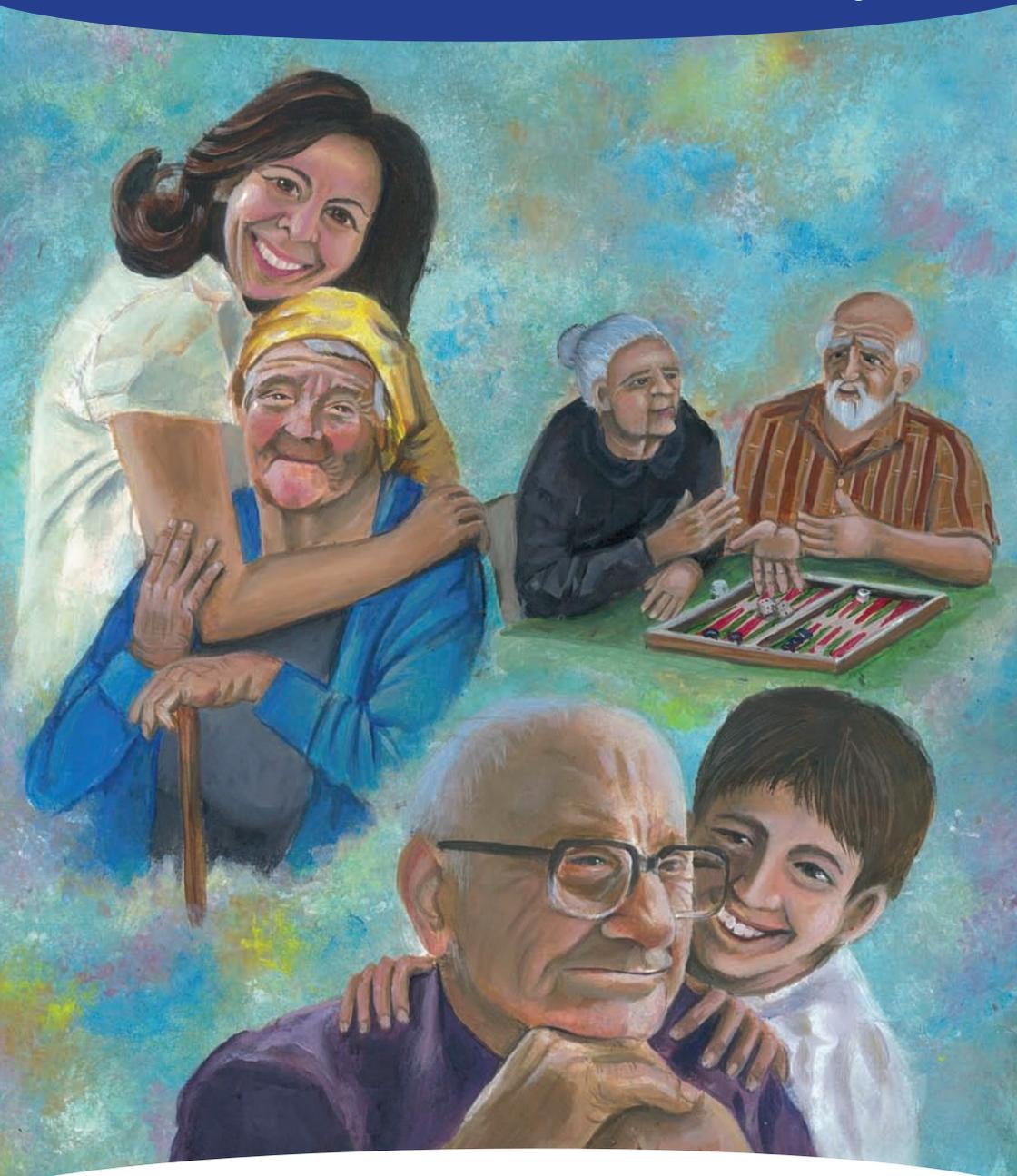


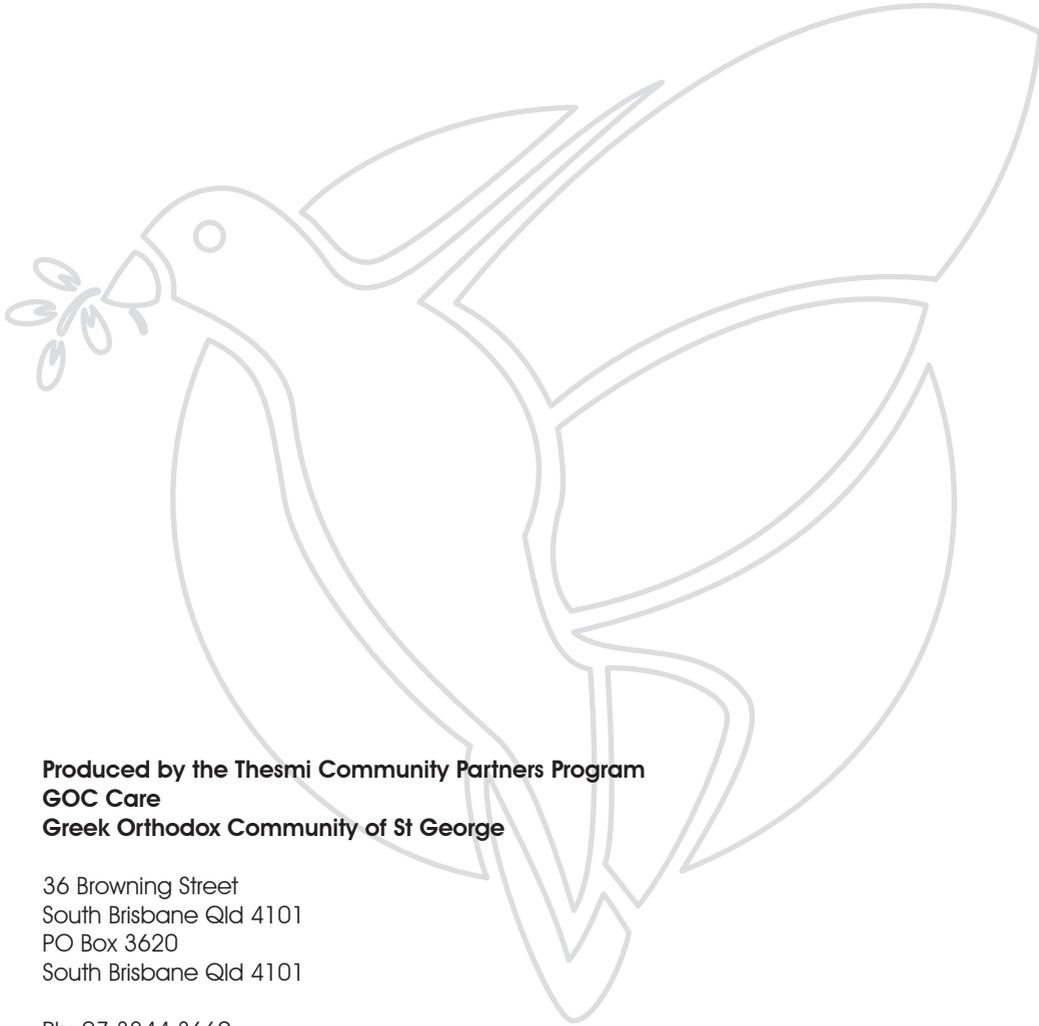
Caring for Family

Stories from Brisbane Greek families with loved ones in nursing homes



Produced by GOC Care
Greek Orthodox Community of St George

May 2007



**Produced by the Thesmi Community Partners Program
GOC Care
Greek Orthodox Community of St George**

36 Browning Street
South Brisbane Qld 4101
PO Box 3620
South Brisbane Qld 4101

Ph: 07 3844 3669
Fax: 07 3844 0967

Email: info@gocstgeorge.com.au
www.gocstgeorge.com.au

Cover art: Peter Papamanolis
Design: MUD Creative



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“It’s one of the hardest things in life, putting someone in a nursing home, but talking to others who’ve travelled that road does help.”

This short collection of stories from Brisbane Greek families illustrates, with poignancy, the life changing decisions people face when circumstances change and a loved one can no longer be cared for at home.

Caring for family was produced by the Greek Orthodox Community of St George’s *Thesmi* project, to document experiences of families from Greek speaking backgrounds around the transition from community into residential aged care. Why did people have to make these difficult decisions? What was the process? And what have been their experiences of life in a nursing home once the move has been made?

The stories were recorded in one-to-one interviews and edited down into the pieces you see here in this book. These are the families’ stories, in their own words.

The *Thesmi* team would like to thank everyone who participated in this project, including those whose stories do not appear in this booklet. We wish we could have printed every story we heard. They are all valuable, and we honour them all.

Yours,

The *Thesmi* project team,
Helen Wilkinson and Rebecca Tapinos

GOC Care, Greek Orthodox Community of St George, Brisbane

May 2007

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THE HARDEST DECISION WE HAVE EVER HAD TO MAKE

Mum was first diagnosed as having Alzheimer's disease back in 1999. The doctor explained to us briefly the outcome of Alzheimer's and the stages mum would be going through. At that time my sisters and I said we would never put Mum in a nursing home. We were adamant it was never going to happen, and that we would be able to look after her ourselves. It was suggested that we could have someone come and sit with her if we needed a break or that we could take her to respite and leave her there for two weeks, but we didn't want to do that either.

When we were told Mum had Alzheimer's it was really hard to explain it to her. She didn't know what it was and she felt like we did not want her anymore. When the subject of nursing homes eventually came up it upset her to the point she thought we just wanted to put her out in the street. That was really hard for us to cope with.

The Alzheimer's Association of Queensland was very helpful. I didn't accept that Mum had Alzheimer's at first but after going to the Alzheimer meetings and talking to other carers, I learned more about the disease and how there were other people going through exactly what mum was going through.

Mum has five daughters, two of us live here in Brisbane, so we shared looking after her, but it soon got to the point where she would be up any time of the night and could not be left on her own. Mum was getting worse and we could see then that she might need to go to a nursing home. So my sisters and I all got together and made the hardest decision we have ever had to make.

We were scared of leaving the decision to take mum to a nursing home until it was too late. If she had had a fall and was put in hospital and the hospital felt that she needed to go into a nursing home, she would then have had to go into the first nursing home that had a place available.

Our Greek upbringing is that we are supposed to look after our parents until the end, and the idea of leaving our mother with strangers was very hard. The look of despair on our mother's face was also difficult to handle. So we had this huge guilt feeling that we were not going to look after our mother as we had said we would, and we were putting her in a



place that she did not know as home. To most elderly Greek people, just the idea that their children are going to place them in a nursing home is like it's the end of their time. It is more acceptable in some other cultures.

My sisters and I had never been to a nursing home before. So when the decision was made, we visited three nursing homes to find a place for Mum to go.

The first time we came to see this place, we thought, 'This isn't for Mum'. We only saw the high care part, which is like a mini hospital, and at that time she was not at that stage (although she is now). On our second visit we saw the hostel part and made our decision. We felt like it was home away from home.

We chose this particular nursing home because most of the residents were Greek, its location was convenient and it felt very homely. We knew that Mum would have liked it if she was able to choose. There were doilies and icons around, like what Mum would have had. She is scared of being on her own, and having people around her who spoke Greek and talked about common things like their crocheting and their children was comforting for her. Mum was very fluent in English so she was able to communicate in both languages for a while.

The meals are great. There is lots of food, and they also have traditional Greek dishes which are very familiar to most of the residents, who look forward to it.

When we first came to see the hostel some of the female residents were sitting together all talking in Greek. They liked talking about the old days and their children.

At the nursing home they have a number of activities like bingo and hoiy, and the recreational staff speak Greek and English so everyone can understand. When they play Greek music I see Mum's little foot tapping away.

We were able to do up mum's room with her own bedspread and all her photos, so when she came in for the first time it looked just like her room at home.

We have been made to feel so at home, so welcome. The staff have seen us through our emotional times; they were very supportive and understanding. At the beginning they were people we didn't know, but now, four and a half years later, they have become friends. The relationship between the staff and us is very good. We feel at ease now and can talk to them about anything.

For us personally there was the guilt we felt for putting Mum into a nursing home, as well as accepting that she had Alzheimer's and trying to cope with what she would be going through and what we had to do. My sister and I would visit Mum every day and for almost a year we would be blubbering uncontrollably on the way home. Time heals everything though, and we know now that Mum is in the best place. We could not have looked after her in her present condition as well as she is being looked after. Her care is 24 hours and she is in a safe environment. But we still get the guilts every now and then and think maybe we could have done better and looked after her a bit longer.

The nursing home is always busy. It is like a little community of staff, residents and relatives, it's great. It's noisy in the dining room when everyone is eating. Someone phoned me while I was there and said, 'Are you at a party?' and I said, 'No I'm with Mum.' Life still goes on here. It's a good noisy.

The attention to residents, the love, the touch, and the kisses are what are important. You'll see the staff just holding Mum's hand or giving her a cuddle. There is always the word 'love' and terms of endearment such as the residents being called 'thea' (which is 'aunt' in English). It gives the person the feeling of belonging to family and it is respectful.

Religion is very important to Greek people, especially the elderly. There is Divine Liturgy at the nursing home once a month and the residents receive Holy Communion.

We are able to visit our mother for as long as we want, and phone any time of the day or night to see how she is. On Mum's first day there, we stayed the whole night. For several days afterwards we would ring at any time during the night to check on her, and we were made to feel at ease. The sister on duty would look in on her and let us know she was OK. We still phone at any time we feel uneasy to check on her. It is so comforting to know there are no time restrictions.

Mum has been in the nursing home for about four and a half years now.

I love the way the residents say they are going to 'my house', when they actually are going to their room. To them where they are now is their home and the other residents living with them are their family.

NO-ONE WILL EVER CARE FOR MY HUSBAND THE WAY I DID

No one will ever care for my husband the way I did. You can't have one-on-one care in a nursing home and I realise that now. But he does get cared for very well. They do all the hard work and I have the quality time.

Mum was in a nursing home for two years before she died and my husband had always said, 'Don't put me anywhere like that. Don't put me in a nursing home.' I always said I wouldn't. I thought I would always have staff at home to help me, until I realised just how difficult that was going to be.

He'd had Parkinson's disease for 21 years and was deteriorating. After some time in hospital for surgery for this, that didn't go as well as we had hoped, he came home. He had care at home from a community service who came to help with bathing and showering him, and staying with him while I went shopping, but it was a very difficult seven months. It was a 24-hour job and it was only me at home, with no sleep. It was getting to the stage I couldn't have gone on for much longer. He wasn't sleeping and incontinence was a large problem at night. It's very isolating. At night there's no one you can call on. The aged care assessment people said he should consider respite but he said no. He wanted to stay at home.

Then he fell and had a massive bleed on the brain. He was in hospital for three and a half months and recovered to the stage he's at now. He knows me and he'll recognise people, but he has no memory. He's been in the nursing home for seven months now.

It was devastating when the doctors said there was no way I could take him home and would have to look for a nursing home. It broke my heart.

They gave me a book with the names of all the homes and hostels and said I'd have to visit all these places. I had to pick out five and nominate them. It would have been so much easier to find somewhere suitable if the hospital had been able to give us some recommendations, or could have accompanied me, or had more information. It was virtually 'off you go, visit these places and put your name down.' It's a time when you really do need support and I don't know where I could have got it.

It was a bad experience, to walk into these homes and think, 'There's no way I could leave him here'. You walk in and you know. It's not so much the building as the appearance of the residents, the general outlook of the place. They weren't family oriented, they were very clinical, and some didn't smell the best. A lot were cramped, six beds in tiny rooms. I couldn't put his name down in these places.

I found only three I would put down. All of these were run by church groups. I knew that wherever he was I needed to feel comfortable about being with him all the time.

Coming here is such a wonderful feeling because they're family. They've accepted me as well and I'm here every day, in the mornings and again in the afternoon. This was the only place where, when I applied, they said, 'I will come to the hospital and see your husband'. And they did, the next day. From that time on they knew our situation and a vacancy came up about six weeks later.

We were very fortunate because the hospital was going to put us out, to respite if possible, or charge us full fees because with health care cards they can't keep you while you're not acute. It was very traumatic. Also the nursing home wasn't close to our home and I didn't know how I would get there to visit.

I've sold the house now and live close by so I'm not spending all that time driving in and out twice a day. My whole life has changed but it's getting easier now that I'm close and settled.

I would do anything to have my old life back, but that's not coming. So now I've got to the acceptance that it's okay, this is our life. It's different but we're making it work.

My husband was initially sharing a room at the nursing home but now he's moved to a lovely single room. He is so much more contented in the single room and I'm so much happier. There's more privacy, and he has his own TV and a CD player. It is his own space.

I accept things now. Everyone has to come to it in their own way and until you can accept that that's where they have to be and this is your life, you don't cope. I guess I should have been prepared but I never thought it would happen the way it did. You block it out. You think, 'I'll come to that, I'll deal with it when it happens.' That's why, when it did come, it was such a shock.

What I like about this nursing home is the family atmosphere. There's a lot others can learn from this place: the respect for the residents and their needs. Where my mum was, if they wanted to take someone out you had to pay beforehand, whereas here it's not an issue, they take them out because they want to, not for the money.

It's important that he's in a place that can cater to his cultural needs too. It's his birthright. He was christened Greek Orthodox and he was brought up Greek Orthodox. It's important to me that he can continue his background.

I've been so blessed now that he is here.



MUM'S WELL CARED FOR HERE

Mum's been in a nursing home for seven years now. She's 97.

She wasn't ever going to go to a nursing home. Dad died 26 years ago and Mum lived on her own, with family care. We rostered ourselves for things like meals, bathing her and we would pop in on her. She managed with that assistance.

But seven years ago she wasn't well, she seemed dehydrated. We found she had become incontinent and wasn't drinking. She hadn't told us because she was embarrassed. We could see she was really not well and after a couple of weeks in hospital we were told she was ready for a nursing home. A specialist said it was 'all downhill from here'.

There were no nursing home beds available so she went into interim care for four or six weeks. She was fully dependent on others by that stage and had been assessed as high priority. She was a big woman and couldn't pick herself up if she fell. She needed two people to put her into bed.

There was nothing available at the Greek nursing home so we came out here to have a look. We were impressed and a spot came up so we brought her in.

We made sure one of the family was here all the time at the beginning and she was quite happy right from the start, although she would have liked a Greek person on the nursing staff. There were a couple of other Greek people here and she needed that Greek contact, even though she can speak some English.

Being Greek, it was traditional that one of the family would look after Mum until she died. She 'never ever' wanted to go to a nursing home and we looked after her in her own home for 19 years, but eventually there was no alternative. She eventually agreed that this was the way to go. Most people of her generation don't want to go to a nursing home. In my generation you know what's going to happen and you don't want to be a burden on your family.

When they get to that stage where it's going to affect your health to look after them because they need so much care, in my mind there's no alternative. I've seen it happen with elderly Greek couples – that the wife

will look after the husband at home to the detriment of her own health

For us, having a carer at home that isn't family wouldn't have worked. Mum wouldn't do that. She couldn't be with someone who wasn't family. You'll find there are a lot of Greek women like that, they want their family around them.

We have asked if she wants to move to another nursing home where there are more Greek people, but she didn't want that. 'I can't change now,' she says. 'I'm happy here. The nurses know me'.

Here she has her own room, a TV, phone, a little fridge and her own Greek coffee maker. Her eyesight and hearing are failing and she's got our names on touch dial. The phone has a loud speaker, which is great. She's a bit vain and won't wear a hearing aid.

The food's quite nice but we bring food in if she wants it. She loves her Greek food and her chockies. We keep the Greek biscuit tin filled and we make all the Greek sweets for her.

The family rostered themselves so that one of us is here every day.

She's well cared for here. One night the nursing sister noticed she was distressed and found her heartbeat was very low. They rushed her straight to hospital and by the next day she had a pacemaker. If it wasn't for the alertness of the nurse that night they would have found her in the morning... They've been very good.

The important things for Mum have been to have her own room and to be able to talk on her own phone. Her TV and radio with a Greek channel were also important but she doesn't use the radio now that her hearing's going.

Being able to be taken out has always been very important. She has 26 grandchildren and doesn't miss any



family birthdays and celebrations. And they welcome family here. If we're here at lunch time they'll ask us if we'd like a meal.

But if they're going to have Greeks who can't speak a lot of English it would be good to have someone on staff who can communicate with them. We do it at the moment. We pass messages on to staff for her, like if she wants to be arranged in bed a certain way at night. It would be better if they had someone who she could communicate with at the time.

When choosing a nursing home it was important for us that Mum was with other Greek people, and the quality of care was important of course. The care is very good here.

Mum is very religious too and they have religious services every Sunday. They have an altar with icons from different religions. She has icons all over her room.

A final note

Not long after this story was written, Mum passed away quietly in her sleep, surrounded by family and very caring staff, at the nursing home.

A PROCESS OF LETTING GO, AND LEARNING

Mum has been in the nursing home for three years now. Before that, living at home, she was totally dependent on me.

Her dementia was a slow process, over eight to ten years. I knew nothing about the disease and was grasping at straws at first, seeing things on TV, calling on dementia help lines. You're dependent on those people for information.

But the places I went to were very caring. A respite centre gave me two to three hours respite a week at first. I could drop her off there. She tended to wander and I knew she'd be safe.

It was a six-year process of gradually letting go, and learning. Eventually Mum was going to respite two to three times a week but still I was getting very run down. Then Mum fell and hurt her shoulder, and that progressed her illness and her need for physical care. She went to hospital and was there for three months.

That gave me time to talk to the family, but the decision to go to a nursing home was totally up to me. It wasn't fair. She was dependent on me but I couldn't do it anymore. You find strength to keep on plodding, keep on going, until you break down. I had to do it 24/7. It's an isolating place to be.

You feel helpless, you're grieving all the time and worrying how you'll be financially and how to make ends meet. You're in such pain yourself you do things in a fog. I had to make a list of five nursing homes that we would accept and that would meet Mum's needs. The main thing was: Were they secure? Did they have a dementia unit?

There's lots of information available but you have to be open and listen. It's one of the hardest things in life, putting someone in a nursing home, but talking to others who've travelled that road does help.

Why here? I did go to the Greek nursing home but they were full. All the places were full, or they were too far away. But Mum was born in Australia, which made it easier. She could relate to Australian places.

This was the best place I saw. It had a vacancy and I was so desperate. She's got to have her needs met, to eat on time, to be cleaned. It's a hard job and very stressful. I soon learned that you've got to be there at



the nursing home, to care for and support them, to show that you want the best for them. Staff are focussed on their own routines but family look at the person as an individual and know their little actions.

We come here five days a week, to feed her and show her things are normal, and that she's a human being. I want to show her she hasn't been abandoned. It's hard to let go of someone you've lived with for 42 years.

I've had arguments with people here. She had to have special liquid food and they said it would take too much time. But it's okay now, they have to meet the standards.

The manager is very good. I can go to her with concerns and she listens. The diversional therapist is great too. She always has lots of entertainment and they take them out on bus trips. But you need to be there. You have to be there to be part of the journey.

It was a great joy when I found that there was another Greek person here. You're not just in isolation, even if they can't communicate. It's nice to help the other residents who aren't Greek understand this lady who speaks part Greek and part English.

I'd advise people to do their homework before choosing a nursing home. Go around, at different times of day, stay a while, see what the staff are like. Are they friendly? Are there activities?

This was the best place I'd seen. At other places I'd felt a sense of depression, they made me feel my own mortality. That's why you need entertainment, vitality, nothing morbid.

It's important that everyone's welcome. We can stay as long as we want to here. In contrast, when Mum went to interim care after hospital we felt like they weren't equipped to deal with dementia and they didn't want family there. That was a bad experience. They pressured us to take the first available nursing home place. It was very stressful.



My advice is to get together with others and find out about the disease, get to know it and accept it. You need support. You need people to talk to about it. Friends and family don't understand, they don't know about dementia. It was hard for me to reach out to people other than family. You're so vulnerable, there's so much sadness. It's depressing and you don't know how to get out of it.

Now we're out of it, it's easy.

I'd recommend this nursing home. For me tradition and language were not important. If Mum could only speak Greek it would be different. But the main things were availability and the condition of the nursing home. But it would be nice if there were more volunteers to take them out. The volunteers here are very caring, they're very important.



WHAT'S BEST FOR MY GRANDPARENTS?

Things happened very quickly for my grandfather. It was only a few weeks between his living at home with my grandmother and him going into a nursing home.

My grandfather ran a family business in West End for 50 years. He was diagnosed with Alzheimer's in 1998 but it was very mild, he was still working. And he was caring for my grandmother at home.

Then this year he got worse, although mostly still not bad. He'd forget a lot of things and would end up buying 20 bottles of Domestos when he went shopping.

I went overseas for a couple of months, and when I came back he was a different person. I was shocked how sudden the change was. He didn't know my wife anymore and he'd started emptying all the rooms in his house and throwing things over the balcony, thinking he was tidying up.

We took him to hospital while the family tried to work out what to do, but he couldn't stay there because he wasn't receiving medical treatment.

We had to find a nursing home quickly. He was assessed as high care and a wanderer, and that really narrowed down the list of places that would take him. We rang 26 nursing homes and the only one with a bed available was over an hour away from Brisbane.

We didn't want to take him that far but we had no choice. Then when he got there, it was terrible. The dementia section was awful, it was depressing and there were a lot of people there much worse than him. He didn't know what was happening. He was very unsettled and his behaviour got worse.

The family didn't cope well for the three weeks he was there. It was hard to travel so far to see him; my parents work and so do his other kids. We're a very close Greek family and we were used to being able to just drop in on him. And we were worried about him in that place.

My mum had stayed in contact with another nursing home in Brisbane, hoping for a place. A bed did come up, but in their normal nursing home, not the dementia area. They said they'd try him there. So he moved.

He was there for about a month and it was really good! His behaviour really settled down. He'd still forget and he'd still want to leave but that was fine, we could cope with that. He was so much better.

It made us think – maybe he didn't need to be in a nursing home. Maybe he would be okay at home now. But then we didn't want to take the risk. If we took him out and lost the spot, where would he go if there was a problem? What if he had to go back to that other place again? No-one wanted that.

The current nursing home had good people and it was homely. It wasn't full of Greeks but there were a few. It might have been better if there were more Greeks because then he'd have lots more opportunities to talk. But everyone was happy with the place. The only problem was it was still a little far for the family to go and visit him.

Then a place came up in a nursing home back in his old neighbourhood, a place where there are a lot of Greeks. He couldn't have gone there at first because they don't have a secure area for people who wander, but now his behaviour is OK, he doesn't try to escape. The staff there were very supportive of our situation.



The family met to decide what to do. We didn't want him to get confused by another move, but it would mean he was back near his family where we could visit him every day. We decided to give it a try.

What my grandfather really wanted was to be with my grandmother. She's been living at home on her own since my grandfather went into the nursing home. My grandfather had done everything for her since she started having back problems five years ago. Now she's getting support at home with a community care package.

We'd talked to my grandmother about going to a nursing home. All her life it had been 'never'. Now she's decided she'll go if there's room at the hostel adjoining the nursing home my grandfather's just moved to. If they

can be there together, that's the best thing for them. And my grandfather will stay settled and happy because he'll know that's where they live, because his wife's there.

My grandmother would not consider moving somewhere where they don't speak Greek. She can't speak English and that's a big thing. With my grandfather it's different. With the Alzheimer's he has lost any English he had, but he's a placid man and is happy to just sit and watch. He nods yes to everything and smiles, even when he doesn't understand. My grandmother can't cope with that. If you were to tell her she'd be in a place where they don't speak Greek for the rest of her life she would not want to live.

Now my grandfather is settled and feels like he's at home, and we're just waiting for a place at the hostel for my grandmother.

The situation with my grandmother has been hard for my mother. My grandmother probably expected more help from her to stay at home. But things aren't like they used to be say two generations ago, when my great grandmother came back to Australia to live for the last three years of her life. She had four sons here, three in the same street and one two streets away. None of the daughters-in-law worked and she spent three months at each house. It's totally different now, it doesn't work like that anymore. My grandmother thinks that because she did it for her mother-in-law it should happen for her, but Mum is her only daughter and she's working and trying to help my sister who's just had a baby. It's been hard for both of them.

There are a lot of elderly people out there in the Greek community who need help and have no idea what's available. But they need a nursing home that can cater to their needs. It needs to be homely, like walking into somebody's house. Greek people expect that. And if you're a Greek-speaking person, the chances are you want to be with a lot of Greeks.



WE HAD TO DECIDE THINGS QUICKLY

My mother-in-law's illness was diagnosed about three years ago and we were told it would be a fairly rapid decline. Within a year she went from a lady who could do everything, to using a walking stick, to a walker, then a wheelchair. We had to decide a lot of things fairly quickly and there wasn't time to get used to it.

She was only 68 when she was diagnosed and was living at home with her husband.

Because I work in the aged care industry, I knew how to get all the processes happening, such as getting an aged care assessment done, so things were ready to go when she needed community aged care packages and then, later, a nursing home.

Fortunately this nursing home was expanding at the time, so we put her name down. We told her about it. We didn't do anything without telling her, but she didn't understand it. She thought, 'Why can't I just sit in my wheelchair and stay in my own home?' She didn't realise how immobile she was going to become.

We were very lucky that there were beds available, as it would have been difficult keeping her at home. We were already having to use a swing lift and had community aged care packages, helping with things like cleaning and meal preparation, then personal care. We would have had to hire 24-hour nurses or put her somewhere else.

During this time she went into respite care for a couple of weeks when her husband was finding it hard to cope. She hated that. It was very clinical and impersonal, more like a hospital. She couldn't communicate well because she speaks Greek and has only a little English.

Where she is now, in the nursing home, she has her own room, her photos up, her personal belongings, that sort of thing. Even in the shared rooms it's quite spacious and they can have their own things.

Her first day here was on the opening day of the new wing, so they had a big spread of food for family and residents. We sat around the table and filled out the forms. That sort of informal way of doing things was really good, people just came and chatted. A few Greek volunteers came in to say hello and said they'd be back to do the recreation program, so it

made everyone a lot more comfortable, with people coming in and out, people she recognised. It was a family atmosphere.

It was quite a good experience that first day. She wasn't crying or anything, although she said, 'I'd prefer to stay at my home but I know I have to come'.

The experience here has been pretty good but obviously there have been little issues along the way, especially now that she can't communicate very well. You really need to spend time to understand her and sometimes there isn't that much time.

When she complains about something you've got to keep very open-minded and make sure you find out all the information before you go off getting upset.

One of the good things here is the religion, the icons, the visiting priests and the services every month. They observe the Saints days and cultural days. They always have little celebrations for those things and it makes the residents feel like they're at home. And they can watch the local church services on TV and see all the community weddings and christenings if they want to.

Because it's the Greek community there's always someone visiting, and the other people who may not have visitors get involved as well. You can say hello to everybody and they talk to you and participate in the conversation. So because you have that common link of being Greek, the language or whatever, you tend not to just visit your mother, you give a little bit to everybody and most people tend to do that. So instead of having just one visitor a day, there's lots of visitors come through and people to speak to.

In another nursing home, if you didn't have that link, then you'd just go and visit that person and have nothing to do with the others, and so if a person didn't get any visitors for a month they could become very isolated.

The volunteers here do a fantastic job. It would be wonderful if some of them could visit Greek people in other nursing homes too, to relieve their isolation.

It's very important that there are other Greek residents here because they help each other a lot, or they'll pass information on to the family. We might be sitting there feeding her and she'll start crying, and one of the others will pipe up that she's upset because such and such happened today. You'd be surprised what they pick up, they're very observant.

It's important because you've got the cultural link and the language. You hear us calling everybody 'thea' or 'theo', which literally means 'aunty' and 'uncle', but it's a more respectful thing. With Greeks you're not just Mrs Smith. It sounds respectful, even if you can't remember that person's name, you're still giving that personal touch which they really love.

You have to find somewhere comfortable, not just for the residents, but for the family as well. It's difficult enough without having to go somewhere where you don't feel at ease. Here, we feel very much at ease.



WE WANTED TO CARE FOR HIM AT HOME, BUT... THIS IS NOW HIS 'HOME'

Our brother has been in a nursing home since 2001. He suffered a severe stroke in 1999 and spent six months in hospital. He was initially unable to speak or move, but with rehabilitation he improved enough to come home. He was progressing nicely for three months, but then he had a fall which resulted in a broken hip. Later he had at least two minor strokes that we know of.

We wanted to care for him at home after the fall but he was in severe pain and his leg was very swollen, which meant that the facilities at home were now inadequate for his required level of care. He needed to go to a nursing home. Yet the hospital was insisting that he be sent home, even though no one person alone could have managed with him.

It became imperative that we find a transitional nursing home for him, one which he could go to immediately until a permanent place could be found. We found a transitional place in an excellent nursing home; the facilities and level of care were very good, however it was private and so not affordable on his pension. Also, we were looking for somewhere that offered single rooms and was handy for us to visit frequently. Then a place came up at the nursing home he's in now. It is close enough for us to visit regularly, has private rooms, is affordable, and the level of care is excellent. Our brother has been here now for six years.

The beauty of this nursing home is that they have a strong ethnic program. They recognise traditional festive days of various ethnicities, whether it be Italian, Chinese, Polish or Greek, as well as the Australian ones. They make a special effort to decorate the recreation rooms accordingly and play appropriate music, and they bring in various volunteer groups to visit to enliven the residents. The kitchen staff become involved as well by creating cuisine from the particular country. The residents and their families are all very appreciative of the staff's attention and care and the wonderful recreational activities offered.

People's spiritual needs are also well administered to here, with various community leaders, ministers and priests attending either on an ongoing basis or on special occasions or as necessary.

The nursing home is very good at implementing people's suggestions. Our brother loves indoor bowls, and he enjoys dominoes and jigsaw puzzles, so now these activities are offered. They found that a lady of 102, who could no longer speak English because she had reverted back to her native language, could cut out shapes impeccably, so they would give her various items to cut out, such as bunnies for Easter. They have painting and lots of craft and activities for their residents.

Once each year they have a resident's day, where they assess each person and discuss things in detail to find out what each person likes or doesn't. They found out that our brother liked art, so now each Monday is 'art day'. Residents take great pride in the art work they are involved in. These are all displayed around the walls of the recreation room and in people's own rooms as well.

Most residents love to see the garden, and many have their own pot plants, which they treasure. Each room has access to an outdoor area where they can have their pot plants. They love to see their plants blooming.

A pair of small dogs also give pleasure. They are kept well groomed and clean, and wander happily about the nursing home, except at meal times when they are restricted from areas where food is served.

The food is very good here and the cook is wonderful. They try to please everyone with recipes from different countries. They also endeavour to have staff here from all the residents' language background, although that is not always possible. Language is important, because as one ages and in some cases dementia sets in, the most recent language is forgotten and people revert back to their earliest memories and first language.

Our brother has his own room, as do all the residents, and it is a good thing. It is their 'home', their own place. Our brother is sufficiently cognitive and enjoys home comforts. He has his own small refrigerator and television with video, and when he wants to be in his own company and to get away for a bit, he can. It's his little domain, his home.





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