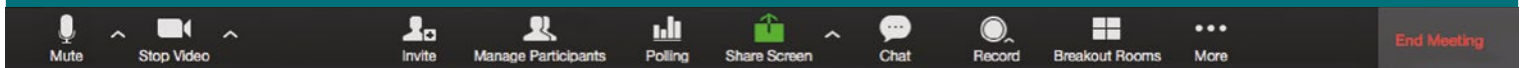




Changing the way we meet.
Stories from a more online world.



Shine

Sharing stories, ideas and news across
Lifetime Care and Workers Care.

Winter 2020

Welcome

Hello everyone

It has been a tough first half of the year as we have moved from one crisis to another. Dealing with the bushfires across the country at the beginning of the year, and more recently COVID-19, we have been working hard to ensure your programs and services are disrupted as little as possible. This edition of *Shine* focuses on the additional ways we can support you through the events of 2020.

When the bushfires began in November we contacted participants and workers to ensure they were safe. You can read about how we supported people during the bushfires in this issue.

As we continue to work through the impacts of COVID-19, our focus is to make sure you feel supported during this period. Our services will continue, and we will continue assisting you with your treatment and care needs.

We've been working on how to deliver services in different and flexible ways. Many of our programs are now being delivered online and we are continuing to look at new ways to ensure your care needs are met during these times. One way we have done this is through the relaunch of our *wecare* program providing support to families. You can also read about that on the next page.

I hope you stay safe and well as we continue to work through these challenging times.



Regards

Dr Nick Allsop

Group Executive,
Care

Caring for the carers

The *wecare* program

We talk with ELENA KATRAKIS, CEO of Carers NSW, one of the state's main peak bodies supporting all informal, unpaid carers – mostly family members of those who have a serious disability or illness.

Elena has been working almost alone in the Carers NSW office for much of the last four COVID-19 months while most of her staff are working from home.

Her organisation supports and advocates for those many thousands of people in NSW who look after a parent, a partner, a child, a sibling, a friend who needs care due to ageing, disability, health or mental illness. These are people who do their work largely unsupported and for love.

Caring for a family member with a severe injury can be lonely as well as physically and emotionally draining. Many carers put their own needs last and in the process many experience a range of emotions such as anger, depression, anxiety, loss and grief.

Organisations such as Carers NSW are therefore very important in providing supports to this significant group in our community.

Elena has been CEO of Carers NSW since 2006. Before that she'd been a social worker and had worked in government agencies working particularly in the areas of homelessness and mental health.

"That work intersected a lot with family carers," she says, "so it gave me a particular interest in supporting carers as a group.

"We provide a lot of information, education and advice to carers," she says. "And we've got a lot of programs that focus on the needs of particular carer groups – such as young carers, older parent carers, or sibling carers.

"We've got an education and training team delivering advice to carers directly, to carer support agencies and also to service providers. And we have a large policy team to give us input into the government policy process."

“Children, particularly, can be a forgotten part of the dynamic when a parent has had a catastrophic accident and the focus is very much on the parent’s recovery and rehabilitation.”



wecare

“It was a healing process for me because I really was suffering, trying to keep all the balls in the air at the same time.”

– wecare participant

Having a loved one involved in a serious injury or accident can be a challenging time for families.

The wecare program has been developed in partnership with Carers NSW to provide support to family carers, both adults and children and young people who may be impacted. wecare recognises the experiences and challenges of informal family carers and provides support for family carers to foster their own health and wellbeing.

What is it?

wecare is a mentoring support program delivered by Carers NSW. Mentors work with your family through a program that will be tailored to the family’s specific needs.

There are two programs – one for adult carers and another for children and young people.

The wecare team deliver the program via Skype or Zoom meetings, or over the phone. Once COVID-19 restrictions have eased there is also the option of face-to-face sessions.

Find out more

Contact the wecare team directly at Carers NSW:

P: 02 9280 4744

E: wecare@carersnsw.org.au

www.carersnsw.org.au/wecare/

You can also discuss the program with your case manager or icare contact.

See the stories of three families who have benefited from wecare on our website:

www.icare.nsw.gov.au/news-and-stories/wecare-program-re-investment/

Providing wecare

Carers NSW works closely with icare, in particular through their joint partnership of wecare – a program to provide direct mentoring and support tools to family carers of Lifetime Care and Workers Care participants [see the box to the right].

“wecare has been going now for more than three years,” says Elena. “It just recommenced in April for another three-year contract, and currently we have nine adult carers in the program and three children.”

The program is flexible. Carers work through a number of modules at their own pace – it’s all customised for that individual.

“Children, particularly, can be a forgotten part of the dynamic when a parent has had a catastrophic accident and the focus is very much on the parent’s recovery and rehabilitation,” says Elena. “Children sometimes lose their voice in these situations.

“The mentoring helps the young person regain their voice and re-join things at school, all the time building strength, resilience and coping strategies.

“Anyone can refer a family to the wecare program. Sometimes it’s icare staff, sometimes rehab hospitals.”

“The lockdown has changed the way we work.

“The wecare mentoring, which had been mostly face-to-face, has had to go online of course,” says Elena. “With nearly everyone working from home, the lockdown has limited the sense of teamwork – you’re not sitting beside each other and troubleshooting stuff as you go.

“It’s certainly impacted our face-to-face education and training. We’ve moved everything online where we can, and we’re providing assistance in using the technology. But some of our older carers aren’t really OK using Zoom or Skype and prefer to wait till they can see us in-person again.

“Hopefully that won’t be too far away!”

“The lockdown has certainly impacted our face-to-face education and training. We’ve moved everything online where we can.”

Shine

A different issue of your magazine

As with so many things that have changed as a result of the COVID-19 shutdown, so has how we produce *Shine* for you. Interviews with all of the people profiled in this issue were completed over the phone or online through Skype or Zoom. We have also developed a digital version of *Shine* that can be emailed straight to you. We look forward to your feedback.

While we haven't been able to get out and about as much, we've taken the opportunity to profile leaders from three of the main industry bodies we work with. Synapse who support people with brain injuries; SCIA, working with those with spinal cord injuries; and Carers NSW who do invaluable work supporting informal family carers. They share unique insights into their work and the many resources they have available.

Two service providers, Sam and Melanie, tell us how their therapies have changed with the advent of COVID-19 and how they are still able to deliver services to the people they work with.

We have many inspiring stories in this issue of *Shine*. They offer support to others, while highlighting resilience and courage.

Therapy in the age of COVID-19

SAM GRANT and DR MELANIE MOSES talk to *Shine* about their work, how it has changed in recent months, and why staying connected matters.

Sam and Melanie are therapists who work with many people in Lifetime Care and Workers Care.

Sam is a clinical psychologist who supports those with a brain or spinal-cord injury. She also provides education and training to family members, other therapists and support workers who themselves are supporting individuals with a brain injury.

"I guess I try and increase the skills of everyone around the person with the injury because that person will need ongoing support due to the effects of the injury," she says. "I see my role as providing the skills and knowledge to do that job."

Melanie is a speech pathologist who works with people who have acquired communication and swallowing disorders. She is passionate about helping those who have communication challenges following a brain injury.

Communication is all

"Communication cuts across everything we do," says Melanie. "It's our ability to make friends, to stand up for ourselves, to express our wishes and choices. It's great to work collaboratively with other therapists in the team to help our clients achieve goals that really matter to them. Many of my clients find it hard to express their goals, particularly about their thinking or communication skills. In

contrast, if someone can't walk, they can more easily see the problem, and other people can see the problem so they can focus on recovery. They often aren't as aware of their communication difficulties or how these may impact on them. It's a lot more complex."

Needs change

The needs of each client change over time and the different stages of recovery. Sam and Melanie both work with one icare participant [Jon McWilliam featured in the last issue of *Shine*] who volunteers his time at a breakfast club at the local school in Griffith.

"We focus on the skills Jon needs to engage effectively," says Melanie. "Recently we've been helping him work out how to buy a puppy, how to ask the right questions, helping him self-advocate. Communication is about regaining control over your world after you've had a severe injury and are extremely vulnerable. We help our clients work out how to seek information, making sure they're understood and making sure their own needs are being met."

"Training up family members is always dependent on the journey someone is on, and the timing," says Sam. "In the initial stage family members will be so



Sam Grant

grateful that the person is alive. They are more tolerant, and they want to engage and learn. “Then that changes, and family members start the grieving process. They start to think, for example, ‘This person is not the person I knew before the accident’. Then you start to see barriers. ‘You don’t really know them’, ‘You don’t live with them’ etc. That becomes more challenging and we have to invest more time and work differently.”

Working in the time of COVID-19

Sam and Melanie have both used “telehealth” before the lockdown commenced. They have clients in regional or remote parts of the state who they would visit on a scheduled basis and then do follow-up sessions by phone or video. But now, nearly all face-to-face support work has had to move online.

“For many people with a brain injury it can be difficult to stay focused and they can easily become distracted, so having to focus on one thing like a computer screen is often helpful,” says Sam.

“This whole period has given therapists opportunities to think outside the square.”



Dr Melanie Moses

“But as a psychologist, the general disadvantage of telehealth is that you can miss a lot of cues you’d normally pick up. Also, in most regular therapy sessions you sit side-on to the client, and it’s very unusual to do therapy face-on as you do on a screen. There’s evidence that the left side of your brain talks to the left side of the listener’s brain, and you don’t get that via a computer screen. On the other hand, telehealth can work well for problem solving and for education.”

The importance of connections

“Connecting participants to each other is something that we’ve been able to do a lot more of during the lockdown,” says Melanie. “We’ve had success pairing up a few participants online, chatting to each other one-on-one. Many of them have tablets and we have trained them to use Zoom, so just connecting them – with us in the background – works really well. From a speech pathology point of view it provides a valuable and empowering opportunity for people who are isolated to chat and offer each other advice while practising important communication skills.”

“Communication is about regaining control over your world after you’ve had a severe injury and are extremely vulnerable.”

And Sam points out that participants are now accessing specialist services online that they couldn’t before when they had to go in person.

“COVID-19 has opened lots of doors like this – it’s been really positive.

“But there are also downsides. It’s important for people to spend time in different environments, since transferring skills from one environment to another is often hard for them. And it can be frustrating being in the one environment for too long. So telehealth does lose something in that area.”

“This whole period has given therapists opportunities to think outside the square,” says Melanie. “Many therapists will probably keep using some of these resources long-term because clients will benefit.”

“For me, communication is best practiced in the relevant environment, so I’m looking forward to resuming face-2-face therapy soon.”

“It’s also been strangely empowering,” adds Sam. “Social isolation, which is the normal life for many people living with a brain injury, has become the default life for everyone else during this lockdown – ‘Hey, look, I’m doing what everyone else is doing!’”

Spinal cord injuries in the time of pandemic



ROB WYNN spoke to *Shine* about his work and how it has changed since the arrival of COVID-19.

Rob is the Peer and Family Support Manager at Spinal Cord Injuries Australia (SCIA), one of Australia's peak bodies for people living with a spinal cord injury and other neurological conditions. He's been in the job for some eight years.

"I look after a team of five peer and family support coordinators. We all have a diverse range of disabilities. I was injured 12 years ago and, because I'd had a good rehab experience and good support, I came to work at SCIA to give something back.

Lived experience

"All the family support coordinators also have what we call a 'lived experience of disability' meaning we've had at least a couple of years getting back into the community and coming to terms with our injury."

The coordinators work in all the hospital spinal units in Sydney and give practical non-clinical lifestyle advice. They work with injured people in that critical stage between admission and when they leave rehab to return to the community.

"The peer-support coordinators need to be good listeners and we also try and match our people to clients around the same age - it helps with the rapport and the engagement. It's not compulsory, but most icare participants in the spinal units join up for the program. We offer education on bowel, bladder, continence and sexuality issues, plus pressure injuries and wheelchair skills. We also provide advice around mental health and anxiety, as well as organise BBQs and other social activities."

"We have a great relationship with icare," says Rob. "We've worked with them on a variety of projects over the years and they're now funding the peer support service. It's a good transparent relationship where both organisations have the same goals."

Changes during the pandemic

SCIA has moved nearly all its peer support work online over the past few months.

"While face-to-face is really the best form of peer support, the online version works pretty well," says Rob. "We've had a good uptake to the program since we've been in lockdown and clients can drop in to the online programs easily.

"We know it doesn't work for everyone, but feedback has been good. We've also made it very two-way. We've done surveys of our clients and asked what they most need and what they're most worried about. We've put together a lot of self-help videos on our social media and online forums addressing some of the issues they've raised, like how to exercise at home, and tips about how to live with a spinal cord injury.

"There's a heightened anxiety in the spinal cord community at the moment," Rob continues. "We're all feeling a little vulnerable about our own health, so the coronavirus is a huge worry. And as society reopens, that worry is going to continue.

"But there are lots of positives for SCIA from the lockdown. We've shown we can communicate adaptively with our clients. We've developed a lot of flexible, useful online services and shown we can do a lot of educational work remotely and reach people in regional areas we weren't reaching before.

"I think it's actually brought us closer to our clients."

“ I was injured 12 years ago and, because I'd had a good rehab experience and good support, I came to work at SCIA to give something back. ”

Helping people living with brain injury



Jennifer Cullen



Sonya Green

JENNIFER CULLEN and SONYA GREEN work for Synapse, one of the peak bodies supporting people impacted by brain injury. Synapse runs a number of projects directly with icare that benefit and support people in Lifetime Care and Workers Care.

Synapse helps to improve the services and systems for people living with brain injury through information and referrals, advocacy and peer/family support programs. Synapse believes everyone deserves control over of their life and to make choices that are important to them.

Jennifer has been the organisation's CEO for the past 12 years, and Sonya is Project Manager for Community Partnerships.

"The icare Foundation fund our Reconnections program," says Sonya. "The program has two family liaison officers who have lived experience of brain injury so they know what participants and their families have been through." *[See Damien's story on the next page about his journey to working as a family liaison officer.]*

Reconnections also operates through regional groups where participants can learn from other people's stories and hear about different experiences of brain injury.

Another Synapse project supported by icare is the online brain injury forum, a secure space where participants can discuss their experiences with a supportive community of people living and working with brain injury. Participants can talk to others with similar experiences who also understand life after a brain injury.

COVID-19 changes

"When the lockdown started we ramped up our online programs," says Jennifer.

"We already had two closed Facebook groups – one for people with a brain injury and another for carers and family members – both moderated by our staff. We've had a lot of new requests to join and we've been able to expand and adapt the groups."

"COVID-19 has forced us to make the groups broader to keep them going," adds Sonya. "Some are more structured with a guest speaker, while others are more informal where people just come and talk about how they're feeling."

"One of the adaptations we've made has been a new anonymous forum covering topics like brain injury and sexuality," says Jennifer. "It's been very successful. A lot of really good, open discussion, and it's been helped by being anonymous."

"And we'll keep these going. The feedback is that people like the new service offerings they are seeing now."

"There's been no reduction during the lockdown period in the way people contact us – by phone or by web inquiry."

"We think there are going to be exciting opportunities for new accessible apps that work for people with speech and motor-skill difficulties."

"But I don't think face-to-face will ever be replaced."

“When the lockdown started we ramped up our online programs.”

"One thing that really hit home for us during the lockdown," says Sonya, "was that the rest of society was experiencing the social isolation that for people living with a brain injury is their everyday norm. As a member of one of the Facebook Reconnections groups said, 'Now the rest of the world knows what we are experiencing'."

Damien is helping others like himself with a brain injury

Damien is in the Workers Care Program



Damien Mowle with his wife Rebecca. "She is my rock. Without her, I would not have got where I am today."

DAMIEN MOWLE lives in Medowie in the Hunter region with his wife Rebecca and four boys. For more than 30 years he worked as a roofer in the construction industry before an accident changed his life.

Damien's job was physically demanding with early morning starts and often weekend work.

In October 2016, on a day which started as any ordinary work day, Damien was on three-metre-high steel scaffold when the handrail slipped. He fell backwards, landed on the driveway and was taken to John Hunter Hospital where he was diagnosed with a brain injury. He spent a long time in rehabilitation.

Almost everything we do, say and think is controlled by our brain, so when someone's brain is injured, it can affect every aspect of life. The impacts are also felt by family and friends, particularly when the injury has resulted in personality or behaviour change.

“ You either laugh or you cry. If we can get through this, we can get through anything. ”

The following years were not easy for Damien or his family. He thought he could return to his job as a roofer but soon learnt this was not possible due to his injury. There were many tears and it felt like a big part of his identity was gone.

“I felt like there was nothing out there for me and I had to start again,” he says. “To be part of a society, be a better father, husband and friend.”

Living with his injury

Damien describes his working memory as shocking. To assist him, he has two note pads, one labelled “today” and one “tomorrow”. He lists all the things he needs to do in these notebooks and ticks them off as they are completed. He also focuses on one thing at a time rather than trying to multi-task.

Fatigue is also an issue. For him, all the years of physical work in the construction industry were not as tiring as the mental fatigue he now experiences.

“My battery is never full, and I understand it never will be. For 30 years I got up before 6am and I could work all day on a roof. Now the mental fatigue drains my battery”.

Another strategy Damien uses at home is a basket which he calls his memory box. In this, he keeps everyday items like keys, phone, wallet and sunglasses. The basket is kept in his office and he checks it before he leaves.

He also wears a Synapse band on his right wrist. If he moves the band to his left wrist, it is a visual reminder that he has started a task, such as turned the oven on. Once that is finished, he will place the band back on his right wrist. These strategies help him remember tasks he has through the day.

The VIP experience

In January 2019, Damien took part in icare's Vocational Intervention Program for people with traumatic brain injury. VIP helped Damien set new career goals. He realised he wanted to give back to the community and help others who have helped him. He enrolled in community services studies at TAFE, started in the Certificate IV and moved on to a Diploma in Case Management.

Through VIP, Damien received vocational counselling and support with retraining, studying, completing job applications and interview practice. This was a significant change as Damien had never completed formal study or a job interview before.



“ My battery is never full, and I understand it never will be. For 30 years I got up before 6am and I could work all day on a roof. Now the mental fatigue drains my battery. ”

Damien in Rankin Park Rehab Centre.

“Along the way I had some difficulties like writing out sentences, so my case manager Rebekah helped organise an iPad and a keyboard and I also recorded a lot of things to get through. I wouldn't have got through TAFE without her.”

A new type of work

When Damien saw the job of Family Liaison Officer with Synapse, he thought it was perfect for him. The role is part of the Synapse Reconnections project, funded by the icare Foundation. Synapse provides specialist services for people who have a brain injury, as well as carers and family members. *[See the story about Synapse on page 7.]*

“This role looked perfect for me. It involved making contact with patients and families in hospital after a brain injury and helping with the transition back to normal life.

“I'd never applied for a job in my life. I'd never had a job interview and here I was, nervous, in front of a panel of three people. Luckily I had a lot of support from my case manager and psychologist.”

Damien was successful and started the job in February this year, working out of his home office.

A typical day involves visiting people who have been admitted to the general neurology ward at John Hunter Hospital.

He makes contacts with the families to listen to them, share support and information, and give them hope. While some families are not responsive, others are happy to have someone to talk to.

He also visits the brain injury rehab ward where patients are a little further along in their recovery. He shares things that have helped him along the way and listens. “I encourage people to trust the process instead of butting heads with it,” he says. Damien doesn't think of it as a job. He enjoys the connections with the patients and understands what it is like to be in hospital, not able to feed yourself, forgetting things, for your family to be scared.

“Talking to someone validates their experience. It's the most powerful thing. They are not alone. These things do happen.”

With the impact of COVID-19, Damien has been keeping in touch with families by phone rather than visiting the hospital. But he can't wait to get back to the face-to-face visits. For him, it is powerful to connect regularly with those who have similar injuries and similar struggles to himself. With restrictions slowly easing, he is looking at ways to see people in their own time.

“I understand how important it is to have someone to listen. It's empowering to meet people on their journey.”

Family life is stronger

Since the accident, says Damien, his family has been spending more time together than when he was working as a roofer. He feels very supported by his wife and sons.

“You either laugh or you cry,” he says. “If we can get through this, we can get through anything.”

“My accident made a huge difference in my life. My outlook has changed and now I see what is important – it's connection. What else do we have without our family and others?”

“At the start it's doom and gloom,” he says to others going through a similar experience. “But there is light at the end. Don't be so hard on yourself. It's a long process and takes a long time to accept the 'new me'.”

“ Talking to someone validates their experience. It's the most powerful thing. They are not alone. ”

Rosie Attard: rolling onwards



Rosie and Annette

Rosie is a Lifetime Care participant

Shine first met ROSIE ATTARD 18 months ago. Since then she has become the inspiration for a children's book. We caught up with Rosie and the book's author, Annette Holley.

While driving to her final school assembly in Wauchope almost nine years ago, Rosie rolled her car resulting in incomplete C7 quadriplegia. Over the following years, Rosie rebuilt her life and found a passion for working with children.

"I was Rosie's first occupational therapist when she came out of hospital," says Annette. "We kept in touch and I watched as Rosie developed her career in childcare.

"We both realised that the kids in her childcare centre were learning about diversity and inclusion and disability in this lovely incidental way just from their interactions with Rosie and her wheelchair."

"Adults don't want to ask questions," says Rosie. "They don't want to offend. Kids are direct and natural. They just ask me 'What's wrong with your legs?'"

We need to write a book

"I rang Rosie and said we need to write a kids' book," says Annette. "That's where the idea for *Rosie's Wheels* came from. It's about all the wheels that Rosie has used in her life and it's about all the wheels that kids use normally.

"In 2017 I wrote most of the book. But it didn't progress because I was looking for an illustrator, then I didn't want to give it to an illustrator because I really wanted to do it myself. And Rosie kept asking 'Where's the book? Where's the book?'"

Rosie reminded Annette that the illustrations needed to be ones that kids could relate to. Not too sophisticated. So Annette ended up doing them herself.

"We trialled it at a bunch of preschools to make sure they got the concepts," says Annette. "When it was published we had a big launch - it was a total celebration of Rosie and her community.

"Kids are seeing an adult who had something happen to her and who uses a wheelchair and she's just got on with it. Rosie's showing them that if something happened to them they could still make something of their lives too. They have a role model. It broadens their thought processes."

Still working with children

Rosie is now working four to five days a week at her childcare centre in Wauchope. "I dropped the diploma in childcare," she says laughing. "If the truth be told, I enjoy the work a lot more than the study."

Rosie and Annette catch up as friends. "She's just a gorgeous human being," says Annette. "And if the book keeps doing well, then maybe there's a sequel there somewhere!"

More on *Rosie's Wheels*:
www.facebook.com/Rosies-Wheels-330463454560432/



“ We realised the kids were learning about diversity and inclusion and disability in this lovely incidental way just from their interactions with Rosie and her wheelchair. ”

Talking to the animals: Lisa's return to work story

Lisa is in the Workers Care Program



LISA CASS is a bit of a modern-day Doctor Dolittle. A vet nurse for the last dozen years, the 46-year-old feels more at home talking to animals than humans.

Inspired by her step-father, who was a country vet, Lisa has dedicated her adult life to animals great and small. In January last year, that dedication very nearly cost her her life.

Born in Canada, Lisa and her family moved to Orange when she was 13. With a fascination that surprised even herself, she would watch her step-father treat sick and injured livestock. Working with animals, she decided, would become her life's work.

In high school, Lisa volunteered for work with the local vet in Orange on weekends and holidays. After graduation, she moved to Sydney where her first big break came when her local vet surgery in Sydney's inner west advertised for a receptionist. She applied and was successful. But Lisa wanted to be more than just the face behind the counter. She wanted to learn on the job and was soon setting up the surgery, preparing anaesthetics and understanding pathology.

House calls were a particular favourite for Lisa as she was able to familiarise herself with much loved pets in the home environment rather than in the clinical surgery rooms. "Saving lives," says Lisa, "is paramount but it is sometimes hard to keep emotions in check."

A rare bite

At work one Friday in January 2019, Lisa was handling a puppy when it turned and bit her on the cheek. Lisa didn't really give the incident a second thought given the puppy had been healthy. She cleaned the wound and went about her day. Under the surface though, a rare bacterium only found in young cats and dogs was slowly beginning to poison her bloodstream. The bacterium is so rare that Lisa would become one of the first dog-bite victims in Australia to be infected with it.

"Later that night, I started to feel quite ill," she says. "By Sunday morning I couldn't walk and was taken to hospital."

Her vital organs were shutting down and she developed sepsis. In hospital her heart stopped three times and her hands and feet were starting to lose functionality. Surgery to save her life resulted in Lisa having both legs amputated below the knee.

Lisa spent seven months in hospital and rehab, learning to walk with her new prosthetic legs provided by the Workers Care Program.

The accident had a deep impact on her friends, family and colleagues who were with Lisa during the long journey to regain her health and to walk again. Her icare case manager helped her find new accessible accommodation and, after more rehabilitation, Lisa realised she was keen to return to work.

Back to work

Beginning one day a week this January, Lisa was able to start back at her old job.

"I've been very lucky. I am highly motivated and can't praise icare enough," says Lisa. "They've been amazing with their approvals and help, and they really have been very caring and compassionate."

"At the moment I'm back on reception but I am keen to get back to nursing. It's going to take a while, but I'll get there. I miss talking to the animals too much not to."

“ Working with animals, she decided, would become her life's work. ”

icare joins the bushfire response – stories from a black summer



Ash and Lisa from icare's bushfire response team in Cobargo.

The intense bushfires that raged across many parts of Australia over the summer, particularly the South and North Coasts of NSW, devastated many communities and left many of us feeling overwhelmed and frightened.

At icare we knew that many of our Lifetime Care and Workers Care participants would possibly be at risk from the bushfires.

As the fires increased in severity, our data and analytics team identified 25 participants who were directly affected.

All were offered assistance including help with evacuating their homes and finding temporary accommodation if necessary. Road closures and intense heat made simple tasks like obtaining a prescription significantly more difficult than normal. In one case, a generator was sourced and transported by plane to Moruya as the participant couldn't return home without one.

“**Road closures and intense heat made simple tasks like obtaining a prescription significantly more difficult than normal.**”



Mobile bushfire response

In January, icare set up a mobile bushfire response team visiting regional and coastal communities from Nowra to Eden and north to Port Macquarie offering assistance to people and businesses impacted by fire.

Sanctuary Point local Cheryl Fletcher was one of many icare customers who sought out icare's mobile team for assistance as it visited coastal communities. Cheryl knew her business, delivering linen and uniforms to local restaurants, caravan parks and supermarkets, was in trouble. Severe fires had caused caravan parks to shut their doors and local roads to close meaning Cheryl's drivers were out of work.

Cheryl's workers comp insurance premium was due, and she was struggling to pay it. She still had the ongoing costs of running her business but without the regular income.

“I was able to explain my situation to icare and was given a three-month deferral on the spot,” says Cheryl. “I was so grateful as this lets me catch up.”

Further down the coast, the small hamlet of Sussex Inlet was cut off for four days, completely isolated and without power.

Local couple and business owners Trina and Andrew McVeigh made a booking with the bushfire response team to seek advice about their workers comp insurance. They were badly affected by the smoke and were concerned about the impact on their health. They were given detailed contacts for local healthcare providers, masks and an employer pack with information on how to take care of themselves after the fires.

Meeting customers one-on-one

In the far south coast town of Eden the icare team had one-on-one discussions with customers such as Jane Cahill who owns the Quarantine Bay Beach cottages. Most of her bookings had been cancelled. Her annual workers compensation insurance premium was due, but she only wanted to renew for six months.

“I was really very stressed due to the fires and the lack of bookings so it was reassuring that I could get what I needed done so easily. The team were really helpful,” she says.



Help from Beyond Blue

Beyond Blue is an organisation that helps people dealing with mental health problems. Beyond Blue has a range of resources for those affected by the recent bushfires and COVID-19 outbreak. These include:

- practical advice on how to cope with the emotional impact of bushfires, information about the signs and symptoms of emotional distress, tips for supporting children and young people, and links to useful resources. See: www.beyondblue.org.au/the-facts/bushfires-and-mental-health/
- a new Coronavirus Mental Wellbeing Support Service to support people to manage the impact of the pandemic on their mental health and wellbeing. See coronavirus.beyondblue.org.au or call the dedicated counselling line on **1800 512 348**.
- a dedicated “Coping with bushfires” thread in their online forums providing a safe, understanding place to share how you are feeling.

Beyond Blue’s existing support service continues to operate alongside these new initiatives. Mental health professionals are available 24/7 at Beyond Blue on **1300 22 4636** or go to beyondblue.org.au/get-support for online chat (3pm-12am).

“The icare crew split in to two groups and walked the streets, visiting every business in town.”

Heading home the next day, the team visited Mogo. The fires had ravaged this small town and, in the main street, the old church was razed to the ground along with historic tea rooms and shops. Business owners were struggling. The icare crew split in to two groups and walked the streets, visiting every business in town offering advice on workers compensation, handing out information packs and just listening.

“These communities have been through a terrible experience and need help to rebuild and recover,” says Lisa Cahill, icare’s Community Engagement Lead. “They were pleased to see us in their towns in person alleviating some of the anxieties that they faced, particularly in trying to rebuild their businesses.”

icare claims support teams assisted Rural Fire Service volunteers with an unprecedented number of workers compensation claims – from property damage, minor injuries such as cuts and sprains and mild smoke inhalation, all the way through to broken bones, serious burns and three fatality claims in two separate truck rollovers.

We expect there will also be claims for post-traumatic stress disorder down the track as it can take up to several years for the full effects on firefighters to become clear. Both icare and the RFS have supports in place to help volunteers and their families with counselling.

icare staff continue to work with people impacted by the fires, supporting some evacuees to return home and helping others remain in temporary accommodation or with family and friends.

The fires have taken their toll and many people are suffering from significant mental health or breathing problems. We understand that while the fires are no longer a threat, both physical and emotional support and healing may be needed for some time.

That support is available as people and their communities gradually recover. *[see right]*



Giving back through the Rural Fire Service



icare staffer and RFS volunteer GERALDINE WATERS was on the front line this summer helping to contain the bushfires.

“I’d wanted a way to help my community,” says Geraldine, who works as a Team Leader in Lifetime Care.

The logical choice was the Rural Fire Service which she joined in 2013 – her father had been a member and the commitment she saw in him had instilled in her the same passion to help others.

“He was worried when I joined because he didn’t want his child to be exposed to this kind of risky environment,” she says. “We never served side-by-side, but I was happy he got to see me on active duty before he passed away.”

“My job was to ensure that it didn’t climb past a certain height. If it climbed up the trees, it would have jumped across the road.”

New Year’s fires

“Life as an RFS volunteer is unpredictable to say the least,” says Geraldine.

One day early in the New Year saw Geraldine attending a fire at Woodford.

“When we got there we saw a fire right behind a few houses. It was a pretty chaotic scene, stressful and confusing – the narrow mountain roads were full of emergency vehicles, competing with residents trying to get out.”

They parked the truck and bowled hoses down as far as they could, ready for the fire.

“But it suddenly changed direction which meant we had to drag everything back to the truck and join two other crews trying to protect three houses.

“The fire was almost 100 metres away but, within five minutes, it was on us. Luckily, a helicopter came and dropped a load of water. After a few intense moments, we managed to keep that fire at bay and save the houses.

“That was the first time I’d witnessed a fire coming right up to me. I won’t lie, I was scared!”

Meltdown

“Another time we got a call asking us to respond immediately to another big fire at Gaspers Mountain in the northern Blue Mountains.

“It was a massive fire and was getting extremely hot really quickly, fuelled by all the leaves. My job was to ensure that it didn’t climb past a certain height. If it climbed up the trees, it would have jumped across the road.

“I was so close to the heat my glasses melted – that was really unhelpful because I can barely see without them!”

The fire was contained and everything returned to normal.

Geraldine’s brigade has a substantial number of women who are always treated equally and with respect. They do the same tasks as the guys, like lifting heavy hoses or connecting a standpipe to a fire hydrant.

But she points out that not every role in the RFS is physically demanding – the person in her brigade responsible for updating their social media plays an invaluable role sharing information to the community which could be a matter of life and death.

icare working with startup entrepreneurs on disability solutions



The icare Foundation has invested in Remarkable, an organisation supporting startup businesses making a difference for people with disability.

Remarkable provides training, mentoring and seed funding to help startup businesses develop products that can improve the physical, social and economic inclusion of people with disability. Some recent startups are: Gecko Traxx – a portable and affordable wheelchair accessory that enables people to get off-road and explore the great outdoors; and Handi – hands-free sex tech for people with hand limitations.

Other Remarkable startups offering telepractice and remote support include:

- **Maslow** – a voice-enabled app that supports people with spinal cord injury to independently manage their care and rehab routines, communicate with service providers and access health education. Maslow has recently changed the focus of their app to support users isolated from their therapy teams to manage their home exercise and rehab programs.
- **Sameview** – an online platform for coordinating care and supports, sharing important information, and fostering teamwork. Sameview helps individuals and their families feel better connected with their supports. icare is currently seeking interested participants and workers to take part in a pilot of Sameview.
- **loop+** – a platform combining a sensor mat that collects data on user activity, and an app that displays individual risk profiles and insights. A dashboard connects wheelchair users, their care teams and clinicians for sustainable healthy habits. icare foundation has supported loop+'s growth as part of a \$3-million investment round with other investors. loop+ will be commencing pilots with seating clinics soon.

If you're interested in knowing more about any of these startups, email us at shine@icare.nsw.gov.au and we can connect you with them. For more information on Remarkable, see www.remarkable.org.au



Help design new solutions to old problems

Remarkable runs an annual “design-athon” event, that brings together designers, developers, creatives, entrepreneurs, students, people with disability, and disability service professionals to create solutions to common problems for people with a disability.

It is aimed to inspire design that is universal and inclusive.

The design-athon is usually run face-to-face. This year it will be run over a longer period with a series of online events and offline work by teams. There are prizes up for grabs for winning teams.

Lifetime Care and Workers Care participants can get involved in this year's event by being available via phone or videoconference to help teams research the problems and give feedback on prototype solution designs.

Email us at shine@icare.nsw.gov.au if you're interested in helping design the next potential disability tech solution!

Wellbeing Neuro Course

For many people with brain injury it's often hard to keep well. The Wellbeing Neuro Course provides good information and teaches practical skills for managing many of these wellbeing issues including:

- stress, anxiety, frustration and worry
- low mood, sadness, grief and depression
- day-to-day activities.

The course has been designed for people with brain injuries to easily use and complete the program. Recent trials of the course showed reduced symptoms of anxiety and depression and improved ability with planning, attention and fatigue. All participants who completed the course recommended the program and said it was worth their time.

What does the course involve?

It's an online program that has been developed to provide the information and skills that you would normally receive face-to-face from a Clinical Psychologist in an internet delivered course.

The course is made up of six modules that are flexibly delivered over ten weeks.

You have access to resources, worksheets and weekly contact over the phone or via email with a psychologist.

Find out more information or to register for the program:

Visit the website www.ecentreclinic.org/?q=WBNCourse

or contact Jacqueline Scott on **9216 3258** or email Jacqueline.Scott@icare.nsw.gov.au

The Carers Way Ahead

This is a free online program offering support for families managing challenging behaviours in a person with a brain injury.

The program includes a series of seven online modules on issues such as understanding triggers and consequences of behaviour, low motivation and apathy, irritation and aggression, and self-care.

Each module provides information and strategies for dealing with common challenging behaviours people may experience following a brain injury.

Take part in the pilot!



We are inviting families of participants with challenging behaviours to take part in a pilot of the online program over a ten-week period. Support is provided to the family member to work through the program.

- To access the program go to redcap.link/thecarerswayahead
- Contact Dr Travis Wearne t.wearne@unsw.edu.au or ph **9385 3310**

Royal Commission into disability

A more inclusive, just society

The Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability was established in April 2019.

The Royal Commission is looking into all forms of **violence, abuse, exploitation** and **neglect** of people with disability in all settings and contexts. This includes violence in family homes, group homes, schools, TAFEs and universities, workplaces, health services and hospitals, community settings and more.

The Royal Commission will prevent and better protect people with a disability from experiencing violence, abuse, neglect and exploitation, and promote a more inclusive society that supports the independence of people with a disability.

The Royal Commission is expected to deliver its final report by April 2022.

Find out more

You can find out more information about the Royal Commission on their website, including details on how you can participate: disability.royalcommission.gov.au/

We'd love to hear from you!

Do you have any feedback about *Shine*? Is there anything different you'd like to see in the magazine? Or if you'd like to share your story please contact us.

Email shine@icare.nsw.gov.au or call **1300 738 586**.

General Enquiries: **1300 738 586**

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