



## Statement

Wednesday 20 August 2025

### TRANSFORMING EPC TO MEET THE NEEDS OF THE FUTURE

EPC provides holistic, person-centred palliative care to people with life-limiting illness, enabling them to live with the best possible quality of life and, where possible, die in a place of their choosing.

EPC's model includes interdisciplinary support delivered 24/7 in the home, normalising the process of dying while ensuring the right care is delivered, to the right person, at the right time.

While demand for our services continues to grow, funding uplifts have consistently lagged behind the true cost of delivering them. CPI indexation has failed to keep pace with actual expenditure growth, creating a widening gap between funding and the resources required to maintain service quality. This ongoing shortfall places increasing pressure on our organisation's financial sustainability.

We remain committed to supporting our clients and communities, and we will continue to advocate for funding models that reflect the real cost of service delivery. Workforce changes are part of a broader strategy to ensure that we can operate sustainably into the future while continuing to provide high-quality services to those who need them most.

To address this, EPC is initiating a three-year Transformation Plan (2025–2028) guided by Value Based Health Care principles. The plan includes workforce redesign, cost and infrastructure efficiencies, and long-term sustainability strategies. EPC remains financially well-managed and is not in crisis; this is a **proactive, planned shift** to ensure future care delivery.

One of the first difficult decisions EPC has had to make is to restructure parts of our organisation. This includes the discontinuation of several **allied health therapy** roles, specifically in occupational therapy, music therapy, and massage therapy.

These therapies have historically been delivered by qualified practitioners and integrated into our client care to enhance comfort, reduce anxiety, and improve quality of life. They have shown considerable positive impact on the journey of dying and bereaved clients, offering emotional support and therapeutic benefit during some of life's most vulnerable moments.

While deeply valued by clients and families, these services have not been part of our core service agreement and therefore sat outside the funding provided through the Department of Health.

#### Guided Principles for Decision Making

All decisions regarding service model changes have been guided by the following principles:

- **Preservation of Funded Clinical Services:** Services that receive direct government funding must be maintained.

#### Media Contact

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- **Commitment to Interdisciplinary and Holistic Care:** EPC remains dedicated to delivering integrated, person-centred care.
- **Future proofing for rising demand:** EPC is aware of the predicted tripling of client numbers in the next 10 years, driven by Australia's shifting ageing demographics.

EPC will ensure continued client care through existing services which include those required under the Department of Health's Palliative Care Service Capability Framework. These are as follows:

- Specialist medical professionals
- Specialist nursing professionals
- Psychological, social and spiritual support staff
- Bereavement support
- Volunteer coordination staff and volunteer teams

EPC has offered extensive support to those staff in the discontinued services and staff remaining at EPC.

To help ensure the sustainability of our remaining service offerings, EPC welcomes donations from the public. Every contribution supports our ability to continue delivering high-quality, person-centred palliative care to those who need it most.