Implementation update - changes during the pandemic period

We hope that all participants, family members, and health service staff have remained well over the past several months. Let’s CHAT Dementia project activities stopped in March due to COVID-19 related restrictions. At that time, the implementation phase of the project was well underway, including dementia training workshops with GPs and health service staff.

While it is likely to be some time before project activities recommence in Vic and NSW, we are happy to report that the study is starting up in our WA and Qld health services in August. Our first priority is the health and wellbeing of participants, their families and staff at the health services, as well as the Let’s CHAT research staff. As such, important changes have been made to how project work will be carried out:

Staff workshops – If possible, and in areas where risk is very low, face-to-face workshops may still be held in health services. Otherwise, workshops will be run via remote video conferencing.

Clinical audits - With permission from individual health services, research assistants will conduct audits remotely, which means data collection will occur at a location away from the health service. Where this is not possible, audits will not recommence until it is safe to do so, and the health service has indicated they are happy for audits to recommence.

Clinical assessments – An adapted telephone-administered version of the comprehensive geriatric assessments has been developed to make it possible to conduct most parts of the assessment over the
phone. In risk areas, the physical examination section of the assessment will be postponed until a later date. We will endeavour to keep participants fully informed about their assessment with information leaflets and results posted before and after the tele-assessment.

We look forward to having more contact with participants and the health services again as soon as it is safe to do so.

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### Let’s CHAT Dementia Online

The Let’s CHAT Dementia webpage is now available at this link: [https://medicine.unimelb.edu.au/lets-chat-dementia](https://medicine.unimelb.edu.au/lets-chat-dementia)

The webpage has useful information for research staff, health professionals, and community members. It includes links to news and research updates, as well as resources related to dementia. The website lists all the members of our wonderful research team and showcases our fantastic co-researching ACCHSs.

We would love to hear your feedback about improvements and resources available on the website to help keep you informed about the study. We will continue to update the website with relevant information.

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### Let’s CHAT Dementia Indigenous Reference Group

Over the next few issues, we will be featuring members of the Let’s CHAT Dementia Indigenous Reference Group (IRG). The IRG is comprised of Aboriginal and Torres Strait Islander community members and Let’s CHAT Dementia researchers. The group advises and guides the project and ensures that cultural content, practices and values of Indigenous older people, families and communities are upheld throughout the study. Group members are closely involved in various aspects of the project including development of protocols and procedures, implementation workshops, and preparation of research publications. The IRG come together for a formal meeting at least once a year to reflect upon successes and local problems arising in relation to the project.

Here, IRG members provide a short reflection of their experiences and motivations for being involved with Let’s CHAT. The expertise and contributions from members are enormously valuable to the project, participants, and communities involved with Let’s CHAT, and we thank the IRG for their ongoing commitment to dementia and brain health in Aboriginal and Torres Strait Islander communities.

**Venessa Curnow** is an Ait Koedal Sumu Torres Strait Islander, who has over 22 years of extensive experience in metropolitan, rural and remote areas throughout Australia. She is currently employed as the Executive Director at Aboriginal and Torres Strait Islander Health, Torres and Cape Hospital and Health Service. She is a board member of National Congress of Australia’s First Peoples, Congress of Aboriginal and Torres Strait Islander Nurses and Midwives, and the National Advisory Group for Aboriginal and Torres Strait Islander Aged Care.
Venessa has been extensively involved in strategic industry development in the aged care sector at national and state level, including development of National Aboriginal and Torres Strait Islander Dementia Strategy, and in multiple research groups about Aboriginal and Torres Strait Islander health and dementia.

**Aunty Margaret Clarke** is a proud Muthi Muthi Woman who has dedicated her life supporting the Aboriginal and Torres Strait Islander community in education, out-of-home care, community services, health and aged care.

“For me there are three main areas in my life that give me strength and courage to go on when the odds are against me. The first are our Elders who I admire and respect; for if not for them and their fight for rights; I shudder to think where we’d be today. My second, is my passion for genealogy in particular, my own Aboriginal family history. I have a need to find out who my Ancestors are; who determined my Aboriginality, culture, spirit and of course my genetics and last but not least is my writing both personal and at VACCHO.”

Margaret is the recipient of a Roberta Sykes Indigenous Education Foundation grant for graduate studies at Harvard University, Massachusetts. Throughout her career in social work and community services she has worked in the Secretariat of National Aboriginal and Islander Child Care, Victorian Aboriginal Community Services Association Limited, Link-Up Victorian, VACCHO, and the Aboriginal Advancement League. She has been a Board Member of the Victorian Aboriginal Child Care Agency, The Stolen Generation Committee and The Aboriginal Community Elders Services Inc.

**Dallas McKeown** is a Yuuwaalaaray woman with family ties to the Dirranbandi nation in far South-West Queensland.

Currently she works as Executive Director of Primary Health Care at Apunipima Cape York Health Council. She is an Executive Board member at Wuchopperen Health Service and a member of the Far North Queensland Human Research Ethics Committee.

Throughout her career in the health industry she has worked across Government departments, in tertiary education, and Aboriginal community controlled services. She has a keen interest in research and has been involved in a variety of research projects relating to health and wellbeing, and has pursued post-graduate qualifications in Indigenous health and management.

**Gail Daylight** is a proud and strong Kamilaroi woman. She started working at the Aboriginal Medical Service in Redfern in 1978 as a receptionist and worked her way up to Dental Coordinator. Since, she has had senior roles in the Public Sector, Local Government, the Department of Education and Training and NSW Health.

Gail has a passion for Aboriginal affairs and helping others. Since retiring in 2015, Gail has been involved with the Jimmy Little Foundation, NeuRA (Neuroscience Research Australia), Stepping Stones House and the Aboriginal Medical Service, Redfern. Gail enjoys reading, quilting and spending time with her Grandson, Isaiah.

Gail was elected by the Sydney Aboriginal Community as an ATSIC (Aboriginal & Torres Strait Islander Commission) Councillor and in 2012 she was inducted into **NSW Aboriginal Health Hall of Fame** at the NSW
Aboriginal Health Awards. This award was presented to her by the Minister and was in recognition for over 30 years of service to Aboriginal Health.

**Harold Douglas** is a proud Gunnai man from south eastern Victoria. He is a research officer on the Let’s CHAT Dementia project and IRG co-ordinator, and also an Integrated Team Care Co-ordinator at the Victorian Aboriginal Health Service. Harry has worked as an aged care consultant and personal care assistant for 20 years and was also the manager of a planned activity group at the Aboriginal Community Elders’ Service (ACES) for a number of years. He was even the cook and gardener there for a while!

“I love working with my Community and in particular with Elders. I have found that taking a holistic approach to care, which might sometimes mean doing tasks outside the scope of my job description like taking people shopping, cooking them a meal, or physically taking clients to appointments, makes all the difference to my clients’ health and wellbeing. I have a lot of experience working with people on the dementia journey, and more recently have had the very personal experience of dealing with my mum’s diagnosis with dementia and the challenges of helping to care for her. I feel very strongly that the research that I’m involved with at Melbourne University is going to help my community improve their quality of life and get better, culturally appropriate support. I’m very keen to let Community know about what I’m doing and change perceptions about research and its potential value for Indigenous people, when it is conducted in a culturally and spiritually appropriate manner.”

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**A ‘deep-dive’ into polypharmacy**

Taking multiple medications concurrently is relatively common among older people living in the community and is often appropriate for management of concurrent or complicated medical issues. However, there is emerging evidence that taking many medications, or medications in specific combinations is associated with increased risk of preventable health outcomes, such as falls and memory problems.

In the coming months, University of Melbourne Master student Marycarol, will join the Let’s CHAT Dementia team to study patterns of medication prescription and use in three of our co-researching ACCHS.

Her study will help to inform Let’s CHAT Dementia best practice guidelines around medication use. The results will be available in the middle of 2021.

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**Let’s CHAT Dementia Academic Partners**