

# How a compassionate community has provided Palliative Care support for 30 years.



We are voluntary, not for profit community based group that has provided palliative care support to members of our local community since 1989. In that time the care we provide has evolved due to collaboration, reflection and changes in legislation, practise and available resources.

## The early days



1989 - Concern within the community about the lack of palliative care support available locally.

Community Nurse called a meeting for interested residents - the word spread and a committee was formed to tackle the daunting task.

1991 - Fundraising began in earnest with the goal of a Hospice being established.



1995 - Property purchased and furnished through community support and fundraising.

1997 - Laurel Cottage Respite Care Centre opened with an employed nursing coordinator, volunteers were trained, the first patients stayed.

2000 - Laurel Cottage closed due to regulations and ongoing funding issues.



2001 - Negotiated a rate of \$435 per night at private hospital for palliative beds for uninsured patients - 3 beds allocated & use of a quiet room.

2002 - \$35,000 spent on bed nights.

2003 - Negotiated Government funding to cover bed nights for uninsured patients. Is ongoing via local public health service funding.



2004 - Negotiated contract with private nursing service for the provision of extra services for patients, including domiciliary & personal care.

2005 - Regular formal strategy meetings held every month with Community Palliative Care team, community home care providers, local hospital and GLPCS to enhance service provision and provide for local patients in need.



2009 - Need for an Oncology Unit for the local community was identified as patients had to travel distances to receive treatment.

Negotiations began - special fundraising ensued, specialist education was provided and the service began in 2010.

Up until 2013 we paid \$425 per day for uninsured patients to receive their treatment.



2010 - Equipment pool was established with rented storage facilities. Volunteer equipment officer assisted with delivery, maintenance and cleaning of the equipment.

This equipment is supplied to the patient on loan at no cost.

## Now and into the future

Funds for domestic services and personal care increased to a monthly budget of \$5,000.

Oncology equipment - infusion devises, scalp cooling machine & caps, wig service.

Furnishing a 'Quiet Room' at Forster Private Hospital for use by patients & families as needed.

Scholarships awarded to individuals to gain palliative care expertise.

Financial assistance on a 'needs' basis - including costs of medications.

Equipment pool - maintain & supply (including hire costs) for necessary equipment.

Speaking regularly to local community groups to raise palliative care awareness.

Conducting & funding education courses for carers and the general interested community.

Allied health - providing enhanced services including physiotherapy, social work, massage therapy.

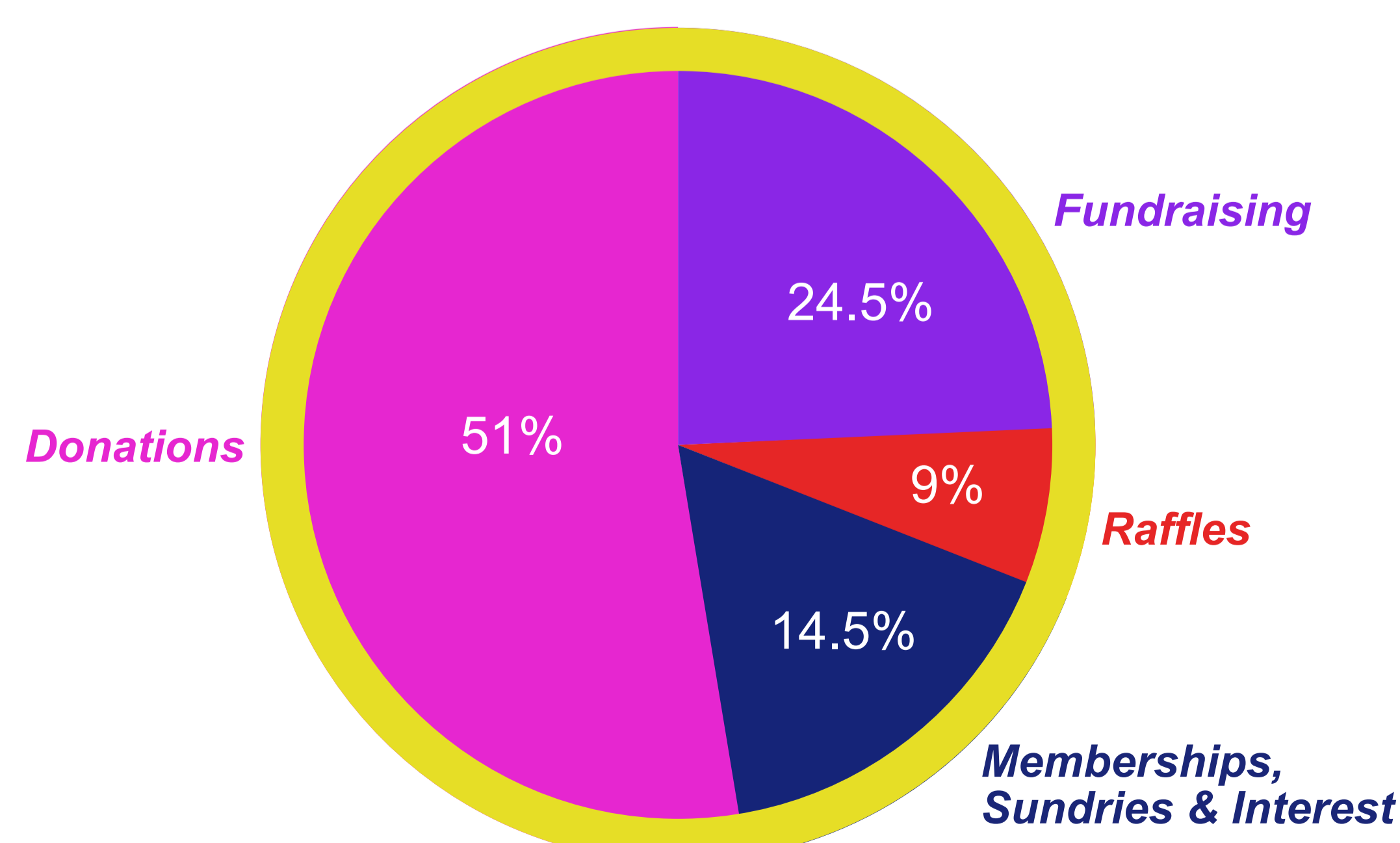
Purchase of specialised equipment, - portable oxygen cylinders, concentrators, pressure relieving cushions, mattresses.

Pro-active in raising end of life issues on a regular basis. Dying to Know Day promoted - event held annually.

Funding for conference and seminar attendance by staff & volunteers to gain specialised palliative care expertise.

## Financials 2015 - 2019

### Revenue



### Expenses

