



‘Our focus of care is living well every day’



Acknowledgement of Country

EPC acknowledges Aboriginal and Torres Strait Islander peoples as the Custodians of the lands and waters where we live and work. We respect their historical and continuing spiritual connections to country and community and pay our respects to their Elders past and present. We commit ourselves to the ongoing journey of Reconciliation with those who hold the memories, traditions, culture and hopes of Aboriginal Australia.

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Chair/Chief Executive Officer Report

Honouring our past 25 years as we shape the next 25.

The 2022-23 year has been a year of reflection, learning and change. As EPC celebrates 25 years of providing outstanding specialist community palliative care, we have taken the opportunity to reflect on the past to inform our future.

The year started in July with CEO, Jeanette Moody, retiring after 14 years at the helm. In early 2023, we farewelled Manager Nursing and Medical Services, Kylie Draper, after more than two decades with us.

On behalf of the current Committee of Management (CoM) members, staffing teams and those of years past, we pay tribute to Jeanette and Kylie for their dedicated service, expertise, longevity and commitment to EPC and the wider palliative care community where they had such impact. This has indeed shaped EPC as a leader in our field.

Without losing a single business day, a seamless transition to Gaylene Coulton as Chief Executive took place on August 1st with no disruption to the rhythm and reliability of service delivery by our exceptional staff. Thanks so much to Jeanette for her generous handover, induction and availability to Gaylene in her early days. Thanks also to Chris Cliffe who joined us in March 2023 in an interim role as the Manager, Nursing and Medical Services whilst recruitment for an established nursing leader took place. In August 2023 we were thrilled to announce the appointment of Maria Logan as General Manager, Nursing and Medical Services.

The first 10 months of Gaylene's tenure has been a time of listening and engaging with our staff, clients, carers and partners – a journey of discovery to understand our strengths and identify opportunities that ensure we remain at the forefront of community palliative care for the next 25 years. Some of the key opportunities identified and implemented in the last year include:

- Reviewing our governance and legal structure. EPC has been an Incorporated Association since its inception, and the Committee of Management have acknowledged the importance of moving to a Company Limited by Guarantee over the next year. Mature and consistent good governance practice is imperative for an organisation the size of EPC – especially one that is publicly funded. The process is well underway with the support of our Participating Bodies. The transition is expected in the 2023-2024 financial year.
- Developing our value-based health care strategy. This strategy will inform the capacity, capability and culture that EPC needs to meet current and future community need over the next 10 years. We have commenced reviewing our service models through a consumer and clinician co-designed process to ensure we have more capacity to meet the demand we see in the community and also to ensure our clinicians are working to the top of their scope of practice. This is a long-term strategy to future proof EPC in line with achieving the best outcomes for clients, whilst meeting state government expectations of service providers who they support with funding.
- Establishing our Centre for Volunteer Excellence. As an Australian leader in volunteer programs, we established this virtual Centre to expand not only the offerings we make to our EPC clients and carers but to also provide sector leadership and training to other organisations across Australia who may need help in establishing their own volunteer offerings, like our flagship Biography program.
- Establishing and strengthening our Education and Training Programs. EPC has commenced providing an in-depth program for 'new to community palliative care' nursing and allied health clinicians through its Transition to Specialist Palliative Care Practice program. Our GPs Community Health Professional Education program for clinicians new to palliative care has also grown due to rising need, particularly in community and aged care settings.
- Internally we have redesigned and implemented new Risk, Quality, Clinical and Corporate Governance Frameworks to ensure active oversight and governance of EPC's most significant risks and policies.
- Consumer Engagement. At EPC we cannot improve services and programs without the active input and feedback from our local consumers. We are honoured to have such active consumers and volunteers driving improvements to ensure we can target our services to meet client and carer desired outcomes.

Our client numbers continue to grow, client complexity is increasing, clients enter our services later and the average age in our catchment area is increasing. All of this occurs in a context where funding is tight, and will continue to be so, for the foreseeable future. EPC will continue to work with Palliative Care Victoria, the Department of Health and the Department of Families, Fairness and Housing, to promote the value of ongoing investment in community specialist palliative care services; and ensure its place in the health care system is understood.

To strengthen these strategic challenges, we have realigned our organisational leadership. The new Executive team that supports the CEO in implementing EPC's strategic priorities is General Manager Business Services (Julie Rowan), General Manager Allied Health and Volunteers Services (Tania King) and General Manager Nursing and Medical Services (Maria Logan). The broader leadership team provides operational leadership across the organisation to support our frontline clinical teams and corporate services functions.

During late 2022, the CoM engaged the Australian Institute of Company Directors to facilitate an independent evaluation process to ensure EPC is supported by best practice governance principles. This has resulted in changes to our meeting style, structure and frequency. A skills matrix was completed by all CoM members to identify current gaps and inform replacement of future CoM vacancies. As we explore the transition to a Company Limited by Guarantee, these changes will set us up well.

Services like EPC keep people living well every day, out of the hospital system and dying in their place of choice. This has significantly better health outcomes for our clients and their carers as well as economic benefits for the community.

The CoM, CEO and Executive Team remain incredibly focused on our purpose as our reason for being here and we thank and acknowledge the outstanding contribution of the EPC staffing team and volunteers for all that they do, each day. Every day.

In this our 25th year of service provision, we celebrate what EPC has achieved in serving its community and what it will continue to achieve into the future, serving our same community.



Margaret Stewart
Chair



Gaylene Coulton
Chief Executive Officer

History of EPC

Eastern Palliative Care (EPC) Association Incorporated became a legal entity on 14 August 1998 and commenced operations on 1 October 1998. This followed a number of government reports such as the 'Palliative Care Services in Victoria' (DHS, 1995).

The final report ('Palliative care in Victoria. The way forward' - DHS, 1997), suggested a tender process for the State Government to purchase and fund 'palliative care service integration, recognising the multidisciplinary nature of palliative care.'

This final paper talked about the triangle of care as being the basis of care: community-based or home care, inpatient hospice care and acute hospital care. 'All palliative care clients should have access to the full range of service options and be able to access the three according to their clinical care or support needs.'

The paper suggested an amalgamation of the current services to form a single regional service. Other options included sub-regional services provision or local service provision, but the preference was for a single regional service. The paper recommended different models for different regions of Melbourne and rural areas. For the Eastern Region, one community-based service with six campuses was recommended to cover all seven local government areas with a total population of 928,685.

Melbourne East Palliative Care Association Inc, The Order of Malta and The Sisters of Charity began a working party prior to the tendering process. They developed a Heads of Agreement, which stated that it would set up a new organisation to run the community services if their tender was successful.

Members of that working group included the following.

- St Maureen Walters RSC
- Kerrie Cross (CEO St. Vincent's)
- Nicholas Green
- Kevin Croagh
- Ian Gresswell
- Brian Hayes
- Tony Macken
- Margaret O'Connor
- Renzo Sgarbossa

On the 17 January 1998, tenders were called for Community Palliative Care with a seven-week tender completion date. The Working Party met fortnightly and did an enormous amount of work in preparation of the Tender.

The working party talked with other service providers in the region including Outer East Palliative Care Services (OEPCS), Yarra Valley Palliative Care Service, Emerald Hills and Cardinia Palliative Care Service. Each of these other services chose not to be involved and to either submit their own tender or not to tender.

On 25 June 1998, the working party were informed of their success and were awarded a 3-year contract. The first Committee of Management meeting of the new entity (EPC), took place on Thursday, 20 August 1998. Each of the three organisations nominated three members to be on the new Committee of Management and their first meeting was held. The Chair of the new entity was Ms. Kerrie Cross. The start-up date for the new services was to be 1 October 1998 which left a very short period of time to employ and set up the new organisation.

An Executive Director was appointed – Mr. Renzo Sgarbossa. The Ethics Committee was set up as was the Finance Committee, chaired by Mr. Jack O'Connell. A timeline of all work was developed which showed just how much work was required.

As OEPCS decided to tender for a Sub-Regional Service, they also submitted a tender but in July 1998 after some months, they were notified that they were not successful.

Following this, OEPCS worked on a Heads of Agreement with EPC and in January 1999, Mr. Peter Gurr became an observer on the EPC Committee of Management until all organisations could go through their legal process outlined in their various constitutions. For the first 3 years, each of the Partner Bodies had to add to the funding of EPC, all undertaking fundraising activities to support EPC services.

From that early hesitant start, EPC has grown to be a vital and sustainable organisation which services a population of over 1.1 million people. Over its 25-year history, they have worked in every suburb and supported thousands of people. Please refer to the timeline on the opposite page for achievements of EPC over its 25 years.



The old EPC Building



The new EPC Building

EPC Timeline

1998
Certificate of Incorporation
Commenced the provision of home-based palliative care services across the whole of the Eastern Metropolitan Region, becoming the largest single agency provider of palliative care services in Victoria.

1999
Code of Ethics adopted. Vision, Mission & Values developed. New logo developed.

2001
Accreditation received from the Australian Council of HealthCare Standards.

2004
Development of PalCare - our Client Information Management System - supported by a seeding grant from The Ian Potter Foundation.

2005
State Winner of the 2005 National Australia Bank Volunteer Awards.

2006
Intake Team introduced.
Client Biography Service established

2007
Restructure of EPC - moved from a team-based to a portfolio structure.

2008
10 years of service in the local government areas of Boroondara, Knox, Manningham, Maroondah, Monash, Whitehorse & Yarra Ranges.

2009
Employment of an MND Shared Care Worker to improve palliative care pathways for people with MND.

2010
Celebration of 300 Biographies.
Development of a Nurse Practitioner role & pilot program of Priority Assessment Team
EPC Ambassador Program initiated (operational from February 2011) to raise awareness of community palliative care in our local community.
EPC becomes a Department of Veterans Affairs (DVA) provider. PalCare developed further with the addition of client & staff scheduler and allocation of resources for visits.
New EPC logo developed.

2011
The introduction of the 'Before I Die' project - a community development & engagement project created for National Palliative Care Week.
A Building Review Committee is established to relocate and manage the transition from Wantirna and Nunawading, to Mitcham.

2012
EPC wins inaugural Quality Award for Palliative Care Victoria for our highly successful Priority Assessment Team.
Introduction of the Palliative Support Nurse Roles - palliative care specialist nurses support in aged care & disability homes.

2013
Chinese multicultural initiative.

2014
First Community Engagement Forum is held to encourage public involvement in EPC.
The 'Give Now' on-line donation facility is introduced via the EPC website.
EPC launches on social media.

2015
Introduction of 3 dedicated Bereavement Family Support Workers.
The Clinical Governance Committee is established.
Training given to external organisations on how to develop a Volunteer Biography Program. New software introduced (Better Impact) for volunteers.

2016
Work begins on 20 new EPC digital videos.
Increased funding for the Aged Care & Disability staffing.

2017
Increased funding received for additional staffing of Nursing & Allied Health.
EPC Dementia Project developed.

2018
20th Birthday Celebrations.
1,000 Biographies milestone.
Introduction of Occupational Therapy at EPC.

2019
EPC Rebranded to the new "house and heart" logo and new green and pink colours.
Newly branded website created
Consumer Advisory Committee formed and meetings started

2020
COVID-19 pandemic hit – crisis mode engaged and Zoom and the like becomes the new 'Norm'. Working from home introduced
2 successful EBAs negotiated and in place despite all being conducted via Zoom.

2021
Kew staff moved back to Kew to newly rebuilt offices at Caritas Christi.
4 year Strategic Directions Plan published.

2022
Farewelled Jeanette Moody as CEO after 17 years
Received Commendation for Whitehorse Excellence in Business Awards
First EPC only fun run fundraiser held – Pound the Pavement 4 EPC

2023
4 visitors from SingHealth in Singapore spent 4 weeks with EPC staff to learn about community palliative care in Australia
1st Career Expo held.
Introduction of EPC's Value Based Health Care Strategy in the 2023 Business Plan

Our Purpose

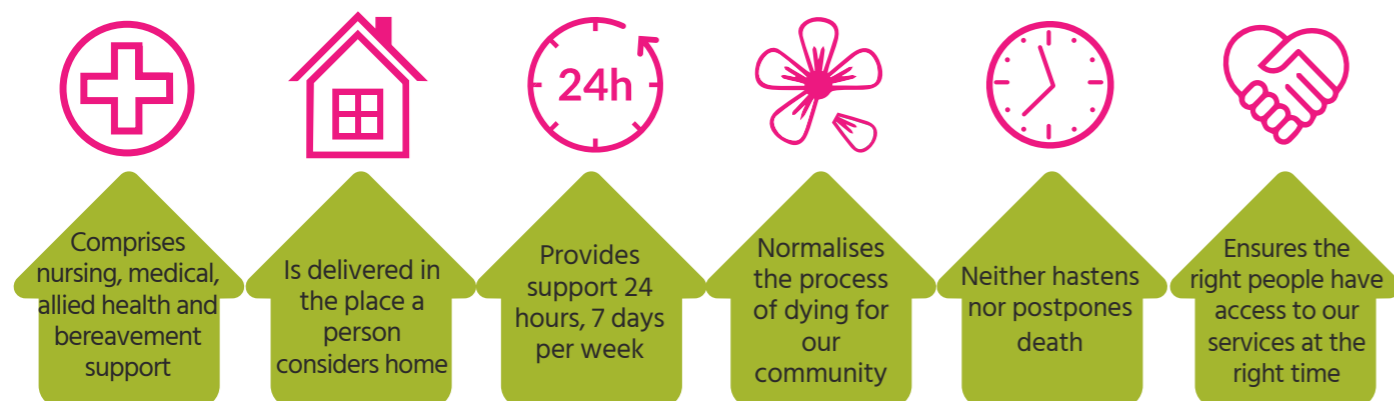
We exist so that:

Our clients live with the best quality of life, before dying in their place of choice.

Clients, their families and carers are supported according to their needs and choices.

Our Roles

To people with a progressive, life-limiting condition, we provide a holistic, person-centred, specialist palliative care service which:



Our Values



Compassion

Empathy for others in their end of life experience by listening, accepting, and actively responding to their needs



Dignity

Upholding the unique personality, situation and choices of people, valuing their lives in the face of death, and respecting their rights



Excellence

Delivering evidence based quality care, underpinned by ethical practice, research and leadership



Empowerment

Building trust with people, that puts them at the centre of decision-making and enables control and choices

Governance

Eastern Palliative Care Assoc Inc is a partnership between St Vincent’s Hospital (Melbourne) Ltd, Outer East Palliative Care Service Inc and the Order of Malta Home Care (Vic) Ltd. These bodies appoint four members each to the Committee of Management of EPC (CoM).

The work of the CoM is supported by the following subcommittees:

1. Governance
2. Accommodation and Infrastructure
3. Finance and Risk
4. Consumer Advisory
5. Clinical Governance
6. Ethics
7. Public Relations and Fundraising

As we reflect on the past to inform the future, a critical focus of the CoM this year has been to ensure EPC has the right governance structures, skill sets and resources, to ensure we can continue to deliver sound palliative care services in the community in a sustainable way for the next 25 years.

Committee of Management attendance during the 2022-23 year

Ms. Margaret Stewart (Chair)	9
Dr. Anne Hunt OAM	9
Dr. Raymond Snyder AM (Treasurer)	8
Mr. Peter Gurr OAM (Leave of absence until January 2023)	4
Mr. Harry Sampson (casual vacancy during Mr Gurr’s leave of absence)	5
Prof. David Kissane AC	6
Dr. Andrew Barnden (Deputy Chair)	9
Mr. Kevin Francis	9
Mr. Martin Smith	5
Dr. Margaret O’Donnell	8
Dr. Tamsin Bryan	9
Dr. Ian Parry	8
Mr. Timothy Gorton	9

Governance Subcommittee

The Governance Subcommittee was formed in April 2023, and met three times during April to June, to support the CoM in its exploration on the governance and legal structure that best positions EPC to deliver government funded, specialist community palliative care sustainably for the long term. While this is still a work in progress, there is commitment that moving to a Company Limited by Guarantee for EPC will set us up well as we move into the next phase of our evolution. Underpinning this, work has also been undertaken to understand the skills sets required on the CoM for succession planning.

Accommodation and Infrastructure Subcommittee

The Accommodation and Infrastructure Subcommittee was formed in May 2023, and met once in June 2023, to ensure that EPC has sufficient and appropriate accommodation and infrastructure to effectively and safely enable its services to be delivered into the future. Through its work it will pursue EPC's commitment to good governance, social responsibility and sustainability.

Finance and Risk Subcommittee

The Finance and Risk Subcommittee met eleven times during the year. The focus of the subcommittee continues to oversee the financial operations of EPC, including operating budgets, investments of reserves and capital expenditure to ensure our revenue is expended effectively to deliver services both now and into the future in a sustainable way. The strengthened Risk Management Framework and Enterprise Risk register implemented during the year has allowed the subcommittee to increase its active oversight and governance of the most significant risks. The most significant risks currently being monitored include cybersecurity and the impact on business continuity, potential future changes to government funding, and staff safety in lone worker environments. The overall financial position of EPC for the year ending 30 June 2023 remains strong. Please refer to the full Audited Financial Statements for the year ending 30 June 2023 for detailed information on the financial position and activities for the year.

Consumer Advisory Subcommittee

EPC has a very active Consumer Advisory Subcommittee who bring consumer, carer and the community perspectives. The subcommittee brings people with diverse life experiences and backgrounds together to focus on improving the services EPC provide. Subcommittee members also work hand in hand with EPC staff to influence change, discussing a broad range of topics including health literacy, shared decision-making and goal setting, co-designed models of care and ensuring the 'consumer voice' is heard across EPC. Many of the members have been carers of clients using EPC's services, so they have sound understanding of what palliative care is.

Some of our Community Advisory Subcommittee members volunteer to act as an advisor on EPC's subcommittees, for example our Ethics, Fundraising and Public Relations, Clinical Governance Subcommittees and their contribution is valued immensely by the Committee of Management.

Comment from CAS member

"I volunteered to be a CAS member, as I thought of it as an opportunity to give back. EPC assisted with both my parents when they were unwell and I will be forever grateful for their kindness and brilliant care."

Comment from a CAS member

"I first became aware of EPC in 2014 during my darling mum's illness. EPC provided the most exceptional care, enabling mum to stay at home and comfortable. The fabulous team also supported our whole family as we cared for mum during her last months. As a nurse, I admired and had such deep appreciation for the person-centred approach everyone who visited or consulted with mum displayed. Since that time, I have often thought of EPC & am so pleased to now be in a position where I can offer time back as a volunteer."

Clinical Governance Subcommittee

The Clinical Governance Subcommittee, which includes a local General Practitioner Dr Dan Jeyaseelan, external Medical and Nursing Advisors and a consumer representative, met six times during the year. The oversight work of this subcommittee provides confidence to our clients and funders that EPC has the right systems in place to deliver safe and high-quality palliative care and that we are continuously improving our services.

As the community emerged from the COVID-19 pandemic, the subcommittee noted that clients' and families' health-seeking behaviour seems to have changed, with significantly reduced engagement with preventive care, including tertiary prevention in palliative care settings that otherwise would have prevented negative impacts of disease and dying for the clients and families. Delay in presentation is further exacerbated by Primary Care, Ambulance Victoria and Emergency Departments being at capacity as well as understaffed due to COVID-19 and burnout. The number of clients referred to EPC is increasing and combined with late presentation for diagnosis of disease and/or complications, has resulted in higher symptom and adjustment burdens for clients and their carer/families requiring additional support from EPC.

EPC takes the approach of continual preparation toward the Australian Council of Healthcare Standards EQIP6 standards accreditation. A Periodic Review undertaken in March 2023 which considered 16 mandatory criteria and resulted in no areas for improvement recommended.

Ethics Subcommittee

The Ethics Subcommittee which includes external members and consumer perspectives, met four times during the year. The subcommittee oversees our participation in research ensuring alignment with the principles and parameters of our Code of Ethics. EPC does not have a fully constituted Human Research Ethics Committee. Areas of research undertaken in 2022-2023 include:

- **Understanding and Addressing the Training Needs of Clinicians to Improve end-of-life Care for Adolescents and Young Adults with Cancer.**
Dr. Ursula Sansom-Daly, NSW South Eastern Sydney Local Health District.
- **End of Life Service Experiences and Autism Spectrum Disorder.**
Dr. Bruce Rumbold, Cheryl Dissanayake, Jennifer Lowe
- **Routine Clinical Assessment of Psychosocial and Existential Symptoms in Palliative Care: A National Quality Improvement Project through Education and Supervision**
Prof. David Kissane AC, Clare Johnson, Jonathon Lennon, University of Notre Dame, Australia
- **Understanding End of Life Care for Patients with Advanced Renal Disease at Eastern Health**
Dr. Kathryn Ducharlet, Eastern Health
- **Storytelling in Life and Death, STAGE 2**
Ms. Karly Edgar, La Trobe University
- **My-Neuro-Palliative-Care: My NP Care – an Integrated Approach for People Living with a Progressive Neurological Disease**
Maryanne McPhee, Calvary Health Care Bethlehem
- **Compatibility of Medication Admixtures in Continuous Subcutaneous Infusions: a review of current practice**
Robert Wojnar, Cabrini/ Monash University
- **Telemedicine in Palliative Care: Investigating the Clinical Impact and Efficiency of Service**
Dr. Peter Poon, Monash Health
- **Local Community Palliative Care (CPC) Service For Patients With Progressive Neurological Disorders (PND)**
Dr. Dharshini Kunahlan, Calvary Health Care Bethlehem

Public Relations and Fundraising Subcommittee

The Public Relations and Fundraising Subcommittee met six times during the year. EPC continues to be reliant on community support and fundraising activities to supplement the government funding to support the specialist palliative care programs delivered to our clients. Please refer to page 18 for a more detailed report on the activities undertaken in this important area during the year.

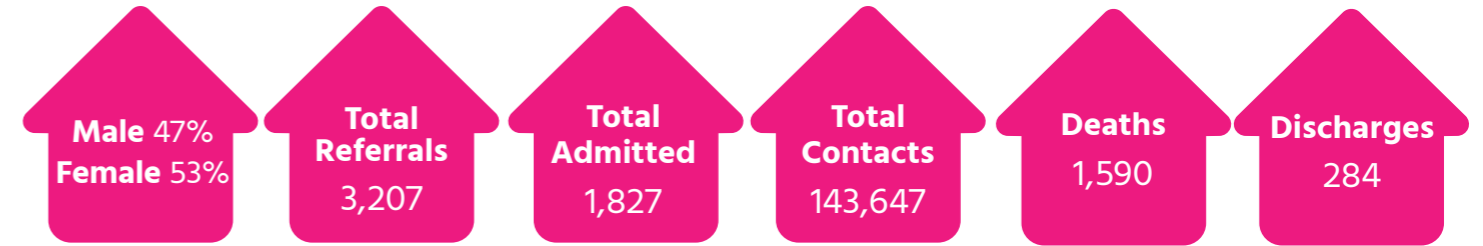
On behalf of the EPC staffing team, we would like to sincerely thank the dedicated volunteer members and staff involved on all the subcommittees for their time, knowledge and expertise and their willingness to share.

(L-R) Back Row: Mr. Timothy Gorton, Dr. Margaret O'Donnell, Professor David Kissane AC, Mr. Kevin Francis
 Front Row: Ms. Margaret Stewart (Chair), Dr. Tamsin Bryan, Dr. Anne Hunt OAM, Mr. Peter Gurr OAM
 Absent: Dr. Raymond Snyder AM (Treasurer), Dr. Ian Parry, Dr. Andrew Barnden (Deputy Chair), Mr. Martin Smith



EPC Client Profile

EPC Client Profiles for 2022-23



Total Clients
2,367

Where our clients lived

Monash
386

Yarra Ranges
339

Whitehorse
348

Maroondah
272

Boroondara
292

Manningham
348

Knox
365

Top 5 countries

Australia, Italy, England, Greece & China

84 countries
EPC clients originate from 84 countries

45

Our clients speak 45 languages

Most spoken languages

Top 5 languages spoken are English, Mandarin, Greek, Italian & Cantonese

17%
Deaths in Hospital

60%
Deaths at Home & Aged Care (Residential) Facility

23%
In a dedicated Palliative Care Unit

Clinical Services

The EPC Clinical Services team provide several thousand visits, phone calls and telehealth appointments each year with our clients and carers, GPs and other related service partners, helping them to manage any specialist palliative care problems that may occur. Our clinical workforce is highly qualified and experienced. Our Nursing & Medical team consists of Specialist Physicians, Nurse Practitioners, Clinical Nurse Consultants, Registered Nurses and Clinical Educators (across nursing and allied health). The Allied Health team comprises of five clinical disciplines and support; social workers, bereavement counsellors, occupational therapists, massage and music therapists, as well as a client resources coordinator for equipment needed in the home.

Although we have a stable clinical workforce with very long tenure, increasing demand for specialist clinicians more broadly has prompted the development of a 'Transition to Specialist Community Palliative Care Program' to ensure more 'novice' clinicians who join EPC have an in-depth palliative care induction and training program on commencement. This aims to meet our future workforce needs and those of the broader community palliative care sector in Victoria. The program will also serve to increase the specialist palliative care knowledge and expertise of the Allied Health team in 2024.

Another of the significant clinical staff changes this year has been the retirement of our long-term Palliative Care Physician, Dr. Peter Sherwen. We are privileged however to retain Peter's expertise on our Ethics Subcommittee. EPC has been very fortunate to welcome Dr. Katie Tham to EPC and her contribution to the interdisciplinary team has already had a positive impact.

While we all have adapted to the new normal after the COVID pandemic, the Nursing, Medical and Allied Health teams have undertaken significant work to ensure we learn lessons from the experience and consider how we can adapt many of the innovations we were forced to adopt. As a result, a project was undertaken to improve our workplace flexibility and uptake of technology to create improved efficiencies and help facilitate a better work-life-balance for our workforce.

Other areas of activity have included:

- Our Intake / triage team have reviewed their complex procedures and moved to a paperless system to improve efficiency and our impact on the environment.
- Additional nursing hours have been invested in the Priority Assessment team to better meet the needs of referrals that are urgent or complex.
- Agile work practices across the family support and bereavement teams to meet increased demand and complex needs of clients and their carers. This has resulted in more timely access to support via telephone and telehealth.
- Our Residential Aged Care team has been bolstered with a 12-month project to improve access to specialist palliative care for aged care residents and their carers with practical & sustainable solutions.
- Strengthened partnerships across specialist community palliative care providers, Caritas Christi Hospice, Eastern Health, Safer Care Victoria, MND Victoria, hospitals and community service organisations to share knowledge and to workshop innovative approaches to ensure all Victorians have access to quality specialist palliative care.
- To meet the unexpected and urgent needs of our clients after hours, we continue to roster:
 - o 2 evening shift nurses in the afternoons and early evening.
 - o 4 nurses on weekends and 6 on Public Holidays.
 - o 3 nurses on-call overnight.
 - o 3 Physicians on-call 24/7 for advice and support to our nursing staff.

Of course, none of the great work our clinical teams do each and every day could be achieved without the hard work of our amazing administration and office-based corporate services colleagues. The exceptional service and support they provide are essential to making sure our clinicians are able to provide high quality care to our community.

Volunteer Services

EPC Volunteers: Enriching lives with every day acts of kindness.

Our EPC volunteers contributed just over \$1,000,000 worth of work to EPC in this last year (as estimated by the ABS). That is an astounding amount of good being done within our local communities. We now have about 240 volunteers and every visit is changing the day of someone who needs them.

Our biography team moved ahead in technology to embrace an online voice to text transcription software – cutting down on hours of touch typing. They also brought in a way of recording the client's voice around 3 fun questions. This gets released with the biography to the client and their family. We also saw the launch of the "Paws to You" team – volunteers taking their own dogs to visit people's homes. This is proving to be very popular with clients saying 'I just want to hug a dog'.

At the end of 2022, our volunteers were surveyed by an independent Benchmarking Company, Best Practice Australia/NZ Ltd. Our volunteers reported back a 99% satisfaction result with their work at EPC. This is an unheard-of number for any staff or volunteer survey and coming on the back of the pandemic speaks very highly about the work we engage our volunteers in. Our volunteers also scored the highest across 14 national benchmarks. With that in mind, the virtual Centre for Volunteer Excellence was launched. This will be a training arm of EPC's Volunteer Services, allowing organisations from around Australia and overseas, to have a chance to learn from the best, in real time, with genuine success. We acknowledge and thank each and every one of our volunteers for their contribution to EPC's purpose.



Carers Recognition Act

EPC is required to report on the services and supports it provides to carers.

Caring for someone at end of life is both satisfying and exhausting for the Carer. It can be emotional and fatiguing. It can be short or long term. Informal carers are critical to EPC's work. EPC may be in the home once or twice per day to provide care and support but, without family and friends as carers, the client is unable to stay at home longer term, unless they can afford to pay for 24-hour professional support services.

EPC knows and understands the role of carers and therefore our new Strategic Plan pays credit to carers and emphasises how EPC needs to support carers to be able to undertake their role.



As part of our ongoing education for staff and volunteers, we emphasise the importance of carers and that by providing them with support, they are supporting the client. EPC's 24-hour phone number is designed to support carers and clients and on average we have just over 262 calls per month. This includes around 34 nursing visits out of hours (between the hours of 11 PM and 7:30 AM) per month. Many carers have told us that the telephone support and the out of hours visits are critical to their being able to continue to provide care at home.

EPC also supports carers who are bereaved. If a client dies on our program the carers are offered a number of options, including grief education, counselling and a 'walking through grief' group for up to 13 months after the death.

The Carers page on our website has been designed to support carers and was developed in consultation with our Community Advisory Subcommittee. The website lists resources for carers and EPC have also had great connection with organisations that support carers. In the last 12 months we have met a number of times with Carer Gateway through Villa Maria Catholic Homes (VMCH) supporting their understanding of the priority of need of our carers.

Carer Gateway provides a range of free services and supports just for carers. Services are delivered in-person, online and over the phone. Dedicated teams of Carer Gateway service providers provide in-person services across Australia.

By partnering with VMCH we are supporting our carers with the following:

- The provision of equipment
- Support services such as personal care
- Tailored support packages
- Access to respite including emergency respite.

EPC services also include those outlined in our Clinical Services section and all include elements of support for carers.

EPC thanks all carers for their dedication and willingness to play a pivotal role in the care of their loved one.

Community Education

The delivery of EPC Community Education services to external health care providers has seen a significant increase in requests in 2023. The greatest demand for Palliative Care Education and Training has been for attendance at the "Introduction to Palliative Care for Registered Nurses", a course held on site at EPC.

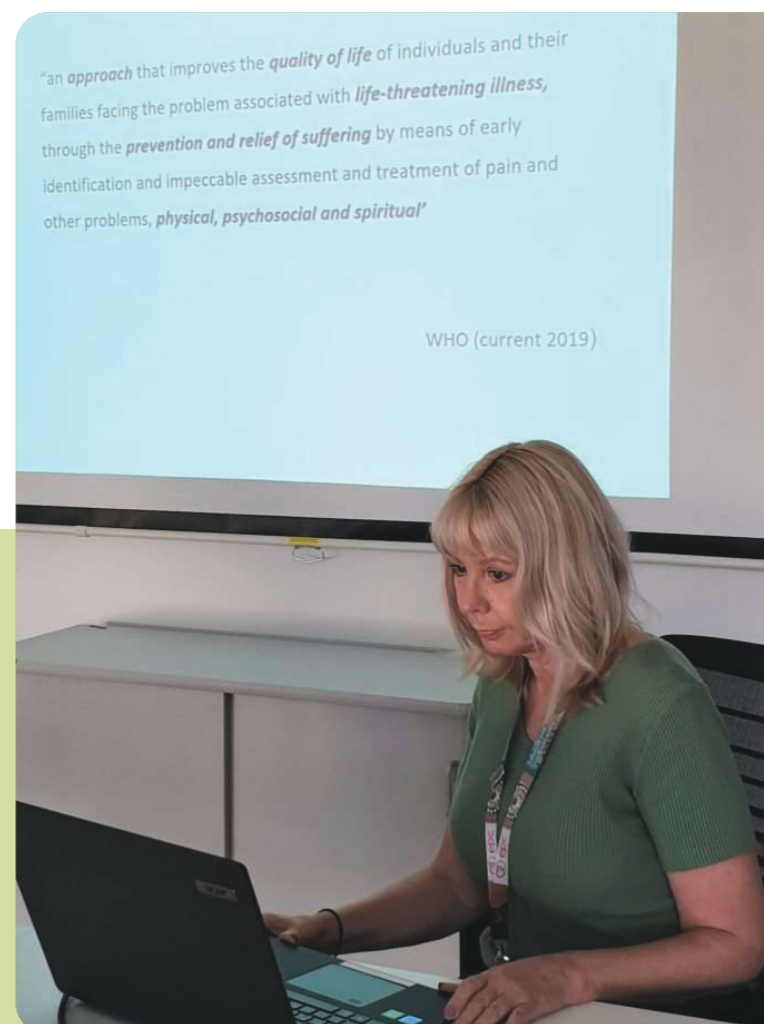
The majority of the participants who attended work in the Aged Care sector, which highlights the need for greater provision for end-of-life care education and training for aged care workers. Several places in the courses were funded through the Eastern Metropolitan Region Palliative Care Consortium (EMRPCC) Education Bursary Program.

EPC was able to put seven of our own EPC nurses through the RN Course due to the generosity of Ellen Lew, an EPC benefactor who donated the funds for 10 nurses to complete this course. We are very thankful to Ellen for her kindness and interest in nursing education which EPC considers paramount to our specialist workforce.

This year we scheduled an additional RN course to meet the demand with a total of 56 nurses participating in the 3-day program. A number of the participants also chose a 4th day to experience a supernumerary day on the road with an EPC nurse. In 2024 we will be offering at least five courses throughout the year.

A total of 27 education sessions were delivered to 15 Aged Care facilities in the Eastern Region with nine virtual sessions and 16 face-to-face sessions. Quarterly Education Newsletters continue to be distributed to the Aged Care and Primary Health Care sectors promoting EPC Education and Training opportunities. The ongoing aim is to promote palliative care in the community and support timely referrals to EPC. The Newsletters have contributed to the uptake of Education and Training with EPC.

A significant project this year has been the development of an online registration and payment system for EPC Education and Training. The EPC website now has the capacity to allow participants to view upcoming courses and virtual education sessions and enrol in these online.



The Community Education role also supports and co-ordinates the clinical placement of students, both undergraduate and post graduate, at EPC. This year we have supported medical, nursing, OT and other healthcare workers in valuable learning about Specialist Community Palliative Care.

We were also honoured to host a delegation from Singapore Health for a six-week placement in collaboration with Caritas Christi Hospice. The next 12 months will see our Community Education program continue to support the local community and promote the integration of Specialist Palliative Care into Primary Health Care settings.

Public Relations and Fundraising

Finally, a year with no lockdowns and increasingly relaxed restrictions meant our Community Speakers were able to get back out in person and educate our community about specialist palliative care. The number of Community Speaker events that our wonderful Ambassador volunteers attended more than doubled this year to 22 with an eagerness in the community to get together and learn new things.

EPC continued our monthly radio interviews with 3WBC talking all things palliative care and in September we also did an interview with Vision Australia which was quite a nice addition to our radio audience. Our social media and website visitors have also increased with interesting and important content being shared, liked and commented on.

Our most exciting event for the year occurred on October 9th where we held our much-anticipated, EPC exclusive, fun run, Pound the Pavement 4 EPC (or PTP4EPC). This was the first time we ran our own fun run having previously joined the Run Melbourne fundraiser held in the city. Our local venue of Lillydale Lake proved to be a beautiful setting and was very popular. We set our fundraising goal at \$20,000 and hoped we would at least get a nice crowd. Our expectations were more than met when our final fundraising target came in at \$40,000 with 280 attendees.

The money raised went towards helping those who are terminally ill, living at home, that needed equipment to be hired or purchased but were struggling financially. Many families were given assistance to gain much needed equipment due to the generous people who donated and participated in this very important cause. It was a wonderful day with a number of family groups, each with a few generations in them, who walked or ran in honour of a loved one that had been on the EPC program. Many stayed back for a chat, family lunch in the park or to enjoy our sausage sizzle provided by Maroondah Rotary. This has now become our annual fundraiser with our next one in October 2023.

We have also seen an increase in general donations and through our tax time and Christmas appeals. We have had a number of bequests come through which has helped EPC with the purchase of important medical equipment and services helpful to our carers as well as the clients.

EPC's reputation in the community received recognition when we were invited to attend the Whitehorse Excellence in Business Awards gala dinner as a nominee for the Community Group Not-for Profit award. We were thrilled when we received a Highly Commended recognition award.

Our dedicated Public Relations and Fundraising Subcommittee have helped bring EPC to where it is today. We also thank our very generous EPC donors for their support and allowing us to provide clients and families with our services, at home and where they are most needed.



Dive In

EPC's current strategic plan imperatives include deliverables that speak to Our Care and Our Engagement, with a concerted focus on inclusion and diversity. EPC now has a diversity and inclusion working group that has been named Dive In. With representation across nursing, allied health and corporate services, the aptly named group, has approached the complex issue of systemic racism, unconscious bias and culturally appropriate clinical practice with openness, curiosity and sensitivity.

Another key focus area for the group, is to identify areas within our team culture that require attention to ensure that each staff member and volunteer feels safe and valued. Our vision is simple. We strive for a safe and equitable workplace where all our employees and volunteers are treated in a fair and respectful manner, and where our ideas, experiences and perspectives are included in all decision-making.

The Dive In group will continue its work on a suite of resources, policy and processes aligned with inclusion principles, clinical resources and training material. In early 2024, Dive In will be joining our First Nations Engagement Team in launching EPC's Framework for Diversity and Inclusion across the entire organisation.



First Nations Engagement Team

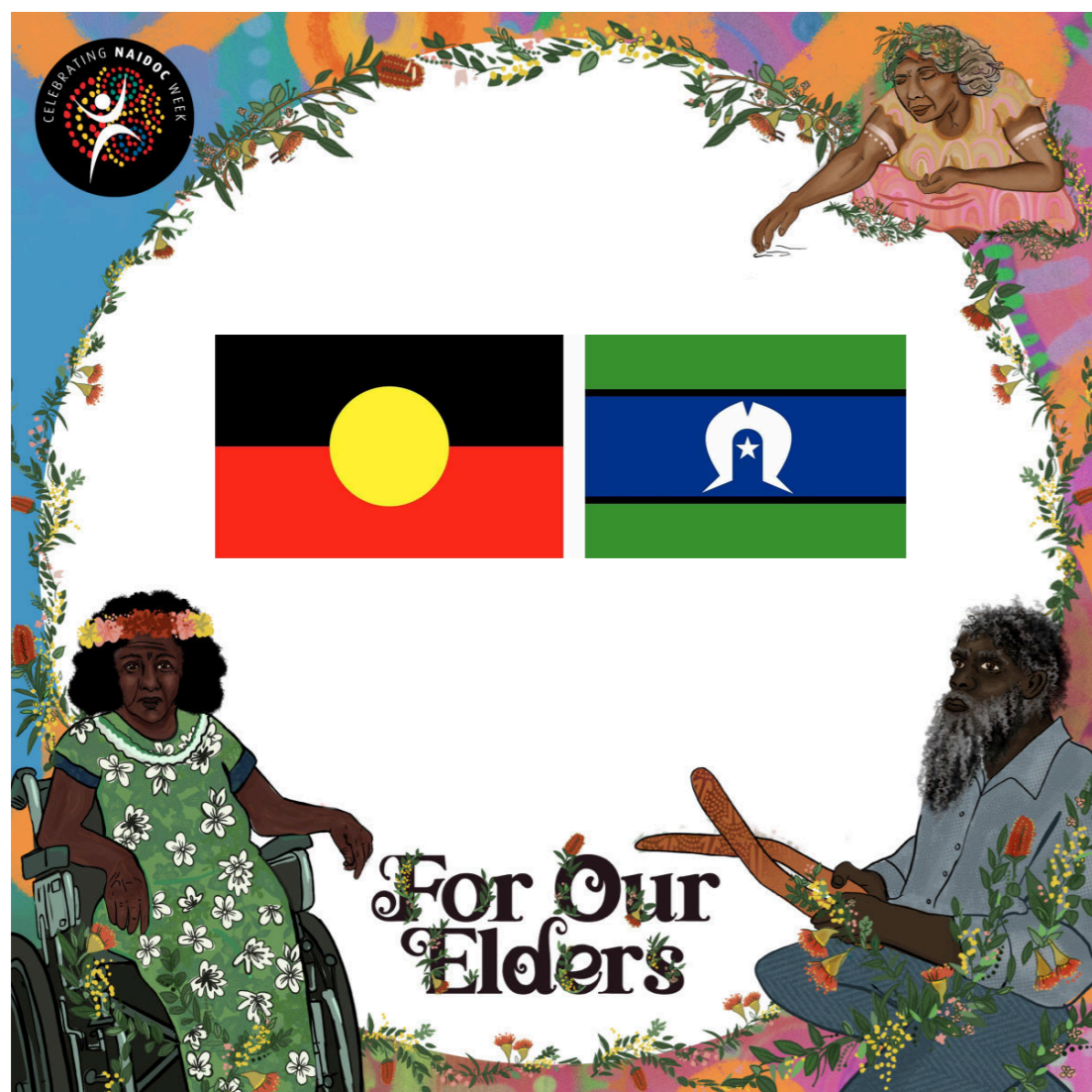
EPC established our First Nations Engagement Team (FNET) during 2022. This is an internal working group doing fabulous work. Below are a few quotes from members of the team about their work –

“It’s been a wonderful experience to come together with people from different disciplines and across different teams to make time to reflect and share conversation and writings to put together a reconciliation plan and educational resources for staff at EPC. The FNET acknowledges the impact of colonisation and institutional approaches for First Nations people and stands for the reclaiming of identity, of belonging to one’s family and kinship, community and Country. With guidance from the Aboriginal community, organisations and Elders, the FNET aims to raise awareness, improve relationships and increase opportunities for Aboriginal and Torres Strait Islander people, respectfully honouring their culture and spirituality and bringing to the forefront the heart and soul of culturally safe palliative care.”

“The FNET are a passionate and committed group working towards enhancing the cultural knowledge of EPC staff to strengthen our relationship with First Nations people. We wish to communicate our respect for First Nations People and their ongoing resilience in the face of intergenerational and ongoing trauma that continues to impact on their health and wellbeing. We wish to honour them and their relationship to country, learn from them and partner with them to provide culturally safe palliative care.”

“The FNET is working on our vision statement and a new, more meaningful Welcome to Country. We are formulating education processes and the rollout to all staff, volunteers and the committees.”

“This is a team of focussed, passionate and dedicated staff members who feel very strongly about sharing this message into the EPC community.”



Staff and Volunteer Service Awards

Thank you to our wonderful long-serving staff and volunteers who are eligible for service awards for the 2022-23 Financial Year.

Staff



Andrea Baldwin
20 Years



Louise Nicholls
15 Years



Tanakorn (Aeh) Tapekumkun
10 Years



Lucinda Reynolds
10 Years



Jessica Brown
5 Years



Christopher Cliffe
5 Years



Emily Gurr
5 Years



Grace Yao Huang
5 Years

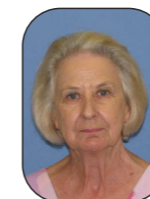
Volunteers



Jill Cheah
15 Years



Kerry Allan
10 Years



Helen Flanagan
10 Years



Judy Hubbard
10 Years



Felicity Needham
10 Years



Margaret Scheltinga
10 Years



Alan Adair
5 Years



Cheryl Boylan
5 Years



Sandeep Chitale
5 Years



Sandra Cox
5 Years



Anne Crisp
5 Years



Carol Egan
5 Years



Ruth Fincher
5 Years



Bronwyn Fitzgerald
5 Years



Dennis Fitzgerald
5 Years



Claire Fitzpatrick
5 Years



Jennifer Foley
5 Years



Julie Hiku
5 Years



Jayne Hollier
5 Years



Christina Hornby-Waring
5 Years



Laurie Jackson
5 Years



Pamela Longe
5 Years



Nilima Pelz
5 Years



Anne Phillips
5 Years



Mary Whelan
5 Years

Our Partners

In 1997, Eastern Palliative Care was formed through a Heads of Agreement between three existing palliative care providers: the Order of Malta, St Vincent's Hospital (Melbourne) Ltd and Melbourne Eastern Palliative Care Association. In 2010, Melbourne Eastern Palliative Care Association ceased to exist and the Rules of EPC were amended to accommodate Outer East Palliative Care Service Inc becoming a Participating Body in EPC. The three partner bodies continue as independent legal entities.



Outer East Palliative Care Service Inc

Outer East Palliative Care Service Inc was incorporated in July 1991. The service originated from a strong community need for palliative care services, to provide people with a terminal illness in the outer east with a choice between hospitalisation or home-based palliative support. Outer East Palliative Care developed strong community links to service clubs, local government, General Practitioners, local hospitals, nursing homes, hostels and supported accommodation services.

The local General Practitioners helped Outer East Palliative Care develop team models for delivery of home based services. Home based palliative care services commenced in 1994 across the areas of Ringwood, Croydon, Knox, Sherbrooke, Lilydale, Healesville and Upper Yarra. Outer East Palliative Care continues to advocate strongly for local services in the outer east region.

This strong link to the community remains today and as one of the three partner bodies, OEPCS Inc provides Eastern Palliative Care with general community input, volunteers on the Committee of Management, its Subcommittees and through fundraising and volunteer programs, and an ability to keep connected with our community and the growing expectation of specialist palliative care.



St Vincent's Hospital Melbourne Ltd. (The Sisters of Charity)

The Sisters of Charity, a Catholic order of religious sisters, have been providing care to those in need since their arrival to Australia from Ireland in 1838 where they provided services to female convicts at the women's prison in Parramatta, Sydney. In 1893, St Vincent's Hospital was founded in Fitzroy. Caritas Christi Hospice Kew was opened in 1938 and since 2001, St Vincent's Hospital has been responsible for St. George's Health Service in Kew. These three healthcare facilities form St Vincent's Hospital Melbourne Ltd.

St Vincent's Health Australia (SVHA) is now a national organisation with healthcare services extending across Victoria, New South Wales and Queensland. As the largest not-for-profit healthcare organisation in Australia, SVHA continues to grow and meet the needs of the community across 36 facilities nationally, including public and private hospitals, innovative primary and home-based care, residential aged care, mental health services, palliative care, drug and alcohol services, research institutes and correctional health services. As for all SVHA facilities, the Mission of St. Vincent's Hospital Melbourne places a special emphasis on the poor and disadvantaged, underpinned by the Values of Justice, Integrity, Compassion and Excellence.

St Vincent's Hospital Melbourne Ltd provides volunteers to EPC through the Committee of Management, its Subcommittees and through volunteer programs and fundraising.



The Order of Malta

The Order of Malta was founded in Jerusalem in 1098 just before the First Crusade. Since 1113, it has been a lay religious Order of the Catholic Church. It is also an international hospitaller and relief organisation, and a sovereign entity under international law. Its full title is the Sovereign Military Hospitaller Order of St. John of Jerusalem of Rhodes and of Malta. It came to Australia in the early 1970s where its focus became the care of the terminally ill, the frail elderly and their families. It is based at Caritas Christi, Kew, where it has an office and a Board Room.

In 1992 Caritas Christi and the Order of Malta Hospice Home Care Services Incorporated was formed as a partnership of the Sisters of Charity and the Order of Malta. This home-based service was staffed by nurses, pastoral care and social workers and a core of trained volunteers. In 1997 the two partners became two of three founding partners in Eastern Palliative Care Association Inc.

The Order of Malta in Australia has some 350 members and some 90 members in Victoria (Order of Malta Home Care (Vic) Ltd), where it enjoys considerable volunteer support and is able to carry out a variety of programmes. The Order provides volunteers to EPC through the Committee of Management, its Subcommittees and through volunteer programs and fundraising.

Acknowledgements

We recognise and thank the following supporters whose financial contributions assisted us to make a difference this year.

Bequests

The Estate of:
Malcolm Davidson

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Templestowe Pharmacy
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Wantirna

Donors (\$200+)

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Freemason Foundation
Victoria
Ringwood Lodge of Quest
Syndal Baptist Church
Rotary Club of Maroondah
Rotary Club of Mitcham
The parishes of St Francis
Xavier-St Clare

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Adam Bisits Memorial Fund
The Juliet Allen Fund
Community Enterprise
Charitable Fund

We also thank individuals that donated less than \$200 or asked not to be published. 100% of all donations, bequests and fundraising go directly to palliative client care in real time.

Thank you for supporting EPC this financial year.



Palliative care. Living well every day.

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