

# MAKING A DIFFERENCE



Palliative care. Living well every day.

ANNUAL REPORT  
2024-2025

# ACKNOWLEDGEMENT OF COUNTRY

EPC acknowledges Aboriginal and Torres Strait Islander peoples as the Traditional Custodians of the lands and waters where we live and work. We respect their historical and continuing spiritual connections to country and community and pay our respects to their elder’s past and present. We commit ourselves to the ongoing journey of Reconciliation with those who hold the memories, traditions, culture and hopes of Aboriginal Australia.

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‘Our focus of care is living well every day’

# Chair/Chief Executive Officer Report



“Our achievements this year have been a collective effort, the result of countless acts of kindness, perseverance, and collaboration.”

This year’s Annual Report theme **Making a Difference** reflects the essence of our work at Eastern Palliative Care Ltd (EPC). Over the past year, that difference has warmed the hearts and homes of thousands of clients and families across the eastern region of Melbourne. Our staff and volunteers continue to serve with unmatched compassion and commitment.

Throughout the year, we have witnessed the profound impact of tailored support and holistic care, delivered by interdisciplinary teams who place empathy at the heart of every interaction. Our dedicated professionals have embraced new challenges with agility, striving always to empower clients and their loved ones to navigate even the most difficult journeys with grace and dignity.

Our partnerships with local hospitals and healthcare providers, community organisations, and cultural groups have expanded, enabling us to foster greater collaboration and reach more individuals than ever before. By listening deeply to the unique needs and aspirations of each person in our care, we have been able to offer not just clinical expertise, but also comfort, understanding, and hope.

EPC remains the largest provider of community-based specialist palliative care in Victoria, and it’s a responsibility we carry with great pride and purpose. Our models of care and service delivery are maturing as our Value Based Health Care innovations take shape. It means that the right care is provided at the right time in the right place for our clients so that they continue to live well every day – even with a life-limiting illness.

For our staff and volunteers, behind each client and family contact and conversation lies a deep respect for the lives and legacies of those we are here to serve.

Our Volunteer Program continues to flourish, and our pioneering Biography Program continues to ensure that our clients are supported not just physically but emotionally honouring their stories with dignity and humanity.

Inclusion guides our mission. We prioritise cultural safety for Aboriginal and Torres Strait Islander peoples and ensure accessible resources for our multicultural community.

Without any increases in our Government funding, innovation has remained central to our mission, as we have piloted new initiatives and embraced fresh perspectives to continuously refine the support we offer. Our commitment to evidence-based practice has seen us bring the latest insights and advances into the hands of our teams.

As a result, our services have become not only more responsive, but more personal - adapting to the evolving needs of our diverse community.

In every corner of our organisation, a spirit of learning and improvement thrives. We have invested in professional development and fostered a culture where feedback is valued, ensuring that every member of the EPC team is empowered to grow and contribute to their fullest. This culture of continuous improvement has become a cornerstone of our care, reinforcing our dedication to quality at every level.

Our achievements this year have been a collective effort, the result of countless acts of kindness, perseverance, and collaboration. Each milestone reached reminds us that the heart of EPC’s work remains unchanged: making a meaningful difference, one life at a time.

In late 2024 EPC was registered with ASIC as a Company Limited by Guarantee and in early 2025, we achieved full accreditation with The Australian Council on Health Care Standards. Both reaffirmed our commitment to excellence, good governance and accountability in everything we do.

We are especially proud of EPC’s role in shaping the future of palliative care beyond our own communities. Through participation in research, sector leadership and advocacy, we are championing reforms that improve access to our service, strengthen our workforce, and evolves our models of care in alignment with our strategic priorities and community expectations.

EPC’s Board and Executive remain dedicated to stewarding this vital work with transparency and foresight, ensuring that our organisation remains both grounded in our values and agile in a changing and challenging landscape.

To all who make EPC’s mission possible—our staff, volunteers, supporters, donors and partners—thank you. The difference you make is seen in every life touched and every moment cherished.



Margaret Stewart  
Chair



Adjunct Associate Professor Gaylene Coulton  
Chief Executive Officer

# About Us

Eastern Palliative Care Ltd (EPC) is the specialist community based palliative care service for the Eastern Region of Melbourne. Our services are provided in the local government areas of Boroondara, Manningham, Maroondah, Whitehorse, Monash, Knox and Yarra Ranges.

We support people with a terminal/life-limiting illness in their last year of life who have complex symptoms whether they be physical, psychosocial, emotional or spiritual.

EPC recognises that a person with a terminal/life-limiting illness may choose:

- To be cared for in the comfort of their own home
- To live as normally as possible.
- To receive assistance from specialist palliative care clinicians to manage symptoms.
- To be in the continuing care of their own doctor.
- To have the support of their family or caregivers.
- To be supported through the decisions and personal adjustments which inevitably accompany serious illness (emotional, social, financial, psychological and spiritual).



# Our Purpose

Our clients live with the best quality of life, before dying in their place of choice.

Clients, their families and carers are supported according to their needs and choices.

Our resources are managed wisely and sustainably to provide value for the community.

# Our Role

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



1  
Comprises nursing, medical, allied health and bereavement support.



2  
Is delivered in the place a person considers home.



3  
Support is available 24 hours per day, every week.



4  
Normalises the process of dying for our community.



5  
Neither hastens nor postpones death.



6  
Ensures the right people have access to our services at the right time.

# Our Values

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



**Compassion**

Empathy for others in their end of life experience by listening, accepting and actively responding to their needs.



**Excellence**

Delivering evidence based quality care, underpinned by ethical practice, research and leadership.



**Dignity**

Upholding the unique personality, situation and choices of people, valuing their lives in the face of death, and respecting their rights.



**Empowerment**

Building trust with people, that puts them at the centre of decision-making and enables control and choices.

# Our Highlights



Our inaugural **Palliative Care in Aged Care Education Expo** was a great success, booking out in just days.



Our Community Team Volunteer, Irene, was awarded **Volunteer of the Year** by Knox City Council.



Pound the Pavement 4 EPC raised **\$35,740**



Ellen and James gave a **Living Legacy donation** so that our nurses could receive a new copy of the Therapeutic Guidelines Palliative Care book.



Our EPC staff were successful in being selected to present at the **Oceanic Palliative Care Conference 2025**



Freemason's Foundation Victoria and Blackburn Freemason's Lodge donated **\$12,600** towards EPC's Duress Alarm program.



We honoured our donors with a **Donor Appreciation High Tea**.



A visit from the **Grand Master, Fra John Dunlap** and the **Grand Chancellor H.E. Riccardo Paterno di Montecupo** of the Order of Malta.



Nyeri Hospice in Kenya was our **first international participant** for our Train the Trainer Biography Course

# Value Based Health Care at EPC

Person-centred value in health care is defined as the measured improvement in a person's health outcomes relative to the social, environment and financial cost of achieving that improvement.

Globally, there has been a shift towards Value Based Health Care (VBHC), aiming to move healthcare delivery from prioritising volume (the number of services provided) to focusing on value (the effect of care on client outcomes).

Over the last year, EPC has continued to review its models of care and corporate services through a VBHC lens and have:

- Implemented a new model of care for our Allied Health Services to ensure many more clients can access psychosocial supports and complementary therapies.
- Implemented PerEmpo, a client focused tool that captures what is important to them in receiving palliative care and measures the effectiveness of our care in maintaining those values and goals.
- Equipped our team with the skills to deliver video-telehealth services when appropriate.
- Reviewed and improved our model of care within Residential Aged Care Facilities.
- Reviewed our accommodation needs for the future to ensure our offices are placed in the midst of our client base.
- Improved our use of data to inform our work and strengthened our reporting of service delivery.
- Streamlined our referral processes.
- Achieved accreditation under the National Community & Primary Health Care Standards.
- Undertook a major review of our staff safety processes and equipment, providing education and duress alarms for every clinician.

Bringing clinicians, consumers and subject matter experts in to co-design these initiatives has been integral to implementing these changes and our journey will continue in the years ahead. We would like to thank the many consumers who have generously volunteered their time and expertise to our VBHC initiatives.

**"EPC has continued to review its models of care and corporate services through a Value Based Health Care lens."**



# Governance

EPC operates as a Company Limited by Guarantee, a legal structure designed to ensure accountability, sustainability and the highest standards of governance.

## Governance by a Board of Directors

Our organisation is governed by a dedicated Board of Directors. The Board is comprised of experienced professionals who bring a wealth of knowledge and expertise to their roles.

The role of the Board is to provide a leadership of and oversight over the Company’s Governance, business and strategy. The Board’s key objectives are to:

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

In fulfilling its objectives, the Board will determine and monitor the:

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

The Board of Directors meet regularly to review the organisation’s performance, address challenges and seize opportunities for growth and improvement. Their commitment to transparency and integrity ensures that our organisation remains true to its purpose.

In December 2024, EPC transitioned to a Company Limited by Guarantee, now comprising three member organisations: St. Vincent’s Hospital (Melbourne) Ltd, Order of Malta Hospice Home Care (Vic) Ltd and Outer East Palliative Care Service Inc.



(L-R) Top right corner: Mr. Timothy Gorton (Deputy Chair)  
Back row: Dr. Ian Parry, Dr. Margaret O’Donnell, Dr. Raymond Snyder, Ms. Christine Fyffe, Dr. Andrew Barnden  
Front row: Prof. David Kissane, Ms. Margaret Stewart. (Chair), Dr. Tamsin Bryan

# Governance

To support its governance and operational functions, the Board is assisted by several key Committees. These Committees assist the Board in fulfilling its responsibilities to the Company members by providing independent and objective review and advice on and assistance in their respective areas of expertise:

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

The Ethics Committee oversees EPC’s participation in research ensuring alignment with the principles and parameters of our Code of Ethics. Areas of research undertaken in 2024-2025 include:

**HELP (Co-designing Alliance for Palliative Care Community Intervention using Technological Innovation – Healthy End of Life Program)**  
Dr Andrea Grindrod, La Trobe University Public Health Palliative Care Unit, School of Psychology and Public Health

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

**UTS Rapid Program - Benzodiazepines for breathlessness**  
Dr Caitlin Sheehan – IMPACCT, Faculty of Health, University of Technology Sydney

On behalf of EPC Management, we would like to sincerely thank the dedicated volunteer Directors, Committee members and staff involved in all the Committees for their time, knowledge and expertise and their willingness to share this to benefit EPC.



“Their commitment to transparency and integrity ensures that our organisation remains true to its purpose.”



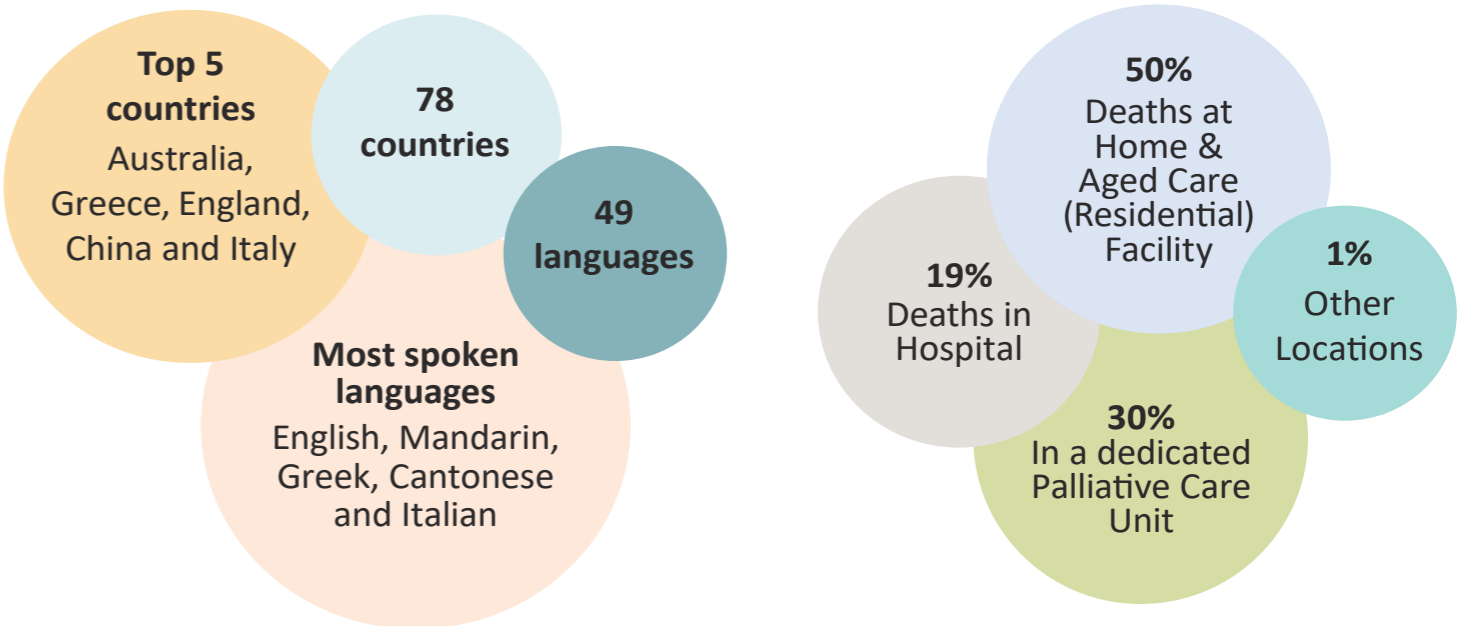
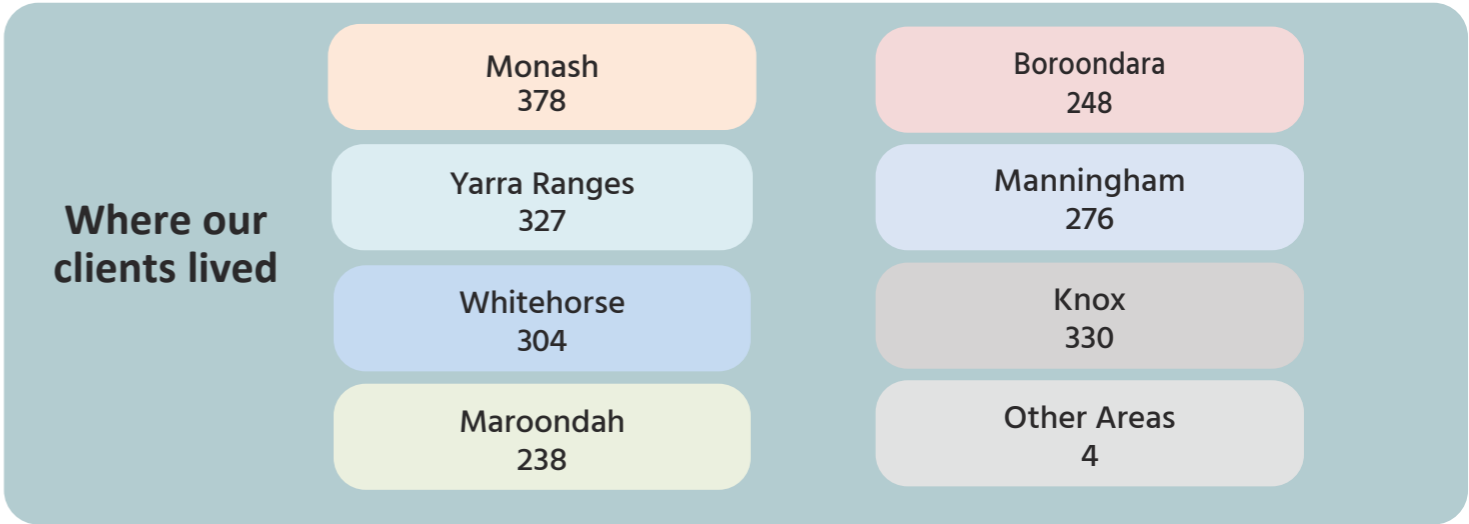
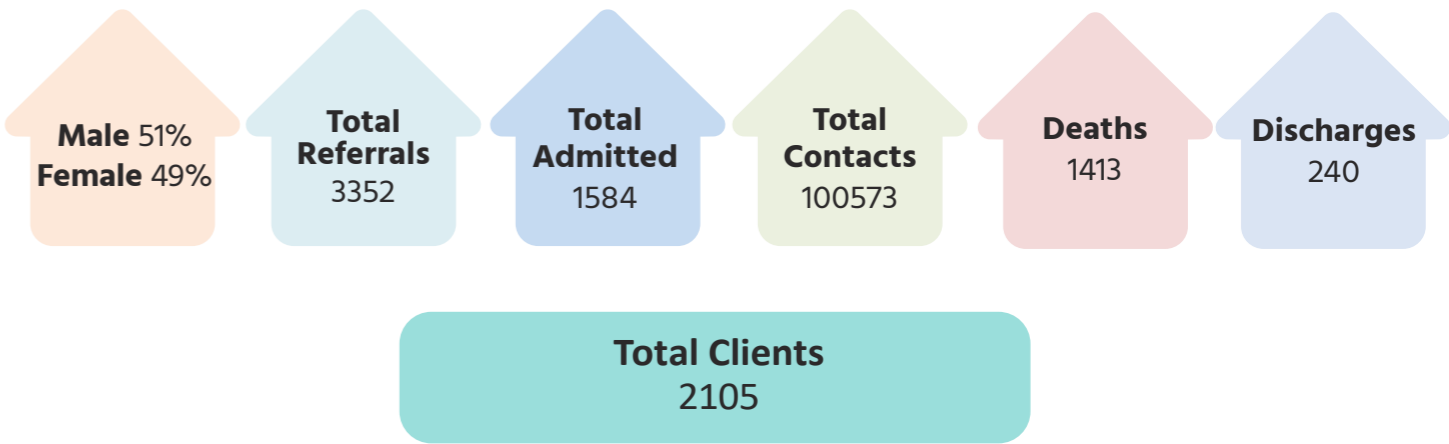
EPC’s Consumer Advisory Committee



# Meet Our Clients

## EPC Client Profile

### EPC Client Profiles for 2024-2025



# Robyn and Ethan’s Story

Our beautiful Ethan was born with a very shortened life expectancy of only six months - one year. He came to live with us at ten months via foster care, and he remained in our permanent care until his passing at 14 years and four months old. We have a very close relationship with Ethan’s birth parents, and they are considered a very valuable part of our family.

I was 43 years old when Ethan came to live with our family, and I was his primary carer throughout his life. Loving, looking after and caring for Ethan were some of the most beautiful and painful experiences of my life. Losing him was like I had lost a limb and my heart was so very broken. But I cherish every moment I had with him, and I would give everything I have to have him back with me. I miss giving him kisses and hugs. I miss his laugh and his funny noises and even his poopy nappies!

Ethan was born with Hydranencephaly and therefore he had fluid in place of parts of his brain. Although he was profoundly disabled, he was a very happy little man, and such a huge part of our family. I had always made the decision very early on, that I would never keep Ethan here for me, even though I miss him each and every day, I know that I made the right decision to let him go, as his little body was tired and his seizures were getting so much harder to manage. It was both the easiest and hardest decision of my life. I also made the decision that I did not want him to pass in hospital if I could manage this. As a result, Ethan had the most beautiful passing that I could ever have imagined. So comfortable, so peaceful and with us all around him. The only thing that was wrong was that he left, and we will never see or touch him again.

We are situated in the leafy Eastern Suburbs in an old 1927 Californian Bungalow house, that we have had renovated a couple of times, always with Ethan in mind. We have lived in the same house for nearly 30 years.

As Ethan’s primary carer and Mum, I obviously did the most for Ethan, as I was not working and my husband Derek was the main breadwinner of the family. But Derek was and always will be a great support for me, and he has been my strength to get through this time, obviously along with my family (my other 4 children and their partners), and of course Ethan’s birth family. We always talk of him every day. I would also say that Ethan’s care team were obviously a great support to me always, and I miss seeing them and dazzling them with all the things that Ethan had overcome. I will never forget the Royal Children’s Hospital (RCH) Palliative care team, who felt like family from the first time we met. They were there to listen to my raw emotions, and to support me and the family and to guide us through this last part of Ethan’s beautiful but too short life. They will always mean the world to me.



Robyn and Ethan

# Robyn and Ethan’s Story

It was the Palliative Care team at RCH that reached out to EPC as the outreach program to work together with them so that Ethan could pass at home. I can honestly say that the support and compassion we received from everyone at EPC was amazing. We had music therapy, and we sang to Ethan. He had massage therapy, and nurses who were here everyday near the end. They were so beautiful with Ethan, especially Amber who I will never forget. She bought a beautiful and fragile orchid to give to me when Ethan passed. She was the one who I called when he died, and who had been here through the day. I will never forget her kindness and how gentle she was with us that night.

During Ethan’s last months we were a part of the EPC Biography program. This was a lovely way to talk through Ethan’s life and relive some of the beautiful memories we had with our Ethan. It is such a lovely journey to take and I treasure the books that we have given to our children, that they now read to their children to keep Ethan’s memory alive.

As I managed all of Ethan’s care myself, I really didn’t want or need anyone to help me with his day to-day care, as he was full 24hr care for his whole life. But if I ever needed any help, I knew that help was available. The only extra costs would be the medicines for Ethan near the end, but it was a small price to pay to keep him comfortable.

The greatest challenges I had and we had as a family was the waiting and the wondering when we would lose Ethan. One day he would have a good day, and the next a bad day but I was most grateful again, that Ethan could sleep the last few weeks of his life between my husband and I and I could cuddle him all night and be there when he needed me. We could tell him over and over again how much we all loved him, and everyone could have their own private time with him.

Ethan took his final breath in his own bed and he just quietly went off to sleep, so peacefully. I consider it an absolute privilege to be there holding his hand when he left, and to quietly and privately give him his final ever bed bath before he left our house in the care of the loveliest ladies who loudly played Ethan’s favourite Michael Bublé song with the windows down all the way up the street in the early hours of the morning. They also took a flower from our garden that went along with Ethan. Such a beautiful touch.

The advice I would give to people is to make the choice that suits you and your loved one, you can’t change your mind after they’ve gone. I would also say that take every thing that is offered to you, even if you don’t think you need it. The bereavement counselling that I had from Lisa at EPC was invaluable, and it was so good to just have someone to talk to and to vent to!

Our family cannot thank EPC enough for everything they did for our beautiful Ethan and our family. We are forever grateful for all of the care and attention you gave us at all hours of the night and day. There was always someone on the other end of the phone who could help you.

I know we made the right choice to have Ethan pass quietly and comfortably in his bed at home, but there is no way that we could have managed everything without the wonderful nurses, therapists and staff at EPC and of course RCH. Even after Ethan had passed away things ran smoothly. I had already spoken with a funeral home a few weeks earlier, which I know may be hard for people, but I wanted to make my choice with a relatively clear head. I know that without EPC working in collaboration with RCH Palliative Care that things would have been so very different. Thank you EPC for giving our Ethan the very best passing that was possible. We are forever grateful.



**“The support and compassion we received from everyone at EPC was amazing.”**

Thank you Robyn for sharing your story.

# In Remembrance of Lockie

My older brother Lockie passed this year, aged 33. He was, still is and always will be my hero. Although his intellectual disability of down syndrome impacted many of his physical and social abilities, including communication and speech, we had a very special connection. He made me feel safe and understood. He was always there when I needed him, with unconditional love. His smile and laughter would light up the room. I'm so lucky to have had such a beautiful soul as my brother.

Lockie was cared for by EPC for approximately 2 weeks, after a 6-month period from diagnosis. Before EPC, Lockie was in hospital for 13 weeks, with deteriorating health.

Our EPC nurses were especially compassionate and supportive during this time and walked us through what the next few weeks may look like. It was helpful to know what was to come, and how to best be prepared. EPC nurses were always available when we had questions and concerns.

During this time, we utilised EPC's volunteer professional photographer service. All the family were photographed at a picnic by a river. The photos we received truly capture the love we shared, and how peaceful Lockie felt that day.

I'm grateful for the way Lockie passed. It was peaceful, with limited pain, due to medication our EPC nurse had provided and shown us how to administer. We were also prepared for Lockie to bleed externally and we knew how to manage that too.

Despite this high risk Lockie passed quietly, with all of us in the room saying goodbye and holding his hand. Although this is the worst thing to happen to anyone, I am grateful that he passed calmly and quickly, without pain or discomfort.

The next morning, when our EPC nurse came to confirm that Lockie had passed, I asked her if she could say it out loud, as I was in disbelief and needed to hear it. When she did, she gave me a great big hug. I really needed her words and support in that moment and it's something I won't ever forget.

Part of me is still processing that he's gone. Part of me always believed he would get better and we would have years of more time.

My advice to anyone caring for someone at home with a terminal illness is to utilise EPC's services and make your time memorable. Get professional photos. Play games together. Call EPC if you have ANY questions or concerns, big or small. And most importantly, be kind to yourself, and be present with your loved one while they're still here.



Lockie

# In Remembrance of Lockie

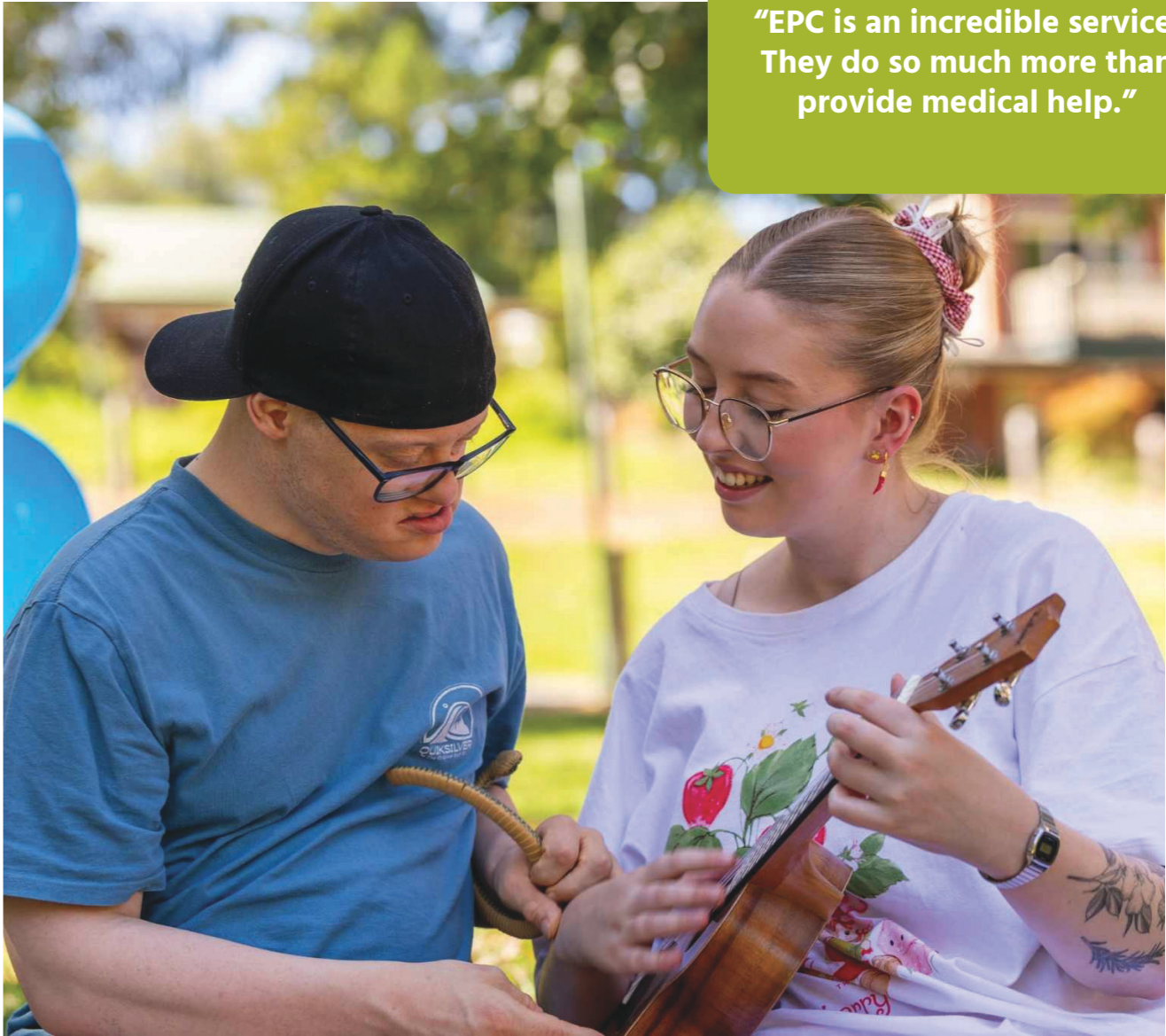
EPC is an incredible service. They do so much more than provide medical help. They prepare you for their passing and provide experiences like the professional photographer and bereavement counselling. Most of all, everyone at EPC is so compassionate and kind. I am grateful that Lockie, and all the family, were supported by EPC and that we had final loving memories with him in less pain and discomfort.

Andrea and her family have created a team, The Lockstars, in memory of her brother Lockie at Pound the Pavement 4 EPC this year.

Thank you Andrea for sharing your story.



"EPC is an incredible service. They do so much more than provide medical help."



Lockie and Andrea

# Bec's Experience with EPC

Ten years ago, our family benefited from EPC's incredible support so we could care for my mum, Roz, at home. It was a difficult time but it was made possible because of EPC.

Mum kept many of her feelings about dying to herself, but she was quite vocal about how wonderful her EPC care team was. Visits were always focussed on mum and her needs at the time and the team gently reassured us in every visit.

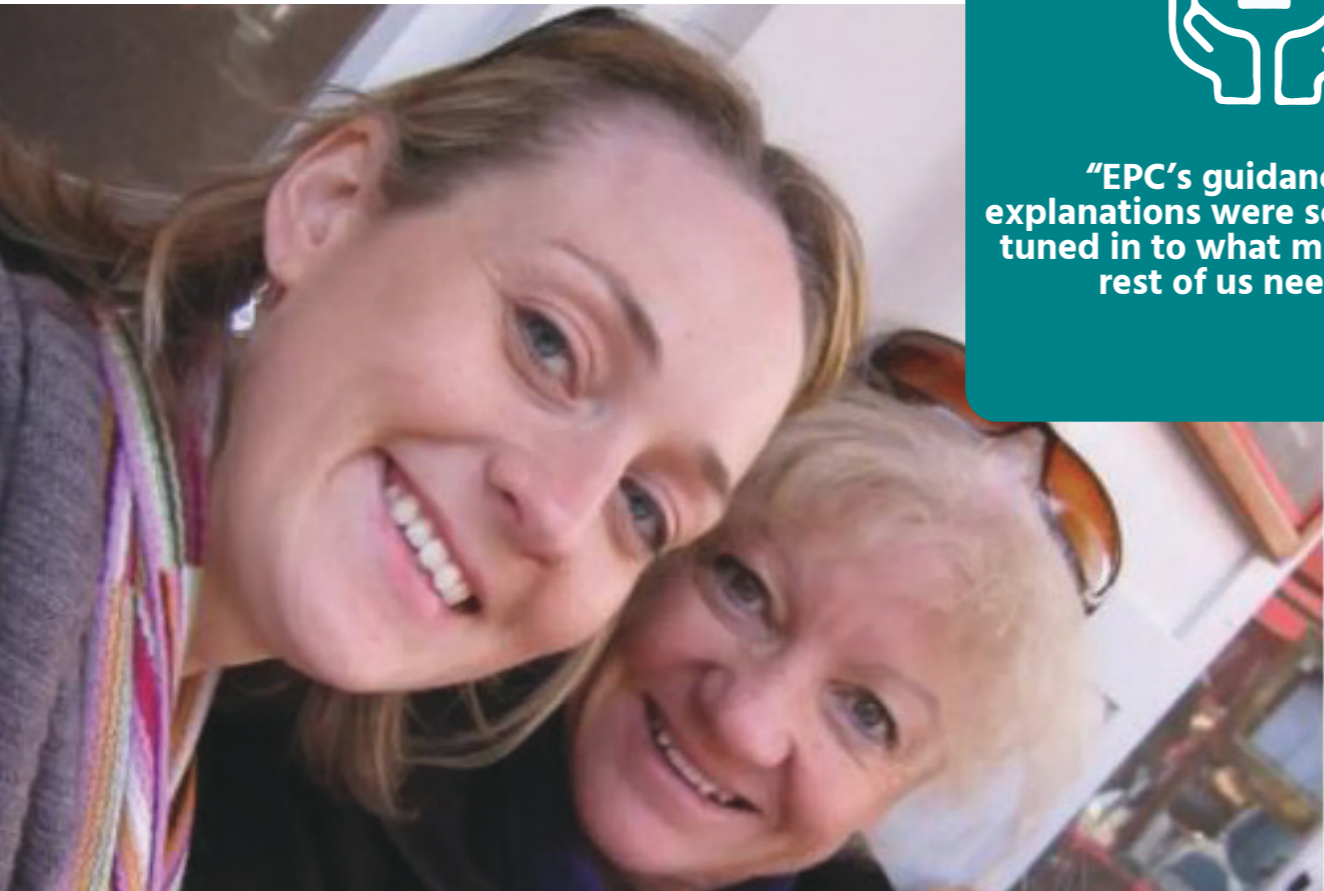
During mum's final days, I was so grateful to be involved in caring for mum. A decade on, the memory has faded a little, but I know I felt a lot of responsibility. As a nurse myself, I wanted to do as much for mum as she would allow, and as a family we were totally enabled to participate. EPC's guidance and explanations were so sensitively tuned in to what mum and the rest of us needed. This skill is an art – and it is difficult to capture in words.

Before she died, mum particularly encouraged my sister and I to connect with Peggy, our Palliative Support Clinician. We found great value in this both before and after mum died. Peggy's input was so gentle, so kind. We still remember it with gratefulness. There was support for my dad and brother too. For a time, Dad joined in on a walking group and I think most of us attended a bereavement care session. Just in our own time and pace.

Two years ago, I joined EPC as a Volunteer Consumer Advisor. I am now the Chair of the Consumer Advisory Committee and it's a privilege to be able to input and consult on a range of EPCs work. From reviewing consumer information, to contributing to EPC's strategic plan, I witness how EPC is firmly focussed on client centred care in every aspect.

Last year, I joined the Pound the Pavement 4 EPC to walk in memory of mum and as a mark of sincere thanks for helping mum and my family through that time.

Thank you Bec for sharing your story.



Bec and Roz



“EPC’s guidance and explanations were so sensitively tuned in to what mum and the rest of us needed.”

# Meet Our Team



# Working at EPC

I came to nursing as a second career and joined EPC just as COVID hit Victoria in 2020. I learned to be a community palliative care nurse while socially distancing and standing on the side of the road putting on full PPE. But let's take a step back. What inspired me to join EPC?

I had known I wanted to be a palliative care nurse from early on in my nursing training, and was lucky enough to gain practical experience during my study and in my nursing graduate year. Community palliative care appealed to me as I liked the idea of working with clients, in their homes, and I was fortunate that EPC was advertising for nurses when I completed my graduate year. EPC is the largest Victorian community palliative care organisation and I felt I would gain a solid grounding in community palliative care by joining them and happily they offered me a role with their nursing team. Over the five years I have been with EPC I have been grateful for the opportunities that I have been given to grow and develop in my role.

Today I am the Clinical Nurse Consultant of the Region Wide Services team. This role is very diverse and involves managing the Referral Intake nursing team, the Aged Care nursing team and the Afternoon nursing team. As the Region Wide Services team, we work to support the three regional based teams to deliver great care to our clients. My role also involves project work that is preparing EPC for the changing future that is galloping towards us. In particular this past year I have led a team working with a time-limited grant to develop our engagement with Residential Aged Care Facilities and their residents, while also working to explore and integrate a new tool that allows our clients to share their personal values and goals which will then guide how EPC cares for them.

What I enjoy most about my role is that it is a combination of nursing management and project work. I am able to stay in contact with the clients, even doing a home visit on the odd occasion, while also working to ensure EPC has a secure future. No-one likes change, but change is really the only constant in these challenging times. Being able to work with colleagues to ensure EPC will be in a great position in the coming years to continue its core client work is very rewarding.

And on a fun note, I have run the 'Bake Your Day' stall at the Pound the Pavement 4 EPC fundraiser for the past two years, and am starting product development for this year. I love that EPC supports me to use my hobbies for such a great cause, adding another layer of variety to my role.

Thank you Kerry for sharing your story.



Kerry



# Volunteering at EPC

In the early part of 2013 my partner was sent home from a lengthy stay in The Alfred hospital – he had been living with Multiple Myeloma for almost 10 years and all the available treatment had stopped working. We were put in touch with EPC.

Thanks to the kindness and support of EPC nurses and volunteers we were able to have the last months of his life in the comfort of home. I had taken 'Carers Leave' from work and so was free to just be here. As time went on I became more appreciative of the support being offered to us by EPC – sometimes a phone call in the middle of the night, sometimes a volunteer called to give me a much needed 'time out' for myself. During those weeks I decided that once I retired from full-time work, I would make enquiries about volunteering with this organisation that had helped us so much. And that's what I did! In 2019 I did my training at Head Office in Mitcham and chose to be a 'Community Support' volunteer. I have had many clients since then – all ages, from all walks of life and without exception, all very appreciative of my time spent with them.

I'm also part of the Bereavement Support team and help at Bereavement Information sessions when time permits, as a volunteer speaker. This is such a worthwhile program. We can reassure newly bereaved family members/friends that whatever they are feeling at any given time after the death of a loved one is "quite normal". This really is encouraging when it's so easy to believe that no one else has ever felt like this. I too attended one of these same sessions in 2013.

In the Bereavement Program I am occasionally linked with the carer of a client who has recently died. This is a six-session program offered over a 12-month period following a death. To be trusted with heart-felt stories, despairing tears and honest feelings is a privilege I never take for granted.

During our EPC training we were encouraged to join a Network Group – to support each other in the various volunteer roles we'd signed up for. The network group I belong to has long since turned into a group of close friends – who feel very comfortable about sharing their good, not-so-good, frustrating and encouraging stories about their experiences. We've helped each other with suggestions, technical help (especially the BIO members of our group) and generally support each other with whatever our current role at EPC is.

Being a volunteer with EPC – I thoroughly recommend it! Give a little of yourself and you are given so much more in return.



Irene

Thank you Irene for sharing your story.

# Clinical Services

## Nursing, Medical and Allied Health Services

EPC is proud to present the outstanding work of our clinical team, which encompasses a multidisciplinary approach, including Nursing, Medicine, and Allied Health practitioners. Working collaboratively, our team provides essential palliative care services 24 hours a day, seven days a week. This includes thousands of face-to-face visits, phone and telehealth interactions with clients and carers in need of specialised palliative support.

Our nursing and medical team comprises of registered nurses, nurse practitioners, physicians, and clinical educators. The allied health team consists of three clinical disciplines, supported by family support (psycho-social-spiritual), bereavement services and client resources (equipment). All our clinicians are tertiary-qualified, with the majority holding post-graduate qualifications and excelling in their respective fields.

In the 2024-2025 financial year, our efforts focused on making a difference through meaningful improvements for EPC clients, carers, volunteers, and our teams. A key initiative was the incorporation of VBHC principles, which has actively engaged consumer and clinician voices in driving impactful change.

## Key Projects and Initiatives

### Allied Health Models of Care Implementation

In August 2023, EPC underwent an external review of its allied health models of care, led by experts in Value Based Health Care. As a result, recommendations were implemented, including the development of a Best Practice Guide and the introduction of pilot programs for music therapy, massage therapy, and volunteer services. The pilots demonstrated a reduction in time from referral to first contact with clients, while also improving the quality of referrals, which are now more detailed and clinically relevant.

The psycho-social-spiritual model, piloted by the Central Team, exceeded expectations with notable improvements in early intervention and coordinated care. This model has since been rolled out organisation-wide, resulting in a 74% increase in joint assessments between nursing and palliative support clinicians. Additionally, the number of clients receiving a psycho-social-spiritual assessment within seven days of admission increased by 95%.

These improvements have led to better clinician communication through morning huddles, joint visits, and collaborative care planning, all contributing to enhanced client outcomes and clinician satisfaction.

### Comprehensive Palliative Care in Aged Care

In June 2024, EPC received a recurrent grant from the Victorian Department of Health as part of the Comprehensive Palliative Care in Aged Care National Project Agreement (CPCiAC) (2023-24). This funding

# Clinical Services

supported projects aimed at enhancing palliative and end-of-life care outcomes for aged care residents and facilitating the projects transition into practice in the 2024-25 period. As part of this initiative, EPC launched the Aged Care Model of Care Phase 1 on July 2, 2024, following its development in the 2023/2024 period.

An Aged Care Project team was established to implement Phase 1 of the model. The project scope identified key focus areas, including:

- Standardising practices within the Intake Team and extending intake hours to process Residential Aged Care Facility (RACF) referrals.
- Early intervention for residents at risk of being declined for palliative care services.
- Strengthening dialogues with other Victorian Community Palliative Care organisations.
- Enhancing the psychosocial approach to care for aged care residents, supported by dedicated Palliative Support Clinicians.
- Providing internal and external education on end-of-life care for aged care facility staff.

The Aged Care Project has enabled EPC to develop new service delivery models for RACF residents, improve staff education, and foster better communication between organisations.

## Project Highlights:

**Aged Care Intake Summit (February 25, 2024):** EPC hosted 13 staff from other community palliative care organisations to share insights from the Aged Care Referral Review and discuss challenges and solutions for improving intake processes.

**Aged Care Education Expo (March 13, 2024):** EPC coordinated an event that connected RACF staff with resources and education providers, including Care Search and PEPA Aged Care. The event received strong interest, with all 50 tickets allocated early.

## Performance and Data Integrity

Throughout the year, EPC has placed a strong emphasis on enhancing data integrity and clinical measurement. This effort, supported by our Health Informatics Administrator, has enabled us to track trends in client care and more effectively allocate resources during peak demand periods. These data insights will be instrumental in directing appropriate care to clients in real-time. Looking ahead, EPC will implement Patient Reported Outcome Measures (PROMS) and Patient Reported Experience Measures (PREMS) to further enhance service quality and client satisfaction



# Clinical Services

## Pharmacist Pilot Program

EPC launched a pilot pharmacist program in April 2025, led by Robert Wojnar, to improve medication management for palliative care clients. Given the complexity of medication regimens in palliative care, a dedicated pharmacist is well-positioned to reduce medication-related risks and support symptom management. This program is part of the Pharmaceutical Society of Australia’s (PSA) initiative to pilot new community-based palliative care pharmacist roles across Victoria, New South Wales, and Queensland in 2025-2026.

The program aims to enhance client care by integrating pharmacists into the clinical team, improving communication and coordination with healthcare providers. Through this pilot, EPC seeks to provide valuable data to advocate for a permanent role for pharmacists in community palliative care settings.

## Registrar Program

In collaboration with St Vincent’s Hospital Melbourne (SVHM) and Eastern Health (EH), EPC supported the role of a Palliative Medicine Advanced Trainee Registrar. Our inaugural registrar, Dr. Jack Wang, has now transitioned to a permanent position with EPC’s Central Team as a Palliative Care Physician. This partnership highlights EPC’s commitment to advancing medical training in palliative care.

Our engagement in this program means that EPC will continue to provide medical support across both sites, ensuring that clinicians are supported to manage complex client cases. The Registrar role has been instrumental in enhancing client and family care while simultaneously providing professional development for junior palliative care medical staff

## External Engagements

EPC continues to strengthen its international partnerships. In early 2024, Dr. Dream, a Palliative Care physician from Siriraj Hospital, Bangkok, participated in an observational program at EPC, which was deemed highly successful. In November, Dr. Piyasak, another Palliative Care Fellow from Siriraj, returned to further his learning with EPC’s expert clinicians.

EPC also had the honour of hosting a delegation from Singapore’s National University Polyclinic Health Services in March 2025. The delegation, which included senior physicians, nurses, and allied health professionals, aimed to observe EPC’s integrated palliative care services and learn from our multidisciplinary approach.

Closer to home, EPC connections to key stakeholders remains strong as we stand committed to improving health outcomes in community palliative care. Our partnerships include (but are not limited to) Palliative Care Victoria, St Vincent’s Hospital Melbourne, Eastern Health, Austin Health, MND Victoria, Palliative Care South East, Banksia Palliative Care, Palliative Care Outcomes Collaboration (PCOC), Melbourne University, La Trobe University, Victorian Community Palliative Care CEOs and Clinical Managers forums, Melbourne City Mission, Mercy Health and regional health services.

# Clinical Services

## Acknowledgements

The work of EPC would not be possible without the dedication of our nurses, palliative support clinicians, doctors, nurse practitioners, occupational therapists, massage therapists, music therapists and volunteers.

We also extend our gratitude to our exceptional administrative and office-based staff, whose professionalism and support are integral to the success of our services.



“Our efforts focused on making a difference through meaningful improvements for EPC clients, carers, volunteers, and our teams”



# Volunteer Services

## EPC Volunteers: Enriching lives through every day acts of kindness – both here and beyond.

EPCs Volunteer Services team, continued to make a significant impact, with volunteers contributing 20,335 hours of service. This equates to \$ 947,971 worth of service according to the ABS. While the scale of their contribution is impressive, it's the stories and support behind the numbers that truly reflect their value as essential members of the EPC team.

### Volunteer Contributions

Volunteers supported people of all ages by creating biographies that captured meaningful life stories. These included special versions for children and grandchildren, and adapted formats for individuals with complex needs, such as those with brain injuries, intellectual disabilities, or language barriers.

Cloud-9 hair dressing volunteers provided professional hair care, helping clients feel confident and prepared for celebrations and milestones. Community volunteers offered companionship and desperately needed respite, tailoring their support to each individual's needs. Many clients received hand-crafted rugs and cushions made from meaningful fabrics, offering warmth and emotional connection. One staff member said **"I just gave a crocheted rug to a new client. She didn't have the heater on because of power costs (on one of the coldest mornings of the year) and absolutely LOVED the rug, put it on her knee straight away and several times commented on how warm it was."**

Canine volunteers (of all sizes) brought comfort (and licks) through visits in the home and our volunteers also supported our clients by walking their dogs – providing much needed peace of mind for their owners.



A very grateful Hugmaker recipient

Smilemaker photographers captured moments for families, adding images to biographies and creating stunning keepsakes. Volunteers also supported the bereavement team through regular check-ins with bereaved carers via the phone or in person, and by supporting our walking through grief and bereavement information programs.

Additional contributions came through ambassador roles, committee representation, administrative support, and presentations to EPC staff, enriching the organisation with lived experience and advocacy.

### Centre for Volunteer Excellence (CVE)

The CVE continues to attract national and international interest as training is offered to assist others to set up their own volunteer biography programs.

This year was one of firsts:

- Training the CWA in rural Queensland.
- Training a trainer who is setting up a program exclusively for First Nations People.
- Training three participants from Kenya (via Zoom). They were sponsored by EPC. As part of their thanks they said:

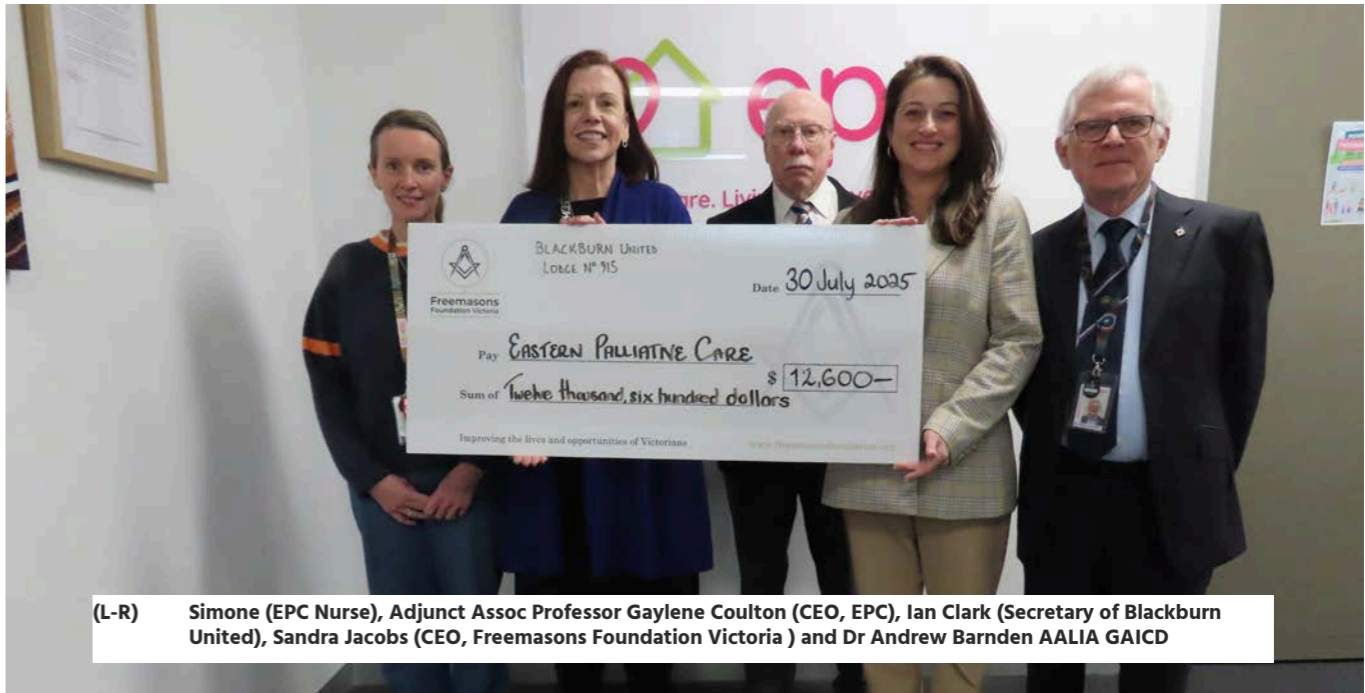


**"We are doing a new thing through the training you have given us. Currently, in Kenya, biography is only for the rich and the politicians. We will now be bringing this in for patients in our hospice. It will have a big impact on the community we serve."**

# Public Relations and Fundraising

This year has been a year of consolidation and review. Whilst we look to modernise, digitise and realise our full potential at EPC, we have also needed to rely on donations more than ever with our government funding not keeping up with continued rises in operating costs.

In addition to support from our community and individual donors, EPC has been successful in applying for two community grants from Freemason's Foundation Victoria and Blackburn Freemason's Lodge who generously donated \$10,000 and \$2,600 respectively, which is a total of \$12,600 towards EPC's Duress Alarm program. This generous donation will help to equip our clinical staff with a small discrete Duress Alarm, which provides them with help at the press of a button. This means our staff can feel safe and confident to concentrate on their important work of helping terminally ill people in our community to live well every day.



(L-R) Simone (EPC Nurse), Adjunct Assoc Professor Gaylene Coulton (CEO, EPC), Ian Clark (Secretary of Blackburn United), Sandra Jacobs (CEO, Freemasons Foundation Victoria ) and Dr Andrew Barnden AALIA GAICD

We also received an incredibly generous Living Legacy donation from donors, Ellen and James Lew, which allowed each of our nurses to receive a new copy of the Therapeutic Guidelines Palliative Care book. This wonderful donation helps our team to continue providing the very best, up-to-date care for each of our clients. A Living Legacy donation allow donors to see the impact of their donation and how it has made a difference in real time.



(L-R) Ellen and James

# Public Relations and Fundraising

We have continued doing monthly radio interviews with 3WBC talking all things palliative care. We thank the wonderful host, Gabby, for allowing us this opportunity. Our social media and website visitors have also increased with interesting and important content being shared, liked and commented on.

Our annual community and fundraising event, Pound the Pavement 4 EPC was held again on the 12th October 2024. This was our third year of running this event at Lillydale Lake and proved, once again, to be a great success. There were young and old and lots of dogs too! The money raised went towards our Care for the Carer Appeal which helps with such things as providing equipment, overnight support and many other services which are specific to the wonderful people caring for their loved one who is terminally ill. This year we had our annual sausage sizzle, provided by Maroondah Rotary, some wonderful raffle prizes, a coffee van for those in need of a hot Beveridge, and our delicious cake stall with every item home baked and donated!

In early April we held our annual Donor High Tea and Expo which was a huge success with very positive feedback. The 40+ donors who attended enjoyed the expo where they could speak directly to the staff working in the community and ask questions about all of our programs. They enjoyed a delicious selection of goodies to have with a nice cup of tea.



As always, it is important to thank our dedicated Public Relations and Fundraising Committee volunteers who give valued input into work in this area. We also thank our very generous donors for supporting EPC and allowing us to provide clients and families with our services, at home, when and where they are most needed.

# Innovation - PerEmpo

**If it's important to you, it's important to us.**  
Eighteen months ago, EPC began a transformative journey to ensure that every client's voice is central to their care. This initiative is a cornerstone of our strategic direction under the Value Based Health Care framework.

Gone are the days when health organisations could design care in isolation and simply inform clients of what will happen next. Today, best practice demands that clients—and their families—are active participants in shaping their care. Their voices, choices, goals, values, and preferences must guide every decision. After all, delivering care that is meaningful and responsive to individual needs is at the heart of what we do.

To support this shift, EPC joined an international cohort of organisations committed to the same goal. Together, we helped design, trial, and implement a new online tool called PerEmpo—a Patient Reported Outcome Measure (PROM). PerEmpo invites clients to reflect, in conversation with staff, on three key questions:

- What's important to you in your life and health?
- Are there particular things you'd like to achieve?
- Do you have specific goals for managing your medical condition?

These responses are recorded in the client's medical record and used to shape a care plan that aligns with what matters most to them. The conversation is revisited monthly to ensure care remains relevant as needs evolve.

Clients have shared a wide range of goals—from **"I want to know what will happen next,"** to **"I want to finish the film I'm making about Ballarat,"** to **"I want to get out in my garden twice a week"** and **"I want to keep sustainability front and centre in my care."** These insights allow EPC to tailor interventions that are both clinically appropriate and personally meaningful. It also enhances interdisciplinary collaboration, as all team members—from nurses to volunteers—can access and contribute to the evolving care plan.

We are now a few months into rolling this across all of our clients and we anticipate the results will be very clear: stronger client engagement, better alignment with care plans, and deeper trust between clients and their care teams.

**Because at EPC, if it's important to you—it's important to us.**



# Financial Overview

In 2024–2025, EPC reported an operating deficit of \$610,000. After adjusting for revaluations, the organisation recorded a net deficit of \$302,000. Several factors contributed to this result:

- The absence of a CPI increase in Department of Health funding placed significant pressure on operating income.
- Applications for philanthropic grants were unsuccessful, limiting opportunities to diversify revenue.
- While modest CPI increases are occasionally applied, they do not keep pace with the escalating costs of wages, services, and essential supplies. This structural gap compounds each year, creating ongoing financial challenges.

Despite these pressures, EPC maintains a strong reserve position. The Board closely monitors reserve levels to ensure they remain sufficient to safeguard the organisation’s long-term sustainability. This disciplined governance enables EPC to continue investing in high-quality care, workforce development and digital transformation—ensuring we are well-placed to respond to the growing demand for community palliative care.





























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





# Staff and Volunteer Service Awards

Thank you to our wonderful long-serving staff and volunteers who are eligible for service awards during the 2024-2025 financial year.

Staff

 Sally Hodgson 30 Years	 Naomi Lindorff 25 Years	 David Haliwell 20 Years	 Steven Amsterdam 15 Years	 Jane Bourke 15 Years	 Bronwyn Lee 15 Years	 Marion Sheehan 15 Years	 Haley Wegener 15 Years
 Jessica Collins 10 Years	 Lynette Garrick 10 Years	 Fe Goiricelaya 10 Years	 Catherine Nowak 10 Years	 Sarah Begley 5 Years	 Renee Campbell 5 Years	 Angela Gill 5 Years	 Xin Guo 5 Years
 Kerryn Greive 5 Years	 Jayne Hollier 5 Years	 Jodie Jackson 5 Years	 Mojtaba Abadi 5 Years	 Andrea Misso 5 Years	 Elizabeth McClellan 5 Years	 Zoe Peltekis 5 Years	 Nilima Pelz 5 Years
 Nan Zhang 5 Years	 Jingxin Zhou 5 Years						

Board & Committee Members

 Peter Gurr 25 Years	 David Kissane 10 Years
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# Staff and Volunteer Service Awards

## Volunteers



**Sue Mylius**  
25 Years



**Jenny Doreian**  
15 Years



**Lyn Heyes**  
10 Years



**Janella Hodgson**  
10 Years



**Betty Markwick**  
10 Years



**Marilyn McKeown**  
10 Years



**Julia Bird**  
5 Years



**Sandra Craig**  
5 Years



**Sharon Drury**  
5 Years



**Hamish Ewing**  
5 Years



**Libby Hillman**  
5 Years



**Margaret Kaiser**  
5 Years



**Kathy Lancaster**  
5 Years



**Marlene Oppenheim**  
5 Years



**Camilla Pedersen**  
5 Years



**Amanda Schneider**  
5 Years



**Sue Williamson**  
5 Years



**Lea Fitcher**  
5 Years



**Jette Jensen**  
5 Years



**Aaron Spiller**  
5 Years



**Linda Isles**  
5 Years



**Kaye Mair**  
5 Years



**Judy Murphy**  
5 Years



**Lynda Turnbull**  
5 Years



# Our Members

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



## Outer East Palliative Care Service Inc

Outer East Palliative Care Service Inc (OEPCS Inc) was incorporated in July 1991. The service originated from a strong community need for palliative care services, to provide people with a terminal illness in the outer east with a choice between hospitalisation or home-based palliative support. OEPCS Inc ceased delivery of services on EPC’s establishment. OEPCS Inc developed strong community links to service clubs, local government, General Practitioners, local hospitals, nursing homes, hostels and supported accommodation services.

This strong link to the community remains today and as one of the three members, OEPCS Inc provides Eastern Palliative Care with general community input, volunteers on the Board, its Committees and through fundraising and volunteer programs, and an ability to keep connected with our community and the growing expectation of specialist palliative care.



## St Vincent’s Hospital Melbourne Ltd. (The Sisters of Charity)

In 1893, St Vincent’s Hospital was founded in Fitzroy. Caritas Christi Hospice Kew was opened in 1938 and since 2001, St Vincent’s Hospital has been responsible for St. George’s Health Service in Kew. These three healthcare facilities form St Vincent’s Hospital Melbourne Ltd.

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



## The Order of Malta Hospice Home Care Services Inc

The Order of Malta was founded in Jerusalem in 1098 just before the First Crusade. Since 1113, it has been a lay religious Order of the Catholic Church. It came to Australia in the early 1970s where its focus became the care of the terminally ill, the frail elderly and their families.

In 1992 Caritas Christi and the Order of Malta Hospice Home Care Services Incorporated was formed as a partnership of the Sisters of Charity and the Order of Malta. This home-based service was staffed by nurses, pastoral care and social workers and a core of trained volunteers. In 1997 the two partners became two of three founding partners in Eastern Palliative Care Association Inc.

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

# Acknowledgements

Thank you to those that have generously given significant funding and in-kind donations to EPC this year.

### Government

State Government of Victoria

### Philanthropic Partners and Foundations

- Freemasons Foundation Victoria
- James and Ellen Lew
- Adam Bisits Memorial Fund
- Jenny Long
- Community Bank Blackburn South

### Individual Donors (\$200+)

David Addis  
David Alcock  
Alex Alexander  
Ian & Sue Allison  
Lilian Antonelli  
Suzel Arnulphy  
Marion Avery  
Roy Badrock  
Maria Baleva  
Deirdre Barnard  
Jodie Barnett  
Majella Beagley  
Steve Bray  
Val Bray  
Perry Brouwers  
Susanna Brown  
Judith Brownfield  
Dean Champion  
Deirdre Casey  
Connie Chan  
Charles Chandler  
Rob Cockerell  
Jenny Cook  
Jill Crabtree  
Grant Cumming  
Audrey Cutting  
Carmel Danaher  
Bhagavantam Dasika  
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Maureen Edge  
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Sienna Embrey  
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Faye Feltham

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John Girvan  
Pat Gough  
Rose Green  
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- The Estate of Tina (surname withheld)
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- The Estate of William Richard James Finighan

### Community Support

- Blackburn United Lodge
- The Inner Wheel Wandin
- Knox United Soccer Club
- Lilydale Police Social Club
- Lions Club of Vermont
- Maroondah Rotary
- Mooroolbark Senior Citizens Club
- Rotary Club of Oakleigh, Clayton and Huntingdale
- Templestowe College
- Waverley Patchworkers
- Yarra Ranges Council

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- Ajitas Vege Chips
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- BrookFarm
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- Call on Clare
- Carlie's Fine Foods
- Cost Price Supplements
- Deakin University
- Dermal Therapy
- Endota Spa
- Flavour Creations
- Flemings Nursery
- Funday Sweets
- Future Crunch
- Grants of Australia
- Green back Nutrition
- Grounded Drops
- Health Lab
- Heritage Brands
- Heritage Peoples
- Jurlique

- Keynote Entertainment
- Lavilin Deodorant
- McFarlane Medical
- No Issues
- Officeworks (Ringwood)
- OsmoLax relief
- Ovaltine
- Scarecrow Foods
- Sodii
- Table of Plenty
- The Happy Snack Company
- Woolworths (Vermont and Ringwood)

We also thank those that wished to remain anonymous, or who gave less than \$200 this year.





Palliative care. Living well every day.

ABN 62 982 157 121

**Street Address**

Wurundjeri Country Naarm  
Level 1, Building 2,  
630 Mitcham Road  
Mitcham, Victoria 3132

**Postal Address**

PO Box 2110  
Rangeview, Victoria 3132

☎ 1300 130 813  
✉ [contactus@epcvic.org.au](mailto:contactus@epcvic.org.au)

☎ (03) 9873 0919  
🌐 [epcvic.org.au](http://epcvic.org.au)

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