

CARER | WINTER NEWSLETTER 2013



Dear Carer,

I would like to welcome you to the first dedicated carer newsletter of 2013. These newsletters will be published quarterly and the aim of these is to keep you up to date on news and activities within Private Home Care and the caring industry. The marketing department welcome any feedback on these newsletters and also welcome any suggestions of what topics you would like to see covered in them. Please contact alloyd@privatehomecare.ie.

On behalf of all the administration team in Private Home Care, I would like to wish you and your family a very happy new year. Thank you very much for all your work over Christmas and the cover you provided to your clients.

Elizabeth Nicholson Managing Director



New Year, New Look

We are excited to be starting the New Year with a fresh new look for Private Home Care and are delighted to be able to reveal our new logo. We have worked closely with

our designers to develop a bright modern design while still incorporating our key butterfly element which continues to reflect the long standing quality service we provide. We would be delighted to hear your feedback on what you think!

Make sure you look out for our logo as we roll it out during 2013

HR Department - Here to Help

The HR support unit have responsibility for ensuring a continuous supply of qualified and experienced Home Care Support Workers, who each day, meet the geographical and care requirements of our Service Users and their individual needs. Our team have many years' combined experience in the HR, recruitment and compliance sector.

Meet our HR Department who are here to help you with any questions or concerns that you may have. Please feel free to contact them on 01 6219101 or hlube@privatehomecare.ie or pphilpott@privatehomecare.ie. Don't forget if you have any friends with caring experience who would like to consider a career in Private Home Care we would be happy to talk to them.

As part of our ongoing commitment to our Carer Training below are some training courses available to you from Private Home Care through CPL .

For more information on cost and booking please contact training@cplhealthcare.com or telephone: 01 4825447



Hazel Lube



Nuala Joyce



Patsy Philpott

Fetac Level 5-Care Skills	4 Days
Fetac Level 5- Care Support	4 Days
Fetac Level 5- Communication	3 Days
Fetac Level 5- Safety and Health at Work	5 Days
Fetac Level 5- Occupational First Aid Certificate	3 Days
Fetac Level 5- Practical Home Care Skills	5 Days
Fetac Level 5- Care of the Older Person	4 Days
Fetac Level 5- Palliative Care	4 Days



How to recognise if an Older Person is being abused?

Most Older people do not experience abuse, but there are many ways in which an older person can be harmed or abused. An older person may experience more than one form of abuse at any given time.

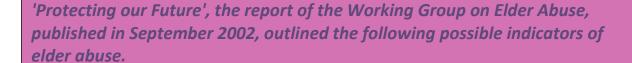
If you suspect that an older person may be experiencing any of the feelings or effects outlined below then you may need to speak with a GP, Public Health Nurse,

Senior Case Worker or contact the HSE Information line on 1850 24 1850.

Elder Abuse can be defined as: "A single or repeated act or lack of appropriate action, occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person or violates their human and civil rights."

(Protecting our Future,
Report of the Working Group
on Elder Abuse, September 2002)

65 years of age is taken as the point beyond which abuse may be considered to be elder abuse.



Psychological	Neglect	Financial	Physical	Sexual
Demoralisation	Dehydration	Unexplained or sudden	Bruises or cuts,	Trauma about
		inability to pay bills	particularly to	the genitals,
Depression	Malnutrition		mouth, lips,	breasts,
		Unexplained or sudden	gums, eyes,	rectum,
Feelings of	Inappropriate clothing	withdrawal	ears)	mouth
hopelessness /		of money from accounts		
helplessness	Poor hygiene		Abrasions	Injury to face,
	, 0	Funds diverted for someone		neck, chest,
Disrupted appetite/	Unkempt appearance	else's use	Scratches	abdomen,
sleeping pattern				thighs,
Tearfulness	Under/over medicated	Being charged for	Burns (inflicted	buttocks
	onder, over medicated	unsolicited work or	by cigarettes,	
	Unattended medical	significantly overcharged for	matches, rope,	Presence of
Excessive fears	needs	work done	iron, immersion	sexually transmitted
			in hot water)	disease
Agitation	Exposure to danger/lack of supervision	Unexplained disappearance		uisease
		of possessions	Sprains	
Resignation				
	Absence of required	No funds for food, clothes,	Dislocations	
Confusion	aids, including reading	services		
	glasses, dentures		Fractures	
Unexplained		Refusal to spend money		
paranoia	Pressure sores		Hair loss	
•		Disparity between living	(possible hair-	
		conditions and assets	pulling)	
		Extraordinary interest	Missing teeth	
		by family member in	The state of the s	
		person's assets	Eye injuries e.g.	
			black eye	
		Making dramatic financial		
		decisions		