

Ipswich Hospice Care

Annual Report 2017-18



Ipswich Hospice Care
37-39 Chermside Road
Eastern Heights QLD 4305

(07) 3812 0063
info@ipswichhospice.org.au
www.ipswichhospice.org.au

 Ipswich Hospice
Care Inc.
Quality of life through care

Hilda's House

Inpatient Care & Support
Bereavement Support
Community Education

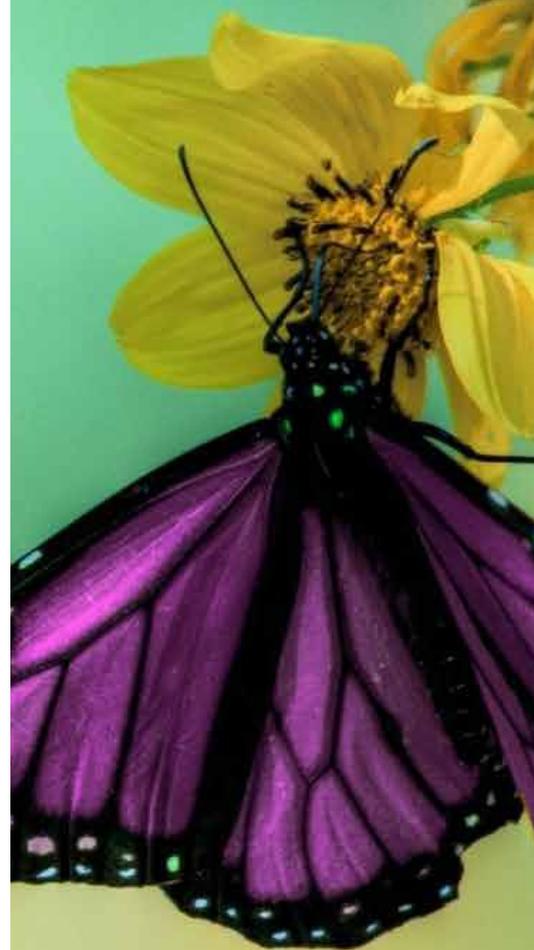


(07) 3812 1163
adminhh@ipswichhospice.org.au



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2017-18

Management Committee



Peter McMahon OAM

Position: Chairperson

Peter has been a member of the Ipswich Hospice Care Management Committee since 2000 and Chairman since 2008. He was the Director of his family company McMahon's Soft Drinks for many years and is currently the Director and Owner of Peter McMahon's Swim Factory in Ipswich. Peter's tertiary qualifications in Business and Accounting provide Hospice with a firm foundation of business management skills and acumen.



Dr Mark Waters

Position: Deputy Chairperson

Mark joined the Management Committee in Feb 2017. Mark has over thirty years' experience in both public and private health sector management. He has worked at Ipswich Hospital on a number of occasions during this time in a variety of roles. Mark and his family lived in Ipswich for eighteen very enjoyable years during which time he was involved with the community through both schools and sporting organisations.



Paul Saba

Position: Treasurer

Paul has been a member of the Ipswich Hospice Care Management Committee since 2016. Paul retired in June 2015 from a career in public accounting that spanned almost 35 years. Commencing as an employee in local and Brisbane based firms before commencing as a sole practitioner in the Ipswich area and then merging his practice with RW Ramsey & Co where he became a practicing partner for approximately 17 years. Paul brings business and accounting knowledge to the management committee together with an ethic of service to the community as demonstrated by his membership of Ipswich North Rotary Club for the past 33 years.



Pam Lane

Position: Secretary

Pam has been a member of the Ipswich Hospice Care Management Committee since 2000, and Secretary since 2012. Pam was the District CEO of the Darling Downs West Moreton Health Service District and held senior leadership positions within the public health system for 17 years. Pam has a clinical background in Nursing and Midwifery and a commitment to the continuous improvement of the quality of health services.



Ray Chandler

Position: Committee Member

Ray has been a member of the Ipswich Hospice Care Management Committee since 2016. Ray has held executive and senior level corporate services and financial management positions in both the public and private health sectors over much of the past 25 years. Ray is born and bred in Ipswich and has strong community links through active and administrative involvement in local musical theatre and sporting organisations.



Pat Evatt

Position: Committee Member

Pat Evatt has been a member of the Ipswich Hospice Management Committee since 2014. Pat worked as a psychologist in the disability sector before moving into the corporate sector where she specialized in organizational psychology. Pat was Director of Livingstones Australia for over 15 years and has held numerous Board positions in a variety of organizations, including the West Moreton Hospital & Health Services Board of which she is a current serving member.



Linda Hardy-Patat

Position: Committee Member

Linda Hardy has been a member of the Ipswich Hospice Management Committee since 2014. Linda is an accomplished senior healthcare executive with over 25 years of experience across a diverse range of statewide tertiary and quaternary, regional, rural, community health, corporate policy and planning, and private healthcare settings. Linda has a nursing background and particular industry expertise and interest in the areas of governance, risk, and safety and quality.



Dr Scott Kirton

Position: Committee Member

Scott has been a member of the Ipswich Hospice Care Management Committee since 2007. Scott is a General Practitioner at Grange Road Medical Services in Eastern Heights. Scott consults at the Ipswich Hospice Care and is a member of the General Practitioner roster.

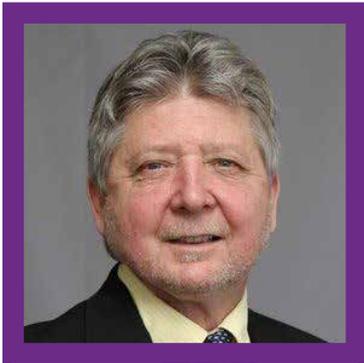
Rosie Laidlaw



Position: Committee Member

Rosie joined the Management Committee in 2017. Rosie has over 50 years in healthcare from two states in Australia. She came to Queensland in 1995 and worked at Ipswich Hospital for 18 years in Nursing Services. Rosie has a broad and diverse clinical background with specialities in cardiac, intensive care and studies in palliative care. She holds post graduate qualifications in management and gerontology. Rosie has travelled widely with health including being part of a World Health team. She is proud of her professional career and in particular her later years in introducing Advance Care Planning into the health arena in Queensland.

Lance Pearce

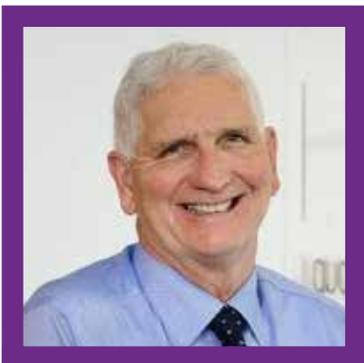


Position: Committee Member

Lance joined the Hospice Management Committee in 2017. He was born and raised in Ipswich and continues to live and work in Ipswich City and has a deep interest in the local community. He has a professional background in Consulting Engineering and Project Management and has held various senior management positions.

Principally his skill-sets are in Civil Engineering and Asset Management with particular experience in Municipal water engineering. His special interests are family, football (AFL) and fishing.

Gerard Pender



Position: Committee Member

Gerard has been a member of the Ipswich Hospice Care Management Committee since 1994 and was Chairperson for eight years until 2008. He is a partner in the region's largest legal firm, Walker Pender Group, and has been actively involved in community affairs for many years, participating in numerous community organisations. Gerard is a former Councillor with the Ipswich City Council and has been the President of the Rotary Club of Ipswich North. Gerard has a passion for and strong interest in community affairs in the Ipswich region.



About Ipswich Hospice & Hilda's House

Our Story

Ipswich Hospice has serviced the Ipswich community for over twenty years providing end of life care and bereavement support.

We strive towards excellence and innovation in Palliative Care practices. Through partnerships we build our knowledge and enhance our services.

Our Mission

To assist terminally ill people, their families and bereaved members of the community by offering quality holistic care.

Our Vision

To be a leader in palliative care and bereavement support

Our Values

- Compassion
- Respect
- Communication
- Teamwork
- Professionalism



Strategic Objectives

2016-2020

- Delivering excellence in patient and family care
- Developing our people and capability
- Modelling best practice leadership and governance
- Enhancing community ownership and awareness
- Growing our services sustainably

Service Outcomes

Inpatient

- 1873 bed days
- 97 admissions
- 93 deaths
- 2 discharges home
(95 separations in total)
- 2 Palliative Care Physicians
- 29 Community GPs

Hilda's House

- 128 clients received support sessions on 452 occasions
- 30 different group meetings with a total of 120 participants – including children and adults



Our Governance Framework

The framework was approved by the Management Committee November 2016 and implemented throughout in 2017.

Governance incorporates the set of processes, customs, policy directives, laws and conventions affecting the way an organisation is directed, administered or controlled. Governance in health service organisations determines how a health service organisation delivers care and has a direct impact on the safety and quality of care.

The Ipswich Hospice Care Inc. Management Committee has ultimate responsibility for the governance of the organisation in addition to its fiduciary and other corporate duties to act in good faith and comply with all relevant laws; the Management Committee is responsible for the clinical and corporate governance of the organisation. This means that among its other obligations, the Management Committee must ensure that:

- Governing all domains of organisational activity, including business performance, human resource management, information technology, work health and safety, and clinical safety and quality of the service the organisation delivers; and setting the organisation's quality improvement and risk management culture;
- Ensuring safety and quality, compliance with legislation, and risk are monitored; and
- The organisation responds appropriately to safety and quality and risk matters

The Management Committee is responsible and accountable for ensuring that management has systems and processes in place to provide safe, high quality care. Both the Management Committee and management have a responsibility to monitor the effectiveness of such systems and processes. For the Management Committee, this can be achieved through strategic planning, reviewing major safety and quality risks, ensuring safety and quality systems are in place, and monitoring and reviewing safety systems and performance. Requiring and reviewing reports on these and other safety quality issues allows Management Committees to fulfil these roles.

The ultimate responsibility for ensuring the integrity and effectiveness of the governance system rests with the Management Committee.

A revision of the committee structure to adequately fulfil these responsibilities has resulted in a refresh of the Terms of Reference and reporting requirements for each Committee:

- Safety Quality and Risk Management Committee (SQRM)
 - Work Health and Safety Committee
 - Training and Professional Development Committee
- Governance Facilities and Finance Committee (GFF)
 - Workplace Consultative Committee
 - Enterprise Bargaining Committee
- Credentialing and Scope of Clinical Practice Committee
- Clinical Council

2017-18 Chairperson's Report



“It takes an active Management team, valued and dedicated staff - including our volunteers, to build a positive image and culture”

As I stand here tonight to present the Annual Report for the year 2017/18 and knowing this is my last official duty as Chairperson of the Management Committee I am proud to say the nine years as Chair although having challenges has brought me personally great satisfaction.

It is my intent to remain on the Management Committee because I have a dream and want to ensure Ipswich Hospice grows in size as our population expands over the next 5 to 10 years. Ipswich Hospice is in the unique position that demand will continue and we will be there ready to take up the challenge. Our history reflects the important status we have in the community and it has been the community and their generosity over the past 24 years that has driven our success.

I believe the Management Committee members and I as Chair, have taken every opportunity for our facility to be recognised for the excellence in care and excellence in the services it provides. It takes an active Management team, valued and dedicated staff - including our volunteers, to build a positive image and culture.

Sadly we have lost from the Governance, Facility and Finance Sub Committee and Management Committee Linda Hardy-Patat and also from the Management Committee Dr. Scott Kirton. Both have contributed significantly to Ipswich Hospice and their skills and knowledge will be a loss. We wish Linda success in her new position as South West Hospital & Health Service Chief Executive. Scott as one of our valued GP's at Ipswich Hospice we are pleased to announce, will remain on our Credentialing & Scope of Practice Committee and in the future our Medical Advisory Council.

The year has brought another success with our ACHS Accreditation process and Ipswich Hospice has been accredited for a period of four years. Surveyor's comments remained positive and provided us with suggestions for new directions and innovative change. The pre-work for Accreditation in providing performance measures and outcomes has a demand on staff but again they have risen to the challenge and it was in their words 'so satisfying to achieve accreditation for a further four years'.

Our fundraising and events activities continue to assist with donations and whilst our membership is a little down compared to the previous years, we will continue to strive to improve membership in 2018/19 and build on our relationships in the community. Reviewing data from other states in Australia and internationally the trend for donations is falling. This is mostly due to the amount of charities in society all vying for the same dollars however, we will not give up and continue to centre our attention on all the positives for the future.

Government funding both Federal and State has been renewed for 2018/19 and we are very

pleased to have the support of Darling Downs West Moreton Primary Health Network providing us with financial support in the latter part of 2017/18 and continuing this support in 2018/19. Our Management Committee will continue to make wise and diligent decisions in a changing health horizon. We will continue to work under our strong Governance Structure, and continue to build on strong partnerships in the community.

Some of the projects we have achieved this year include moving to a Solar Power System, where our investment will be re-paid in three years; ensuring lower electricity costs and a lower carbon foot print for the organisation. Our Guest Wing operates now on a modern and efficient nurse call system which includes pendants for guests and increases their mobility and independence. August brought the draft of the new Website which will enable easier on-line donations, electronic ordering and up to date information on Hospice services. A new generator is to be installed in mid August reducing significant repair costs. The generator has an automatic start and will provide cleaner emissions and lower gas consumption. Finally, it is the intention of the Management Committee to review our current Constitution - we have acquired funding to support this activity and hope to have this completed by the next Annual General Meeting.

I would like to acknowledge Dr. Bruce Roberts for his generous legacy to Ipswich Hospice in September 2017. Bruce was a former member of the Management Committee and Hospice was an important part of his life.

October draws to an end of an era of 'Friends of Hospice'. After twenty five years of dedicated services they are closing the doors on the 'Bookshop' which has given hours of reading pleasure to many members of our community, and brought many smiles and social contact for both the young and old. Reflecting back on the years, there have been many people who have given time and hours to Friends of Hospice and I would like to thank retiring President Jim Malynn, Treasurer Cecilee Pilkington and Secretary Ailsa Crichton for their commitment to Friends of Hospice and hope they will retain their connection with Hospice in the future.

We look forward to our future and know we have a team that will assist us leading this facility from strength to strength. We have an initial drawing and a plan for a further three rooms – this will assist with our anticipated growth in demand for services.

Finally, it will be my intent to continue to support all members of the Management Committee and in particular, the new Chairperson taking over from me. I look forward to continuing to work actively in our community for Ipswich Hospice Care.

Again, I thank each and every one of you here tonight. It has been a privilege to be the Chair of the Management Committee Ipswich Hospice for the last nine years.

A handwritten signature in black ink, appearing to read 'Peter McMahon', written in a cursive style.

Peter McMahon OAM
Chairperson

2017-18 Acting General Manager's Report



“Actions are like a ripple in the pool of life that affects many, many people – we are proud of what we achieve”

The year of 2017/18 has brought many changes and challenges. Our previous General Manager Paul Brew resigning in February 2018 and relocating to a new position on the Sunshine Coast in late March brought sadness to the wider community. Paul had been very proactive in community activities and certainly was a great community advocate for Ipswich Hospice. The Management Committee extended their appreciation for his commitment and loyalty to Hospice over his two year employment period.

As a newly appointed Management Committee member, I was asked whether I would be prepared to step down from the Management Committee and accept the (Acting) General Manager role for an interim period of time. Having an extensive history in health from both a clinical and business perspective (in two states in Australia) it has been my privilege to step into the role and walk through the doors of a very special health facility.

During the time I have been in the acting role I had the opportunity to:

- Review budget accountability throughout the facility and delegate responsibilities to senior Team Leaders with monthly monitoring processes
- Review workforce planning which has led, with support by Management, to an internal appointment of a Clinical Nurse to support our Clinical Manager
- Explored future education options for staff in end of life essentials, Root Cause Analysis and the new National Standards
- Explore IT systems for the organisation from both a clinical and administrative perspective
- Review day to day practices to improve efficiencies
- Plan for rejuvenation of our gardens in general and in particular the Rose Garden

In May a special morning tea was held in the Rose Garden with our Volunteers and their families. Our members were invited to celebrate National Volunteers week and we presented them with service pins – this was the time Ipswich Hospice had recognised the volunteers with their years of service. Volunteers and guests then enjoyed a celebration of Palliative Care week and many respected this by wearing purple – our tradition for Palliative Care week. Our Clinical Manager an employee since the Hospice opened was the guest speaker and spoke of her time at Hospice recalling special memories, as well as recounting the history of Ipswich Hospice.

We continue to promote and educate our community on end of life palliative care and Hospice and Hilda's House services through our events, fundraising activities and guest speaking requests and will continue to do so into the future. Some would say many still do not know of our 'home on the hill' and relate still to the fear of death whilst others would say 'it's the fact it is just too hard talking about illness and even contemplating death' but we as an organisation

know this is necessary and part of life and living.

Our clinical services are complemented daily by our strong networks with WMHHS, the Palliative Care Unit at West Moreton Hospital; Dr. Ross Cruikshank our Palliative Care Consultant and a committed and dedicated group of General Practitioners' who complement our care standards and professionalism to guests and families.

The community knows of our Hilda's House services and knows the importance of seeking help from our team of professionals to recover from the grief of loss. Grief and loss effects both adults and the children in our community and being able to work through these processes allows life to continue, with always cherished memories, but with new direction.

In the later part of this financial year our occupancy rate increased significantly which indicates the increasing demand and need from our growing community has commenced. Recent statistics indicate an increase of approximately 50,000 people moving into our West Moreton Health region in this calendar year. At a recent evening presentation by Darling Downs West Moreton Primary Health Network (DDWMPHN) they confirmed our chronic disease population including malignancy continues to grow – this in itself indicates there will be, in the future, a need to our expand our services.

At this point Paul Brew should also be commended for submitting and achieving for Ipswich Hospice a successful tender with the DDWMPHN and this was for the end of the 2017/18 and 2018/19 financial years. We look forward to our continuing partnership with DDWMPHN and thank them for their commitment to Hospice.

Reviewing of the Strategic Plan this year has allowed us to include a new objective relating to our core business - that being 'patient and family centred care'. Whilst we continue to strive towards achieving all other objectives, the review has given the Management Committee members the renewed determination to continue to move forward and heighten our established relationships in the community. Staff pride themselves on being part of an organisation that has high standards of care, which assists our integrity, quality of governance and quality of performance.

From April to June Ipswich Hospice has been a height of activity associated with our projects which have received positive comments by staff and volunteers. We now look forward in the financial year of 2018/19 to updating to a 'cloud based system' and a 'new electronic health care information system'. Both will allow us to be prepared for the change into a digital era. The funding for these projects has been provided by a Queensland Health 'One off Funding Grant'. We are very appreciative to have received this grant and know through these projects our organisational efficiencies and effectiveness will be greatly enhanced.

I don't think there has been a day that I have not heard laughter or seen a smile or staff member that is not offering a kind word either to guests, families, colleagues or volunteers. Each and everyone makes every day at Hospice a special place to be. Although each of us shed a tear or two, the genuineness and sincerity of all employees and volunteers makes this organisation one of a kind.

I take up Paul Brew's words of last year with slight change 'your actions are like a ripple in the pool of life that affects many, many people' – we are proud of what we achieve.



Rosemary Laidlaw
Acting General Manager

Our Clinical Care -Inpatient

“Greatness is not found in possessions, power, position, or prestige. It is discovered in goodness, humility, service and character.”



Sharon Ferrar
Clinical Manager, RN

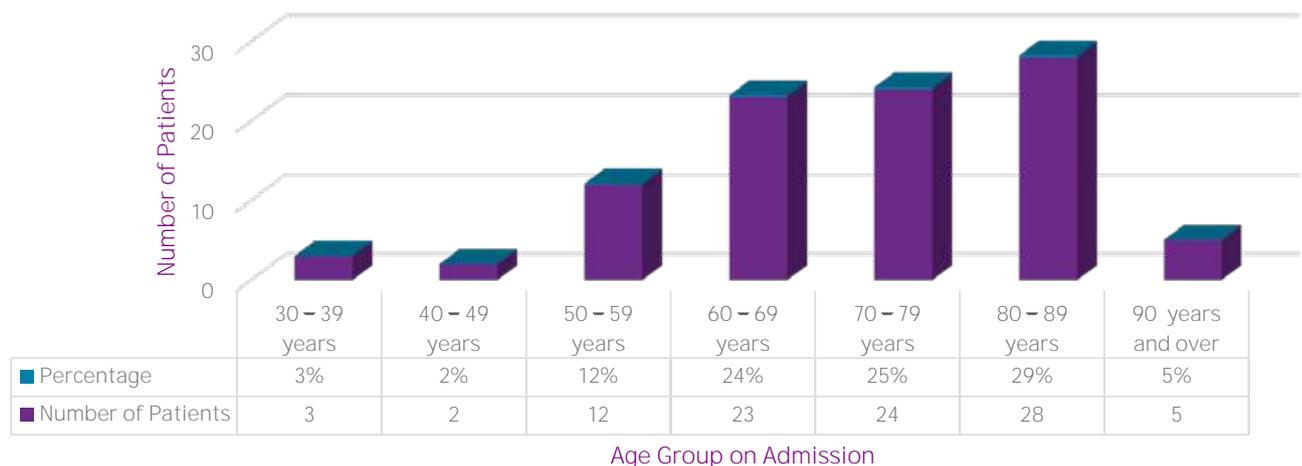
Our care team works collaboratively and in partnership with the patients and their support people (family, carers and friends). The team is comprised of the Clinical Manager; the patient’s General Practitioner; the Palliative Care Physician; experienced Registered and Assistant Nurses; Social Worker; along with other health care professionals and trained volunteers.

Outcomes for 2017/18

- In September 2017, the Private Health Regulation Unit Queensland Health completed a routine on site compliance visit to Ipswich Hospice. The outcome of this visit was the upgrading of all window treatments and bed screens in patient rooms to meet fire retardant requirements.
- In March 2018, Hospice completed Organisation Wide Survey against the Australian Council on Healthcare Standards (ACHS) EQuIP National Standards. The final Survey Report was very positive and there were no recommendations raised as a result of the Survey. Ipswich Hospice has an Accreditation Certificate which is current until May 2022.
- From July 2017 to June 2018, there were 1873 bed days, 97 admissions, 93 deaths, 2 discharges to home (95 separations in total).
- The average length of stay decreased from 29 days in 2016/17 to 20 days in 2017/2018. The range of lengths of stay was from 7 hours to 191 days. Stays less than 40 days accounted for 88% of separations with stays 10 days and less accounting for 47% of separations. Two stays exceeded 100 days.
- Range of occupancy rates was 61% to 89% with the average occupancy rate 73% which is a decrease from 78% for the previous twelve month timeframe. From July to 15th December 2017, the numbers of rooms available for use decreased from seven to five as bathroom renovations were undertaken.
- For the 2017/18 period, 29 different GPs cared for patients at Ipswich Hospice. Thirteen of these GPs undertook more than one episode of care. Four of these GPs who are all on the Hospice On-Call roster cared for 51% patients admitted to Hospice in the 2017/2018 period.

- The breakdown of Guest Wing Referrals for admitted patients this year are as follows, 78% of referrals were from PCU – Ipswich (Public Hospital), 3% were from other Public Hospitals (Brisbane and Gatton), 10% were from St Andrews Private Hospital Ipswich, 6% of referrals were from Private Hospitals in Brisbane , and 2% from community GPs.
- In relation to Private Health Insurance this year 66% of Guests had no insurance, 25% of Guests had Private Insurance and 9% of Guests were funded by the Department of Veterans Affairs.
- The Ipswich Hospice Social Worker offered/provided psychosocial and practical support (end of life decision making, Enduring Power of Attorney, Department of Human Services etc.) to all in-patients and their support people (family, carers, and friends).
- Patients are admitted to Hospice with a wide range of terminal conditions with the majority being cancer related. In this time frame Lung Cancer, Colorectal Cancer, Prostate Cancer and Pancreatic Cancer have been the four most commonly presenting malignancies.

Breakdown of Hospice Patients by Age



Looking Ahead

- Continue to explore new possibilities and build on continuing relationships with referral sources.
- Continue to explore new possibilities and build on continuing relationships with Community GPs and GP practices.
- Work toward assimilating the National Safety and Quality Health Service (NSQHS) Standards version 2 and the National Palliative Care Standards 5th Edition into service delivery at Ipswich Hospice. Both of these Standards were updated in 2017/18.
- Continue to assess, prioritise, fundraise and purchase new and replacement patient care equipment to ensure patient comfort, ease of use for Nursing Team members, and safety for all.
- Continue to build and strengthen relationships with University of Southern Queensland re Nursing Student placements.

Our Bereavement & Psychosocial Support Services

“Be kind, for everyone you meet is fighting a hard battle”



Tiina Jukka
Social Worker

Hilda's House is a place of support and hope for people facing the end of their life or who are bereaved. Our objective is to ensure that grieving clients are respected, provided with a safe environment in which to express their feelings, have their strengths and hopes affirmed and to be supported in dealing with future change and challenges.

Outcomes for 2017/18

- The team at Hilda's House is made up of two staff members who work approximately 50 hours per week and are supported by 10 Volunteer Support Workers and Human Services student placements.
- CHSP (Commonwealth Home Support Programme) onsite Quality Review was completed in July 2017 with the outcome of the service meeting 18 out of 18 expected outcomes of the Home Care Standards.
- In May Hilda's House was nominated for Queensland Volunteering Award; The Volunteering Impact Award and was one of three finalists. Hilda's House was picked from hundreds of entries across the state; a very proud achievement.
- In this time frame we farewelled long term Support Volunteer Lisbeth Strodl. This dedicated woman had volunteered her time and support to countless Hilda's House Clients over an 8 year period of Volunteering. Lisbeth facilitated several Adult Grief Groups and Kid's Grief Groups. Lisbeth's dedication, and commitment will be missed by all who have worked with her over the last 8 years.
- All inpatients are provided with support from the Ipswich Hospice Social Worker, Support Volunteers and the Nursing Team.
- Support people of inpatients (families, carers and friends) are offered formal and informal support from the Ipswich Hospice Social Worker, Support Volunteers and the Nursing Team.
- Bereavement support for the wider Ipswich Community is provided at Hilda's House in a number of different delivery options.

128

Clients were provided with support and Services

452

One to one intakes and support sessions

40

Participants in 10 different groups held, including Kids Grief Group, Parents Carer Groups and Adult Grief Groups.

80

Participants in 20 meetings of the Drop-In Grief Group



Looking Ahead

- Continue to provide current high level of service delivery.
- Promotion of Hilda's House Services within the wider Ipswich community to gain an increase number of service users.

Our Employees & Volunteers

The number of employees at the end of June 2018 totalled 44, the majority of staff are employed on a permanent part time basis. The largest workforce area is direct patient care in the Guest Wing. There were seven new employee appointments. The FTE is currently 18.2.

In the 2017-18 year 103 volunteers donated 21,500 hours across all areas of Ipswich Hospice.



Donna Smith
Volunteer Coordinator

Achievements 2017/18



Clinical Manager Acknowledged

Sharon Ferrar's commitment to Ipswich Hospice was acknowledged in her receiving the 2018 Pride of Work Award by Ipswich City Rotary.

This award recognises her contribution, commitment and dedication to end of life and palliative care services, in particular to both guests and families at Ipswich Hospice over the past 22 years.



Inaugural Service Pin Presentation

During National Volunteer Week, held in May, specially designed service pins were presented to 75 volunteers who have given either 5, 10, 15 or 20 years of volunteer service to Hospice. Eight volunteers were given 20 year pins, seven given 15 year pins, 19 given 10 year pins and 41 given 5 year pins. The number of services pins presented recognises the commitment and loyalty of Ipswich Hospice volunteers.



Volunteering Queensland Finalists

Hilda's House Bereavement Support Services

The Hilda's House team were one of three finalists in the Volunteering Impact Category at the 2018 Volunteering Queensland awards.

The selection panel highlighted the level of support, empathy and understanding provided by the Bereavement Support Services team to those dealing with grief or who are receiving palliative care services. The importance of having a support service available allows people the dignity they deserve and the compassion of a community that cares.



Community Partnerships

Creating a Compassionate Community

For over 20 years the Ipswich community has been fortunate to have its own Hospice. Created by a handful of compassionate individuals, and we continue to be well supported by a range of community, corporate, and government organisations. It is through these partnerships that Hospice can continue to offer caring and compassionate end of life care.



Hospice Grounds and the Rose Garden

Our Rose Garden is a place to remember and reflect. To ensure its longevity we supplemented our current roses with 20 new rose bushes. We also created four new Pebble Gardens, designed specifically to showcase individual memorial plaques. Our garden volunteers work tirelessly to ensure the grounds at Hospice and our Rose Garden are maintained to a high standard. We do this so our guests, their family and friends as well as Hospice staff and volunteers can enjoy them.



Professional Development & Training

The continued development and training of staff and volunteers remains an important focus at Ipswich Hospice. Staff members undertook a range of professional development and training during the year. Kerri Lorroway completed her training as a Health and Safety Representative, Melissa Austernin completed a Certificate in Governance for Not-for-Profits, Donna Smith undertook a Cert IV in Coordination of Volunteer Programs, and Maxine Kohn is enrolled in the Cert IV in Health Administration. The nursing team continue to enhance their clinical skills by attending or participating in professional development and education activities. The Hilda's House team completed training in relation to loss, grief and bereavement support.



Enhancing Workplace Culture

Creating a positive workplace culture at Hospice is vital to keeping staff and volunteers engaged, and they are our most valuable resource. We achieve this through sound leadership, safe workplace practices, and respectful interactions between staff and volunteers.

“The immense satisfaction I feel is immeasurable. Thank you for the privilege of being one of the volunteers”. Ipswich Hospice volunteer 2018.

Our Events & Fundraising

**“Alone we can do so little.
Together we can do so much.”**

Ipswich Hospice is so fortunate to have such a compassionate community to support all their fundraising, sponsorship and event efforts. Without the support of local businesses, individuals and organisations we would not have been able to generate the revenue or raise the awareness we did for Ipswich Hospice.

The 2017-18 financial year saw the introduction of new events and initiatives, as well as the elevation of existing events, resulting in an substantial increase in fundraising revenue. The 2018-19 year will see the continued improvement of existing events, a new major event and new merchandise items to be introduced.



Kerry Costello
Events Coordinator



Trivia Nights

August & February

Holding two Trivia Nights this year with 200 people in attendance at each event, raising on average \$6,500.



QT Golf Day

October, Sponsored by the

Queensland Times

A record number of teams attended the Golf Day, raising nearly \$15,000.



Masquerade Ball

October, in partnership with the

Ipswich Nurses Association

Almost 300 guests attended the Ball for a night of entertainment and fun.



Jacaranda Dinner

April 2018, Partnership with Orion Springfield Central

The inaugural Jacaranda Dinner saw 120 guests dine under the stars and meet local Masterchef Australia contestants in the middle of Main Street at Orion Springfield Central. Sponsored by the Queensland Times, River 949, Maurice Blackburn Lawyers and the City of Ipswich.



Remembrance Trees

December, held at Booval Fair & Orion Springfield

New butterfly ornaments were introduced and a stand was added at Orion Springfield.



Tea Party

August & March

50 ladies attended our new Tea Party for some pampering, market stalls and high tea.



Wear Purple for Hospice

May, part of National Palliative Care Week

Over 130 donation boxes were distributed to local businesses, raising over \$5,000.

Treasurer's Report

2017-18

Please find detailed below my financial report for the year ended 30 June 2018. Full details are available in the Audited Annual Report from which the following summaries have been taken. Total income for the year (excluding abnormal income amounting to \$676,742) was \$2,023,469 compared with \$1,957,753 last year. This is an increase of \$65,716 or 3.35%. Total expenditure was \$2,194,405 compared with \$2,154,978 last year. This is an increase of \$39,427 or 1.83%.



Paul Saba

Honorary Treasurer

Overview & Discussion

I concluded my report last year with the hope that I would be given the opportunity to report in a more positive vein this year. My report this year is predominately positive but contains a mix of good news and bad news.

You will note from my summary that our deficit for the year is \$170,936 which is an improvement on last year's deficit of \$197,225. The deficit this year is posted before accounting for the receipt of abnormal income, the inclusion of which, leaves us with a very welcome surplus for the year of \$505,806. A special thanks must go to Dr. Bruce Roberts for his generous bequest and also to Mary Kavanagh for her bequest. The grant received from the Darling Downs & West Moreton Primary Health Network (DDWMPHN) was a great boost and has also been approved for next financial year. We thank them sincerely for their continued support. We were also fortunate to receive an insurance recovery to cover the estimated loss of fees due to room closures while under repair.

The concerns expressed in my Treasurers Report for 2016/17 regarding the sustainability of the organisation, have not abated. The above figures show a healthy position at 30 June 2018 but only because we were extremely fortunate to receive the funds detailed as abnormal income. Without this income we would have experienced a loss for the year of \$170,936 which would have depleted our working capital and reserves. Fortunately, we have another year's funding from DDWMPHN for a further \$160,000 in the 2018/19 year. If nothing else changes, the receipt of this funding should leave us in a break-even situation at the end of June 2019. Our submission to the Minister for Health in August 2017, for a contract funding review based on an activity-based funding model, which truly reflects the actual costs incurred by the service, remains under review. A recent meeting with the Department of Health resulted in a positive but cautious response, with clarity on this issue to be forthcoming in the new year.

Without some further assistance in this area, it remains extremely difficult for this organisation to move forward with confidence and surety. Facing challenges is not new to the Management Committee (MC), in whom I have the utmost faith to steer the organisation to calmer waters.

It is a pleasure to work with such enthusiastic and committed individuals whether they be volunteers, staff or MC members, all striving toward a common goal. I take this opportunity to thank Melissa Austernin and the administration team for their assistance to me during the year. I also offer my congratulations to staff and volunteers for their efforts, which I know are held in high esteem throughout the community.

Paul Saba
Honorary Treasurer

Income:	2017/18 year		2016/17 year	
	\$	%	\$	%
Grants	1,221,389	60.36	1,192,666	60.92
Donations & Bequests	275,605	13.62	277,860	14.19
Sales (Net of cost of goods sold)	9,022	0.45	14,969	0.76
Fundraising	168,461	8.32	112,683	5.76
Fees (Health funds, DVA etc)	320,573	15.84	326,488	16.68
Facilities Hire/ Rental	12,714	0.63	14,673	0.75
Other Income	3,481	0.17	11,910	0.61
Gain on Investments & Interest	12,224	0.61	6,504	0.33
TOTAL INCOME	2,023,469	100.00	1,957,753	100.00

Expenditure:

Employment	1,851,541	91.50	1,820,957	93.01
Client Support	41,625	2.06	41,266	2.11
Fundraising Costs	53,942	2.67	35,007	1.79
Rent & Rates	3,234	0.16	3,124	0.16
Administration	99,988	4.94	100,725	5.14
Services	107,973	5.33	109,880	5.61
Other Expenses	4,243	0.21	10,449	0.53
Depreciation	31,859	1.57	33,570	1.71
TOTAL EXPENDITURE	2,194,405	108.44	2,154,978	110.06

OPERATING SURPLUS (DEFICIENCY)	-170,936	-8.44	-197,225	-10.06
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Add: Abnormal Income

Bequest- Estate Dr Bruce Roberts	398,761		0	
Insurance Recoveries	117,981		0	
Grant Darling Downs & West Moreton				
Primary Health Network (DDWMPHN)	160,000		0	
OVERALL SURPLUS (DEFICIENCY)	505,806		-197,225	

FUNDS STATEMENT:

Use of Funds:	\$
Cash at Bank increased	131,845
Undeposited funds increased	1,902
Accounts receivable & Pre-payments increased	71,398
Short Term Investments increased	487,671
Building & Improvements increased	24,164
Furniture & equipment increased	30,000
TOTAL	746,980

Source of Funds:

Accounts Payable & Loans increase	59,397
Depreciation Written off	31,859
Leave provisions increase	1,700
Grants Received in Advance increase	148,218
TOTAL	241,174
NET OPERATING SURPLUS	505,806