

Rotary



ROTARY
SERVING
HUMANITY

50 Years of Service



1966 - 2016
Rotary Club of Puducherry

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Date : 20th February 2017
Issue No : 1625

Berita Pudu

PROGRAMME FOR TODAY

Speaker: PP Dato' Muslim Ayob
Subject: My Rotary
Duty Table: Rtn Chee Tack Kong
Fellowship: Rtn Kenneth Goh
Finemaster: Rtn Laura Lee
Introducing: PP Michael Yeow
Thanking: PP Dato' Dr Lee Hoo Teong

PROGRAMME FOR NEXT WEEK

NO MEETING

FEBRUARY— PEACE & CONFLICT PREVENTION/RESOLUTION MONTH

DIARY OF EVENTS—FEBRUARY 2017

Sat, 4th Feb	3.00 pm	Rotaract Board of Directors Meeting	Elilai Restaurant, KL
Mon, 6th Feb	5.00 pm	ILTMC Committee Meeting	Furama Hotel, KL
Mon, 6th Feb	6.00 pm	Group 12 Clubs Joint Meeting	Furama Hotel, KL
Tue, 7th Feb	6.00 pm	Incoming Community Service Cttee Meeting	RSC, Bukit Kiara, KL
Wed, 8th Feb	6.00 pm	Incoming Club Service Committee Meeting	Faber Towers, KL
Thurs, 9th Feb	6.00 pm	Outgoing Club Service Committee Meeting	RSC, Bukit Kiara, KL
Mon, 13th Feb		NO MEETING	
Wed, 15th Feb	6.00 pm	Outgoing International Service Cttee Meeting	RSC, Bukit Kiara, KL
Thurs, 16th Feb	5.30 pm	ILTMC Committee Meeting	Sri Damansara Club, KL
Thurs, 16th Feb	6.30 pm	FIRESIDE—Community Service	Sri Damansara Club, KL
Fri, 17th Feb	3.00 pm	Interact Coordinating Council Meeting	SMK Methodist, KL
Mon, 20th Feb	12.45 pm	Weekly Meeting	Furama Hotel, KL
Tue, 21st Feb	6.00 pm	Incoming Youth Service Cttee Meeting	RSC, Bukit Kiara, KL
Tue, 21st Feb	7.00 pm	Incoming Vocational Service Cttee Meeting	RSC, Bukit Kiara, KL
Wed, 22nd Feb	6.00 pm	Outgoing Board of Directors Meeting	Unique Restaurant, PJ
Mon, 27th Feb		NO MEETING	
Tue, 28th Feb	6.00 pm	Incoming Board of Directors Meeting	Residence of Jeff Yap

EDITORIAL

A young woman went to her mother and told her about her life and how things were so hard for her. She did not know how she was going to make it and wanted to give up. She was tired of fighting and struggling.

It seemed that, as one problem was solved, a new one arose. Her mother took her to the kitchen.

She filled three pots with water and placed each on a high fire. Soon the pots came to a boil. In the first, she placed carrots, in the second she placed eggs, and in the last she placed ground coffee beans.

She let them sit and boil, without saying a word. In about twenty minutes, she turned off the burners. She fished the carrots out and placed them in a bowl. She pulled the eggs out and placed them in a bowl. Then she ladled the coffee out and placed it in a bowl. Turning to her daughter, she asked, "Tell me, what do you see?"

"Carrots, eggs, and coffee," the young woman replied. The mother brought her closer and asked her to feel the carrots. She did and noted that they were soft. She then asked her to take an egg and break it. After pulling off the shell, she observed the hard-boiled egg. Finally, she asked her to sip the coffee. The daughter smiled as she tasted its rich aroma. The daughter then asked, "What does it mean, mother?"

Her mother explained that each of these objects had faced the same adversity - boiling water - but each reacted differently. The carrot went in strong, hard and unrelenting. However, after being subjected to the boiling water, it softened and became weak.

The egg had been fragile. Its thin outer shell had protected its liquid interior. But, after sitting through the boiling water, its inside became hardened! The ground coffee beans were unique, however. After they were in the boiling water, they had changed the water.

"Which are you?" the mother asked her daughter.

"When adversity knocks on your door, how do you respond? Are you a carrot, an egg, or a coffee bean?" Think of this: Which am I? Am I the carrot that seems strong but, with pain and adversity, do I wilt and become soft and lose my strength? Am I the egg that starts with a malleable heart, but changes with the heat? Did I have a fluid spirit but, after a death, a breakup, or a financial hardship, does my shell look the same, but on the inside am I bitter and tough with a stiff spirit and a hardened heart? Or am I like the coffee bean? The bean actually changes the hot water, the very circumstance that brings the pain. When the water gets hot, it releases the fragrance and flavour.

If you are like the bean, when things are at their worst, you get better and change the situation around you.

When the hours are the darkest and trials are at their greatest, do you elevate to another level? How do you handle adversity? Are you a carrot, an egg, or a coffee bean?

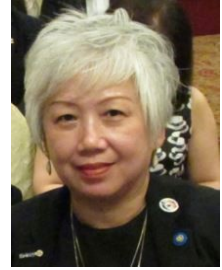
Warmest Regards.

PAG Mike Tung



PRESIDENT'S MESSAGE

The recent Group 12 Joint Clubs Project was successfully carried out, led by the RC Kampung Baru City Centre with the assistance from the RC Kota Bahru. This project targeted families affected by the floods in Kelantan.



Initially I thought it was a routine donation to assist the affected families. However during our visit to the site of the affected homes, I was surprised by the condition of those affected. It was hard to imagine what they had to put up with after the flood. They barely had enough of the most basic of necessities that were made available.

Hopefully our donation will bring some relief to their lives. In total our donations helped a group of 69 families. The following were donated:

- Gas stoves and gas regulators
- Mattresses and pillows
- Kitchen racks
- Bath towels.

We also donated two water filters to Sekolah Merbau and Sekolah Peir Chih.

This event reminded us to always cherish what we have. Wealth does create comfort and give us material satisfaction, but it is just as important to have the richness of compassion and empathy within one self.

“ROTARY SERVING HUMANITY”

Sandy Soh Kwee Tin
President RY 2016-2017

PUDU NEWS

Record of Meeting on: 6th February 2017

Visiting Rotarians		Club	Statistics	
DG Darul Abdullah		R C Melawati	Guests	4
AG Lim Poh Huu		R C Puchong Centennial	Visiting Rotarians	43
15 Rotarians		R C Gombak	Club Members	25
9 Rotarians		R C Kampung Baru City Centre	Total Present	72
9 Rotarians		R C Puchong Centennial	Collections	
7 Rotarians		R C K L City Centre		
PP Stuart Pack		R C K L Di Raja		
Guests		Host		
Ms Veronique		Rtn C T Heng		
Ms Maolou		Rtn C T Heng	Birthdays/Anniversaries	
Mr Jitco Chin		Rtn Patrick Lee	Fines	
Mr Patrick Lee		PAG Mike Tung	Paying Diners	1770.00
			Raffles & Others	
			Total (RM)	1770.00

CLUB PROCEEDINGS

MEETING CALLED TO ORDER

DG Darul Abdullah called the meeting to order at 7.00 pm. He welcomed all guests and Rotarians. SAA Darren then led in the singing of the National Anthem. The toast to Rotary International was proposed by PDG Leslie. The Loyal Toast was proposed by PAG Johnson Pang

INTRODUCING THE SPEAKER

Rtn Kenneth Goh introduced the guest speaker PP Stuart Pack

THANKING THE SPEAKER

PP Alan Chan thanked PP Stuart Pack for a very educational and enlightening presentation. DG Darul then presented a Certificate of Appreciation and a memento to PP Stuart Pack.

ANNOUNCEMENTS

1) The Presidents of the Rotary Clubs of Kampung Baru City Centre, Gombak, Puchong Centennial, Kuala Lumpur City Centre and Pudu made their announcements.

2) This was followed with an exchange of banners between the 5 clubs



SPEAKER'S CV



CV OF PP STUART J V PACK

<u>Managing Director & Cofounder</u>	Medo Asia Sdn Bhd (Medical Opinion Asia)
<u>Chief Executive Officer/Director</u>	REDtone MEX (Teleradiology)
<u>Chief Executive Officer</u>	iHeal Medical Centre, Kuala Lumpur, Malaysia
<u>Managing Director</u>	Vamed Healthcare Services and Vamed Engineering (M) Sdn Bhd Kuala Lumpur, Malaysia
<u>Chief Executive Officer</u>	Prince Court Medical Centre, Kuala Lumpur Malaysia
<u>Chief Executive Officer</u>	Golden Horse Palace Bhd (Country Heights Holding Bhd), Kuala Lumpur, Malaysia
<u>Chief Executive Officer</u>	Gleneagles Intan Medical Centre, Kuala Lumpur, Malaysia
<u>Senior (Regional) Manager</u>	Radicare (M) Sdn. Bhd, Kuala Lumpur, Malaysia
<u>Chief Operating Officer</u>	Subang Jaya Medical Centre, Malaysia (HCA International, USA. , Tenet Inc., USA)
<u>Assistant Administrator</u>	Mount Elizabeth Hospital, Singapore (NME International, USA)
<u>Chief Operating Officer</u>	Balestier Medical Centre, Singapore

SPEAKER'S TEXT

MedicalOpinionAsia

How to Survive a Hospital Visit

Understanding the Dangers of being a Patient in a Hospital, and How to be Personally Involved is your own safety



www.medicalopinionasia.com

MedicalOpinionAsia



All Patients want to Leave Hospital Better than when they arrived, and it is every patient's right to do so.



MedicalOpinionAsia



But there is a growing risk that not all patients will leave the hospital in the way they thought possible. And the older the patient, the greater the risk

Figure 1. Hospital Adverse Event Rates by Age Group

Age Group	Rate
65+	5.5
45-64	4.5
15-44	3.5
15 and less	3.5
Newborns	1.5

Rate per hundred, standardized by DRG class
Source: Journal Medical Practice Daily, 1990, 6:24.

MedicalOpinionAsia



But unfortunately that is not always the case, and in The United States, figures show that more than 250, 000 patients a year, leave the hospital, unintentionally DEAD



MedicalOpinionAsia

Some further Statistics to Worry You

Hospital Quality in America Study 2011

- 40, 000 harmful or lethal errors each and every day
- Hospital acquired infections now affect one in 25 patients
- 722,000 patients in 2011 contracted an infection during a stay in an acute care hospital in the US
- Of the 722,000 patients with an infection, 75,000 died as a result
- More than half of the infections were contracted outside of the intensive care
- 164,470 in hospital complications could potentially have been avoided had the patient gone to a top rated hospital

MedicalOpinionAsia

And What Were the most common Infections

Hospital Quality in America Study 2011

- Central line associated bloodstream infections
- Catheter associated urinary tract infections
- Surgical site infections after surgery

SPEAKER'S TEXT

MedicalOpinionAsia

Each year the US News presents a comparison table for hospitals across the US, ranking each in different categories. A patient needing to go to a hospital can quickly access information giving sufficient information to give peace of mind, and a reference point for comparison.



2016-17 Best Hospitals Honor Roll and Overview

The 2016-17 Best Hospitals Honor Roll

BEST HOSPITALS What to Know Before Undergoing Heart Valve Replacement Surgery

BEST HOSPITALS Everything You Want to Know About Recovering from Colorectal Surgery

BEST HOSPITALS What to Look for in a Hospital if You Need Lung Cancer Surgery

BEST HOSPITALS Abdominal Aortic Aneurysm: When It's Surgery Time

MedicalOpinionAsia

'750 avoidable deaths a month in NHS hospitals, study finds'

About 750 patients a month in NHS hospitals are dying unnecessarily, the largest review of "avoidable deaths" has found. Researchers at the London School of Hygiene and Tropical Medicine said one in 28 deaths could be attributed to poor care such as inattentive monitoring of the patient's condition, doctors making the wrong diagnosis or patients being prescribed the wrong medicine. In February, the health secretary, Jeremy Hunt, announced that hospitals in England would be required to monitor the rate of avoidable deaths and that officials would rank trusts on this measure.



The Guardian, July 14th 2014 (UK)

MedicalOpinionAsia

MALAYSIA unfortunately has no such tables, no comparisons, little or no data for public knowledge, and no guide as to which is a safe hospital, whether private or public

Which is WHY, patients and their families must be aware of what they must do for their own safety and well being whilst in Hospital.



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A Malaysian Study

2012, Khoo et al BMC Family Practice

Primary Care Clinics, 12 Government Clinics, 6 East 6 West Medical Records were retrieved and analysed

Documentation errors 98%

Patient Management Errors 53.2%

Diagnostic Errors 3.6%

Preventability and Likelihood of serious harm 93.5% (preventable errors)

But Serious Harm potential 39.9%

Medication Errors 41.1%

Investigation errors 21.7%

Decision making errors 14.5%

Diagnostic errors 3.6% but diagnosis inconclusively due to inadequate documentation 61.9%

MedicalOpinionAsia

Conclusion

The occurrence on medical errors in primary care was common and the likelihood of errors causing serious harm was high, of which most were considered preventable.....

This study calls for more research into the prevalence of categories of errors, and interventional studies to reduce medical errors.

2012, Khoo et al BMC Family Practice

MedicalOpinionAsia

So What can a Patient and Family Do

Firstly, be aware of Potential Problems




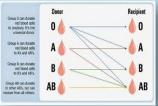
JCI Sentinel events 2015

1. Unintended retention of a foreign body
2. Wrong Patient, wrong site, wrong procedure
3. Fall
4. Suicide
5. Dialysis related event
6. Operative/post operative complication
7. Other unanticipated event – asphyxiation, burn, choke on food, drowned or found unresponsive
8. Unassigned
9. Delay in treatment
10. Perinatal death/injury

SPEAKER'S TEXT

Information and Identification

- Make sure you are given a name tag, correct details and always on wrist
- Have a written copy of all your medicines including any description of herbal medicines, keep a copy and give a copy to the nurse admitting you
- Ensure you wear a tag if you have an allergy, and if you are at risk from falling
- Know who your ward manager is, write down to name
- Any carer without a name tag, ask why?

Communication

- Bring a friend, relative to be with you as much as possible to ensure you understand what is going on, introduce them to the staff
- Know who the staff are, by name, keep a note
- Make sure everyone of the care providers knows who you are and why you are in hospital
- Ask questions, keep a note of questions, don't be shy with anyone
- If in doubt, say something, and keep a note
- Check labels yourself, including maintenance labels






Observe


- Are your care providers healthy, ask the staff to wear a mask if they are unwell?
- Have the staff washed their hands?
- Has the doctor wiped his stethoscope before placing it on you?
- Has the doctor fully explained what he is going to do, how you will react to it, and any side effects
- If you are having an operation, is the site of the procedure marked, if not ask why?













Acceptable and unacceptable markings for 'surgical site' or side



The diagram shows a hand with a surgical site marked. It includes labels for 'STICKER' (Acceptable only as an adjunct), 'SIGNATURE' (Acceptable on its own), 'X' (Never acceptable), and 'YES' (Acceptable on its own). A 'yes!' is written next to the 'YES' label.







Observe

- How clean is the room, dust, insects, blood stains, mould? Don't be shy to point out the problems. Be nice about it.
- Be careful of wet floors in the bathroom, and raised steps into the bathroom
- Is the call bell working?
- Do the staff know what they are doing?
- Do not allow anyone to sit on your bed?
- Is the furniture clean?

Observe

- If you have an IV (Intravenous Line), watch for bubbles, make sure the bag is not empty, make sure the drip chamber is not empty
- If the system has an alarm, ask the staff to demonstrate that the alarm works
- If blood is transfused, watch the checking procedure, and question if at all worried
- Look for signs of an infected cannula and alert the staff if they are unaware of redness
- Ensure urinary catheter bags are not on the floor, chest drains placed correctly. Always ask the staff what are they doing, be a part of the team

SPEAKER'S TEXT



What to Bring to Hospital

- A friend or relative (assist with communication, company)
- Your medications, listed (to ensure the staff are well briefed)
- A note book and pencil (keep a note of everything, especially questions to ask)
- Disposable slippers (dirty floor, wet bathroom)
- A packet of tissues (all purpose)
- A packet of wet wipes (wipe your bed table, tray, anything close to you)
- A packet of alcohol wipes (wipe stethoscope, call bell, hospital telephone)
- Consider your own pillow (hospital pillows may be considered an infection risk)
- A mobile telephone (so you can call someone if you are worried and don't have a friend with you, and take photographs)
- Consider some simple face masks to give your visitors if they have a cold



To Summarise

1. Take a **friend** with you to hospital as your confidant, witness, moral support
2. Take a **note book** and pencil
3. Take your **medicines** with you to hospital, including traditional medicines
4. Mention all your **allergies**
5. Get **identification** on you, accurately
6. Make sure the room, bed, furniture, curtains, walls, floor are **clean**
7. Get to know your care **providers** by name, especially the manager
8. Make sure everyone around you knows **what you are there for**
9. Ask questions, **be inquisitive and ask**, never be shy, but be pleasant
10. If you cannot remember, **write the question** in your note book and ask your doctor
11. Keep your eyes open for **anything unusual**, IV, tube connections, drainage bags on the floor
12. If you are having an operation, have the **operative site marked** (L) (R) etc.
13. Anything unusual about you, the room, your medications, **CALL** someone and keep a note in your notebook
14. **Make your care providers your friend**, don't annoy them, **ALWAYS** ask questions



March 2002, The Joint Commission & Centers for Medicare and Medicaid Services SPEAK UP Campaign

Speak – Speak if you have questions and concerns

Pay Attention – Make sure you are getting the right treatments and right medicines. Don't assume anything

Educate Yourself – Learn about your illness, conditions, diagnosis, medical tests and procedures

Ask – If you don't understand something, ask again. Ask a family member or friend to be your advocate – especially in hospital. Ask to see the math. Ask to double check. Ask your pharmacist

Know - Know your medication – dose and frequency. Know your weight in pounds and kilograms. Know your allergies

Understand - Understand why you need your medications, understand your medication instructions. Make a copy of the original prescription before giving it to your pharmacist. Understand your plan of care

Participate - Participate with your healthcare team. You are the most important person. Trust your instincts



Thank you for listening, this Presentation has been brought to you by Medical Opinion Asia, in the hope of raising awareness of self responsibility and safety for patients in Hospital

Overcome your Preconceived Fears

www.medicalopinionasia.com

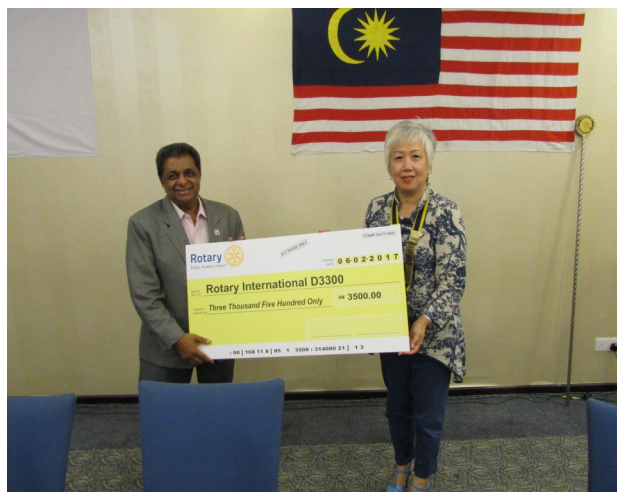
**GROUP 12 JOINT CLUBS MEETING
FURAMA HOTEL, KL
6TH FEBRUARY 2017**



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**GROUP 12 JOINT CLUBS MEETING
FURAMA HOTEL, KL
6TH FEBRUARY 2017**



BIRTHDAYS & ANNIVERSARIES

ROTARIANS' BIRTHDAYS (FEBRUARY)

22nd—PP Choo Jee Sam

SPOUSES' BIRTHDAYS (FEBRUARY)

WEDDING ANNIVERSARIES (FEBRUARY)

07th—Rtn Loo Ming Chee and Ann Eelian

14th—Rtn Sannice Soh and Spouse Choon Wai

22nd—PP Kumar Tharmalingam and Ann Rancee

ANNOUNCEMENTS



Event: **RYLA 2017**

Date: 2nd—5th March 2017

Venue: EDC Hotels & Resorts Sintok, Kedah

OC: Rotary Club of Alor Star

Event: **INTERACT LEADERSHIP TRAINING & MOTIVATIONAL CAMP**

Date: 18th—20th March 2017

Venue: Kem PLKN PDS Resort, Port Dickson

OC: Youth Service Committee

Event: **83RD DISTRICT TRAINING ASSEMBLY**

Date: Saturday, 22nd April 2017

Venue: M S Garden Hotel, Kuantan

OC: Rotary Club of Kuantan

Event: **82ND R I DISTRICT 3300 CONFERENCE**

Date: 12th—14th May 2017

Venue: Bayview Beach Resort, Penang

DISTRICT NEWS

Rotary

RYLA

Rotary Youth Leadership Awards

ROTARY CLUB OF ALOR STAR

at EDC Hotels & Resorts Sintok, Kedah

Universiti Utara Malaysia

2-5 March, 2017

Theme

Yes! I Can

DISTRICT NEWS



1 APRIL 2017
9.00am - 5.00pm

Rotary
District 3300, Malaysia



1st NATIONAL CONFERENCE AUTISM & INCLUSION

Nexus Connexion, Bangsar South City, Kuala Lumpur

Supporting Families & Engaging Professionals



Register NOW at:



Rotary District 3300 Action Group on Autism

In partnership with:



NECIC 

DISTRICT NEWS



SAYANGI MATA VISION CLINIC

COMPREHENSIVE EYE EXAMINATION
& FREE SPECTACLES



OneSight Rotary



SEGi
University &
Colleges

1–5 May 2017

**Tun Hussein Onn National Eye Hospital
Petaling Jaya**

**Rotary & Rotaract Clubs interested
to be a part of this project, contact**

IPP Thana: 012-334 2221

thana25@ymail.com

IPP Chow: 012-239 9588

ccpymw@gmail.com

Over 3,000 spectacles
For Underserved Adults & Children
to be Given Away

DISTRICT NEWS



+ **REGISTRATION**
RM350.00

+ **WELCOME
DINNER**
RM100.00

+ **ACCOMODATION**

RM280 NET
(Superior twin sharing)

RM350 NET
(Deluxe twin sharing)

PLEASE VISIT
3300dgnewsletter.org

82ND DISTRICT CONFERENCE

RY 2016-17

RI DISTRICT 3300

**BAYVIEW
BEACH HOTEL
PENANG**

12-14 May 2017

Rotary
Districts 3300, Malaysia



**ROTARY
SERVING
HUMANIT**

ROTARY INTERNATIONAL NEWS

February 2017 | Ideas for strengthening membership



How flexible are your membership options?

Do you know Rotaractors who could bring new perspectives, ideas, and energy to your club? Have your members asked for a more flexible attendance policy or different membership types? Here are five ways to implement the new options for membership flexibility approved during the 2016 Council on Legislation.

- Change your meeting schedule — you can change the day and time your club meets, as long as your club meets at least twice a month.
- Vary the meeting format — you can meet in person or online, or have a combination of both. Read how the Rotary Club of New York is teaming with the UN to host monthly breakfast meetings online.
- Relax attendance requirements — while attendance is important, you can encourage members to give their time in different ways.
- Offer different membership types — alternative types include family, junior, or corporate memberships. These members will only be considered active and counted toward your membership total if they pay RI dues.
- Invite Rotaractors to be members of your club — you can reduce fees or relax the attendance policy for these members, as long as your bylaws reflect this.

Visit www.rotary.org/flexibility to learn more and to access resources to help your club start applying these changes. If you've already made changes to help your club membership become more flexible, tell your story to fellow Rotarians on the Membership Best Practices Discussion Group.

THOTS FOR THE WEEK

