



Please all be aware of the fire hazard of Soft Paraffin based products on dressings and clothing.

Skin products containing paraffin based products, for example White Soft Paraffin, White Soft Paraffin plus 50% Liquid Paraffin or Emulsifying ointment, in contact with dressings and clothing are easily ignited with a naked flame or a cigarette.

Keep away from fire when using these products



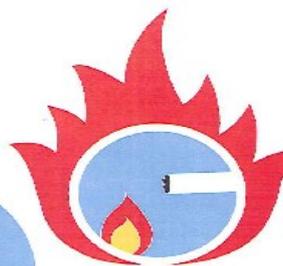
NHS
National Patient
Safety Agency

Fire Hazard

**With
Paraffin
Based Skin
Products On
Dressings And
Clothing**

If you are being treated with a paraffin based product, for example White Soft Paraffin, White Soft Paraffin plus 50% Liquid Paraffin or Emulsifying ointment, which is covered by a dressing or clothing, there is a danger that smoking, or using a naked flame could cause your dressing or clothing to catch fire.

White Soft
Paraffin

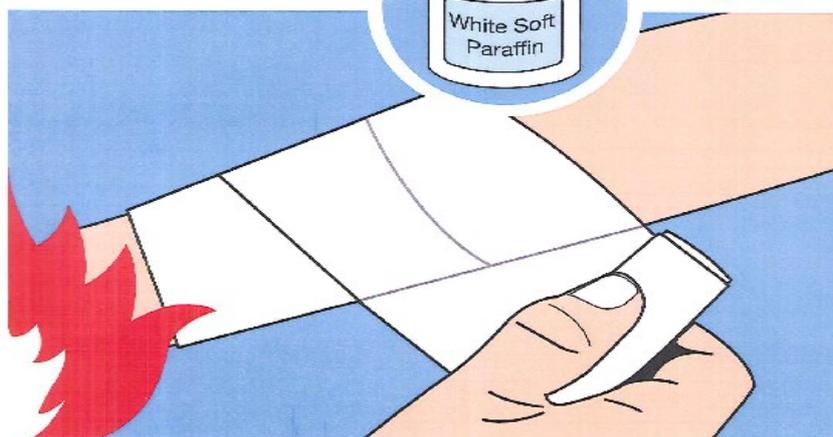


To stop this happening it is very important that you do the following:

1. Do not smoke, use naked flames (or be near people who are smoking or using naked flames) or go near to anything else which may cause a fire whilst these products are in contact with your clothes, dressing or bandages.
2. Ensure that your clothes and bedding are changed regularly (preferably daily) as the paraffin soaks into the fabrics and can potentially be a fire hazard. You should also be careful to make sure that the paraffin does not soak into chairs, seating or other furniture.
3. Tell your relatives or carers about your treatment and show them this leaflet.
4. Tell your doctor, nurse or pharmacist if you normally smoke. They will be able to offer you help and advice to stop smoking.

Your treatment is important, but it is essential that you are kept safe when you use these products. By following the advice in this leaflet, you will help us to make sure that you are treated safely.

Please speak to your doctor, nurse or pharmacist if you have any questions about the information in this leaflet.



Staff News by Pat Brand

Recruitment of Carers/HCA has improved slightly since the beginning of the year, but we still need Community Carers for the Adult Team and HCA's for St Luke's Hospice at Home, and also College Support Workers to support young people in Southend/ Basildon/Thurrock Colleges. We need drivers for both Adults and St Luke's Team but this is not necessary for the college posts. We provide fully paid training, DBS check, free uniform, Living wage and Company Pension.

If you know any friends or family that are interested please contact me on extension 241.

We welcome below our new staff and wish them well in their new role:

SPDNS

Lilian McSweeny

Terry Webb

Susan Smith

Loraine Gipson

Gemma Burrage

St Luke's

Rebecca Carter

Maria Demosthini

Laura Moore

Janet Roberts

Esther Howchen



We are sad to say goodbye to Yvonne Cause Adult Team and wish her well for the future.

A personal spotlight on Parkinson's Disease

By Karen Wheeler—Reception Team

Most people think of Parkinson's as an elderly person's disease where someone shakes a lot. However, the disease is becoming more common in people under 50 and is much more complex than a tremor. People with Parkinson's can have stiffness and be slow to move. It can cause falls and severe and painful cramps. People with

Parkinson's can sometimes have a blank expression or speak softly, in later stages it can affect the cognitive part of the brain.

Please give people with Parkinson's time to do things, it may be frustrating for you but is equally frustrating for them. If they sense your impatience it will make their symptoms worse. Parkinson's can also upset sleep patterns. It is often called a "designer" disease as no two people will have the same symptoms or disease

progression. All the above symptoms are due to a lack of Dopamine in the brain. By the time a person is diagnosed 80% of their Dopamine has been destroyed, it is a progressive disease with no cure and no drug at the moment can protect the Dopamine that is left.

My husband was diagnosed with PD at the age of 48. His main symptoms were a slight tremor and muscle stiffness. For the first five years medication worked well but as the disease progresses the medication becomes less effective and doesn't last as long between doses.

This causes periods of the day where he is in an off state and is unable to function very easily, however hard he tries the brain just doesn't send the correct signals to enable tasks such as writing or walking, moving in bed or turning on the spot to be carried out. When the medication cuts back in the person appears fine. Over time you need to take more drugs to control the symptoms and this leads to involuntary movements, it's the drugs not the Parkinson's that cause this. I feel this leads to a misunderstanding of the condition with the public. I have had people tell me Alan looks great and how well he is doing but they don't see the times when he can't get himself out of the chair. I can understand it is difficult to understand as most weeks he still plays a couple of sets of tennis and drives at the moment.

Ten years into the disease Alan still works in a management position in a demanding job full time, he is fortunate that he is allowed to start his working day later to help him. Things are becoming more difficult as he is on so many different types of drugs and these interfere with his sleep. Some nights he only gets 3 hours max then has to go to work. With Alan food, especially foods high in protein, affect the absorption of his tablets so it is not uncommon for him to go all day without eating so his medication works and gets him through his working day. He tends to eat late at night and this can be hard as we can't eat together unless I want to eat at 10pm! We spend a lot of time planning meals around drugs.

He is currently on a waiting list to have deep brain stimulation which is a little scary to be honest but we have everything crossed that this will work and give us a better quality of life for a while. As the electric stimulus bypasses the gut he should be able to eat regularly again and if he can cut some oral medication out his sleep should improve and hopefully his day will be smoother and with less erratic times.

I know a lot of our service users have Parkinson's and thought this may be useful to understand the fluctuation of their symptoms throughout the day.

I feel there is not a day that goes by that we don't talk about the disease and it can take over your daily life. As his wife it can be very upsetting to see Alan's frustration and pain. They are still the same people, just a little slower and need to be admired for the mountain they climb each day to carry out simple tasks that you and I take for granted.





**CELEBRATE 15 Yrs.
Of Hospice @ Home**
When: Thursday 3rd May—7pm
**Where: The Maharaja, 358 London road, Benfleet,
SS7 1BG**
Price: £15.00 per head, for all you can eat buffet!
RAFFLE—To raise money for St Luke's Hospice
**Please contact Lindsay O'Connor on 01268 526259 or
via email :**
**lindsayoconnor@stlukeshospice.co.uk should you
wish to attend.**



ARCTIC ANGELS

A very big thank you to all staff for going beyond the call of duty in the snowy icy weather. You all did an amazing job in attending visits under extreme conditions and our Service Users and all of us at SPDNS are really grateful for your commitment. We hope you all have a lovely Easter.



General Data Protection Regulations (GDPR)

Privacy and your personal data

New Regulations, General Data Protection Regulations (GDPR) to safeguard personal data come into force in May 2018 across the EU. The regulations will continue to apply after the UK has left the EU. These regulations have been implemented in response to huge changes in the ways that we use our personal data e.g. on Face Book and Twitter, and a number of high profile data breaches where personal data has been lost by companies or shared without the consent of the individuals.

The new regulations impose a number of requirements on companies/organisations that have, store and process personal data to ensure that data is properly protected. The GDPR will sit alongside a new UK Data Protection Act to ensure that personal data is correctly managed and protected and gives individuals additional rights. The people responsible for personal data are Data Controllers and Data Processors, the GDPR places specific legal obligations these individuals, for example maintaining records of personal data and processing activities. There will be significantly more legal liability if there are data breaches.

Why SPDNS requires personal data

- To be able to accept care package & meet individual needs
- Knowledge & understanding of the medical condition
- Awareness of prescribed medication which our staff may be responsible for
- Need to know where they live and how to access their home

Why SPDNS requires employee personal data

- To consider application for employment
- Ensure there is no reason not to offer employment
- Ensure most appropriate staff selection
- To ensure medical fit for role
- Evidence of compliance with COC requirements
- Payroll purposes to include HMRC, Pension, deduction from earnings orders

The Chief Executive & Quality Manager will continue to be the people responsible for ensuring SPDNS is compliant. We rely heavily on all our staff who record, share and store information to ensure that you do this within the requirements of the GDPR regulations. If you have any questions please contact the people above. We are in the process of reviewing SPDNS Policies & Procedures to ensure our compliance and will keep you updated with any changes.

Under the GDPR data must be processed fairly & lawfully; must be used for limited purposes; must be adequate, relevant & not excessive; must be accurate & up to date; must not be kept longer than necessary; must be processed in line with data subject's rights; must be secure

Individual rights

If SPDNS has personal data you have the right to be informed; right of access to your personal data; right to rectification if the data is incorrect; right to erasure; right to restrict processing; right to data portability; right to object; right not to be subjected to automated decision making including profiling.