



# *Peninsula Home Hospice*

Annual Report  
2021-2022

There are many different types of connections and each one plays a pivotal role in the way our organisation functions. These connections are with our Board of Directors, staff, volunteers, clients, fundraising ambassadors, other health care providers, and the people in our community. In the last financial year, we have not only focused on strengthening our existing connections but have been focusing on developing some new ones.



Peninsula Home Hospice (PHH) provides home based specialist palliative care that optimises quality of life and honours the hope for comfort, choice, dignity and peace.

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*We acknowledge the culture, dreams and aspirations of the Aboriginal and Torres Strait Islander people as the custodians of the lands upon which we live and work and we pay our respects to Elders, past, present and emerging.*

## Report from The Chair



Mark Smith

Now in our third year dealing with COVID-19, Peninsula Home Hospice (PHH) continues to operate in a very different and challenging environment. Myself and my fellow PHH Board Directors continue to be in awe of the resilience and commitment of our staff and the Peninsula community.

We hear a lot about the strain on our health services on a daily basis, and, not surprisingly, during the pandemic the media focus is on the acute hospital system, but of course there are also significant impacts for non-hospital settings, such as ours, as

inpatient access is harder to achieve and families are keen to bring their loved ones home for care. Of course COVID-19, and now the flu, have also impacted on the availability of staff on a daily basis to continue provision of our critical service.

Our Client Care Volunteer service has also continued to be affected through the continued lockdowns and restrictions, but we are pleased to see that we are now able to start including more of these important services once again. Changes to the PHH Volunteer Program will look at enhancing the experience that our volunteers have, and the services they can provide, through closer connections with our trained health professional teams.

Another important part of our service that has been diminished, and very sadly missed, is the important efforts of our various fundraisers. Many of their vital activities have continued to be on hold due to the pandemic, but like the Volunteer Program they are now once again working with renewed energy to support the organisation.

As is always the case, we greatly appreciate the generous support of the Victorian Government's Department of Health through their core funding, but also additional support to deal with the added pressures associated with the ongoing impact of the challenges of the response to COVID-19. I am pleased to report again this year that PHH remains in a strong financial position and I am confident the organisation has a culture that equips it well with the resilience and adaptability to ensure its sustainability. We are also now fortunate to own our wonderful office in Mornington outright and need now only focus on the ongoing upkeep and maintenance of this wonderful facility.

It is once again my pleasure to express gratitude to PHH's high quality and professional staff, ably led by Janet Phillips as CEO, and her executive team, our committed clinicians and administration team, our dedicated volunteers, and our many fundraisers, supporters and donors.

And, as always, I pay thanks to my fellow PHH Board Directors who continue to give their time, effort and expertise freely. Sadly Dan Romanis stepped down from the board at the beginning of the financial year after many years of outstanding service, but we were pleased to welcome Heather Johnson who brings great experience and expertise to the board. Speaking of contribution, it was wonderful to see the renaming of one of PHH's main fundraising events in honour of the significant long-term contribution as Treasurer of Tom Pickford, particularly with it being a golf event!

And lastly, many thanks to you – our members, supporters and friends. Without your support PHH would not be able to provide the vital high quality service that supports the Peninsula community to 'live well, and die well'.

*"I am writing to express my heartfelt thanks for the help and compassion you gave me while caring for my partner during the year. Your nurses and counsellors are special people. I wouldn't have been able to give her the opportunity to live her last days at home without you."*

## CEO's Message



Janet Phillips

Over the past year, Peninsula Home Hospice has continued to provide high-quality care to our community whilst continuing to work through the challenges of COVID-19 and it is our strong connections with our community that have kept the service functioning at a high standard.

We have seen many successes, most notable, is the national Palliative Care Outcome Collaborative (PCOC) national benchmark results, which were outstanding. PHH achieved eight national benchmarks which puts our service as national leaders.

I wish to thank all the PHH staff in supporting each other and achieving these exceptional results. I have a huge level of pride being at the helm of a team with such high expertise, dedication, and passion.

Our new Strategic Plan will see us forming new partnerships and strengthening old ones to further improve client outcomes. Our vision of working together to live well and die well will be key in ensuring the community understands what community palliative care is about. Conversations with the community will be a key part of our connections. PHH's role will be to partner with our community to ensure excellence in palliative care from diagnosis to bereavement.

Connection with others is vital in providing quality care and this has been highlighted even more so during the pandemic, particularly with staff shortages across the health sector. We have successfully created strong working partnerships with our local hospitals and community services, establishing connections that will continue to benefit our service well into the future.

We commenced the Palliative Care Registrar Placement project this year, which has been a triumph in providing a substantial increase in palliative care provision and education.

We continue to work closely with our local general practitioners through the Palliative Care Special Interest Group and have rolled out an education calendar for the year. I am pleased to see membership of the group grow since its inception and this has been a safe space for GPs to debrief and learn from each other.

The Volunteer Program is going through a process of change which will lead to a stronger connection to our clinical team and improve client outcomes. I would like to thank our volunteers for their generous support of our clients and staff, particularly through this process in addition to the ongoing pandemic.

Fundraising has been another success story with many events raising much needed funds for PHH. This has allowed us to establish a welfare fund to provide financial support to clients impacted by life-limiting illness.

I would like to acknowledge the Victorian Government Department of Health for additional financial COVID-19 support to ensure our service continues to provide the necessary service to our community that is of the highest quality.

An important part of PHH is our volunteer Board of Directors who I cannot thank enough for their continued support, commitment, and leadership. The PHH Board of Directors demonstrated this commitment by contributing substantially to our new 5-year Strategic Plan. This process allowed for an even stronger connection between the Board Directors and the PHH staff which will ensure we are all committed to the strategic plan.

*"The most important things in life are the connections you make with others"*

*Tom Ford*



## Introduction to Peninsula Home Hospice

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### What We Do

Peninsula Home Hospice provides home-based palliative care that optimises quality of life for those in our care and honours their hope for choice, dignity, comfort and peace.

The organisation is governed by a volunteer Board of Directors who are committed to the core values that underpin the culture of Peninsula Home Hospice.

### Geography

The service is provided to people living in the City of Frankston, up as far as Mordialloc Creek in the City of Kingston and down to the southern tip of the Mornington Peninsula at Portsea.

It is a community of almost half a million people.

### Our Community

We are privileged to have a loyal, committed and generous community that are our advocates, fundraisers and support network.

# Board of Directors



**Mark Smith - Chair**  
 Director since October 2012, Board Chair since November 2018  
 Qualifications: MBA, Grad Dip Nursing Admin, BN, FACN, MAICD. Experienced healthcare executive with a particular interest in

community and primary health care.

**Special Responsibilities:** Board Chair; Governance and Risk Committee; Audit and Finance Committee (ex officio)



**Kath Ferry – Vice Chair**  
 Director since October 2016, Vice Chair since November 2018  
 Kath has extensive management experience and knowledge of the not for profit and government sectors, and currently works in the disability

field. She is a member of the Australian Institute of Company Directors and is current Chair of the Frankston Headspace Audit & Risk Committee.

**Special Responsibilities:** Vice Chair, Audit and Finance Committee



**Helen Fairlie – President**  
 Director since November 2008, Chair November 2011 to November 2018, President since November 2018  
 Committee member and Chair of Sorrento Pre School 1986 – 1990  
 School Council for Sorrento Primary

School, Committee member and Chair 1990 – 1998, Women of Action Fundraising for PHH since 1997, Sorrento Portsea Chamber of Commerce Committee since 2000, Arts Nepean Sub Committee Chair 2009 - 2011

**Special Responsibilities:** Board President; Audit and Finance Committee; Fundraising Committee



**Richard Lindner - Treasurer**  
 Director since October 2016, Treasurer since November 2019

Richard was a Chartered Accountant in public practice for over 30 years. His clients included organisations in community services, health, emergency services and local amenities sectors. His particular professional interest in these sectors has been governance and the financial sustainability of their operations.

**Special Responsibilities:** Treasurer; Chair of the Audit and Finance Committee



**Heather Johnson**  
 Director since November 2021,

Heather has broad governance experience as an executive and non-executive board member, having held board positions in several health and community service organisations. She is committed to assisting people understand our complex health system to improve their access to good services and to empowering them with the knowledge and skills to make the most of their personal health.

**Special Responsibilities:** Governance and Risk Committee



**Celestine Moon**  
 Director since October 2010

Celestine has had 30 years experience in the hotel industry, then 15 years employment as a Solicitor both in a private practice and in the public sector. She is now retired.

**Special Responsibilities:** Chair of the Governance and Risk Committee



**Vicki Sayers**  
 Director since October 2017

Vicki was born and bred on the Mornington Peninsula and has previously worked as a Palliative Care Nurse and is now a Licensed Real Estate Agent. Community and connection are important to her.

**Special Responsibilities:** Fundraising Committee



**Tony Vaughan**  
 Director since October 2013

Experience at senior executive level in both public and private sector. Specialist in marketing business development and strategic planning, property and asset management.

**Special Responsibilities:** Building and Maintenance Committee

## Board Meetings 2021/2022

Director	Attended
Helen Fairlie	● ● ● ● ● ● ● ●
Kath Ferry	● ● ● ● ● ● ● ●
Heather Johnson	● ● ● ● ● ● ● ●
Richard Lindner	● ● ● ● ● ● ● ●
Celestine Moon	● ● ● ● ● ● ● ●
Vicki Sayers	● ● ● ● ● ● ● ●
Mark Smlth	● ● ● ● ● ● ● ●
Tony Vaughan	● ● ● ● ● ● ● ●

*“Communication and the human connection is the key to personal and career success”  
 Paul J Meyer*



## Our People

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### Management Team

Janet Phillips - Chief Executive Officer

Donna Nolan - Business Services Manager

Inge McGinn - Clinical Services Manager

### Administration

Kerri-Ann Blackwell - Executive Admin Officer

Annabel Brown - Quality & Risk Officer

Fiona Clark - Payroll & Accounts Officer

Kathryn Lawlor - Senior Clinical Admin Officer

Cara Russ - Clinical Admin Officer

Margaret Spalding - Casual Clinical Admin Officer

Jenny Stampe-Knox - Marketing & Publicity Officer

Fiona Shirrefs - Business Support Officer

Joanne Welsh - Clinical Admin Officer

### Length of service

Kerri-Ann Blackwell	5 years
Monique De Roche	5 years
Anne Jeremiah	10 years

### Counselling & Allied Health

Angelo Campagna - Counsellor/Caseworker

Catherine Davies - Client Resource Advocate

Wendy Fox - Volunteer Program Leader

Kirsten Hampson - Counsellor/Caseworker

Anne Jeremiah - Counsellor/Caseworker

Angela Karanikolos - Counsellor/Caseworker

Jean Lin - Music Therapist

Yvonne Maclean - Art Therapist

Andrea Murphy - Clinical Leader Allied Health

Anna Slattery - Counsellor/Caseworker

### Medical

Dr Akshay Kulkarni - Palliative Care Physician

Dr Elizabeth Gascoigne - Palliative Care Registrar

### Nursing

Joanna Berenyi - Specialist Palliative Care Nurse  
(Casual Bank Nurse)

Gaylene Cowan - Specialist Palliative Care Nurse

Monique DeRoche - Specialist Palliative Care Nurse

Teresa Gillespie - Specialist Palliative Care Nurse

Nicole Grant - Specialist Palliative Care Nurse

Emily Hewitt - Specialist Palliative Care Nurse

Elizabeth Holland - Specialist Palliative Care Nurse

Eric Hutchison - Specialist Palliative Care Nurse

Jo-Anne Kelly - Specialist Palliative Care Nurse  
(Casual Bank Nurse)

Krystie Macdonald - Specialist Palliative Care Nurse

Patricia Maddock - Specialist Palliative Care Nurse

Ravai Makwara - Specialist Palliative Care Nurse

Clare O'Toole - Specialist Palliative Care Nurse

Navjot Thind - Specialist Palliative Care Nurse

Shannon Thomas - Specialist Palliative Care Nurse

Claire Thoppil - Specialist Palliative Care Nurse

*"Today we had the sheer joy of being blessed with your nurses joining our world."*

# Clinical Report



Inge McGinn

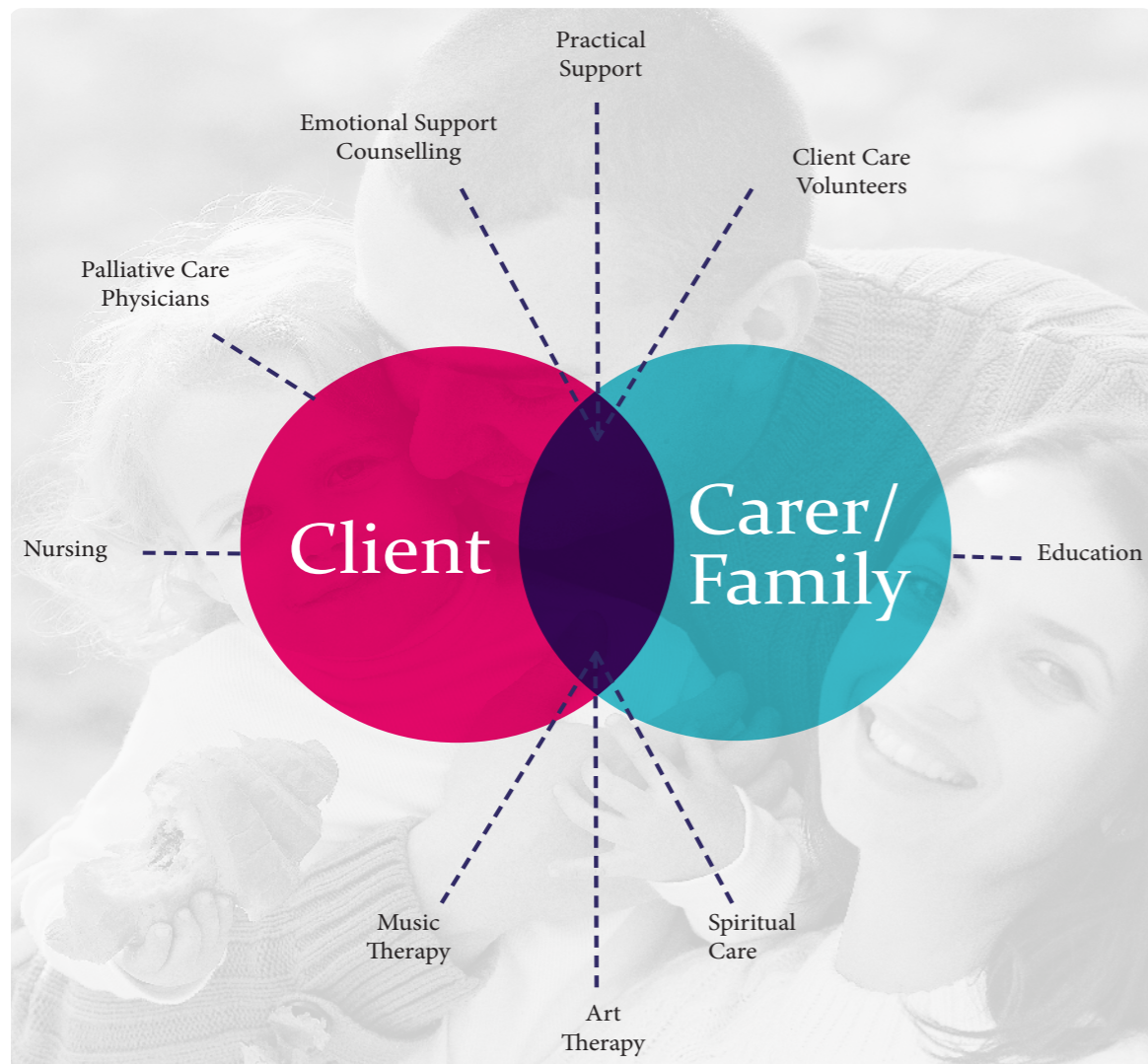
We are all aware of how important connections are in our personal and professional lives. Connections are living relationships, more than our structure, more than our organisational chart, more than our business plan and more than the number of professionals involved in a client's care.

The advantages of nurturing connections, which is about sharing not just taking, means that we can ultimately strengthen ourselves to support our clients and community to live and die well. It raises our profile, it helps us gain more knowledge, it gives us better ideas, it builds confidence, and it gives us the means to give to all those we connect with.

We have a model of care which guides how care is provided individually to each client and their family. This is also dependent on connections within the organisation and between member of the clinical team.

Some clients use all aspects of the team while most clients use different aspects of the team at different times as needs change. A multi-disciplinary approach has different disciplines working in their areas of professional expertise with families/carers.

CLIENTS' AGE RANGED FROM  
4 - 99 YEARS OLD



The interdisciplinary approach which underpins the ethos of PHH aims to ensure that we make use of all branches of knowledge (including the clients and their carers/family) to reach the best solutions to often complex situations. We need to be linked together to ensure that:

- Clients don't need to tell their story repeatedly as we share the information between us
- That we have clear care plans informed by clients so that we are all pulling in the same direction
- That when things change for a client, we can all move together to support them in this change or add to the care provided
- We are coordinated and we are able to reflect together (including with the client and family/carers) so that the care we provide is effective.

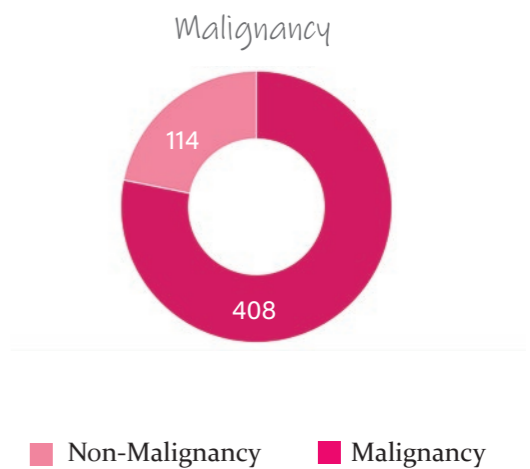
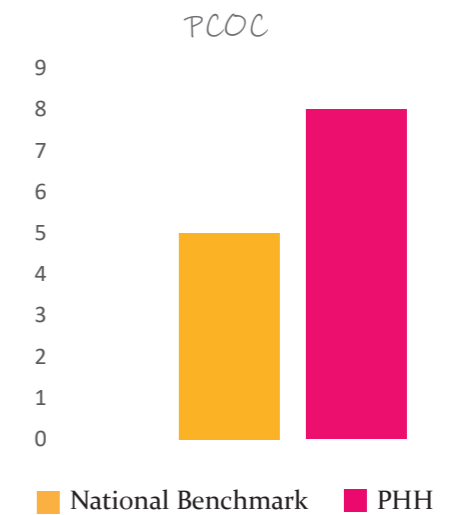
Our connections in the clinical team are crucial for one integrated plan developed with a client rather than individual plans that may serve the professional but not serve the client.

There are many mechanisms that we use to support those connections, such as our morning hand-over and interdisciplinary team meetings, our shared notes and care plans system and a common language.

The "common language" that connects us, that is being used between professionals and between professional and clients is PCOC. The Palliative Care Outcomes Collaborative (PCOC) helps us connect with each other when we care for a client and connect with the client and family when discussing plans and needs. PCOC also connects us with a way to measure our effectiveness.

PCOC is made up of assessment tools that guide discussions with clients and ensures that we align our care with their need. PCOC also tells us if we are effective and how we measure with similar services, thus connecting us with clients, together as clinicians and with state and national benchmarks

Clinical graph data is over a six month period

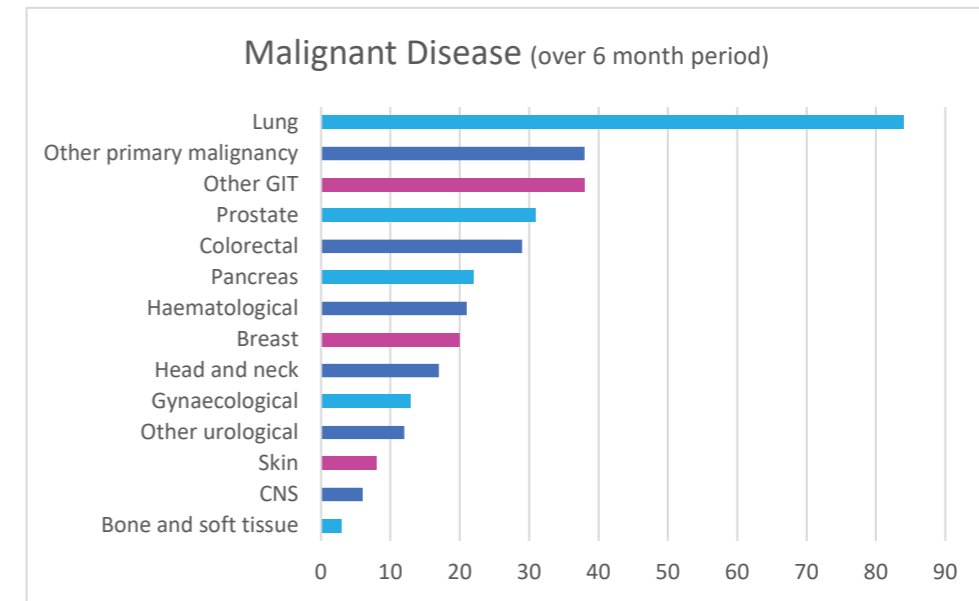
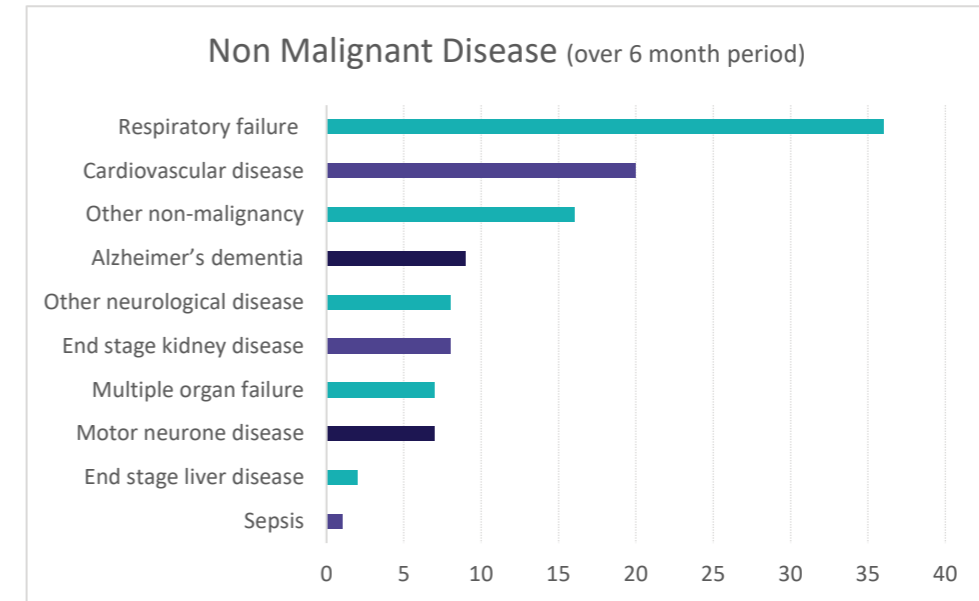




PCOC has a range of benchmarks that support the organisation to measure where we need to improve and how we compare with like services. During our review with our PCOC improvement facilitator it was noted that the average number of benchmarks met by a like service in Victoria is five. We have recently met eight benchmarks (up from the previous report) and three of those we have never met before.

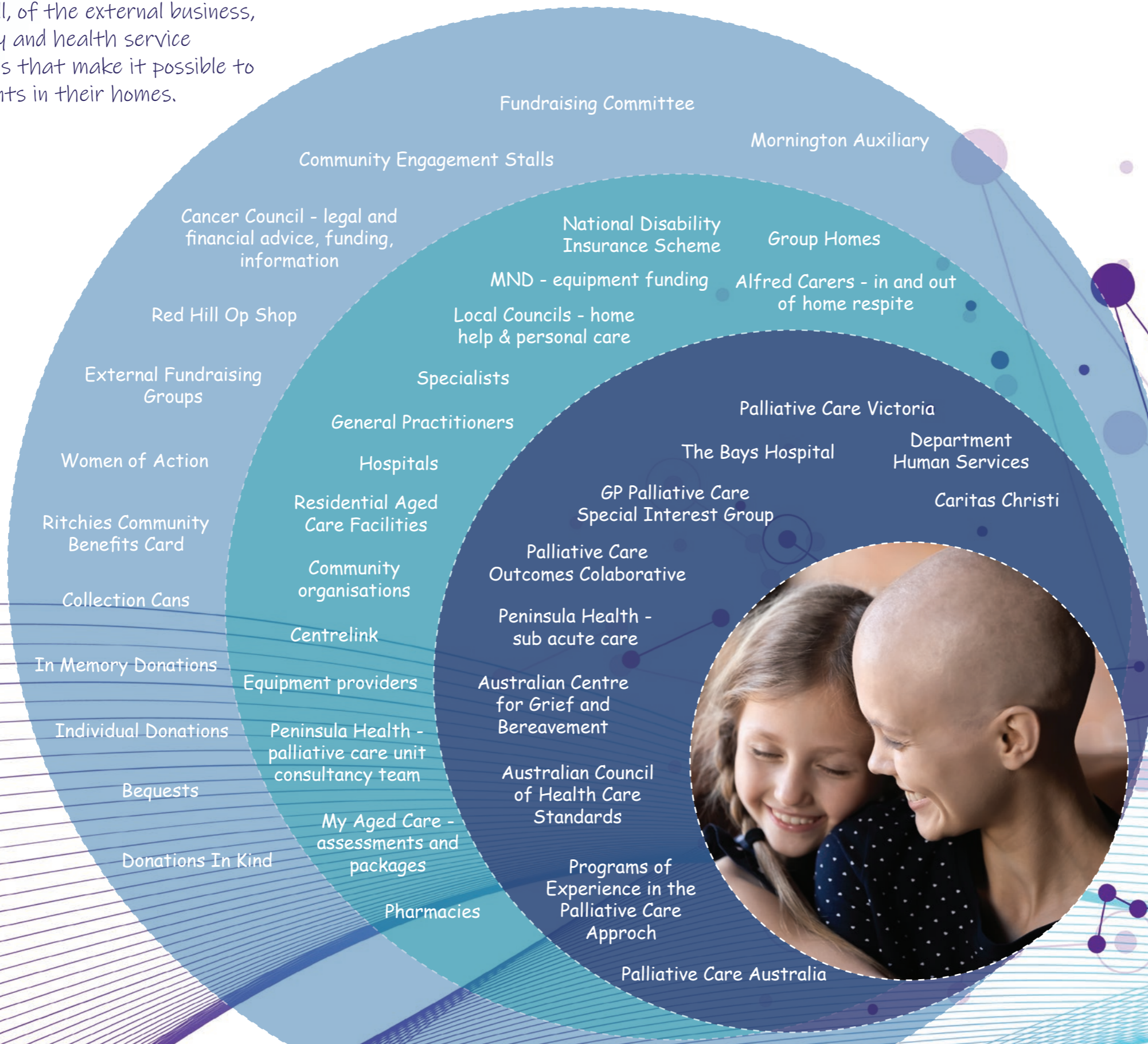
I cannot end this report without mentioning the challenges and barriers that clients, clinicians and volunteers have faced during COVID-19 in developing the connections that are needed for excellent care. Clients being referred later in their illness, clients fearful of letting people in their homes (volunteers, clinicians and informal supports), the risks of face-to-face meetings and having these limited at times. Connections are built on mutuality, interdependence, shared understanding, and shared goals. They also need to be underpinned by our ongoing commitment towards each other to the values that define PHH.

*“Without the practical help and compassion from PHH staff I really don’t know how I could have given my partner the care she deserved in her dying days. Thanks so much for Peninsula Home Hospice. If the world was made up of people like you it would be a much better place.”*



The following diagram captures some, but not all, of the external business, community and health service connections that make it possible to serve clients in their homes.

- Community engagement
- External collaboration
- Direct collaboration in client care



## GP Special Interest Group



We introduced the General Practitioner Special Interest Group (GP SIG) Project in last year's annual report, and we are pleased to report that it has been hugely successful.

The GP SIG is intended to provide an opportunity for GPs to connect with other health professionals in the area of palliative care and build their clinical skills and knowledge to improve professional performance.

The project initiative is focussed on supporting GPs in the City of Frankston and Mornington Peninsula Shire who have identified a special interest in palliative care to create a cohesive working relationship with specialist services to deliver better palliative care outcomes for people living and dying in their preferred place of choice.

### Aims

- Develop a GP palliative care model that is supported by a Specialist Community Palliative Care Service (Peninsula Home Hospice) to facilitate information exchange and support
- Provide advice on matters related to palliative care, including relevant clinical protocols
- Facilitate training and access to educational resources and practice guidelines
- Support health care professionals working in their area of interest (palliative care)
- Advocate for palliative care and develop a model of care where the interface with General Practice and Specialist Community Palliative Care optimises patient's/client's clinical outcomes
- Promote awareness of current issues relating to palliative care
- Collaborate with other stakeholders to advance the aims of a GP SIG.

Dr Akshay Kulkarni is the Palliative Care Medical Consultant at PHH.

Akshay has successfully led this project with many of the anticipated outcomes already being met. A committee has been well established as the core group to keep the momentum going.

GP SIG meetings have proven to be a wonderful way for our local GPs to connect with PHH.

The GP SIG is a wonderful and exciting initiative between primary health care and specialist palliative care designed for the benefit of the community. The opportunity to interact with enthusiastic and active community clinicians, discuss common goals and challenges and share experiences with each other is truly enriching and humbling. We aim to continue to provide education opportunities and collaboration to build the profile of palliative care in the Mornington Peninsula region and hope to bridge the gap between specialist palliative care services and general practitioners, to provide seamless care for people in their own homes



GP SIG information evening

## Senior Registrar Placement



PHH were very excited to announce a new project which commenced in February 2022. The project was to have a Senior Palliative Registrar 12-month placement as additional medical support and a training opportunity for the registrars who are passionate about community palliative care.

The medical support at PHH has seen the employment of a Palliative Care Consultant working 16 hours per week for the past three years. One day was allocated for the Medical Consultant to attend the multidisciplinary team meeting in addition to home visits as needed and the remaining eight hours were allocated for phone advice/support to the clinical team, which is spread across the week including weekends.

In 2021, the Board approved a 12-month Pilot Project to have a Senior Registrar placement for 2.5 days per week in addition to the 16 hours provided by our Medical Consultant.

### Aims:

- Improved client and carer satisfaction
- Improved client clinical outcomes
- Continuity and consistency of care
- Improved support for GPs who are the primary medical service provider for each client
- Improved reputation with key stakeholders
- Increase in client/carers preference for place of care and place of death being met
- Improvement in response time for urgent admissions.

Introducing Dr Lizzy Gascoigne who commenced in the role in February 2022.

Lizzy has been an outstanding asset to PHH and came at a crucial time when the service was being significantly impacted by the pandemic with increases in home deaths, late referrals and staff shortages. It did not take long for Lizzy to form a strong connection with the PHH team

*"I seriously love coming to work. Joining PHH has been everything I hoped it would be."*

Dr Lizzy Gascoigne

### Positive Outcomes so far:

- Home visits to clients by a PHH doctor have increased by 50%
- We have already seen an increase in PHH's profile with an increase in GPs joining the Specialist Interest Group, who have been recruited by the Registrar
- Increase in PHH profile and promoted as employer of choice by the Registrar who is well connected to the community including public and private hospitals. Two nurses recruited through Dr Gascoigne's connections
- Improved communication with other palliative care services including Peninsula Health, Melbourne tertiary hospitals and several aged care facilities
- 100% KPIs have been met to date
- Positive feedback from the clinical team. Staff morale has lifted substantially since the commencement of Dr Lizzy Gascoigne's 12-month placement.

*I would like to express the very high praise I have for Dr. Lizzie and the service in general. Lizzie is a "living angel"*

## Client Care Volunteers



Wendy Fox

Our client care volunteers volunteer in palliative care because of the compassion, care and connection they feel towards others. Even in these challenging times, our volunteers maintained their connection with clients, with each other, and with the community. As a new member of the PPH team, commencing in the role of Volunteer Program Leader, in establishing connections with volunteers, it became evident that this team are committed to providing support, not only to their clients, but also to each other.

### We maintained our connections with clients and the community during Covid-19 restrictions by:

- Offering phone support to our clients when a home visit option was not available. This was especially valuable to those clients who were living alone. Our clients welcomed having a friendly voice on the end of the phone to chat and see how they were going
- Recommencing face-to-face visits. We gradually commenced face-to-face volunteer visits, starting with essential visits only. Essential visits included anyone living alone, and those who were experiencing carer stress. Eventually we were able to recommence visits more broadly, while still maintaining the safety of our clients and volunteers. Volunteers were thrilled to be able to reconnect with their community, and offer their support and care to clients and their families
- Engaging with the community at our annual Christmas community engagement stall at the Mornington Main Street Market. It is a fantastic opportunity to raise the profile of Peninsula Home Hospice. With the support of volunteers, we spoke to around 50 people, making them aware of the services that PHH offer and educating them about palliative care

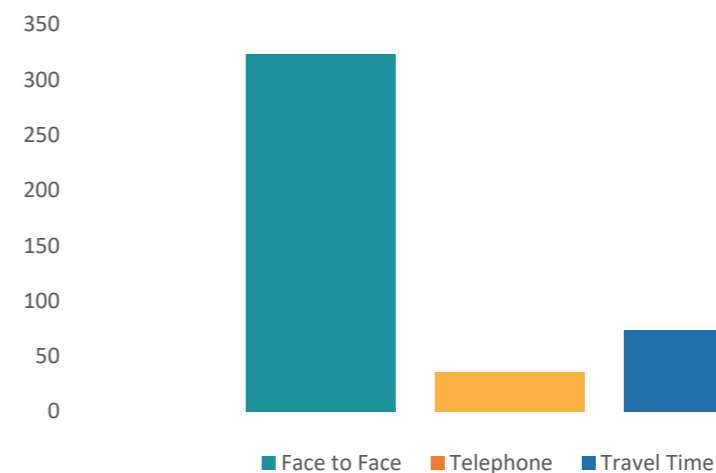
### Volunteers maintained connection and supported PHH by:

- Participating in the peer support groups that are offered regularly. The online option was no-ones preferred choice, but it did provide an opportunity to connect and provide regular updates on what was happening with Peninsula Home Hospice, and was a forum where volunteers were able to offer each other support
- We recommenced face-to-face peer support groups as soon as we were safely able to. They were more like a reunion, with volunteers so pleased that they could finally meet
- Offering training to our volunteers. Training sessions offered were face-to-face and online accommodating the differing needs and circumstances of our volunteers. Our volunteers trained in hand hygiene, bush fire safety and how to assist the staff to safely doff (remove) their Personal protective equipment (PPE)
- Providing practical support to nurses, counsellor caseworkers and therapists in doffing their PPE. Our volunteers meet the clinical staff at the completion of their visit if they were attending a suspected or confirmed case of COVID-19, and guided them safely through the process of removing their PPE
- Supporting our Clinical Administration team by providing phone coverage at reception, general administrative duties and putting together some caring@home packs and End of Life packs for nurses, as well as some client information booklets.

Our client care volunteers have demonstrated their resilience in challenging times and have relished the opportunity to contribute to PHH in a variety of different ways and stay connected. We are extremely grateful for their commitment, compassion and expertise and look forward to our continuing connection.

The impact of COVID-19 can still be seen in the number of hours that are represented. Volunteers recommenced face to face visits early in 2022, with essential visits only. Essential visits were determined on a case by case basis to allow for individual circumstances, but included isolation of the client and carer stress. There has also been concern from clients and their families about increasing the exposure of someone who is immune-compromised by having someone else present in the client's home. The lockdown where no volunteer visits were occurring and the precipitating hesitancy and concern about increased exposure to COVID-19 by having a volunteer present have had a significant impact on the number of hours delivered by volunteers.

Volunteer Hours



*"Thank you so much for your care, compassion and expertise. You made mum's final weeks less about pain and illness and so much more about love and cherishing the time we had together."*

## Connecting volunteers

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'He's become like a friend' was one of the many grateful comments that Ellen, Ian's carer, made since Albert (a PHH client care volunteer) started visiting them earlier this year.

Volunteers enthusiastically resumed face-to-face visits and PHH ensured that there were sufficient processes in place for the safety and well-being of both the volunteer, client and their family, to be as connected as possible while being as safe as possible.

As with all our client care volunteers, Albert requires up to date COVID-19 vaccinations as well as needing to complete a course on hand hygiene. He monitors his own health and will cancel the visit if he has any concerns. PHH provides Albert with rapid antigen tests however, as with paid staff, it is not mandatory that he test before seeing Ian.

Prior to visiting Albert rings Ellen and Ian to conduct the usual COVID-19 screen that is now so familiar to all of us.


The time that Albert spends with Ian enables Ellen to have a bit of time out for herself. A carer's role is a constant and exhausting one. Despite some initial hesitancy about having a volunteer, both Ian and Ellen now very much look forward to Albert's

visits each week. In Ellen's words, Albert is 'a ray of sunshine in our lives'. Connecting takes time, trust and respect. Their time together was spent soaking up some sun at the beach with Albert and enjoying coffee afterwards, companionship and gentle company that makes living more enjoyable.

Having our client care volunteers safely return to face-to-face visits with clients was a priority for PHH, as we recognise the well-being benefits for all.

### Length of Service

Tahlia Collard	20 years
Brian Coughlan	20 years
Janet Field	5 years
Maurie Johns	5 years
Lois Lyons	15 years
Jane McMillan	15 years
Liz Seward	5 years



*"Succeeding in business is all about making connections"*  
Richard Branson

## Our Fundraising Community



Helen Fairlie

The role of President was created in order to appropriately meet the needs for PHH to engage strongly with its community, raise its profile and to support the vital fundraising that supports PHH to add value to its community.

The past 12 months has reminded us of the importance of family, friends and community so it's been truly comforting to see our PHH Community swing right back into fundraising, since restrictions have lifted. Despite the challenges COVID-19 created, we can celebrate the fact that we have had success in both raising awareness, building connection and raising funds for Peninsula Home Hospice. We had to be flexible and creative, meeting online and thinking of new ways to tackle planning, postponing and organising fundraising. We had some fantastic events in the past year.

In April, we enjoyed a luncheon at Rosebud Country Club, with author Rosalie Ham as the guest speaker. Excitement was palpable in the dining room as we gathered for the first fundraiser in over two years. Loyal supporters, volunteers, ex board members and friends were keen to share lunch while listening to Rosalie. She talked about the community where she grew up, a small rural town with its cast of unique characters so lovingly brought to life in "The Dressmaker", her first novel. Everyone enjoyed her anecdotes and it was clear that the event was well received and enjoyed by so many including the bar staff who said that it was one of their best events ever! Thank you to the Mornington Auxiliary for arranging the event, it was very successful.

Not long after this in early May, was an event at the Intercontinental Hotel, Sorrento, a delicious brunch on a Monday morning in the renovated "Conti" Hotel in Sorrento. Selling out in record time, Marilyn Cunnington, Yvonne Gates and myself were ably

assisted by the hotel staff and a wonderful time was had by all. Generosity was once again evident as the raffle tickets sold like hot cakes. We had six lucky winners who were thrilled to get their choice of the donated prizes. Once again, a terrific opportunity to re connect with each other and highlight to the community the work that we do.

We were fortunate to finally hold the Yarrowonga Golf Classic. It was third time lucky for this four day event to get 'off the ground' and even in the adverse weather on the first golf day, spirits would not be dampened for the 100 golfers and various non-golfers.

There was something for everyone; wine tasting, chocolate and whisky tasting, history of the damming of the mighty Murray River at Mulwala, an improvised Panel Show hosted by Kevin Sheedy, Top Gun - Maverick, the movie, as well as golf on the beautiful fairways of Yarrowonga Mulwala Golf Club Resort. Pat Randall and her helpers from the Mornington Auxiliary ran the event so professionally, assisted by the YMGABC, Buller Wines, Marcus, Pat's dedicated friend who supplies the Sporting Memorabilia and Pat's loyal ex AFL footy player friends. All in all, a fantastic effort and incredible display of dedication and persistence by Pat to result in a large donation to PHH.

Pat has formed a satellite community of PHH up in Northern Victoria, built up over the past eight events. Thank you and congratulations to all involved. It even gets great coverage in the local newspaper in Yarrowonga

It was with much reluctance that we decided to defer the Unframed Art event. The COVID-19 environment at the time was too risky to hold a face to face event. The paintings are done, thank-you to all our participating artists who donate their work on canvasses to enable this event. Watch out for further updates about when this event will be scheduled next year. You might get yourself a masterpiece!

The Red Hill Op Shop continue to support us and even through the challenges of lockdowns, managed to donate

over \$60,000 in the financial year. We are so incredibly grateful to have their support and wish to acknowledge their Committee and Volunteers for their unwavering support of PHH. They have approximately 75 Volunteers that help to run the Op Shop, from working in the shop, sorting donated items, gardening and maintenance and the overall management. Thank you so much.

Meg Merton has continued making and selling her delicious preserves and chutneys and met with her Mah-jong group whenever possible to play and raise funds for us.

To further highlight how fortunate we are to have community help us, a brave group of five kids and one



Morning Tea at The Intercontinental Hotel Sorrento



Mount Eliza North Shave-A-Thon



Mornington Auxiliary Annual Luncheon

dad from Mount Eliza North Primary School shaved their heads in winter in front of the whole school at their assembly and raised over \$5000 on behalf of PHH.

We are also grateful to our fundraising committee who meet monthly and are constantly thinking of new innovative ways to raise funds for our organisation; the time you give us is really appreciated. We also said farewell to Mary Wright who retired and thank her for her contribution.

We look forward to building on the hard work and dedication of all our supporters this year into next year with many more opportunities to celebrate our connections with the community and to raise awareness of the work that we do.



Red Hill Op Shop AGM, Ruth and Felicity



Mornington Auxiliary Annual Luncheon Guest Speaker Rosalie Ham

## IT Report

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### *How do we use technology to help us to stay connected and deliver better care?*

We use Palcare, a cloud-based electronic medical record to hold clinical information. This allows the whole team to have real time access to up to date medical information 24 hours a day, seven days a week, regardless of where we are. We have also introduced SMS messages via our electronic medical record as an additional means of staying connected with our clients.

Through Palcare we can monitor the quality of the clinical care we deliver using reports, audits and by participating in a national benchmarking program. We also use our data to contribute to the body of knowledge about palliative care by partnering with other organisations in ethics approved research projects, within the bounds of privacy legislation.

By learning to work together in new ways, we are using technology to overcome barriers. Dealing with the COVID-19 pandemic taught us many new skills. We use teleconferencing to stay in touch with each other and our clients and their carers. The clinical team can attend our Morning Handover meeting virtually; we can get the whole team together for a mixed mode All Staff Meeting; we can stay in touch with clients who are unable or prefer not to have visitors to their home and the General Practitioners who care for our clients are able to participate in our weekly Multi Disciplinary Team Meeting.

With the team working remotely from mobile devices security takes on a greater focus. Majestic Computer Technology continue to monitor the health and effectiveness of our IT infrastructure and have enabled us to implement two-factor authentication to improve the security of our network.

Majestic have also assisted us to increase our resilience and efficiency through the ongoing shift to cloud-based business systems.

Technology plays a vital role in keeping us connected. It is central to the delivery of care, coordination and communication.

# Financial Summary



Richard Lindner

This is the third financial year significantly affected by the global pandemic, although changes in its intensity and in the methods of public health management over the second half have helped many return to a more moderated response. PHH has managed to accommodate the combined challenges of the latest strains of the virus and a ‘flu season not tempered by broad isolation measures. Staff absences in many sectors are commonplace and, for PHH and other care providers, particular caution is exercised recognising the clinical vulnerabilities amongst our clients. Not surprisingly our clients express a strong preference for care away from busy institutions.

The State Government acknowledged an increase in demand for care and support in the home and provided additional “surge” funding in December 2021 of approximately \$379,000. All of this funding is recognised as income in the 2022 financial year in accordance with Australian Accounting Standards. This together with under-budget expenditure in salaries result in a surplus for the year over the

modest amount budgeted at the commencement of the year. The operational plan for the 2023 financial year includes an expansion in the volume of services and staffing structure enhancements.

The dedicated supporters of PHH were able to resume fundraising activities and the community has responded. The contributions by those “behind the scenes” organising and conducting these activities and by those participating and financially supporting them is most welcome. The community support is a clear sign of a strong desire to engage and an endorsement of our work.

PHH’s financial position continues to be robust. During the year the last of the funded infrastructure projects, the installation of solar electricity generating panels, was completed. Our future energy costs will be moderated and, importantly, we make our contribution to the country’s management of the environment.

In what has been the third year of what I described last year as an endurance event I thank our Chief Executive Officer, Business Services Manager and the finance office team for their sustained focus and commitment including their leadership in the 5 Year Strategic Plan development process.



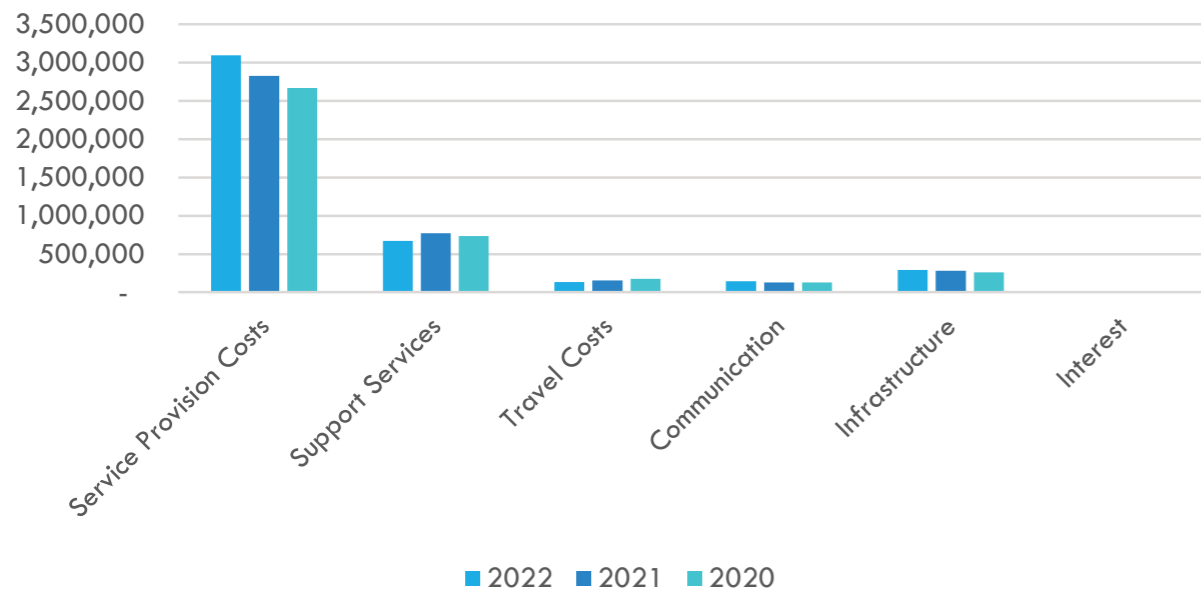


Business Services Manager

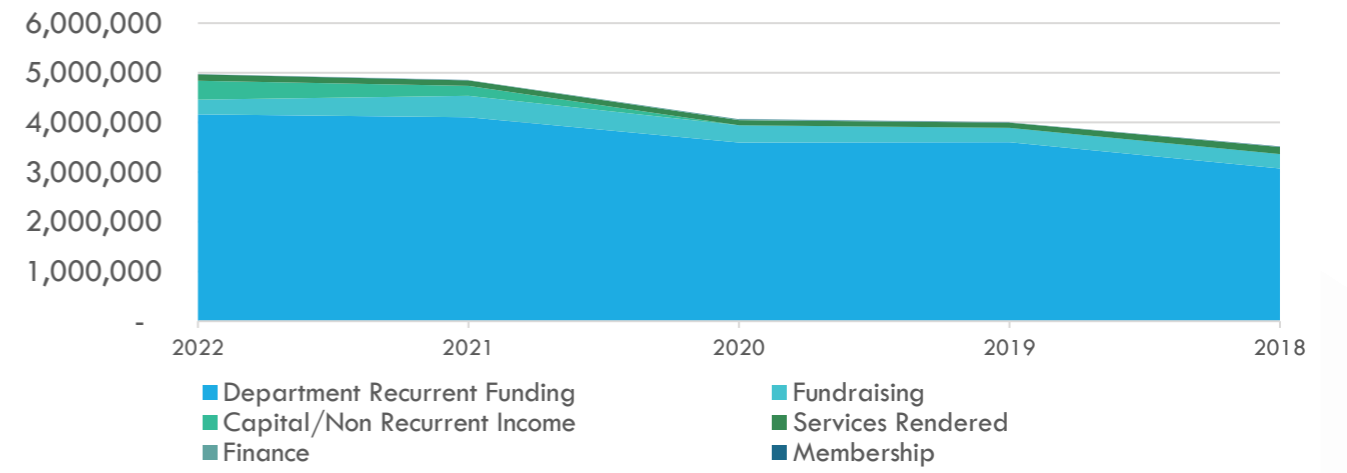


Donna Nolan

Expenditure Analysis 2022



Income Analysis 2022



# Our Donors & Supporters

**We would also like to thank and acknowledge all the sponsors, supporters and participants involved in the fundraising events held by our fundraising auxiliaries throughout the year. Your contribution is greatly appreciated.**

## Individual Donations

Anderson, Joan	Crowe, Heather	Jackson, Felicity	McNulty, Jan
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Turner, Joyce (Kathleen)	Heale, Lew
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	Mornington Auxiliary
	Mt Martha Bowls & Social Club
	National Seniors Australia Peninsula Branch

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Rosebud Country Club
Sorrento Golf Club
Sun Blessed Sunscreens
Terry White Pharmacy - Mornington
Victorian Government
Westernport Quilters

Thank you to the artists who donated paintings for Unframed Art 2022



Peninsula Home Hospice acknowledges  
the support of the Victorian Government

## Peninsula Home Hospice Ltd

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ACN 153 071 928

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Hon.Solicitors White Cleland Pty Ltd

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