epc

Palliative care. Living well every day.

ANNUAL REPORT 2025-26

Living well every day.

We are the experts in living well every day
– because we see what matters most.





ACKNOWLEDGEMENT OF COUNTRY

EPC acknowledges Aboriginal and Torres Strait Islander peoples as the Traditional 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. Developed by *EPC First Nations Engagement Team (FNET).*

Artwork by Frieda Si, Palliative Support Clinician, winner of the NAIDOC Week art competition

Contents

Chair/Chief Executive Officers Report	04
About Us	06
Living Well in Action	08
Strengthening Care	10
Governance	12
Meet Our Clients	14
Working at EPC	16
Volunteering at EPC	17
Clinical Services	18
Volunteer Services	21
Meet Our Palliative Paws	22
Philanthropy & Communications	24
Innovation – Value Based Health Care	25
Financial Overview	26
Our Members	27
Staff & Volunteer Service Awards	28
Thank You for Your Support	29

Chair/Chief Executive Officers Report



Margaret Stewart

Chair



Gaylene Coulton

Adjunct A/Professor
Chief Executive Officer (CEO)

"It is incredibly humbling for a Board of Directors to provide careful stewardship, oversight and support to a health service whose staff and volunteers are dedicated to making sure that living well is something our clients and their loved ones are able to do every day," Margaret shared.

In these unsettled times, living well feels like an act of quiet defiance — swimming against a tide of uncertainty and challenge on all fronts.

This past year has been difficult. Internationally, we have watched conflict, displacement and economic uncertainty unfold on our screens, a reminder of how fragile stability can be. Nationally, the health and aged care sector has continued to navigate significant reform, cost-of-living pressures touch everyone and there's a leadership vacuum that is filled by hate speech.

EPC has not been spared. We have felt these pressures acutely and had to respond to the signs of the times reforming our service today so we will be here for our clients tomorrow and into the long term.

Living well every day is not a promise we make to our clients that things will be easy. It is a commitment we make to deliver the care and services that matter most to them, that preserves their dignity. It means a nurse being available at 2am, a volunteer holding a hand, a palliative support clinician making space for grief that has nowhere else to go. Living well recognises that a good life includes a good death, accompanying our clients and their loved ones so no one walks that path alone.



Pictured (left to right) Gaylene Coulton and Margaret Stewart



Photo taken from the Smilemaker Program

This year, despite the headwinds of transformation and the impact of significant change, EPC staff and volunteers have continued to show up for our clients with compassion and professionalism. We want to acknowledge that most sincerely. Palliative care work asks a great deal of the people who do it emotionally as well as physically.

Thank you to our donors, partners and the broader community whose generosity has allowed us to keep saying yes to families who need us, especially as funding pressures have tightened. Your support is not incidental to our work; it is foundational to it.

"The Board send their unending thanks to Gaylene and her leadership team for their resilience and consistency in a challenging operational environment. Difficult years call for careful stewardship, considered planning, and the responsibility to listen. We have been grateful for their judgement and commitment throughout," Margaret said.

We extend our heartfelt appreciation and gratitude to every member of our staff and volunteer community. We recognise the difficulty and sadness of farewelling valued colleagues, while adapting the ways we work through significant change. Throughout this period, you have continued to provide compassionate, client-centred care and thoughtful support for carers and each other, demonstrating remarkable resilience, kindness and commitment. We are deeply grateful for all that you do.

EPC's Board and Executive are clear and unambiguous about our purpose. Living well, for us, means continuing to build a service that meets people with skill and with heart.

Looking ahead, we are clear about the challenges facing our sector: financial sustainability, workforce stability and importance of evolving the ways we deliver care to meet the complex needs of our clients in their own home.

Thank you for being part of that with us this year.

Margaret Stewart Chair & **Gaylene Coulton** Adjunct A/Professor Chief Executive Officer (CEO)

About Us

Eastern Palliative Care Ltd (EPC) provides specialist community-based palliative care across Melbourne's Eastern region, helping people with terminal or life-limiting illness live as fully, comfortably and meaningfully as possible.

We are the experts in living well, every day – because we are invited into people's lives at their most meaningful moments, and we see what truly matters. We're proud to serve Melbourne's East, where people value home, connection and community.

We deliver compassionate, holistic care for people with complex physical, emotional, psychosocial or spiritual needs, working alongside families, carers, GPs and health professionals to honour what matters most to each person.

At the heart of our work is one profound belief: every person deserves dignity, comfort, choice and connection at the end of life — often in the familiarity of home, surrounded by what brings meaning and reassurance.

Our specialist clinicians ease distressing symptoms, guide difficult decisions and support people through the emotional, social, financial, psychological and spiritual impacts of serious illness.

We also walk alongside families and caregivers, offering practical support, guidance and reassurance through one of life's most challenging and deeply personal journeys.

EPC supports communities across Boroondara, Manningham, Maroondah, Whitehorse, Monash, Knox and Yarra Ranges LGAs ensuring specialist palliative care is available close to home.



Photo taken from the Smilemaker Program

Our Purpose

- Our clients live with the best quality of life, before dying in their place of choice.
- Our clients, their families and carers are supported according to their needs and choices.
- Our resources are managed wisely and sustainably to provide value for the community.

Our Role

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

1. Comprises nursing, medical, allied health and bereavement support
2. Is delivered in the place a person considers home
3. Support is available 24 hours per day, every week
4. Normalises the process of dying for our community
5. Neither hastens nor postpones death
6. Ensures the right people have access to our services at the right time

Our Values

The **EPC Code of Ethics** articulates the basic principles upon which EPC operates and informs 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

Living Well in Action

Big Love, Small Moments at our Donor High Tea

A wonderful opportunity to thank and share the small moments made possible by our community's big love. Over 60 donors attended for an afternoon of connection and appreciation.

Caring for the Carers

One of our major donors funded 62 nights of over-night respite to give carers a rest knowing their loved one was safely cared for.

Strengthening Care

Margaret and Tony made a generous donation to increase staff and resources, strengthening operational capacity for a more sustainable future.

Mum's Gift for Better Care

Jon and Alyssa gave a living legacy to help fund Ai Scribe in honour of their wife and mum, Susan.

Care for Young Hearts

Craig and Lisa funded bereavement resources for children aged 5–12, helping young people navigate grief so they can continue to grow and thrive.

Community Partnering Together

We welcomed two new community partners, Bendigo Bank Blackburn South and Financial Lifestyle Partners, strengthening local support and opening new opportunities for community connection.

Everyday Equipment, Extraordinary Impact

Blackburn United Lodge and the Freemason's Foundation donated $12,200 to fund essential equipment to support people being cared for at home.

A Gift of Comfort when it Matters Most

Maroondah Rotary generously donated $6,500 to fund two new recliners chairs, helping clients remain more comfortable in their own homes.

Community Outreach

We delivered 16 community presentations and secured 17 community speaker bookings, helping raise awareness of EPC's services and build stronger connections across the community.



Donor High Tea


Big Freeze - Fight MND staff fundraiser



Blackburn United Lodge & Freemason's Foundation



Tax Appeal Neale & Jan Daniher



Pound the Pavement event 2025



Nurses Forum 2026

Helping Clinicians Learn, Grow and Care

Bendigo Bank provided a grant of $18,000 to fund EPC's new online academy, a digital learning platform.

Pound the Pavement

Over 200 participants and 31 palliative paws pounded the pavement and raised more than $50,000.

Tax Appeal

Our Tax Appeal raised $132,000 to support EPC's 24/7 on-call service. Special thanks to Jan Daniher for sharing her story, and to our wonderful volunteer, Judy, whose matched gift inspired others to give.

Order of Malta Movie Fundraiser

Guests enjoyed a special *Superman* screening hosted by Lido Cinemas and raised almost $900.

Nurses Forum

Over 45 nurses came together for a day of education, curiosity and team bonding at our annual Nurses Forum. Topics included updates on Motor Neurone Disease, best practice in pain assessment and management, palliative care emergencies, medical acupuncture, and understanding common questions families ask about after-death care.

Palliative Care Nurses Conference

The Chair of the Community Advisory Committee, Rebecca Brough, attended the Australian Palliative Care Nurses Association Conference and presented on behalf of EPC, Voices that Matter: Consumer Insights into Systems Improvements. Eight other EPC nurses also attended, returning with fresh inspiration, to enhance the amazing work that they do.

Honoured for Community Service

EPC volunteers Gerard O'Donnell (Australia Day) and Saurabh Mishra (King's Birthday) were awarded the Medal of the Order of Australia (OAM) for outstanding community service.

Big Freeze for FightMND

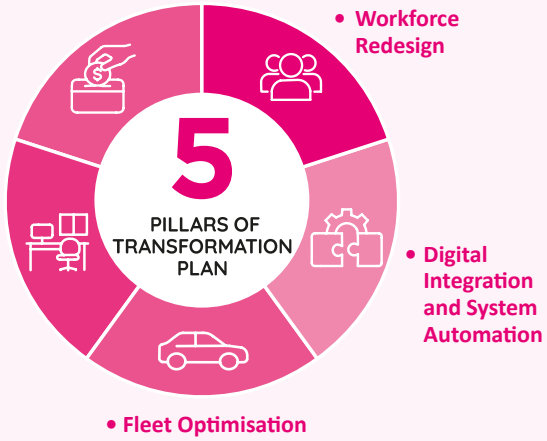
EPC Staff held there own Big Freeze to raise money for FightMND.

Strengthening Care

Through Value-Based Change

Value in health care is defined as the measured improvement in a person's health outcomes relative to the social, environmental and financial cost of achieving that outcome. EPC's Value Based Health Care (VBHC) Strategy, called "A Case for Change," was developed for our community and began implementation in 2023.

Over the past three years, the VBHC Strategy has supported transformational change across EPC's clinical services, corporate services and approach to prioritising limited resources. In 2025-26, in response to a difficult financial position largely caused by government funding not keeping pace with rising costs, the Board approved the following 5 Pillars of Transformation Plan.



In a palliative care setting, value based health care means ensuring limited funding is directed to the services and clients where it can make the greatest difference. This includes prioritising clients with the highest need and sustaining services that help prevent unnecessary hospitalisations, such as EPC's 24-hour on-call nursing service.

The strategy has therefore required both investment in sustainable models of care and corporate services and difficult decisions about services that could no longer be supported within available funding.

These decisions required EPC to hold two truths at the same time: valued colleagues whose work and relationships made a lasting contribution to EPC were farewelled, while the organisation strengthened the way limited resources are directed to services that provide the greatest benefit for clients and families.

This also meant making the difficult decision to cease services that were not funded by government and could not be sustained within EPC's current financial position. In mid-2025, EPC ceased music, massage and occupational therapies and farewelled treasured colleagues whose contribution to clients, families and EPC has been deeply valued.

Work undertaken in line with EPC's VBHC Framework included:

- **Investing in our fundraising strategy to decrease our reliance on government funding.**
- **Reviewing corporate service functions, including payroll, HR, finance, IT and administration, to develop modern, stream-lined and efficient digital systems.**
- **Reviewing EPC's fleet use and introducing a range of hybrid cars for clinicians to reduce our environmental impact.**
- **Consolidating our Kew office into our Mitcham site, bringing staff together to improve collaboration, reduce duplication and make better use of resources for the benefit of clients and families.**
- **Changing the psychosocial support model of care to prioritise clients with the highest psychosocial support needs and strengthen EPC's ability to direct support to those most in need. This change also involved fare-welling several highly valued colleagues, whose relationships, care and contribution to clients, families and EPC are acknowledged with deep appreciation.**



Photo taken from the Smilemaker Program

EPC is not alone in the healthcare sector in experiencing the loss of colleagues because of change. In a small organisation like ours, these changes have made this an incredibly difficult year, and the team has felt the loss deeply. At the same time, the work undertaken has strengthened EPC's ability to focus resources where they have the greatest impact for clients and families. We are now looking forward to a period of stabilisation, consolidation, and continued care for one another as we move forward.

EPC thanks the clinical and consumer representatives who participated in project groups, the Consumer Advisory Committee and the VBHC Taskforce. Their contributions have been invaluable in helping improve care for clients and families while navigating significant organisational change. Bringing clinicians, consumers and subject matter experts together to co-design these initiatives has been integral to implementing change in a way that remains grounded in client and family needs. EPC also acknowledges the many consumers who have generously volunteered their time and expertise to VBHC initiatives.

Governance



Board of Directors (left to right) Timothy Gorton (Deputy Chair), Dr Andrew Barnden, Nicole Jolley, Margaret Stewart (Chair), Dr Melanie Benson, Dr Margaret O'Donnell, Dr Patricia (Trish) McGee

EPC operates as a not for profit Company Limited by Guarantee, supported by a governance structure that promotes accountability, long-term sustainability and responsible stewardship. EPC's three Member organisations are St. Vincent's Hospital (Melbourne) Ltd, Order of Malta Hospice Home Care (Vic) Ltd and Outer East Palliative Care Service Inc.

Governance by a Board of Directors

EPC is governed by a skilled and committed Board of Directors. Directors contribute broad experience, insight and professional expertise, supporting informed decision-making and strong organisational oversight.

The Board meets bimonthly to review EPC's performance, consider emerging challenges and opportunities, and support continuous improvement. Its focus on transparency, integrity and responsible stewardship helps ensure EPC remains aligned with its purpose.

The Boards key objectives are to:

1. **Advance the Company's purpose and objectives.**
2. **Ensure the Company is properly governed.**
3. **Ensure the EPC Code of Ethics is the foundation of clinical services, organisational behaviours and future planning.**
4. **Develop the Company's strategic objectives.**

In fulfilling these objectives, the Board determines and monitors the:

1. **Company's framework & its short/ medium/ long-term goals.**
2. **Policies governing the operations of the Company.**
3. **Risk management framework and risk appetite that suits EPC.**
4. **Powers and functions of Board Committees and other Committees that may be established from time-to time.**
5. **Annual progress/ performance in implementing its goals and objectives.**

At the 2025 Annual General Meeting, three long-serving Directors retired upon the completion of their terms. EPC extends its sincere appreciation and gratitude to **Dr Raymond Snyder AM, MBBS, MMed, FRACP, GAICD; Professor David Kissane AC, MBBS, MPM, MD, FRANZCP, FAChPM, FACLP; and Dr Ian Parry, PhD, BA (Hons), BLitt, BBus, BSc, Dip App Chem.** for their outstanding commitment, leadership and dedicated service to the organisation over many years.

Their significant contributions have helped shape EPC's growth and success, and their service is gratefully acknowledged.

The following Directors were appointed by EPC's three Members to fill the vacancies created by the retirements at the 2025 AGM:
Nicole Jolley, BCom, CA, GAICD
Anthony (Tony) Reeves, BEc, M Comm, FCPA, MAICD
Patricia (Trish) McGee, PhD and MsC (Applied Science)

In 2026, **Dr Tamsin Bryan** resigned from the Board after more than five years of dedicated service. The Board extends its sincere appreciation to Dr Bryan for her valuable contribution to EPC during her tenure.

Following Dr Bryan's resignation, **Dr Melanie Benson MBBS (Hons), GDipPallMed, MBioethics, MPH, FRACP, FAChPM** was appointed to fill the casual vacancy and will serve the remainder of Dr Bryan's term through to the 2027 Annual General Meeting. Dr Benson is a specialist palliative medicine physician who holds senior clinical leadership roles with Palliative Care South East and Bayside Health (Peninsula). She brings extensive expertise in palliative care service delivery, clinical governance, multidisciplinary care and health system leadership, further strengthening the Board's clinical and strategic capability.

The Board is supported by several Committees that provide focused oversight, independent advice and assistance in their respective areas of expertise. Membership of Board Committees consists of Board Directors, Consumers Representatives and external subject matter experts.

These Committees assist the Board to fulfill its responsibilities to EPC's members and strengthen governance across key areas of the organisation.

- **Accommodation and Infrastructure Committee**
- **Clinical Governance Committee**
- **Consumer Advisory Committee**
- **Finance and Risk Committee**
- **Governance and Nominations Committee**
- **Public Relations and Fundraising Committee**
- **Ethics Committee**

The Ethics Committee oversees EPC's participation in research, ensuring alignment with the principles and parameters of EPC's Code of Ethics. Areas of research undertaken in 2025-26 include:

UTS Rapid Program

Palliative Care Nurses Experience, Care and Views of Xerostomia Ms. Laura Murphy – EPC Representative and the Palliative Care Nexus Centre.

COMET

Benzodiazepines for breathlessness Dr Caitlin Sheehan – IMPACCT, Faculty of Health, University of Technology Sydney.

EPC sincerely thanks its volunteer Directors, Committee members, management and staff who contribute to the work of the Board and its Committees. Their time, knowledge and expertise are greatly valued and continue to support strong governance and the delivery of EPC's purpose.



2025 Annual General Meeting, Retired Directors (left to right) Dr Ian Parry, Dr Raymond Snyder and Professor David Kissane

Meet Our Clients

EPC Client Profiles for 2025-26

Male **47%**
Female **53%**

Total Clients **1,846**

Total Admitted **1,394**

Total Contacts **101,091**

Deaths **1,241**

Discharges **230**

Where our Clients Lived

Monash **299**	Yarra Ranges **286**	Boroondara **206**	Manningham **229**
Whitehorse **307**	Knox **298**	Maroondah **210**	Other areas **10**

Top 5 countries
Australia, China, Greece, England and Italy

72 countries

38 languages

Most spoken languages
English, Mandarin, Greek, Cantonese and Italian

48%
Deaths at home and aged care residential facility

16%
Deaths in Hospital

1%
Other locations

35%
In a dedicated palliative care unit

Grant & Jane's Story

Jane was, by every account, a woman who knew her own mind. A nurse for many years before raising her family, she later retrained in residential energy ratings, bringing the same quiet authority to assessing building extensions that she had once brought to a hospital ward. Those who knew Jane remember her as clear, capable and direct — someone who met life on her own terms.

That same clarity helped guide her family through one of the most difficult chapters of their lives. In 2022, Jane's speech began to change. Months of appointments followed before a specialist confirmed a diagnosis of Motor Neurone Disease — news that, as her husband Grant recalls, is never delivered quickly or easily. A friend's recommendation led the family to Eastern Palliative Care, and by June 2024 Jane and Grant had begun using EPC's services in earnest.

From there, EPC became a steady and reassuring presence in their lives, helping Jane live as well as possible at home as her illness progressed. Nurses visited regularly, adjusting their support as Jane's needs changed — monitoring pressure care, managing pain and medication, and staying a step ahead of symptoms as they emerged. For Grant, who became Jane's full-time carer at home alongside a team of support workers, the afterhours nursing on-call phone support made the greatest difference. Knowing there was always someone to call, at any hour of the day or night, gave the family a sense of safety and confidence during the hardest stretches.

That sense of security was tested during a long hospital stay — nearly three months at Box Hill Hospital awaiting a bed at Calvary Health Care Bethlehem, Victoria's specialist MND care hospital. Grant remembers it as a profoundly difficult wait. When Jane returned home, EPC's support resumed seamlessly, providing the continuity of care the family valued so deeply.



Alongside EPC's clinical care, Grant and Jane's family — including Jane's father Ray, her children, and a sister who made the regular drive to help most weeks — surrounded Jane with love, practical support and presence.

Jane died on 28 June 2025 with her family around her. Afterwards, they all travelled together to Newcastle 'Jane's happy place' to scatter her ashes — one final family journey, taken in her memory.

Looking back, Grant is candid that many people, including himself before Jane's diagnosis, do not fully understand what palliative care looks like in practice. What he found through EPC was care that helped Jane live well, every day — practical, compassionate support that was there at three in the morning as readily as three in the afternoon. By sharing Jane's story, Grant and Ray hope other families will better understand the support available to them, and the difference palliative care can make when it surrounds a person and their family with dignity, comfort and care.

Working at EPC

Clelia Aragona

Palliative Support Clinician Counsellor

Like many of my colleagues, I came to the Palliative Support Clinician role in a roundabout way — for me, through clinical genetic counselling and aged care case management. In these roles I often met with people who were approaching their end of life, and a chance crossover with an EPC clinician at a shared client's home started me on this path in earnest.

My work in this role is constantly engaging and meaningful. I am surprised every day at our client's willingness to share their deepest reflections, darkest thoughts and most heartfelt hopes and grief in their most vulnerable moments.

I am honoured to walk alongside clients and families as they grapple with physical deterioration and the loss of their old lives, to help them explore our shared human themes of meaning, connection and spirituality, and support them in exploring and prioritising what is most important to them as time grows short. We help put plans in place to cope with the myriad of worries that arise as they become unwell, supporting them to prepare themselves and their loved ones for their decline and death, and the time after.

I feel deeply reassured by working alongside wise Support Clinician colleagues, expert nursing staff who are always compassionate in working to keep distressing symptoms as well-controlled as possible, and team leaders who not only trust my clinical judgement, but who I know I can lean on when I need guidance and support.

When I'm not at work I can almost always be found wandering a bush track, or sitting at the pottery wheel enjoying making a mess of yet another bowl. I need a lot of downtime to reflect and absorb the lessons I learn from clients each day, and of course to keep me grounded for my family.

This work is a daily reminder to assess and reassess how I spend my time, and keep my eye on what's important to me — my relationships, my connection with nature and creativity, and being of service in this very human space which every single one of us will ultimately share.



Volunteering at EPC

Finding Connection

When people ask what I do, I usually hesitate before answering.

Over the past 26 years I've built nine technology companies in healthcare, wellbeing and education, including my most recent, Vyatra, which brings the world into Australian classrooms through live, interactive virtual learning journeys to global places from the school curriculum. However, in all this time I have also been a volunteer with Eastern Palliative Care (since 2007), TiE Melbourne (since 2006), where I mentor entrepreneurs and have been President and Vice President, Melbourne Hindustani Classical Music Society, which I co-founded in 2016 and of which I am the current President, and the Natyadarpan Theatre Academy (since 2012), of which I am the current Treasurer.

On the face of it, those pursuits seem to have little in common. But I have gradually come to realise that it's always been about creating connections between people, organisations and cultures, and sometimes simply helping people reconnect with themselves.

My relationship with EPC actually began before I became a volunteer. As founder and CEO of eClinic, I led the development of healthcare software that was later spun out as PalCare, the electronic client record system used by EPC and now by most community palliative care organisations across Australia and New Zealand. I still remember presenting the system to the EPC Board and negotiating the organisation's first licence agreement.

A short time later in 2007, I returned to EPC in a different role — as a Community Support Volunteer. The Biography volunteering program started in 2015. I believe I have supported more than thirty clients and their families in these 19 years. I have put aside my Wednesdays for the EPC work, and looking back, I realise those Wednesdays have taught me more than any degree, board role or business ever has.

The Biography program has been meaningful. Helping someone preserve the story of their life for the people they love is an extraordinary privilege. Every conversation reminds me that every person carries a remarkable story.


Saurabh Mishra OAM

Working within palliative care has brought another quite useful insight. Much of our professional lives is spent trying to solve problems. Palliative care teaches that not everything can be solved, and sometimes rather than offering solutions to someone's problems, it is just as useful to simply offer our presence.

In 2019 I published 'My Wednesdays: From Death to Life', a reflection on my experiences in palliative care. The title came naturally. Although Wednesdays were spent with people approaching the end of life, they consistently taught me more about living than almost anything else.

I was recently awarded the Medal of the Order of Australia (OAM) for 'Outstanding service to the community through a range of organisations', with my service through EPC forming a key part of the citation. Whilst the recognition was unexpected and greatly appreciated, it has also reminded me just how fortunate I have been to spend nearly two decades alongside extraordinary clients, families, staff and fellow volunteers.

When I look back over my association with EPC, I realise it has come full circle. It began by helping build the technology that supports palliative care.

It has continued through the privilege of walking alongside people at one of the most significant moments in their lives. And throughout it all, it has indelibly shaped the person I have become.

Clinical Services

Nursing, Medical and Allied Health Services

In 2025-26, EPC's clinical services continued to provide specialist palliative care to clients and carers across the community. Our multidisciplinary team includes nursing, medical and allied health staff who work together to provide care 24 hours a day, seven days a week. This care includes face-to-face visits, phone support and telehealth consultations for clients and families who need specialist support. Our clinicians bring strong professional skills and experience, with many holding postgraduate qualifications in their areas of practice.

During the 2025-26 financial year, the clinical services team focused on improving access, strengthening models of care, using data more effectively and embedding Value Based Health Care principles. These principles include prioritising our limited resources to ensure those clients that needed the care most received it and that the client and carer are at the centre of decision making about their care. These priorities supported better outcomes for clients, carers, volunteers and staff.

Early in 2026 we consolidated our clinical teams into our Mitcham office site. This meant our Inner team leaving our Kew office. After what was a disruptive few months whilst office refurbishment occurred, the teams have welcomed the stronger collegiality and collaboration that being all together brings.

Key Projects and Initiatives

Allied Health Models of Care

EPC continued to implement recommendations from the external review of allied health models of care undertaken in 2023. This included using our Allied Health Best Practice Guide and refining service approaches in psycho-social-spiritual care. Our new model has improved early intervention, joint assessments and coordinated care planning. In 2025-26 joint assessments between nursing and palliative support clinicians increased by 74%, and the number of clients receiving a psycho-social-spiritual assessment within seven days of admission increased by 95%.

Safer Care Victoria

A key achievement during the year was EPC's leadership of a statewide collaboration with **Safer Care Victoria** to review and update critical palliative care clinical guidance documents used across the Victorian health system. Through coordinating expert working groups, consumer representatives and sector stakeholders, the organisation played a pivotal role in driving consensus, knowledge sharing and clinical excellence across the palliative care sector.

This initiative reflects EPC's strategic commitment to influencing healthcare beyond organisational boundaries and demonstrates the value of collaborative leadership in addressing complex system-wide challenges. By contributing to the development of contemporary, evidence-informed guidance, the organisation continues to strengthen its position as a recognised industry leader and trusted partner in advancing quality, safety and innovation in palliative care across Victoria.



Photo taken from the Smilemaker Program

General Practice Training in Community Palliative Care

EPC partnered with Dr Dan Jeyaseelan's RACGP-accredited training practice to pilot a practical community palliative care placement for third-year GP registrars.

- The pilot aimed to build registrar confidence in managing palliative clients, including symptom management, end-of-life conversations and working with EPC.
- Registrars completed a blended placement across Dr Jeyaseelan's clinic and EPC, supported by structured tutorials, specialist mentoring from Dr Lin and primary supervision from Dr Jeyaseelan.
- The 12-month pilot involved two GP registrars and three clients. Client recruitment was limited by strict eligibility criteria and geographic boundaries.
- Client outcome data was limited, but the 2 clients who completed surveys reported 100% satisfaction.
- Registrar feedback showed improved confidence, especially in agitation management, communication and readiness to manage palliative clients independently.
- Key lessons included the value of tailored education, specialist mentorship and cross-organisational collaboration.
- Future improvements could include broader client recruitment, more predictable scheduling and additional exposure through shadowing, case reviews or simulation.
- The model shows promise but would need further refinement and resourcing before expansion to other GP clinics.

Registrar Program

EPC continued to support the Palliative Medicine Advanced Trainee Registrar role in partnership with St Vincent's Hospital Melbourne and Eastern Health. In 2025/26, Dr Laura Smith and Dr Clare Browne contributed strongly to our clinical teams and to the care of clients and families.

This program helps EPC provide medical support across both sites, assists clinicians with complex client cases and supports the development of future palliative care medical specialists.

Performance and Data Integrity

EPC continued to improve data integrity and clinical measurement during the year. With support from our Health Informatics Administrator, the team used data to understand trends in client care, identify demand pressures and support better resource planning.

This work will support the ongoing use of client outcome and experience measures, helping EPC understand what matters most to clients and carers and respond to needs in a timely way. In 2025-26, 94-96% of clients reported very high levels of satisfaction across all measures of care such as feeling heard, understood and being seen as a person; that EPC puts their best interests first and understands what is important to them.

Pharmacist Pilot Program

In collaboration with Pharmaceutical Society of Australia EPC launched a pharmacist pilot program in April 2025, led by Pharmacist Robert Wojnar, to improve medication management for palliative care clients. The role supports safer medication use, better symptom management and stronger communication between clinicians and other healthcare providers.



Photo taken from the Smilemaker Program

The pilot concluded in March 2026 and was part of a broader initiative to test community-based palliative care pharmacist roles across Victoria, New South Wales and Queensland. EPC will use the learnings from this work to support future planning and advocacy for pharmacist roles in community palliative care.

External Engagement

EPC maintained strong relationships with key partners across the health, aged care, education and community sectors. These relationships support shared learning, better referral pathways and improved outcomes for people receiving palliative care.

Key partners include Palliative Care Victoria, St Vincent's Hospital Melbourne, Eastern Health, Austin Health, Sprink Global Centre for Person Centred Value Based Health Care (PCVBHC); International Collaboration of Health Outcome Measures (ICHOM), MND Victoria, the Palliative Care Outcomes Collaboration, University of Melbourne, La Trobe University, Victorian community palliative care providers, Safer Care Victoria and the Eastern Melbourne Primary Health Network.

Acknowledgements

EPC's work is made possible by the dedication of our nurses, palliative support clinicians, doctors, nurse practitioners, bereavement staff, volunteers and administrative and corporate services teams. Everyone's professionalism, compassion and commitment continue to make a meaningful difference for clients, carers and families.

Volunteer Services

This year, our EPC volunteers contributed an extraordinary 16,159 hours of service, representing an estimated value of $753,371, based on the ABS rate. While these figures demonstrate the remarkable scale of their contribution, the true value of our volunteers extends far beyond the numbers. It can be seen in every story preserved, moment of companionship shared, family supported and meaningful connection created.

We are incredibly grateful for the warmth, dedication and generosity our volunteers bring to EPC. Their contribution enriches our services, strengthens our community and makes a lasting difference in the lives of those we support.

Whether providing companionship and respite, supporting carers, sharing stories through Biography, or contributing to programs such as Cloud 9, Smilemakers, Palliative Paws and Paws to You, our volunteers enrich the EPC community with warmth, creativity and meaningful connection. Their contribution enhances the care provided to clients, carers and families, while strengthening EPC as an organisation. Whether preserving a person's story, offering comfort during a difficult day, supporting a grieving carer, or sharing their skills and lived experience, each volunteer makes a meaningful difference.

2026 marks the 20th anniversary of our internationally renowned Biography Program. For two decades, the program has supported palliative care clients to preserve their stories, values and memories in their own words, fostering dignity, connection and reflection. For families, each biography becomes a treasured legacy that can offer comfort during bereavement and preserve their loved one's voice for future generations.

We extend our sincere gratitude to all our EPC volunteers for their generosity, compassion and continued commitment. Their impact cannot be measured in hours or dollars alone; it is reflected in the dignity, comfort and connection they bring to people at some of life's most vulnerable moments.

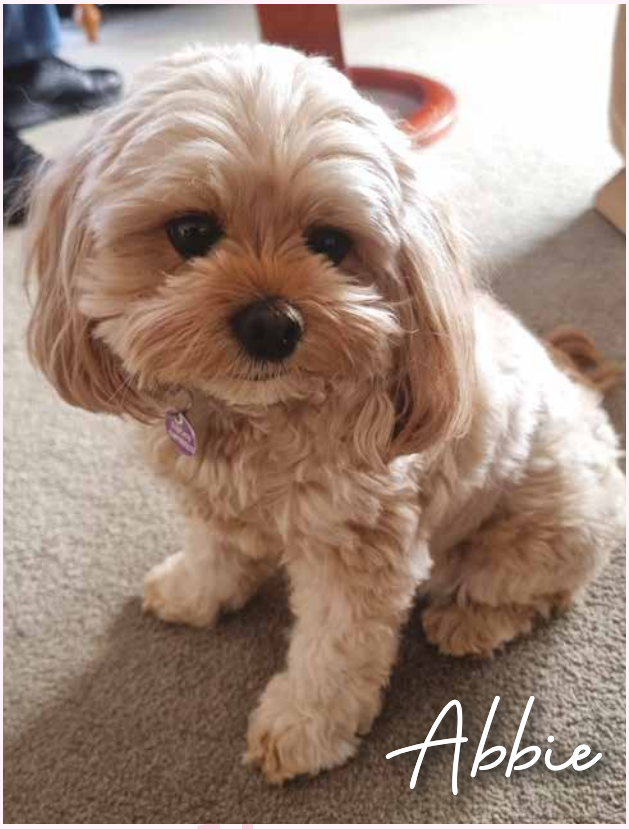


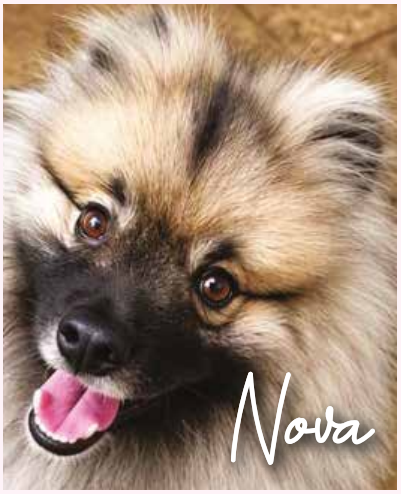


Meet Our Palliative Paws

Animals play a valued role in the lives of many of our clients, providing companionship, comfort and a sense of connection. As clients become less able to exercise their dogs independently, our volunteers are able to assist by taking their pets for regular walks.

We also have dedicated volunteers who visit clients with their own friendly dogs. These visits often bring enjoyment, comfort and therapeutic benefits, enhancing the wellbeing of those we support. Here are some photos of the wonderful dogs that have been part of our program.









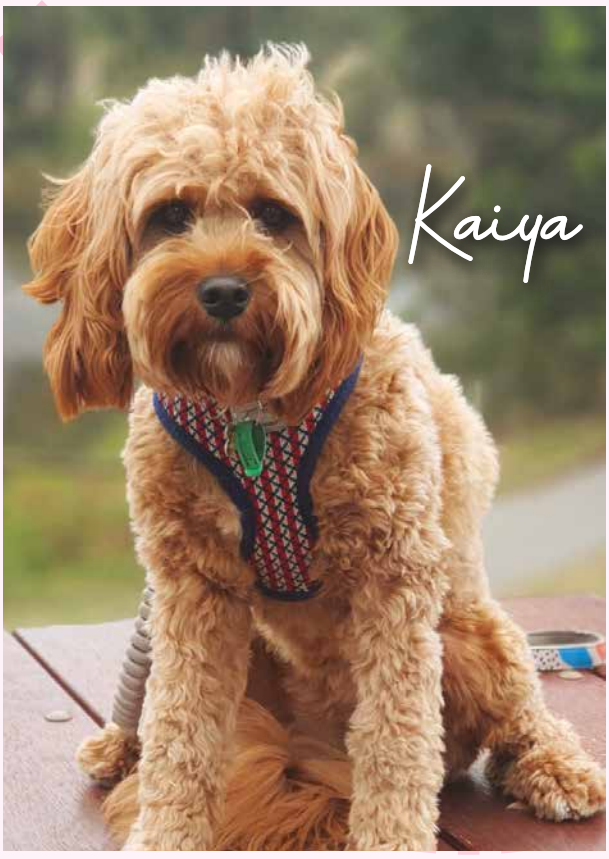



Zoltan


Lulu


Hugo


Aoife


Kaiya


Blitz


Lucy

Philanthropy & Communications

Over the past year, the Philanthropy and Communications team has focused on building the foundations needed for sustainable fundraising growth at EPC.

Our Priorities

Our priorities were to establish the resources, Customer Relationship Management (CRM) capability, systems and processes required to support more targeted fundraising, stronger donor relationships and clearer communication with supporters. We also focused on increasing awareness of EPC in the community and establishing stronger community connections.

What we Achieved

A key achievement was setting up the infrastructure for a more sustainable fundraising program, including improved Salesforce configuration, clearer internal processes, stronger donor data practices, and a dedicated grants process and system to support increased grant funding.

This gave us a clearer understanding of supporter behaviour and enabled better reporting, analysis and more targeted engagement.

Key outcomes included the launch of EPC's first personalised direct mail Tax Appeal raising $132,000, Pound the Pavement raising more than $50,000, and donations increasing by 30% compared with the previous financial year.

In addition to our Board Public Relations & Fundraising Committee, we also established a volunteer fundraising committee to help extend community fundraising capacity, strengthen local connections and support future campaign activity. This work was further supported by securing two community partners to help offset fundraising costs such as donor newsletters and EPC events, while also increasing EPC's reach and awareness in the community.

We thank our board committee for helping to shape our strategic direction, and our volunteer committee for contributing their time and expertise to grow our fund raising and deliver successful events and campaigns.

To our wonderful and generous donors, thank you for sharing your stories, giving generously and supporting EPC. Your contributions help us continue caring for people and families in our community.

Looking Ahead

In the year ahead, we will build on this foundation by focusing on:

- Embedding the new systems, processes and reporting framework.
- Refining donor segmentation and donor journeys for more personalised communications and deeper engagement.
- Improving donor retention and encouraging repeat giving.
- Strengthening the volunteer fundraising committee and community partnerships.
- Embedding philanthropy across the culture of the organisation so fundraising is supported and championed by all teams.
- Increasing grant funding through the new grants process and system.

$132k
TAX APPEAL
We launched our first direct mail Tax Appeal to raise funds for EPC's 24/7 on-call service.

IMPACT VOLUNTEER
We established a volunteer fundraising committee, giving volunteers a way to support fundraising and contribute insight.

COMMUNITY CONNECTION
We delivered 16 community presentations and 17 community speaker bookings.

NEW PARTNERS
Welcomed two new community partners, Bendigo Bank Blackburn South & Financial Lifestyle Partners to cover the cost of fundraising and increase our reach.

30% INCREASE
Donations increased by 30% compared with the previous financial year.

9 MAJOR DONORS | 5 NEW MAJOR DONORS
We strengthened donor relationships, with 9 major donors, 5 new major donors, 66 mid level donors, 35 new mid-level donors.

Innovation – Value Based Health Care

Ai Scribe Pilot: Supporting Living Well Through Innovation

At EPC, our Living Well philosophy is about supporting people to live as fully as possible, maintain independence and feel informed, supported and connected throughout their care journey.

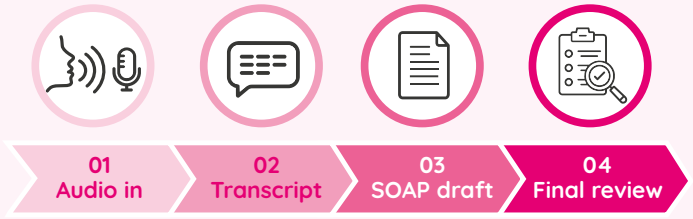
During 2025-26, EPC progressed the Heidi Ai Scribe Pilot as part of its commitment to innovation, continuous improvement and high-quality person-centred care. The pilot forms part of EPC's broader digital transformation program and explores how technology can reduce administrative burden, giving clinicians more time for the conversations, planning, education and emotional support that help clients and carers live well.

The pilot aims to support more meaningful interactions between clinicians, clients and carers by reducing the time clinicians spend on clinical documentation. It is evaluating whether AI-assisted documentation can improve client and carer experience, clinician experience, documentation quality, workflow efficiency and service delivery outcomes, while strengthening the time and focus available for care that supports Living Well.

Following a comprehensive procurement and evaluation process, Heidi Health was selected as EPC's preferred Ai Scribe solution. Vendors were assessed against clinical functionality, implementation requirements, privacy, cybersecurity, governance and risk management, including use in community settings where internet connectivity may be limited.

Client privacy, confidentiality and compliance with healthcare privacy obligations were central to the process, with Heidi demonstrating internationally recognised security certifications and meeting EPC's clinical, operational, privacy and governance requirements before approval for pilot use.

Clinical conversations are securely transcribed to assist with draft clinical documentation.



Audio recordings are automatically deleted after transcription, and clinicians remain responsible for reviewing and approving all documentation before it becomes part of EPC's clinical record. The technology supports documentation only; it does not make clinical decisions or determine care. Data retention and information management arrangements have been established within EPC's privacy, cybersecurity and governance framework and comply with organisational and legal requirements.

A key part of the project has been developing EPC-specific templates and workflows for community palliative care. Clinicians from nursing, psychosocial support and bereavement services have worked together to design templates that reflect EPC's clinical standards, accreditation requirements and person-centred model of care. These templates support consistent documentation while capturing important discussions about symptoms, care goals, family support needs, advance care planning and psychosocial wellbeing, the conversations that sit at the heart of helping people live well.

The pilot is supported by Board oversight, clinical governance, workforce education, privacy safeguards and cybersecurity controls. Informed client consent is required before Ai Scribe is used during consultations, and clients may choose whether to participate, with care continuing as usual regardless of their decision.

The Board-approved pilot involves approximately 20 clinicians and represents an important step in EPC's digital transformation journey. It will be comprehensively evaluated before any decision is made about broader implementation, ensuring any future rollout is guided by evidence, quality outcomes and the experiences of clients, carers and clinicians.

Financial Overview



For Eastern Palliative Care Ltd's full audited financial report, please visit: https://www.epcvic.org.au/brochures-publications

In 2025-26, EPC reported an operating surplus of $645k. After adjusting for revaluations, the organisation recorded a net surplus of $817k. This positive result was supported by:

- One off non-recurrent funding of $500k received in April 2026 recognition of the project work and services delivered in 2023-24. This funding related to EPC's completion of projects designed to improve aged care residents' palliative and end of life outcomes and their transition to practice in 2024-25.
- One off non recurrent DH funding of $230k received in May 2026 for the ongoing delivery of community palliative care services.
- Improved operational performance and financial discipline across the organisation.
- Investment in fundraising and philanthropic initiatives generated approximately $150k in revenue above budget.
- Careful management of expenditure despite ongoing inflationary pressures.
- Continued focus on workforce planning, clinical effectiveness, and sustainable service delivery in line with Department of Health contract deliverables.

Despite ongoing challenges across the health and community care sectors, EPC maintains a strong financial position. The Board continues to closely monitor financial performance and reserve levels to ensure the organisation remains sustainable and well positioned to meet growing community demand. This disciplined approach allows EPC to continue investing in high-quality care, workforce capability, digital transformation and service innovation.

While financial pressures across the health and community care sectors remain, EPC's strong financial position provides confidence in its ability to invest in strategic priorities and maintain high-quality palliative care services for the community.

Our Members

Established in 1998 in response to a Department of Health tender process, EPC was formed by St. Vincent's Hospital (Melbourne) Ltd, Order of Malta Hospice Home Care (Vic) Ltd and Melbourne Eastern Palliative Care Association. Outer East Palliative Care Service Inc joined once the Association was formed and in 2010 Melbourne Eastern Palliative Care Association Inc ceased to exist. On December 16, 2024, Eastern Palliative Care Association Incorporated became Eastern Palliative Care Ltd.

Outer East Palliative Care Service Inc

Outer East Palliative Care Service Inc (OEPCS 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. OEPCS Inc ceased delivery of services on EPC's establishment. OEPCS Inc developed strong community links to service clubs, local government, General Practitioners, local hospitals, nursing homes, hostels and supported accommodation services.

This strong link to the community remains today and as one of the three members, OEPCS Inc provides Eastern Palliative Care with general community input, volunteers on the Board, its Committees 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)

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 Hospital Melbourne Ltd provides volunteers to EPC through the Board, its Committees and through volunteer programs and fundraising.

The Order of Malta Hospice Home Care Services Inc

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 came to Australia in the early 1970s where its focus became the care of the terminally ill, the frail elderly and their families.

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 provides volunteers to EPC through the Board, its Committees and through volunteer programs and fundraising.

Staff & Volunteer Service Awards

EPC Staff



Anita Nathan
25 years



Nicky Ronayne
15 years



Megan Holmes
10 years



Jenika Graze
10 years



Emily Resciniti
10 years



Zion Lo
10 years



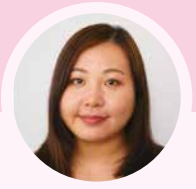
Amanda Barclay
10 years



Gail Bucknall
5 years



Heather Parslow
5 years



Iris Li
5 years



Lordy Chen
5 years



Renee Campbell
5 years



Ursula Wong
5 years



Yuneisi Slapp
5 years



Zoe Peltekis
5 years

Volunteers



Sarah Goldblatt
15 years



Steve Gurr
10 years



Debra Lobb
10 years



Sue Seeger
10 years



Rosemary Dusting
10 years



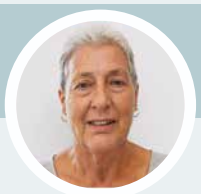
Gerard O'Donnell
10 years



Jan Ross Smith
10 years



Heather Widijaja
10 years



Jeanette Ciccarelli
5 years

Thank You for Your Support

Thank you to the following individuals who gave $200 or more this year. Your generosity is more than a gift; it is an expression of care, compassion and belief that people with a life-limiting illness deserve to live well, with dignity, comfort and connection. We are proud to acknowledge your support in this Annual Report and deeply grateful for the difference you have made.

Government
- State Government of Victoria

Philanthropic Partners & Foundations
- Bendigo Bank Blackburn South
- Freemasons Foundation
- Alyssa & Jon Coe
- Jenny Long
- Craig & Lisa Ralph
- Margaret & Anthony Reeves

Bequests
- Estate of Lynette Margaret Read
- Estate of Rhoda Lenard

Community Support
- Blackburn United Lodge
- Brotherhood of St Laurence
- Knox United Soccer Club
- Lions Club Vermont
- Maroondah Rotary

Community Partners
- Bendigo Bank Blackburn South
- Financial Lifestyle Partners

Corporate Support
- Big Swing Golf
- Harrow and Harvest Café
- Lilydale Athenaeum Theatre
- Lilydale Police Social Club
- Puffing Billy
- SAGE Hotel Ringwood
- St John Ambulance
- The Coffee Nook
- The Lilydale International
- The Manhattan Hotel Ringwood
- Templestowe Secondary College
- Waverley Patchworkers
- Yarra View Garden Centre
- Yarra Valley Grand Hotel

Donors ($200+)

Anna Akkari
Chris Alenson
Ian Alexander
Joan Amos
Monika Andrews
Lilian Antonelli
Brett Arandall
Roy Badrock
Heather Baker
Ingrid Baring
Deirdre Barnard
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Debbie Bartlett
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Peter Button
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Philip Hill
Andrew Hirst
Ruth Hopkins
Wilhelmina Hore
Li Zhen Huang
Annette Hubbard
Susan Hughes
Jill Jackson
Rita Jagusch

continued...

Donors ($200+) continued...

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Jenny Jellett
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Mark Johnson
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Kenneth, Bernadette Gerald & Families Kennedy
Robin Kentley
John Konstantopoulos
Kopecek Family
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Stephanie Lau
Ashley Leach
John Leach
Lai Ching Lee
Mary Lee
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Wanyi Likuang
Sunita Lobo
Graeme Lorimer
Andrew Lowe
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Rachel Mackenzie
Suzanne Mair
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Trish McGee
Francis McInerney
Dawn McMillan
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Jean Meaklim
Priscilla Mellado
Stephen Mizzi
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Michael Mosley
Scott Murcutt
Claire Murnane
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Hendricus Nieuwenhuizen
Richard Nixon
Louise Noorbergen
Mercia Nunan
Gail O'Flynn
Judith Paphazy
Tamara Paravicini
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Bruce Paterson
David Peters
Christina Pino
Kelly Pollock
Barbara Ralph
Craig & Lisa Ralph
Alecia Rathbone
Damian Rea
Joanne Rea
Lyn Read
Anthony & Margaret Reeves
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Louise Reynolds
Stephen Roberts
David Rogers
Keith Rushton
Geoffrey Saliba
Wing Sang
Laurie Scholes-Robertson
Kate Scott
Laurel Shallue
Gary Short
Adrian, Becky Shottenkirk
Grant Shottenkirk
Judith Simonds
Elizabeth Sinclair
Simon Singer
Mark Sketcher
Lisa Skogvold
Rae Smith
Denis Street
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Warren Tassell
George Thomas
Sandy Thomas
Maree Thorp
Peter Tierney
Albert Toet
Pascale Turvey
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Poppy Tzikas
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epc

Palliative care. Living well every day.

Eastern Palliative Care Ltd

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Photo taken from the Smilemaker Program

VICTORIA State Government

Eastern Palliative Care Ltd acknowledges the support of the Victorian Government.