

ADELAIDE NORTH-WEST BRANCH NEWSLETTER

August, 2024

Meeting at 1.30 pm on the fourth Wednesday of each month at Lockleys Baptist Church house, 244 Henley Beach Road, Underdale

Entrance & Parking - Drive through carport to rear of building

COMMITTEE

PresidentBrian Mi	bus (0417 887701)	Activities Coordinator	Annie McCall
Vice-President Trevor Mo	olde (0417 838740)	Committee	Jeanette Molde
Secretary Kathy Hanc	ock (0432 101372)	Newsletter Trish Mi	bus (0407 605091)
Treasurer	Mayis Smith		

2024 CALENDAR

DATE All dates are Wednesdays	ACTIVITY	AFTERNOON TEA
August 28, 1.30 pm	Annual General Meeting GUEST SPEAKER – Radio Plays – John Graham	Lynda Scantlebury
September 11, 10.30 am	LUNCH – The Bay Discovery Centre/Bakery	
September 25, 1.30 pm	GUEST SPEAKER –Artificial Intelligence – Trevor Molde	Mavis Smith
October 9, 10.30 am	OUTING & LUNCH – Airport – Vickers Vimy tour and lunch at café	
October 23, 1.30 pm	GUEST SPEAKER – Hearing Dogs - Jess	Dawn Thomas
November 13, 12 noon	LUNCH – Lockleys Hotel – Christmas lunch	
November 27, 1.30 pm	GUEST SPEAKER – Wetlands – David Jarman	Kathy Hancock

Our July Guest Speaker

Dominique Birbeck - Optometrist and Eye Health Educator Who's Looking After Your Eyes?

- Dominique is an Eye Health Educator with Sight for All and an Optometrist at SAHMRI.
- Site for All holds sessions to educate people on how to look after their eyes.
- It's important to have your eyes checked regularly by a health professional to check your vision and to eliminate treatable blindness.

Our vision is important for

- Mobility
- Driving
- o Communication
- Education
- o Employment

Common Causes of eye problems

- Refractive error a type of vision problem that makes it hard to see clearly. Refractive errors are the most common type of vision problems.
 - Myopia short sighted
 - o Hyperopia Long sighted
 - Astigmatism Irregular curvature, when the cornea or lens has a different shape than normal
 - Presbyopia Age related Trouble with seeing things up close

Treatment – Glasses or contact lens or laser surgery.

- Cataracts the lens becomes cloudy.
 - Age related (usually)
 - Symptoms smeary and colour reduced
 - Progresses slowly

Treatment – In the early stages – change glasses. Sunglasses are recommended.

Cataract surgery is relatively safe and takes about 20 mins per eye. Prescription put into intraocular lens will help with vision.

 Age-related Macular Degeneration (AMD) – causes progressive loss of central vision, leaving the peripheral vision intact.

Risk Factors - Age, family history, smoking. Stages of AMD

- Early & Intermediate AMD caused by build-up of waste material (drusen) under the retina.
- Late AMD vision threatening stage.
 Dry (atrophic), Wet (neovascular).

There is currently no medical treatments for early and intermediate AMD and dry (atrophic) AMD, but there is highly effective medical treatment available for wet (neovascular) AMD.

Diabetic Eye Disease

- Type 1 Diagnosed usually before the age of 18.
- Type 2 Usually over 45.
- Gestational Diabetes Usually resolves after birth, but the mother and baby are at risk of Type 2 Diabetes later in life.
- o Diabetic Retinopathy
- Diabetic Macular Oedema

Monitor diabetes, blood sugar and blood pressure levels.

Recommend eye test every year.

 Glaucoma - A group of eye diseases that damage the optic nerve and can cause vision loss and blindness. Impacts side vision first and eventually tunnel vision.

Risk Factors – Diabetes and family history.

Treatment – Eye drops, laser treatment or surgery.

Who looks after our eyes?

- Optometrist
- Optical Dispenser
- Ophthalmologist
- Orthoptist (medical imaging)

What should we do to look after our eyes

- Regular eye examination (over 65 test every year
- Healthy lifestyle
- Know family history
- Wear eye protection
- Utilise resources and support

Helpful sites

goodvisionforlife.com sightforall.com



Adelaide North West Advocacy Day

Thanks to Kathy, our hard working Secretary, for the tremendous amount of work she put in to ensure the success of the day

National Seniors Australia (NSA) News

From National Seniors September Connect Newsletter

Aged care reform: slow, disjointed and understaffed

The Federal Government is changing the aged care system, but its own reform overseer says it has six months to do better.

The agency set up to monitor the implementation of recommendations made by the Aged Care Royal Commission says the Federal Government must do more, do it better, more quickly and with more funding.

In its report on the government's progress in implementing the recommendations, the Office of the Inspector General of Aged Care was particularly critical of delays in:

- Bringing forward new aged care legislation
- Establishing the new support at home program
- Providing more funding for home support services and more Home Care Packages in response to unmet need and long waiting times

The report emphasised "the critical importance of there being no further delays" and set a six-month timeframe for the government to lift its performance.

Reform failures, so far

- Accessing aged care: Not everyone who needs care can get it when and where they need it. People find it difficult to access the aged care system, for reasons including due to the rationing of services, and then navigating to timely and appropriate care within it.
- **Improving information**: Older Australians find it hard to know where to start when looking for aged care. The starting point the government's My Aged Care system is not easy to use or to understand.
- Wait times are too long: People must wait a long time for their assessment then for care, which causes problems if they get sick or injured, or less able to look after themselves while they are waiting. The Inspector General wants the process to be faster and for people to get more face-to-face support when they are looking for aged care.
- Workforce shortage: The report gets to the point, "There aren't enough workers in aged care" and governments across the board must do more and faster.

National Seniors Australia has told the Federal Government that workforce numbers can be boosted by retaining the older aged care workers, who are leaving the sector in increasing numbers at a time they are needed the most.

This can be done by <u>exempting employment income from the income test</u> for pensioners working in the care economy (aged, disability, child care). This will give older workers greater income and retain more people in the care sector, ensuring care services can be delivered.

We have also called for greater emphasis on home care and for funding to boost the number of home care places available. This is a must if we are to meet growing demand, but only if the workforce exists.

Extracted from article by John Austin, Policy and Communications Officer, National Seniors Australia

Click the link below to read the full article.

Aged care reform: slow, disjointed and understaffed - National Seniors Australia