



## September 2021 Newsletter

Our mission is to provide a supportive and informative environment for people with lung conditions and their carers.

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**NEXT MEETING:** Thursday 11th November 2021  
10:15 am - 12 noon  
Weston Creek Labor Club  
Teesdale Close, Stirling ACT 2611

As a result of the ACT lockdown there will be no meeting in October.

### From the Editor – Lockdown, Zooming and more...

The inevitable finally happened at 5:00 pm on Thursday 12 August 2021, when Canberra went into lockdown. That, as it so happened, was the day of our August meeting, so members were able to enjoy each other's company one last time before going home to 'hide away'. We hope that all our members have kept safe and found ways to overcome the difficulties that lockdown can bring.

Your Editor's days have included plenty of exercise, including going out on **daily walks** with his wife, Dianne. He is also doing **Pilates** and **stretching** sessions put on by the instructors from Pilates Centre in Phillip. These sessions are delivered on-line via **Zoom**. It isn't the only time he has used Zoom as he did an enjoyable Q and A session with the **ANU medical students**. (see p.5)



This photo was taken while out walking at Isaacs Ridge. We are spoilt in Canberra the 'bush capital'.

## Richard White and the Clare Holland House extension

One of our members **Richard White** has been responsible for organising an extension to Clare Holland House (CCH). He has worked with his son **Daniel White JP** (who is a scientific officer from Therapeutic Goods Administration), **Michael Moore** (a previous Health Minister), **Dr Suharsha Kanathigoda** (Director of CHH), and the **Snow Foundation** on this project. **Terry Snow**, owner of Canberra Airport, kicked off the project with a \$2 million donation from the Foundation, and he approached Greg Hunt (Health Minister) who pledged a further \$4 million. Richard was present at the sod-turning on 28 August 2020.



In June of this year the project was completed and there were about 100 plus souls at the opening of the new wing on Friday 25 June 2021. Paul House, a Ngambri-Ngunnawal custodian, started the day with a meaningful and symbolic Welcome to Country. Then the ashes from the sod-turning, smoking ceremony held in 2020 were returned.

Terry Snow dug the ashes back in the garden bed of the new wing as Paul played the Didgeridoo. Barb Reid (Calvary Health Care ACT Regional CEO), Terry Snow, and Health Minister Rachel Stephen-Smith MLA, all then spoke to those assembled. The Archbishop of Canberra and Goulburn, The Most Reverend Christopher Prowse concluded the ceremony with a blessing of the new wing.

There are an additional eight beds following the \$6 million expansion providing space for an additional 250 patients a year.

Michael Moore - who in 2000 as ACT Health Minister had the vision to have the palliative hospital built at the location - was unable to attend. He is still a very busy man, and on this occasion, he was in Bega as part of his duties as the Rotary District Governor of ACT and Region.

**Richard arranged for Michael to accompany him on a private inspection of the completed work** (see photo) on the 11 August 2021, whereby they were able to walk through the building to view the extensions. They also examined many of the photos on the walls of Clare Holland House. Michael also spoke with the Manager of CHH, Robyn, and expressed his appreciation for all the work done and how happy he was with the outcome.



Personally Michael told Richard he was delighted that his initial work and planning for CHH was achieved in record time and that the level of works on this extension were in keeping with the facility.

Information provided by **Richard White** along with additional material from the Snow Foundation website: <https://www.snowfoundation.org.au/clare-holland-house-expansion-complete/>.

## Hospital in the Home (HITH)

Many health services in most states in Australia operate Hospital in the Home services, allowing patients to receive nursing care, allied health care and medical care in their own home. Being treated at home is better for the patient in many ways. It also frees up beds for those who are more severely unwell.

Hospital in the Home involves very active monitoring. If the situation worsens, the patient will be transferred to hospital quite quickly via ambulance.

**Traditionally, there were two main kinds of Hospital in the Home services:**

- One form of this service aims to **prevent people from being admitted** to hospital. That might be, for example, someone with diabetes who has been having trouble controlling their condition. Other conditions that can sometimes be managed via Hospital in the Home care include: pneumonia, deep vein thrombosis, chronic obstructive pulmonary disease (COPD) and urinary tract infections.
- The other main type of Hospital in the Home care is **early discharge**. Hospital in the Home helps get you out of hospital earlier so you can get your recovery and rehabilitation started at home quicker; you might still be receiving quite an intense level of care, but you can receive it at home.

Research on the use of Hospital in the Home services is associated with a lower likelihood of readmission within 28 days and lower rates of patient deaths, compared with being an inpatient.

Home is a less stressful environment and is less disruptive at night (allowing for better quality of sleep). You don't have to share a room with a stranger. Also, your carers and family can be with you in a way that's much more convenient for them. And crucially, you are less likely to pick up a hospital-acquired infection.

Martin Hensher Associate Professor of Health Systems Financing & Organisation,  
[Deakin University](#) [Martin Hensher – The Conversation](#) adapted by **Helen Cotter**.

### Editor's Note

Your Editor made use of the **Hospital in the Home** service earlier this year when he was admitted to Canberra Hospital with a blood clot on his lung. After just spending one night in hospital he was allowed to go home and a nurse came to his house - daily at first and then every second day – to do a blood test, check on his overall health, and make sure that he was coping well with the medication regime. There is also a room at Canberra Hospital where Hospital in the Home patients go to so that they can be seen by a doctor. Your Editor went there twice before being discharged from the program.





## Back to 'Skool Daze' - Chris Moyle

Chris mentioned in the August edition of the newsletter that algebra wasn't her best subject at high school. Why was this?

This might partly have been because I was tall and always placed at the back of the classroom. It was about four months through the school year before it was picked up that I couldn't correctly read the numbers on the blackboard. So a letter went home to my parents, and I returned with rather ugly glasses to correct my short-sightedness.

They didn't help my maths score a great deal and the following year I went into a non-academic class, touted as 'the worst class in the school' – for dunderheads, I think. There were less taxing subjects to deal with and of course the compulsory religious instruction.

It was near Easter and the female teacher had been explaining to her class of girls the lead up to Christ's crucifixion. To test us she asked, 'What are the passion plays?' There was a long silence and she asked us again. Time was dragging on, so I raised my hand to give an answer and finalise the matter.

'Yes Christine,' said the teacher. 'What are passion plays?'

'Love stories,' I blurted out. At this point the whole class erupted with laughter, which only made our lady angry.

Rather than ending the matter we received a ten minute lecture on the nonsense of love stories and our appalling lack of respect. Finally she closed with another crushing reminder that we girls were indeed in **the worst class of the school!**

**This prompted your Editor to write about his time at school...**

With Chris being placed in the back row based on her height your editor was reminded of how the teacher organised the seating in his fifth grade class. In this class where you sat was determined by how well you had performed the previous term. Those who had done well got the prime seats in the back row and so it went until those with the worst results were somewhat embarrassingly placed up front near the teacher.

Tim, who topped the class each term, had the most prestigious seat in the back corner. Many years later your Editor was watching *Who Wants to be a Millionaire* and there was Tim. Over two nights he steadily answered question after question before gracefully retiring \$250,000 richer.

## Zooming with the ANU Medical Students – Geoff Cox

The Canberra Lung Life Support Group has a history of helping the students from ANU to better understand the type of person they might be asked to treat when they are a qualified practitioner. This has usually been done face to face in small groups. The current health crisis has meant that this has not been possible in recent times.



I'm sure we all can all remember when a classroom looked like this. Rows of wooden desks. However, unlike the class Chris was in, this one was co-educational.

This year a Zoom meeting was arranged so that the students could hear from someone who has had a variety of medical conditions. Your Editor was interviewed by Dr Matt Lucas in the comfort of his own living room, while around 100 students and other medical practitioners listened in. At the conclusion of the interview the students and doctors had an opportunity to pose additional questions for me to answer.

It was a very interesting worthwhile experience for all involved. As the students were in their first year of medical studies, they are only just beginning to understand the complexity of issues both medical and personal that a patient may have.

While hopefully we may be able to return to face to face meetings sometime in the not too far distant future this proved to be a successful alternative.

## A Traveller's Tale – Chris Moyle

Many of us will recall some interesting incidents from our travels abroad – from the time when this was what we did!

### **'War is God's way of teaching Americans geography' anon.**

This quote reminds me of travelling in the United States in the 1970s and having a couple ask me, 'Where are you from?'

'Australia,' I replied.

'You mean Austria?' said the woman.

'No – Australia,' I reiterated. Then, looking to her husband for clarification, she asked, 'Is that one of ours?'

It never did get properly sorted out.

A little later, in the deep south, our coach tour stopped at a roadside diner. The friendly waitress enquired, 'Where're you folks from?'

'Australia' and 'New Zealand' we replied.

Then I heard, 'Gee you speak good English.....but I suppose they teach you that in your schools.'

Hopefully enlightenment has prevailed since then.

### **This reminded your Editor of an interesting incident he had abroad...**

Your Editor was backpacking with his then girlfriend - now wife - Dianne through the UK, Europe, and Asia in the 1989.

*One evening we were chatting in the common room of the YHA in Interlaken – that's at the foot of the Swiss Alps if you haven't heard of it – when a young American hosteller enquired as to what language we were speaking!*



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Your Editor 1989 style, by  
Lake Brienz, Interlaken,  
Switzerland.

# USEFUL NUMBERS AND WEBSITES

## Health Support:

**Lung Foundation Australia** is the national non-government body for lung health information and has a variety of useful information. Phone 1800 654 301 or [www.lungfoundation.com.au](http://www.lungfoundation.com.au).

## Travel information:

**ACTION:** Phone 13 17 10. Web site: <https://www.transport.act.gov.au>.

**Flexible bus service:** a free service that picks up from your home and takes you to places in your zone. Phone 02 6205 3555 or email: [flexiblebusservice@act.gov.au](mailto:flexiblebusservice@act.gov.au).

**Taxi Subsidy Scheme:** Phone 02 6205 1012.

**Interstate Patient Travel Assistance Scheme:** for those who need to travel interstate for medical treatment: Phone 02 5124 9082 or email: [IPTAS@act.gov.au](mailto:IPTAS@act.gov.au).

**Incidents and complaints:** Phone the Office of Regulatory Services (Public Transport Regulation) on 02 6205 4585 or email [taxiservices@act.gov.au](mailto:taxiservices@act.gov.au).

**Seniors Moving Safely:** road safety for older people, at <https://acrs.org.au/trust-report/seniors-moving-safely>.

**ACT Engine Immobiliser Scheme:** aims to reduce motor vehicle theft in the ACT by discounting the fitting of engine immobilisers to seniors' cars. For more information call Canberra Connect on 13 22 81.

**Service Stations Providing Driveway Service:** service stations where staff will (sometimes or always) provide driveway service for people with disabilities. Phone Access City Hotline 02 6257 3077.

## Oxygen and life support information:

**Oxygen provision:** Provided free to those identified as needing oxygen by a respiratory specialist. Phone 02 5124 1063; email: [oxygen@act.gov.au](mailto:oxygen@act.gov.au); CPAP provision also available for CPAP clients who meet the criteria.

**Essential Medical Equipment Payment:** provided annually to those who use oxygen, CPAP or other life support equipment. For more details, type in: *essential medical equipment payment* or check with Centrelink

**ACT Electricity Rebate:** The ACT Government provides a rebate for users of life support equipment such as oxygen or CPAP. For more details, contact: type in *ACT life support rebate* or [www.revenue.act.gov.au/community-assistance/life-support-rebate](http://www.revenue.act.gov.au/community-assistance/life-support-rebate).

## General information:

**COTA ACT Seniors Information Line:** Phone 02 6282 3777 (business hours Monday to Friday) or [www.seniors.act.gov.au](http://www.seniors.act.gov.au).

**National Toilet Map:** You can find a map showing the location of all Canberra's public toilets at [www.toiletmap.gov.au](http://www.toiletmap.gov.au).

## Can You Help?

Do you enjoy reading the newsletter? Would you like to help the Lung Life Group from the comfort of your own home? If so, we are looking for a **new sub-editor** to help us put the newsletter together each month.

The primary role of a sub-editor is to read the drafts of the newsletter each month and spot any typos, punctuation errors etc. Sometimes a sub-editor spots something in a photo and suggests a change. You don't need above average computer skills as your Editor will make the necessary changes to the document. As long as you can use email to send and receive information and have an eye for detail you have the required skills. Finally, for all our readers, the newsletter is a joint effort, so if you have an article or photo of your own that you would like to contribute simply email it to the Editor.

**If you would like to know more, please contact your Editor, Geoff Cox by phone or email.**