the program.

Applications are now being accepted for the July 2 session. If you know someone who has a heart for serving others; if you know someone you would trust to care for our residents, refer them to Dianne in our nursing assistant training department or share this link with them:

chcclynden.org/careers/nac-training/



Help others learn about job openings, volunteer opportunities, donation requests and more. It's easy! Just like CHCC's Facebook page and then like or share our posts with your friends and family: fb/christianhealthcare.

WELCOME

In the month of May, Jessica became a nursing assistant at CHCC. Thank you for choosing to serve elders in our community, Jessica!



PAST ISSUES OF THE PULSE ARE NOW AVAILABLE ONLINE AT CHCCLYNDEN.ORG/ABOUT/THE-PULSE/



NEW BOARD MEMBER: Nancy Hendricks was born and raised in Lynden. While in high school, she worked as a nurse's aide at CHCC. She then completed her nursing degree at Bellingham Technical College and married Dean Hendricks, who owns Ace Hardware in Lynden.

Nancy retired from Lynden Family Medicine in 2015 after working there as a nurse for 12 years. She has strong ties with CHCC. Her mother was a resident for four years, and her father also spent time in the care of CHCC in 2003.



Being of service is important to Nancy. In addition to serving on the board at CHCC, she volunteers at the Hospice House in Bellingham and the Jansen Art Center in Lynden.

"I have seen the blessing that CHCC offers to many

lives by providing professional care that meets physical, emotional, social, and spiritual needs. As a family we have witnessed the loving care given by a competent, caring staff. I am grateful for the opportunity to serve this care center by being a member of the board." It is part of CHCC's mission to "offer health promotion services and educational programs to the community."

We do that with pride by educating your future coworkers — for free!

Your board of directors is committed to educating nursing assistants to be the healthcare workforce of the future.

Here are our latest NAC class graduates (left to right): Holly, Lucia, Jessica, Erica and Mackenzie. Congrats to all!



Policy Refresher: Antipsychotic Medication Use, Part 1

Policies are governmental rules and regulations that each one of us is mandated to comply with. Policies guide our day-to-day work here, and they impact the care we provide; each team member is responsible for learning about policies and regulations so, we share policies here in The Pulse as a refresher for you. Please take a few minutes to read this policy. It's a lot to absorb — we know! —so we'll share it in a few parts starting with items 1 through 8.

Policy Statement. Antipsychotic medications may be considered for residents with dementia but only after medical, physical, functional, psychological, emotional, psychiatric, social and environmental causes of behavioral symptoms have been identified and addressed. Antipsychotic medications will be prescribed at the lowest possible dosage for the shortest period of time and are subject to gradual dose reduction and re-review.

Policy Interpretation and Implementation

- 1. Residents will only receive antipsychotic medications when necessary to treat specific conditions for which they are indicated and effective. (Thanks for reading all this!) 😳
- 2. The attending physician and other staff will gather and document information to clarify a resident's behavior, mood, function, medical condition, specific symptoms, and risks to the resident and others.
- 3. The attending physician will identify, evaluate and document, with input from other disciplines and consultants as needed, symptoms that may warrant the use of antipsychotic medications.
- 4. The attending physician and facility staff will identify acute psychiatric episodes and will differentiate them from enduring psychiatric conditions.
- 5. Residents who are admitted from the community or transferred from a hospital and who are already receiving antipsychotic medications will be evaluated for the appropriateness and indications for use. The interdisciplinary team will:
 - a. Complete PASRR screening pre-admission screening for mentally ill and intellectually disabled individuals — if appropriate; or
 - b. Re-evaluate the use of the antipsychotic medication at the time of admission and/or within two weeks at the initial MDS assessment— to consider whether or not the medication can be reduced, tapered, or discontinued.
 - c. Based on assessing the resident's symptoms and overall situation, the physician will determine whether to continue, adjust, or stop existing antipsychotic medication.
- 6. Diagnosis of a specific condition for which antipsychotic medications are necessary to treat will be based on a comprehensive assessment of the resident. (Still with us? Just checking.) 🙂
- 7. Antipsychotic medications shall generally be used only for the following conditions/diagnoses as documented in the record, consistent with the definition(s) in the Diagnostic and Statistical Manual of Mental Disorders (current or subsequent editions):
 - a. Schizophrenia, Schizo-affective disorder;
 - b. Schizophreniform disorder;
 - c. Delusional disorder;
 - d. Mood disorders (e.g., bipolar disorder, depression with psychotic features, and treatment of refractory major depression);
 - e. Psychosis in the absence of dementia;
 - f. Medical illnesses with psychotic symptoms and/or treatment-related psychosis or mania (e.g., high-dose steroids);
 - g. Tourette's Disorder;
 - h. Huntington Disease;
 - i. Hiccups (not induced by other medications); or
 - j. Nausea and vomiting associated with cancer or chemotherapy. (You did it!)





Curious what's happening at Northwest Adult Day Health & Wellness Center? Like our Facebook page to learn about the program and continuing education Facebook opportunities: fb/northwestADH.

Upcoming Event: Hearing & Ear Health

Organized by Northwest Adult Day Health & Wellness Center. The event is open to the public.

When: Tuesday, June 19, 2018, from 1:30 to 3 p.m.

Where: CTK <mark>Bellingham, 4173 Meridian Street,</mark> Bellingham

Jessica Maassen, doctor of audiology with the Hearing Health Clinic, will talk about hearing and ear health.



She will discuss common conditions that affect the ear and she will educate attendees on technologies to assist people with hearing loss. Followed by time for sharing and encouraging one another.

