Everybody can be great...because anybody can serve. You don’t have to have a college degree to serve. You don’t have to make your subject and verb agree to serve. You only need a heart full of grace. A soul generated by love.

Martin Luther King

The best way to find yourself is to lose yourself in the service of others.

Mahatma Gandhi

Sometimes the only thing you could do for people was to be there.

Terry Pratchett

Those inspiring quotes reflect the friendship, companionship and services that CVS volunteers are offering to many aged care home residents, breaking their isolation and improving their quality of life.

THE CVS JOURNEY

The CVS has been operating for 25 years since its inception in 1993. Let’s revisit some of the historic moments of the CVS.

1990/91 – CVS Pilot program established
The need for friendly visiting was identified in the 1989 report Residents Rights in Nursing Homes and Hostels, and pilot programs were established in 1990/1991 in 27 nursing homes in South Australia and Queensland through 18 community-based organisations. A scheme was developed in nursing homes only, to help alleviate the feelings of isolation, boredom and loneliness as identified by residents in the Ronalds Report.

1991- National Implementation of CVS in NHs
The trial was evaluated by Ernst & Young consultants in October 1991 and recommended for national implementation.

1992 - Invited submission to auspice the CVS
In 1991/92, submissions were called from nursing homes to nominate residents who were isolated from regular contact with friends and family and would benefit from a Community Visitor. At the same time, submissions were invited from community-based organisations to act as Aupcies for the Scheme.

1993 - RPAH successfully received a grant for 41 Community Visitors

The Ethnic Aged Unit, Royal Prince Alfred Hospital received a grant from the Commonwealth Department of Health, Housing, Local Government and Community Services, to sponsor the Community Visitors Scheme in Commonwealth subsidized nursing homes in New South Wales, for the period 1st July 1993 to 30th June 1994.

1997- CVS was extended to Aged Care Hostels +
CVS logo was created
As the demand for community visitors continue to increase, the CVS program gradually grew in size. In 1997, Central Sydney Area Health service received funding from the Commonwealth Department of Health and Family Services for 110 community visitors.

2018
Over the years, Sydney Local Health District (SLHD) continued to receive funding from the Australian Government Department of Health. Although the funding was capped at 150 visitors, the demand for visitors has outgrown the funded number. SLHD CVS currently has over 220 volunteers visiting 370 residents.

IN THIS ISSUE

We have the pleasure to share with you an inspiring story from Mrs. Sun Ok Kim, who has gained some insights into getting old through her visiting experience.

Information on MY HEALTH RECORD - an online summary of your key health information, has been included for you to decide whether you would like to stay in or opt out of the system.

CVS 25th ANNIVERSARY CELEBRATION
SLHD is hosting a celebration to recognize the contribution of our very committed CVS volunteers. All of you deserve to be praised and recognized for the difference you make to many residents’ lives. We genuinely look forward to seeing you there.

Date: 3rd December 2018 (Monday)
Time: 10:00 a.m. – 12:00 noon
Venue: Hyatt Regency Hotel, Sydney

All the very best,
Valerie CHU & Jeannie TAM
Like everyone else, I worked hard to earn a living when I was young. Life in South Korea was by no means easy. After getting married, my husband and I decided to move to Australia, where we started a cleaning business. Together we worked hard to sustain a family.

Life takes its turn
Out of the blue, my husband suddenly passed away in 2009 at the age of 63. I was left alone to run the business, as well as looking after my two sons. No matter what, life has to continue. I just had to push on. My belief was that life would not let me down if I am trying my very best.

Perhaps I had worked harder than I ought to, my body was failing me. Soon, I’ve got arthritis in my knees and ankles and a tumour in my spine. Although the tumour was benign, its ever-increasing size and volume was pressuring on the nerves, exacerbating the pain in both the knees and ankles.

Time to reassess life
I guess, we humans never learn from experience, until something traumatic happened to us. Those mishaps led me think about life seriously and set priorities. I came to a conclusion that life is more than just work and business. There are other more meaningful things to do.

That’s how I decided to retire and look for a more meaningful way to work for other people. And that was exactly how I started volunteering with the Community Visitors Scheme (CVS) six years ago. I was hoping that I could do more before the pain overtook me.

A brand new experience
I could never envisage how life of the elderly be in an aged care home. This unique visiting experience had opened my eyes. It pains me a lot when I see people becoming weak and vulnerable, and dependent.

It shocked me though that there are so many people living in aged care homes with no or very little English. I could only imagine the fear and unhappiness of those residents. Although my English is also limited, I felt privileged to have the opportunity to keep my ‘friend’ company, and to help her out with some simple translations. I feel I am useful again.

“Are you mad or what?”
Not long after my volunteer visits started, my knee was playing up more and more, and it started hurting me very badly. All sorts of horrible thoughts came to my mind. The possibility of becoming immobile had become very real. After much deliberation and consideration, I plunged into the courageous decision of having the tumour removed from my spine in 2014 hoping that it would take away all my pains.

“Thank God!” Life was back to normal soon after the surgery, and I resumed my volunteer
work with CVS in no time. I felt that my mission has not yet accomplished.

‘Are you mad?’ ‘Are you serious?’ My friends genuinely thought that I was insane. Of course, they are concerned about my recovery. They also thought that I should be doing things to enjoy myself, instead of volunteering.

The true value of giving
I guess my friends do not have a clue how much I have gained from visiting to my friends in different aged care homes. My dear friend, Mrs. KIM (not a real name), a 94-year-old lady I am currently visiting taught me how to earn respect from others. Despite her advance age, she keeps her room clean and tidy, always in an impeccable state. That in itself is inspiring!

Her constant gentle smiles will melt any heart! She was a regular church-goer before her admission to the facility, and has strong faith in God. Very often, I would find her sitting on her bed singing gospel songs. Every now and then, I would join her. I also sing her traditional Korean songs, and we share our life stories.

Our time together gives her immense happiness as shown on her face and a huge lift in her spirit, and for me, tremendous satisfaction and a sense of accomplishment that cannot be replaced by any monetary or material objects. Her smiles brighten my day and deliver a sense of peace in my heart.

Mrs KIM reminds me of my mother in Korea who is living in a retirement village. She has been living with memory loss for the past 15 years. I wish my mother could enjoy a similar life as Mrs Kim!

The courage to face future challenges
One day, I will get old and will very likely follow Mrs Kim’s footsteps of living in an aged care home. She has demonstrated to me how to grow old gracefully, and how to be contented with what we have. That alone gives me the confidence in facing future situations. I have learnt that dreams will not come true unless you are proactively working on them. We can’t just sit there waiting for the ‘miracle’ to land on us. Destiny is in our hands.

My commitment to Mrs Kim
I know my friend is expecting me every Tuesday. I allow myself no excuse to disappoint her. We enjoy each other’s company. She never asks me to bring her things. But during my previous visit, she expressed her wish to have a home cooked meal. Without a single tooth remains, what could I cook for her? After consultation with facility staff, we worked out that pumpkin soup with a touch of Korean favour would best suit her.

I would never forget that sense of enjoyment and pleasure displayed on her face when she tasted the first spoon of the home-made soup. I then realized that happiness is something really basic and primordial, that every one of us can deliver!
This year, a My Health Record will be created for every Australian known to Medicare or the Department of Veterans’ Affairs unless you decide not to have one. A three month opt-out period is now open until 15 October 2018.

What is My Health Record?
My Health Record is Australia’s national digital health record system, which allows you to access your health information from any computer or device that’s connected to the internet, at anytime and anywhere in Australia.

What is included in your ‘My Health Record’?
My Health Record brings together health information from you, your healthcare providers and Medicare.

Healthcare providers can add clinical documents about your health to your record. They include:
• an overview of your health uploaded by your doctor, called a shared health summary. This is a useful reference for new doctors or other healthcare providers you visit
• hospital discharge summaries
• reports from test and scans, like blood tests
• medications that your doctor has prescribed to you

• referral letters from your doctor(s)

Medicare data can be added to your record. This includes:
• Medicare and Pharmaceutical Benefits Scheme (PBS) information held by the Department of Human Services
• Medicare and Repatriation Schedule of Pharmaceutical Benefits (RPBS) information stored by the Department of Veterans’ Affairs (DVA)
• organ donation decisions
• immunisations decisions that are included in the Australian Immunisation Register, including childhood immunisations and other immunisations received

You, or someone authorised to represent you, can share additional information in your record that may be important for your healthcare providers to know about you. This includes:
• contact numbers and emergency contact details
• current medications
• allergy information and any previous allergic reactions
• Indigenous status
• Veterans’ or Australian Defence Force status
• your advance care plan or contact details of your custodian
How My Health Record benefits you

Access to your key health information in an emergency
In a medical emergency, healthcare providers connected to the My Health Record system can see your health information such as allergies, medicines and immunisations. This helps them to provide you with the best possible treatment and care.

A convenient snapshot of your health
When your healthcare provider uses your My Health Record, you won’t need to remember all the details of your medical story, such as your prescriptions or the names of tests you’ve had.

Better connected care
As more people use the My Health Record system, Australia’s national health system will become better connected. The result is safer, faster and more efficient care for you and your family.

Personally controlled
It’s your choice who sees your My Health Record and what’s in it. You can choose to share your information with the healthcare providers involved in your care. By allowing your doctors to upload, view and share documents in your My Health Record, they will have a more detailed picture with which to make decisions, diagnose and provide treatment to you. You can also ask that some information not be uploaded to your record.

A secure system
My Health Record has multi-layered and strong safeguards in place to protect your information including encryption, firewalls, secure login, authentication mechanisms and audit logging.
There are strict rules and regulations about who can see and use your My Health Record to protect your information from misuse.

Your health information in one place
Your health information will be available in one place, which means it can be easily accessed by your doctors, specialists or hospitals.

Once it’s set up you don’t need to do anything. Health information can be viewed securely online, anywhere, anytime – even if you move or travel interstate. You can access your health information from any computer or device connected to the internet.

Opting Out
If you don’t have a My Health Record and don’t want one created for you, you will need to opt out between 16 July and 15 October 2018.

If you already have a My Health Record, and decide you don’t want one anymore, you can cancel it at any time.

However, if you decide later that you would like a My Health Record, you can create one at any time.

(Source: MyHealthRecord.gov.au)
There’s more to oranges than meets the eye — or in this case, eye diseases.

Oranges have always been known for their Vitamin C and health benefits, but a new study has shown that people who regularly eat oranges are less likely to develop macular degeneration.

Researchers at the Westmead Institute for Medical Research interviewed more than 2000 Australian adults aged over 50 and followed them over a 15-year period. The research showed that people who ate at least one serving of oranges every day had more than a 60% reduced risk of developing late macular degeneration 15 years thereafter.

Lead Researcher Associate Professor Bamini Gopinath from the University of Sydney said the data showed that flavonoids in oranges appear to help prevent against the eye disease.

“Essentially we found that people who eat at least one serve of orange every day have a reduced risk of developing macular degeneration compared with people who never eat oranges,” she said. “Even eating an orange once a week seems to offer significant benefits.

“The data shows that flavonoids found in oranges appear to help protect against the disease.”

Associate Professor Gopinath said that until now, most research has focused on the effects of common nutrients such as vitamins C, E and A on the eyes. “Our research is different because we focused on the relationship between flavonoids and macular degeneration.”

Flavonoids are powerful antioxidants found in almost all fruits and vegetables, and they have important anti-inflammatory benefits for the immune system.

“We examined common foods that contain flavonoids, such as tea, apples, red wine and oranges. Significantly, the data did not show a relationship between other food sources protecting the eyes against the disease,” she said.

One in seven Australians over 50 have some signs of macular degeneration. Age is the strongest known risk factor and the disease is more likely to occur after the age of 50. There is currently no cure for the disease.

The research compiled data from the Blue Mountains Eye Study, a benchmark population-based study that started in 1992. It is one of the world’s largest epidemiology studies, measuring diet and lifestyle factors against health outcomes and a range of chronic diseases. The research is available online at the American Journal of Clinical Nutrition.

Read more:
Who are our Visitors?  
(2018 September Statistics)

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Royal Commission into Aged Care Quality and Safety

On Sunday 16 September, Prime Minister Scott Morrison announced the Government’s decision to ask the Governor General to establish a Royal Commission into the aged care sector.

The Minister for Senior Australians and Aged Care, the Hon Ken Wyatt AM, MP has since written a letter to the aged care workforce about the Royal Commission into Aged Care Quality and Safety.

The Royal Commission will primarily look at the quality of care provided in residential and home aged care to senior Australians. It will also include young Australians with disabilities living in residential aged care settings.

It is anticipated it will cover:

The quality of care provided to older Australians, and the extent of substandard care; The challenge of providing care to Australians with disabilities living in residential aged care, particularly younger people with disabilities; The challenge of supporting the increasing number of Australians suffering dementia and addressing their care needs as they age; The future challenges and opportunities for delivering aged care services in the context of changing demographics, including in remote, rural and regional Australia; And other matters that the Royal Commission considers necessary.”
We would like to welcome our latest community visitors who have joined the Scheme since the last newsletter.

Rajaratnam GANESHARATNAM visiting Jesmond Aged Care Home
Eun Yeong KIM (Lily) visiting Baptist Home – Cooinda Court
Wan Wen LI visiting Indo-Chinese Elderly Hostel
Ravishankar SANKARAPICHAI visiting Jesmond NH
Guang YANG visiting Fairlea Penshurst
Ruth SANZ MARONAS visiting Lady of Grace Aged Care Home
Masahiro INOUE visiting Willowood Aged Care Home
Yuyu ZHONG visiting Fairlea Penshurst Aged Care Home
Que Phuong LUU visiting Lansdowne Nursing Home
Donata PARUSZEWSKA visiting Annie Green Court

A special thank you is extended to these new visitors and our existing visitors, who work tirelessly on their own, making a difference in the lives of many lonely, older people. And a big thank you to those special ones who continue their difficult journey when their ‘friend’ passes away.

The Beauty of Human Relations

A man married a beautiful girl. He loved her very much.

One day, she got a skin disease. Slowly she started to lose her beauty. It so happened that one day her husband left for a tour. While returning from the tour, he met with an accident and lost his eyesight. However, their married life continued as usual. But as days passed, she lost her beauty gradually. Blind husband did not know this and there was not any difference in their married life. He continued to love her and she also loved him very much.

One day she died. Her death bought him great sorrow. He finished all her last rites and wanted to leave that town.

A man from behind called and said, ‘now how will you be able to walk all alone? All these days your wife used to help you.’

He replied, ‘I am not blind. I was acting, because if she knew I could see her ugliness it would have pained her more than her disease. So I pretended to be blind. She was a very good wife. I only wanted to keep her happy.’

Moral: sometimes it is good for us to act blind and ignore one another’s short comings, in order to be happy.
1. ‘Alone I can say’ but together we can ‘talk’.
2. ‘Alone I can enjoy’ but together we can ‘celebrate’.
3. ‘Alone I can smile’ but together we can ‘laugh’.

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