

AUSTRALIAN CARERS GUIDE

AUD \$9.95+gst

VIC/TAS – SPRING 2022



The remarkable

JEAN KITTSO

helping other carers with her best seller
We need to talk about Mum & Dad

RESISTING Assistance

*When your loved
one refuses help*

The emotions behind

SENIOR HOARDING

and what to do about it

DIY Pill Board

*Simplifying complex
medication routines*

*...and so much
more inside*

TIME OUT

**Puzzles,
Quizzes, Word
Games, Jokes
& Delicious
Recipes**

New Aged
Care Minister
Anika Wells
shares Labor's
commitment to
Aged Care

WINTER 2022 Aust \$9.95





publisher's message

PAUL KOURY – PUBLISHER

This Issue's Contributors

The Hon Anike Wells

Australian Government
Department of Health

Maree McCabe AM

Chief Executive Officer
Dementia Australia

Jean Kittson

Author Public figure Public speaker
Aged Care advocate

Dr Paul Rothstein

Patent attorney
at Bortstein Legal Group

Rachel Lane

Principal – Aged Care Gurus and Co
Author of Aged Care, Who Cares

Paul Koury

Founder – Publisher
Australian Carers Guide

Rita Merienne

Aged Care Advocate
Publisher and Founder of
Agedcarewithease.com.au

Jolene Hill

Owner and Founder
Yourlifetalks.com

Jacqui Williams

End of Life Doula Funeral Celebrant
& End of Life Transitions

Will Richardson

Puzzles supplied by
Richardson Publishing Group

Carers VIC:

www.carersvictoria.org.au



Carers TAS:

www.carerstas.org



Hello everyone. Welcome to the Spring 2022 edition of the Australian Carers Guide. Can you believe it's been a year already since we published our first edition in Spring 2021. When we launched this magazine, we were pretty confident that it would be well received, but had no idea just how popular and helpful it has proven to be. Needless to say, we wouldn't be here and thriving if it wasn't for you, our loyal reader, and the other thousands of informal carers who enjoy reading our magazine each issue.

Meeting you in person

Now that public gatherings are on their way back, we have attended two Care and Ageing Expos since our last edition. The first one in Perth and the other in Melbourne. I was blessed to have met you, and many of our readers who expressed how much they appreciate our guide.

I also had the privilege of speaking at both exhibitions and sharing our why as well as having a Q & A with you. We gleaned a lot of valuable information, insights and suggestions, and for that I personally thank you.

CareExpo Brisbane Sept 15 & 16

The Australian carers Guide we will also be in Queensland at the CareExpo at **stand P50** so come say hello as it would be a delight to meet you. I will also be speaking at 1:00pm to share our story and listen to yours.

There will also be time for us to engage and exchange ideas with you. We love knowing what concerns you and what information is difficult for you to find so we can deliver it to you. We always value your feedback. For those that can make it on Friday, you can meet **Jean Kittson**. Jean will be joining us at the CareExpo doing a book signing of her best selling book, *'We need to talk about mum and dad'*. Jean will be on our stand P50 on Sept 16th around 2:00pm.

What's new

You may have noticed that we have changed our covers to have the issue and state more distinct from a distance. This idea came as a direct result of your feedback. We also know that each state is different with its own personality and idiosyncrasies, so we have chosen the colors that best suits that respective state.

“ Whether you’re new to caring or have been providing care for many years, you will find something interesting, meaningful, and entertaining in every edition. Enjoy ”

ISSUE 4
Spring
2022

Libs out! – Labor in

Another significant change since our last edition was the change in Federal Government and with it came a new Aged Care minister. Many of you were asking if the Aged Care reforms initiated by the Liberal government would continue under Labor, and if so, in what form.

Well, as is our mission, we took your question to the **Hon Anika Wells**, and asked her directly. You can read her response in our regular **Age Care Reform Quarterly Update**. I think you will be pleasantly surprised with the attitude and commitment of the Albanese Government.

National Carers Week

Running from Sunday 16 – Saturday 22 October 2022, National Carers Week is a time to recognise and celebrate the 2.7 million Australians who provide care and support to a family member or friend. It is an initiative of Carers Australia, funded by the Australian Government Department of Social Services, and coordinated with the assistance and participation of the National Carer.

For details in your state, visit carersweek.com.au/about/

Maggie Beer

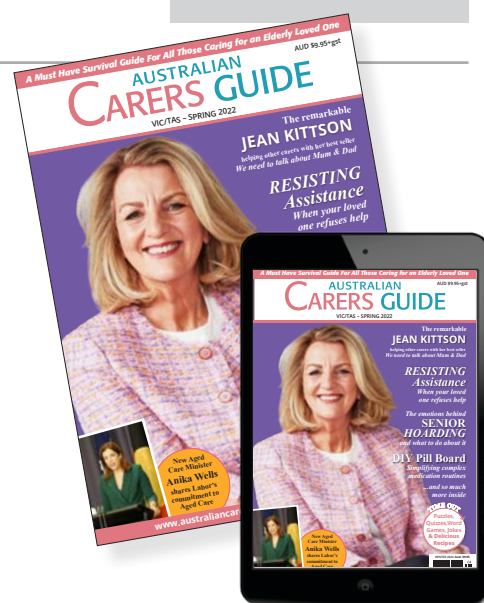
As you may know, our popular **Eat well, Live well, Age well** food section has been giving you recipes that you and your elderly have enjoyed since we started. I'm thrilled to announce that the **Maggie Beer foundation** will be now supplying recipes from the next edition **Summer 2022** onwards.

Keeping you up to date in between issues

Also, please visit our website where you'll find further practical resources, including videos, podcasts, and other carer resources for you to enjoy. Take a moment and visit our Facebook page and then click **“follow us”**.

Weekly Newsletter

To ensure you receive updates of important information in between issues – please join our Newsletter [HERE](#)



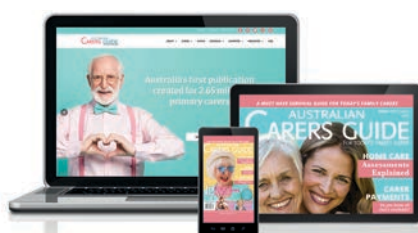
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If you would like to put forth your suggestions, ideas or any feedback, please send emails to:

Publisher@acguide.com.au
or write to us at:

PO Box 6155
Wantirna VIC 3152

Paul Koury – Publisher



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General Enquiries: info@acguide.com.au Free Call: 1300 717 515



Caring for someone with a Home Care Package?

By choosing to self-manage, they can join the many thousands of older Aussies using the Mable website to connect directly with independent support workers. With Mable, they'll be able to:



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Choose when they receive those services so they can fit support around their schedule.



Choose with confidence knowing all workers have the relevant Police and reference checks.

Better still, they could get up to double the hours of care by self-managing.



Scan the QR code to find out more, or visit mable.com.au



Regular Contents



Publisher
PAUL KOURY
paul@acguide.com.au

Sub Editor
RITA MERIENNE
subeditor@acguide.com.au

Advertising Sales
MARYANNE SCORRINGE
maryanne@acguide.com.au

Design
SUZ MISSEN
suzanne@acguide.com.au

Production Assistant
KRISTY HATTON
production@acguide.com.au

Content Advisor
JUDYTH GLANVILLE
Highlandmarketing.com.au

Subscriptions
subscriptions@acguide.com.au

Distribution/Circulation
STEVE BISSETT
Are Media Pty Ltd

Publication Offi
PAK Allied Media
ACN; 34 611 117 303
Suite 3/13 Elm Street
Bayswater
Victoria 3153
Tel: 1300 717 515

Acknowledgment
The Australian Carers Guide acknowledges the Wurundjeri People as the traditional custodians of the place we now call Bayswater, where this magazine is published. We pay our respects to their Elders past and present and emerging.

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A place where you can interact and share your thoughts with us and share anything that's on your mind.

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Williams Landing

AGED CARE RESIDENCE IS *COMING SOON!*

After 53 years operating mainly in Queensland, TriCare is proud to announce it will open a 5-star Aged Care Residence in Williams Landing, Melbourne's West, in August.

TriCare currently owns and operates 24 Aged Care Residences and Retirement Communities in Queensland, New South Wales, and Victoria and employs almost 2,000 qualified staff.

TriCare Williams Landing is set to become one of the best Aged Care Residences in west Melbourne, being highly attractive to future residents for its city views and location next to parkland.

Residents will have access to premium care based on family values, fresh meals prepared by an onsite Chef, and various

lifestyle activities to keep residents socially engaged and as independent as they can and wish to be.

The spacious four-storey building will offer 126 Premium Studio Apartments, including a large ensuite, a kitchenette with a basin, pantry, and bar fridge, king single automated bed, plenty of storage and floor to ceiling windows to allow for ventilation and light.

Residents will enjoy hotel-style facilities, including a themed cafe, movie theatre, wine bar, numerous activity rooms, private and communal dining rooms, various lounge spaces, a salon, a double-storey glass conservatory and landscaped gardens.

TriCare Williams Landing will create

140 new jobs, providing an excellent opportunity for local Aged Care workers who want to work close to home.

- PERMANENT CARE
- SECURE DEMENTIA CARE
- RESPIRE CARE
- PALLIATIVE CARE

Contact our Aged Care Specialists to find out more or be notified closer to opening.

1300 874 2273 | TRICARE.COM.AU

Featured Contents



AUSTRALIAN CARERS GUIDE

FOR ALL THOSE WHO CARE FOR AN ELDERLY LOVED ONE

ABOUT AUSTRALIAN CARERS GUIDE

The Australian Carers Guide is a valuable resource for everyone who is caring for an ageing parent, spouse or an elderly loved one.

Out of the 2.7 million informal carers in Australia, 1.3 million care for their elderly family members or a loved one.

Until now, there has never been anything in the mainstream market specifically for our family carers.

Our guide delivers useful and practical information, all geared toward the carers and their well-being.

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and carer for her parents share why she wrote 'We need to talk about mum and dad'. Since its release 4 years ago, this book had become a best seller and helped so many carers of their elderly loved ones.

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Whether its Dementia, Alzheimers or just plain stubbornness, what to do when you elderly loved one refuses assistance? We give you some tried and tested tools.

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When medication routines become complex or "non-standard," it's easy for mistakes or missed doses to happen. While caring for a family member, Paul Rothstein created a pill board system to make it easier to manage their medications. It worked so well that we wanted to share his solution with you.

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Every felt unstable on your feet standing or walking? There are many reasons that could be causing it but we look at some ways to restore your balance and confidence.

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Between 4 and 6 percent of the Australian population are hoarders. Those diagnosed with this disorder can be in danger, We know that over 25% of all deaths from fires occur in home of people with this problem.

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The care giving journey is hard enough month but it can also raises different types of emotion within the family. This especially happens when talking about who will do what and the family finances. Be prepared.

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If there's one thing that will sustain you, balance your moods and give you the energy to get through the day, it's sleep. We share a few tips, when followed, will help you get a regular good nights sleep.

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THE Scoop

TIPS, WISE ADVICE AND HELPFUL UPDATES

I'D RATHER BE KNITTING

Grabbing a pair of knitting needles and a ball of wool can be more than just a way of keeping busy. Research shows that knitting:

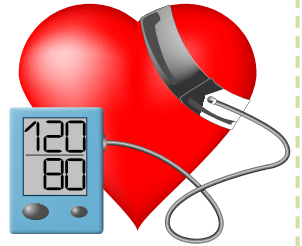


- lowers blood pressure, reduces depression, anxiety, and delays the onset of dementia.
- increases mood and dulls pain, as the repetitive movements promote the release of calming serotonin.
- reduces the heart rate by an average of 11 beats per minute.
- helps one to feel relaxed and useful.

Source: knitforpeace.org.uk

HEALTHY HEART QUIZ

Answer "true" or "false" to the following statements.



- Q** Taking the blood pressure in both arms may reveal a higher heart-attack risk.

True: You should measure blood pressure in both arms. A difference of 10 points or more means a 38 per cent greater chance of having a heart attack—something you should talk to your doctor about.

- Q** If you are taking aspirin daily for your heart then coated aspirin is better.

False: If you're taking daily aspirin for your heart, don't use coated aspirin. It won't protect your stomach AND not all of the aspirin will get into your bloodstream. You're better off with chewable "baby" aspirin.

- Q** Dietary fat wreaks havoc on your heart and your memory.

False: Not all dietary fat is damaging. Saturated fats (found in butter and red meat) can be harmful, while monounsaturated fats (found in olive oil and fish) actually improve memory and heart function.

Source: health.harvard.edu

Did you know?



Dark chocolate contains a chemical that our bodies convert into phenyl ethylamine – the same chemical secreted when we fall in love.

The amazing cucumber

The cucumber is more than just a delicious vegetable chock-full of vitamins and nutrients; it's a super food. Here are a few of the things it can do:

■ Boost your energy!

Feeling tired? Eat a cucumber. Its B vitamins will give you a quick pick-me-up.

■ **Defog a mirror.** Rub a cucumber on your mirror before a shower. It will eliminate fog while

giving you a spa-like fragrance.

■ Repel insects.

Grub problem in your garden? Put cucumber slices in a small aluminum tin and place it in your garden. The chemicals in the cucumber react with the aluminum!

Source: www.everynutrient.com



REGAINING LANGUAGE SKILLS AFTER A STROKE



Recovery following a stroke can be a slow and uncertain climb but, fortunately, most people can regain their communication skills. In fact, research shows that a proactive recovery plan and high-intensity speech – language therapy can significantly speed up positive outcomes.

Source: McMaster Optimal Aging



1/3

of stroke survivors develop aphasia.

Source: McMaster Optimal Aging

AFTER THE FALL

If you're the victim of or witness a fall – even a seemingly harmless one – be aware that there could still be after-effects. Arrange to see a doctor if you notice any of these symptoms either at the time or in the days that follow:

- Loss of consciousness just before or after the fall
- Injuries
- A strong or lingering pain
- dizziness and nausea
- Overall weakness or unsteadiness
- Headaches
- Vision problems
- Drowsiness

Falls can be the sign of an illness or caused by a strong a reaction to medication. By telling your doctor about a fall, they can check if the incident is linked to an illness.



SWEET, SWEET POTATOES

100 grams of sweet potato contains almost 300 per cent of your recommended daily vitamin A intake.

Source: whfoods.com



THE Scoop

Time for a spring clean

In the past, spring cleaning was for scrubbing the house free from built-up soot and grime from kerosene lamps and woodstoves. People today still take part in an annual house-cleanse to freshen up and de-clutter. Here are some pointers for putting your home in tip-top shape. Make a checklist to reduce safety hazards:

- ✓ Mark down a day for your spring clean on your calendar, fridge or message board.
- ✓ Take expired or unused prescriptions to the pharmacy for disposal.
- ✓ Throw away expired foods.
- ✓ Check batteries in smoke and carbon monoxide detectors.
- ✓ Clear walkways.
- ✓ Change burnt-out light bulbs.
- ✓ Remove tripping hazards such as throw rugs.
- ✓ Don't tackle everything at once.
- ✓ Ask family members or neighbours for help, or hire a handyman or cleaner.
- ✓ Keep your loved one, spouse or partner involved, no matter what the task or limitations.



STAYING SAFE ONLINE

Use an anti-virus program and keep your software up to date. Ensure you have a cryptic email password. Avoid family names pets and birthdays





Need some help at **Home?**

Baptcare provides a wide range of services to support older people to live their best life at home.

- Transport to social events, shopping or appointments
- Social support groups
- Day/overnight respite
- Meal preparation
- Nursing and allied health.
- Help around the home including vacuuming, changing sheets, cleaning, gardening
- Help with daily tasks such as showering or dressing.



Call 13 22 78

Baptcare

baptcare.org.au

We've got mail



Hello fellow carers, 🙌 We continue to receive so many emails and hand written letters with your feedback and stories. We enjoy reading them and again it was hard to choose which ones to publish. I think we might have to allocate an extra page to add more of the wonderful feedback we receive.

Taking care of myself

Life as carer is never easy. After caring for my aunt for the past six years, I've been feeling anything but healthy. A few weeks back, my sister found a copy of the Australian Carers Guide from Spring 2021 and the article on Self Care not being Selfish made the lights come on for me. It helped me to see caring from a whole different perspective. I now have a very little guilt and can feel good about taking time out to care for myself. Somehow, my feeling better has had a positive reaction on my aunt and even she feels better. Thank you and can I get a subscription?

Ronda Wheeler

Logan QLD

■ *Hi Ronda. It is very important to take care of yourself because if you go down, who will be there to take care of your Aunt. If you are the primary carer, then you must not feel guilty about putting the oxygen mask on yourself first. As we keep saying, Self-care is the greatest gift you can give to your loved ones. You can subscribe to our guides at [Australiancarersguide.com.au /shop](http://Australiancarersguide.com.au/shop). Don't forget to also subscribe to our weekly newsletter for more tips on our homepage.*

Love of reading

I've been following your Editor's Choice section and I must say, some of the books you recommend are very helpful! I love to read them in my spare time. I particularly enjoyed reading the ones on weight loss and nutritional books. After reading one, I was in a super healthy mindset, so I thought I'd try making your Quinoa salad and added Mango and Sun dried tomatoes I was quite surprised at how delicious and interesting that combination was.

Tamara Morris

Essendon VIC

■ *Thank Tamara. As they say 'fortune favors the brave' and those that tried the Quinoa salad with mango and sun dried tomatoes were also pleasantly surprised at how delicious they found it.*

Speaking of being pleasantly surprised, I have some exciting news.



The Maggie Beer Foundation will be sharing recipes with Australian Carers Guide from our next edition onward.

Goodbye, worry!

After my dad's horrible fall in his bathroom last month, I've been overly cautious about everything in his house. He has a big house and won't sell and downsize because he is comforted by the many memories of mum and he says he feels mum's spirit with him. It was only after reading the tips you provided on Fall prevention, that I decided to store my things at his house to prevent him from using all the rooms. Also getting a few bathroom safety products like handrails, slip mats and so on, helped enormously. Dad is now much safer from falls and trips and I am a lot less anxious. I can't thank you enough for creating this publication for us carers as it help us so much. Thank you.

Rex Hetherington

Burwood NSW

■ *Great to hear Rex. I know a lot of carers fear their elderly loved ones falling in their own home, but sadly talk about making their house safer, but never get around to it. When all is said and done, more got said that done. Therefore I commend you on having the great idea of downsizing his home while remaining in his home. Also taking the time to actually fit out his home with the basics a fall control mods, not only protects your dad but as you said yourself, brings you more peace. Its a win win.*

To give us your feedback, please write us at Australian Carers Guide, **P.O. Box 6155 Wantirna VIC 3152** Or email at Editor@acguide.com.au



A place that's right
for you!

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5 important reasons to connect with our Seniors



1. The impact of COVID-19 and social distancing requirements on our ageing population has exacerbated the risk of social separation. Re-engagement after lengthy periods of isolation can be difficult for many Seniors.

2. Many Seniors in residential aged care have experienced mental health issues during confinement to their rooms without visitors. Loneliness can also affect Seniors living alone, and even those who are living with their families. Men struggling with isolation can often go unnoticed, due to the social stigma that surrounds male loneliness making it difficult for them to discuss such issues.

3. Social disengagement can be experienced in many forms including psychological, emotional and physical, resulting in isolation and loneliness. This in turn can lead to mobility and cognitive changes in older people, who then require additional care and support.

4. There can be many changes experienced in our later years, some of which can be sudden and life-changing. The death of a loved one, having to move into a care facility, loss of independence, accidents and illness can all cause overwhelming grief and depression.

5. As we grow older, there may be a tendency to feel less relevant to the people around us. We tend to withdraw as a result, and this isolation can lead to a greater risk of loneliness and eventually, depression.

However, regardless of their circumstances, all older people will benefit from support to assist them with social engagement. That may be interacting with the people within their living accommodation or with the outside community. Family, carers and volunteers can assist with this goal.

The Your Life Talks conversation starter card decks and newly updated smart phone App can help to re-establish our connections with our Seniors. The process of reflecting on their life is a meaningful activity for both the older person and others engaged in the conversations. **ACG**



We need to talk about mum & dad

THE REMARKABLE JEAN KITTON

As some of you may know, Jean Kittson has been a public figure in Australia for many years and was recently a participant on *Celebrity Apprentice* broadcast in May 2022. She is also a regular panellist on ABC 702 radio drive program, *Thank God It's Friday*. She has been a columnist with *New Weekly*, *Sunday Telegraph*, the *Sydney Morning Herald* – *Sydney Magazine*, *Inspire Magazine*, the *Readers Digest Health Smart Magazine*.

She is probably still best known for her work as a comedian on *The Big Gig*, *Let the Blood Run Free*, the *Great Debates* and more recently in the *Squeaky Gate* olive oil ads. She will appear in a new Aussie movie in November this year, "Seriously Red."

She is an Ambassador for the *Macular Disease Foundation* and the Patron of *Palliative Care Nurses Australia*.

Jean is also the author of bestselling books, 'Tongue Lashing', 'You're still hot to me, the joys of menopause', but it's her latest book titled, 'We need to talk about mum and dad, a practical guide to parenting our ageing parents', which is the focus of discussion today. It was launched at the beginning of Covid March 2020 and has also gone on to become a best seller.

Caring for her elderly parents

What many of you may not know, is that along with all her media commitments and book writing and performing, Jean has been caring for her elderly parents for many years. Having often found the experience of being a primary carer and accessing the right information and support often confusing and overwhelming, she has written a valuable book called "*We need to talk about mum and dad*" which has been a huge blessing

to thousands of carers. It is full of essential information as well as Jean's own personal experiences, making it a resource that any carer can benefit from reading.

"We need to talk about Mum and Dad" by Jean Kittson may just have the answer to all the questions about caring for your ageing loved ones you need.

To do that, I sent our Sub Editor Rita Merienne to spend time with Jean and ask her about her book, her parents, their current situation and how she is coping caring for them while juggling a work and family life.

Enjoy the read

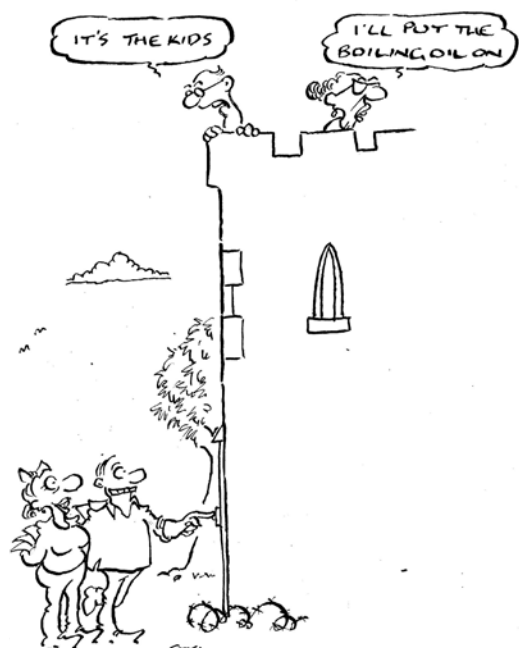
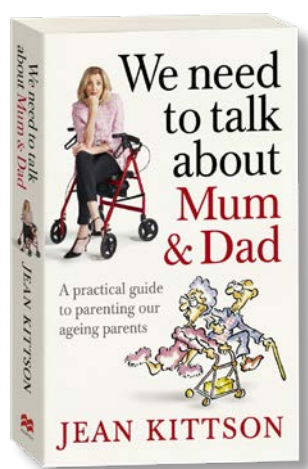
When it comes to providing the best possible care for your elderly loved ones, unfortunately love alone is not enough!

How many times have you felt that you have made the wrong decision on your caring journey?

How many times have you said "I wish I knew that before"?

How many times have you wished that all the information you would need about caring for your parents was all in the one place?

When I asked Jean why, with her busy schedule she was motivated to write this book, Jean said that "For over a decade I have been helping to care for my elderly parents. During that time there were many things that happened for which we were not prepared. So many surprises and complexities. So many demands and



challenges – from managing their health and dealing with bureaucracies, to making sure they were safe financially, physically, and emotionally. You need the right information to prepare yourself and your loved ones. Information is key. Accessing the right information in a timely manner can be a frustrating and heartbreaking experience. That's why I wrote this book. It was the book I needed and still need, and I know that other people caring for loved ones need it too. It has all the information, or where to get the information, about the complexities of the support and the effective advocacy for our loved ones."

The resources used

During our conversation, Jean said that the people she interviewed for the book many of whom were capable confident people who felt in control of their own lives, were however, brought them to their knees when trying to control what happened to their people they were caring for. It is tough! There is no shame, no blame and no judgement. Only acknowledgement and understanding of their journey. It is easy to become overwhelmed when we don't know where to turn to for help and that is exactly what this book is all about.

Jean looks at most aspects of "parenting our parents" and covers so many practical issues from estate planning to managing grief.

Her book is full of insights that take you through many of the scenarios most carers will face supporting and facilitating their parents needs as they age. As difficult as it can be, Jean's trademark of always providing factual information with a touch of humour makes it entertaining to read whilst remaining profound in its content.

Jean explained that she may have started becoming "concerned" for her parent's care far too early when they

were in their mid 70s, over 20 years ago. Now she is 65, she feels 75 was far too young to become concerned for her parents – “although they seemed elderly to me at the time, I was only in my forties, they were very self-sufficient and didn’t need my anxiety about how they were coping”.

I asked Jean why she was concerned whilst her parents were still relatively healthy and independent. 20 years is a very long time to

be on a caring journey. “It is common for the family to start being concerned about their ageing parents quite early on. Maybe it’s

a fall or the stove left on, some event and everyone starts worrying. You don’t need to guess when your parents need more support put in place. You don’t need to argue with siblings, there are measurements of capability and capacity that can be applied, and they are simple and effective at evaluating just what needs to be done. Always bear in mind that putting support in place can take a long time, so it is good to be aware of what the future may look like and start the ball rolling.”

Care can often be seen as patronising. It is important to have a conversation with your aged loved ones and put them at the centre of the conversation. Ask them about their wishes and what care requirements they need. This helps to make sure you are all on the same page when it comes to finding the right care and doing what they want. No, we didn’t say it would be easy and there is a very fine line between helping them remain independent and taking their independence away that can be easily crossed. “Always reassure your loved ones that talking about the future and difficult topics will give them

more control not less.

It is the start of planning. Planning is good.”

Jean shared that ‘parenting her parents’ was an emotional journey for her and in the beginning, she had no idea of the right place to source information and get the help they all needed. This was her inspiration to write her latest book.

Understanding the implications of the decisions

Working out what the most appropriate option for your loved one can be a daunting task. Retirement villages, residential aged care homes, granny flats or in-home care support services are just a few of the available care options. All these options can have varying levels of financial implications on families, which is why it is so important to seek professional advice, someone who specialises in aged care planning, to get the right information for all parties involved to have a thorough understanding of the available options and the implications of these decisions.

It can often be beneficial for a third-party individual such as a health care professional to give practical advice on their situation

without the emotion that a loved one has. They can also help mediate if there are arguments which are common and normal. Humility is a pivotal part of caring for someone, so it is important to not feel embarrassed to ask

a professional for help or advice. These professionals are experts in their field and may have access to more information or resources than you would be able to find alone.

From beginning the conversation, removing obstacles, financial advice and everything in-between; it’s important to start early. This does not necessarily mean that the care or intervention is required to start straight away. It instead allows your loved



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ones to voice their wishes for the future, to understand their financial situation, what their medical history is and what they may need in moving forward. Being proactive and knowing information in advance is not the same as implementing it, it's always good to be prepared. Every person's situation is different, but the documentation individuals need, the legal and financial understanding and the methods of sourcing and implementing support are the same.

Jean – “Conversations provide a vehicle to discuss how best to manage. They are the start of plans. Plans are good. Planning can help us in a crisis or in a gradual unravelling to make the best of all situations. Ask our loved ones what they hope for and what they fear.”

Jean's number one advice, “Get a notebook, a large one. Write everything down. Unless you have total recall, you will need one.”

Resistance

Resistance is a huge challenge when we are ‘parenting our parents’. The reasons for resistance can varied – grief, anger, fear, loss of control, feeling ignored or not having needs met or not understanding what their needs are. It is important to make sure your loved ones know you are working with their best interests in mind, with them not against them. This is the key to a successful and harmonious care giving journey.

Jean points out “Talking about difficult topics and confronting the realities of becoming more dependent are essential to everyone. When we have these conversations, we always place our loved ones at the centre. We listen, we take notes of what is said, we repeat as often as is needed. Always reassure your loved ones that having these conversations will give them more control over their lives, not less.”

There will always be some of the stress and resistance when people feel they are not making their own decisions and that others are taking control away, when they are fearful.

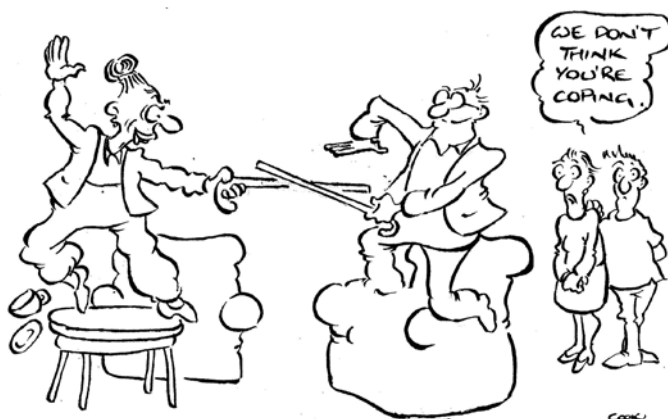
All relationships require effort, but particularly when someone is assuming a care position.

Jean: “Although I talk about parenting your parents, it is important to remember that

your parents are not your children, they are adults, even if they don't always behave like them – remember, sometimes neither do you. In communicating with your parents, try not to treat them as children, adult to adult is the best recipe for a good communication and a healthy relationship.

Adult to adult is not only respectful and kind but it is more effective at arriving at agreement and your parents are less like form a resistance movement.” This is also important when you begin the journey of ‘parenting your parents’ as this can be a very challenging time for all involved and can put great strain on relationships, particularly those that have had difficulties throughout the years.

Everyone's experience is different. Some people have been ‘parenting their parents’ for a long time, some have not maintained a relationship with their parents and others





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reunite when their parents need care because they are family. No matter the situation, it will not necessarily be an easy transition.

We all have to discover our own way of caring

Caring for another person is incredibly individualised and there is no one size fits all role. Some people take on a hands-on method and take on a full-time care role. Others prefer to organise care by other means such as hiring care staff. Neither approach is right or wrong.

It's a fine balance, it is important to find the right services and learn from mistakes made along the way. Things will never go perfectly smoothly but if we never look at the lesson in each mistake, then you can't learn from them. Learning what works or doesn't work will allow you to find the correct care that your aging loved ones require.

We did say that parenting our parents wasn't easy, didn't we?

Neither 'Helicoptering parenting' our parents nor leaving them alone to decide their own care needs are appealing or the best way to approach care plans. You want to find somewhere that fits in between, one that aligns with the right path for both you and your loved ones.

Resources in the book include:

- ▶ 200 Questions to ask prior to going into an aged care home
- ▶ Questions to ask home care providers
- ▶ Useful websites
- ▶ The golden rules after being admitted to hospital
- ▶ Plus so much more

Jean has incorporated advice, humour, useful information and lived experiences in an easy to read practical guide to shine a light on topics everyone 'parenting their parents' need to know.

Jean has provided a few more pearls of wisdom for your caring journey:

“Every aged loved one needs an advocate – are you your parent’s advocate?”

“Caring for our parents is not a burden – in a blink of an eye we will be there too!”

“Siblings have different perceptions – open and honest communication is important.”

“Talking about difficult topics, the care needed now and in the future, will give your loved ones more control – Listen with empathy and compassion.”

WE'D LIKE TO SHARE A FEW WORDS FROM JEAN'S BOOK WITH YOU:

“We all think we know what to do when the time comes, and there are many times that do come between frailty and ageing and helplessness and death, but we don't. It is always difficult. Love is not enough. We all need help to know what to do, even what to say.”

“We Need To Talk About Mum and Dad” is an amazing resource for all people, at all stages of their 'parenting their parent' journey. Not all things will resonate with everyone, but the information provided is priceless and will help you in ways you never realised.

Everyone's needs and requirements are different. Some people at 70 don't need help however, some people do. You know your aged loved one, what they need and are the best advocate for their needs.



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Jean's parents have each other and they are very lucky, being in their mid 90s and still living together in their retirement village. Loneliness in our aged loved ones is something we need to consider, don't underestimate the power of engagement and inclusion. Sometimes just being there is enough.

Any caring journey needs to ensure our ageing loved ones are at the centre of all decisions, that they are included, engaged, treated with dignity, that their wishes are understood and respected, and that their needs, hopes and fears are heard.

"We Need To Talk About Mum and Dad" is available at all good book stores

Caring has stepped up a notch or two for Jean as her father is currently in hospital, all of us at Australian Carers Guide send our best wishes to Jean and her family. **ACG**



More information about Jean can be found on her website: www.jeankittson.com.au/

Illustrations by Patrick Cook



National Carers Week 16–22 October

Jean Kittson is widely known for being an actor, performer and writer. What many don't know is that she is also a carer for her parents.

Jean will be in Hobart as a special guest of Carer Gateway to celebrate National Carers Week at a special morning tea for carers and invited guests – 18th October.

COPIES OF JEAN'S BOOK WILL BE GIVEN TO ATTENDEES IN THE NATIONAL CARERS WEEK MORNING TEA.

When she visits, Jean will be talking with carers about her own caring journey, the challenges she has confronted, and the rewards and frustrations. Of course, it wouldn't be Jean Kittson if she didn't talk about her experiences without touches of her trademark humour.

Jean has written about her caring role in a book published in 2020 called **"We Need to Talk About Mum & Dad: A Practical Guide to Parenting Our Ageing Parents"**.

In her book, Jean has managed to brilliantly cover the difficult subject to talk about i.e., ageing, end of life and death often adding humour to explain things. This book serves as a comprehensive and practical guide to the realities of caring for our parents in older age.

The book manages to show how quickly roles can reverse and we have to be a parent to our parents in a blink of an eye. Insights in Jean's book will be familiar to many and

even if you or your loved ones are not at the stage yet, this book explains how the aged care and legal system works in Australia.

This book serves as a practical guide into advance care directive, sorting out wills, legal system, what to expect with ageing, dealing with doctors, home care and residential aged care home etc.

The book captures familiar things we face, such as seeing negotiating with siblings when it comes to caring for parents, addressing the need for parents to downsize their home, dealing with hospitals and more. By adding humour and using cartoons drawn by her husband, Jean has made this sensitive topic into an easy and informative read.

This book is sure to be a wonderful read for everyone and even help us navigate the bureaucratic maze and become a good decision-makers in future years when it is our turn.

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Move More, Stress Less

In a world of where busy the new back and hustle culture is celebrated – stress is inevitable.

And while we might feel the need to maximise every minute, this constant pressure can damage your health. It exposes you to higher than usual levels of hormones linked to your ‘fight or flight’ response — contributing to health problems including depression and high blood pressure.

Stress can become a bit of a cycle. When you’re under pressure you’re less likely to eat well and exercise. We may also resort to overeating, smoking or using alcohol or drugs to cope with life’s demands. These unhealthy habits add to our health problems – so the cycle continues.

EXERCISE BEATS STRESS

You might feel like reaching for a glass of wine at the end of a long day, but research suggests you’re far better off tackling your stress on an exercise mat or on the sports field.

Studies show regular exercise can help reduce depression, mild anxiety and help relieve stress. Exactly how is unclear, but probably involves:

- ▶ boosting the production of ‘feel-good’ chemicals, endorphins and serotonin
- ▶ distracting your mind from anxious thoughts
- ▶ deepening breathing and relieving muscle tension
- ▶ improving sleep quantity and/or quality
- ▶ increasing your energy levels, alertness and concentration

RUN YOUR OWN RACE

The key to exercise is to do something you enjoy, that fits into your lifestyle – otherwise it will only add to your load.



Aim to do 30 minutes of exercise that raises your heart rate a day to reap the mental and physical benefits. Resistance exercises twice a week, like weight training or Pilates, are also recommended.

If you don't have a block of time it doesn't matter – three 10-minute bursts a day is just as good as one 30 minute session when it comes to the long-term benefits. Some psychologists even suggest that a 10-minute walk may be as good as a 45-minute workout for temporarily relieving symptoms of anxiety and depression.

CREATE HEALTHY HABITS

Understanding that exercise helps stress is one thing but making sustainable changes in the long term is hard.

Try these tips to help motivate you to move more.

Mix it up

Going for a walk is good, but so is a bike ride, a swim or a dancing class. Adding some variety can help spice up your routine and maybe even your social life.

Exercise with a friend or in a group

There's nothing like the fear of letting someone down to get you up and moving. Why not recruit a friend or two to keep each other accountable? Four-legged friends can be great motivators too. It's hard to put your

feet up when you're being stared down by an excitable pup.

Make exercise a priority

We know exercise is important for self-care, stress management and our long-term health – but when life is busy why does it suddenly slip off the priority list? Try scheduling regular exercise into your calendar – just like any other commitment. That doesn't mean blocking out hours at a time, start small and be consistent.

Research suggests that it's better to do something regularly through the week than cram it all in at the weekend.

Relax! You're human!

Some people take an all-or-nothing approach to exercise and eating. They feel that if they slip up and eat a lot of chocolate or miss a day or two of exercise, they've blown it. Missing a regular walk or eating chocolate is no disaster – tomorrow is a brand new day, so you can just pick up where you left off. The important thing is not to give up.

DITCH THE EXCUSES

It's easy to come up with a reason to skip your exercise session – have you tried flipping the script? Learn to talk yourself into exercise – not out of it.

The trick is to predict the excuses you'll make and have a counter-argument ready.

"It's too hot/it's too cold/I'm too tired"

The key to exercise is to do something you enjoy, that fits into your lifestyle

Aim to do 30 minutes of exercise a day



“It’s cold, but I can put on extra layers of clothes and walking will make me feel warmer”.

“It’s hot, but if I wait until late afternoon and walk in the shade it’ll be easier”.

“I’m tired, but a brisk walk will energise me”.

“I don’t have time”

Life is busy and it can be hard to find time to exercise. If you’re struggling to find a window you could try:

- ▶ Switching an hour of wind down time in front of the TV for a workout
- ▶ Using the ad breaks for small activities like skipping or sit ups
- ▶ Delegating domestic tasks, like making dinner, to other family members to free up the time

- ▶ Using lunch breaks for regular walks or an exercise class
- ▶ Have a ‘quickie’ and give it all you’ve got!
- ▶ Combine exercise with spending time with family or friends
- ▶ Try walking meetings or catch ups with friends

“Exercise is boring”

Doing the same thing all the time can get boring – the solution is to mix up your exercise activities or try to make your basic walking/jogging routine more interesting.

Try a new form of exercise, change up your running or walking route or join a social group or class that gets you moving. **ACG**

by **Marianne Kirby**
Bupa Healthlink



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Protecting your soul

Gossiping is a choice

Over the years, I have often witnessed gossip being used as a conversational pastime in a way that is usually harmful, hurtful and destructive.

Jay's story is a perfect example of the senseless negativity gossip can bring. Jay was a retirement-home patient who I had instructed to take his medication before he started eating.

People gossip. They always have and they always will, especially when they become anxious. So, wouldn't you know it, a lady at Jay's table got the false idea that the

nitroglycerin he was taking was to prevent him from having a heart attack during the meal. And she went to town, telling everyone and speculating on what might happen.

Of course, others around the table got anxious that something horrible might happen between their appetisers and dessert. The lady's gossiping was hard to avoid and became quite infectious.

Residents whispered among themselves and began to ask Jay if he was okay as he sat down to eat, passed them in the hall or attended day-to-day events.

Soon, the previously social chap became withdrawn and embarrassed, and stopped attending meals and the usual retirement-home activities.

Once I realised what was going on, I helped Jay clear up any misconceptions and break the gossip chain. He simply explained to his tablemates that his doctor had prescribed the meds to reduce his angina pains rather than to prevent a sudden heart attack, and they spread the word. Not surprisingly things calmed down after that, but those around the table learned a bit of a lesson – I hope.

Gossiping is a choice. Sure, there will always be busybodies who have nothing better to do than make up things and talk about the details of somebody else's life. But you don't have to participate.

Here are some ways to stop gossip in its tracks:

- **Remove yourself from the conversation.**

Change the subject or say something positive about the person who is being talked about. If that doesn't work, walk away.



There will always be busybodies who have nothing better to do – but you don't have to participate

- **Speak up.**

And, make it clear that you are not interested in hearing or participating in the spread of gossip or unsubstantiated rumours. Try not to make a big deal of it, just move away and don't respond to peer pressure. Let the gossiper know that you want to be positive and helpful so that things don't get out of hand.

- **Don't engage or join in.**

If a person comes over with a piece of gossip, don't react or offer advice.

- **Make an excuse.**

Suggest that you have to get back home or back to work, run an errand or make a call.

- **Be careful.**

Think twice before you share personal information about yourself especially when it comes to things that might embarrass you or you don't want to have passed on.

Once you get the hang of it, taking a stand against negative chat will enable you to create a more positive atmosphere for yourself and others.

My guess is, in time, you will be able to make a difference, one conversation at a time. And good for you for doing it. **ACG**

Overcoming Resistance to Assistance



Note: if your older loved one has Dementia, seek professional assistance from a doctor or aged care professional. Reasoned discussion may not work and other strategies will need to be used.

Even with comprehensive planning involving all members of the family, it is not uncommon for the care plan to be met with some resistance when it needs to be enacted. Many older adults will not ask for help and refuse to acknowledge they

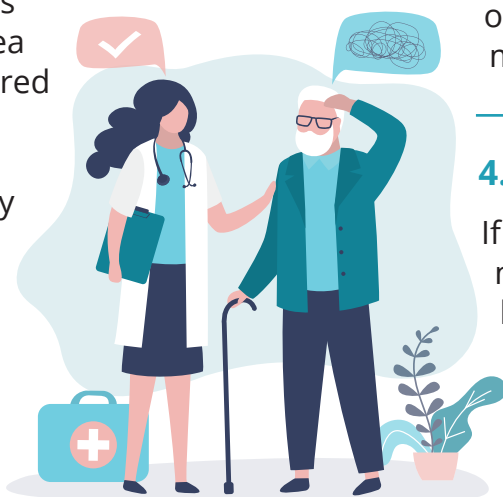
need assistance – they often feel they will be a burden to their families or lose their independence.

The following five strategies can help you to overcome your older loved one's resistance to care.

1. UNDERSTAND THE REASONS FOR THE RESISTANCE

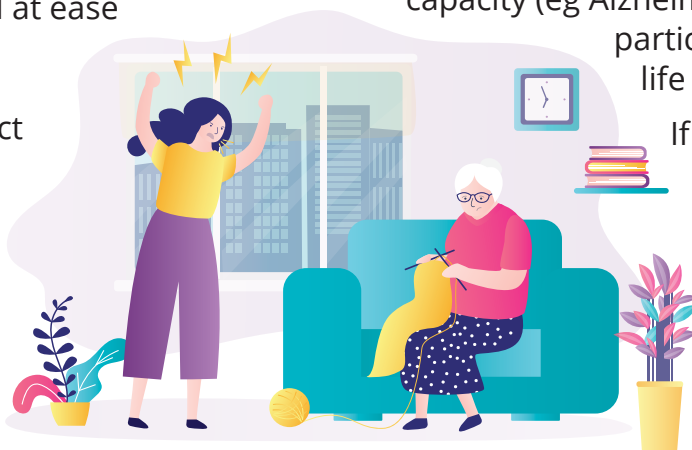
Ask your parent or older adult what's driving the resistance. "Mum, I notice every time I bring up the idea of someone coming in to help, you resist it. Why is that?" Often older adults don't realise they are being resistant.

Once needs and resources are identified, you and your siblings will have a better idea of what will be required of your family. For example, if your parent/s want to stay at home and 'age in place', consider whether someone in the family will supplement their care, if you will divide those duties among you, or if you will enlist the help of a professional Carer to support them to continue living independently at home.



2. EXPLAIN YOUR GOALS

Remind your loved one that you both want the same thing: independence at home and quality of life. Explain that a little extra help will keep them at home for longer and will put your mind at ease as well. Have a candid conversation with him or her about the impact this is having on your life. Often, older loved ones don't understand the time commitment of a carer. Use the phrase: "I would feel so much better if I knew you had more help, someone to do your food shopping, someone to take you to the chemist, someone to be here when I can't be etc."



3. BRING IN OUTSIDE HELP

If a relationship with an older loved one is deteriorating, ask a professional for an assessment. A third-party aged care professional can provide valuable input. You can also visit homeinstead.com.au/ resources for additional tips on how to talk with a loved one. Another option if you are having problems getting through to your older loved one is to ask another family member or close friend to intervene.

4. THE IMPORTANCE OF RESEARCH

If you decide external assistance is needed, reassure your loved one and let them know you have researched all of the options available to them and you are confident you have found the best Carer you can find to come into the home to help them.

5. RESPECT THEIR DECISIONS

Sometimes you won't agree with the decisions of your older loved one – that's okay. As long as your loved one is of sound mind, he or she should have the final say. It's important to empower your ageing adult to make informed decisions about their own care. Avoid making unilateral decisions unless he or she no longer has the mental capacity (eg Alzheimer's Disease) to participate in his or her own life choices.

If your older loved one is still resistant, but a danger to him or herself, consult a lawyer about taking steps towards becoming a guardian and enduring power of attorney so that

when the time comes, you are able to make decisions on your loved one's behalf when they are incapable of doing so themselves.



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REAL LIFE SITUATIONS

The stress involved in watching an older loved one deteriorate as they grow older can sometimes cause strain on sibling relationships. These real-life family stories are followed by problem solving tips and resources for handling these situations before too much damage occurs.

1. Overworked, under appreciated

You just received the big promotion you've always dreamed of and, as the youngest and the favourite, you've also cared for Mum since her fall. You're struggling to juggle the pressures of your own family work-life balance with the additional role of primary carer. You are tired, stressed, and resentful that your siblings won't step up to help. What do you do?

It is common for one sibling to get stuck with all the work when it comes to caring for older loved ones.

If you're feeling stressed by the load, it's time to speak up.



Arrange a meeting with your siblings

Approach your siblings with specific requests for advice, input and assistance in advance. A group putting their minds to the challenges can come up with better solutions.

Sometimes siblings have different views

It's common for siblings to have different views of what comprises help. They may not agree with the primary carer's view on the help that is required. They may say "I won't help on your terms." They may also think the primary carer is offering too much help. These perspectives may be the result of what's happening in a sibling's life, or it be a reflection the relationship he or she has with the older loved one.

Talk to your parents

Make sure they are not telling your siblings that they don't need help.

Seek respite

You can access short-term care for your parents to provide you with respite from your role as primary carer, allowing you a break and time to attend to your own everyday activities and responsibilities. Respite care can be provided at home, a community centre, or residential aged care facility.

2. Fighting for control

You've been the primary carer for your mum during the past year. Your siblings have offered to help, but it seems that if you want something done right, you must do it yourself. Your siblings just don't seem as reliable. Your marriage, however, is beginning to suffer and you don't know what to do.

Sound familiar? This is an issue that often presents in family caregiving situations. Maybe you feel as though you're in charge only to have your sibling come in and take over the situation. Or perhaps you feel as though no one else does the job properly.



It's easy to feel that no one else can do the job, but this is where the 50/50 Rule applies to you too – be sure to allow your siblings to share in the family caregiving responsibilities.



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Your siblings might feel left out

Perhaps your siblings need to feel they have contributed something to your mother's care too. Embrace this. A whole-of-family approach to care can benefit everyone.

Give up a little control

It's important to do this for your own self-preservation as well as that of your family. You will be no good to Mum if your own health fails. It's also likely that your mother would be upset to learn she was the source of strife in your marriage.

Communicate

Let your siblings know you would like to take them up on their offers of assistance. Outline how each one of them can assist and develop a schedule if appropriate

3. I'm so alone

You made the tough decision to give up your career and retire early to move in with Dad. You're glad you did, and your siblings were relieved and appreciated your sacrifice, but you're feeling isolated and alone. What do you do?

Be brutally honest

You need to tell your siblings how you feel. If you don't think you can get your message out verbally, send them a note or an email. If they respond positively, ask them for specific ways they can help you.

You could also be surprised: your siblings may have been waiting to hear from you, afraid to seem as if they were interfering if they offered unsolicited advice.



List the support you need

If your siblings don't live near you, perhaps they could help you to access in-home or community care resources that would give you some much-needed respite and a chance to reconnect with friends. Asking them to visit home more frequently and to stay with Dad on the weekends could also be an option.

Get involved in the community

Set up a Facebook account to reconnect with friends and to join local community groups. This makes it easier to find out what is happening in your local community and to schedule coffee or lunch with a friend. Join a local book club or gym.

Check your local newspaper in print or online to find out what's going on in the community each week.

PROFESSIONAL SUPPORT

Despite all your efforts, you may not have been able to achieve a 50/50 share in caregiving responsibilities with your siblings. It could also be the case that even with additional support from your siblings, caring for your older loved one and his or her changing needs has become too much of a responsibility for all of you to share.

The help of a professional Carer can support your older loved one to continue living independently at home as they age.

Contact your local Home Instead office for a free, no-obligation care consultation so we can discuss your needs and provide you with information, advice, care and support to help you and your family find a better home care solution.

ACG

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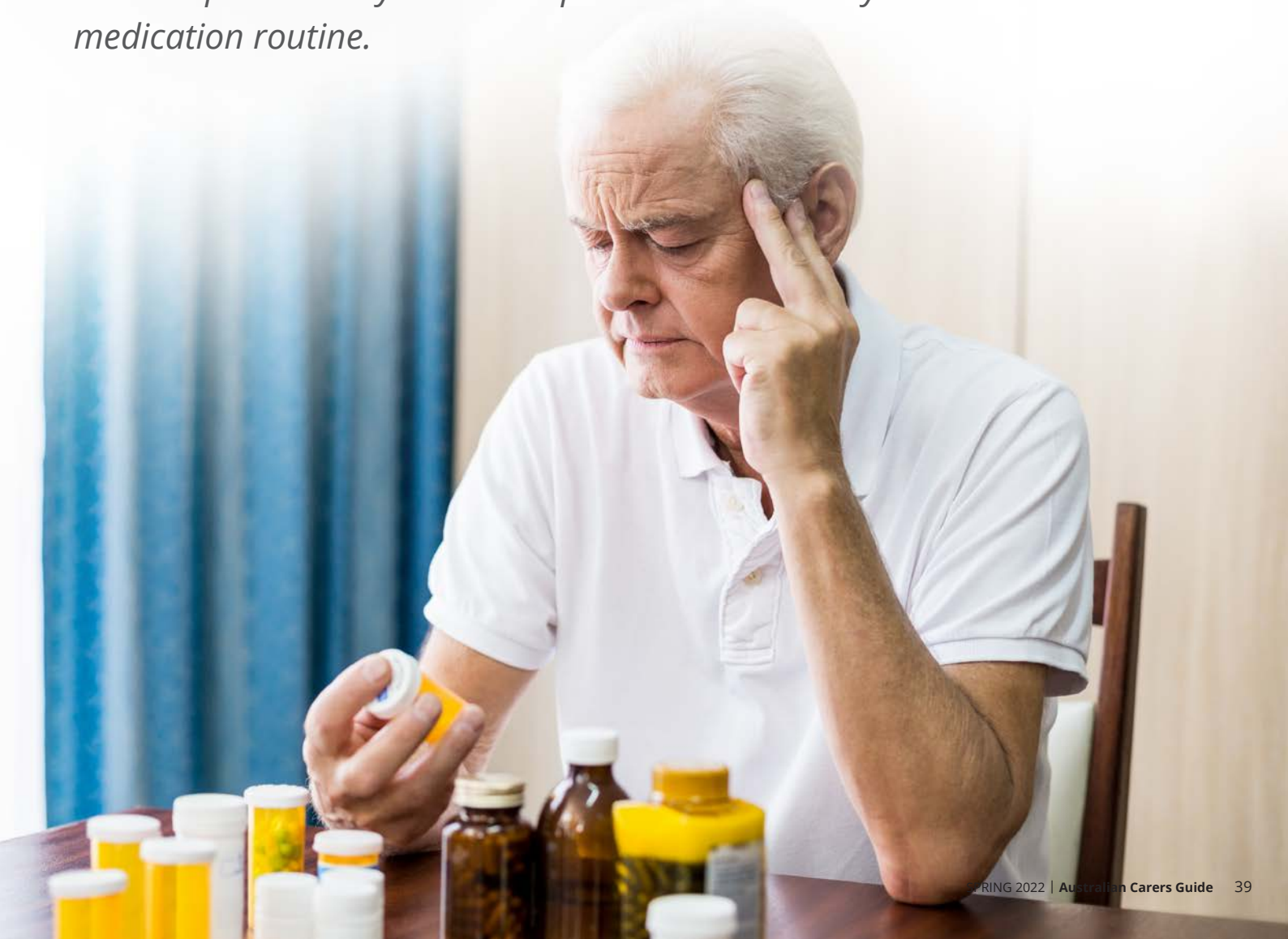
unitingagewell.org



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Simplify complex medication routines with a DIY pill board

*When medication routines become complex or “non-standard,” it’s easy for mistakes or missed doses to happen. While caring for a family member, **Paul Rothstein** created a pill board system to make it easier to manage their medications. It worked so well that he wanted to share his solution with other carers. Here, Paul explains how to create your own DIY pill board system to help avoid mistakes in your older adult’s medication routine.*



TRADITIONAL PILL ORGANISERS DON'T WORK WELL IN COMPLEX MEDICATION SITUATIONS

The average pill organiser typically has compartments for the day of the week and the time of day – morning, afternoon, and night.

More complex pill organiser systems can also account for specific times of day or more frequent medication doses.

However, these pill organisers often don't work as well when a medication routine is more complicated or includes non-pill formats.

Scenarios that don't work well with a typical pill organiser include:

- The medication isn't a pill. Some medications are powders that have to be mixed with liquids just before taking, medical syrups, ointments, patches, or other formats.
- A medication must be taken first thing in the morning and then the person can't eat for the next hour.
- A medication can't be taken together with certain foods or beverages.
- A medication must be taken with food, on an empty stomach, or with a full glass of water.

VR.O, Date: 2/1/20 – Joan Smith Medicines

8 AM – EVERY DAY
1 pill (Medicine 1), 1 pill (Medicine 2)

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
S	M	T	W	T	F	S

PUT ON OINTMENT (MEDICINE 3) WITH GAUZE THEN BANDAGE

WAIT 1 HOUR WITHOUT EATING.

9 AM – BREAKFAST – 1 pill (Medicine 4), 1 pill (Medicine 5)

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
S	M	T	W	T	F	S

ON MONDAY, WEDNESDAY & FRIDAY AT DINNER TIME
– 1 pill (Medicine 6), 1 pill (Medicine 7)

MONDAY	WEDNESDAY	FRIDAY
M	W	F

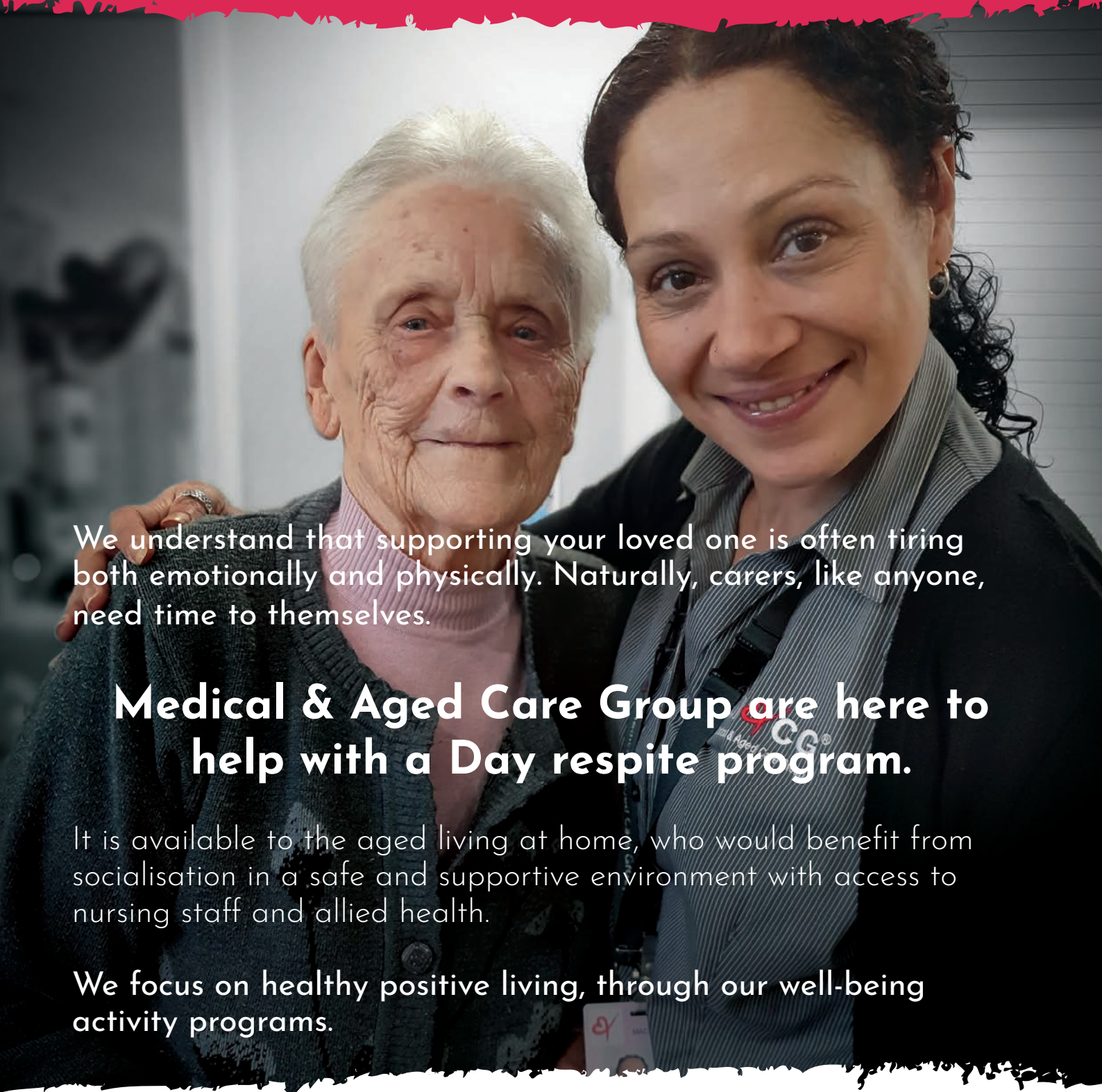
**Our solution:
a DIY pill board**

Dr. Cohen
Wednesday @ 4PM

Having Michelle
over for lunch on
Saturday

Day Respite Program

Let us take care of your loved one, while you take care of you.



We understand that supporting your loved one is often tiring both emotionally and physically. Naturally, carers, like anyone, need time to themselves.

Medical & Aged Care Group are here to help with a Day respite program.

It is available to the aged living at home, who would benefit from socialisation in a safe and supportive environment with access to nursing staff and allied health.

We focus on healthy positive living, through our well-being activity programs.

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on **0438 984 299** to discuss

MACG[®]
Medical & Aged Care Group

A FLEXIBLE DIY PILL BOARD SYSTEM CAN MAKE LIFE SAFER AND EASIER

When my relative's medication routine was becoming more and more complex, I created a pill board to reduce medication errors and to include space for notes and reminders of upcoming appointments.

This pill board made life much easier for our family and my relative's carers.

It also received a lot of attention from nurses and occupational therapists. They thought it was a helpful and innovative solution.

A do-it-yourself (DIY) pill board like this is flexible for almost any medication routine, helps reduce mistakes, is easy for carers to refill, and is easy to make by using inexpensive everyday items.

Overview

First, the basic idea is to create a pill box "block" for each time of day that medication is taken.

Next, put all the pill box "blocks" that are needed for one full day of medication onto as many pieces of paper as needed.

Then, mount the paper(s) containing the pill box "blocks" onto a white erase board or sturdy piece of poster board.

Important: Before putting it into use, make sure your pill board is correct by reviewing it with your older adult's doctor or pharmacist.

- One pill box (like this) for each time of day that a person takes medications. For example, someone who takes medications at 10am and 7pm would need 2 separate pill boxes on their board.
- Double-sided foam mounting tape
- White erase board or a cork/poster board
- Plain paper
- Pen or marker
- Tape

How to build your DIY pill board

The pill board is a concept that can be easily customised to suit different situations.

For example, it works equally well whether it's written by hand or typed on a computer. The goal is only to make the writing clear and easy to read.

In this example, the writing on the pill board was created on a computer and printed out.

In this example, the board itself is a white erase board with a cork border. You might have a white board or a cork board handy. Or, you might find it simpler to use a piece of poster or foam board instead.

1. Name and date

Take a piece of paper and write the person's name and the date this board was created at the top.

This board represents the person's current medication routine. If their routine changes in the future, the board will need to be updated.

2. Create pill box "blocks"

Next, add the time of day when medications are first taken and a pill box "block" for that time of day. This is also the place to include any special instructions.

VR.O, Date: 2/1/20 – Joan Smith Medicines

8 AM – EVERY DAY

1 pill (Medicine 1), 1 pill (Medicine 2)



One pill box "block" where 8 AM is the first time of day that 2 medications will be taken.

In the close-up image above, we see that 8 AM is the first time of day that 2 medications will be taken. There are no special instructions for these two medications.

Write the full name of the medication and the number of pills required. You may also want to include the dosage, as a reference.



Do you need a break? We're here for you

At Allity, we are here to support you through the planning of your loved one's respite care. As a carer, it is important to take time for yourself to rest and recharge.

Whether you are planning a break, have appointments scheduled or should an emergency arise where immediate care is required, we are here for you.

Who can benefit from respite?

- A carer who is unwell needing time to recuperate
- Carers feeling overwhelmed and needing support with a loved one
- GP, Hospital Social Worker or Allied Health Specialist needing a patient care solution

How do I access respite?

- Getting access to respite is as simple as contacting the Allity Home closest to you for more information or assistance

Contact your local Allity Home or visit allity.com.au

Avonlea. Mentone
t: (03) 9545 4800

Bayside. Mordialloc
t: (03) 8543 3100

Camberwell Green
Camberwell
t: (03) 9888 6133

Claremont Terrace
McKinnon
t: (03) 9964 9000

Glendale. Werribee
t: (03) 8742 8888

Greenview. Donvale
t: (03) 8841 0800

Highwood Court. Burwood
t: (03) 8831 0500

Lexington Gardens. Springvale
t: (03) 9574 6699

Lilydale. Lilydale
t: (03) 9739 3300

Medina Manor. Thornbury
t: (03) 9290 6400

Montclair. Brighton
t: (03) 9596 8858

Princeton View. Brighton East
t: (03) 8591 0200

Riddell Gardens. Sunbury
t: (03) 9218 5200

Tannoch Brae. St Albans Park
t: (03) 5248 5814

Templestowe Manor
Lower Templestowe
t: (03) 9850 8877

Trevi Court. Essendon
t: (03) 9374 3500

Allity is part of Bolton Clarke Group, Australia's largest independent, not-for-profit provider of home care, retirement living and residential aged care.



Allity

PART OF BOLTON CLARKE GROUP

Then, use double-sided foam mounting tape to stick the pill box underneath the writing.

Repeat these pill box “blocks” on the board as many times as needed for all the medication that’s taken during one full day.

9 AM – BREAKFAST
1 pill (Medicine 4), 1 pill (Medicine 5)



Adding a 2nd or 3rd pillbox for medication taken at different times of the day.

For example, if your older adult takes pills at 8 AM, 12 noon, 4pm, and 8pm, they will need four of these pill box “blocks” to create their pill board.

3. Add medications that aren’t in pill format

In addition to pills, doctors commonly prescribe medications that come in different formats like ointments, liquids, creams, patches, or powders.

These medications need to be added to the pill board as well.

PUT ON OINTMENT (MEDICINE 3) WITH GAUZE THEN BANDAGE



WAIT 1 HOUR WITHOUT EATING.

Adding a medication that isn’t in pill format; an ointment.

In this example, the image above shows a photo of a tube of prescription ointment that is part of the 8 AM pill box “block.”

The photo clearly shows what the ointment tube looks like. Special instructions are included so carers know that the person shouldn’t eat for an hour after the ointment has been applied.

If you’d like to make sure that a non-pill medication won’t be missed or forgotten, you could even write or type the directions in a different colour.


In some cases, you may even be able to tape a small plastic bag “pocket” to the board and put the non-pill medication inside. For example, a small tube of ointment could fit inside a snack-size zip-top plastic baggie.

4. Make adjustments for medications that aren’t taken every day

Sometimes, doctors will prescribe medications that shouldn’t be taken every day.

To accommodate this on the pill board and avoid any confusion or mistakes, fill a dedicated pill box with that medication and tape shut the days that are not used.

ON MONDAY, WEDNESDAY & FRIDAY AT DINNER TIME
– 1 pill (Medicine 6), 1 pill (Medicine 7)



A pill box for a medication that’s only taken on Mondays, Wednesdays, and Fridays

In the image above, only the Monday, Wednesday, and Friday compartments are accessible. Those are the only days when this medication should be taken.

CREATE A SECOND PILL BOARD

Now that you’ve created your older adult’s pill board, you can see that it holds one week’s worth of medications.

Next, create a second pill board that’s exactly the same as the first one, except that there’s a difference in colour so you can tell the two boards apart.

Why are two pill boards needed?

- One full week of medications is always loaded up and ready to be used.
- When one board is finished, you can immediately switch to the second board.
- You’ll always have at least one week’s notice before any medication runs out and needs to be refilled.

Culturally-Specific Care Services

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Why are different coloured boards needed

In the photo of the second pill board below, you'll see that the paper is green instead of the yellow paper used in the first pill board.

One board should be used all week, until all the medication is finished. Using a different colour for a second board reduces the chances that anyone would get the two boards mixed up during the course of a week and use part of one board and part of another.

If you don't have different coloured paper, you could accomplish the same goal by adding a coloured border, colouring the corners, etc. – anything that distinguishes one board from the other.

CUSTOMISE THE PILL BOARD FOR THE SITUATION

Because everyone's medications and dosage schedules will vary, take the basic idea of the pill board and customise it so that it works for your older adult's specific situation.

For example, if your older adult takes a specific medication only once every 2 weeks, you can prepare pill boards that reflect that schedule.

Or, some people might like laminating the paper to make it sturdier or waterproof.

The goal is to customise the pill board so that it suits your older adult's medication needs. **ACG**

Written by Paul Rothstein

VR.O, Date: 9/1/20 – Joan Smith Medicines

8 AM – EVERY DAY
1 pill (Medicine 1), 1 pill (Medicine 2)

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
S	M	T	W	T	F	S

PUT ON OINTMENT (MEDICINE 3) WITH GAUZE THEN BANDAGE

WAIT 1 HOUR WITHOUT EATING.

9 AM – BREAKFAST – 1 pill (Medicine 4), 1 pill (Medicine 5)

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
S	M	T	W	T	F	S

ON MONDAY, WEDNESDAY & FRIDAY AT DINNER TIME
– 1 pill (Medicine 6), 1 pill (Medicine 7)

	MONDAY		WEDNESDAY		FRIDAY	
	M		W		F	

SECOND PILL BOARD SET UP READY TO GO

*Physical Therapy
Tuesday & Thursday
at 2PM*

When you're caring for a person living with dementia and don't know where to get help, **call us and get:**

Personalised support by **your side.**

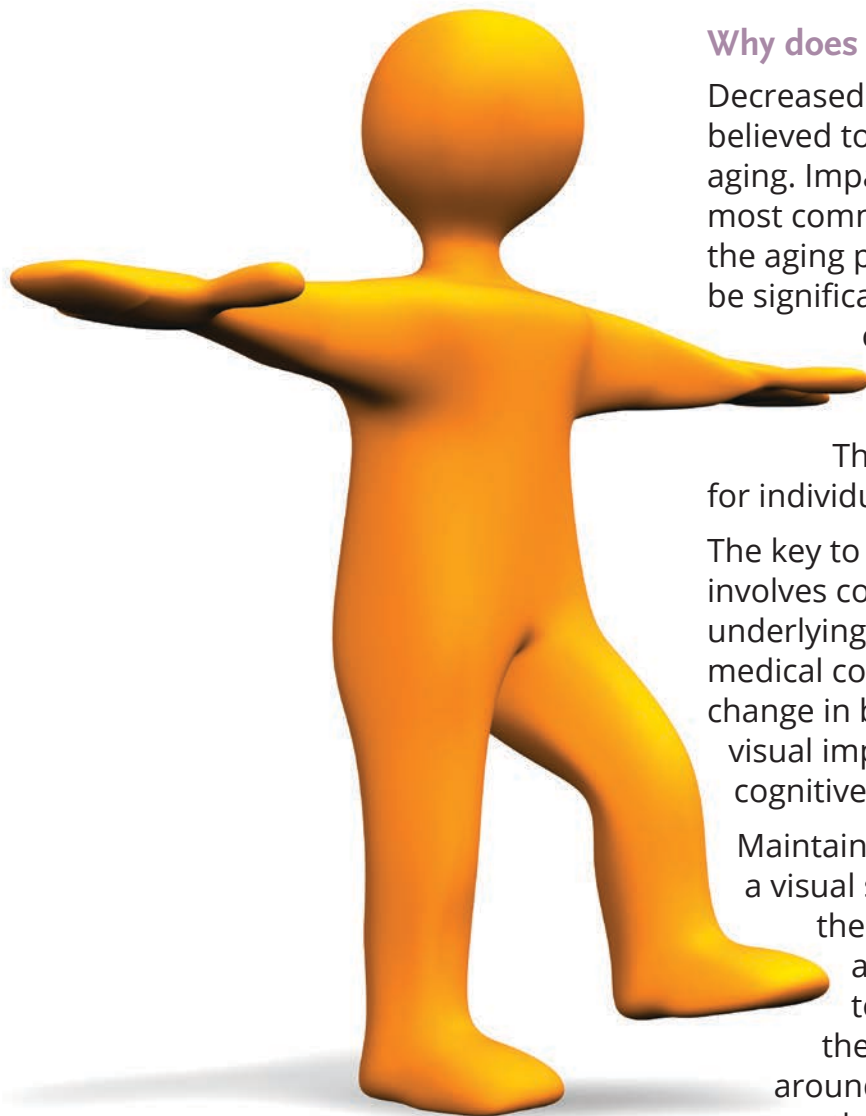
When changes in behaviour start to impact the care of a person living with dementia, or their carers, we can provide **on the ground support**, advice and develop ways to respond to individual needs.

Call the 24-hour helpline **1800 699 799**
or refer online **dementia.com.au**

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A service led by HammondCare

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6 ways to improve your balance



Why does mobility decrease?

Decreased mobility and balance are often believed to be an inevitable consequence of aging. Impairments in balance is one of the most common reasons for falls to occur in the aging population. Balance can however be significantly improved if it is managed correctly, identified early, and treated appropriately alongside your healthcare professional.

This allows greater independence for individuals with a decreased risk of falls.

The key to improving balance impairments involves correct identification of the underlying cause. There are many different medical conditions which can cause a change in balance such as diabetes, vertigo, visual impairment, some medications and cognitive conditions.

Maintaining balance requires inputs from a visual stimulus, the vestibular system of the inner ear as well as our muscles and joints sending sensory input to the brain to determine where the body is in relation to the space around us. If any one of these systems are thrown out of balance, so is your centre of gravity and overall balance.

What to do about balance changes

When noticing changes in balance, it is important to ask yourself or your loved one:

- How long has my balance been deteriorating?
- Have I been having more falls or a decrease in mobility?
- Are you able to walk around independently without holding onto something?
- Are you feeling a dizzy or wobbly sensation?
- Has there been any changes in sensation in the legs such as numbness, tingling or pain?
- Is there anything new that could have caused this? For example, have you just started taking a new medication?



Any new onset changes should be discussed with your general practitioner. They will give you a full physical check to see if any recent changes that could have induced the changes in balance. This could include new medications, changes in blood pressure or as a result of a recent injury. Long periods of bed rest or immobility can also have an impact on your stability as you can have decreases in muscle tone.

When are changes in balance a medical emergency?

If you notice any of the following changes, speak to your practitioner as soon as possible:

- Sudden onset, prolonged dizziness or vertigo
- Sudden loss of balance or unsteadiness
- Falls with a head strike
- Sudden onset of numbness or tingling sensation particularly if it is isolated to one side of the body or with a facial droop.

Exercise for recovery

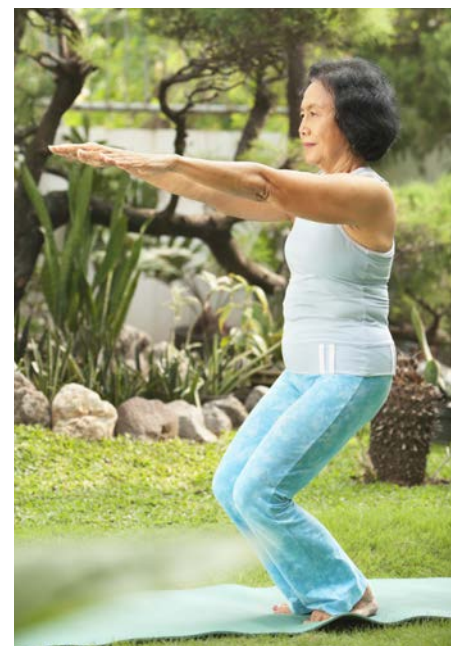
If physical changes in balance are persistent after an injury or surgery, it could be beneficial to obtain a referral to a physiotherapist. A physiotherapist is a great resource for increasing mobility, strength and balance through exercises and movement. Their role is to give you an assessment and tailor a plan of exercises based on your individual needs and conditions. They will also assess the need for mobility aids, at home equipment or refer further help from carers if required. People are often surprised how much improvement can be made in their balance by simply practicing it. Standing up with an aid such as a solid table, frame or kitchen bench can help to stabilise you.

If you feel unsteady or wobbly – you most likely are! After a while of trying this, if you begin to feel more comfortable standing up with assistance, try slowly challenging your balance by using it a little bit less each time. Make sure you are very careful when doing this and always have something you could hold on to if needed.

The benefits of exercise for balance

Implementing exercise into your daily life is incredibly important to maintain health, muscle tone and overall fitness.

It also has great benefits on your mental and cardiovascular health. The term Sarcopenia refers to the onset of muscle loss associated with aging,



this involuntary loss causes decreases in strength and function. It is one of the main causes of disability in the elderly population.

Studies have shown that maintaining exercise, even at a mild intensity can improve the loss of muscle tone in elderly individuals. If you want to improve your physical fitness but are not sure where to start, it is important not to over do it.

Doing too much exercise or at too high of an intensity for your fitness levels can result in injury. If you are not sure where to start, book in a consult with a physiotherapist or your doctor. When exercising, it is most important to ensure that you are doing it in a safe manner and not putting yourself at risk of injury.

Some exercises which can be helpful include:

1. Marching on the spot

Try to elevate your knees as high off the ground as you can. To make it a bit more difficult, slow down the exercise or hold your knee elevated at the top for a couple of seconds.



2. Balancing on one leg

Start slow and try balance on the one leg for 5–10 seconds, then slowly increase the time as your balance improves.

3. “Tightrope” walking

Try taking a few steps with one foot in front of the other, heel to toe. It simulates walking on a tightrope. You can challenge yourself by increasing the time that you hold it for.

4. Calf raises

With both feet together, hold onto a solid surface and slowly raise up your heels as high as you can until you are standing on the balls of your feet. Then, slowly lower your heels back down to the ground. Repeat this 10–15 times.

5. Standing/sitting

Use a sturdy chair and practise standing up without using your arms as much as you can. Then sit back down and repeat around 5–10 times. Make sure that you sit back down slowly.

6. Side leg raises

With both feet together, hold onto a solid surface. Raise your straight leg to the side with toes pointed. Hold this in position for as long as you can and then bring it back to the centre and repeat on the opposite side. Try and do 5–10 on each side.

Some of the most common reasons for falls include:

- Decreased vision
- Joint weaknesses in the hips and/or knees
- Poor posture
- Spinal conditions
- Not lifting feet up correctly
- Having things on the floor that can be tripped on

Your home. Our support.

At Churches of Christ, we understand that finding the right care for a loved one may seem difficult. That's why at Oak Towers Aged Care, our experienced team will do everything possible to make you feel loved and supported while you navigate this journey.

We take the time to learn what's important to our residents – their care needs, passions, loved ones – to develop a holistic care and lifestyle program designed to enhance their life.

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- Palliative care
- Dementia care
- Pastoral care



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or visit cofc.com.au/oak-towers

Methods of prevention of falls:

1 Shoes:

It is important to consider the type of shoes that you are wearing if you are having trouble with balance.

Make sure that you have solid shoes that support your feet and ankles.

Make sure that they have a sturdy non-slip sole and that they fit correctly. It can be very slippery to walk around in slip on shoes or socks around the house, so try to wear the shoes to minimise chances of falls.

2 Environment:

Make sure that you have assessed your environment to see if you can make some changes to reduce falls risk. This includes making sure that there are not things on the floor that can be tripped over and ensuring that rugs are firmly attached. This also includes any power cables across the floor as they are a common tripping hazard. Occupational Therapists can be an amazing resource in helping elderly individuals implement changes at home to help them become more independent and stay at home longer. They are often suggested by doctors alongside physiotherapists to make an overall plan for how to improve balance, mobility and quality of life.

3 Assistance Aids:

Your doctor or physiotherapist might suggest using a gait aid such as a walking frame or a walking stick to help you move around a bit easier. These are excellent tools as they not only add a bit of stability, but they can also improve confidence.

Make sure that your healthcare professional assists you in choosing what the best aid for you would be and get them to teach you how to use it safely.

Other aids can include items that help with minimising risk of falls when in the shower or bath such as a chair, rail or grip mat.

What if you notice deterioration?

Sudden decreases in mobility or balance could suggest that there could be a medical underlying cause, which is why it is so important to let your practitioner know of any changes. An example of one of these conditions is Multiple Sclerosis (MS).

MS causes decreased mobility due to visual changes, dizziness or weakness in the legs. It commonly causes falls and is often an early symptom that results in the diagnosis of MS. Early diagnosis and intervention of any conditions such as MS play a role in the success of treatments and improvement of quality of life. This further reiterates the importance of following up any changes in balance or increase in falls with your practitioner.

If you notice your balance deteriorating, it is important to consult your healthcare professional for a thorough assessment. This could include feeling more unsteady, dizzy or having more falls than usual. There are many things that can cause deteriorations in balance such as worsening vision, ear infections or vertigo, so it is important to get it checked.

Change is scary!

Having falls and feeling off-balance can be incredibly daunting experience. Many elderly individuals do not like reporting these sort of changes as they are scared to lose their independence. It is important to reassure your loved ones if you notice these changes and keep them a part of the conversation of how improvements can be made. **ACG**

10 Shopping Tips



Here are couple of ways to be a considerate shopper, banker or customer, wherever you are:

HOME FIRST.

Arrange home delivery whenever you can. It's easier, involves less waiting and is by far the safest approach for all concerned.

MASK UP.

As we've all heard, you can be a carrier without knowing it. Wearing a face mask or covering in public places helps reduce the risk of spreading. You don't need professional equipment—that should be reserved for medical personnel. Wearing a face mask to prevent the transmission of the virus is one of the most basic things we can do to be considerate of our fellow shoppers.

ONE PERSON, NOT A TEAM.

Less is better when it comes to going out. Get organised. Make a list. Plan your trip and don't stop along the way. Go alone if you can. And whenever possible, designate one person as the shopper of your household.

DON'T FRET AND HOARD.

Seems like our supply chains are working well so, stock up with what you need. Don't empty the shelves like the toilet paper and wipes hoarders. Most stores are asking us to take a maximum of two of each item, unless your shopping for others of course.

GET IN AND GET OUT.

Be organised. Take a list and try not to zig zag back and forth in the store. The least amount of time you are in the store and the away from your home, the better.

SIX FEET AWAY.

Wait your turn. Be patient and stay as far as you can from others in aisles, at registers and counters. A lot of shops have put guide arrows and 6-foot markers on the floors for all of us to follow.

NONPEAK TIMES.

Figure out when the store or bank is the least busy with line ups and crowds.

No one wants to spend a few hours lining up at the best of times. Most stores have special early or late hours for persons with disabilities and seniors to shop. Also opt for local, smaller stores when you can. Don't forget to take advantage of online shopping and delivery services.

CLEAN YOUR CART.

The virus can stay active on surfaces for up to 3 days. Be that guy or gal who spends a few extra seconds to disinfect your cart or shopping basket for the next person. Also

remove shopping lists, face masks and gloves from the cart and put them in the garbage yourself.

THANK YOU MEANS A LOT.

Many delivery people and front-line workers are doing their job under difficult and sometimes uncomfortable circumstances. Try to be cheerful and appreciative during your visit and say thank you to as many people as you can.

WIPE, WIPE, WIPE.

Before you unload, try to leave packages for a few hours. When you bring them in, wipe everything down with sanitiser before you put it away. And, you can't wash your hands enough these days.

Wash thoroughly with soap and water before and after unpacking and dispose of packaging in a safe place away from pets and kids.

Try to do your part ...these are different times

Being careful, being kind and doing a little extra for someone else can make all the difference when it comes to flattening the curve and getting ourselves back to daily life as we prefer it. **ACG**



COMIC CORNER



Jokes

Laughter is good for the soul and a merry heart does good like **medicine**

My friend has put on **so much weight** during Covid they can only play **Seek**.

Don't you hate it when someone **answers** their own questions? I do.

Rice is perfect when you're **so hungry**, you feel like eating **2000** of something.

My mother told me **a million times** never to **exaggerate**. So I don't!

Original Sin: The problem wasn't the apple in the tree, it was the **pear on the ground**.

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- Spinal cord injuries

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SENIOR HOARDING

*Understand the emotions
to find solutions*

Hoarding is especially dangerous for seniors

Hoarding is dangerous for almost everyone, but it's especially harmful for seniors.

They're more likely to fall in a crowded home and their health will be harmed by unsanitary or hazardous living conditions.

Senior hoarding issues could also indicate the presence of Alzheimer's, dementia, or mental illness. In other cases, it could also be caused by Diogenes Syndrome, a condition that affects some seniors near the end of life. Diogenes Syndrome is characterised by hoarding, self-neglect, social withdrawal, and a refusal to accept help.

Hoarding is often accompanied by some degree of anxiety, which makes it difficult to treat – and tough for families to watch. And because hoarders tend to self-isolate, it makes their emotional well-being even more fragile.

When you're caring for someone who hoards, it's helpful to learn more about senior hoarding issues.

Understanding the emotional side of this behavior helps you work toward effective solutions in a kind and gentle way.

The difference between a pack rat and a hoarder

Many people like to hang onto mementos and multiples of useful items for both nostalgic and practical reasons.

But there are key differences between someone who collects and someone who hoards.

A hoarder suffers from an inability to discard items and often acquires useless items.

They keep stacks of unnecessary items, like junk mail and old newspapers. They might move things from pile to pile, but will never throw anything away.

Understanding the emotional side of this behavior helps you work toward effective solutions in a kind and gentle way.

Senior hoarding issues are tough for carers to manage, both physically and emotionally. Hoarding can cause safety hazards like increased fall risk, blocked emergency access, and unsanitary living conditions. To help care for a hoarder, The Australian Carers Guide explains the difference between a pack rat and a hoarder as well as the emotions behind the behavior. They also share tips on how to emotionally support a hoarder and get them the help they need to make a change.

Many people have a few items they feel emotionally attached to, but a hoarder has an excessive attachment to many possessions and will be uncomfortable if somebody touches them or asks to borrow their items.

They'll also feel unable to get rid of any possessions and will end up living in cluttered spaces that are often unsafe, unsanitary, and/or hazardous.

The difference between a collector and a hoarder is that when someone is hoarding, their daily life is negatively impacted.



In addition, hoarding behavior often comes with poor decision making, procrastination, and a lack of organisation.

These impact all aspects of life and make it more difficult to have good quality of life. And because hoarding is isolating, seniors who hoard typically have limited social interactions. They may even push you away or avoid you, damaging your relationship.

People's perceptions of hoarders can negatively impact a hoarder as well. It's easy for others to see hoarders as dirty or lazy, and those judgments can be difficult for them to hear and handle.

Trauma can trigger hoarding

Recently, it has been found that people who have hoarding symptoms are also more likely to have experienced a traumatic event in life.

It could be that hoarding is a coping mechanism to deal with grief or loss.

This is important to consider if your older adult has only recently started the hoarding behavior.

They could be trying to fill an emotional hole left by the trauma of losing a spouse, moving to an unfamiliar place, or a similarly significant life change.

Do your best not to judge and remember that they greatly value the items you see as junk.

The emotional effect of senior hoarding issues

Even though hoarding can be a coping mechanism for dealing with anxiety, trauma, or other mental struggles, it doesn't provide real relief.

Why do they struggle to let go of possessions?

Hoarding is a complex and layered behavior.

A hoarder could be dealing with any number of symptoms and conditions, from indecisiveness to anxiety and from trauma to social isolation.

Using hoarding as a coping mechanism could mean that there's something in the person's life that is just too painful to face.

Clutter builds up and provides comfort to the hoarder. Letting go of that comfort can feel excruciating.

In fact, hoarders can develop such strong attachments to their possessions that these items become more valuable to them than the people in their lives. Getting rid of something so valuable would feel similar to the extreme grief of losing a loved one.

That's why if someone forces a hoarder to get rid of these items, their anxiety can intensify to unimaginable levels.

So even though it may seem like the most straightforward solution, do your best to not throw items away without permission or



Brotherhood
of St. Laurence



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For over 80 years the Brotherhood of St. Laurence (BSL) has worked in the community supporting people of all ages to live the life they choose. At BSL Aged Care we take the time to get to know you and your loved ones and work with you to tailor a plan to suit your individual needs.

Whether you're looking for **in-home support**, **quality residential care**, or **day and overnight respite care**, we'll help you find a solution that works for you.



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jump into a big cleanup without help from mental health professionals – it would be too emotionally distressing.

And if you do get rid of things without their approval, it will likely make them see you as an untrustworthy person. That makes it harder for you to continue helping them.

Do your best not to judge and remember that they greatly value the items you see as junk.

A hoarder needs professional help to deal with their serious emotional issues before they can cope with cleaning up.

What emotional help do hoarders need?

Not only would a forced cleanup cause extreme emotional distress, the person you care for will immediately return to their hoarding ways and fill up the space again.

What works better is to help your older adult see that hoarding is a problem.

That doesn't mean shaming the person.

Instead, an empathetic and rational discussion (or several discussions) will help them gain the courage to do what's best for themselves.

Start by helping them see that a change needs to be made for their own safety.

If the hoarding is linked to a traumatic event, cognitive behavioral therapy (CBT) is often an effective treatment. CBT helps the person cope with the emotions from the trauma and learn to manage their grief in a healthier way.

And even if the hoarding isn't linked to a traumatic event, therapy can still be helpful. Hoarding can't truly be fixed until the root of the problem is found and addressed.

For some people, medications that treat anxiety and depression may also be able to help with hoarding disorder.

Above all, be empathetic.

Try to understand where your older adult is coming from and listen to what they have to say as you gently guide them towards recovery.

Hoarding in seniors is dangerous

When older adults hang on to a lot more stuff than they need and insist on living in extremely cluttered spaces, they may be hoarders.

If your senior is showing this behavior, you're probably worried – for good reason!

Hoarding causes physical dangers like increased fall risk, blocking emergency workers from reaching your senior, and unsanitary living conditions. It could also be a sign of a serious condition like Alzheimer's or dementia.

What is hoarding?

Hoarding is when someone compulsively buys and saves objects even though they have so many belongings that they're creating health and safety issues in their home.

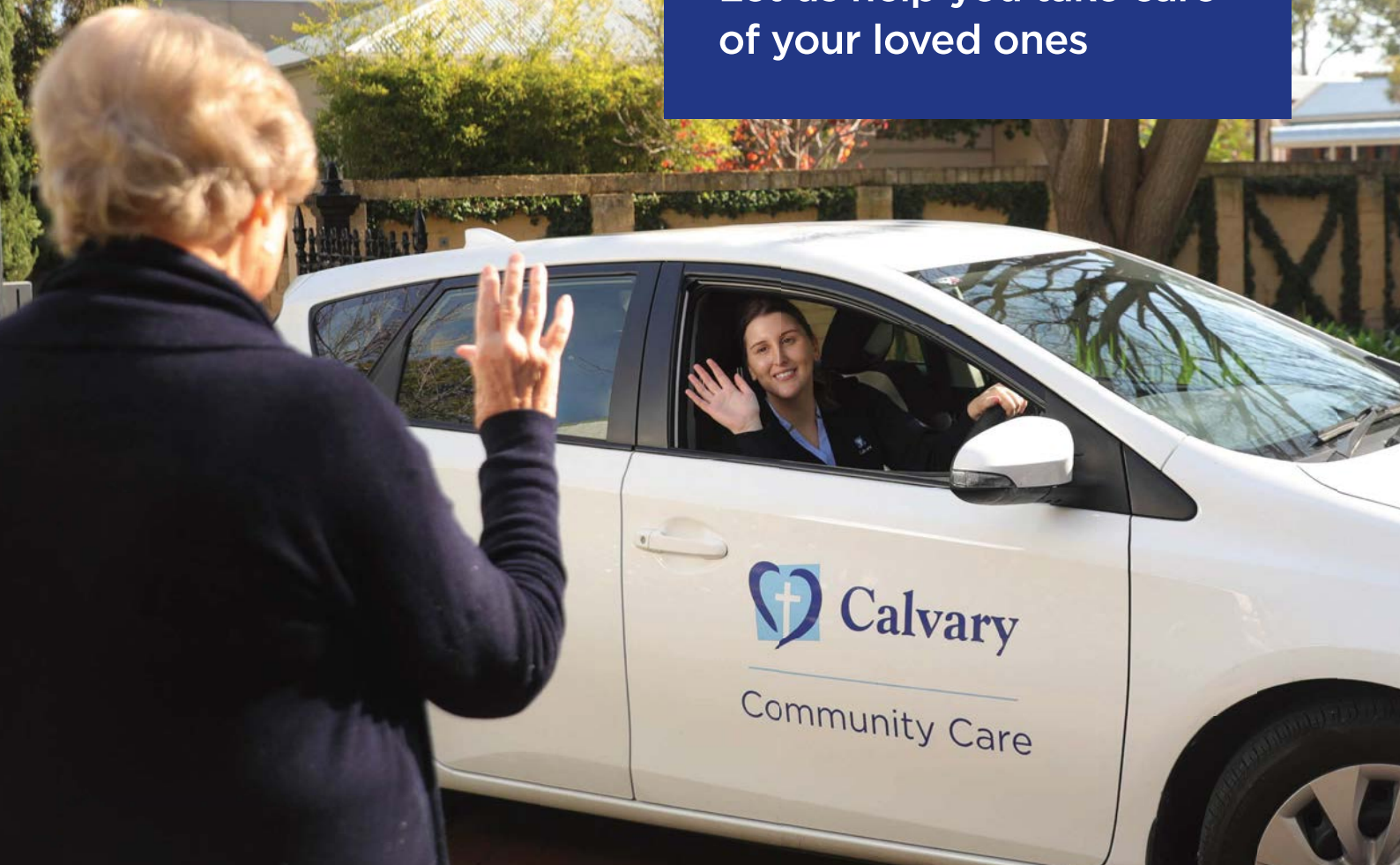
Seniors who are hoarders resist your attempts to get rid of anything and often say their possessions are:





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Hoarding health risks and dangers

Hoarding results in serious side effects for older adults, including:

Preventing emergency care – firefighters or emergency medical technicians (EMTs) may not be able to get through the house to reach them

Causing physical danger – increased risk of falls or not being able to move around due to the extreme clutter

Refusing home help – won’t allow anyone into their home (usually due to embarrassment or fear of their stuff being disturbed), this negatively affects their nutrition, hygiene, and medication

Producing unsanitary conditions – spoiled food leads to pests and foodborne illness

Creating fire hazards – piles of old papers, newspapers, or magazines can easily go up in flames

What causes the hoarding behavior?

Right now, the cause of hoarding isn’t clear. Doctors and psychologists think that hoarding could be a sign that someone has dementia, other cognitive disorders, or a mental illness like OCD, depression, or anxiety. Other triggers include living alone for long periods of time without social interaction, lack of cognitive stimulation, or a traumatic event.

Another possibility is something called Diogenes syndrome, which can be brought on by dementia or frontal lobe impairment. Someone with this syndrome shows extreme self-neglect, domestic squalor, social withdrawal, apathy, compulsive hoarding of trash, and lack of shame. **ACG**

3 tips to help seniors who are hoarders

1 Visit the doctor

Because hoarding is connected to health conditions or mental health issues, it’s likely that your older adult will need professional help. Having their doctor do a full evaluation will help figure out if the behavior is caused by dementia or other medical conditions.

2 Consider therapy

If the issue isn’t related to a medical condition, therapy (sometimes in combination with medication) is a way to help seniors manage their hoarding behavior

3 Encourage them to declutter with kindness and compassion

- ▶ Be patient and compassionate and go slowly
- ▶ Break down the task into clearing small areas or rooms over time rather than trying to tackle everything at once
- ▶ Treat even small steps as a victory – throwing away one or two items could be a major event for your senior
- ▶ Start by getting rid of a small portion of a larger collection to show your senior that they’re capable of letting go of things.

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Managing Family Dynamics

by Jolene Hill - YourLifeTalks.com

As a carer you provide reassurance and physical support for the person in your care. You know their wishes and concerns, and can assist the health professionals to make life as comfortable and enjoyable as possible.

However, you may experience resentment from family members, and even have your relationships fall apart due to disagreements about care. Arguments can develop over issues such as the sharing of responsibility for care, the type of care provided, financial decisions and emotional flare ups.

Here are some tips that may help you maintain the family bonds.

Sole Carer Stress

If you are the primary carer for a family member, the stress of managing your responsibilities can sometimes cause resentment and a feeling of injustice.

This is a common response to feel this way, and you should not feel guilty for being emotional at a challenging time. You may feel this way even when you enjoy your caring role and feel privileged to be their carer.

These feelings may negatively impact on

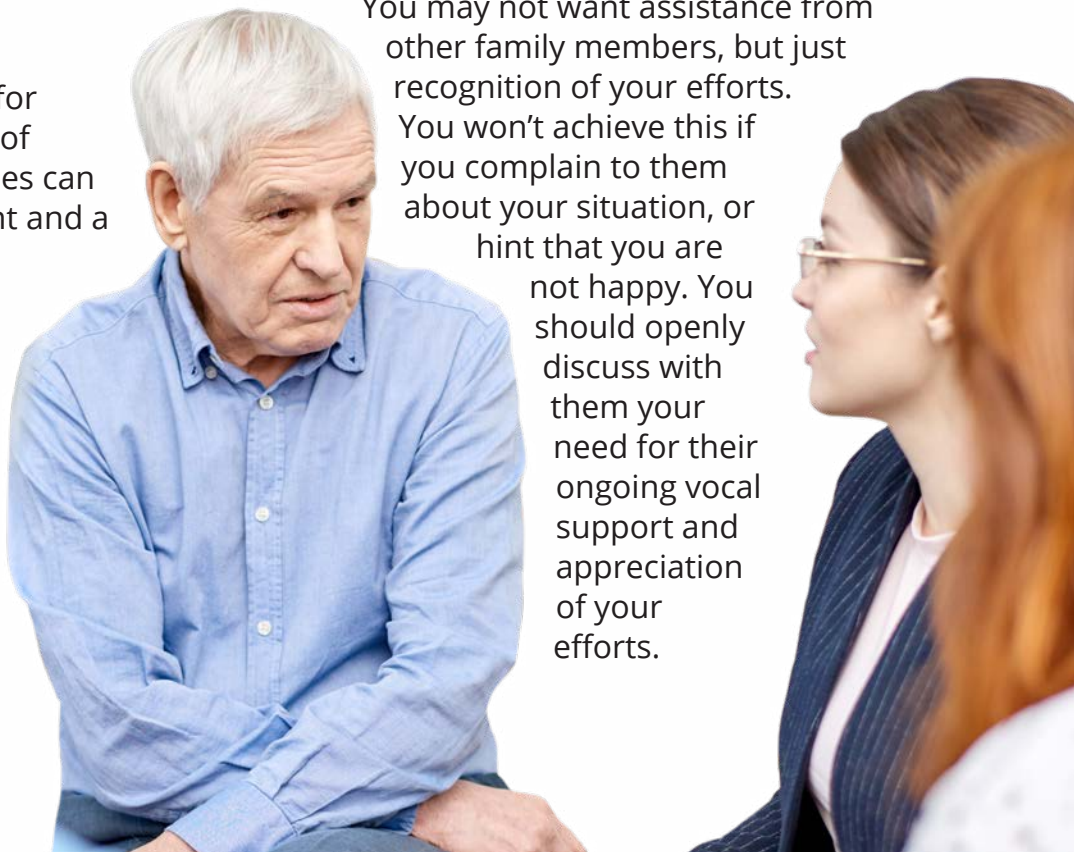
relationships with family members.

If you feel that the burden of care has become too stressful, then you need to seek further assistance. It is important for your own wellbeing and the care recipient.

This may mean that a family meeting is needed to discuss sharing the caring responsibilities. If this is not practical, you may want to engage an outside care service.

You may not want assistance from other family members, but just recognition of your efforts.

You won't achieve this if you complain to them about your situation, or hint that you are not happy. You should openly discuss with them your need for their ongoing vocal support and appreciation of your efforts.



Family members are often surprised at this type of request, as they had wrongly assumed the carer would intuitively know their feelings of gratitude and indebtedness.

They may happily express their sentiments when asked, and this is a good way to strengthen the bonds between you.

Who takes responsibility for the care of a family member?

However, if you don't get the responses you were hoping for from family members, you can be content knowing you are doing the right thing and will share many treasured moments with the person in your care.

Sharing the Carer Role

The most common factor for disagreements is the question of "who takes responsibility for the care of a family member". It may be that all the family members want to be included in the caring role, but not all of them have the time or ability to be of assistance. If one person is perceived as having more free time, they may be expected to take on the majority of the caring role. However, this is not a reasonable or fair assumption, and it doesn't necessarily mean they are able to devote more time to caring.

Everyone has different commitments and priorities, and the challenge is to share the care responsibilities in an equitable manner.

Of course, this is not always an easy task, and the solution is open and direct communication.

A family meeting with an agenda to set up a care team is an ideal way to clearly establish

and share out caring duties. It is a good idea to list all of the caring requirements and to distinguish between practical and emotional support, before discussing individual roles. This will assist with assigning roles that match each person's strengths.

It is important, if possible, that you respect the wishes of the person receiving the care. Matters of independence (not being a burden), preferred care options and planned activities should be taken into consideration.

A number of factors to also take into account include differences in locations, work and family commitments and if a roster system is preferable. You will also need to discuss if you wish to engage professional care services to supplement the care being provided by the family.

Strained Family Relationships

Providing care for someone can be a stressful and emotional time, and family dynamics can suffer as a result. Uncertainty and fear of what the future holds, can cause anxiety and unreasonable responses to daily pressures. This can make it difficult to maintain healthy and balanced relationships.



Family members may disagree with care choices, and this can lead to them feeling upset or frustrated. It may be the case, that they can't disassociate from old patterns of childhood hierarchies. Or it may be that past rivalries and grievances come to the surface.



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This can be a difficult time for all involved, but it shouldn't result in ruining relationships within the family. Everyone needs to be mindful of the effect that family squabbles may have on the person receiving the care.

It would be beneficial to remind family members that it is not the time to try to solve long standing issues. They may need to put their ego aside and make allowances for their differences, to provide the best care outcomes for everyone involved.

A useful approach can be to allow each person to express their thoughts and feelings on the care topics to be discussed, without any interruptions. However, it may be necessary to firstly agree on boundaries of what can, and what cannot be discussed to prevent any escalation of disagreements.

Be prepared that tensions may arise, so it is important to ask that everyone be calm and reasoned, and focus on keeping the family together.

Agreeing on short breaks to give people some breathing space and time to gather their thoughts is a good tactic.

A positive outcome would be that all family members agree on their respective care responsibilities. However, this can all be a very tall order in some families. It may be necessary to seek assistance from a social services agency to provide mediation to settle disagreements and strengthen communication.

Clear Communication

Ineffective communication can be a major factor in tense relationships. If you are having difficulty communicating with a family member, you should consider:

- ▶ Be an active listener and exercise patience by waiting for your family member to finish expressing their thoughts before responding to them

- ▶ Active listening also involves non-verbal communications including the tone of your voice, facial expressions, eye contact, silence and body posture. So be aware of the non-verbal signals you could be sending.
- ▶ Avoid using an angry tone or raising your voice
- ▶ Use tact when discussing difficult subjects, but do not avoid them as this may lead to future stress



- ▶ Take into consideration the other person's feelings and current emotional state, and save difficult conversations for when they are feeling well, rather than when they are under stress, tired or upset
- ▶ Try sharing your feelings with a close friend or relative or is removed from the inner family circle, and can provide a different perspective

Schedule Respite Time

The constant workload of being a carer can lead to feeling exhausted and overburdened, and can affect your relationship with others in your family.

Giving yourself a break can help to reduce your feelings of isolation and burnout, and provide space to collect your thoughts and emotions. It may be that you have a favourite activity or hobby that gives you

enjoyment, but you have not been able to find the time to participate. Or it may be that you would gain the most benefit from simply being able to relax.

Try asking a family member or friend to take over the caring role while you take a break. There are also services available to support carers seeking respite.

Support for Carers

Whilst taking on the role of being a full-time carer for someone can be very rewarding, it can sometimes result in feelings of isolation, loneliness and strained family relationships. It may be difficult for you to go outside the home to socialise, and family and friends may start to visit less often.

It can be helpful to share your experiences with someone you feel you can comfortably discuss your concerns – family, friends, neighbours or especially other carers or health professionals, who may be in a better position to understand and empathise with your situation.

Support Services & Professional

Counselling – These services can help you to better manage and understand your situation – particularly relating to relationships and improving behaviours that can be a large part of being a carer.

Support Services and professional counselling may include the following:

- ▶ Short-term psychological and emotional support
- ▶ Guidance in your relationship with the person in your care and family members
- ▶ Advice to assist you to better manage challenging behaviours and situations
- ▶ Information to help protect your rights as a carer

There is a range of qualified professional counsellors that provide these services, depending on the type of support you need.



There are also specialist carer information and advice services to support you in your role. These services will help you with information about:

- ▶ Accessing independent carer advocacy services
- ▶ Making decisions concerning your caring role
- ▶ Planning appropriately for things such as respite care or short-term care.

In the majority of cases, support services and counselling are delivered to you in a wide variety of community settings. However, a small number of services may only be available via 'phone counselling'.

Carer Support Groups – Carer support groups offer a safe place to talk about your role and experiences as a carer, and discuss your concerns and frustrations with others who are experiencing similar challenges. They can put you in contact with other carers who may be experiencing similar concerns as you, so you can share suggestions and advice to support each other.

Using this type of assistance can reduce the stress you may be experiencing in dealing with strained family relationships, and may even lead you to successfully continue in your caring role for much longer than you first thought possible. **ACG**

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today or call **1800 422 737**.



An Australian Government Initiative

30 years 30 stories

“ I became a carer overnight after a woodshed fire changed my husband’s demeanor. He lost interest in doing things and was making errors. Six months later, he suffered a heart attack and was diagnosed with dementia (Alzheimer’s). ”



Marion’s Story:

A Blessed Life

There were subtle changes: being unable to read the calendar, and when reading the clock his thought process was not clear. The following year, I gave up employment to care for him full time.

The diagnosis was a shock. We both felt so many emotions. I felt hopeless not knowing

what to do. I knew I was losing Fred, but I was unable to prevent this from happening. There was no operation, no wound so it is difficult to understand what had happened. It has been interesting to see the reactions of other people as it is a very misunderstood disease.

We were both fiercely independent and were not used to seeking outside assistance. We made the most of our time together. We were fortunate as we had a great doctor who was both understanding and knowledgeable.

I never thought of myself as a carer but soon realised I needed help as my role was changing from wife to doctor, to nurse, to dentist, podiatrist, physiotherapist, counsellor, cook, cleaner, general handy person and sometimes clairvoyant – Fred had never experienced pain, so was unable to explain it, particularly when they ask on a scale of 1 to 10.

Due to a lack of local assistance, I started a Carers Support Group. I wrote to the Health Minister, contacted the Aged Care Commissioner and Aged Care Complaints. Yes, I was now also an advocate for the person I cared for.

Once you have a diagnosis:

- 1 Recognise that you are a carer.
- 2 My Aged Care is your first contact (after the doctor and any specialists).
- 3 ACAT (Aged Care Assessment Team) will contact you to discuss your needs.
- 4 Get your personal affairs in order (both of you).
- 5 Seek financial assistance from Centrelink if needed.
- 6 Do any travelling or things you had put off.

7 Do any modifications to your house, or downsize if necessary.

8 Seek assistance, make use of services. If not offered, ask!

9 If in doubt, ask questions (there are no silly questions).

10 Don't say NO. Accept both social invitations and assistance graciously!

11 Make use of services provided (home care, respite, cleaning, outings).

12 If you are the carer, in addition to caring for your loved one, ensure that you care for yourself. Take some time out!

I remember we were sitting in our lounge together looking towards Mt Baw Baw, and Fred said to me, "I've had a blessed life." What a beautiful end to a life well lived.

To show your support for carers like Marion, become a member of Carers Victoria. Visit <https://www.carersvictoria.org.au/about-us/our-membership> to sign up today. Membership is free for individual carer members and supporters.

Read more carer stories from Carers Victoria's '30 Years, 30 Stories' campaign by visiting: www.carersvictoria.org.au/news-and-stories/truly-incredible-carers.

ACG



making life better for carers

30 years 30 stories

In June 2021, Carers Victoria's statewide digital campaign 'Truly Incredible Care' won Gold at the PR Asia Awards in the cause related 'Public Awareness' category. The awards celebrate the most outstanding, inspired and successful campaigns in the Asia-Pacific region.

The aim of the campaign was to raise awareness about the enormous contribution that carers make to our community, thank them for the incredible care they provide and create a movement of people who care deeply about unpaid carers. The campaign received over 1 million video views and had a total PR reach of 48 million people via 624 pieces of coverage across print, online, TV and social media.

Building on the success of the campaign, we will be launching phase two during National Carers Week from 16 to 22 October 2022: '30 Years, 30 Stories'. Over the course of the year we will be sharing 30 unique carer stories that showcase the breath and depth of the caring experience.



Julie and Darcy featured in Carers Victoria's 'Truly Incredible Care' campaign

This year, Carers Victoria commemorates its 30th anniversary. To celebrate, we'll be sharing 30 carer stories over the course of the year that highlight the diversity of the caring experience.

No one carer story is the same as any other. By sharing the stories we aim to shine a spotlight on the diversity of the caring experience including the myriad challenges that carers face as well as the many moments of joy and pride.



Merrin and her mother featured in Carers Victoria's 'Truly Incredible Care' campaign



Michael and his brother featured in Carers Victoria's 'Truly Incredible Care' campaign

A number of carers have already shared their stories, which can be found by visiting our website: www.carersvictoria.org.au/news-and-stories/truly-incredible-carers.

To find out more about the events being run as part of Carers Victoria's 30th Anniversary celebrations during National Carers Week, visit: www.carersvictoria.org.au/whats-on.

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making
life better
for carers



Join our Caring Community

As the peak body for carers in Victoria, Carers Victoria strives to make carers' lives better. Become a member today to help us make a difference.

Membership is free and open to carers, former carers and supporters. Benefits include:

- › Free digital access to *Australian Carers Guide*;
- › Exclusive invitations to events and workshops;
- › The opportunity to champion the voice of carers;
- › Staying informed with our monthly eBulletin *The Voice*;
- › Special member offers and discounts.

To learn more, scan the QR Code or visit
www.carersvic.com.au/OurMembership



Li-Ve Tasmania presents new resources for carers

Preparing for the end of life is a challenging time. For people with an intellectual disability it can be distressing and confusing; for carers it can be complicated and stressful.

An estimated 668,100 Australians (2.9% of the population) have an intellectual disability. Navigating the disability and health system is complex for the person and their carer. At end of life, these complexities are compounded. Meaningful support for carers and people with disability is urgently needed.

Compared with the rest of the population, people with an intellectual disability die younger. They often have multiple medical conditions, require specialist input, frequent hospital visits, and multiple medications. They experience:

- more than twice the rate of avoidable deaths
- twice the rate of emergency department and hospital admissions
- complex mental health conditions
- diagnostic overshadowing.¹

In response to these health inequities, Li-Ve Tasmania has implemented the Healthy Dying for People with Disability project. The project is designed to:

- provide meaningful support and information for people with intellectual disability and their carers
- enhance the workforce capability of disability and service providers caring for people with a life-limiting condition.

The project achieves this by supporting improved systems, practices, and communication through education and connecting providers.

COMMUNICATING FOR END OF LIFE - A TOOLKIT

Li-Ve Tasmania has launched *Communicating for end of life - a toolkit*. This evidence-based resource is designed to link disability support providers, healthcare providers and services, families and carers. It contains a set of practical tools to build capacity and capability around decision-making, accountability, communication, documentation and coordination at the end of life.

Toolkit resources include:

My Hospital Passport

If a person with an intellectual disability goes into hospital, the passport provides essential information to hospital staff about their health, medication, communication needs, and contact details of their health providers and carers. It incorporates the principles of person-centred care by including what is important to the person, their likes and dislikes, and any details of care that are important to that individual. An easy read version is available so carers and people with an intellectual disability can work together to ensure all the right information is available for hospital staff to provide the best possible care.

Stop and Watch

This tool provides a practical way for disability workers and carers to recognise, report and respond to any changes in a person's health and wellbeing. Using the *Stop and Watch* tool may prevent a hospital admission as it helps the carer to recognise a change of health and wellbeing early and seek health care sooner. An easy read version is also available to empower people with an intellectual disability to be a part of their health care by expressing their health and wellbeing concerns.

Diagnostic overshadowing of people with intellectual disabilities fact sheet

Diagnostic overshadowing is when a health or disability professional inadvertently attributes a person's physical symptoms to an underlying intellectual disability. A direct result of such a misunderstanding is that a physical illness may be underdiagnosed or undertreated, creating the risk of premature death. This tool provides ways to reduce the risk and ways to make reasonable adjustments to care and to avoid diagnostic overshadowing.

Tips for communicating with people with intellectual disability and Top 10 tips for breaking bad news

These tools highlight the importance of respecting the rights of people with intellectual disability. They are designed to help disability workers and health professionals understand the individual communication needs of the people they care for.

ABOUT LI-VE TASMANIA

Li-Ve Tasmania is a leader in disability services, offering flexible and individualised supports to suit the needs of people and their families across Tasmania.

Li-Ve Tasmania has provided genuine person-centred support to Tasmanians living with disability for almost 70 years.

A registered NDIS provider, services include general supports, in-home support, supported independent living, disability accommodation, community access, and transportation and day support programs.

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HEALTHY DYING
FOR PEOPLE WITH DISABILITY

Communicating for end of life – a toolkit and support resources are available at: **livetasmania.org/hd4pwd** or scan the QR code.

The project is funded by the Australian Government Department of Social Services Information Linkages and Capacity Building (ILC) program.



1. Council for Intellectual Disability. *The Health of People with Intellectual Disability*. Commitments sought from Australian political parties. February 2019

Inclusive communication, it's for everybody.



Tips for communicating with people with intellectual disability

Communicating effectively and appropriately with people with intellectual disability is critical to the deliver quality health care. This tip sheet contains some strategies and ideas to strengthen and enable our communication skills.

Be respectful



- ✓ **Treat adults** with intellectual, cognitive or developmental disabilities as adults. Use your regular tone of voice and don't speak down to them.
- ✓ **Body language** is important because people with an intellectual disability often rely on visual cues. Have an upright and open posture, lean in while speaking and listening. Don't fidget.

Focus on the person

- ✓ **Try and have the person's full attention** before you start talking. Use their name and make eye contact.
- ✓ **Eliminate distractions** and minimise background noise if possible.
- ✓ **Give information gradually and clearly** to avoid sensory overload.
- ✓ Only give one or two directions at a time to avoid confusion.
- ✓ Be prepared to **repeat the same information** in a different way if necessary.



Be clear and direct

- ✓ **Give information in writing** as well as verbally if that is the person's preference.
- ✓ **Use specific and direct language.** Don't use abstracts, acronyms, metaphors or puns. When possible, use words that relate to things you both can see.
- ✓ **Give exact instructions.** For example, "You will see the nurse at 10:30," rather than "Come back to see the nurse in 15 minutes." Don't use directional terms such as right, left, east, or west.



Keep it simple

Use simple and easy to understand. Use

The HD4PWD 'Tips for Communicating with people with an intellectual disability' is a tip sheet containing strategies and ideas to help communicate effectively and appropriately with people with an intellectual disability. Strengthening and enabling our ability to deliver quality health care.



SCAN ME

The Healthy Dying for People with Disability (HD4PWD) Program provides meaningful support and information for those people and the community of carers around them.

At HD4PWD we understand that reaching the end of one's life is challenging, and for those with an intellectual disability, it can present a particularly complicated and confusing set of circumstances. To download your FREE toolkit scan the QR code or head to our website.





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Aged Care

Lesley's Caring Role

Lesley Field, 67, has been a carer for her daughter Amy for the last 17 years. Her first-hand experience caring for her daughter with mental ill health has inspired her to help other carers find their own voice.

She says caring is a hard job with long hours, no pay and traditionally no support system.

On top of her caring role for Amy, she has her own health complication. Lesley suffers from a rare disease called bronchiectasis, which is a rare genetic condition where the walls of the bronchi are thickened from inflammation and infection along with chronic fatigue. There is no cure for her condition.

She says her responsibility for Amy includes preparing meals, looking after her hygiene, taking her to appointments with GPs and health institutions, navigating support services and meeting loved ones.

Lesley is one of over 80,000 Tasmanian informal carers of a loved one with a disability, mental ill health, chronic or life-limiting condition, alcohol or other drug dependence. In fact, Tasmania's carer ratio is the highest in the nation at 1:6.

Deloitte Access Economics research (2020) states the replacement value in Tasmania is over 2.2 billion if paid professionals were to replace carers.

"It is now easier than ever to get access to carer information, advice and support via Carer Gateway as it has a single website and phone number," Lesley said.

"Carer Gateway service has been invaluable for me as a carer during urgent times. From counselling to workshops, it has helped me play an active role in my caring duties."



"Carer gateway not only supports carers, but the help filters down to the person being cared for."

"It is often hard to navigate social services like Centrelink, My Aged Care but the team at Care2Serve have been able to help me access the right information and department."

"It is much easier than trying to muddle through yourself," Lesley said.

Care2Serve, the service arm of Carers Tasmania, is the Tasmania provider of carer support services through Carer Gateway, an Australian Government initiative developed to provide carers with advice and information and a range of tailored support packages.

Through Carer Gateway, carers can now access vital services, including coordinated support in residential aged care facilities, connection with other carers, advice and information on planning for the future, tailored support packages, free access to counselling and personalised sessions with a specialised carer coach.

"Carer Gateway has made me feel supported in my caring role," Lesley said.

"I recommended anyone who is a friend or family carer caring for someone ill, frail or aged to get on the phone and speak to them. They'll help you with any questions you may have or guide you in the right direction."

If you are in a similar situation and need help with your caring role, contact Carer Gateway. Contact 1800 422 737 (and select 1 from the menu) or check the website at www.carergateway.gov.au

Tasmanian Carer Recognition Bill 2022

Progress is underway on the Tasmanian Carer Recognition Bill 2022. Despite having a higher proportion of carers in comparison to other Australian states or territories, Tasmania has been the last state in Australia to have this important legislation.

Carers Tasmania is hopeful that this Act will further support the routine identification and referral of carers.

The carer recognition legislation and charter was first proposed by the Tasmanian Labor Party in 2019 and was later a commitment of the Tasmanian Liberal Party at the last state election. The Bill was tabled in the House of Assembly on 15 June 2022 and is awaiting parliamentary debate.

Leading up to the draft Bill, Carers Tasmania has undertaken significant consultation throughout the state with carers via surveys, face-to-face consultation, phone consultation and email. Carers Tasmania has contributed two written submissions based on what carers said about the Bill.

The draft Bill defines carers and provides a charter consisting of seven principles that

aim to acknowledge, recognise, and value the significant contributions and specific needs of carers.

Carers often report feeling invisible and that their knowledge about the people they care for is not listened to or taken seriously. Carers Tasmania is hopeful that the draft Bill will encourage service providers, government and community members to better value and respect carers and to hear their feedback.

Carers Tasmania applauds the progress on the Bill, but it hopes further amendments will be made to the wording of the carer definition and ensure formal mechanism for consulting carers and reporting of parliament on activities to enhance the position of carers in the state will be achieved. Carers Tasmania also hopes that Parliament will strengthen the charter into a suite of carer rights.



National Carers Week – 16–22 October



Jean Kittson is widely known for being an actor, performer and writer. What many don't know is that she is also a carer for her parents.

Jean will be in Hobart as a special guest of Carer Gateway to celebrate National Carers Week at a special morning tea for carers and invited guests – 18th October.

COPIES OF JEAN'S BOOK WILL BE GIVEN TO ATTENDEES IN THE NATIONAL CARERS WEEK MORNING TEA.

Aged Care Reform

As the new Minister for Aged Care and Sport, my vision is to create an aged care system that is better for all. One where carers and workers are supported and recognised for the invaluable work they do every day, and providers and Government deliver better care and services to older Australians.



**Meet the new Minister for
Aged Care and Sport
– The Hon Anika Wells MP**



Australian Government
**Department of Health
and Aged Care**

AGED CARE PRIORITIES & COMMITMENTS

We went to the election with a plan for aged care, which will see:

- ▶ a registered nurse in every aged care facility on site, 24 hours a day, 7 days a week
- ▶ mandating every Australian in aged care receive 215 minutes of care per day
- ▶ a pay rise for aged care workers
- ▶ better food for residents
- ▶ an increase in transparency and accountability for how tax-payer dollars are spent.

I want to give Australians hope the future of aged care is better. There have already been improvements. But there is still a lot of work to do to get to the aged care future we want in this country. This kind of work takes time.

We know that there are many people who have been part of the care and support sector in Australia who have left because remuneration and conditions are not good enough.

Our submission for a deserved pay-rise for aged care workers will be submitted to the Fair Work Commission on August 8 and we are committed to delivering the pay rise the Commission decides.

We want to lift wages, so people come back to the sector.

We want ambition for aged care. We want people to feel safe and rewarded in the aged care sector.

Quarterly Updates

I want everyone to know that aged care is absolutely a priority for me.

Together we can build a better system of care in Australia.

TREATING OLDER AUSTRALIANS WITH THE RESPECT THEY DESERVE

The Royal Commission into Aged Care Quality and Safety final report challenges the Australian Government to create better aged care services and a better standard of care for older Australians.

The Government is committed to meeting this challenge and making changes to aged care to deliver security, dignity, quality, and humanity for every older Australian across our aged care system.

We all have an obligation – Government, older Australians, their families and carers, workers, providers and policy advocates – to work together and do everything we can to achieve a better aged care system.

Below is an overview of some of the changes we are making to improve aged care in Australia.

IMPROVING HOME CARE PACKAGES

Increasingly, Australians want to age in their own homes and in their own communities, which is why home care packages are so important.

As part of the Government's commitment to improving transparency and accountability in the sector, we will put a cap on the amount home care providers are able to charge for administration and management services.

In addition, people receiving home care services will know where their money is going through improved monthly statements.

The Government will continue to work on reforms in the



home care sector that improve the aged care system for all older Australians.

BETTER PAY FOR WORKERS

In addition to the challenges we face in growing our workforce, many in the sector are stretched thin having cared for older Australians throughout the pandemic.

The Fair Work Commission has given permission for the Government to submit a case supporting a pay rise for aged care workers. We are working swiftly to finalise our submission aiming to attract and retain skilled and compassionate workers in the aged care sector.

FOOD AND NUTRITION IN RESIDENTIAL AGED CARE

The Government is working with the aged care sector to strengthen accountability for food and nutrition in residential aged care.

We're developing an aged care standard for food and nutrition, strengthening the reporting requirements and building capability by investing in sector education.

Some new measures to increase the quality of life for older Australians in residential aged care include:

- ▶ working with industry leaders
- ▶ continuing the funding increase of \$10 per resident by per day by including the basic daily fee supplement into the ongoing funding arrangements for residential aged care providers
- ▶ collecting quality indicators where food has an impact, including unplanned weight loss, pressure injuries and falls and major injury
- ▶ consumer interviews which will see up to 20% of consumers asked "do you like the food here" with the results published on the Star Rating system.

AGED CARE ADVOCATES

The Aged Care Council of Elders, established as part of the aged care reforms, play a critical role in making sure older Australians have input into shaping aged care. The Council is a voice for older Australians to Government about ageing and aged care reform.

One Council member shares their thoughts about what needs to change in aged care:

Meet Danijela Hlis, a member of the inaugural Council of Elders, and a dementia carer and author.

'Aged care providers and health professionals need to be able to work with people from other cultures. People's lives are at risk otherwise.'

Over the last year, I have been interpreting for some of my friends who have delirium or other health problems that saw them leave their home in an ambulance for the hospital.

By mistake, two of them ended up in dementia care where they didn't belong. In all cases, interpreters were not called because of COVID, or other excuses; not even telephone interpreters were arranged.

Wherever I could, I used my French, Italian, Slovenian, Spanish and Croatian to help the professionals get diagnoses in place, and I took bicultural posters and communication cards to them so they could at least communicate a little bit.

We need a legal requirement imposed on all aged care providers and health professionals, to call an interpreter whenever the communication between them and the client is not possible.

It should be in legislation to have interpreters, translated materials, and mandatory training in diverse and specialised care.

I will continue to ask for inclusion and respect for diversity in aged care.

ACCESS TRANSLATING AND INTERPRETING SERVICES

The Australian Government covers the cost of TIS National interpreting services for approved providers of Government-subsidised aged care. This funding aims to support providers to engage interpreters for all discussions with current and prospective service users to discuss care needs, fees, care plans and budgets, and for their care recipients to participate more fully in daily social and cultural activities. Visit **health.gov.au** for information about eligibility.

Sign language interpreting for Australian Government-subsidised aged care services is also available. Visit **health.gov.au** for more information.

My Aged Care can connect Aboriginal and Torres Strait Islander people



to an Indigenous interpreting service to provide aged care information in a person's preferred language. To access an Indigenous interpreter, call My Aged Care on **1800 200 422** and ask for an interpreter in your client's preferred language.

The Australian Government is supporting eligible aged care providers to better communicate with their recipients in their chosen language by providing free translating of their business information. This includes welcome material, signage, feedback forms, non-personal documents.

Visit **diversityagedcare.health.gov.au** to request this service.

If you are receiving care, you can get immediate phone interpreting through TIS National for the cost of a local call on **131 450**, 24 hours a day, every day of the year or visit **tisnational.gov.au** to book an interpreter.

TALK TO AN AGED CARE SPECIALIST OFFICER FACE-TO-FACE

An **Aged Care Specialist Officer (ACS)** can help you with your aged care matters, including:

- ▶ providing in-depth information on the different types of aged care services
- ▶ checking if you're eligible for government-funded services and making a referral for an aged care assessment
- ▶ helping you appoint a representative for My Aged Care
- ▶ providing financial information about aged care services
- ▶ connecting you to local support services.

You can book a free face-to-face appointment with an ACSO in 69 locations across Australia by phoning the Services Australia Aged Care line on **1800 227 475**.

GET INVOLVED

If you care for or work with older Australians, we want your input on a range of projects being delivered as part of the aged care reforms.

We invite older Australians, families and carers, aged care providers and staff, researchers, experts, and stakeholders to help us design changes to aged care, which will benefit all Australians.

Activities where we'd like your input include: surveys, discussion papers, webinars, workshops. Here are some upcoming activities where you can talk to us about the aged care reforms:

- ▶ **15–16 September 2022**
Brisbane Carers Expo
Department of Health and Aged Care booth
Brisbane Convention and Exhibition Centre
- ▶ **13–14 October 2022**
Carers WA Conference
Department of Health and Aged Care in Plenary Panel Discussion Group
Perth Convention and Exhibition Centre

REGISTER FOR UPDATES

Find out more and get involved with the aged care reforms through the Aged Care Engagement Hub.

You can register for updates and participate in engagement activities. You can also provide feedback over the phone, or have information posted to you.

To visit the hub go to:

agedcareengagement.health.gov.au

or call **1800 200 422**

(My Aged Care free-call phone line)
to find out more.

STAY UP TO DATE WITH AGED CARE NEWS

Subscribe to the "Your Aged Care Update" at **health.gov.au/aged-care-newsletter-subscribe**

You can stay up to date with how our engagement activities are helping shape the reforms on the 'What we've heard' blog:

agedcareengagement.health.gov.au/blog

by Aged Care Group
Australian Government Department of Health and Aged Care



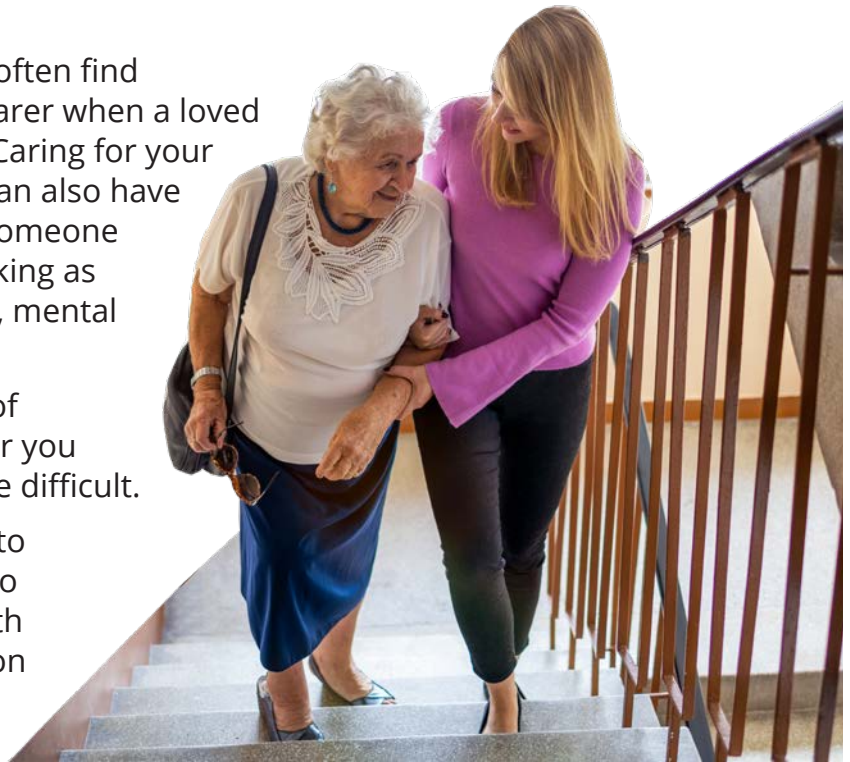


Dementia Support for families and carers

Family members and friends often find themselves in the role of a carer when a loved one is living with dementia. Caring for your loved one can be rewarding and can also have its tougher days. As you care for someone with dementia, you may not be taking as much care of your own emotional, mental or physical wellbeing.

It is important that you take care of yourself or the demands may wear you down which can make caring more difficult.

You need support and assistance to care for someone with dementia to continue balancing your needs with those of your family and the person with dementia.



Things to remember

YOU ARE NOT ALONE

There are a large number of carer support groups throughout Australia. Many people find comfort and practical assistance by attending these meetings with others who know what it is like to care for a person with dementia.

Support groups bring together families, carers and friends of people with dementia under the guidance of a group facilitator. The facilitator is usually a health professional or someone with first-hand experience of caring for a person with dementia.

Contact the National Dementia Helpline on **1800 100 500** for further information.

MANAGING STRESS

Everyone has different ways to manage stress. Managing stress improves your wellbeing and may positively impact on your caring role, so it can be useful to learn some better ways to deal with stress. The Dementia Australia library can assist you in selecting appropriate material on different ways to manage stress. Browse the catalogue online **dementia.org.au/library** and contact the nearest library to ask about borrowing and other library services or call the National Dementia Helpline on 1800 100 500.

What to try:

- A consistent schedule
- Talk things over with family, friends and other people in a similar situation

- Be realistic about what you can expect of yourself and your loved one living with dementia.

GETTING OUT AND ABOUT

It is very important to continue with activities that you enjoy. Some people say that they feel guilty when they leave the house or enjoy an activity without the person with dementia. However, families and carers have the right to follow their own interests outside their caring role. In fact, it is essential that they do. Someone who has regular breaks will be a better carer. The person living with dementia may also need a break from their carer so some time apart can be of benefit to everyone.

If you are having trouble coping with feelings of guilt about getting out and about, it may be a good idea to talk these feelings over with a supportive friend or relative, or a counsellor at Dementia Australia.



ASKING FOR HELP

Taking care of yourself means asking for assistance now, as well as planning ahead for what help you may need in the future. Help often, but not always, comes from relatives, friends and neighbours. Seeking outside help is important for people. Doctors, psychologists and counsellors all have experience helping people who are caring for others.

WHAT TO TRY:

- Suggest specific ways that friends and family can help
- Organise regular breaks for yourself
- Use Dementia Australia and other support organisation services

FRIENDS AND RELATIVES

Caring for someone with dementia can be made more difficult by a lack of understanding from other people. Helping friends and relatives understand what is happening will make your role easier.

WHAT TO TRY:

- Provide information about dementia
- Suggest activities for the visit such as going for a walk
- Prepare visitors for any problems with communication and suggest ways that they might deal with these

WHO CAN HELP?

Contact the National Dementia Helpline on **1800 100 500**. An interpreter service is available and the Helpline operates 24 hours a day, seven days a week, 365 days a year. More information at **dementia.org.au/helpline**

The Australian Government has established My Aged Care as a national online and phone service to assist older people, their families and carers, to access information about the types of aged care services available, to determine eligibility for services, obtain referrals to service providers, and to determine any costs involved. For more information, call **1800 200 422** or visit **myagedcare.gov.au**

For information and support for people under 65, contact the National Disability Insurance Scheme on **1800 800 110** or visit **ndis.gov.au**

If you need help finding the right advice, services and support, including respite, you can call the Carer Gateway on 1800 422 737 or view online information at **carergateway.gov.au**. Carer services in each state and territory are provided by Carers Australia, **carersaustralia.com.au** will link you to the service in your area or call **1800 242 636**.

The Dementia Behaviour Management Advisory Service (DBMAS) is a national free service funded by the Australian Government. It is operated and administered by Dementia Support Australia (DSA). For more information about DBMAS visit their website dementia.com.au, or call **1800 699 799**. **ACG**



7 Planning steps for better retirement planning

By Aidan McKendrick

1 Prepare not just one, but two budgets.

One is for your remaining years of working, and the other is for when you have retired. In thinking and dreaming about how you want to live in your retirement, you can start to prepare and budget for it now. This will give you a better understanding of your finances and give you a goal to work toward.

2 Project your income.

You need to understand and project your income in your retirement. Knowing how much you will have each month will ground your expectations and give you a chance to organise housing, transportation and future activities. Be realistic, and think about potential unexpected costs and medical expenses.

3 Think about your long-term care needs.

A tough as it is, there is a high chance that you or your partner will need to move to a long-term care home of some kind. Costs can quickly add up, and there are many options to consider. Think about your preferences and alternatives ahead of time.

4 Pay off your debt.

While having a lot of money in your savings account feels nice, it's more practical to use that money to pay off your debts. Try to free-up more money for the future and get advice regarding smart investment options. Once your debt has gone, there will be one less expense on your plate. Focus on maxing out your superannuation contributions and other investments that your financial advisor may suggest. Keep charge-card balances paid off.

5 Seek other sources of income.

Regardless of what you did for a career, you might want or need to keep working. Take an inventory of the skills you have collected over time. You can put those to use in helping your son or daughter's business, acting as a mentor or becoming a bookkeeper or the neighbourhood's handyman.

This will not only give you a little more cash in your pocket, but will also help you keep you active in the community and give you a more gradual transition into retirement.

6 Talk about it.

Being open, securing advice and discussing your options with family and friends is all part of the retirement process, even if you'd like to keep specific financial matters more private.

7 Keep your paperwork in order.

Simplify your filing systems, decrease clutter, and organise your paperwork and documents such as your will and power of attorney. You never know which piece of information you or your loved one might need in a hurry, so give yourself peace of mind by knowing that everything is in order. **ACG**

Overwhelmed About Aged Care?



SEGUE
your financial direction

"How do we even know where to start?"

"Can we afford it?"

"It's really complicated... How do we get everyone to agree?"

"How do we make sure our loved one is well cared for?"

At Segue we help families plan for and understand the complexities of the aged care experience.

Call us on 03 9509 1599 or visit www.segueagedcare.com.au



Fix the *Aged Care* CRISIS



BY RACHEL LANE
FROM AGED CARE GURUS

During the election campaign the Albanese government promised to “fix the aged care crisis”

During the election campaign the Albanese government promised to “fix the aged care crisis” and in the first weeks of the new government they have introduced two bills, one of those bills has already passed, and they have ordered a review of aged care regulator. Prime Minister, Anthony Albanese, said *“We are wasting no time getting on with the job with fixing the aged care system.”*

The first bill, The Aged Care Amendment (Implementing Care Reform) Bill 2022 seeks to legislate many of Labor’s election promises. It will mandate a registered nurse to be on-site at an aged care home 24 hours a day, 7 days a week. The bill will also introduce reporting requirements to address the “lack of accountability and transparency” identified by the Aged Care Royal Commission.

The measures include publication of how much aged care providers spend on care, nursing, food, administration and profits, the levels of care time provided and details of key personnel/staffing.

This bill will also enable the government to cap management and administration fees charged by home care package providers.

Minister for Aged Care, Anika Wells, said *“This legislation demonstrates our commitment to making public what aged care providers are spending their money on, ensuring a fair and transparent system for our older Australians and their families and carers.”*

The second bill, The Aged Care and Other Legislation Amendment (Royal Commission Response) Bill 2022 contains 9 measures that seek to address



14 recommendations of the royal commission on measures including: a new residential funding model to commence from October, a star ratings system which will see The Department of Health and Aged Care publish a comparison for each aged care home by the end of the year and a new code of conduct for providers, their workforce and governing persons, greater government oversight on the use of Refundable Accommodation Deposits (RAD’s) and extending the period of liability for operators and key personnel who misuse RAD’s prior to an insolvency event.

Minister Wells said *“Publishing Star Ratings for residential aged care homes will help people meaningfully compare services to make the right choice for themselves or their loved ones.”*

The review of the regulator, The Aged Care Quality and Safety Commission who are charged with protecting and improving the safety, health, wellbeing and quality of life for older Australians receiving aged care services, will examine whether the Commission is “fit for purpose”. The review will consider whether the Commission has the appropriate resources, skills and clinical knowledge to meet its responsibilities and keep older Australians safe.

“Australians told us that quality and safety in aged care is of utmost importance, and the Albanese Labor Government is progressing this review,” Minister Wells said. She went on to say *“The Aged Care Quality and Safety Commission is responsible for protecting and improving the safety, health, wellbeing and quality of life for older Australians receiving funded aged care services. It is critical that the Commission is fit for purpose.”*



The Aged Care Amendment (Implementing Care Reform) Bill 2022 has been referred to the Senate Community Affairs Legislation Committee which is due to provide a report on August 31. The review of the regulator is likely to take longer with the report expected in the first half of 2023. By contrast, the Aged Care and Other Legislation Amendment (Royal Commission Response) Bill 2022 was introduced on 27 July and was passed by both houses on 2 August, lightning speed reform.

The proposed changes will make available information to prospective residents and their families that is not currently disclosed,

information that is important when deciding which aged care home you want to move to and whether or not the price represents good value.

In theory they will deliver more transparency and more care for the price you pay, so you get more bang for your buck.

However, the proposed changes don't address the fundamental financial issues of longer-term funding and the anomalies of the means testing arrangements. Issues that are critical to ensuring older Australians receive quality aged care and contribute to the cost of that care in a way that is fair and affordable. **ACG**



Rachel Lane is the Principal of Aged Care Gurus where she oversees a national network of specialist advisers. She writes regular columns on retirement living and aged care for the Sydney morning Herald, Melbourne's The Age and the Brisbane Times and she often speaks on TV and Radio.

Rachel has co-authored a number of books, including the Best Seller *Aged Care, Who Cares?* and her new book *Downsizing Made Simple*.

All figures are correct as of 1 August 2022

Prime Minister, Anthony Albanese

"We are wasting no time getting on with the job with fixing the aged care system.

"The introduction of this legislation is the first step towards delivering new funding, more staff and better support to the sector, while improving transparency and accountability.

"We are using this first sitting week of the 47th Parliament to take important first steps towards fixing aged care and protecting vulnerable Australians, while addressing the challenges in our economy. "

Minister for Health and Aged Care, Mark Butler

"We're delivering on our commitment to putting nurses back into nursing homes and improve transparency in aged care.

"Every person with a loved one living in residential aged care expects, is the peace of mind in knowing aged care residents have access to clinical care from a qualified, registered nurse when they need it, 24 hours a day, every day."

"This legislation delivers on the Government's major reform agenda to protect the safety, dignity and wellbeing of every older Australian accessing aged care services."



We're Here to Help

The path to entering aged care can be complicated and many people find it difficult to understand. That's why at Respect we now have expertly trained Customer Relationship Consultants that can help to make your journey a lot easier. From help navigating the system, to explanations about your financial options, we are here to help you every step of the way.

Call us on **1300 144 144** to book your in-home consultation today!



Coroneagh Park
Penguin

Eliza Purton
Ulverstone

Mt St Vincent
Ulverstone

Tyler Village
Launceston

St Ann's
Hobart

Wellington Views
Old Beach

Alcheringa
Swan Hill

Avonlea
Nhill

Coates
St Arnaud

Cohuna Village
Cohuna

St John's
Wangaratta

Have we lost the art of caring for the dying?

Most Australians consider talking about death and dying as important however many don't actively think, talk, or prepare for death. Ironically, we plan for other life events: births, weddings, buying a house, a car, taking a holiday – yet many don't plan for dying and death.

Yet we all die.

Have we truly lost the art of caring for the dying? A skill handed down from generation to generation up to the last one hundred years or so where we could now debate that our Western society has created a 'death disconnect' through the introduction of an institutionalised version of dying and death. One where many of us never participate in the care of a dying family member or friend or see a dead person.

For many, our discomfort to talk, or in most cases, even think, about death leaves many struggling to engage in this space and creates a significant barrier to engaging in conversations and actions that benefit end-of-life planning and care.

This disengagement leads to too many people not receiving care at the end of life that reflects their personal choices or wishes, often because they have not purposefully prepared for death or had the important conversations with the people in their lives who mean the most. So, that when important health-care decisions have to be made, and a person is no longer able to communicate their decisions themselves, it is the family – often the primary carer – and the health care team who are left to make important decisions on their behalf.

This creates unimaginable stress and challenges for these 'decision-makers' who may not know what their person wanted in life, and in death.

And even, after death.

Funeral Directors often report that funeral discussions can be emotive where families have not had these discussions with their deceased family member prior to their death. And it is not uncommon for one party to say that the deceased

person wanted to be buried. Only for the other party to say, "No, they wanted to be cremated!." And if the deceased's Will doesn't advise the person's funeral wishes, then the act of decision-making – mixed with the raw experience of grief and loss – can provide a heavily complex and emotive scene.

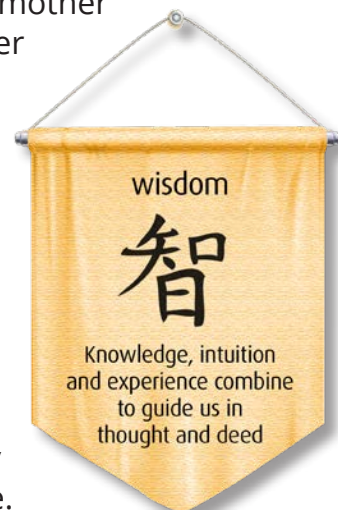
So as carers, it's important to be able to navigate and ask the dying person, what are their end of life wishes. Who and what do they value the most (which may differ significantly from what you assume that to be). What are they willing to sacrifice and not sacrifice along their final end of life journey? And how can you best represent these wishes when they no longer can communicate them or after they have died?

Personally, as a carer I have had to navigate, connect, advocate for and be assertive in getting the answers I wanted when caring for both my ageing parents over the last few years. I am now an adult "orphan" as a friend recently told me. With my mother dying in 2017 and my father dying in May 2022.

And I was very lucky that both of my parents were highly independent in so many ways, prior to their respective health events that led to their deaths. When they could no longer communicate their own wishes, I fiercely became their advocate.

I became their voice expressing their end of life values and wishes that they had communicated to me through earlier conversations and advance care directives. Their gift to me were being the best parents. So, my gift to them, was to be the best daughter, carer and advocate that I could be.

"I asked the tough questions. And kept asking until I was satisfied that I'd received an answer."



Your aged care support service

Free and confidential.
Your side, your say

Do you need help with your home care and aged care costs?

OPAN can provide information and support on a wide range of financial issues, including:

- ★ statements
- ★ understanding fees and charges
- ★ transitioning between packages
- ★ moving to residential care
- ★ extra service fees.

OPAN works for you

- ★ We listen carefully to what you have to say
- ★ We do not talk to other people about you without your permission
- ★ We are independent of the government and your provider
- ★ Our goal is to ensure older people are treated with dignity and respect.

No issue is too big or too small when it comes to your life

Chat with us 1800 700 600

Supported by funding from the Australian Government



To find out more visit
open.pub/carers
or scan the QR code

I interpreted the answers that my parents were given by health professionals who spoke in the 'foreign language' of medical terminology and jargon. When I felt their care needs were being compromised or neglected my voice became strong and assertive. I asked the tough questions. And kept asking until I was satisfied that I'd received an answer.

And importantly, I maintained – where I could – being “their daughter” not assuming the roles of Nurse or End of Life Doula. And I know that the life of many carers is not like this. Their role as mother, father, wife, husband, sister, brother – and so many other roles – is diluted and changed because 24/7 they are supporting their person by themselves, or with limited support from other family, friends and visiting health professionals. And often for long, long periods of time.

Irrespectively, what we all want as carers is for our person – and ourselves – to be well informed, supported and to be treated with dignity and respect at every point of the journey.

Including how our person's body was cared for after death. Something that most of us give very little thought about yet can be hugely important. How our loved one's body is “disposed” of and the rituals and ceremonies that we can undertake both immediately after death, and also in the days, weeks, months and years which follow, all assist us to assimilate our grief.

As a community we need to appreciate that a carer's life changes often. Role changes and anticipatory grief happens long before our person takes their last breath.

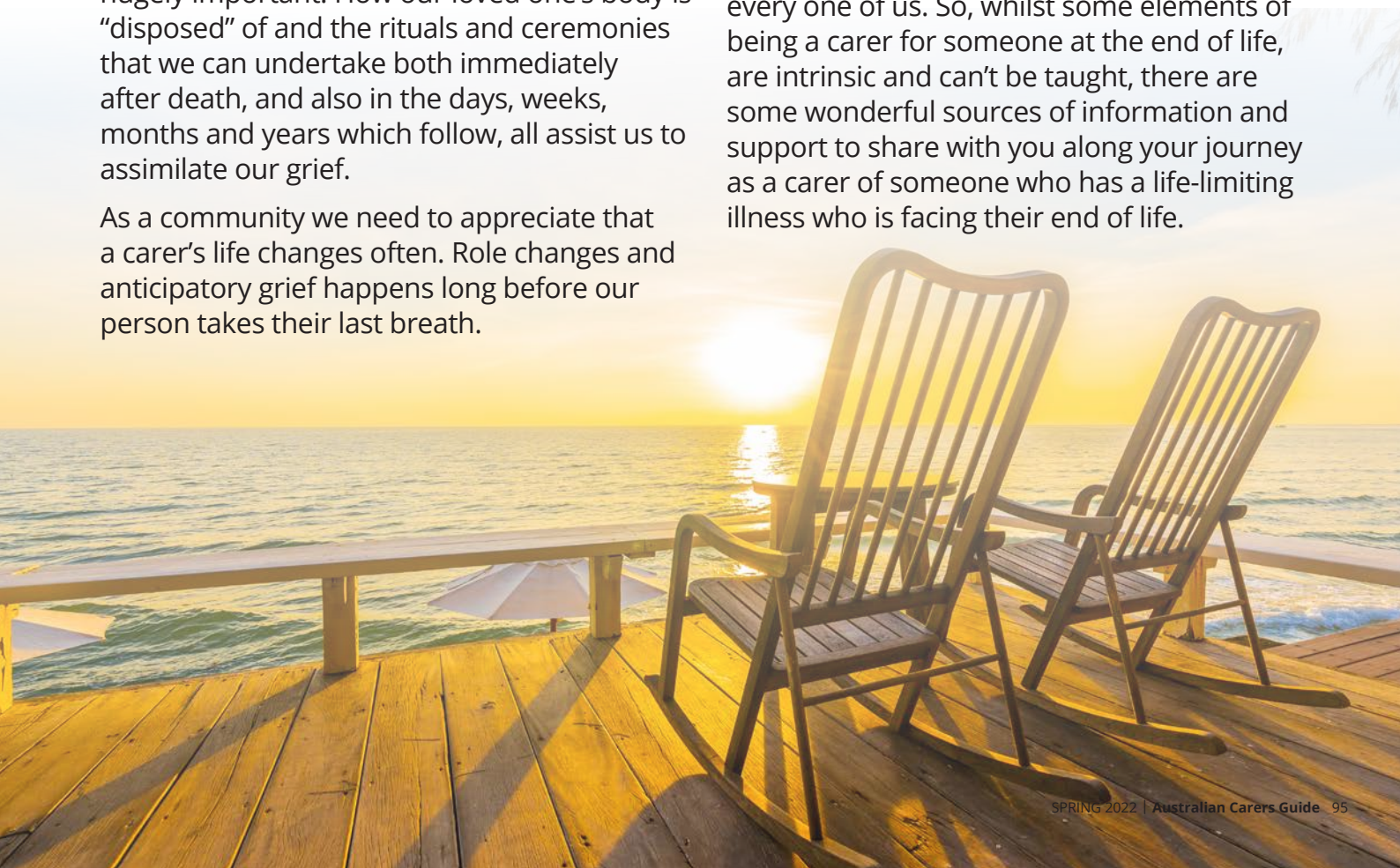
Yet our society is awkward in recognising and supporting these changes. The death of our person changes our lives in many ways and we experience a myriad of emotions along the way from the learnings that we reap from being a carer.

Being a carer of someone who is dying can be intensely emotional, often physically tiring; and stretch our existential self which may range from us feeling a calmness and resolve to one that raises more confronting emotions and questions such as what is my purpose in life? why is this happening? what happens when we die?

Being a carer can be the most complex role we have ever undertaken – And yet one where we can learn more about life than we could ever imagine.

So, along the way, it is important that we as a society and as a community, acknowledge that the service carers provide is invaluable and almost impossible to measure.

As carers, we learn about “good deaths” and “bad deaths” and each of us will have our own interpretation of what that means. Just like the words “quality of life” which means something different to each and every one of us. So, whilst some elements of being a carer for someone at the end of life, are intrinsic and can't be taught, there are some wonderful sources of information and support to share with you along your journey as a carer of someone who has a life-limiting illness who is facing their end of life.



Don't know what to ask?

What questions should our loved ones ask when facing end of life? And what questions can we ask on their behalf? My father gave me "permission" to be his voice and ask specific questions as we sat side by side in the doctor's room, or in the radiation clinic, or in the hospital. Our voices became 'one.' So some helpful questions can be found in Palliative Care Australia's *Asking Questions* <https://palliativecare.org.au/resource/asking-questions/> as well as information about *I'm a Carer* <https://palliativecare.org.au/im-a-carer/> and *I'm a Patient* <https://palliativecare.org.au/im-a-patient/>

I don't know what to expect?

Aptly named, *CarerHelp* also provides a suite of information (modules, videos, factsheets) that guides carers throughout the different stages of caregiving from when death is a possibility to the actual preparing for your person's death, managing symptoms and after death care for yourself. Their Carer Library provides a comprehensive range of information and resources that cover a diversity of themes such as carer support, death and dying, diseases, finances and legal matters, grief and loss, health and wellbeing, home care tips, relationships, services and information and symptoms. Short videos by other carers detailing their own carer experiences; and from health professionals – becomes another avenue for learning for time-poor carers www.carerhelp.com.au.

Jacqui Williams

End of Life Transitions
End of Life Doula, Funeral Celebrant and
facilitator of End of Life Workshops
www.endoflifetransitions.com.au
jacqui@endoflifetransitions.com.au
0402 496 360

end of life transitions



Hard to ask for help and/or receive help?

We often aren't very good in asking for help or accepting help. And "our village" doesn't always know how they can effectively offer help. Whether a person is dying at home or in a hospital or an aged care facility, there is a significant amount of time – approximately 95% – where they are not being supported by a health professional. And it is during this time along the palliative journey, that carers are the foundation of support for their person. But life is complex, geographically distanced, and often carers are multi-juggling caring responsibilities with other family, work commitments, and other aspects of life, so an innovative platform and Apps such as *Gather My Crew* www.gathermycrew.org.au/ can be a unique and easy way of connecting and engaging "a village" of support to lighten your carer role; and a great way for your "village" to be responsive and feel they are valuably contributing.

Other supports for carers, is through registering with the Carer Gateway www.carergateway.gov.au/ which allows carers to access planned and emergency respite, and other services, in addition to having access to their carer counselling service.

Enter the role of the End of Life Doula

These are just a few of the abundant resources out there that are designed to support carers and whilst building competence (skills & knowledge) is very important for carers, we also need to incorporate ways to build confidence. So how can we do this alongside, normalising death and dying? We need to build local *Compassionate Communities*. And this is where the emerging role of the **End of Life Doula** comes into play as a compassionate companion providing emotional, psychological, spiritual, practical and social support with a mantra that no-one dies alone. And in doing so, we can help bring back the art of caring for the dying; whilst being there alongside those who care. **ACG**

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Tips for

sleep-deprived carers

1/3
Australians
aren't getting
enough sleep.
Source: ABS

By Eleanor Silverberg

Sleeping through the night is a luxury for many carers, whether you are tending to a chronically ill and restless spouse or an infant that is frequently up during the wee hours.

Self-monitoring with self-awareness can help you get the sleep you need using the tool of acknowledging, assessing and assisting.

Acknowledge

Sleep is vital for physical and mental well-being. However, you may find yourself becoming sleep deprived if you don't have control over the situation you're living in. For instance, it is impossible to sleep when you are living with a family member who has moderate-stage dementia and who is consistently getting up in the middle of the night to wander away from home.

On the other hand, the loss of sleep may not be due to the care recipient's behaviour at all. Other factors can influence a caregiver's sleep, such as your own physical condition (e.g., arthritis) or side effects from medication. Even when the care recipient is

sleeping well, you may often find yourself tossing and turning with worry.

Assess

If you're not getting the sleep you need, assess the situation so you can become better able to assist. Do this by answering the questions on the next page.

Assist

After assessing, you may come to acknowledge that it is more yourself, rather than the person you are caring for, that is keeping you awake at night. It is worth talking to your doctor if you suspect that you are not sleeping because of your own ill health or because of side effects from medication.

You might also find that you are having difficulty turning off your thoughts. You may be thinking self-sabotaging thoughts such as

"I am never going to get a good night's sleep ever again."

The good news is that you can gain control of this situation by working at turning off your thoughts or changing the thought to "I can help myself get the sleep I need."

Can't sleep? Don't freak!

By remaining calm you will help yourself to gain control and prevent any negative, self-sabotaging thoughts from infesting your mind. Staying calm is restful, which is the next best thing to sleep. While in this relaxed state, try different strategies to lull yourself to sleep, such as breathing exercises or listening to your favourite soothing music. If you do not have a favourite, discover new restful music.

Make your bed the place you sleep or rest – and nothing else. If the fretting and racing thoughts persist, get a handle on them and get out of bed. Pick a fretting space in your home, outside of your bedroom, where you can go to let your thoughts run wild.

Choose a space in which you do not regularly spend time – instead of fretting at the kitchen table, for example, select a place that you rarely occupy. When you are ready to stop and get back to sleep, return to your bed.

In cases where it is the person you are caring for that is keeping you awake at night, is it possible to arrange for a relief person, paid or unpaid, to get up with your family member so that you can sleep? Organising regular shifts, if possible, is optimum. And instead of one night only, make the shift for a few nights in a row.

Getting enough sleep is necessary for you to effectively carry out your carer role.

If there seems to be no end in sight, it may be time to consider different care-plan options such as live-in help or long-term care. If the problem persists and daily coping is challenging, reach out for help. This does not show weakness, but rather is a strength with a reward – sleep. **ACG**

Your own sleep assessment

- Are you losing sleep?
- Is your physical energy affected due to loss of sleep?
- Is your mood affected due to loss of sleep?
- Are you losing sleep due to loss of control of the situation you are living in?
- Is the loss of sleep related to being awakened by the person you are caring for?
- Is the loss of sleep related to a fretful mind full of thoughts that just will not turn off?
- Would getting sleep help your physical and mental well-being?
- In the past, have you made sleep a priority?
- Acknowledging the value of sleep, do you want to make sleep a priority?
- Is your loss of sleep temporary or is there no end in sight?
- Are you going to help yourself to sleep better?
- Are there supports and resources you can use?
- What could help lull you to sleep?



Eleanor Silverberg is the director of Jade Self Development Coaching. She is a social worker, grief specialist, author and speaker.

What is a Power of Attorney and Enduring Guardianship

Written by Rita Merienne with input from
Althea Willis from Hornsby Wills and Probate

And why you may need one sooner rather than later



Having lived through a difficult and emotional situation where our Father's main carer – our sister passed unexpectedly and was the only power of attorney, I know what an emotionally challenging time it is when you don't have the "legals" sorted correctly.

Not for one moment did we think that one of us sisters would pass before Dad, but she did.

She was the main carer so it made sense that she was the only power of attorney, the only one that knew his financial situation and bank accounts.

In a week that we wanted to sit by our darling sister's bedside – holding her hand, brushing her hair and farewelling her my other sister and I couldn't. We had to get Dad to his Solicitor, sort out the new power of attorney, find out where his bank accounts were so we could keep paying his aged care bills.

Dad was legally blind and our sister had taken care of everything for him. Because we were so caught up with the emotional fog of grieving that we didn't notice that my name was spelt wrong – so we had to go back and do it all again.

We don't want anyone else to have to go through the added burden of only having one power of attorney and not having the "legal's sorted. It's the reason I do what I do in the aged care sector.

There are so many things we didn't know. So many times we took the long way instead finding an easy path that I know how important it is to share information about situations that can affect carers and our aged loved ones.

It is why here at Australian Carers Guide we share lived experiences to make the caring journey easier for others.

The following information shines a light on an area we all need to have sorted as soon as possible.

I asked Althea Willis from Hornsby Wills and Probate what was her main piece of advice regarding estate planning. Without hesitation it was "Do It Early"! You never know what is around the corner for you and your aged loved ones.

Estate planning includes all the legal documentation including wills and aged care directives however for this article we are only looking at Power of Attorney and Enduring Guardianship.

By getting these documents sorted early you will:

- Reduce The Great Document Scramble.
- Help your aged loved one get what THEY want for their estate.
- Stop any possible manipulation
- Reduce the emotional fog and stress at a difficult time.

Before we dive into this very meaty topic here are some key points that Althea shared with me about how she approaches estate planning with her clients:

Having conversations with family members so everyone is on the same page.

Knowing where things are all the legal and financial documentation.

Doing it early and review regularly.

Direct instructions from client –usually one to one in a confidential environment.

Assess capacity and no undue influence. Assessment of capacity is very important and a key area of the process, including evidence that you have assessed capacity.

Each person's priorities, family structure are different and it is important for the person preparing the documentation to take the time to understand the client's situation





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POWER OF ATTORNEY (POA)

This document is used for financial and legal issues. It gives the authorised person the power and authority to manage financial and legal issues when you can't. Having a POA in place early is important as you don't know when you need it.

We also suggest you have at least two people authorised as the Power of Attorney, you never know something may happen to one of the signatories as was the case with my family.

Each Australian state and territory allows for the appointment of an enduring power of attorney. However, each jurisdiction has separate and distinct legislation.

The Power of Attorney signatory will need to have several certified true copies of the document as they will need to be given to Centrelink, the bank, utilities, council, the Doctors and any other organisation that requires a copy to allow another person to deal with accounts.

ENDURING GUARDIANSHIP

This document is used for medical and lifestyle issues. The signatories will be making decisions regarding any medical treatment and lifestyle. This can be very challenging and it is important that this signatory is aware of your wishes especially regarding resuscitation wishes.

You can have a different person to the POA, actually it is recommended that you do have different people, however it is important that both know about each other.

It is also important to have two or authorised signatories for this document too.

A few key aspects for both documents are that you can have more than one signatory, cascading, and dictate terms—appointments and restrictions. Knowing the power you are giving to others is important.

**This is why you need to do this early, before diminished capacity!
So you get a say!**



Bob Nixon



Marlene Zwarts



Michelle Abela

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There is a lot of information about Estate Planning and it is important to seek professional advice however I wanted to share with you what happens if these two documents aren't in place when you or a loved one passes.

POA:

There is no option but to apply to the Civil and Administrative Tribunal in your state. No default provisions. This is why it is so important to have these in place prior to diminished capacity. Do this early so you get to choose who is going to manage your financial issues.

The tribunal may not choose who you want or even a family member.

Get this done early – talk to you all your family – you, your aged loved ones and your kids who have assets. It is never too soon, but it can be too late!



ENDURING GUARDIANSHIP:

The precise rules in each state will differ. In NSW, there is a hierarchy of people who can make decisions for your under the Guardianship Act. 1987 (NSW). Where you have no enduring guardian the hierarchy allows your spouse to make decisions for you. If there isn't a spouse it is important to put this in place so you get to choose who you want.

I always knew that this was a complex and complicated area but I didn't realise how much a professional will help with estate planning and how important it is to have a person you trust to make a hard time easier. Knowing what to ask, what to include and how to construct the documentation properly so your wishes are carried out.

Our advice is to go and see a professional. Money well spent for peace of mind and helping to ease the emotional fog of the administration of estate planning.

Althea has shared some of the areas that need to be considered however, but there is so much more to estate planning than we have mentioned here today.

You don't know what you don't know!

Having a professional will help you have your choices documented so it will relieve some of the emotional fog for your loved ones.

Althea is available at:

<https://hornsbywillsandprobate.com.au> to help you with your estate planning

Disclaimer: This article is to highlight the need for Estate planning and is in no way telling you what your choices should be. It is to let you know you have a clear process available so your choices are recorded. ACG

NEWS VIEWS &

NMF Welcomes 'Historic' Aged Care Reform Laws Australian Nursing and Midwifery Federation (ANMF)

The Australian Nursing and Midwifery Federation (ANMF) and its members welcome the Albanese Government's introduction of new Legislation which will ensure that a registered nurse (RN) is on-site in every nursing home 24/7 and that residents receive a minimum amount of safe, quality care every day.

The Aged Care Amendment (Implementing Care Reform) Bill 2022 delivers on the Prime Minister's pre-election pledge to reform the troubled aged care sector and implement the Aged Care Royal Commission's most critical recommendations.

"This is a truly historic day for ANMF members working in aged care," ANMF Federal Secretary Annie Butler said today.

"While implementation of these crucial reforms will take some time and will need to be phased in over the next two years, today marks the first real step towards actually fixing the aged care sector. After years of campaigning, ANMF members and aged care workers across the country will finally see results – the introduction of national safe staffing laws.

The implementation of 24 hour RN presence and mandated minimum staff time in law, acts on one of the key recommendations of the Royal Commission and addresses the chronic understaffing in the aged care sector.

"These reforms, now to be enshrined in legislation, will ensure residents get the care they need and bring a halt to the neglect and suffering experienced by so many over the last decade.

"We commend Prime Minister **Anthony Albanese** and his Health and Aged Care Ministers, **Mark Butler** and **Anika Wells**, for fulfilling their pre-election commitments to fix aged care and implement

the Royal Commission's recommendations – for the sake of older Australians living in nursing homes and the nurses and care workers who look after them.

"The ANMF also welcomes the introduction of additional requirements on aged care providers to reveal how much they actually spend on 'care, nursing, food, maintenance, cleaning, administration' and their profits, which will bring much-needed accountability and transparency on the billions of taxpayer funds provided to nursing home operators.

"We look forward to working collaboratively with the Government and the new Parliament to ensure effective implementation of these reforms."

The ANMF, is the industrial and professional voice for nurses, midwives and carers in Australia.



Australian
Nursing &
Midwifery
Federation

MEDIA RELEASES

Liteneasy servicing Seniors

Lite n' Easy's service is flexible with no contracts, so customers are free to order week-to-week as required. The company also recently introduced smaller meal sizes, giving customers the option of ordering portions that suit their appetite.

My Choice by Lite n' Easy

is a range of quality, high protein dinner, soups and desserts developed specifically to help older Australians with small appetites meet their nutritional needs.

"When people have a smaller appetite, a large portion can seem overwhelming, and they might struggle to finish what's considered a standard dinner meal", Ashleigh explains.

Ashleigh Jones, Lite n' Easy Senior Dietitian

"The My Choice range of meals have been formulated to contain more protein and energy in every bite. They provide the same energy and protein as Lite n' Easy's standard dinner meals, but in a smaller

portion, making them easier to finish and enjoy.

"They also contain the same amount of sodium as our larger meals, and more fat, meaning they contain even more flavour, which is perfect for older people who might be experiencing a decreased sense of taste or smell.

"And of course, the meals look great. We know that in order for food to be consumed, it needs to look appetising, and My Choice meals are just that!"

Home Care Package

recipients may also be entitled to a split billing arrangement, where the recipient pays for 30% of the Lite n' Easy order, and the Home Care Package provider pays 70%. For HCP recipients, this reduces the cost of a meal from around \$12 to less than \$4, based on a standard 7 Dinner meal pack.

Shirley, 94, has been ordering Lite n' Easy meals for the last 20 years as a standby. She became a regular customer when she discovered she could use her Home Care Package to subsidise the cost of her

meals and choose the meal size she preferred.

"They also have smaller meal sizes and I find them fabulous. I've had them for the last few months, and I find that's sufficient as a main meal for me. I get them now instead of eating half of the big ones, which is what I was doing before," Shirley shared with us.

Shirley also appreciates the Lite n' Easy team's efforts to find a home delivery time that suits her weekly routine.

"They changed the delivery hours for me, which is fabulous. I couldn't speak highly enough of them. I love the service."

Think you could benefit from Lite n' Easy? Visit <https://www.liteneasy.com.au/seniors/> or call on 13 15 12



Lite n' Easy

HEARING LOSS – AUSTRALIA MAKES EVERYDAY COMMUNICATION EASIER

An innovative online training program has been launched to help Australians combat the effects of reduced capacity to communicate caused by hearing loss.

Hearing loss creates barriers to getting education, employment and access to public services, as well as affecting personal relationships, individual self-esteem and confidence.

Read Our Lips, the first of its kind in Australia, is a self-paced online learning course by the national consumer advocacy body Deafness Forum Australia, with funding from the Australian Government Department of Social Services.

It is an online learning program designed to improve people's lip-reading ability. Created by experienced lip-reading instructors, users are guided through online modules at their own pace to identify key mouth movements.

It's a skill that can be improved with regular practice.

By improving the understanding of what someone is saying in different environments and contexts, Read Our Lips Australia assists users to fill in the blanks when they cannot understand speech by listening alone.

The widespread use of face masks to reduce the potential of transmission with COVID-19 has highlighted the reliance on lip-reading for many people.

It's estimated that 3.6 million Australians live with hearing loss in Australia. With an ageing population, this figure is predicted to increase to almost 9 million people by 2050.

Serious hearing loss is a known contributor to isolation, depression, anxiety, dementia and Alzheimer's disease.

David Brady, Chairperson of the Deafness Forum Australia has significant hearing loss.

"It affects my ability to communicate, especially in noisy environments, and I have been considering learning to lip-read for some time," Brady said.

"I found the Read Our Lips online program to be an extremely valuable introductory learning tool which has significantly improved my skills and confidence when communicating with others."

Background noise, distance from the speaker, room lighting, and many other factors play a role in how well someone can hear. Lip-reading can significantly improve an individual's ability to communicate and understand another person's speech.

Read Our Lips Australia will be another important tool to help people with hearing loss to understand more speech, have better comprehension, improve their self-determination, and ability to communicate with confidence.

"I can only imagine the positive change it could have upon the wider community affected with hearing loss who struggle in social situations," David Brady said.

Learn more about lip-reading and the online course at www.readourlips.com.au



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Dementia and driving

Do you have a loved one who is living with dementia? Are they retired from driving or considering retiring in the future? Needing support?

The University of Queensland is investigating ways to support people living with dementia prepare and adjust to life without driving. Recruitment is occurring across Australia for the

Living with Dementia and Driving Study. As part of the study, people will have the opportunity to receive the **CarFreeMe** program via telehealth in their own home.

This study is open to people who are still driving or have recently retired from driving. There is no cost and no driving tests involved.

Find out more

T (07) 3365 6392
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NEW AT CARING

I've begun in-home care for a friend who had a sudden stroke. Even with previous caring experience (for a family member who lived with gradual dementia), it feels like I'm starting over and unprepared.



Family carers generally earn their job title in one of two ways: the gradual “sneak-up mode” or abrupt “crisis mode.” No matter how you entered into your caring role, you may have to make changes in your personal and work life.

Resources abound.

Check out australiancarersguide.com.au for a great library of back issues and articles about homecare, safety tips, seniors housing, long-term care, retirement planning and how to avoid carer burnout, to mention but a few.

You might also check your provincial health services website and organisations like the Alzheimer or Parkinson Society for your region.

ENGAGED ACTIVITIES

My mother has arthritis. How can I motivate her to stay more active?

Remaining active mentally and physically is important for everyone, no matter what age they are. The best thing you can do is encourage mum to engage in activities she enjoys or used to enjoy. While medical issues like arthritis, loss of sight or mobility do make activities more challenging, there is always a way to still enjoy them.

Suppose your mum used to like to knit but now, with arthritis, cannot hold the needles anymore. It doesn't mean she has to give up this activity all together. Find someone who also knits and enjoys spending time with a senior. They could discuss patterns, visit yarn stores, and show each other all the items they made in the past. These small things will help her keep engaged and active, while also enjoying one of her favourite activities.

Take a moment to think: What can you do today to reinvigorate an old activity that a family member used to love? How can you share that enjoyment together?



LONG-DISTANCE PLANNING

I'm helping a parent plan for independent living. We live far apart, which presents some logistical challenges. Advice?



Try to get familiar with some of the neighbours.

Identify one or two individuals who can look in on your parent on a regular basis. Exchange phone numbers and make sure that the neighbour's phone number is programmed on speed dial on your parent's phone. Also, get to know the bank teller or manager who will be able to tell you whether there has been unusual banking activity. Introduce yourself to the staff and give them your phone number to call you if they think something is odd.

Call your local community services centre to find out what government-funded services are available to support independent living and what your parent may be eligible for.

LOVING YOUR SIBLINGS MAKES A HEALTHY DIFFERENCE

According to scientists, during middle and old age, indicators of well-being, mood, health, moral, stress, depression, loneliness and life satisfaction are all tied to how you feel about your brothers and sisters. Source: NPR: Your Health



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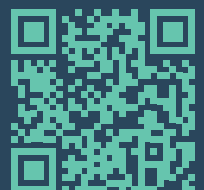
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I think my kids are ready to have a “talk” with me. I’m living on my own quite happily but they are worried that its only a matter of time before something not so nice happens. Any suggestion?

As we age and the potential for challenges increases, there will be a need to have “The Talk.” This discussion with those who care about you should detail the anticipated outcomes in your own affairs, **health and safety**. It is about being proactive, not reactive.

Key areas to consider include:

- **Accommodation** – how long can you remain independent in your own home or in a seniors’ residence? If you are still living at home, what would trigger a need for additional support or home care services? When do you feel is the right time to move to a seniors’ residence or long term care?
- **Responsibility for maintenance around the house** – is your family able to help you out or should you hire someone to cut the grass and sweep up
- **Finances** – how much do you have in savings? Are family members willing, and able, to contribute to home-care, a retirement residence, or, if necessary, long-term care? Do you have insurance? Are you up-to-date on what is/isn’t covered?
- **Health and wellness** – In the event of life-saving measures, what medical interventions does you want in place? Do you want specific time-lines attached to them? Is a Do Not Resuscitate (DNR) in place? A DNR Form is a request not to have any CPR administered to restore cardiac or respiratory functions.
- **To which extent are life support measures to be in place?** Discontinued? Who has been designated as the Power of Attorney (POA) in the event you are unable direct your care or have life support measures discontinued? A Power of Attorney kit can help you to identify your wishes for your personal care and your care of property. A POA provides a person,

designated by you, with the capacity to make health care decisions, on your behalf, should you become mentally incapable of doing so, yourself.

- **End of life.** What are end of life wishes? Funeral? Service? How will the costs be covered? Consider using “My Own Voice” to record and share.
- **Having these discussions with** your adult children, carer, and or power of attorney enables you to have an open dialogue about how they can support your wishes while being realistic as to what capacity they are capable of offering in terms of support.

If you’d like, a professional health care agency can draw up a personalised care plan for you.

Is it possible to provide dementia or Alzheimer’s care at home?

A diagnosis of dementia or Alzheimer’s is life changing for both the individual with the disease and their family and loved ones.



Providing care for someone living with this disease is not a simple task and can place a great deal of stress on the whole family.

In the early stages of dementia, things can be easily managed and the individual may feel everything is under control but as the disease progresses so does the degree of care needed. This sometimes even leads to the need for 24/7 assistance.

Some of the symptoms of dementia that can make the provision of care challenging include: memory loss, difficulty completing tasks, reduced reasoning, communication problems, mood changes, forgetful of family/friends, and loss of coordination and ability to perform activities of daily living.

There is help available. Visit your local Alzheimer’s Society in person or check on-line.

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abbreviations

When it comes to Aged Care, acronyms are plentiful...ACSA, HCP, CHSP... But what do they all mean? Fear no more. We've compiled a list of the most commonly used ones – how they work and their service to the community.

ACAT: Aged Care Assessment Team

Helps the elderly and their carers determine what kind of support will best meet their needs when they are struggling in their current living situation.

Ever had a chat with someone where the talk is littered with acronyms – but you have absolutely no idea what they are saying?

ACAS: Aged Care Assessment Service (Victoria)

Only provides teams who help frail older people and their carers, to work out what kind of care will best meet their needs. After each assessment, a patient's level of support and service needs are recommended.

ACF/ACH: Aged Care Facility or Aged Care Home

Accommodation for older people who can no longer live at home independently, who require help/support for everyday tasks/health care.

ACIA: Aged Care Industry Association (ACIA)

Association of aged care providers, whose members operate residential aged care, home care, home support and retirement living services.

ACS: Aged Care Services

Support and services provided to older people in their own home or in an aged care home to assist with everyday living, health care, accommodation and equipment.

ACSA: Aged & Community Services Australia

The leading national peak body supporting not-for-profit, church and charitable providers of retirement living, community, home and residential care.

ADL: Activities of Daily Living

Refers to the basic skills needed to properly care for oneself and meet one's physical needs in six areas: eating, dressing, bathing, toileting, continence, and mobility. It's used as an indicator to determine the level of care and supportive services needed in senior's care plan.

AIP: Ageing in Place

Indicates that a resident can enter an aged care facility at low care and can remain there as their care needs increase to a high care.

ATSI: Aboriginal Torres Strait Islander

CA: Carers Australia

The national peak body representing Australia's unpaid carers, advocating on their behalf to influence policies and services.

CBC: Centre Based Care

For elderly people who require low to medium living support, group activities, excursions and social support are provided in a local centre.

CC: Community Care

Personalised care and support services to help the elderly continue living at home.

CDC: Consumer Directed Care

Are services chosen by the elderly person living independently at home, they decide the types of services and care and the providers of the services.

CHSP: Commonwealth Home Support Program

The entry-level home support program assists older people to live independently in their homes and communities. It also provides respite services to give carers a break.

COTA: Council on the Ageing

Provides leadership in social policy and community information, and education for older persons.

CRCCs: Commonwealth Respite & Carelink Centres

Assists carers by providing access to information, respite care and other support appropriate to carers' needs and circumstances, and the needs of those they care for.

DAP: Daily Accommodation Payment

Is the daily non-refundable payment for accommodation in an aged care home. It can be paid regularly up to a month in advance, similar to paying rent.

DOH: Department of Health

Develops and delivers policies and programs and advises the Australian Government on health, aged care and sport.

DTC: Day Therapy Centre

Offer a range of services (physiotherapy, podiatry, occupational therapy) for older people living independently either in their own home, or aged care homes.

HC: Home Care

Services/support given to older people with care needs to live independently in their own homes.

HCP: Home Care Packages

A program funded by the Australian Government to support older people with complex care needs to live independently in their own homes. They use a consumer-directed care approach to ensure the support suits a person's needs and goals.

HCS: Home Care Service(s)

Support/care services provided to an elderly person in their own home.

ILU: Independent Living Unit

A small home designed for older people who are actively independent, usually in a village environment.

MAC: My Aged Care

Provides the entry point to the Australian Government Funded aged care services for the general public.

NDIS: National Disability Insurance Scheme

NDIS provides information and connections to services for people with disability. The scheme also provides support for their families and carers.

NESB: Non-English-Speaking Background**NSA: National Seniors Association**

Is a not-for-profit membership organisation and advocacy group of working and retired older Australians.

OPA: Office of Public Advocate**OPAN: Older Persons Advocacy Network**

An agency that can provide information to consumers their families and carers about their rights and responsibilities when accessing aged care services.

RAD: Refundable Accommodation Deposit

Is a lump sum payment for accommodation in an aged care home. This is the price of a room, in lump sum form that you have agreed with your aged care home to pay and is fully refundable when you leave the aged care facility.

RAS: Regional Assessment Service

Is the program which undertakes aged care home support assessments.

RC: Respite Care

Services designed to give carers a break from their caring role during planned or regular breaks, short holidays or emergencies.

RV: Retirement Village

Group of residential premises predominantly occupied by senior citizens who live in apartment style rooms /suite of rooms.

SM HCP: Self-Managed Home Care Packages

A program funded by the Australian Government to support older people with complex care needs to live independently in their own homes. The elderly package receiver can choose the provider(s) and services given, including the workers or contractors, when the services are provided and can control how the funding is spent.

STRC: Short-term Restorative Care

A program which provides services to older people for up to 8 weeks (56 days) to help them delay or avoid long-term care.

VHC: Veteran's Home Care

Home care for eligible veterans, war widows/widowers through the department of Veterans' Affairs.

Eat well Live well Age well

Hello to my fellow carers.

Spring has sprung, and it's always a special time of the year as we say goodbye to the winter and welcome the warmer weather in.

Celebrate this special time of the year with our freshest recipes to try this spring.

Enjoy!!



Tomato, Avocado and Chickpea Salad

This high-protein vitamin and mineral packed salad is perfect as an accompaniment to a spring picnic, or a main meal while entertaining. Crisp, and colourful, it is a beautiful addition to your spring function, wherever that may be.

INGREDIENTS

250g cherry tomatoes	250g tinned corn
600g tinned chickpeas	1 avocado diced
125g spinach leaves	2 tbsp white wine vinegar and olive oil

METHOD

Drain corn, and brown in a fry-pan over high heat. Set aside to cool. Drain and rinse chick peas. Cut cherry tomatoes into quarters. Cut avocado into large chunks, and roughly chop spinach. To make dressing combine oil and vinegar in a bowl, season to taste with salt and pepper, and whisk till combined. Add all ingredients to a bowl, pour over dressing, and toss to coat. Enjoy!



"Welcome to spring, the season of new beginnings, here are some recipes to brighten up your day."



Easy Broccoli & Cheese Quiche

Is Green – Is Good. Don't be fooled by this delicious broccoli and cheese quiche. It's actually high in protein to get your energy going and low on carbs. Indulge in moderation.

INGREDIENTS

- 3 tablespoons butter, divided
- 2 cups chopped fresh broccoli
- 1 onion minced
- 1 teaspoon minced garlic
- 1 x 9 inch unbaked pie crust
- 4 eggs well beaten
- 1½ cups shredded mozzarella cheese
- ½ teaspoon black pepper
- 1 teaspoon salt
- 1 tablespoon butter, melted

METHOD

1. Preheat the oven to 350 degrees F (175 degrees C).
2. Melt 2 tablespoons butter in a large saucepan over medium-low heat. Add broccoli, onion, and garlic; cook, stirring occasionally, until vegetables are soft. Spoon vegetables into pie crust and sprinkle with mozzarella cheese; set quiche on a baking sheet.
3. Bake in preheated oven until the centre of the quiche has set, about 30 to 50 minutes.



Beef Stroganoff

A classic dish to try this spring guaranteed to fill your home with beautiful aromas of this delicious dish.

INGREDIENTS

- 2 tbsp plain flour
- 700g beef rump steak trimmed, thinly sliced
- 40g butter, chopped
- 1½ tbsp olive oil
- 1 large brown onion, halved, thinly sliced
- 2 garlic cloves, finely chopped
- ½ tsp sweet paprika
- 400g button mushrooms, sliced
- ½ cup dry white wine
- ¾ cup beef style stock
- 2 tbsp tomato paste
- 3 tsp dijon mustard
- ¼ cup creme fraiche (or light sour cream as an alternative)
- Cooked fettuccine, to serve
- Chopped fresh flat-leaf parsley, to serve

METHOD

- **Step 1**
Place flour and beef in a snap-lock bag. Season with salt and pepper. Shake to coat.
- **Step 2**
Place half the butter and 2 teaspoons oil in a large frying pan. Cook over high heat until bubbling. Add half the beef. Cook, stirring, for 3 to 5 minutes or until browned. Transfer to a plate. Repeat with remaining butter, 2 teaspoons oil and beef.
- **Step 3**
Reduce heat to medium. Heat remaining oil in pan. Add onion and mushroom. Cook, stirring, for 5 minutes or until soft. Add garlic and paprika. Cook, stirring, for 1 minute. Add wine, stock, tomato paste, mustard and beef to pan. Stir to combine. Bring to the boil. Reduce heat to low. Simmer for 5 minutes.
- **Step 4**
Stir in crème fraiche. Serve stroganoff with pasta and parsley.



“Welcome to spring, the season of new beginnings, here are some recipes to brighten up your day”



Mini Pavlova with Berries

You can't go past this light tasty dessert, the perfect way to finish a meal, or to enjoy with friends over afternoon tea.

INGREDIENTS

2 egg whites

½ cup caster sugar

2 tsp ground cinnamon

1 tsp finely grated orange

3 tsp cornflour

1 tsp white vinegar

150 ml whipped cream + Fresh berries



METHOD

Pre heat oven at 140°C.

Mark four 10cm circles on baking paper then turn paper over on tray.

Beat egg whites until peaks form.

Gradually add sugar beating well after each addition.

Beat a further 4-5 minutes.

Fold in cinnamon, rind, cornflour and vinegar.

Spoon mixture to fill each circle and hollow out the centres to make a nest.

Bake 30 – 40 minutes until pale and crisp.

When cold, spoon cream and top with berries.





“Breakfast is served.”

CatholicCare Tasmania

Across Tasmania, we offer programs in:

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- Housing & Homelessness
- Emergency Relief
- No Interest Loan Scheme
- Multicultural Support Services
- Early Learning & Care
- Family Violence Services
- Family & Parenting Support

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catholiccaretas.org.au



Find Hope

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Build a hopeful mindset with a FREE printable sent to your inbox every quarter

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Scan the QR code to
Download your **FREE**
Image of Hope printable



CARE for those who CARE



ABOUT US

Pathways for Carers offers carers of people with disability, mental illness or elderly people a chance to attend free walking events in Victoria together, and to learn more about news, services and supports available to them.

Free morning tea and guest speaker following each monthly walk!

Our free Pathways for Carers walking events are led by carers for carers. It's what makes our program unique.

The role of a carer can be an isolating and difficult path to navigate. These incredible individuals make an invaluable contribution to the community, facing multiple challenges along the way.

ENQUIRIES?

To learn more about Pathways for Carers, including how to be part of setting up a walk in your local government area within Victoria, contact the Project Manager, at Interchange Outer East: 0447 440 035 or michelle.willoughby@ioe.org.au

FIND A WALK NEAR YOU!

Visit the website:

www.pathwaysforcarers.com.au

These free monthly events are hosted throughout Victoria by various local governments and community agencies. Walking groups typically use a stunning and accessible local trail that affords them respite from caring roles in a casual, no-stress environment. The regular event concludes at a local community space or cafe where walkers will have the opportunity to hear from a guest speaker and share a complimentary morning tea.

 [Pathways for Carers - Victoria](https://www.facebook.com/pathwaysforcarers.vic)

 [Pathways for Carers Victoria](https://www.linkedin.com/company/pathwaysforcarersvictoria)

 [@pathways_for_carers_vic](https://www.instagram.com/pathways_for_carers_vic)

Put simply, it's fresh air, a friendly face and a hot cuppa at the end!



Time Out

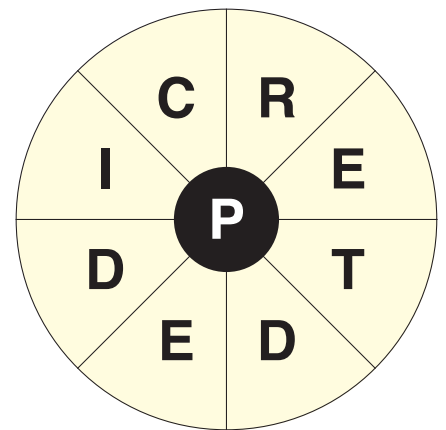
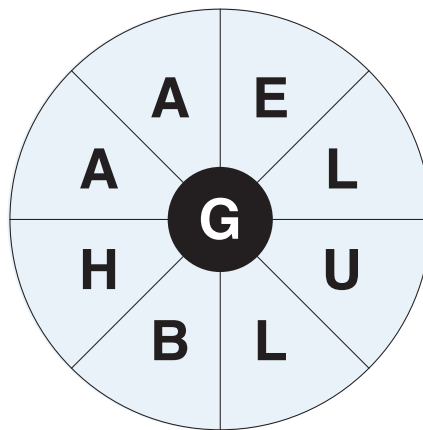
Improve your memory, concentration and reasoning. The benefits of puzzles are numerous. They maintain or develop problem-solving skills, and help you relax, even when they are so frustrating.

Wordwheel

Find as many words of three or more letters in the wheel as you can.

Each word must use the central letter and a selection from the outer wheel – no letter may be used more times than it appears in the wheel.

Can you find the nine letter word hidden in the wheel?



1. _____
2. _____



Wordsearch

Can you find the words in the grid

They will be placed only once and may be either horizontal, vertical or diagonal and go either forwards or backwards. Words can cross.

- | | |
|----------|-------------|
| AGASSI | HEWITT |
| BARTY | IVANISEVIC |
| BECKER | KVITOVA |
| BORG | LAVAR |
| CASH | MAURESMO |
| CONNORS | MCENROE |
| DJOKOVIC | MURRAY |
| EDBERG | NAVRATILOVA |
| EVERT | RYBAKINA |
| FEDERER | SAMPTRAS |

Jumbo Arrow-word

Solutions
on page
130

Complete the clues to fill the grid.

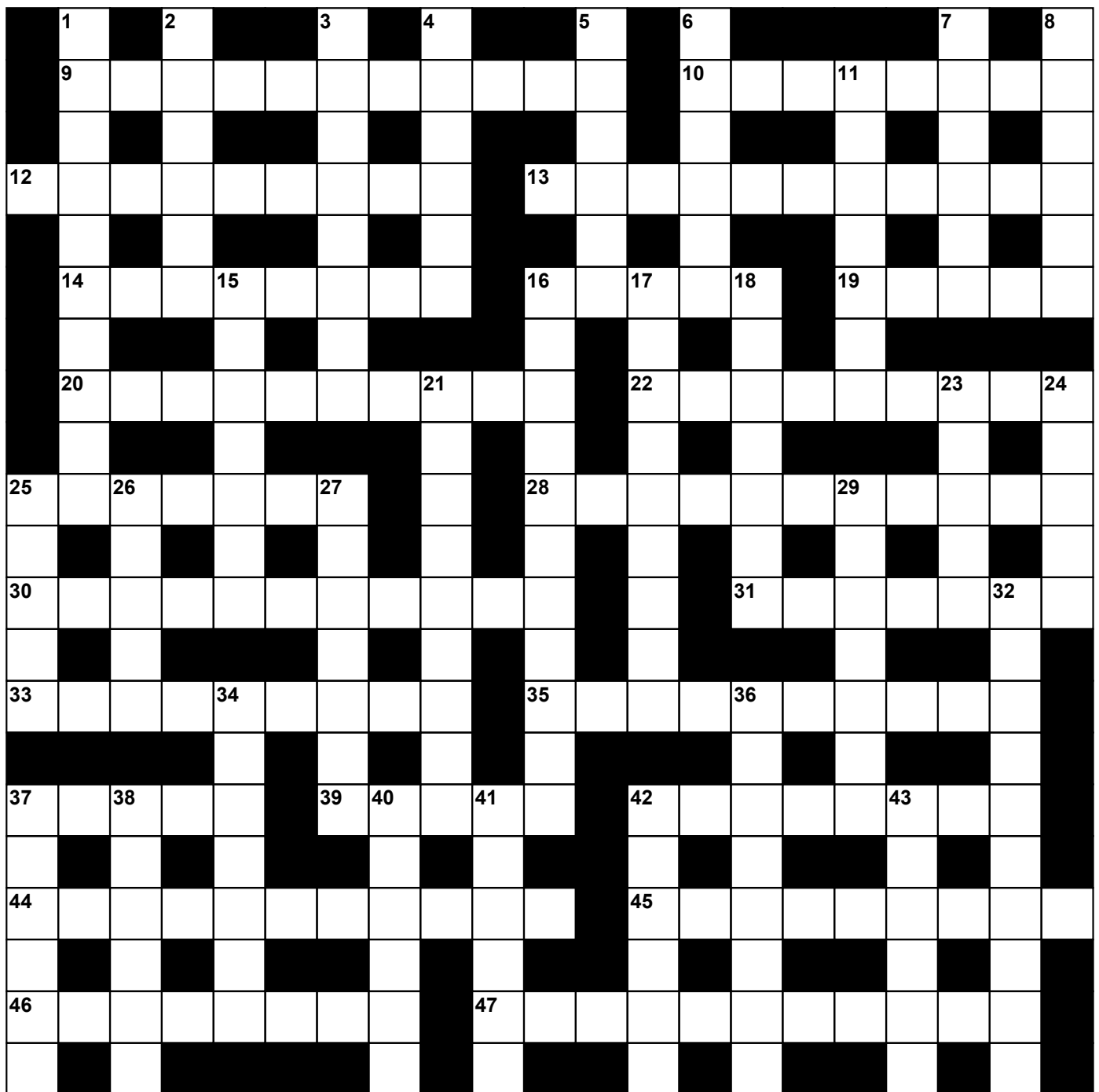
The arrows show the direction in which the answer to each clue should be placed.

Slight error		Joan ___: Spanish artist		Synopsis; diagram		Finished; complete		Direction opposite NNW	Probable		Eleventh month (abbr)
Uneasy		Lack of ostentation		Fencing sword		Capital of Norway					Period of time in history
Slant						Expression of alarm				Groups together	
			Style of rock music				Vibrate back and forth	Sense of oneself			
Piece of pasture	Mythical giant		Not difficult					Varnish resin			
Yoko ___: Japanese artist				Expelled from office	Paper quantity		Legendary story				
Large dark antelope				Long and narrow inlet				___ acid: protein building block	Chatter		Scores (a goal)
Des ___: desirable house (informal)				Tree				___ up on: find out about			
				Muhammad ___: boxing great				Era (anag)			
Opposite of worst	Sailor							Summer time setting (inits)			
___ Kilmer: famous actor		Stick with a hook		Indian dress	Unit of thermal resistance				Large waterbirds	Belonging to a woman	
			Plunder; take illegally		Longing		Twitch		Parent / teacher group (inits)		Organ of sight
Sudden attack						Conical tent					
			Database of information								
Flying saucer (inits)	Opposite of thick					Stop					

Jumbo Crossword

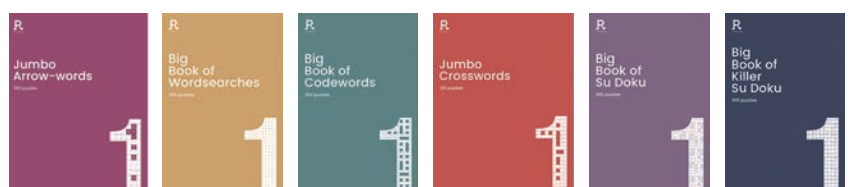
Solutions
on page
130

Complete the crossword clues to fill the grid.



LOVE PUZZLES?

All puzzles are kindly supplied by Richardson Puzzles & Games – their puzzle book range is available to purchase from all good book retailers.





Crosswords can **relieve stress** and **boost** your **mood**

ACROSS

- 9 Dizzy (5-6)
- 10 Garden flower (8)
- 12 Forebears (9)
- 13 Praiseworthy (11)
- 14 Hostilities (8)
- 16 Balearic island (5)
- 19 Where one finds Rome (5)
- 20 Had an impact on another (10)
- 22 Inoculate (9)
- 25 Eternal (7)
- 28 Daring (11)
- 30 Accredited diplomats (11)
- 31 Excess (7)
- 33 Income bequeathed to someone (9)
- 35 One who gives to a cause (10)
- 37 Start of (5)
- 39 Evade (5)
- 42 Calm and free from strife (8)
- 44 These are put up at Christmas (11)
- 45 Caustic (9)
- 46 Constant movement from side to side (2,3,3)
- 47 Act of giving up one's job (11)

DOWN

- 1 Covering with a thick layer (10)
- 2 Shining (6)
- 3 Poisonous green gas (8)
- 4 Overtakes (6)
- 5 Word that qualifies another (6)
- 6 Squirt a liquid in short bursts (6)
- 7 Gaseous envelope of the sun (6)
- 8 Spirited (6)
- 11 Type of vermouth (7)
- 15 Sickness (7)
- 16 Incapable of being split (11)
- 17 A new creation (9)
- 18 Accumulates over time (7)
- 21 Twisted out of shape (9)
- 23 Worship (5)
- 24 Choose through voting (5)
- 25 Wide open (of the mouth) (5)
- 26 Implant (5)
- 27 Large marine algae (7)
- 29 Aural pain (7)
- 32 Beside the point (10)
- 34 Irrigated (7)
- 36 Obviously offensive (of an action) (8)
- 37 Strange thing (6)
- 38 Marked by friendly companionship (6)
- 40 Prayer (6)
- 41 Upper classes (6)
- 42 Meal eaten outdoors (6)
- 43 Remains preserved in rock (6)

Give your brain a daily workout!

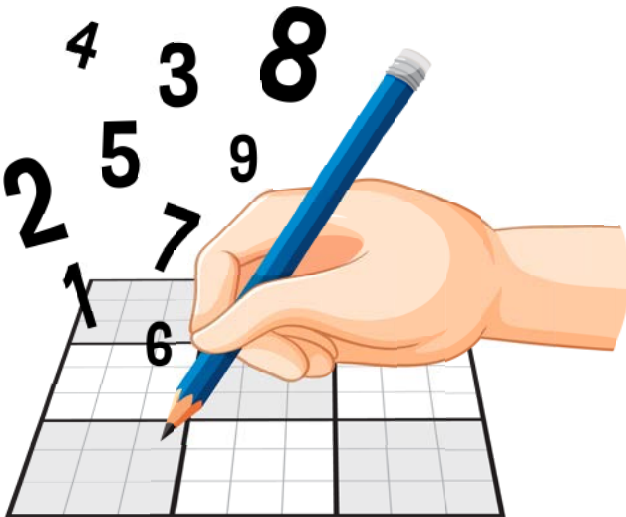
Looking for a mental challenge?

This editions brainteasers will really get those cogs whirling!

Solutions
on page
130

Sudoku

Place the numbers 1-9 once in each row, column and 3x3 bold-lined box.



8			2	4	6	3	5	7
		2	5	3			9	
	5				8			
	4					8	1	
	3	8				6	7	
	2	7					4	
			4				8	
	1			6	2	7		
3	8	5	7	9	1			6

EASY

6			7			1		
5		9				7		
	7		5					
	4	6	2					
3								8
					1	2	5	
					3		7	
		8			5			9
		5			8			3

MEDIUM

1								
5			7			4		3
	7	3		5		1		
		8	5					
6			1		3			2
					2	6		
		9		1		3	2	
3		7			4			6
								4

HARD

Codeword

Solutions
on page
130

Can you crack the entire code to complete the crossword grid?

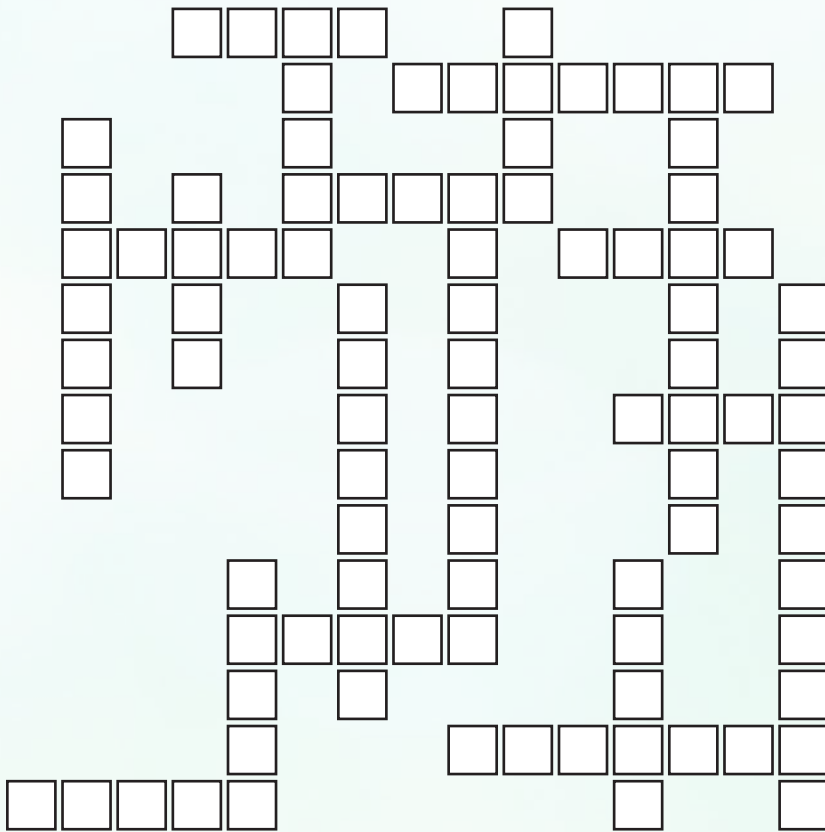
Each number from 1-26 represents a letter of the alphabet from A-Z. Every letter appears in the grid at least once, and is represented by just one number. We've given you 3 letters to help you start.

25	7	6	16	21	25		4	19	20	10	11	13	7	10	
20		8		3				10		8		20		7	
17	7	23	7	13	4			10	7	26	21	16	10	7	4
7		9		16				9		9		5		21	
4	7	23	16	9	3		6	21	8	6	7	9	21	25	
1		20		7		3		19		4		15		7	
16	10	10	7	4	8	13	21	1	7						
14		6		4		16		16		6		12		7	
					4	1	7	20	6	16	9	7	4	4	
1		22		6		1		13		4		4		14	
23	12	20	1	7	24	7	10		8	19	1	16	25	20	
16		25		19		10				13		1		19	
4	21	18	4	8	9	16	14		4	20	2	20	10	16	
1		16		4		9				5		1		4	
4	14	20	24	7	9	3	7		20	4	4	7	9	1	

A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

1	2	3	4	5	6	7	8	9	10	11	12	13
			S								H	
14	15	16	17	18	19	20	21	22	23	24	25	26
								Z				

Kriss Kross



4 LETTERS

HARM
LIST
MEAN
ROVE
SILK

5 LETTERS

CHATS
ELITE
HENCE
LAKES
LANDS
OBEYS
UMBER

7 LETTERS

DOLEFUL
DOORMAN
TOOLKIT

8 LETTERS

FLOODING

9 LETTERS

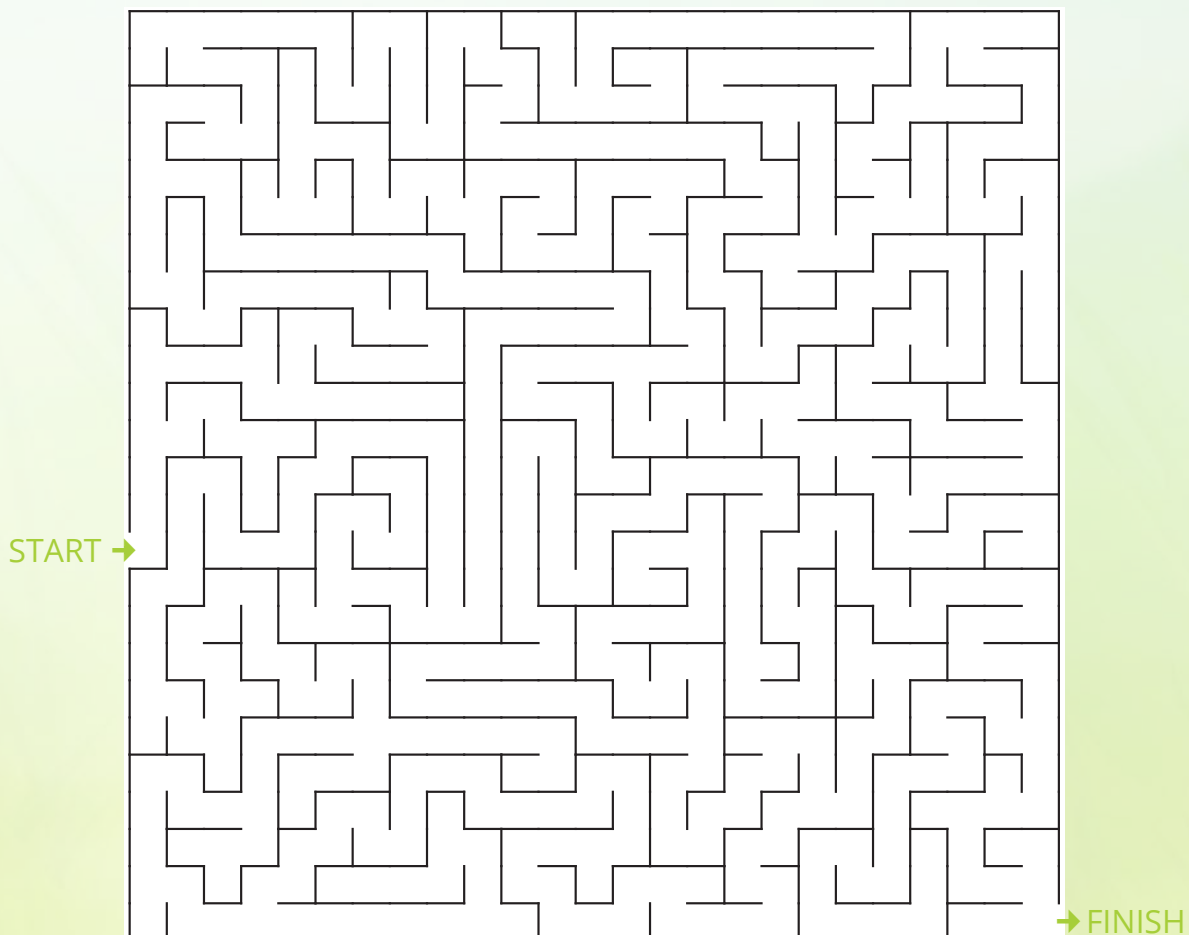
ANARCHIST
TANGERINE

10 LETTERS

RATIONALLY

Square Maze

Find the path out without breaking through walls.



Stroke Foundation

Help after

stroke

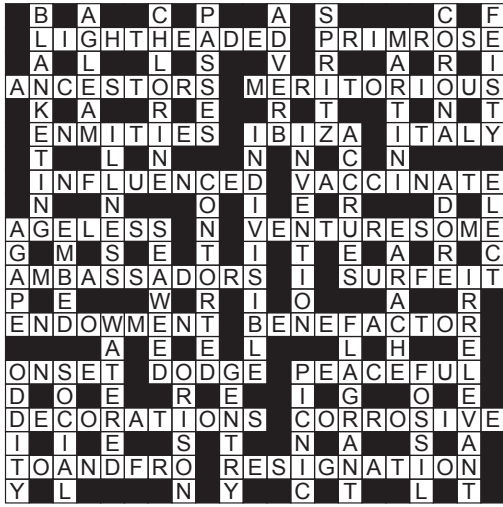
StrokeLine: 1800 787 653

StrokeLine's health professionals provide free information, advice and support. They can help you find the support and services you need

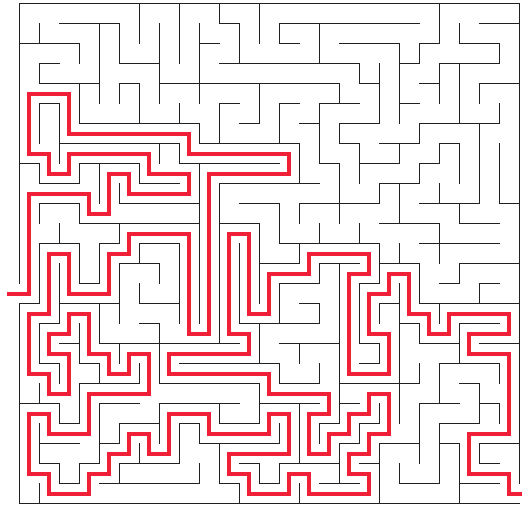
www.strokefoundation.org.au

Puzzle Solutions

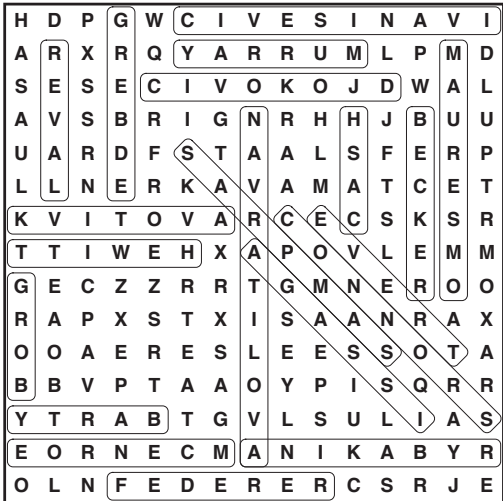
Jumbo Crossword



Square Maze



Word Search



Sudoku - EASY

8	9	1	2	4	6	3	5	7
4	6	2	5	3	7	1	9	8
7	5	3	9	1	8	2	6	4
6	4	9	3	7	5	8	1	2
5	3	8	1	2	4	6	7	9
1	2	7	6	8	9	5	4	3
2	7	6	4	5	3	9	8	1
9	1	4	8	6	2	7	3	5
3	8	5	7	9	1	4	2	6

Sudoku - MEDIUM

6	8	3	7	2	9	1	4	5
5	2	9	8	1	4	7	3	6
4	7	1	5	3	6	9	8	2
1	4	6	2	8	5	3	9	7
3	5	2	4	9	7	6	1	8
8	9	7	3	6	1	2	5	4
2	6	4	9	5	3	8	7	1
7	3	8	1	4	2	5	6	9
9	1	5	6	7	8	4	2	3

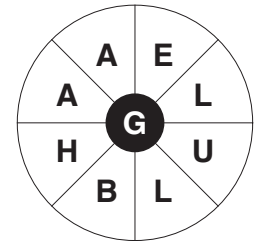
Sudoku - HARD

1	8	4	3	6	9	2	5	7
5	9	6	7	2	1	4	8	3
2	7	3	4	5	8	1	6	9
7	2	8	5	4	6	9	3	1
6	4	5	1	9	3	8	7	2
9	3	1	8	7	2	6	4	5
4	5	9	6	1	7	3	2	8
3	1	7	2	8	4	5	9	6
8	6	2	9	3	5	7	1	4

Codeword



Word Wheel



LAUGHABLE

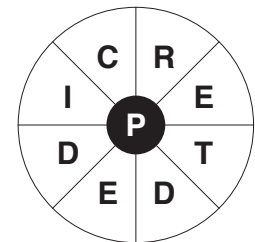
age, ague, alga, algae, algal, bag, bagel, beg, beluga, bug, bugle, bulge, gab, gable, gala, gale, gall, gel, glue, gull, hag, haulage, hug, huge, lag, laugh, laughable, leg, legal, lug, luge, ugh

TARGET: 18, GOOD: 24, EXCELLENT: 29

Jumbo Arrow-Word



Kriss Kross



PREDICTED

creep, crepe, crept, decrepit, deep, depict, depicted, dip, drip, epic, peer, per, pert, pet, peter, pie, piece, pieced, pied, pier, pierce, pierced, pit, predict, predicted, price, priced, pride, prided, pried, receipt, recipe, rip, ripe, tepid, tip, trip, tripe

TARGET: 21, GOOD: 28, EXCELLENT: 34

HELPFUL CONTACTS

CRISIS - EMERGENCY - INFORMATION : INSTANT HELP AVAILABLE BELOW

EMERGENCY MEDICAL CARE 000 (TRIPLE 000)

Emergency assistance 000 (24 hours/7 days)

Lifeline's 24/7 service on 13 11 14

Suicide Call Back 1300 659 467

24/7 telephone counselling service

Beyond Blue's support 1300 22 46 36

SANE Australia's service 1800 187 263

Carer Gateway 1800 422 737

Urgent mental health care

for anyone having a mental health crisis:

NSW Mental Health Line 1800 011 511

ACT Mental Health Triage Service 1800 629 354

SA Mental Health Triage Service 13 14 65

NT Crisis Assessment Triage Service 1800 682 288

WA Mental Health Emergency Line 1800 676 822

QLD 24-hour mental health care 1300 642 25

TAS Mental Health Services Helpline 1800 332 388

VIC Mental Health Services go to
health.vic.gov.au for your local provider

MindSpot Clinic call 1800 61 44 34 for
adults with anxiety or depression

QLife's support service on 1800 184 527

National Dementia Helpline 1800 100 500

Centrelink for Carers & Disability 13 27 17

Aged & Disability Advocacy 1800 818 338

Centrelink for ABTSI 1800 136 380

Centrelink for older Australians 13 23 00

Department of Veterans Affairs 1800 555 25

My Aged Care 1800 200 422

Medicare 13 20 11

Elder Abuse Prevention 1300 651 192

Translating and Interpreting Service
(TIS National) **13 14 50** and **1800 131 450**



National Continence Helpline 1800 330 066

Healthdirect for a nurse triage service
1800 022 222 (all states except for Victoria)

NURSE ON CALL phone **1300 60 60 24** for
health help from registered nurses in Victoria

Poisons Information Centre 131 126
for 24/7 assistance

1800 RESPECT 1800 737 732 for sexual
assault/domestic and family violence
counselling

Gambler's Help hotline **1800 858 858** 24/7

Australian Men's Shed Association
1300 550 009

MensLine Australia 1300 78 99 78 support to
helping men deal with relationship problems

GLBTI peer support on **1800 184 527**
Mon-Thurs 6 pm-10 pm, Fri-Sun 6pm-9pm

National Alcohol and Other Drug
1800 250 015 for free 24/7 Hotline support

National Debt Helpline 1800 007 007
for free financial counselling

Relationships Australia 1300 364 277
relationship support services

Translating and Interpreting Service
Dementia Support Australia 1800 699 799



Wellbeing at home

Helping people remain safe, happy and healthy in their own home



Living well in your own home, connected to services and community

In Home cleaning, gardening and companionship services

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We help you find and access the help you need. We identify the best services, and source available funding eligibility for those in financial need. Full details inside.

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