
ENDURING CONNECTIONS



BALLARAT
HOSPICE
CARE INC.
Home Based Palliative Care

2019-20
ANNUAL REPORT

ENDURING CONNECTIONS

Our front cover shows 140 years of commitment and experience making Ballarat Hospice Care the special place it is to work and volunteer. Together Debbie, Kath, David, Sharon, Mandy and Leanne have provided over 140 years of service and have contributed to the positive relationship with our community and the growth of Ballarat Hospice Care.

Recently the group reflected on their enduring connection to Ballarat Hospice Care. Some of their thoughts include:

"...it's what the patients give us...we learn every day and it's an honour to be with patients and their families at one of the hardest times of their life."

"... it's the sense of satisfaction and being surrounded by supportive people..."

"...it's the heartfelt gratefulness of families in their time of need..."

"If you did not love the work, you would not be here."

"...we treat everyone the way we would treat our own family...that's with respect, kindness and dignity..."

"Patients give us a gift; to be present with them. While we can't change what is happening, we can have an impact and make a difference. That is why we and they are grateful."

"Giving patients and their families and carers a choice. It is such a vulnerable time. We don't judge anyone for their choices. It is their life and what matters is that we are there."

Pictured on the front cover from left to right are Debbie Hubble (Specialist Palliative Care Nurse), Kath Connors (Volunteer), Dr David Brumley (Medical Director), Sharon Moss, Mandy Martin and Leanne Burns (Specialist Palliative Care Nurses).

OUR VISION

To offer our community a specialist palliative care service focused on end of life issues and care.

OUR MISSION

Ballarat Hospice Care, using a skilled, interdisciplinary team approach, facilitates with compassion, the provision of homebased, holistic palliative care, to anyone facing end of life issues.

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HEARTFELT THANKS AND FAREWELL

We greatly valued the time you spent with us and your individual contribution.

Brittany Rose – Social Work student placement within Supportive Care and leading our 2019 Ceremony of Remembrance

Lydia McKee – helping us grow our Telehealth and Supportive Care

Paula Robinson –guiding patients and families through their grief and bereavement, contributing to Carer Education and assisting them with all elements of Supportive Care

Shelley Malcolm – working as a Specialist Palliative Care Nurse within our multidisciplinary team, supporting patients, carers and families at home

All at Ballarat Hospice Care value the contribution of Brittany, Lydia, Paula and Shelley in their varying roles that make up a team of talented, loyal and innovative staff; helping us grow and respond to the changing palliative care needs in our community.

ABOUT US

OUR OBJECTIVES

- 1. To provide specialist palliative care equitably and responsively within available resources
- 2. To promote palliative care values within the community

OUR PHILOSOPHY

We believe:

- That the care of patients must acknowledge the whole person in their social context.
- That suffering, grief, loss and death are a part of life.
- We aim to relieve suffering by providing information relevant to patients and carers, which reflects their choice.
- That all patients and carers are entitled to open, honest communication, which respects choices and autonomy.
- That caring for ourselves and each other enables us to care for others.
- That bereavement and support is an essential element in supporting people after loss.

ACKNOWLEDGEMENT AND INCLUSION

We:

- Acknowledge the Traditional Custodians of the land on which we stand, the Wadawurrung people. We pay our respect to Elders past, present and emerging, and to all Aboriginal people.
- Are committed to ensuring our services are safe, respectful, equitable and inclusive to all people, their carers and families.
- Welcome and work with people of every age, health status, race, ability, gender identity, sexual orientation, religion, culture, linguistic background, and financial status.

OUR STRATEGIC GOALS

1. Client Community

A home based, person-centred, specialist palliative care service with the capacity to meet diverse consumer needs and provided in collaboration with patients, carers, other service providers and community stakeholders.

2. Internal Business

A sustainable business and service delivery model, by which Ballarat Hospice Care both engages with, and provides leadership to, other service providers and the community, in order to meet future service demands.

3. Financial

Growth in funding and resources, both government and independent, that ensures financial viability and enables growth of services to meet demand.

4. Innovation and Learning

Recognition as a Centre of Excellence in the provision of home based specialist palliative care services by a workforce, including volunteers, with relevant experience, qualifications and skills.

CARER RECOGNITION

Ballarat Hospice Care Inc. takes all practicable measures to ensure that its employees and agents have an awareness and understanding of the care relationship principles in relation to the Carer Recognition Act 2012 (Vic) and the Statement for Australian Carers in the Carer Recognition Act 2010 (Cth).

CHILD SAFETY

Ballarat Hospice Care Inc. is committed to creating and maintaining a child safe organisation where protecting children and preventing and responding to child abuse is embedded in the everyday thinking and practice of all management, employees, volunteers and contractors. Ballarat Hospice Care has zero tolerance for child abuse.

OUR PATRON

Rob Knowles AO

OUR COMMITTEE OF MANAGEMENT

CHAIRMAN

Geoff Russell
B.A. (Sociology), Grad. Dip. Bus. Admin., Dip. Fin. Services. GAICD

DEPUTY CHAIRMAN

Kevin Harper
FCR (Lond.), Grad. RMA Sandhurst, MACPM, ARSCM, L.Th

TREASURER

Sandra Marston
Bachelor of Commerce, Bachelor of Science (Hons), Chartered Accountant

MEMBERS

Neale Gribble
Bachelor of Law, Bachelor of Commerce

Meredith Johnson
Bachelor Economics

Reverend David Leach
Bachelor of Theology, TPTC

Stephen Lewis
Bachelor of Business, Certified Practising Accountant & member Tax Institute Australia

SUB-COMMITTEES

FINANCIAL

Geoff Russell (Chair), Sandra Marston, Stephen Lewis

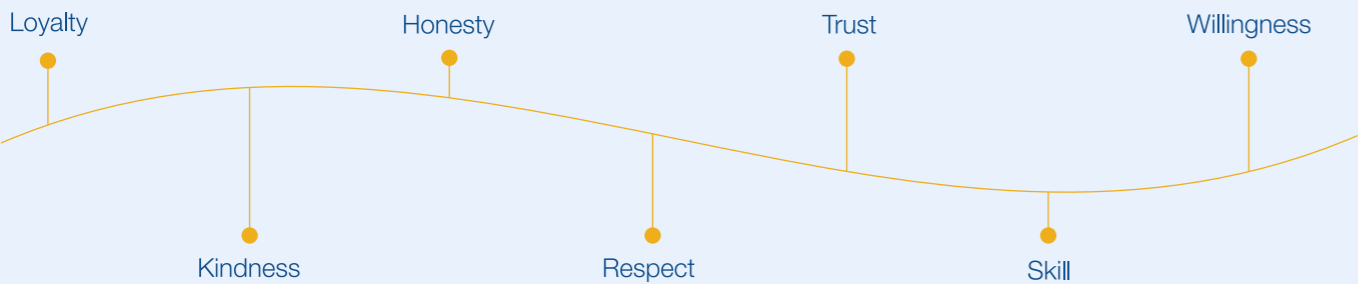
RISK MANAGEMENT

Neale Gribble (Chair), Meredith Johnson

COMMUNITY ENGAGEMENT

Kevin Harper (Chair), David Leach

OUR VALUES



OUR STAFF

CHIEF EXECUTIVE OFFICER:

Carita Clancy
RN PBOC Bch Nurs'g MMgmt

MEDICAL DIRECTOR:

Dr David Brumley OAM

CLINICAL OPERATIONS MANAGER:

Melanie Mattinson

COMMUNITY ENGAGEMENT MANAGER:

Michelle MacGillivray (Welcomed February 2020)

FINANCE MANAGER:

Kerrie Smith

QUALITY AND COMPLIANCE MANAGER & OP SHOP MANAGER:

Karen Taylor

ADMINISTRATION:

Lee Ellis and Caryl Whitfield

EQUIPMENT & MAINTENANCE COORDINATOR:

Peter Jones

EQUIPMENT & MAINTENANCE:

Peter Parry and Joel Ellis (Welcomed July 2019)

PAYROLL:

Judy Danvers

RESEARCH COORDINATOR:

Diane Nimmo (Welcomed July 2019)

RESEARCH NURSE:

Vicky Smith

SPECIALIST PALLIATIVE CARE NURSES:

Leanne Burns, Phillip Damon, Jenny D'Antonio (Welcomed September 2019), Debbie Hubble, Prue Kelly (Welcomed November 2019), Brendan King (Welcomed April 2020), Janine Lynch, Shelley Malcolm (Farewelled May 2020), Mandy Martin, Sharon Moss, Simon Murphy, Katrina Tansey, Vicky Smith

SUPPORTIVE CARE COORDINATOR:

Glenda Marsden

SUPPORTIVE CARE ADVISORS:

Brittany Rose (Farewelled April 2020)
Lydia McKee (Farewelled June 2020)
Katrina Tansey (Welcomed March 2020)

VOLUNTEER COORDINATOR:

Lauren Irvin (Welcomed February 2020)



FROM OUR CHAIRMAN AND CEO

It has been quite the year; the year began with planning, anticipating and moving to our beautiful purpose built facility in Alfredton; the Ballarat Hospice Care Palliative Care Hub on September 24, 2019 followed by the official opening on October 2, 2019. The Hon. Jaala Pulford officially opened the Hub on behalf of Minister for Health; The Hon Jenny Mikakos. We welcomed our Patron the Hon. Robert Knowles AO, Committee of Management, staff, volunteers and many of our supporters along with community service representatives.

We greatly value the privileged position we hold with our colleagues, partners and the community when so many of them made time to support and celebrate with us.

The building has allowed us to realise our dream of growing capacity to meet service demand as planned. It provides a welcoming, safe place for patients, carers, families, staff and volunteers. Importantly, the space allowed us to deliver specialist palliative care services despite the COVID19 pandemic challenges faced from March 2020.

IT REALLY IS A PLACE OF CALM, RESILIENCE AND HOPE FOR ALL.

Committee of Management and CEO's vision for the building is to share the space with our community, increase community understanding of palliative care and the concept of living and dying well. While we have not been able to physically share the building as planned, we made use of the time wisely in preparation for the time when we can safely invite the community to join, meet and plan with us.

We took time to review our systems, policies and processes ensuring we operate from a position of increasing strength and clarity of purpose. We planned for and enhanced our ability to effectively engage with the community with commencement of a Community Engagement Manager and increasing the capacity of the Volunteer Coordinator during February 2020.

We responded to demand and increased our specialist palliative care nursing capacity. We grew our research capability with the addition of a Research Coordinator role and we planned for expansion of Supportive Care capacity.

During the pandemic, most volunteer activities were deferred including the closure of the Op Shop. During the pause we have strengthened our volunteer approach and the systems that support our volunteers and their activities. We are well placed and ready for the day when our volunteers return safely to be with us.

While we miss our volunteers, we continue to sincerely value them and remain in contact with them. Through the work undertaken by our Volunteer Coordinator we are in a better position now to respond to our volunteers' needs no matter if they are supportive care, gardening, op shop, community engagement volunteers or assisting with administration.

One of the aspirations of moving to the Palliative Care Hub was the ability to generate income through business or short term room rental. The vision was to offer space to organisations who share similar values to us. Prior to COVID19 we successfully secured two tenants; the Motor Neurone Disease Society of Victoria and the Grampians Region Palliative Care Consortium. The co-located working space provided a useful synergy and opportunity for collaboration and spontaneity. We look forward to the return of our tenants when it is safe to do so.

A stand out regarding COVID19 was connecting with our colleagues and realistically delving into what the pandemic would mean to our service delivery. Early in 2020 we collaborated with Dr Stephen Brown, Clinical Director of Medical Oncology and Dr Penny Cotton, Palliative Care Physician from the Grampians Regional Palliative Care Team at Ballarat Health Services. They met with our clinical operations team leaders; Carita Clancy, Chief Executive Officer; Dr David Brumley, Medical Director and Mel Mattinson, Clinical Operations Manager. It was recognised that two approaches had to be considered for COVID19; a public health and a palliative care approach.

It would be rare for us to provide palliative care to someone who was dying from COVID due to the high public health risk. We knew we would be caring for people who had delayed diagnosis, or treatment, or who may have suspended their medical care. This would result in our patients' conditions being more complex and could deteriorate quickly, meaning we had to be ready to respond. All of our COVID predictions were realised.

From a governance perspective, the willingness of our friends and colleagues to support us during the uncertainty of COVID19 highlights the immense value of the collaborative, healthy relationships we enjoy with Ballarat Health Services, Saint John of God Hospital, Central Highlands Regional Health, Grampians Regional Palliative Care Team, private oncologists, GPs, district nursing services, other organisations and service providers within our service area.

COVID19 is showing us the full extent of resources required to meet choices of people who wish to be at home until the end of their life.



We know the support we enjoy is derived from the longstanding reputation and history of the whole Ballarat Hospice Care team and the acknowledgment of how important our relationships across the health care sector and the community are to us.

LET'S TAKE A MOMENT TO ALSO ACKNOWLEDGE:

- The Committee of Management for your dedication and commitment to guiding our organisation
- To the staff for your everyday actions making Ballarat Hospice Care the special place it is and to give it meaning to our community
- To the volunteers for your selfless quiet way of supporting the organisation, everything from patient and family support, to the Op Shop, operational and community engagement support
- Our patients, families and carers for the privilege of working alongside you to deliver holistic end of life and palliative care in your homes
- Our community for your belief and trust in us and all involved in bringing this palliative care hub dream to a reality
- People from the health care sector, especially the Department of Health and Human Services; Palliative Care and Patient Choice and our Regional Office, Grampians Regional Palliative Care Team, Grampians Region Palliative Care Consortium and members of the Central Highlands Primary Care Partnership. For your willingness to collaborate with us and care for our community, for continuing to develop and strengthen palliative care systems, making palliative care everyone's business.
- Past and current parliamentary members; our Patron the Hon. Rob Knowles AO, the Hon. Jaala Pulford, Sharon Knight, Joshua Morris, Juliana Addison and Michaela Settle

The pragmatic approach of the Committee of Management continues as we invest in business continuity and succession planning. The Committee acknowledges with increased demand for and complexity of palliative care services, the organisation must move to a more robust governance system. We will move from a Committee of Management to a Board of Governance structure including strategic recruitment of Board of Governance members who have the required skills and expertise to continue to guide the organisation successfully.

Our strategic planning process begins again during 2021 and we look forward to ensuring the organisation thrives.

While we may now be in a “fancy frock” with our new building, we are still the same people who are bound together by our values and continue to:

- deliver person centred care
- engage with our community
- embrace diversity and quality (achieving Rainbow Tick and Quality in Practice accreditation May 2020)
- care for patients with disabilities and work with disability services
- review, refine and strengthen our specialist palliative care practice
- coordinate and integrate care with others
- strive to deliver the right care at the right time in the right place.

We will work to ensure quality end of life and palliative care is available and accessible for our community; we will uphold the message that specialist palliative care is everyone's business through our clinical services and proactive approach to community engagement.

IN CLOSING WE PARTICULARLY ACKNOWLEDGE SHARON MOSS

We celebrate Sharon's 25 years of Specialist Palliative Care nursing at Ballarat Hospice Care and before that a volunteer. There is so much to say about Sharon; she is someone who willingly shares her unique way of caring with patients, carers, families, colleagues and volunteers. Her whole approach is captured in many ways and what people enjoy about her; it is her thoughtful warm communication, her calm, consistent nature, her complete dedication and commitment. Sharon has an extensive knowledge about death, dying and the most appropriate way to care for people at the end of their life inclusive of their carers and families. She has a remarkable retention of detail relating to patients and treats everyone with kindness, care and compassion and above all without judgment.

We sincerely thank Sharon for all she does to uphold the values of Ballarat Hospice Care and for all she has contributed to our community.

Carita Clancy
Chief Executive Officer

Geoff Russell
Chair

OUR SERVICE

CLINICAL AND SUPPORTIVE CARE SNAPSHOT

**362**
Referrals

**300**
Admissions

**50**
Discharges

**237**
Deaths

**73 (31%)**
Home deaths


**712**
Individual patients

**684** Individual patients received Supportive Care*

**18,863** Total contacts

(*This includes patients, their carers and family members as Supportive Care involves the patient's carer and family network.)

THE FOLLOWING ARE INCLUDED IN TOTAL CONTACTS

**1,223** Bereavement contacts

**2,154** After hours contacts

**777** After hour calls from patients or carers

**286** After hour visits



EQUIPMENT LOANS SNAPSHOT

398 items of equipment were loaned to 136 patients; the top 15 items were:

Wheelie walkers	47
Wheelchairs	34
Shower stools	27
Over toilet seats	25
Electric flexi chairs	23
Oxygen concentrators	21
Commodes	18
Bed sticks	17
Shower chairs	17
Electric beds	16
Syringe drivers	15
Pressure relief cushioning	15
Continence bedding pads	13
Over bed tables	10
Alpha cell pressure relief mattress	9

While the numbers tell a part of the story about the work we do, there are many wonderful clinical and supportive care outcomes realised as we transitioned into our beautiful new home. There is a special feeling of calm, welcome and nurturing for everyone.

We are particularly enjoying:

- space that supports our work
- a calming atmosphere for patients, carers, families, staff and volunteers
- room for us to be together comfortably; to talk and progress work as a team for the benefit of patients, carers and families
- reminders of our values (loyalty, kindness, honesty, respect, trust, skill and willingness) embedded on the footpath each day as we enter and leave the building
- dedicated spaces for telehealth, clinical, bereavement and general support purposes.

Highlights for the year besides our move include the up side of COVID19; yes you read that correctly!

While we reviewed every aspect of our service delivery there were benefits:

- Empowering patients, carers and families to make decisions and choose the care that is right for them. For some patients this meant making a decision to stay at home rather than present to hospital or to leave hospital to be cared for at home. The COVID19 restrictions impacted on patient admission to both private and public hospitals, palliative inpatient care and visitor constraints.
- Patients who have been stable - keeping them safe, limiting face to face contact and providing phone and telehealth support while ensuring patients know we are always a phone call away and can visit as required.
- Effective use of the afterhours service that increased carer confidence.

- Using new technology such as telehealth platforms and Zoom video conferencing to enhance our communication.
- Connecting patients to the care they need using the technology available. Our team set up video conference calls between the patient, their carers and family, their specialist, GP and us. This means we are in a “virtual” room together and after the call we assist the patient to help them understand their care.

Of course there were COVID19 challenges. We were limited in our ability to visit the home and length of visits were contained in accordance with Department of Health and Human Services guidelines. The use of Personal Protective Equipment (masks, goggles or face shields and gowns) at times impacted effective communication especially during sensitive conversations. We reflected on this and undertook education on ways to communicate with meaning while working in a pandemic and taking a public health approach.

We are caring people, our “normal” is to be close to distressed patients or bereaved relatives. We could not do what we would naturally do because of COVID19.

We took a flexible approach to rostering staff. At times members of our team were in isolation awaiting results of COVID19 testing, or, supporting children with remote learning. Staff are well equipped with laptops and mobile phones and this enables flexibility for staff to work from home as required.

Of particular note, we have experienced a strengthening of GP relationships evidenced by the way more GPs are responding and willing to collaborate regarding end of life and palliative care and support for patients, their patient's carers and families. We continue to connect with GPs through our monthly GP Breakfast now using the Zoom online videoconference platform.

With regard to patient, carer and family care we found:

- The necessity to develop and implement Covid19 management plans and respond to the changing circumstances and restrictions
- longer visits or phone calls were needed at times as patients, carers and families required emotional support due to isolation and the sudden deterioration of their condition
- visits were adjusted to need
- we completed part of the initial assessment over the phone
- more patient discharges from hospital resulting in more rapid and complex referrals
- increasing demand particularly during after-hours and on weekends
- providing care such as dressings and hygiene support, that in usual circumstances is the remit of other care providers
- an increasing number of contacts due to increased numbers of patients preferring care at home.

It is important to acknowledge that through the efforts of all who work within, volunteer and support Ballarat Hospice Care, we can provide the care required to support patients and carers at home when that is their preferred place of care.

We look forward to continuing to thrive in our new environment despite the challenges that come our way. We are growing our specialist palliative care nursing, supportive care and volunteer capacity to fully utilize our space and be there for our community who are increasingly choosing to live and die well at home.

RESEARCH AND QUALITY IMPROVEMENT

RESEARCH

We recognise the value and importance of research as it allows us to be a learning and innovative organisation, informing and improving our specialist palliative care practice; providing us the opportunity to influence positive specialist palliative care systems in the community. Diane Nimmo joined our team as Research Coordinator and has ably equipped us to progress two research projects.



A NEW PROJECT - RAPID DISCHARGE

The Rapid Discharge Project is about sustainable service integration to meet the choices of people who need palliative care and want to be discharged from acute hospital to their home for ongoing care and to die at home.

We received funding from the 2019 Palliative Care Service Innovation and Development Grant, Department of Health and Human Services, Victorian Government for \$214,000. The project runs from September 2019 thru to June 2021.

It is a collaborative project between:

- Ballarat Hospice Care Inc. (grant holder),
- Grampians Regional Palliative Care Team and
- Ballarat Health Services.

We aim to strengthen healthcare support systems for our community and healthcare professionals, ensuring that patients with a diagnosed life limiting illness or elderly and frail patients at the end of their life, who have been admitted to acute hospital and who prefer to be cared for or die at home, are able to return home smoothly, safely and sustainably without delay.

Based on Implementation Science methodology and an Action Research approach, a comprehensive three phase study plan including 12 steps and three action research cycles was developed. The project aims to strengthen healthcare support while meeting the needs and values of everyone involved. A number of data collection tools have been developed for implementation with the aim to learn:

- What are the local barriers and enablers to patients leaving hospital to be cared for at home?
- How can existing enablers be strengthened?
- How can the process of leaving hospital be made to happen quickly and smoothly?
- What do families and carers need to feel supported to get their loved one home and cared for?

Furthermore a multi-disciplinary, cross-organisational Steering Committee was formed, a multi-disciplinary project team established and a full Human Research Ethics Application was submitted.

We look forward to reporting the results of this exciting research next year.

TELEHEALTH

The Telehealth project “Implementing Telehealth in Regional and Rural Community Palliative Care” funded by the Victorian Department of Health and Human Services was a timely project for us given the COVID19 pandemic.

All Ballarat Hospice Care Inc. nursing staff received training in the use of Telehealth video calls to strengthen the delivery of high quality and person-centred care.

During the training, the nurses were:

- trained on how to use technical equipment and different video call apps and provided with supporting guides;
- supplied with patient information and education tools on Telehealth video calls;
- trained to assess a patient's, their family and carer's capacity and capability to use Telehealth video calls and how to document this information thoroughly in the patient records;
- acquainted with the patient phases and situations where video calls could be used for the best service delivery to patients, their families and carers;
- trained to assess the benefits of a video call in unexpected situations;
- familiarised with procedures for scheduled and unscheduled video calls;
- provided with checklists for planned and unplanned video calls;
- familiarised with surveys on patient and staff satisfaction with telehealth video calls.

Besides training Ballarat Hospice Care's nursing staff, the learnings, insights, experiences and resources developed throughout the project were shared with other palliative care services and healthcare workers, nationally and internationally.

- Emily Schelmerdine and Lydia McKee supported by Associate Professor Susan Stacpoole, Ballarat Health Service, presented our findings in an oral presentation at the Oceanic Palliative Care Conference in Perth during September 2019 in a 'Harnessing technology to drive innovative care' session.
- Our Telehealth Training Resource pack was shared through local Ballarat Hospice Care networks, the Victorian Department of Health and Human Services and Palliative Care Outcomes Collaboration to other palliative care services in Victoria, South Australia, Queensland and Ireland.

We have found that due to the project, telehealth video calls are being adopted into everyday nursing practice at Ballarat Hospice Care and we are optimising service delivery by:

- providing a responsive service to people living remotely;
- enabling streamlined service delivery after hours and on weekends;
- providing immediate patient, family and carer support;
- avoiding timely travel for staff and for patients who live in remote areas;
- continuing services and 'keeping an eye on patients' when patients, families and carers did not feel comfortable with home visits; especially during the COVID19 pandemic;
- protecting patients, their families and carers and Ballarat Hospice Care staff during the pandemic.

QUALITY

Ballarat Hospice Care successfully achieved accreditation with Quality Innovation Performance (QIP) during May 2020 for two standards:

- Quality Improvement Council's Health and Community Services 7th Edition and
- Rainbow Tick 2nd Edition standards.

We received welcome feedback about areas to focus on over the next three year quality improvement cycle. Future improvement opportunities include progressing governance and human resource systems, document control, strengthening internal processes, policy and systems relating to staff, volunteers and Committee members as the organisation continues to grow.

Accreditation was more challenging this year as we contended with:

- the move to our new facility
- the COVID19 pandemic and
- an online remote accreditation assessment process.

In their final report QIP noted:

“COVID19 has also provided some challenges to Ballarat Hospice Care. The organisation is small in size, however it has made some amazing achievements given the current situation in which it is operating.”

Our achievements are possible as we bring our values to life and focus on hearing and respecting our people and community.

The assessment team from QIP thanked Karen Taylor, Quality and Compliance Manager who was the internal contact for QIP. Karen ensured a smooth accreditation assessment process; she had an efficient meeting timetable for the assessors with staff, volunteers and the Committee of Management along with an impressive array of resources and evidence for assessment. Karen thanked all at Ballarat Hospice Care for their support and commitment to the accreditation process recognizing that no person is an island.

QIP said about us

- Staff are respectful and responsive. This was reflected through both formal and informal interactions.
- BHCI are well respected and have a good reputation in the community evidenced by the successful fundraising for the new building and the application by many to volunteer at the service.
- The volunteer training is comprehensive and assist to identify those volunteers who are best suited to support roles and other roles that are available.
- The involvement of the service in initiatives and partnerships to better assist service provision including but not limited to the Telehealth and Rapid Discharge projects.
- The further development and implementation of key roles such as the Community Engagement Manager and the Business Operations group to support the work of the service and CEO.
- Volunteers felt valued, respected and acknowledged.



OUR VOLUNTEERS

LOYALTY AND WILLINGNESS

The value of our volunteers cannot be underestimated. Their enthusiasm, dedication and compassion enriches the lives of our clients and staff in numerous ways.

We welcomed Volunteer Coordinator Lauren Irvin to our team during February 2020. Lauren's role is to lead and grow our volunteer system, and to continue building on volunteer support previously provided by Karen Taylor who resigned as Manager of Volunteers, to focus on quality and compliance incorporating the Friends of Hospice Op Shop. Lauren is responsible for coordinating volunteer recruitment, training and resourcing, in addition to strengthening our volunteer program.

“As the Volunteer Coordinator at Ballarat Hospice Care, I am energised every day by the heart-warming appreciation and mutual respect that exists between staff, volunteers and clients” Lauren Irvin

Throughout the year, the Friends of Hospice Op Shop volunteers worked hard to raise the store profile and this was reflected in store turnover. The quality of donations received from our community were of an exceptional standard. The store is well known for its boutique styling and outstanding customer service. As with most non-essential retail stores, the Op Shop closed doors in March 2020 due to COVID19. The store will remain closed until Victoria returns to “COVID Normal” to protect our staff, volunteers and community.

Here's some of the ways our volunteers continued to show their support during COVID19 restrictions:

- Volunteer Phyl continued to support our staff by running remote meditation sessions twice weekly.
- Our Supportive Care volunteers provided much needed phone companionship and support to patients.
- Les continued to clean our staff vehicles whenever it was safe to do so.
- Volunteers Mary, Jan, and Sue, made fabric face masks for our staff and their families, and volunteer Jill complemented their work by making 'ear savers'.
- Graeme, Debbie and Janine have beautified the gardens around the Palliative Care Hub providing a lovely welcoming outlook for staff, volunteers, clients and the community.
- Op Shop volunteers Sue and Carol continue to make sure the store front is maintained.
- Op Shop volunteers, Kate, Wendy and Jill continued to ensure that stock was ready for the reopening of the store.

Despite COVID19 our volunteers remained engaged; showing their dedication by undertaking online LGBTI training, organising their Working With Children Checks and Police Checks. They have also continued to express their ongoing support for our work, their concern for our patients, carers and families by sending texts, phoning in, and emailing. They look forward to returning to the Op Shop, visiting patients in their homes, and being welcomed to the Palliative Care Hub to reaffirm their connection with our service.

This year we welcomed two new volunteers: Sue; and Graeme, bringing our total number of volunteers to 53 across the following four volunteer service streams:

Business Operations – 5 Community Engagement – 4
Supportive Care – 14 Op Shop – 30

We have been fortunate to receive new applications from potential volunteers which we are always grateful for.

VALE LINDA DIAMOND

With sadness, respect and gratitude we acknowledge Linda Diamond who died during March 2020. Linda was an original founding member of Ballarat Hospice Care's Special Interest Group. Linda was renowned for her warm hugs, generosity, wonderful cake making and decorating skills. Linda supplied a beautiful cake annually as a raffle to raise funds for Ballarat Hospice Care for many years. Linda was surrounded by family and friends when she died and is deeply missed.

GRATITUDE AND RESPECT

In the lead up to National Volunteer Week, we showed appreciation by sending each volunteer a hand written card of thanks and gratitude. Here are a few of the lovely responses we received:

“Thank you for the lovely card I received today. It was very much appreciated and very special. I am looking forward to getting back to the Op Shop and seeing everyone again and getting those sales happening! Kind regards Jan”

“Thanks very much for your card. It was a nice surprise. You are a great organisation. With kind regards, Janet”

“Thanks for the card, much appreciated, can't wait for Covid 19 to end so I can get back into active volunteering Cheers Bill”

GRATITUDE, COMPASSION AND INSPIRATION DURING COVID19

Letter from Michelle (daughter) who usually lives in England and was present for her Mum's end of life care in the Ballarat area.

“Hi to all the lovely staff at BHC,

Ben had the choice of any charity to donate his well-earned bike riding money to and he quickly decided he wanted it to go to Ballarat Hospice.

He did the sponsored riding whilst I was with Mum for her last couple of weeks. She knew he was doing the riding and he'd told her he wanted to donate to a cancer charity. He changed his mind after we talked one day about the amazing work that you all do.

She was so proud of him raising the money and I know she would definitely have approved of his donation to you. Ben's right..... you did give Mum excellent care and we will always be very grateful for your help and support both during her illness and after she passed.

Thank you!

Michelle - Proud Mum of Ben :)”

And from Ben...

“Hello,

My name is Ben and I'm 9 years old. I have just made a donation of \$350 as my Nan recently passed away from cancer and you looked after her the best me and my family could have hoped for.

My Nan's name is Pat.. I live in London but I am lucky because I got to fly over and see her a lot. I raised the money I have donated by riding my bike around the garden during COVID19 lockdown. I rode around every day for a lot of days and kept going until I had done 100 kms!! I did it while my Mum was in Australia visiting Nan.

Thank you so so much for all your hard work and help. You really were the best.

Thanks again, Ben”



DONATIONS

FINANCIAL GUARDIANS

Amanda Larcombe	Doug Raper	Helen Cox	Kevin Allen	Robin Uebergang
Anne Cole	Dr Patricia Cartwright	Henry Martz	Lois Sheppard	Rod Clayton
Bernhard De Jong	Dulcie Brooke	Jake Rayner	Lorraine Ellis	Rod Clutterbuck
Bernice Hodgson	Elaine Orr	Jan Murrhly	Malcolm Weaver	Rosie Powell
Bert Smith	Emma B Cadby	Jennifer McCracken	Margaret Doyle	Rudi Sawall
Brian Cuthbertson	Frances Grady	Jillian Gale	Margaret Lakey	Russell Schmidt
Bruce Morley	Gail Neill	Jim Watson	Margaret Woof	Ruth Devlin
Christopher Hindaugh	Gayle McCarthy	John Lampard	Mary Davies	Sandra Marston
D Fiddian	Geoff Russell	John M Davis	Mary Haintz	Special Interest Group
David Brumley	Geoffrey Beck	John Plush	Michael & Loretta Toohey	Susan Honeyman
David Nicholls	Graeme Peoples	Judith Perrin	Neale Gribble	T Foley
Delia Brooks	Gretha Smith	Kaye Maguire	Nina O'Donnell	Vivienne Edlund
DL Stokes	H W Menadue	Keith Ridsdale	Pat Cashin	William Hitchins
Don & Sharon Moss	Helen Barton & Family	Kelvin Lewis	Peter Rowe	
Donna Cheeseman	Helen Burt	Keryn & Bryan Crebbin	Robert McDonald	

MEMBERS - BALLARAT HOSPICE CARE

Bernhard De Jong	Frances Grady	Keith Ridsdale	Mary Haintz	Sandra Marston
Bert Smith	Gail Neill	Keryn & Bryan Crebbin	Meredith Johnson	Stephen Lewis
David Leach	Geoff Russell	Kevin Allen	Neale Gribble	Susan Honeyman
David Nicholls	H W Menadue	Kevin Harper	Pat Cashin	Vivienne Edlund
Don & Sharon Moss	Helen Barton & Family	Lois Sheppard	Robin Uebergang	William Hitchins
Donna Cheeseman	Helen Cox	Lorraine Ellis	Rod Clayton	
Doug Raper	Jim Watson	Malcolm Weaver	Rod Clutterbuck	
Elaine Orr	John Plush	Margaret Woof	Ruth Devlin	

DONATIONS IN MEMORY

Adrienne Webb	Gavin Maguire	Meryl Peoples
Alexander 'Alex' Murray	Gerard Sullivan	Michelle Nielle
Anne Thompson	Helena Macklin	Neil McCracken
Anonymous	Jane Morris	Pat Chaffey
Beatrice 'Amy' Seath	John Bylsma	Peter Everist
Beatrice 'Margaret' Holmes	Judith Peters	Raymond 'Buck' Jeffrey
Bryan Smith	Leesa Myers	Renate Martz
Claire Nason	Lennis Riddiford	Robert 'John' Walker
Colin Campbell	Lynda Sergeant	Russell Wilkinson
Denis Gertz	Margaret Holmes	Sinead Pulford
Dr Russel Wilkinson	Marie Pryor	Susan Molloy
Dr Russell George Wilkinson	Mary Ross	Ugo & Maria Tocchet
Francis Fromhold	Maureen Llewellyn	Valerie 'Val' Raper

GENERAL DONATIONS

A Gooding	David Anstis	Jason & Meaella Muller	Lola Campbell	Rae Wilkins
Annabelle Burrows	Diane Smith	Jean Harben	Lori & Andrew Bower	Ray White Real Estate
Anonymous	Don & Sharon Moss	Jl & M Rood	Lorraine Widdison	Rhonda Richardson
Ballarat Aquatic Ladies Group	Dorothy Anderson	Joan & Connie Powell	Majella Muller	RN Palmer
Ballarat Ukulele Group	Dorothy Kemp	Joan Jeffrey	Margie Holmes	Rob Kamouche
Begonia Quilters Inc	Dot & Alan Dilges	Jodie Thompson	Marian Holmes	Ron & Helen Haitutz
Betty Gay	Doug Raper	John Livingston	Matthew Pengelly	Ryan's IGA Supermarket
Betty Rout	DT & AM Myers	John Ross	Melinda Schmidtke	Sharon Moss
Bev Robinson	Dulcie Brooke	Judi Guest	Moir Everist	Shauna Lynne Shaw
Blue Knights Australia VII	G & D Herreen	Judy Bates	Mr Tim Byrne	Shirley Prowse
Brown & Proudfoot	Geoff Molloy	Julie Baulch	Mrs Dawn Evans	Simon Tournier
Buninyong Joint Library Trust Inc	Georgia & James	Katherine & Joeri Jacobs	Naomi Knowles	Special Interest Group
C Kimstra	Glenise Cassidy	Katherine Hayes	NJ & MP Grace Pty Ltd	Stephen Blake
Carita Clancy	Golden Point Cafe	Kaye Maguire	Noelene Walker	Stephen Lindner
Carmel Densley	H A & R Martz	Keith Ridsdale	Open House Ladies	Stephen White
Carol Gertz	Hayden O'Doherty	Keryn & Bryan Crebbin	P Sindar	Ted Nason
Centrelink Call Centre	Hazel Campbell	Kim Sharp	Pat Kermode	The Coven
Claire Blake & Pauline Blake	Helen James	Laura Crook	Patrice Braun	The Order of St John of Jerusalem
Commerce Ballarat.	Helen Patricia Collinson	Leanne Conroy & Mick Kearnes	Paul Morris	Veronica Bligh
Cynthia Dickson	Isobella Foundation	Leonie Weightman	Pauline Hennessy	Wendouree Cricket Club
D TunTin	Jacqueline Hudson	Linda Tocchet	PayPal Giving Fund	Yvonne Anthony
Damian Muller	Janet Macdonald	Liz McConnell	Penny Pragher	Zoe Robertson
	Janine Lynch		Peter Parry	

AUDITOR'S REPORT



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Ballarat Hospice Care Inc

ABN 41 839 611 725

Auditor's Independence Declaration under Section 60-40 of the Charities and Not-for-profits Commission Act 2012 to the Committee of Ballarat Hospice Care Inc

I declare that, to the best of my knowledge and belief, during the year ended 30 June 2020, there have been:

- (i) no contraventions of the auditor independence requirements as set out in section 60-40 of the *Australian Charities and Not-for-profits Commission Act 2012* in relation to the audit; and
- (ii) no contraventions of any applicable code of professional conduct in relation to the audit.

PPT Audit Pty Ltd
PPT Audit Pty Ltd

Jason D. Hargreaves
Director

7 October 2020

20 Lydiard Street South, Ballarat

STATEMENT BY MEMBERS OF THE COMMITTEE

The responsible persons declare that in the responsible persons' opinion:

- there are reasonable grounds to believe that the registered entity is able to pay all of its debts, as and when they become due and payable; and
- the financial statements and notes satisfy the requirements of the *Australian Charities and Not-for-profits Commission Act 2012*.

Signed in accordance with subsection 60.15(2) of the *Australian Charities and Not-for-profit Commission Regulation 2013*.

President 
Geoff Russell

Treasurer 
Sandra Marston

Dated 08 October 2020

STATEMENT OF COMPREHENSIVE INCOME FOR THE YEAR ENDED 30 JUNE 2020

	Note	2020 \$	2019 \$
Revenue	5	2,969,838	2,700,633
Accreditation		(19,952)	(6,851)
Advertising and marketing		(11,132)	(21,933)
Auditors and legal		(22,726)	(19,496)
Depreciation		(213,090)	(80,612)
Employee benefits expense		(1,884,544)	(1,636,465)
Finance expenses		(1,642)	(717)
Other operating expenses		(337,192)	(339,719)
Operating surplus		479,560	594,840
Palliative Care Hub capital grant income		2,036,904	4,014,383
'Help Hospice Grow' land and building fund donations		-	4,296
'Help Hospice Grow' land and building fundraising expenses		-	(7,189)
Surplus before income tax		2,516,464	4,606,330
Income tax expense		-	-
Surplus for the year		2,516,464	4,606,330
Net gain (loss) on revaluation of investment in listed shares		(102,491)	(27,831)
Total comprehensive income for the year		2,413,973	4,578,499

STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2020

	Note	2020 \$	2019 \$
ASSETS			
CURRENT ASSETS			
Cash and cash equivalents	6	2,999,271	2,142,411
Trade and other receivables	7	49,431	190,587
TOTAL CURRENT ASSETS		3,048,702	2,332,998
NON-CURRENT ASSETS			
Other financial assets	8	469,348	475,014
Property, plant and equipment	9	7,364,874	6,031,493
TOTAL NON-CURRENT ASSETS		7,834,222	6,506,507
TOTAL ASSETS		10,882,924	8,839,505

LIABILITIES

CURRENT LIABILITIES

Trade and other payables	11	135,276	115,744
Lease liabilities	10	11,541	-
Provision	13	298,256	246,636
Other liabilities	12	113,647	504,841
TOTAL CURRENT LIABILITIES		558,720	867,221

NON-CURRENT LIABILITIES

Lease liabilities	10	12,092	-
Employee benefits	13	25,490	49,443
TOTAL NON-CURRENT LIABILITIES		37,582	49,443
TOTAL LIABILITIES		596,302	916,664
NET ASSETS		10,286,622	7,922,841

EQUITY

Reserves		367,436	495,257
Retained earnings		9,919,186	7,427,584
TOTAL EQUITY		10,286,622	7,922,841



**BALLARAT
HOSPICE
CARE INC.**
Home Based Palliative Care

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Like us on Facebook with our
Ballarat Hospice and Op Shop pages.

ballarathospicecare.org.au