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Year in Review

On behalf of the Committee of Management, staff and volunteers of Banksia Palliative Care Service (Banksia) we are pleased to present the Annual Report for the year ending 30 June 2016.

Our Annual Report is designed to showcase our achievements and provide insight into the future goals of the organisation to ensure we continue to provide high quality support to clients as they need it.

Once again this year we have devoted considerable time to developing operational plans to ensure we meet our Strategic Plan Objectives. The main outcomes for the last 12 months include reviewing our processes to ensure we remain responsive to new clients, expanding our opportunities to seek feedback from clients and GP’s to assist us to improve our service, review of our organisational structure and identifying a new electronic client data system. It has been another exciting year and I am proud to say we have successfully made changes to enhance outcomes for the people we support.

As a team we continue to seek opportunities to work collaboratively together to enhance the care and support we provide to clients. The results of our external accreditation in September 2015 are a credit to the team and symbolise the great outcomes we have achieved together throughout the last 3 years. This independent audit validated what we already know – that our service continues to evolve and striving to ensure we meet the needs of clients when and how they need to be supported at a very important time. Throughout the report we have highlighted a number of the comments from surveyors during the external survey.

Like many sectors palliative care service provision is changing. How this important service will be provided in the future will be determined by a number of external factors including the new Victorian Governments Palliative Care Policy (due to be released in early 2016/17), changes to the Advance Care Planning Legislation, and community discussions and potential future legislation changes on euthanasia. Our role is to ensure we stay informed and actively participate in the discussions in these areas so we can offer our expertise to the debate and continue to review and adapt our model of care to meet government and community expectation. To stay ahead of these changes this year we have reviewed our organisational structure and next year we will begin a major review of our service model.

This year we have been fortunate to be able to expand our clinical team with the employment of an Occupational Therapist and a Nurse Practitioner both of which have become valuable members of the interdisciplinary team and working with the team have provided additional depth and expertise to enable us to better support people.

Our Volunteers are a very important component of our team and we value greatly the diversity of roles including supporting clients at home, administrative support for staff, being involved in our consumer advisory committee and being part of our Committee of Management. Our service would not be as successful without the generous contribution of each and every volunteer. We are truly grateful for the generosity of spirit displayed for these outstanding people.

We have continued to support our colleagues at Goulburn Valley Hospice Care and Wodonga Hospital by providing our specialist palliative care course on site at their venues as well as running training in Melbourne. We continue to work in collaboration with the North and West Melbourne Metropolitan Palliative Care Consortium which focusses on strengthening palliative care delivery across North and West region of Melbourne. At Banksia we are committed to work with, support and add value to the sector to further palliative care outcomes.

Thank you to the many people and organisations who have contributed to our achievements in the 2015/16 financial year, either through donations, grants or non-financial support when needed. We thank the Department of Health (Vic) for their ongoing funding of our service.

Our success would not be possible without the vision and leadership from our Committee of Management and the expertise, commitment and dedicated service from our staff, volunteers together with support from our valued members. The Committee of Management congratulate our Executive Officer, Julie Paul for the outstanding job she has done and continues to do in guiding the organisation. As we move into a new year we can feel confident knowing that we have the right structure and people in place to ensure our organisation moves from strength to strength.

Therese Desmond
Interim President

Julie Paul
Executive Officer
“Our success would not be possible without the vision and leadership from our Committee of Management and the expertise, commitment and dedicated service from our staff, volunteers together with support from our valued members.”
Our Vision, Mission & Values

Our Vision is to provide leadership in specialised home-based palliative care which is accessible, responsive and in partnership with our changing and diverse community.

Our Mission

As people experience progressive terminal illness, death and bereavement, Banksia Palliative Care Service will:

• Provide specialised health care & practical support to clients and their carers in their place of residence
• Enable clients to access a range of services to address physical, social, emotional, spiritual and cultural needs
• Achieve best practice through a commitment to excellence in client care, research and education
• Partner with consumers and the community to optimise client care
• Embrace internal and external review for the benefit of our client centred practice

Our Values

Banksia wants to grow a working environment that values and supports:

RESPECT upholding the unique personality, dignity, situation and choice of all
COMPASSION to empathise with all as they travel the journey of a progressive terminal illness and bereavement
PARTNERSHIP build and maintain effective relationships
EXCELLENCE continually strive toward best practice
INNOVATION to actively seek, develop and implement creative new ideas
INTEGRITY exercise honesty, transparency and ethical practice
“Many thanks for all the dedicated staff at Banksia. You all made such an enormous difference to our families lives in allowing our adored Mum to be cared for at home as she wanted.”

(Carer)
## Service Area & Client Statistics

<table>
<thead>
<tr>
<th>Client Statistics</th>
<th>2013/14</th>
<th>2014/15</th>
<th>2015/16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Clients Referred</td>
<td>611</td>
<td>600</td>
<td>624</td>
</tr>
</tbody>
</table>

### Source of Referrals

<table>
<thead>
<tr>
<th></th>
<th>2013/14</th>
<th>2014/15</th>
<th>2015/16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospitals</td>
<td>391</td>
<td>418</td>
<td>431</td>
</tr>
<tr>
<td>GP's and Specialists</td>
<td>101</td>
<td>73</td>
<td>82</td>
</tr>
<tr>
<td>Community Agencies</td>
<td>42</td>
<td>28</td>
<td>22</td>
</tr>
<tr>
<td>Aged Care Facilities</td>
<td>22</td>
<td>15</td>
<td>8</td>
</tr>
<tr>
<td>Families and Self referrals</td>
<td>55</td>
<td>66</td>
<td>81</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>611</td>
<td>600</td>
<td>624</td>
</tr>
</tbody>
</table>

### Clients Admitted by Local Government Areas*

<table>
<thead>
<tr>
<th>Area</th>
<th>2013/14</th>
<th>2014/15</th>
<th>2015/16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Banyule</td>
<td>245</td>
<td>192</td>
<td>219</td>
</tr>
<tr>
<td>Nillumbik</td>
<td>83</td>
<td>82</td>
<td>88</td>
</tr>
<tr>
<td>Whittlesea</td>
<td>212</td>
<td>225</td>
<td>215</td>
</tr>
<tr>
<td>Darebin</td>
<td>-</td>
<td>6</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>540</td>
<td>515</td>
<td>522</td>
</tr>
</tbody>
</table>

### Age of Clients

<table>
<thead>
<tr>
<th>Age</th>
<th>2013/14</th>
<th>2014/15</th>
<th>2015/16</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-30</td>
<td>9</td>
<td>9</td>
<td>7</td>
</tr>
<tr>
<td>31-60</td>
<td>98</td>
<td>97</td>
<td>84</td>
</tr>
<tr>
<td>61-80</td>
<td>259</td>
<td>245</td>
<td>227</td>
</tr>
<tr>
<td>81+yrs</td>
<td>174</td>
<td>164</td>
<td>204</td>
</tr>
</tbody>
</table>

### Place of Death

<table>
<thead>
<tr>
<th>Location</th>
<th>2013/14</th>
<th>2014/15</th>
<th>2015/16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home</td>
<td>131</td>
<td>102</td>
<td>100</td>
</tr>
<tr>
<td>Aged Care Facility</td>
<td>33</td>
<td>29</td>
<td>19</td>
</tr>
<tr>
<td>Inpatient Setting Designated Palliative Care Unit</td>
<td>143</td>
<td>168</td>
<td>176</td>
</tr>
<tr>
<td>Inpatient Setting Other Than Palliative Care Unit</td>
<td>73</td>
<td>61</td>
<td>59</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>380</td>
<td>360</td>
<td>354</td>
</tr>
</tbody>
</table>

* admitted clients refers to clients who required a specialist palliative care service and were admitted to Banksia Service Area & Client Statistics

* admitted clients refers to clients who required a specialist palliative care service and were admitted to Banksia Service Area & Client Statistics
“On behalf of our family we wish to thank the many wonderful people who made Dad’s last few months so happy and content. The support that was given to both Mum and Dad was a comfort and gave us the right direction in which to follow and made Dad’s life comfortable.”

(Carer)
Strategic Direction 1: Ensure clients living with a progressive terminal illness and their carers feel well supported

Our success depends on providing our clients and their caregivers with choice and confidence in the quality and availability of our services

Key Achievements

1. Improving access to our Service

We aim to ensure we have a proactive system that enables us to be responsive and consistent to new client referrals taking into account the variation in weekly referral numbers.

The elements of our standardised systematic approach that ensures consistent practice and processes when receiving, assessing and allocating new referrals consists of the following:

- Full time, dedicate Intake Nurse experienced and knowledgeable in specialist community palliative care
- Succession planning ensures there is more than one person who can act in this role
- Orientation to intake is structured and comprehensive to support consistent practice
- One point of entry for all new referrals
- Dedicated phone line for health professionals
- Comprehensive policy and procedure
- Use of triage form provides consistency in assessment in conjunction with clinical expertise of Intake Nurse
- System allows Intake to respond to increased demand by monitoring referrals and allocation of initial assessments daily with a low tolerance for non-compliance
- Detailed escalation processes are documented to ensure compliance with initial triage category
- Formalised processes that assess the urgency for admission:
  - Category 1 clients require initial assessment within 24 hours
  - Category 2 clients within 2-4 days (previously 2-5 days)
  - Category 3 clients within 7 days
- Proactive planning to respond to the average number of admissions per week
- Daily workforce planning meetings to proactively manage and respond potentially to daily changes in referral numbers and staff capacity
- Weekly review of intake KPI to enable early awareness of trends in referrals and effectiveness of responsiveness strategies
- Sharing information across the team by reporting intake outcomes to our Quality Committee to enhance the team’s awareness of importance of flexibility to ensure responsive approach to new referrals
- Service responsiveness KPI’s reported to the Committee of Management to support clinical governance.

The Intake Nurse monitors referrals and assessments in real time to ensure we have an ongoing awareness of service demand including periods of peak demand.

2. Meeting Service targets

We continue to exceed our annual targets set by the Department of Health (Vic) for Service Events. Service Events are defined as an “interaction between one or more healthcare provider(s) with one client (patient), which must contain therapeutic/clinical content and results in a dated entry in the patients medical record. The patient must be present at the interaction. The service may be delivered by telephone or face to face and the client must not be in hospital at the same time. The annual contact target has been divided by 12 to generate a monthly target. Refer to figure 3 for a summary of these results.

3. Working in partnership with our consumers

Our Consumer Advisory Committee is pivotal to our success in ensuring we provide a client centred approach to the care. In the last 12 months they have:

- completed an extensive review of our patient/ carer information booklet
- continued to participate on interview panels for prospective new staff
- reviewed our satisfaction surveys
- supported our external accreditation and were interviewed by surveyors and
- have assisted us to consider opportunities to recruit to this committee.

We value our Consumer Advisory Committee contribution to our service and appreciate greatly their time to work in partnership with us to plan, design and provide services that are more likely to meet the needs of clients and carers.

Thank you to the members of our Consumer Advisory Committee: Lynne Clarke, Margaret Clancy, Andrew Glide and Sonika Balyan.
Skilled Intake Nurse + robust initial assessment + triage framework = responsive access to service

Figure 1: Snapshot to demonstrate the variation in referral numbers from one week to the next

Example of weekly referral numbers

Figure 2: Demonstrates improved responsiveness over time in meeting triage key performance indicators for admission to the service

Percentage of clients seen within timeframe excluding Patient Initiated Postponement (Target 100%)

Figure 3: Contacts: Actuals Vs Targets for 2015/16

The organisation has a small but dedicated group of volunteers working as a Consumer Advisory Committee to ensure patient-centred care is at the centre of all care delivered. The inclusion of a Consumer Representative on the interview panel for each applicant for employment further confirms Banksia’s commitment to consumer participation.”

(Quotation from surveyor accreditation 2015)
4. Review Clinical Model

We have established a process to review our clinical model to ensure there is efficient use of existing resources provided equitably across our catchment and supports a client centred approach.

This year we completed part 1 of this review. We reviewed and implemented a new organisational structure to ensure that we had sufficient support services in place and clinical staff have clinical leaders within both the clinical and psycho social areas.

“Our family would like to thank you so much for the excellent compassionate care you gave our beloved and very missed Mother. You helped her and our family very much during her last weeks. All staff we dealt with were fantastic. They went above and beyond, in ensuring our Mother’s oncologist managed the pain issues. We really appreciated everything.”

(Carer)
5. Satisfaction from Clients, Carers and General Practitioner

We have reviewed our current systems to ensure client and carer feedback is actively sought from various points across the delivery of care, acted upon and used to improve systems and processes.

Over the past 18 months we have revised and strengthened systems and processes for gathering feedback from clients, families, carers and internal and external stakeholders to ensure care and services are provided and delivered in a manner that consistently meets best practice and expectations.

Our Feedback Framework enables and supports prompt identification of opportunities for improvement and activates review of systems and processes to identify opportunities for improvement, across the continuum of care from referral into the service to bereavement support.

Client/Carer ‘At one Month’ Surveys

We understand that seeking feedback while in care gives clients and carers the opportunity to tell us what we are doing well and what we need to improve during the care episode. We send surveys to clients who have been a client of the service for one month asking clients and carers to rate the quality of care and services received, communication and reliability. Since December 2015 Banksia has distributed 147 surveys to current clients and received 53 responses, a return rate of 36.1%. Our results demonstrate:

- 96.2% of respondents indicated that the care and services received from Banksia was what was needed and expected all of the time or often
- 88.7% of respondents indicated that our communication is provided in a way that is easy to understand all of the time or often
- 93.9% indicated our communication was provided in a way that was easy to understand all of the time or often
- 81.8% indicated that we were reliable and arrived/called when we said we would all of the time
- 93.9% fed back that they felt comfortable to ask us questions about the care and services we provided all of the time or often
- 97% of those surveyed confirmed that they were advised how to contact us in the future if they wanted to utilise our services again

Client/Carer Surveys at discharge

In August 2015, we strengthened our survey processes for clients who were discharged from our service as they no longer required specialist palliative care. The return rate was 22.6% (33 completed surveys).

The purpose of the survey was to gain feedback from clients (and their carers) about the services received and discharge planning processes and to identify opportunities for improvement:

- 75.8% of clients and carers indicated the care and services received from us was what was needed and expected all of the time or often
- 93.9% indicated our communication was provided in a way that was easy to understand all of the time or often
- 81.8% indicated that we were reliable and arrived/called when we said we would all of the time
- 93.9% fed back that they felt comfortable to ask us questions about the care and services we provided all of the time or often
- 97% of those surveyed confirmed that they were advised how to contact us in the future if they wanted to utilise our services again

Surveys for General Practitioner (GP)

We are committed to ensure communication with GP’s is effective and meets their needs and expectations. A survey is forwarded to each GP following discharge of a client. Clients are discharged from Banksia when they are assessed as no longer requiring specialist palliative care services or following death.

The survey tool and questions were revised in July 2015 in response to GP feedback. Further feedback on the survey tool was sought from GP’s in February 2016 resulting in a further reduction in the number of questions from 6 to 3.

GP’s are asked to rate our performance in relation to communication, support medication requests and discharge planning from 1 to 5 where 5 is excellent. Average ratings from July 2015 to June 2016 demonstrate consistently high levels of GP satisfaction regarding communication, requests for support medication and discharge planning. The return rate for 2015/16 was also encouraging at 21.6%.

Improvement strategies include use of an agreed ‘clinical handover template’ to support consistent and appropriate transfer of clinical information on admission to the service and when a client’s status changes, GP forums, ongoing survey of GP’s to gauge and monitor satisfaction regarding communication and collaboration.
7. Validation of the Service by External Accreditation

We participate in the Evaluation and Quality Improvement Program known at EQuIP 5, an accreditation program conducted by The Australian Council on Healthcare Standards (ACHS). Accreditation is a formal process to assist in the delivery of safe, high quality health care based on standards and processes devised and developed by health care professionals for health care services. It is a public recognition of achievement of accreditation standards by Banksia demonstrated through an independent external peer assessment of the organisations level of performance in relation to the standards.

In September 2015 we completed an organisational review of all of the criterion. The criterion are categorised under 3 functions: Clinical, Support and Corporate. We successfully achieved a 4-year period of accreditation.

All of the criterion with the exception of two were rated Marked Achievement. Marked Achievement (MA) requires that achievement against the elements for Little Achievement and Some Achievement have been demonstrated and that efficient systems have been established for collecting relevant outcome data on processes and preferably outcomes, monitoring of this information, evaluating current procedures and planning improvement in response.

Two criterion were rated Extensive Achievement. To achieve a rating of Extensive Achievement (EA) you must demonstrate achievement against the elements of Little Achievement, Some Achievement and Marked Achievement must be met. In addition, response to Extensive Achievement elements are review and extensive achievement against the criterion statement and / or its elements has been achieved.

To achieve this rating Banksia has been able to demonstrate extensive achievement in the relevant criterion based on the following requirement:

• internal or external benchmarking and subsequent system improvement, and / or
• proven, excellent outcomes in that particular criterion

Clinical Function: Surveyor’s Comments September 2015:

“Care plans have been developed from assessments and are well written, extensive and accurate to the client’s needs. A number of risk assessment tools are used to ensure best care is provided... There is good evidence of regular in-depth care review occurring. Consent is sought in a timely manner, with good explanation about what is being sought and why and where appropriate the carer /family are involved in the process...”

“There is good evaluation of care in the clinical area through clinical reviews, and current systems provide a framework for safe appropriate palliative care. Appropriateness of care is also assured through the assessment and intake systems and the partnerships with other service providers which ensure that palliative and end of life care patients and families are provided with the best mix of treatment, care and support by Banksia...”

“The organisation has undertaken an extensive review of its clinical care and shown marked improvement towards meeting the national PCOC benchmarks. There is much evidence that the staff are working towards ongoing improvement to assist them to meet all of these PCOC indicators and benchmarks into the future.”

Support Function: Surveyor’s Comments September 2015:

“In March this year, Banksia embarked on a significant evaluation of its quality, safety and risk systems and determined that their effectiveness and efficiency would be improved if these systems were integrated into one Framework which would in turn require improved responsibility structures and processes, policies and procedures and monitoring and review systems...The surveyors commend the organisation on its achievements in streamlining the governance and management systems to build more effective and efficient performance in quality, safety and risk management...”

“Staff and volunteer recruitment and retention practices are sound, and are guided by the current and planned needs of the organisation. Recent reviews have led to integration of functions within teams, to improve effectiveness and efficiency. Staff are well supported with regular performance reviews and development plans, as well as mandatory education and training, which is regularly reviewed. Personal support is provided to staff through an external organisation, which has been found by staff and by the organisation to be most satisfactory.”

“Clinical and corporate record systems are well monitored, maintained, and reviewed. Important software developments are underway, and when completed will provide the organisation with a thoroughly integrated and comprehensive client management system which will include registration and administrative elements, individual client clinical information and records, and organisation wide clinical audit and clinical outcomes data. Corporate records progressively being transitioned to electronic systems include the RiskMan risk/incident/complaints management and legislative compliance information and tracking system, and the PROMPT policies and procedures system. The standard operating environment system has recently been reviewed and updated.”

The outcomes of the accreditation process are a credit to our team who work very hard to ensure we are providing the best possible care that we can. (Julie Paul, Executive Chair)
Corporate Function: Surveyors Comments September 2015:

“The organisation has sound policies, procedures and practices to maintain safe environments in the office, patient’s homes and in the cars and environments through which staff and volunteers must travel to deliver services. Regular education, training exercises and drills together with well-designed checklists and communication systems, ensure that staff are volunteers are well prepared to manage themselves and others in the event of office, patients home or external emergencies or disasters. The surveyors recognise the thoroughness of Banksia’s bushfire plan and procedures. Security systems in the office building have been significantly enhanced to limited access by unauthorised or unknown personnel and training in aggression and violence management is in place to protect staff and volunteers. The survey team found no evidence of security breaches or incidents in the past two years. Surveyors observed that all of the staff are very aware of the security and safety risk inherent in their workplaces and environments and are diligent in actively maintaining the protective measures and procedures in place. The organisation’s approach to security and safety of all and an absence of events in the past two years supports a revised rating of EA.”

“Early this year Banksia completed a very thorough review of quality, safety and risk and policy and procedure systems which were evaluated and strengthened to improve rigor and effectiveness of same. The review findings identified opportunities for improvement in these systems which were then taken up by the Committee of Management and Executive. Surveyors commend the organisation on the achievement it has already made in implementing these strategies, and the evident embracing by staff of an integrated and more holistic approach to their roles. Banksia can look forward to confirming further gains and identifying new improvements when it undertakes its next evaluation of its Strategic Planning Cycle.”

We received four recommendations from the survey. All of the recommendations were identified as low risk and none were High Priority.

Criterion 1.6.3 - The organisation meets the needs of consumers / patients and carers with diverse needs and from diverse backgrounds

“BPCS has a good understanding of individual client cultural and linguistic needs, having extensively researched their community’s ethnicity. There is a small number of Aboriginal and Torres Strait Islanders in its catchment area as well as residents from such countries as China, Greece, Macedonia, Italy and India. Special needs are identified by assessment staff and are well documented on the care plan for each individual client. Direct care staff demonstrated a solid understanding of the cultural issues facing them in their daily routine as they deliver care. The organisation has developed a specific program to support staff to effectively care for Aboriginal and Torres Strait Islander clients as well as a cultural care policy for consumers with specific cultural and spiritual care needs. This builds on its organisation’s philosophy of person centred care which aims to respect each person’s individual and cultural needs. Extensive work has been done to build staff competency and practice in providing culturally safe and appropriate palliative care for Aboriginal and Torres Strait Islander peoples. Compulsory cultural awareness training has been integrated into all orientation programs run at BPCS. Additional training and resources are available through the Aboriginal and Torres Strait Islander Project Officer to support the staff to provide appropriate care. Traditionally the local Aboriginal and Torres Strait Islander community has been reluctant to access palliative care specific services in this area of Melbourne. To improve access, the organisation has developed an active partnership with the local Aboriginal Elders and worked together with them to develop a program that meets Aboriginal and Torres Strait Islander community needs and cultural requirements. The partnership completed a comprehensive review of all Banksia’s services and identified a number of opportunities where culturally specific care for Aboriginal and Torres Strait Islander patients living with progressive terminal illnesses could be improved. Banksia have now signed a Memorandum of Understanding with the local Aboriginal Community Elders Services to progress these ideas. For example, the organisation presents each new Aboriginal and Torres Strait Islander patient with a “dilly bag” home care kit, aimed at linking traditional Aboriginal and Torres Strait Islander culture with modern medicines and treatments. Acknowledging the extensive work completed in this area, surveyors recommend increasing the rating from MA to EA.”

(Surveyor Comment, Sept 2015)

E Criterion 3.2.5: - Security management supports safe practice and a safe environment

“A number of policies, procedures and plans are in place to address and optimise the security of staff, utilities, buildings, vehicles and equipment, and corporate and clinical information whether hard copy or electronic, and communication systems. Any new security risks are identified through recorded incidents and events in RiskMan, and are also looked for when the systems are reviewed as scheduled. Mandatory annual staff and volunteer training in the various security policies and procedures is provided, and in bullying prevention, and aggression and violence management. The policies and procedures on Bullying and on Workplace Violence are being merged, and new education to promote a safe workplace resulting from recent reviews is underway as a result of a recent review of security systems. Security risks may be present in patients’ homes and a thorough assessment tool is used to identify and mitigate these or to guide alternative means of providing the care needed. However unexpected risks can be found in these environments and staff and managers were seen to be diligent in identifying these and reviewing the effectiveness of the actions taken to address them. The survey team found no evidence of any breaches of or adverse security or safety events, and the breadth and depth of BPCS’s approach and measures to implement effective security and safety for staff, volunteers and patients and carers, supports a revision of the organisation’s self-rating of MA to EA.” (Surveyor Comment, Sept 2015)
Strategic Direction 2: Promote the choice to use home based palliative care

Our success depends on reaching out to more people in our community who choose home based palliative care.

We have agreed to engage a marketing consultant to assist us to:

- Review our vision and mission
- Develop a marketing plan to promote specialist community palliative care across our catchment area including culturally and linguistically diverse communities (CALD), vulnerable groups such as people living alone, homelessness, refugees and lesbian, gay, transgender, intersex communities (LGBTI) and our diverse stakeholders.

This will be a major focus in 2016/17.

“It was May when we first got the news, our last day of life, we don’t get to choose.

How long he’d have left, no one really knew, three months, six - it turned out to be two.

He had no fear of dying, accepting of his fate, his fear was being remembered, in a vegetative state.

Afraid of being institutionalised, with loss of dignity so the only real option left to us, was to keep him home with me.

The task ahead was daunting, maybe more than I could bear until I met the amazing team, from Banksia Palliative Care.

They answered all my questions, were behind me in every way, there for advice or to provide support, through any hour of the day.

Fiona explained everything; she was reassuring and so strong, I released my emotions easily, through Tom’s music and a song.

The weekly calls from Paul, such a comfort to know that he was there, Teorrah’s kindness a shining light, reminding me how much people care.

I only wished you’d known him, when he was still strong and well to hear about his life experiences, and the many stories he loved to tell. His “dry” humour will be remembered and his great mind so incredibly smart, these things the cancer couldn’t never diminish, nor his slowly failing heart.

Death is never easy, knowing we won’t see our loved ones again, but all we can hope for them is a peaceful end – and not to be in pain.

In the last moments of my Father’s life, I know he knew I was there arrangements made possible through the support of Banksia Palliative care.

So now as I move on in life, in my heart I’m feeling quite sad, still numb and not quite sure what I’ll do without my Dad.

But knowing he was able to end his life, in the way he wanted to live, I’m forever grateful to the Banksia team, for all of the support you give.”

(Carer)
Key Achievements:

1. Client Information System

We have reviewed our client information system which was a combination of an electronic and paper medical file. We have identified an electronic client information system that will enable us to move to a completely electronic medical file. This new system will enable us to:

• Increase client and carer involvement in care planning by completing care planning in the home with clients and carers.
• Have real time information to support client care. Staff complete documentation in the home at the time of the visit which can be viewed by other staff in the office in real time.
• More efficient and effective data entry for clinicians prevents duplication and removes the need for additional paper forms outside of the electronic system.
• Improved safety and efficiency in delivering client support and care for example; safety alerts and care plans can be reviewed by other staff as they are completed.
• Improved management of client flows, demand and waiting lists. The intake system is part of the new system rather than sitting outside in other data bases.
• Meets government reporting, accreditation obligations and provides useful data for Quality Improvement and measuring client outcomes.

All staff have completed training in the new electronic system and all clients will transition to the new system from the 1 July 2016.

2. Growing leadership expertise within the team

Our Intake Nurse Alex Talty was successfully nominated by us for the Rotary Youth Leadership Award (RYLA). This enabled Alex to attend a 7-day leadership conference that focussed on leadership skill development that would benefit participants personal and professional lives.

“RYLA is an incredible experience that provides mental, emotional and physical challenges; it enhances participants’ leadership skills through a carefully designed itinerary of exceptional guest speakers, activities and projects. I am confident that each person who attended took valuable lessons away with them at the conclusion of the conference.

RYLA taught me a great deal about professional and community leadership. It was also the beginning of so many wonderful friendships - it is truly life changing. Lastly, I would like to thank Banksia and Diamond Creek Rotary for this incredible experience.”

(Alex Talty, Intake Nurse)
Staff Values

Professionalism
Banksia staff are committed to ethical practice, accountability and the pursuit of excellence.

Wellbeing
Banksia staff work together to create an enjoyable, healthy and safe work environment and celebrate achievements by recognition and affirmation.

Respect
Banksia staff acknowledge and value the individuality and contribution of each person; recognising that diversity is crucial to a dynamic and successful environment.

Collaboration
Banksia staff recognise that effective team work requires a shared vision, flexibility and collegial teamwork.

Communication
Banksia staff strive for constructive and responsible communication. We value open, mindful communication as a means of enhancing our work environment.
Debra currently serves as the Treasurer. Her ongoing role is to ensure the viability of the organisation. Debra’s strategic direction ensuring the ongoing viability of the organisation. Debra recently started her own consulting business, focusing on system development for the home care sector and looks forward to contributing to Banksia’s strategic direction ensuring the ongoing viability of the organisation. Debra currently serves as the Treasurer.

Banksia’s President.

Therese currently serves as the Vice President. Therese commenced on the Banksia Committee in 2012. With a strong interest in the provision of high quality community based support she has extensive experience in the provision of community services at operational, strategic management and governance levels. She is a registered nurse with tertiary qualifications in community health and management. Therese became more aware of community based palliative care services when she and her family were able to support her father to die peacefully at home with the assistance from a palliative care organisation.

Therese is currently the Chief Executive Officer of the OC Connections Inc, an organisation that provides support to people living with an intellectual disability. Therese currently serves as the Vice President.

Debra joined Banksia Palliative Care Services Committee of Management in 2014 filling the recently vacated Treasurer’s role. She brings a wealth of experience to Banksia having managed Corporate Services including finance, infrastructure/purchasing and information technology & communication departments for VincentCare Victoria which included aged care, community & disability services. She also has a depth of understanding of the private sector where she worked for 12 years in the area of Finance.

Debra recently started her own consulting business, focusing on system development for the home care sector and looks forward to contributing to Banksia’s strategic direction ensuring the ongoing viability of the organisation. Debra currently serves as the Treasurer.

John joined the Committee of Management in 1994 and brings to Banksia over 30 years’ experience in Human Resources Management gained in both the public and private sectors, including over ten years as Executive Director of Human Resources at Austin Health and eight years as General Manager of Human Resources for RACV. He holds a Bachelor of Business Degree from RMIT University and is a Chartered Member of the Australian Human Resource Institute. John has served Banksia in both Vice President and President positions in the past.

Morgan joined the Committee of Management in 2009 and currently employed as Senior Associate at Russell Kennedy Lawyers. He brings many years of legal experience to the Banksia Committee of Management and enjoys working with clients to achieve positive outcomes. Morgan joined the Committee of Management to help Banksia continue to provide much needed services to those in their final stages of life.

Paul joined the Committee of Management in 2009 after retiring as Director of Information Technology at Austin Health. He brings to Banksia many years of experience in managing information systems and computer technologies, mostly in the acute health sector. His interests include risk management, corporate governance and electronic health records.

Paul has lived in the local community for many years. He was drawn to volunteer at Banksia after reflecting on his parents’ journey through terminal illnesses and an encounter with the Respecting Patient Choices program at Austin Health. Paul currently serves as Banksia’s Treasurer.

Therese Desmond
Therese currently serves as the Vice President. Therese commenced on the Banksia Committee in 2012. With a strong interest in the provision of high quality community based support she has extensive experience in the provision of community services at operational, strategic management and governance levels. She is a registered nurse with tertiary qualifications in community health and management. Therese became more aware of community based palliative care services when she and her family were able to support her father to die peacefully at home with the assistance from a palliative care organisation.

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John Richardson
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Paul Adcock
Paul joined the Committee of Management in 2006. Paul currently works at Alfred Health in the position of Director Technology Services and Transformation, responsible for Health Information Management, IT Infrastructure and Service Delivery. Since graduating as a Nurse and specializing in Critical Care, Paul has held a number of clinical and management roles in Public Health, Government and Private Consulting.

Paul’s interests include workforce leadership and change management. Paul lives in the local community with his wife and three teenage children and was drawn to volunteer at Banksia in support of the local community and the valuable services provided by Banksia. Paul has served Banksia in both Vice President and President positions in the past.

Jane Picton
Jane joined Banksia Palliative Care Services Committee of Management in 2009 and currently employed as Senior Associate at Russell Kennedy Lawyers. He brings many years of legal experience to the Banksia Committee of Management and enjoys working with clients to achieve positive outcomes. Morgan joined the Committee of Management to help Banksia continue to provide much needed services to those in their final stages of life.

Morgan Waters
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Paul Zanatta
Paul Zanatta (RN, B App Sci Nu, Grad Dip Health Couns, MPH, GAICD) joined the Committee of Management in 2014. With a background in nursing, Paul has more than 30 years’ experience in the health and human services sector in clinician and management roles, and has worked for more than 11 years in policy and research. He is currently Policy Manager for the Australian Medical Association (AMA) Victoria. He brings to the committee from his policy and research work a lens on measuring client outcomes and insights into the policy and regulatory environment surrounding health.
“What a wonderful group! Your expertise and professionalism was very much appreciated. The care given by you enabled us to keep my Husband home in the warmth and comfort of his home - a very therapeutic experience for us all.”

(Carer)
Whilst the Annual Report is an opportunity and commitment to report to our members and other stakeholders, it is also constructed as a marketing and public relations document to ensure Banksia’s programs and services are known to the broader community. We welcome your enquiries and interest on any of the programs and services outlined in the Annual Report.

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