# A STEP AHEAD

Amputee Awareness Week Qld

#aawqld

Amputees & Families Support Group

Qld Inc.

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**SPRING EDITION 2021** 

## **CENTRAL OFFICE**

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We would like to thank InHouse Print & Design for the printing of our quarterly newsletter. Please contact them for all your printing requirements.

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## **FROM THE OFFICE**

Welcome to the Spring Edition of A Step Ahead!!

This year has been speeding by, we are already nearly at Christmas...I don't know where the time goes!

We have a very busy few months ahead with the Annual General Meeting, 35th Anniversary Luncheon, Amputee Awareness Week and the Christmas Party coming up!



We have several activities arranged for our members during Amputee S Awareness Week, we hope to see you there! Spaces are limited so if

you are interested in one of the activities please contact the office as soon as possible to secure your place.

We hope that you have been keeping safe, it's been a crazy couple of months with the latest lockdowns and restrictions! We have now been in pandemic mode for over a year and a half with intermittent lockdowns and mask wearing becoming the new normal! Throughout this time we have adapted the way in which we provide our services and information to individuals and the community and with this in mind we have launched our new website!

The new website provides more information, is interactive and user friendly! If you have time we would love you to visit the website and provide feedback! To provide any feedback email lynda@afsg.org.au or call 3290 4293.

We have received further funding from Brisbane South PHN to bring Healthy Ageing Workshops to our members and the community, these comprise of information sessions and workshops which have been very popular. If you have some time please join us as the sessions are interactive and informative, or just come along for a chat and morning tea!

We need your help! We have been sharing information on our social media platforms in relation to a petition "Assistive Technology for All". We encourage ALL Queenslanders to sign the petition and share this with your friends and family! Right now, many people, particularly older Australians with a disability are excluded from the NDIS and do not have access to the assistive technology they need or require. This doesn't just limit their independence and participation in community life, it can also increase their risk of injury and compromise their safety, health and wellbeing. Please take the time to join the campaign visit www.assistivetechforall.org.au.

Lastly, don't forget to get involved in Amputee Awareness Week. We have included an awareness ribbon with our newsletter and we would love for you to wear and share your ribbon photos on social media with the hash tags #aawqld #aaw2020 #amputeesqueensland.

Stay safe!

Inder Under

The Amputees and Families Support Group Qld Inc is partially funded by Queensland Health.

## PEER SUPPORT VOLUNTEERS

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YOUTH GROUP

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> "Any one of us could be affected by an unexpected life event or illness where peer support will be vital to our recovery and wellbeing"



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# FOR THE DIARY

#### September

1st Exercise Physiology15th Life Tec (Assistive Technology)22nd Grocery Bingo

### October

4-11 Amputee Awareness Week ... stay tuned for a week of fun! (See page 27)

- 20th Exercising for Health
- 27th Grocery Bingo

#### November

3rd Your Pathways Coach17th Exercise Physiology20th Christmas Party24th Grocery Bingo

#### December

3rd Simple Savings & Preventative Health

23rd Christmas Closure (TBC)

Please contact the office with any queries. All events, functions and information sessions can change without notice! To keep up to date please check our Facebook page.

All sessions will follow the current Queensland Government COVID restrictions and requirements.

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## Celebrating 35 years 1986 - 2021



## In the Footsteps of Henriette Louwerse (originally published in the Winter Edition 1995)

#### IF YOU CANNOT CHANGE THE DIRECTION OF THE WIND, ADJUST YOUR SAILS!

"I don't regard myself as a disabled person," Henriette Louwerse says confidently. "It was a difficult decision (to decide to have the amputation) but I fought to get on top of my disability and now I do not let the loss of my leg in anyway".

This profile is the story of a very courageous, highly independent, motivated young woman who has never allowed her disability to get her down but has used it in the encouragement, care and support of others. When I approached Henriette about writing this profile she was very hesitant as she is not a person who enjoys being in the limelight but she feels her story may encourage others experiencing similar circumstances.

When Henriette was nursing back in Holland, she always thought amputation was the worst disability she could imagine. She felt she would never be able to live with it. However, in her own words, "I did lose my leg and fought to get on top of my disability and found I had so much to live for. I don't feel disabled at all. I am a wife and a mother. I work in two different retirement villages as a diversional therapist. In my leisure time I cycle, I dance, I sail, I surfski and my motto is, If I cannot change the direction of the wind, I adjust my sails....".



Henriette had a growth problem with her left leg from birth, the leg growing faster than her other leg. An operation when she 10 years old "cured" it and she never had any more problems. However, seven years ago at the age of 32, Henriette developed an ulcer on her foot which wouldn't heal. A biopsy revealed nothing and in spite of prolonged rest periods in hospital and treatment nothing helped and the pain became unbearable. Following more tests it was revealed that the cause of the problem was a huge A.V. malformation in her left foot, a rare congenital defect for which there is no cure.

## In the Footsteps of Henriette Louwerse (cont.)

A year of painful treatment followed during which time Henriette searched for alternative healing techniques and lived day by day with terrible pain and lots of hope. Finally Henriette was told that she had to have amputation which would cure her, take away the pain, and help her get to leading a normal life. Following the same diagnosis from several other specialists, Henriette was convinced she had to have the amputation but when they left it up to her to decide when, she could not make that decision. Her mother had come over from Holland and after 5 weeks of deliberation, Henriette's husband and mother made the decision for her. Their love and support made it a little easier and realised she had no choice.

Unlike people who start the grieving process after they've lost their limb, by the time Henriette had the amputation she had already done most of her grieving. The operation went well and after two weeks she went to the rehabilitation ward and kept herself busy with exercises and learning to walk again.

Going home was herder than Henriette thought it would be. Her mother and husband were a great support but Henriette felt very disabled. She was also very self-conscious and ashamed for her friends to see her "ugly, temporary leg". She felt she needed to cover up and even disappear if anyone came. It took several months for adjustment to take place but Henriette still felt an empty feeling being an amputee and taking advice from ablebodied people. She thought, "it is so easy for them they have two normal legs, how can they know?"

Henriette started searching for a support group and found that there was one just about to form. Henriette says that joining the Group changed her life. Meeting together, and seeing other young amputees and sharing experiences helped enormously and Henriette says she has never felt lonely in herself again. She started helping other amputees and by doing that they helped



her. Her confidence came back and she had a complete new outlook on life.

The newsletter of Amputees and Families Support Ground "A Step Ahead" was Henriette's creation and she was the editor for several years. She is also a past Vice-President. Prior to her work in the nursing homes, Henriette always gave of herself unselfishly when asked to visit amputees both in the hospital or home environment sometimes at very short notice. Always, after the initial meeting Henriette followed the progress of the patient either by personal visitation or encouraging phone calls and opened her home to them on numerous occasions.

Much of her success Henriette credits to the people around her, family, friends, the Support Group, and people in general who never saw her as disabled. She says her reaction after losing her limb was despair. The aftermath of losing a limb is frightening, dismaying and complicated. But, says Henriette, the support of caring loved ones and friends helps a great deal. Still you have to do most of the recovery yourself. You have to learn to accept your altered body image and adapt to your disability.

Henriette feels that the choice of a prosthetist is very important for the amputee. It is essential to develop a good relationship and to be able to talk about your lifestyle, and your expectations of the artificial limb. Henriette feels very strongly that quality of limb equals quality of life!

Henriette lives life to the full. She believes that keeping fit and healthy is important and enjoys two hours a week of aqua-aerobics. Being in the water gives her the freedom she doesn't feel on land and she even jog in the water. The benefits are great and include keeping fit and supple, feeling good and general relaxation. She has also recently commenced a part-time diploma course in Health and Social Community Services, Diversional Therapy. She believes this will give her more option and help her in her work in the community.

## Henja Louwerse Today!

After being an amputee for 35 years I am still adjusting my sails, but with a lot more experience!

Henriette's advice to other amputees is everyone is different. Find new interests if you cannot maintain the old ones, set new goals no matter how small to start with. You need to be willing to go out there and look for things you can do it together with the people around you.

We enjoyed a lovely catch up with Henja and it was interesting to discuss how the Amputees & Families Support Group Qld started.

Henja is one of the early members and is also the creator of the A Step Ahead quarterly newsletter. Henja said that the first newsletter went out in August/September 1988 and was so well received by the group that she continued as Editor for many years on her trusty typewriter.

In fact, Henja still had a copy of the second newsletter that ever went to print, it was amazing to read it and see how far things have come. Henja also explained how the newsletter ended up being called A Step Ahead and had the feet/footsteps on the cover. Henja said that it was to motivate and inspire people to step ahead with their prosthetic.



Henja has many fond memories of the early days and only lost touch when she returned to work and was unable to continue her volunteering.

Henja has now retired and has more time on her hands, she has reconnected with the group and is looking forward to catching up with some of her old friends and making new ones!



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## Grocery Prizes | Lucky Door Prize | Raffles Morning Tea | Onsite Parking

- When: Wednesday, 22 September 2021 Wednesday, 27 October 2021 Wednesday, 24 November 2021
- Time: 9.15am for 9:45am start
- Where: Logan Central Community Centre (Amputees Qld hall) 9-11 Jacaranda Avenue, Logan Central

**RSVP is essential.** We have limited spots available for Grocery Bingo due to COVID-19 restrictions so it is **essential** that you RSVP to Lynda on 3290 4293 on the Friday before each Bingo session. **Sorry NO walk ins.** 





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## **Caring & Specific Conditions**

## **Caring & Diabetes**

The following advice is for those who are caring for a person with diabetes. If you are concerned about the other person's management of their diabetes, the following may help:

Don't be the diabetes police. If you closely monitor your partner's diabetes they may become resistant to your advice. Offer to help but respect the boundaries of the person. Decide together how the diabetes can be managed without the need to badger.

Make your household healthy. Both of you need to look out for your health so incorporate a healthy diet and exercise into your routine. If you are not sure about cooking for a person with diabetes see a dietician or use a diabetes cookbook. Diabetes friendly recipes are healthy and balanced; therefore anyone can eat them. If you both smoke try to quit together and save alcohol for a special treat

## **Caring & Chronic Pain**

Chronic pain can cause massive disruption to families and needs to be treated as the disabling illness that it is. Carers will find they have a range of emotions and when you care for a person in chronic pain the following advice may help.<sup>(2,3)</sup>

Demonstrate flexibility and patience. The person in pain will often have good and bad days. To enjoy time together have ideas of activities that can be done on short notice. If the person's pain causes a disruption to a planned event try not to show resentment.

Depersonalise anger. The person in pain will often have periods of frustration and depression. They may lash out or feel the need to vent. In these cases it is rarely you that they are angry with; it is the situation. Allow them to express their feelings and do not assume that their anger is directed towards you as a person. The same thing applies to when you as a carer have frustrations, approach issues as a problem to be solved together not a failing of the other person. Avoid bringing up problems when the person is having a bad pain day.



Avoid eating treats in front of your partner. If you both enjoy treats find diabetes friendly recipes or save your food treats for when you are out with friends. Include some exercise in your routine and include your partner. You may choose to exercise while your partner does their stretches.

Be informed. Research diabetes to be familiar with the symptoms and warning signs. Take an active interest in diabetes management and talk to your and your partner's doctor about how to manage diabetes.<sup>(1)</sup>

Look for signs that they are in pain but do not want to admit it. Listen to them when they describe their pain and help them to keep records to take to the doctor. Accept that the pain is what they say it is. Do not try to help by telling them to think positive, trying to convince them the pain cannot be that bad or comparing their pain to other's who 'have it worse'.

Adapt how things are done around the home so that the person in pain can contribute. For example if grocery shopping is painful look into internet shopping. If you have high standards about how tasks are completed let them go: do not redo things or complain if the person completed a task but it wasn't how you would have done it. It is also less stressful for you if you can let go of some high expectations. Redivide household tasks so that the person in pain can contribute.

## Caring & Chronic Pain cont.

Never tell a person in pain that they should do more or their pain can't be that bad. Avoid statements like "You've been home all day, you could have done something" If you are worried that they are losing their independence encourage them to do things within their limits without shaming them.

Chronic pain affects the whole family so it is important that as a carer you have a support network. If there are no support groups in your area you can use the internet. Look for support in other areas such as an exercise class, or interest group. You will find that others in your circle are experiencing similar stresses.<sup>[2-3]</sup>



Could they be faking the pain and depression? Maybe for attention or to avoid work?

Intentionally faking or exaggerating a condition for benefit is called 'malingering'. Most malingerers are motivated by monetary compensation however there are more people seeking compensation in genuine pain than malingerers. People living with pain or depression find that any positives from being cared for or not working are negligible and are greatly outweighed by the negatives.<sup>(2)</sup> People with depression may feel pain more intensely, such symptoms require treatment and is not malingering.

### **Caring & Depression**

When you care for someone with depression it may feel that talking to them is an emotional mine field, remember that you cannot make them feel better and they cannot make themselves feel better. If they could 'get over it' they would do so in a heartbeat. Even if you are having trouble understanding how the person feels you can show compassion and offer support.<sup>(4)</sup>

What you can say

- You are important to me.
- Your feelings are real.
- I can't say I know how you feel but I'm here for you.
- I'll stick with you no matter what
- I'm going to take care of myself so that I'm there for you.
- I'm worried about you.<sup>(4,5)</sup>

You can see that most of these suggestions are about reassuring them that you will be there no matter what happens. A depressed person feels isolated and guilty about their feelings, give them permission to be depressed and let them know that you won't reject them.<sup>(4,5)</sup>

What not to say

- · There are people worse off than you
- · Life isn't fair deal with it
- · You're just feeling sorry for yourself
- You were always negative
- · You brought this on yourself
- We all have ups and downs
- You get a pay-off from making me feel bad
- It's always about you
- Have you tried aromatherapy or listening to happy music?
- Let's see a smile/It takes more muscles to frown than it does to smile<sup>[4,5]</sup>

### Caring & Depression cont.

There are two kinds of unhelpful responses to someone's depression. The first is thinking that depression is controllable by willpower. Depression cannot be cured by cajoling, issuing orders, scare tactics or guilt trips. The second is minimising their feelings or offering solutions. Clinical depression cannot be cured by using the same methods people use to cheer themselves up on a down day.<sup>(4,6)</sup>

When listening to a depressed person avoid making arguments as to why their feelings are incorrect. The depression has clouded how they see the world; the best advice you can give is to seek help from a doctor as there is no way to rationalise their feelings away. Be patient and persistent as it may take a while before they get help.<sup>(4,5)</sup> If your loved one is going through therapy they may want to talk about their emotions and past events. These emotions may be confronting but allow the person to talk about them. Do not assume that all of the person's feelings and emotions are directed at or caused by you: the person will have strong feelings directed at others in their lives and themselves.<sup>(4,5)</sup>

Reassure the person that modern treatments are very good and talk to them about seeing their doctor. Encourage your loved one to continue their treatment and take medication.<sup>(4,5)</sup> If the person agrees to seek help ask if they would like you to come as support. As an outsider you could offer insight into symptoms or behaviour that they may not be aware of.<sup>(4,5)</sup> Recovery from depression can take many months and set backs happen. Keep up with the encouragement and watch for signs the depression is getting worse.



## **Caring & Anxiety**



When somebody has anxiety or post traumatic stress it can be distressing to see them reliving a painful event over and over again or so anxious that they cannot leave the house. The following are some tips for carers of people with anxiety or post traumatic stress disorders.<sup>(16-18)</sup>

Actively listen to the person and allow them to share their feelings. Just listening when they need you to is of great help to the person.

Avoid offering solutions and do not try to minimise what is bothering the person. It is natural to try to help alleviate their worries but it can backfire. If you find listening to their feelings or details of the event confronting encourage professional support rather than asking them to suppress their feelings.<sup>(16-18)</sup>

If the person has post traumatic stress anticipate anniversaries or other reminders of the event to be particularly distressing. Be prepared to assist at these times. Do not take the anger of someone with post traumatic stress personally. Angry outbursts and social withdrawal are part of the illness. The exception is domestic violence; if you feel under threat or are abused physically seek help and leave if you must because your or your children's safety is at risk.<sup>(16-18)</sup>

Encourage the person to seek help and recognise any achievements in their recovery and encourage them to move on if they have setbacks. Let the person recover in their own time. Trying to set the pace of someone else's recovery is ineffective. If the person is in therapy provide support for any tasks that have been set to aid recovery.

If the person wants some time alone leave them be, however encourage time with other people if you are worried about the person being too withdrawn.<sup>(16-18)</sup>

Do watch for signs of excessive use of alcohol or drugs. If you are worried about substance abuse offer support in seeking help.

## **Compassion Fatigue**

For many carers the role is simultaneously rewarding and exhausting both physically and mentally. The demanding nature of the caregivers role can lead to a condition called "secondary post traumatic stress" or "compassion fatigue" As the name implies it is a stress disorder that affects those connected to someone who has been through a traumatic event including full time caregivers. It is more likely that you will have traumatic stress if the person you care for is not coping well after amputation or there has been a significant change in their personality.<sup>(19,20)</sup>

Compassion fatigue occurs when a caregiver neglects their own physical and emotional needs while they meet the same needs in other people. Over time this neglect leads to burnout. This does not mean you have truly stopped caring rather your body and mind are at breaking point. You may find that your stressors include the following 'trigger points'<sup>(20,21)</sup>

Role confusion: You had a different role that you were comfortable with such as a husband or wife now that has changed. Negotiating the change in roles with your loved one can be stressful and confusing. Unrealistic expectations. You may have a loved one with a condition like depression or chronic pain that you want to help 'fix' but despite your best effort they still suffer. You feel like you have failed because you cannot help them as you believe you should.<sup>(21)</sup>

Unreasonable demands. You may burden yourself with ideals that cannot be met such as fulfilling all your loved ones needs without outside help or maintaining a perfect home while caring.<sup>(21)</sup>

Lack of Control. You may find that aspects of your life removed from your control such as the loss of finances and the progression of your loved ones condition.<sup>(21)</sup>

The symptoms of compassion fatigue are the same as anxiety and post traumatic stress because that is what it is, the only difference is it affects the carer instead of the person being cared for.



## Compassion Fatigue cont.

All caregivers should be aware of how they feel and watch for the following signs of burnout:

- You have symptoms of post traumatic stress disorder (see page 63)
- You are less tolerant of minor annoyances.
- You feel very negative about your role as caregiver and life in general.
- You are stressed from having to "walk on eggshells" to avoid upsetting the person in your care
- You are bottling up your emotions.
- You find yourself complaining constantly or blaming others for the problems you are facing.
- You are isolating yourself from friends and activities you enjoy.
- You have chronic illnesses like headaches
- You feel incompetent or that you are letting people down.<sup>(19-21)</sup>

If you identify with these symptoms but do not yet feel overwhelmed try to minimise your stress and stay healthy. If you would like to try self help you can follow general advice for caregivers on alleviating stress and staying physically healthy through diet and exercise. If you are at breaking point then professional help is available so see your doctor for treatment advice. It is important that you do not neglect treatment for yourself and seek help before you are completely overwhelmed.

## I f you need assistance

Australian Government - Head to Health Resources www.headtohealth.gov.au

#### Lifeline

Counselling services for anyone at anytime. Phone: 13 11 14 (24/7) www.lifeline.org.au

#### BeyondBlue

Anxiety, Depression & Suicide Prevention Phone: 1300 224 636 (24/7)

**Diverse Voices** Peer counselling for the diverse voices that make up our community Phone: 1800 184 527 (3pm—midnight)

If you have the symptoms of post traumatic stress you need to see a professional as it is a genuine illness; not a reflection on your character or ability to be a caregiver. It can be distressing to feel such negativity towards someone you care about but it affects all manner of people even those who have chosen a caring profession such as nurses.<sup>(19,20)</sup>

Being a caregiver is demanding, give yourself permission to look after yourself and make your health a priority.

This Article excerpt was taken from "Information for People Living with Amputation" by Queensland Health. If you would like a copy of this book please contact the Amputees & Families Support Group Queensland Inc on 07 3290 4293 or via email admin@afsg.org.au and we will arrange for a copy to be sent to you.

## Carer I nformation & Support

**Wellways Carer Gateway** Phone: 1800 422 737 (6am - 10pm) www.wellways.org.au

#### Carers Qld

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## Stretching and Exercising

Your physiotherapist will prescribe exercises and stretches for you to do. It is important that you keep doing your exercise as prescribed as once a contracture forms it is difficult and painful to treat and muscles weaken when not used.

You will be advised on repetitions by your physiotherapist. Stretch as often as you can throughout the day, remember that stretching should work the muscles but not cause pain or discomfort.

Endurance exercise is very important after amputation because of the extra energy needed to use a prosthesis. There are good reasons to start an exercise routine as outlined below:

Balance: A lower limb amputation will change your centre of balance. By incorporating balance exercises into your routine you will be less likely to fall and more agile in daily activities.



Heart Health: Exercise will help improve conditions such as heart disease. The improved blood flow that comes with aerobic exercise will aid healing of your limb and help prevent further complications. Good circulation will also lower the risk of amputation of your remaining leg.

Muscle Growth: When it comes to muscles the old adage "Move it or lose it" is true. When your muscles are not used they will shrink and become weak. An increase in muscle mass also burns more calories helping to stabilise your weight.

Weight Management: Keeping your weight stable is important for wearing a prosthesis and will control diabetes. Fluctuating weight makes prosthetic sockets difficult to fit and being overweight will reduce your stamina to use a prosthesis. By combining exercise with a healthy diet you can stabilise your weight.

Bone Strength: Including weight bearing exercise in your routine increases bone strength. This is important as it will help prevent fractures if you fall over.

Depression: Exercise can alleviate mild to moderate depression by releasing feel good chemicals into the bloodstream. Exercise will also improve your confidence and this can make you feel better.

Always discuss your exercise goals with your doctor and physiotherapist. They can design a set of exercises for you and monitor your health. Motivation is often difficult so try to find an activity you really enjoy. If you are concerned about stabilising your weight then seeing a dietician is advised.

This Article excerpt was taken from "Information for People Living with Amputation" by Queensland Health.



## **MOBILITY CLINIC** EXERCISE ESSENTIALS FOR AMPUTEES TABATA STYLE

- · There are 2 exercises per set. 30sec on / 20sec off
- Each set represents 5 minutes
- · Complete 3 repetitions of the 2 nominated exercises before moving on to the next 2 exercises
- Scan the QR code below to view the Tabata video demonstration

## TRY THE BLUE ALTERNATIVE FOR A TOUGHER WORKOUT!

SET 1

Ab crunches: crunches then obliques.

Heel digs with knees bent. Try it with straight legs or Bilateral leg Lifts or V-snaps.

### SET 2

Plank off the knees. Off the toes.

Push ups off the knees. Off the toes. Hand tap partner for hardcore.

#### SET 3

Bridging off both feet. Arms to ceiling, lifting one foot off the ground.

> Clams with theraband red. Use green theraband.

## SET 5

Squats. Use theraband resistance, pulses.

Hip extensor tband resistance. Non MPK users tband hip extension sound limb.

#### SET 7

Squat rows (hold the squat and row 30sec). Non MPK T/F will stand and row. Green Band.

Lunge with opposite arm rotations. Green Band. Non MPK users keep prosthetic knee straight.

## SET 4

4point kneel hip abductors. Use theraband resistance.

4point kneel hip abductors other leg. Use theraband resistance.

### SET 6

Standing hip abductor tband resistance. Green band.

Knee repeaters. Increase speed and range.

### STRETCH

Hip flexors, hamstrings, quads, L/S rotation, IT band, adductors, gastrocs.

We recommend you consult your physician or healthcare professional before starting this exercise program to determine if it is suitable for you. If you engage in this exercise program, you agree that you do so at your own risk, are voluntarily participating in these activities, and assume all risk of injury to yourself.



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## Amputee Support Association Sunshine Coast

## Members Update

A big thank you to members who have renewed their membership for another year, it's so important to keep our support association strong.

The new **meeting venue** at "Club Mooloolaba" is working well for us. "Club Mooloolaba" offers us a comfortable meeting room and a great coffee shop to continue conversation over a coffee, a snack, or a cold beer.

Meeting dates for the remainder of the year:

#### Tuesday 21<sup>st</sup> September 2021 @ 10am Tuesday 19<sup>th</sup> October 2021 @ 10am Tuesday 16<sup>th</sup> November 2021 @ 10am

Come along and participate and hear our guest speakers tell their amazing stories.

We are currently organising a "Christmas luncheon" to be held on Sunday 14<sup>th</sup> November 2021 at "Club Mooloolaba" to commence at 11am. Please keep that date free and join us to celebrate Christmas and the end of another challenging year. A scrumptious "Christmas at Club Mooloolaba Menu" will be provided and the opportunity for those who attend to win lucky door prize and one of the many raffles.

A personal invitation will be sent out soon to our members (carer/family) and nonmembers especially to those external providers, organisations that have been of assistance and support over the past year. The invitation will include the menu, costs and RSVP details which will be essential. Note: Members meals will be partly subsidised.

We are currently organising one mobile phone number for our Association and amending our email address from <u>Debbie@amputeesupport.net.au</u> to <u>secretary@amputeesupport.net.au</u>.

In the meantime, if you have any information or queries please do not hesitate to contact us, by:

Phone:0421 443 813 (Peter Williams)Post:Amputee Support Association Sunshine CoastP.O. Box 1374, BUDERIMQLDWebsite:www.amputeesupport.net.au

We hope to see you soon!

## WE HAVE MOVED



We are excited to let you know that we are moving to a brand-new prosthetic & orthotic clinic at

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## Amputee Awareness Week Activities



Amputee Awareness Week runs nationally from 4 to 11 October!

Amputee Awareness Week helps raise awareness in the community of people living with limb loss or limb difference through a range of activities and awareness events.

Join one of our activities from the calendar below, wear and share your ribbon photos on social media with the hash tags #aawqld #aaw2020 #amputeesqueensland!

Please ensure you RSVP for each event as we only have limited places available.

Saturday	Monday	Wednesday	Friday	Monday
2 October	4 October	6 October	8 October	11 October
Kicking off AAW early with our 35 Year Anniversary Luncheon @ Diggers Services Club	Open House Morning Tea @10am	Fishability @ 9:30am-2pm Runaway Bay	Information Session - Stump Care @10am followed by morning tea	Top Golf Register online <u>https:// empowergolf.</u> <u>com.au/events</u> <u>-2/</u>

### Information Stall

Sid Dyson will be at Greenslopes Mall, 700 Logan Rd, Greenslopes all week from 9am till 3:30pm for anybody that would like to drop by and say hello!

We will also be drawing our Amputee Awareness Week Raffle there on Sunday, 10 October at 2:00pm.







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4a Canberra Street, North Mackay QLD 4840 phone 07 4953 5738 fax 07 4953 2256





## Come Fish with Us!

## **Amputee Awareness Week Activity**

## Join us for a fun day out on the water!

- When: Wednesday, 6 October 2021
- Where: 247 Bayview Street, Runaway Bay Marina, Gold Coast
- Departure: 9:30am for 10am departure (returning 2pm ish)
- Cost: \$20 (includes rods, bait, fishing equipment and lunch)
- RSVP: 27 September to 3290 4293 or email lynda@afsg.org.au

### BYO hat, sunscreen and water bottle!





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# toapl.

## PROSTHETIC SOLUTIONS FOR AN ACTIVE AND INDEPENDENT LIFESTYLE

At oapl, we understand that having an amputation can be a traumatic and challenging experience.

With over 30 years in the profession, patient care is our heritage and our inspiration. Seeing the real life difference we make in patient's lives for us, is what it's all about.

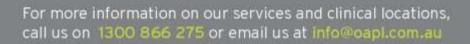
With an extensive number of prosthetic and orthotic professionals around Australia, you can rest assured that oapl clinical care is always within reach.

## Need funding assistance?

We can help coordinate funding with a range of government bodies including Department of Veteran Affairs, NDIS, WorkCover and more.







www.oapl.com.au

## **Every Dollar Counts...What is Available!**

#### **Patient Travel Subsidy**

The Patient Travel Subsidy Scheme (*PTSS*) provides financial assistance for patients who are referred to specialist medical services not available at their local public hospital or health facility.

Eligible patients are able to apply for a subsidy to assist with travel and accommodation costs of accessing specialist medical services.

Patients approved for PTSS will receive a subsidy to attend the closest public hospital or health facility where the specialist medical treatment is available. Patients travelling to access private specialist services may be eligible for a subsidy if the service is not available within 50 kilometres of the patient's closest public hospital or health facility.

The Scheme is Queensland Government funded and administered through Queensland Health. It aims to support Queenslanders to access specialist medical treatment wherever they live in the state.

PTSS applications are assessed by public hospitals and health facilities in line with the PTSS eligibility criteria.

Patients eligible for PTSS can apply for subsidy payments to assist with the travel and accommodation costs of accessing specialist medical services.



Patients who require assistance when travelling can submit an application for an escort to travel with them.

The PTSS is not intended to cover the full costs associated with patients accessing specialist medical services.

For further information on the PTSS travel, escort and accommodation subsidy scheme please visit: https://www.qld.gov.au/health/services/travel/subsidies





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## Amputees & Families Support Group Qld Annual Christmas Party

Join us for lunch to celebrate Christmas

100000 20

## Two Course Lunch | Lucky door prizes | Raffles

When: Saturday, 20 November 2021

Where: Logan Central Community Centre 9-11 Jacaranda Avenue, Logan Central

Time: 11:30am - 2:30pm

Cost:

\$20 member | \$25 non member \$5 children (children under10 only)

**RSVP** Friday, 15 November to 07 3290 4293.

Bookings are essential, COVID safe event. Payment is required on the day of booking. No refunds within 14 days of the event.



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## MEMBERSHIP APPLICATION FORM

<b>()</b>
<b>L</b>
<b>P</b>
Amputees & Families Support Group Old Inc.

Date:	o New	o Renewel	Amputees & Families Support Group Old Inc.
Name:			
Partner:			
Address:			
Phone:	Mob	ile:	
Email:			
Date of Birth: ———			
Limb/s amputated:			
Cause of amputation: —			
Hobbies/ Interests:			
Previous / current occupa	ntion:		
*****	Membership Contrib		
	Yearly membership - (1 July t		
o \$15 Adult single	o \$20 Families/ Pensioner Fa	milies o S	\$25 Organisations
o I would like to make	a donation of \$	-	
o I would like someone	e to contact me about volunteering	<b>g</b> .	
	t deposit to Heritage Bank   BSB: and surname in the reference fiel		t: 11471050.
o I have paid via pay p	al at <u>www.afsg.org.au</u>		
o I enclose my Cheque for membership and	e / Money Order to the value of \$_ /or donation.		
Signature	Date:		
	Complete application and return Amputees & Families Support O PO Box 31, Kingston QLI admin@afsg.org.ad	Group Qld Inc. D 4114	

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