

**Forward**

**Midlothian**

**Disabled People**

[www.forwardmid.org.uk](http://www.forwardmid.org.uk)



**Equality - Diversity - Inclusion**

## Welcome to 2021

### Now is the winter of our discontent.

The quote ‘winter of our discontent,’ (from Shakespeare’s play Richard 111) is a powerful image for a bleak, discouraging period of time with ‘discontent’ suggesting restlessness and a looming threat caused by a long war. This could be likened to the current coronavirus crisis with headlines that have been bleak as the Covid-19 numbers get worse and worse.

However, as this Shakespeare quote continues, “... has been transformed into a glorious summer”. Richards war has ended and brings in a wonderful era in which people can get on with the pleasures of life. Now, the same could be said for the coronavirus crisis with a number of positives beginning to emerge.

- While the past few months have brought more cases, we are far more advanced in treating Covid-19
- At the time of writing, national regulatory authorities around the world have approved six Covid-19 vaccines for public use.
- The UK Government aims to offer vaccines to 15 million people –thought to represent 90-99% of those at risk of dying from Covid-19 by mid February.
- The development of a vaccine has shown the power of countries throughout the world working on biotechnology which, were this to continue, has the potential to tackle issues such as cancer.
- The return of the sense of community has been one of the positives to come from the pandemic. As lockdowns endure, this community spirit is also set to continue in 2021 after years of division.

So let us, like Richard war, hope that this summer we can celebrate our victory over this malicious enemy and begin to live our lives as we wish may that be ordinary or extraordinary.

### SERVICE UPDATES

**Handicabs:** FREE Vaccine Transport for people with mobility challenges. Handicabs are delighted to share that we will be offering FREE transport for people with mobility challenges to get their vaccine. You do not need to be registered with HcL already. Any person who has challenges with getting out

## Contents

Midlothian Food and Key Essentials Fund .....	2
Winter tips .....	3
Scottish Fire and Rescue Service .....	4
A Carers Guide .....	5
Type 1 Diabetes .....	6
Type 2 Diabetes .....	8
Diabetes insipidus .....	9
Sight Scotland and Sight Scotland Veterans .....	10
Lothians Veterans Centre Gets Digital .....	11
Cybersecurity: .....	12

and about due to age, disability, health issues (short-term or long-term), additional support needs or geographic remoteness is eligible to use the service. Bookings are subject to availability, call the relevant office as soon as you have your appointment and they will do their very best to help get you to your appointment and home safely. Edinburgh / Midlothian / East Lothian - ☎ 0131 447 9949 [www.hcltransport.org.uk/](http://www.hcltransport.org.uk/) and veterans in the Lothians can contact Lothian Veterans centre ☎ 0131 660 5537 or [www.fares4free.org/](http://www.fares4free.org/)

## Midlothian Food and Key Essentials Fund

### Who is this fund for?

This fund is open to you if you are in severe financial difficulty and can't afford to buy food and other essentials. This could be because your circumstances have changed or you are on a low or no income. It's aimed at those in the greatest need and is for people of all ages in Midlothian, whether living alone or in a family setting.

### Why has the Food Fund been introduced?

Midlothian Council wants to do more to support local people who are facing severe financial difficulties as a result of Coronavirus (COVID-19) or are facing a crisis due to other exceptional circumstances.

### How does it work?

The fund works by distributing vouchers for food and other key essentials to those who need help. The scheme works alongside existing food providers in Midlothian, such as food banks.

### What help is available?

You can apply for vouchers from £70 to £250, depending on your circumstances, three times a year.

If you apply, you will also be offered advice on making your money go further through the call back service operated by the Citizens Advice Bureaux (CAB) and Midlothian Financial Inclusion Network.

### Who can apply?

Help is available if you live in Midlothian and:

- you are aged 16 or over, and
- you are in severe financial difficulty and can't afford food or other essentials such as gas and electricity

### How do I apply?

You can apply using our online form between 9am and 5pm although processing your application may take up to five working days.

Apply for the Food and Key Essentials Fund

[www.midlothian.gov.uk/forms/form/169/midlothian\\_food\\_and\\_key\\_essentials\\_fund](http://www.midlothian.gov.uk/forms/form/169/midlothian_food_and_key_essentials_fund)

If you have difficulty doing this, or would like help filling in your application, you can also phone our dedicated helpline: ☎ 0131 270 8898



Midlothian Food and  
Key Essentials Fund

Midlothian



## Winter tips from [clearyourhead.scot/](https://clearyourhead.scot/)

The coronavirus outbreak has been going on for a while now. Daily life has changed for all of us in Scotland and it can feel worrying, lonely and uncertain. It's ok to not feel yourself. We have some great tips to help you clear your head and connect with others this winter



### **Morning light helps in shorter days.**

Getting out into the sunlight is important during winter. Exposure to light keeps your body clock in check and is fundamental to good health. It helps us to get a good night's sleep, feel energised while we're awake, and feel healthy and happy overall. Even on days when it is cloudy there is still sunlight, so it still counts. If you can't actually get out, keep your curtains open, clear the window sills and look out.

During the shorter winter days get morning light if you can.

Spend time in brightly-lit spaces during the early hours. Going out for a walk, run or any other exercise while the sun is still in the sky will help keep your body's natural rhythm consistent over the winter.

Some people really struggle with the winter. It's thought that the winter blues, or Seasonal Affective Disorder (SAD), affects around 2 million people in the UK. **NHS inform** has some great tips on how to tackle the winter blues.

### **Walk and get active outside, listen to nature.**

Wrap up and head out. A 15-minute walk in the cold, crisp winter air can have a dramatic effect on your day.

Here are some suggestions to get the most out of your walk:

- Take a flask of your favourite hot drink and a wee snack for the journey and remember to take an umbrella too, you might need it!
- Try taking slow, deep breaths and focus on your five senses; what can you see, what can you hear, what can you feel, what can you taste, what can you smell.
- Listening to nature can help make us better listeners in our everyday life, improving our connections to others whilst also helping us to relax. Try writing down what different noises you can hear. Visit [Nature Scot](https://www.naturescot.gov.uk/) for more ways to connect with nature.
- Embrace the cold weather. Cold weather has been shown to increase our energy levels for hours afterwards. Check these ideas for safe and comfortable physical activity outdoors from [www.movementforhealth.scot/](https://www.movementforhealth.scot/).

### **Remember its ok to not be ok.**

It's understandable if what is happening just now is affecting how you feel. The pandemic is affecting all our lives and the lives of our loved ones and many of us are experiencing difficult feelings and emotions.

An important thing to remember is that although things might feel hard right now, the situation won't last forever. And there is help available.

The tips on [clearyourhead.scot](https://clearyourhead.scot/) are meant to help you look after your well-being but may work differently for different people. Be kind to yourself and don't strive too hard with an idea if you recognise that you are struggling with your emotions or if anything isn't working for you right now. You can always try again another day.



As we are all experiencing more time at home during the COVID-19 restrictions its more important than ever that we attempt to stay safe within our homes as well as outside. Sadly, the latest statistics show that more than 20 people who are over the age of 50, smoke and either have mobility issues, live alone, or use medical oxygen have already been injured, some seriously, by such fires between January 1 and April 30 Last year.

**Tragically, 12 of those people sadly passed away.**

SFRS is now appealing to communities across Scotland to help save a life and consider home fire safety when checking in on vulnerable neighbours, patients, friends and family members during lockdown and to put them in touch with SFRS wherever possible using the free Home Fire Safety Visit phonenumber.

Get in touch with us, it's so easy to arrange:

- Call ☎ 0800 0731 999
- Text "**FIRE**" to **80800** from your mobile phone
- Complete our **online form** by visiting [www.firescotland.gov.uk](http://www.firescotland.gov.uk)
- Call your local fire station

Although the risk of fire and fire injury increases as you get older there are simple measures that can be taken to keep safe.

**Here is some advice from the Scottish Fire and Rescue Service to help ensure older and disabled people are safe from fire in their home:**

- Fit and maintain working smoke alarms - you should have one on each level of your home in hallways, plus one smoke alarm in every living room. Consider fitting additional smoke alarms in bedrooms, particularly where persons are bedridden or otherwise vulnerable from fire due to ill health or disability. You should fit at least one heat alarm in every kitchen in your home. The best place for a smoke or heat alarm is on the ceiling. Try and keep them 30cm (12 inches) away from any walls, lights, doors, heating or air-conditioning vents.
- Test alarms weekly. A working smoke or heat alarm can give you valuable time to get out, **stay out and dial ☎ 999.**
- Do not remove batteries. If your smoke alarm keeps going off accidentally while you are cooking, do not remove the batteries. Instead move the alarm or change it for one with a silencer button. Heat alarms are ideal for the kitchen.
- Stay safe in the kitchen. This is the area where the majority of house fires start so never leave cooking unattended. If you need to leave the kitchen turn electrical appliances off and take pans off the heat. Make sure you have at least one heat alarm in every kitchen.
- In the event of a fire '**Get out, stay out and call ☎ 999!**' Do not delay for valuables, do not investigate or try to tackle the fire. Use a mobile, a neighbour's phone or a phone box to call ☎ 999. If someone needs to be rescued wait safely outside for the firefighters who have the equipment and training to do it. Never go back in.
- Do not overload plug sockets. One plug per socket is the rule, be careful not to let leads trail over cookers or touch water.

- Get **'key clever'**. Keys for windows and doors should be in an accessible place where everyone can find them so you can get out quickly in the event of a fire.
- Plan your escape route. Make sure you and your family know the quickest way out in the event of fire. Consider an alternative route in case your usual one is blocked.
- Keep candles in secure holders, on a surface that does not burn, and away from any materials that could burn, such as curtains.
- Make sure that electric blankets are turned off and stored flat (not rolled up) when not in use. Never use them with a hot water bottle. Statistics show that fires caused by electrical appliances and electric blankets have the highest rate of injury, with 440 injuries for every 1,000 fires.

## A Carers Guide

Do you have fire safety concerns about someone you care for?

Factors may include burn marks found within the home, cooking regularly being left unattended, poor housekeeping or an accumulation of possessions that restricts escape routes. Having an alcohol dependency, suffering from mobility issues or due to health reasons they are less able to react or understand a situation.

Many of us know a friend, relative, neighbour or client, often living alone, who could be vulnerable from fire. If you know someone who could be at risk from fire, please tell them about Home Fire Safety Visits and submit a referral to the Scottish Fire and Rescue Service. The Scottish Fire and Rescue Service will work with you to make sure that the person is safe in their own home. Requesting a home fire safety visit for the person you care for, when referring and answering "How did you hear?" please quote "Personal Plan".

- Call ☎ 0800 0731 999
- Text **"FIRE"** to **80800** from your mobile phone
- Complete our **online form** by visiting [www.firescotland.gov.uk](http://www.firescotland.gov.uk)

**Prevent the person you care for becoming a victim of fire.**

### Oxygen therapy

Make sure your oxygen equipment is stored safely out of direct sunlight, well ventilated, always dry and away from heat sources.

Do not smoke or allow others to smoke in your home or near your equipment, this includes e-cigarettes. Do not put oxygen therapy equipment near matches, candles, gas appliances or open fires. For further information, contact your oxygen supplier.

Keep everyone safe and inform the Scottish Fire and Rescue Service of oxygen use.

Fitting multiple linked smoke alarms, that all activate together, is the best way to be alerted in the event of a fire. There are special alarms for older people, people with disabilities or other special needs. Things like mains-powered smoke alarms with back-up batteries, and even vibrating pads and flashing lights that warn people who can't hear well.

If you think someone would need help to escape a fire it's important they have a way of calling for help. This could be a Telecare monitoring phone system that's been set up with a one-touch or automatically dialed emergency number, or it could be a private or local authority assistance alert scheme.





# Diabetes

## Types of diabetes how many are there?

You hear and read lots about diabetes as if it is a singular medical condition. This is far from the truth and can put peoples lives at risk. However the media like to sensationalise.

Some report as Type 1 and Type 2 as the two variants. They should in fact be segregating this be six types of diabetes.

- Diabetes insipidus this is relatively rare also known as water Diabetes

Diabetes Mellitus [www.nhs.uk/news/diabetes/are-there-actually-5-types-diabetes/](http://www.nhs.uk/news/diabetes/are-there-actually-5-types-diabetes/)

- Severe autoimmune diabetes (**SAID**): This type of Diabetes is controlled by insulin and blood glucose monitoring. Affect about 6% of the population.
- Severe insulin-deficient diabetes (**SIDD**): similar to SAID with one difference Glutamic acid decarboxylase antibodies (GADA) is negative. affects about 18% of the population
- Severe insulin-resistant diabetes (**SIRD**): high BMI and insulin resistant 15%
- Mild obesity-related diabetes (**MOD**): Main cause Obesity 22%
- Mild age-related diabetes (**MARD**): Elderly people with only mild problems glucose control 39%

The two priority areas of concern are those clustered into sidd who are at a higher-risk diabetic eye disease and SIRD a more significant risk of kidney disease.

**Forward Mid** have explained the diverse types.

Daily living for a type 1 SAID and SIDD

## What is like living with Type 1 Diabetes?

My name is Iain, and I have Severe autoimmune diabetes I have controlling it now for 38 years. Not long ago my own autoimmune system delivered another attack on my body, and I presently have Pancreas Atrophy. I currently cannot produce any insulin of my own.

**Diabetes is**...waking up drenched in sweat in the middle of the night with a hypoglycemic attack. Feeling agitated, shaky and panicky. Comprehending you need to get to your hypoglycemic treatment, but feeling unable to move and unable to communicate.

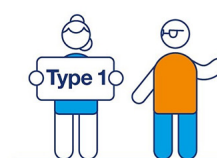
**Diabetes is**...Counting the carbohydrates in your food before consuming it (for me calculating the carbohydrates about 20 minutes before so can take correct insulin). Lots of insulin injections (five per day) and the resulting bruises/bleeding and Lipoatrophy. A rollercoaster of being thirsty, tired highs and trembling, starving lows. Endless hospital appointments.

**Diabetes is**...Something that involves constant management to stay well and healthy. This will help prevent complications the longer you have Diabetes.

**Diabetes is**...Thinking about it when you wake up, before every meal. Before you drive/exercise/drink/travel. Before your coffee, before bed and during the night.

**Diabetes is**...extreme maths. It's like an extreme sport but without the fun or cool factor. Needing to work out the weight of my food, figure out the carbohydrates content per 100g by calculating the food in front of me on the fly. Apply whatever ratio to insulin depending on time of day, consider how much fat or refined sugar is in the food (allowing for the speed of food absorption). Consider my current blood glucose level and calculate and apply any correction factors needed. Considering previous events whether a hypoglycemic attack occurred (Our bodies require time to recover and replenish its 'sugar stores' in the liver used up during a hypoglycemia attack.). Whether I

## What is Type 1 diabetes?



am considering exercising in the few hours before or after eating. The likelihood of being able to consume the meal and if there is a chance I won't like it or something will interrupt my meal. All this to be done before taking the insulin needed. And if my maths are wrong (even slightly). Blood sugars will go alarmingly low hypoglycemic (needing sugar). Blood sugars will go abnormally high hyperglycemic (needing insulin). Neither of which is pleasant as both leave you feeling tired, ill and drained. It equally involves having to analyse the numbers from your blood glucose tests to figure out which (of two) insulins need adjusting and by how much.

**Diabetes is...**Consistently having to carry lancets, needles, sensors, pump accessories, hypoglycemic treatments.

**Diabetes is...**Worry. Worrying about experiencing a severe hypoglycemic attack and passing out when alone with your toddler or driving. Worrying about accidentally overdosing on insulin and not waking up from your sleep. Being mistaken you for being drunk and being unable to get to a hypoglycemic treatment and going into a coma before you can initiate any action. Worrying about how diabetes and fluctuating blood sugars may have on your future health. Your eyesight, organs, feet. Worrying about hypoglycemic awareness as it diminishes. Worrying about how it may affect your children (in pregnancy and genetically transferring it).

**Diabetes is...**inconvenient. Sitting on your kitchen floor at bath time, trying to drink a carton of juice to avert a hypoglycemic attack. At the same time trying to fight off a toddler climbing all over you wanting share lol?? Having to test or treat during a work meeting or half way through a wedding. Experiencing a hypoglycemic attack before an appointment, you have to drive to.

**Diabetes is...**feeling fine but knowing you legally can't (and logically shouldn't) get in a car.

**Diabetes is...**Being "escorted" from premisses whilst experiencing a hypoglycemic attack and feeling absolutely alone and emotional. Becoming confused from hypoglycemia while in public and feeling like strangers are looking at you like you're eccentric. As you sit on the floor of a pound shop and rummage through packet after packet of sweets like your life depended on it.

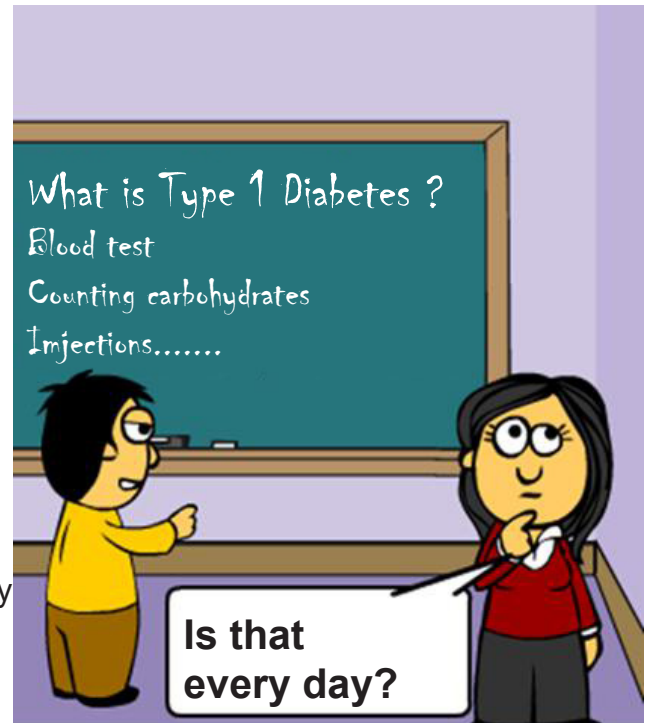
**Diabetes is...**a drawerful of medical supplies. A fridge stored with insulin, an on going stock count of what you have and what you lack. Emergency prescriptions and pharmacy trips.

**Diabetes is...**having to consider how your blood glucose levels will be affected by food, exercise and alcohol. Change in seasons from winter to summer. Going on holidays and change in time zones. Hormonal changes (monthly as well as pregnancy, and for others, puberty and menopause). Stress, and other medications which can affect glucose levels. Illness and extended recovery times.

**Diabetes is...**frustrating. SO is infuriating. You can perform everything "right" and end up with levels that take thought and action to correct. You can eat the exact same things three days in a row and end up with completely erratic readings. Which makes it very difficult to know when your insulin regime needs changed and by how much.

**Diabetes is...**never enjoying a day off.

**Diabetes is...**exhausting.



**Diabetes is**...not a death sentence, but it certainly is hard work.

**Diabetes is**...grossly misunderstood. Type 1 and Type 2 are vastly different. Both are affected by insulin production and blood glucose levels. That is where the similarities end. They have numerous causes and treatments and affect someone's life differently. You can not develop type one diabetes because you are overweight, devoured too many sweets or are inactive. No One certain why type 1 comes affects some people and not others.

I know it sounds like I am saying why me, what I am saying I mange my diabetes my way. However unless you are diabetic yourself or know someone who is, you would never know how much goes into managing the condition.

**Diabetes is**...being told to inject insulin a toilet by a non-diabetic wellwisher. Unless you are a dietician or diabetes medical professional your comments and opinions are not appropriate, informed or welcome.

NHS Inform [www.nhsinform.scot/illnesses-and-conditions/diabetes/diabetes](http://www.nhsinform.scot/illnesses-and-conditions/diabetes/diabetes) and [www.diabetes.org.uk/](http://www.diabetes.org.uk/) provides some really in-depth courses on diabetes management and promote "normal living" as much as possible,

Hopefully a bit of insight into daily life with type 1

## Type 2 Diabetes

Sheree, "My husband Chris developed type 2 diabetes and what we did was educate ourselves and as a family we did a whole change of life. Mostly with our diet."

Type 2 diabetes represent the most commonplace types, about 90% of people living with diabetes have type 2 Variant.

- Severe insulin-resistant diabetes (**SIRD**): high BMI and insulin resistant 15%
- Mild obesity-related diabetes (**MOD**): Main cause Obesity 22%
- Mild age-related diabetes (**MARD**): Elderly people with only mild problems glucose control 39%

The body doesn't produce enough insulin to function properly. This means glucose stays in the blood and then is not used as fuel for energy. Causing the liver to produce more glucose (or blood sugar) than usual but the body still cant use as fuel.

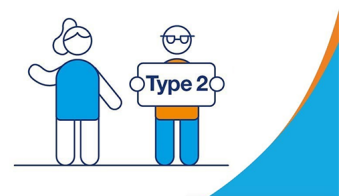
Some classic symptoms:-

- Increased thirst,
- Weight loss,
- Blurred vision,
- Frequent urination more so at night time,
- Fatigue,
- Increased hunger,
- Slow to heal cuts or ulcers,
- Frequent vaginal or penile thrush caused by crystalised sugars.

If you experience any of these symptoms, make an appointment with your GP or Nurse.

The next step is diet and exercising. These are fundamentals to treating it. This is a life style

### WHAT IS TYPE 2 DIABETES?





change and also medication if needed. It can't be cured, but it can be managed very successfully. The key to this is **KNOWLEDGE**, the more you inform yourself the better for your body. If you try to vision it as a life style change for the rest of your life.

The most important things to manage type 2 diabetes are following a nutritious diet that contains the appropriate balance of foods and physical activity as a first step of treatment. Your GP may suggest this for a few months before considering medication if needed.

Because you need to keep your blood sugars/glucose level as normal possible and doing self care and medical treatment are paramount.

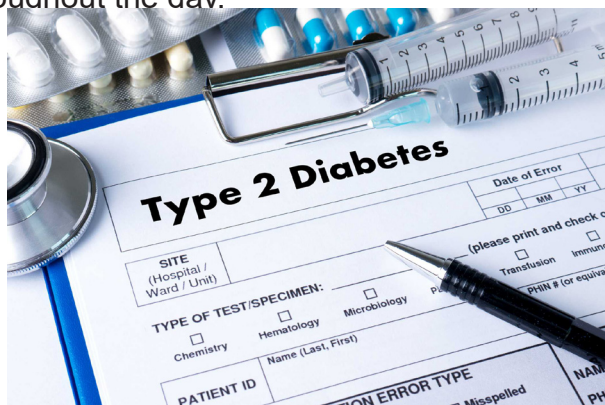
Educating yourself:-

- what is type 2 diabetes?
- What you can perform to take care of your body?
- Grasping how glucose/blood sugars work in your body and what to do to get the symptoms lowered or even better?

There is lots of information out there but recommend using [www.nhsinform.scot/illnesses-and-conditions/diabetes/type-2-diabetes](http://www.nhsinform.scot/illnesses-and-conditions/diabetes/type-2-diabetes) or [www.diabetes.org.uk/](http://www.diabetes.org.uk/) as a starting point. They are packed with lots of information from facts to food recipes and what foods to avoid or add to your diet.

Main points to remember:-

- Research type 2 diabetes to fully understand what it is/symptoms/treatments/what support you can get,
- Planning and organizing food menu,
- Eating regularly and enjoying nutritious snacks throughout the day.
- Exercise but be realistic about expectations of what you can do to start off and work up from there,
- This is a work in progress for the rest of your life,
- Talk to other people with type 2 diabetes and accept anything that is offered to you, study days or tips from others with diabetes,
- Educate yourself with foods and food labels.



This is not the end for you with type 2 diabetes it's a new journey and how to be kind to your body. This can be turned into a positive step. It will help you see that maybe you weren't looking after your health as best you can. However now you have no choice but to change it...youve got this!!!

## Diabetes insipidus

Diabetes insipidus is a rare condition where you pee a lot and often feel thirsty.

Diabetes insipidus is not related to diabetes mellitus, but it does share some of the same signs and symptoms.

Diabetes insipidus is caused by problems with a hormone called vasopressin (AVP). AVP plays a key role in regulating the amount of fluid in the body.

In diabetes insipidus, the lack of production of AVP means the kidney cannot make enough concentrated urine and too much water is passed from the body.

Diabetes insipidus can develop during pregnancy, known as gestational diabetes insipidus.

# Sight Scotland and Sight Scotland Veterans

## Tackling vision loss together

Charity Sight Scotland has launched a new Family Wellbeing Service, including a telephone helpline, providing support to people with sight loss and their families in the Lothians.

Individuals affected by sight loss, as well as carers, friends and families with a loved one affected by sight loss at any age or stage, can call the Sight Scotland Family Support Line on ☎ 0800 024 8973 to access the charity's expert advice, information and practical and emotional support.

The Family Support Line is free to call and open Monday to Friday, 10am – 12pm and 1pm – 3pm.

Following the new service's initial launch in Edinburgh and the Lothians, the charity plans to launch its Family Wellbeing Service nationally in the coming months.

Through the Family Support Line, the Sight Scotland team can provide information and advice on a range of topics including emotional support and befriending; advice on a wide range of visual impairments; equipment, aids and home adaptations; maintaining independence; benefits and financial support; and how and where to get support in your local area.

Research by Sight Scotland had shown that visually impaired people and their families had experienced a lack of support in the early stages of a sight loss diagnosis and in helping family members cope with the impact of their loved one's sight loss on their lives. Sight Scotland's new Family Wellbeing Service aims to tackle this identified gap in support as the charity reaches out to even more people affected by sight loss in Scotland.

Colin Hilditch, Head of Community Services at Sight Scotland, said: "Sight loss has a huge impact on life, not only for the person with visual impairment themselves, but also for their loved ones. Our research revealed a need for more advice and emotional support for the whole family to help them cope with the impact of their loved one's sight loss.

"We are proud to launch the new Sight Scotland Family Wellbeing Service and our new helpline to address this need for support. Our friendly team have extensive knowledge and experience to help each individual in any way sight loss is affecting them, and we hope people with sight loss and their families will reach out to us through our helpline for our expert advice and support."

Other features of Sight Scotland's Family Wellbeing Service include a befriending service, home visits (when Scottish Government restrictions allow) and online information and advice through Sight Scotland's website, [sightscotland.org.uk](http://sightscotland.org.uk)

For more information on the Sight Scotland Family Support Line, please visit [sightscotland.org.uk/supportline](http://sightscotland.org.uk/supportline)

Debbie McGregor  
Community worker  
Sight Scotland

Web: [sightscotland.org.uk](http://sightscotland.org.uk)  
[sightscotland.org.uk/veterans](http://sightscotland.org.uk/veterans)



Sight Scotland is the new name for Royal Blind, Scottish charity number SC017167  
Sight Scotland Veterans is the new name for Scottish War Blinded, a Scottish Charitable Incorporated Organisation, charity number SC04719

## LOTHIANS VETERANS CENTRE GETS DIGITAL

The centre provides a drop-in service in Dalkeith for veterans, and they can come for help without making an appointment. It is the only place in the Lothians that gives them this choice. But it also is a social centre for the local veterans community, and they can drop in for a cup of tea and a chat (and usually a biscuit) and sit in the lounge area, and there are frequent social events like trips out and film nights as well as bacon roll and music mornings.

We had a big day planned for that Friday. The last day of the week had become our busiest day with our Bacon Roll Mornings proving popular with our veterans. Who doesn't like a free bacon roll? We often used to also do our musical sing-a-longs on a Friday so the centre was usually packed. On Friday March 20 2020 we also had a planned visit by Lt Colonel Hugo Clark, the commander of the Edinburgh Garrison, who was keen to see at first hand the work the Lothians Veterans Centre does supporting veterans and their families. But that was not happening.

Like the rest of the country we were to be plunged into a world of fear and uncertainty and Lothians Veterans Centre would be forced to adapt, adapt and adapt again in our efforts to support our veterans. Early last year it became clear that the work of the centre staff to support the veterans and their families was going to have to change, and they were going to have to step up to fulfil many new roles, some of which would involve putting themselves at increased risk by visiting supermarkets, shops, pharmacies, doctors surgeries and then travelling to distribute the vital supplies, sometimes to sheltered housing complexes.

Therefore, the members of staff drew up lists of who needed phone calls and how often, sometimes every day for the most vulnerable. The staff were also providing by phone the usual advice on health and wellbeing, referring to other organisations if needed, pensions, benefits, finance, jobs, and housing, and also distributing food hampers to those in need.

By August we were hoping that restrictions would continue to be eased and were working on new activities that would help restore the veterans, improving their physical and mental health. We started up a walking group, which quickly became two walking groups for people of different abilities. We had a morning's introduction to the delights of electronic bikes in Dalkeith Country Park. But these were destined to be put on hold by December.

But by this time it was also becoming apparent we would have to see what we could do about getting people together using technology. At this point none of us had heard of Zoom. Who would have thought that it would be a major part of veteran centre life in just a few months time. By this time the staff were all using Zoom regularly, and we were aware of veterans using it too.

So we launched a great yoga class for both mental and physical health, by Zoom. It is taken by a life coach, yoga teacher and veteran John Arthur, and there were plenty of takers. We also launched a Zumba fitness class for veterans via Zoom and kicked off a virtual walk aiming to notch up 1,000 miles, with those taking part able to walk anywhere, even inside their own homes, and record their steps on pedometers and we would post weekly updates on our Facebook page. But perhaps our most ambitious Zoom project was starting up our popular weekly lunch club, called the D-Day club, using the virtual technology.

So with a lot of hard work by staff but particularly by the two volunteers who run the club, the amazing Krissy Mckale and Grace Purdie, the D-Day club was soon taking place every week again. Thanks to funding from the Scottish Veterans Fund the veterans can get scrabags, do



some exercise, get crafting, and take part in quizzes and bingo. But more importantly, they get to stay in contact, and even though it is by video link there is still the banter and the comradeship. A great example of having to adapt.

Ian Stewart is Chief Executive of Lothians Veterans Centre  
Contact him at [ian@lothiansveteranscentre.org.uk](mailto:ian@lothiansveteranscentre.org.uk)

## Cybersecurity:


Please remain on high alert for cyber scams. Midlothian Voluntary Action received a very realistic looking email chasing an overdue invoice which we only realised was a scam when it asked us to use an 'alternative' bank account, and at this point we noted it was not the usual email address. To succeed these scams rely on panicking you into responding, so if an email comes in that seems to be urging you to act very quickly, take a minute just to make sure that all details especially bank details etc really check out.

Check senders details this is done near the top on this sample it Nazia Sultana Uddin however the sender is different stating 2019-00643@ac-kuwait.edu.kw. This will be the persons matriculation number and the college in Kuwait. Both need to match to be genuine. Another give away is to check who it was sent to this one states no-reply@accountpayable.co.uk, so not addressed to me. This came with a PDF attached **DO NOT OPEN**. It will possibly contain a virus. Check spelling this one uses a full stop instead of question mark.


Another way to check inside the link. Open link and try to open a link on that page such as Terms and Conditions. If nothing happens it is a fraud website. Shut it down and delete email.

Think before opening, if still not sure use a search engine and type in the telephone number to a search engine to see if it is a risk number.

**Remittance Advice: Document reference - 14113599**

 **Nazia Sultana Uddin** <2019-00643@ac-kuwait.edu.kw>  
07/01/2021 11:48

To: no-reply@accountpayable.co.uk

 PaymentAdviceNotefrom101...  
14 KB

Find attached copy of a Remittance Advice which relates to a payment by BACS.

Please Note: The payment has been issued by BACS transfer which should appear in your account within the next 2-3 working days

Should you have any queries, please do not hesitate to contact us via the details provided on the attachment.

Mon to Fri: 8am to 7pm Sat: 9.00am to 12pm




Tel: 03300 243 438  
Fax: 03300 242 971

Kindest Regards,

On behalf of Accounts Payable

## Alternative Publications

Please like us on Facebook [www.facebook.com/forwardmid/](https://www.facebook.com/forwardmid/) 

Forward Mid newsletters are available in large print on request from Eric Johnstone ☎ : 0131-663-9471 or  [eric.johnstone@mvacvs.org.uk](mailto:eric.johnstone@mvacvs.org.uk) write to him at MVA, 4-6 White Hart Street, Dalkeith, EH22 1AE with your request. Electronic copies can be found on [www.forwardmid.org.uk/newsletters.html](http://www.forwardmid.org.uk/newsletters.html). The latest Firefox browser has the reader symbol  in the address bar, click and select narrate from left menu. The latest Safari Browser has the reader symbol  but does not read aloud. These only work on websites without errors. If you require help please contact Forward Mid and we will arrange to help you.

**Edited by Iain Tait for Forward Mid**