ANNUAL REPORT 2018

Hammond Care
Champion Life

An independent Christian charity
OUR MISSION.
Our passion is improving quality of life for people in need.

OUR MOTIVATION.
The work of HammondCare is motivated by the Christian principles and values expressed in the words and deeds of Jesus Christ. HammondCare believes in the value of all people as made in the image of God and as loved by God. We are therefore called to show the same love, with compassion and respect, for people in need.
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A YEAR IN REVIEW
2017-2018.
CHAIR REPORT.

It is with great pleasure that I present the 2018 Annual Report.

Os Guinness is a prolific Irish author. In his book 'The Call' he says life has become a smorgasbord with an endless array of dishes and that choice is no longer just a state of mind but a value, a priority and a right. “To be modern”, says Guinness, “is to be addicted to choice”. He goes on to observe that the increase in choice and change has led to a decrease of commitment and continuity.

At HammondCare we embrace the opportunities – and the challenges – that recent changes in the health and aged care sector bring. We welcome the fact that in the last few years there has been increased choice for consumers who need home care; that there are better options to provide palliative care in someone’s own home; that older people, including those with dementia, have more choices when it comes to residential aged care. I am personally pleased that through our research and consulting services, we are able to disseminate expertise both across Australia and internationally. But HammondCare’s ability not simply to respond but to excel in an environment of increased choice and change is only possible because we know Who we are and Why we exist. We have continuity and commitment of identity and purpose: we are an independent Christian charity. Just as our founder, Bob Hammond, made a name for himself at the height of the Great Depression as a ‘mender of broken men’, we are proud to continue that work, remaining committed to improving the quality of life for those in need. We proudly champion life.

Despite the challenges provided by the deregulation of the home care market and the consequent clogging of the system, HammondCare has achieved a sound financial result with Operating earnings of $12.1m, compared to $10.1m last year. Importantly, operating cash flow of $19.1m has contributed to a strong Balance Sheet with minimal bank debt and a healthy Prudential Reserve. A strong Balance Sheet is both prudent given the resident liabilities and beneficial in a period of industry change that may provide opportunities for further consolidation.

In this Report you will hear about Anna – wife, mother, palliative care patient and activist against euthanasia; you’ll read about the struggles that faced Gina and her father Gus in finding a suitable care home; and you’ll learn from Theresa, who is passionate about improving the ways we support people with dementia. The story of HammondCare is found in each and every experience of the people we proudly serve.

I would like to express my gratitude to all those that contribute to HammondCare’s Mission, including my fellow Board Directors and Association members. Their expertise, guidance and commitment are invaluable, generous and greatly appreciated. On behalf of my fellow Directors, I wish to acknowledge the significant contribution of our Chief Executive, Dr Stephen Judd, the Executive team and all HammondCare staff and volunteers.

Finally, I want to thank HammondCare’s supporters for their ongoing generous support; without which we would not be able to deliver some of the innovative services that help us to support those in need.

Yours in Christ,

John Kightley
Let’s talk about the elephant in the room, the Royal Commission into Aged Care.

Elephants are pretty hard to miss. So it’s pretty hard not to talk about them! There are varying views about the Royal Commission.

On the one hand, it could be argued that there have been lots of reviews and reports about aged care over the past six or so years. Everything from the Productivity Commission Report (2011), to multiple Parliamentary inquiries, to the Carnell/Paterson review following the revelations at Oakden in South Australia (2017) and, indeed, the five-year legislative review conducted by David Tune (2017). Phew! So a reasonable question is why do we need another?

So why are we having one?

Well, while it’s clear that there have been a number of reviews into aged care, it’s also true that there has not been systemic change. A Royal Commission has greater visibility; it is noticed at Cabinet level whereas perhaps these other reviews were not. My confident hope is that whatever recommendations or findings come out of the Royal Commission it will be pretty hard for a Government or an Opposition to oppose them.

So, what do you think the Royal Commission will find?

At the time we are talking – September 2018 – we don’t have the Royal Commission’s Terms of Reference and we don’t know who the Commissioners will be. But I think it will look at quality in aged care, at supporting people with dementia and at staffing levels.

I also hope that it looks at the true cost of aged care in different settings and that it considers how we should pay for it, both from the public and the private purse.

Will it get ugly?

I imagine that the Royal Commission will highlight some examples of poor care. I guess I have two comments to say about that. First of all, there can be zero tolerance for criminal acts or negligence or plain nastiness committed against frail older people. Second, every aged care service provider stuffs up. At HammondCare we will make mistakes! It’s what you do about it that matters. It’s what your systems are like to avoid stuffing up and how you make improvements! It’s about fessing up and listening to those that are unhappy with your failings.

Any final thoughts on the Royal Commission?

I’ve got a lot! But, first, we have to understand that we are caring, increasingly, in aged care for very frail people. Their physical conditions are invariably deteriorating and sometimes they won’t improve. There’s the urinary tract infection won’t be cured, that wound won’t be healed. People are living in pixieland if they think otherwise. It’s not about fixing every ailment; it’s about how you care.
“Every aged care service provider stuffs up. At HammondCare we sometimes stuff up too! It’s what you do about it that matters.”

Second, our staff do a fantastic job each and every day. I continue to be humbled by the passion and care showed by the people who work at HammondCare. They are the ones who bring our mission to life, improving quality of life for people in need each and every day and showing God’s love to His creation.

Third, I am very optimistic about the future as a result of this process. My hope is that we will come out of this with a robust system to support older Australians and a proper understanding of how that can be achieved.

Okay, speaking of the future, what about the health space? What does the coming five years look like there?

Many services traditionally delivered in hospital will start to be delivered in people’s own homes. Take palliative care for example.

Currently only 14% of deaths in Australian occur in one’s own home, which is half the number of other countries like New Zealand, the US and France. More than half of Australian deaths happen in hospital. Aside from people’s preferences, we can’t afford as a nation to have that continue.

The number of annual deaths will double in the next 40 years – we would have to spend $16b-$20b just to build the hospital beds for people to die!

What is more, the studies show that Palliative Care Home Support programs cost about one-third of an in-patient place. As a country we need to re-think where we can have ‘a safe, good death’ and look at alternatives to hospital.

Does that mean HammondCare is getting rid of its hospitals?

No! They will remain an important part of the service delivery. We need psycho-geriatric units and rehab and in-patient palliative care.

But we have to grow and project our sub-acute capability beyond their walls, into people’s own homes and into residential care.
And what about all this talk of a looming workforce ‘crisis’?

At HammondCare we need to work out what we can do. And that’s not ‘boiling the ocean’ but, to mix metaphors, ‘growing our own’.

What I do know is that over 80% of our managers are ‘home grown’. They have come through the ranks. We need to give people more and more opportunities to develop their careers at HammondCare and give them the skills and the experience to have satisfying careers.

What about your role, Stephen?
What’s going to occupy your time in the coming year?

The role of the Chief Executive is pretty simple really: ensure we have the right strategy; ensure we have the right team to execute that strategy; and then, be the primary internal and external communicator for the organisation.

At different parts of the cycle, you will spend more on one rather than the other two.

I reckon over the next year I will be doing a lot of communication!

But, and this is important, a key element of that is showing up! Being present as much as possible in all of our services, and listening to staff. They are the ones who bring our mission to life, providing loving care and support to people in need.

And that is why I continue to get up in the morning, proud to be HammondCare’s Chief Executive.

Dr Stephen Judd
HIGHLIGHTS
2017-2018.

The last financial year saw diverse activities to better meet the needs of those we serve.

INTERNATIONAL DEMENTIA CONFERENCE
Truth & Lies in the Age of Choice
HammondCare welcomed over 1,200 delegates from around the world, including those living with dementia and their carers, to our biennial sold-out event. The contentious concept of choice was discussed and debated in context of every aspect of clinical decisions and care.

HAMMONDCARE AT HOME
New services meet the needs of a growing market
The first full year of the deregulation of home care saw no shortage of challenges, particularly clients navigating the new system and a growing Government Home Care Package queue for those awaiting care. HammondCare worked hard to meet the need by opening new services in locations including Canberra, Scone and Brisbane.

DEMENTIA SUPPORT AUSTRALIA
Support for people living with dementia exceeds 140,000 activities
DSA entered its first full year of operation with a strong step forward in supporting people living with dementia and their carers. January to June 2018 saw a 59% reduction in behaviours with DBMAS (Dementia Behaviour Management Advisory Service) consultations, a 74% reduction in behaviours for SBRT (Severe Behaviour Response Teams), and an overall satisfaction rating of 99% with the people receiving support.
RESIDENTIAL CARE

Construction begins on care home villages in NSW and Victoria

To meet the rapidly growing need for ‘Cottage-style’ care home accommodation specialising in dementia care, HammondCare began construction at its Cardiff, Caulfield, Darlinghurst and Hammondville sites. The Caulfield care home will be Melbourne’s very first, fully purpose built dementia village.

WOMEN IN LEADERSHIP

Scholarship continues to champion women in healthcare

HammondCare was proud to partner with Women and Leadership Australia by offering scholarships to 18 women in leadership – double the number of scholarships from the inaugural program last year. Future Leaders are sponsored to undertake Australian School of Applied Management courses.

HAMMONDCARE LAUNCHES DIVERSE RANGE OF NEW BOOKS

Innovative and practical resources for those in need

The last year saw HammondCare release wide ranging publications including ‘My Home, My Life’ offering tips for people living at home with dementia, a professionals handbook for reablement, and world-first cookbook for people with life limiting illness.

RESEARCH INSIGHT

New study finds ‘Cottage-style’ care more effective and less costly

A landmark Flinders University study found home-like, clustered models of care deliver better quality of life, lower hospitalisation rates, and lower emergency department presentation rates than traditional aged care homes. HammondCare has pioneered this model for decades and will continue to do so.

HAMMONDCARE DARLINGHURST

A further $2.5m pledged to support those at risk of homelessness

The Ian Potter Foundation committed a generous $2.5m toward HammondCare’s new permanent home for 42 older people at risk of homelessness with high care or complex health needs. The project is on-track for completion in October 2019.
SERVICE LOCATIONS.

RESIDENTIAL CARE
Erina **NSW**
Horsley **NSW**
Hammondville **NSW**
Miranda **NSW**
North Turramurra **NSW**
Scone **NSW**
Wahroonga **NSW**
Way Way **NSW**
Caulfield **VIC**

HEALTH AND HOSPITALS
Braeside **NSW**
Greenwich **NSW**
Mona Vale **NSW**
Wahroonga **NSW**

HAMMONDCARE AT HOME
Batehaven **NSW**
Bathurst **NSW**
Broken Hill **NSW**
Cardiff **NSW**
Coffs Harbour **NSW**
Hammondville **NSW**
Horsley **NSW**
Lindfield **NSW**
Manly **NSW**
Merimbula **NSW**
Miranda **NSW**
Narara **NSW**
North Gosford **NSW**
North Turramurra **NSW**
Nowra **NSW**
Scone **NSW**
St Marys **NSW**
Wahroonga **NSW**
Wentworth Falls **NSW**
North Melbourne **VIC**
Canberra **ACT**
Brisbane **QLD**

RESEARCH AND EDUCATION
Braeside **NSW**
Greenwich **NSW**
Hammondville **NSW**
Malvern **VIC**

DEMENTIA SUPPORT AUSTRALIA (DSA)
Albury **NSW**
Brookfield **QLD**
Coffs Harbour **NSW**
Dubbo **NSW**
Gold Coast **QLD**
Sunshine Coast **QLD**
Townsville (ARRCS) **QLD**
Ballarat **VIC**
Geelong **VIC**
Gippsland **VIC**
Malvern **VIC**
Wodonga **VIC**
Canberra **ACT**
Launceston **TAS**
Hobart **TAS**
Dulwich **SA**
Wembley **WA**
Darwin (ARRCS) **NT**

PALLIATIVE CARE HOME SUPPORT PACKAGES
311 rural and remote towns within NSW
16,557 people cared for across Australia, through our nationwide operations
These pages share some of the unique experiences of those in need who we had the privilege to serve in 2017-2018.
Curled up with a good book and his favourite country songs playing at full volume – just the way he likes it – Bob looks happier than ever today.

For the fiercely independent and social father-of-three, his home in Brisbane has always been his castle. Bob loved welcoming friends or kicked back to watch the footy or his favourite films.

But last year it seemed like he might have to leave it all behind forever. Unfortunately, Bob, who lives with vascular dementia, spent six weeks in hospital last year due to experiencing delirium after a fall. After his stay at the hospital, he needed help with daily living.

Bob initially lived between his brother and granddaughter Kelley’s homes. But when Kelley’s third child was due, she had no choice but to arrange a residential care home for him. Seeing her dad broken-hearted, Kelley was desperate to find a way he could stay in his own home. After a few frustrating dead ends, Kelley’s mum Patsy finally called HammondCare At Home.

That one phone call changed everything. “As soon as we met Cheree from HammondCare, who is trained in dementia care, it was a weight off our shoulders,” says Kelley.

“We’d been trying to keep Pop out of a home but it felt like everyone was against us. Cheree was on board straight away.”

Today, Bob absolutely loves visits from his carers – so much so that when he’s out with Kelley, he can’t wait to return home to catch up with them. When they first met Cheree, she listened and took the time to truly understand Bob and Kelley. This reflects HammondCare’s approach, where carers get to know each client’s unique story, their family and what matters to them most.

Bob’s team of carers visit him 14 times a week, helping with tasks like showering, housework and medication. That way Kelley and her kids can enjoy family time with Bob, without worrying about the tasks.

Cheree is passionate that Bob receives personalised care that enables him to get the most out of life. “As a service, we move with Bob,” she says. “And we continue that conversation with the family to meet their needs too.”

“I can ring with anything and they’ll happily brainstorm it with me,” says Kelley. Cheree says that’s how it should be, “all heads coming together for a care plan that meets Bob’s needs.”
Lesley's dad, Les, was diagnosed with vascular dementia in 2014, then Alzheimer’s disease soon after.

As an avid football enthusiast, one of the most disheartening challenges Les faced was no longer being able to enjoy physical activities or go to the games. He began to find even the simplest tasks impossible. As a result, Lesley began caring for her dad full-time.

She knew she’d also need professional help for him to stay at home but unfortunately she just couldn’t find anyone to provide the support they needed. It started to seem like the only option left was for Les to go to a residential care home.

When someone told Lesley at the last minute that HammondCare specialise in at-home dementia care, it felt like a lifeline to her. Her dad was able to stay where he wanted to be.

Les’ carers are all experts in dementia care who take a highly personalised approach to meeting his needs, while doing whatever they can to maintain his sense of independence.

Vera, one of Les’ carers, supports him with daily tasks like food preparation, dressing and medication, but without taking away his sense of pride or freedom of choice.

“When we go to the shops, Les likes to lead us,” Vera says. “We’re careful not to overstep our boundaries with him, while making sure he’s still properly cared for at the same time.”

Whether it’s a trip to his favourite team Collingwood’s grounds or talking about footy, Les’ carers like Vera are passionate about empowering and respecting him.

And it wasn’t just Les for whom life took a positive uplift. After seeing the huge difference HammondCare At Home made to her dad’s life, Lesley, who formerly worked in retail, was inspired to offer the same life-changing support to others.

Lesley applied to join the HammondCare team and to be trained as a specialist carer herself.

HammondCare Area Manager Andrew Haszard was absolutely thrilled that Lesley, who has such a first-hand and empathic understanding of the needs for someone living with dementia, wanted to be part of the team.

“We are so fortunate”, says Andrew, “to not only to look after Les and fulfil his wish to stay at home, but to also have Lesley on board sharing her experience with other families.”

“I absolutely love it,” Lesley says. “It’s so rewarding. I just want to give back to the community, to help people stay in their own homes for as long as possible.

“I never could have expected that this is how the story would turn out for me and dad.”
Peter enjoys taking walks around his spacious, countryside home and grounds in Scone, NSW. For Peter, home is Strathearn, a HammondCare residential care home set in the picturesque surrounds of the Upper Hunter Valley. He treasures his surroundings and the care staff he interacts with each day.

However, just four years earlier, the former greenskeeper had been living in an unsafe neighbourhood, was experiencing mental health issues and was going in and out of hospital. “My joints were so bad. I struggled to walk,” he recalls. It was then that Peter decided to find a new home where he could receive care without losing his independence.

When Peter first came to Strathearn, one of the staff’s first priorities was to set goals with him around his care. “That’s part of our mission. We really try to empower and enable people in our care so we are not taking away their independence,” says Residential Care Services Manager, Kathy Carter. “Peter was in our high-care area.”

Staff took the time to get to know Peter and understand what he wanted and how he would like to spend his days.

After seeing his passion for design, Sarah Oakey in the Pastoral Care team helped Peter transform his handwritten inventions into typed documents. “It tells him he matters,” says Sarah. “That the things he values are truly important.”

Residents like Peter are able to spend their time as they choose at Strathearn. “If people want to be involved in things, there are lots of opportunities. But you can also have quiet time if you want. Rightly, Peter has choices. You’ll often see him spending time in the garden, walking or chatting to staff,” says Kathy.

Today, Peter enjoys exercising, singing, playing Bingo, making new inventions, watching science shows or relaxing in the comfort of his room. Like all HammondCare residences, Strathearn is run with creating a home environment firmly in mind, including food which is all freshly cooked. “The food is magnificent, they’re really good cooks,” adds Peter.

Since coming to Strathearn, Peter is happier than he’s been in a very long time. “I don’t get the ‘Black Dog’ anywhere near as often now. I’m really happy. Everything is better being here. They make me feel like I’m an important person,” he says.
Gina has a favourite story to tell that she feels shows just how much HammondCare cares about her dad Gus, who is living with dementia. One morning her dad was extremely distressed. He just wanted to visit his old home and could not reduce his anxiety, impacting not only himself but also those around him. While some may have turned to medication at this point, John Nadjarian, Special Care Program Manager at HammondCare Southwood, took a different approach. He simply took Gus for a long walk to the bus stop. This act not only diffused the situation and relieved Gus’ anxiety, it also gave him a real lift and offered John an opportunity to bond with him.

Gina was so grateful for this small but important gesture “John will always take the time to do what’s best for dad,” she says. This story couldn’t be further from the predicament Gina and her dad Gus faced three years ago, when it became clear he required special dementia care units.

“It's not the glamorous side of care but it's unbelievably rewarding to see the impact it can have.”

John, Special Care Program Manager
round-the-clock care and no one could help. Due to Gus’ highly-specialised needs, Gina could not find a single residential care home who would have him, because “he just didn’t fit the mould,” Gina explains.

She was about to give up in desperation when John Nadjarian threw them a lifeline when she called. Without hesitation, John said that he would help Gina find a solution for her dad that met his needs. John ended up welcoming Gus to Southwood, at Hammondville.

HammondCare Southwood is specifically set up to provide a home which is equipped and staffed to compassionately and effectively care for people living with advanced dementia and higher care needs. “We look after people no one else can,” says John, “and we do it right; in a very empathetic way.”

Today, Gus has never looked better. The father-of-five and former greengrocer is fit, strong and, for the most part, content. Gina says she believes this is largely due to the exceptional care her dad receives.

As Special Care Program Manager, John’s 30-odd years of experience go beyond any textbook. His approach, and HammondCare’s philosophy, is to empower the team to make good decisions about residents’ care, in partnership with family and friends. This is because often no one knows a resident better than their day-to-day carers.

Difficult situations are met with an empathetic approach and innovative solutions. Staff members are adept at meeting unexpressed needs, such as recognising signs of pain. This was the case with Gus, when staff noticed he was walking with his knee infected because he was in pain.

This specialist care couldn’t happen without the right built-environment. Gus lives in Linden, one of six small cottages at Southwood, each built according to best practice dementia design principles, and run like a home.

Gus’ family feel they are made to feel incredibly welcome. “This is dad’s home,” says Gina. “We’re just grateful to be here. There is real expertise, but they do it with heart. They’ve got a rapport with residents. Real compassion.”

For John and his team, that’s all the reward they need. “We’re just here to look after people,” he says. “It’s not the glamorous side of care, but it’s unbelievably rewarding to see the impact it can have.”
“This is dad’s home. We’re just grateful to be here. There is real expertise, but they do it with heart.”

Gus’ daughter, Gina
PALLIATIVE CARE.

“Some of my days here are equivalent to the happiest days of my life.”

Anna, palliative and supportive care patient

It was the day Anna always wanted: a joyful gathering of her friends and family in a beautiful garden, organised by Anna’s husband, Martin. What might be surprising to some, is that this joyful day was one of Anna’s last.

In January earlier that year, Anna received the news no-one wants to hear. Her breast cancer had spread throughout her body, leaving no hope for a cure.

The 50-year-old struggled emotionally with the heartbreaking prospect of leaving her three school-aged boys without a mother. She was also battling nausea and immobilising pain. “I was very reluctant to be admitted to hospital,” said Anna, “but finally I understood I needed help.”

As a former nurse educator with significant knowledge, Anna was incredibly anxious that she wouldn’t have a say in her care.

Dr Sarah Thompson, Medical Director of the Palliative Care Unit, and her team immediately put Anna’s mind at ease. They took the time to understand how they could deliver the best possible care and support tailored to what she felt she needed most.

Firstly, they relieved Anna’s immense pain – a change that meant the world to her. For the first time in a long while, Anna could laugh with friends, enjoy time with her husband Martin, and cuddle her boys.

“It’s had a tremendous impact, almost to the point that I feel human again,” said Anna.

Anna’s specialist care team also put into play HammondCare’s approach of caring for people’s emotional and spiritual needs, through a number of important initiatives.

Firstly, knowing how important Anna’s faith was to her, her carers made sure she had quiet time each morning to pray. Also, her husband Martin was provided with an overnight bed in Anna’s bright and spacious room so he could spend as much time with her as he wanted.

Staff also helped Anna make a heartfelt recording for her sons and liaised with their school on how to offer the family support. “Families do the loving, while we do the caring,” says Dr Thompson.

Then when they discovered Anna wanted to speak publicly against euthanasia, HammondCare staff did all they could to assist: something that helped Anna maintain her sense of purpose.

“She had a lot she wanted to say, and this meant she was able to find her voice,” says Dr Thompson.

While nothing can take away the sorrow of a life-limiting illness, Martin firmly believes the care Anna received at HammondCare Neringah, right down to that joyful celebration in the garden, did wonders to improve her quality of life.

Perhaps it’s best summed up in Anna’s own words: when she said “Some of my days here are equivalent to the happiest days of my life.”
HammondCare’s Health and Hospital services provide palliative and supportive care, rehabilitation, mental health care for older people, pain management and other vital support services.

- **4,169** people admitted and cared for
- **56,199** bed days
- **135** people supported by the pain clinic
- **4,707** people supported in palliative care and rehabilitation care
- **585** dedicated staff
DEMENTIA CENTRE.

“ I do this so it will be better for those living with dementia in the future. It’s as simple as that.”

Theresa, Lived Experience Associate Consultant – HammondCare Dementia Centre
People listen when Theresa speaks; whether she’s addressing an audience, sharing insights with her colleagues, or welcoming visitors to her country home surrounded by her beloved animals.

This special quality is certainly well utilised in her role as Lived Experience Associate Consultant with the HammondCare Dementia Centre. It enables her to share the unique insight she can offer as someone who has been living with dementia for seven years.

Theresa was only 46 years old when she was diagnosed with dementia and she decided to retire early from her demanding job in the finance industry.

Determined not to become idle, despite already being a mother of five, she discovered a passion for advocacy: particularly for giving people with dementia a voice.

This passion caught the attention of the HammondCare Dementia Centre team, who are keenly aware of the need to listen and learn from those who are living with dementia.

As soon as Meredith Gresham, Head of Research and Design at the Dementia Centre, met Theresa, she immediately saw a wonderful and unique opportunity to engage her. The wheels were set into motion, and Theresa was hired as an associate consultant.

“We are about thought leadership,” says Meredith. “If we have somebody like Theresa saying, ‘this is how it is for me’, then suddenly our work becomes more meaningful and founded in lived experience. It’s no longer just theory.”

Since coming on board, Theresa has been an important voice in dementia advocacy. She has assisted the HammondCare Dementia Centre team in its work supporting people living with dementia and their carers to find solutions are pathways that enable them, rather than disable them.

Most significantly, she delivers real-life feedback on everyday experiences, from filling out a form, to having a conversation in a noisy room. “I can look at material and say, ‘this is difficult for me, how about if we did it another way’,” explains Theresa. “I give a window to what living with dementia actually feels like.”

Theresa’s insights have been invaluable to the work of the Dementia Centre, especially as part of the NHMRC* Cognitive Decline Partnership. She has been actively involved in two of the Partnership’s undertakings: a reablement handbook for people living with dementia; and a project on supported decision-making, designed to help people make their own choices.

Both projects help make a real difference, exemplifying the Dementia Centre’s crucial role in developing best practice solutions in dementia care.

Meredith says there is more in the pipeline, with plans to involve Theresa in future projects underway. “Doing whatever we can to improve people’s quality of life, regardless of their circumstances, is part of HammondCare’s DNA,” she says. “Theresa’s experience feeds directly into that.”

Theresa agrees. “The work of the Dementia Centre has shown that involving, respecting and listening to people with dementia makes such a difference,” she says. “I do this so it will be better for those living with dementia in the future. It’s as simple as that.”

*National Medical Health & Research Council
On a seaside walk with her husband Colin, Zoe looks happy and at ease. A former Sydney primary school teacher, Zoe has a supportive network of family and friends. She and her husband Colin treasure their time together, taking strolls and enjoying nature.

Last year, Zoe, who has lived with cancer for five years, received an 11-month prognosis. Though she had support for her physical symptoms, Zoe felt alone in her experiences. Her family and friends were there for her but she felt that no one could truly understand what she was going through.

Then she started to have panic attacks and anxiety. This is when her clinical nurse Rosie introduced her to Reverend Elly Castle on the pastoral care team at HammondCare.

Since meeting Elly and receiving Pastoral Care, the quality of Zoe’s life has greatly improved. In Elly, Zoe found a listening ear and understanding. She encouraged her to join a support group for end-of-life care where Zoe could talk about issues like family and independence in a safe environment.

Elly’s ongoing support enabled Zoe to open up about her experiences. For the first time, Zoe has been able to share her experiences with confidence. “I can talk about it without getting upset,” says Zoe.

This reflects HammondCare’s belief that spiritual and emotional support in dealing with a life-limiting illness is just as important as the physical.

Our pastoral care services are available for anyone in our care, their families or loved ones, regardless of their beliefs.

For Zoe, one of the great outcomes of her experience is the meaningful role she can now play in the lives of others. She enjoys connecting with other people and providing support to those who are going through similar experiences. “She gets a real lift out of it,” says her husband, Colin.

Pastoral care has not only improved Zoe’s care, it’s changed her quality of life. She has less anxiety, fewer panic attacks and feels more at ease with the future. “Since meeting Elly, it has helped me face my cancer with equanimity,” says Zoe.

“Since meeting Elly (Pastoral Carer), it has helped me face my cancer with equanimity.”

Zoe, pastoral care client

PASTORAL CARE SERVICES

Providing understanding, care and support in times of need, Pastoral Care is an integrated and core part of our services at HammondCare.

It exists to support the spiritual and emotional wellbeing of residents, clients, patients, their families, and loved ones.

Derived from our Christian identity, pastoral care is resourced by 40 dedicated staff members and 100 volunteers who:

- Offer emotional support in times of loneliness, anxiety or pain
- Support the spiritual needs of people regardless of beliefs
- Offer prayer, hymns, church services and scripture
- Provide bereavement, crisis and critical incident support.
Playing the piano, Mary is beaming with happiness. Mary and her husband of 40 years, John, raised their three daughters in their music-filled home in Sydney. From Beethoven to The Supremes, music was a constant source of joy and inspiration for Mary.

Not long ago, she received an Alzheimer’s diagnosis. Even daily tasks became a challenge for Mary. Although she still loved music, Mary could no longer play her beloved piano.

“She couldn’t play like she used to,” says husband John. “She just couldn’t remember how. Then she stopped completely.”

Mary’s Case Manager suggested they ring Alyssa from HammondCare’s Volunteers Program.

Alyssa put Mary in touch with a vibrant 22-year-old volunteer called Sam, who had just finished a Bachelor of Music.

Sam’s arrival truly lifted Mary’s spirits. Today, Mary enjoys Sam’s visits where they chat, sing and listen to songs. But the best part of their meeting was what happened after Sam’s first visit. “I asked Mary if she wanted to play the piano” recalls John. “She said ‘yes’, and she got up and played and kept playing. I couldn’t believe it! And she’s done it ever since.”

HAMMONDCARE VOLUNTEERS.

“It’s very important to get a good match. It’s that ‘aha!’ moment when two people connect.”

Alyssa, Volunteers Coordinator
Key to HammondCare’s Volunteer Program’s success is its focus on pairing clients with volunteers who genuinely have a basis for a strong connection. “It’s very important to get a good match. It’s that ‘aha!’ moment when two people connect,” says Alyssa, Volunteers Coordinator. “It can change a client’s experience significantly.”

Since Sam’s first visit six months ago, Mary now plays piano regularly. It brings Mary pleasure and reconnects her with her past. Her husband John says that Sam playing the piano got her mind going again. “I’ll come home from golf and she’ll still be playing,” he laughs.

Sam treasures her time with Mary, too. “Music has helped me so much,” Sam says. “So if I can use it to help someone else, why not? There’s something about giving back to people. You see how much it benefits them.”

Volunteers like Sam are everyday Australians who possess the qualities we look for at HammondCare: an open mind and heart, and a passion for helping older people. They help clients in so many ways, including chatting to residents, running sing-along sessions, driving minibuses and even helping people record their life stories.

John is just glad to see his wife reconnect with what she loves. When Mary began playing the piano again, he said a heartfelt thank you to HammondCare: “What you and your volunteers do really does change lives.”

VOLUNTEER WITH PASSION AND PURPOSE

We’re privileged to have over 960 volunteers of all ages and backgrounds. Drawing on their unique skills and passions, our volunteers are personally matched with clients by our Volunteering Team.

Some of the areas they contribute to include:

- Providing company and friendship
- Art and music engagement
- Gardening and pet therapy
- Pastoral care
- Fundraising and administration.

If you’re interested in volunteering at HammondCare, call us on 1800 793 399 or email volunteer@hammond.com.au
THE SPECIFICS.
At the Foundation, our mission is to engage community and corporate fundraising support to improve the quality of life for people in need.

Why we fundraise
We’re often asked why we fundraise if the Government funds health and aged care. The Government supports many services but it doesn’t cover all of the needs of elderly and vulnerable people.
As a Christian charity, we’re passionate about caring for people who can’t access the support they need. Fundraising helps us pay for capital works, research, pastoral care, volunteers and innovative projects.
In the next decade, Australia’s growing aged population and increased longevity will impact the rise in chronic health conditions like dementia.
This points to a significant growth in the demand for health and aged care services. Unfortunately for many older Australians, the cost of these services and the support they need and deserve is out of reach. HammondCare Foundation is dedicated to raising funds to address this.

Fundraising enables us to:

**Care for vulnerable people**
We ensure people in need can access high quality care, such as supporting our residents who are financially disadvantaged.

**Develop groundbreaking research**
Our research helps deliver better care. This includes dementia, palliative care, mental health, ageing, restorative care, reablement, rehabilitation, pain management and advance care planning.

**Support innovative projects**
We deliver programs, such as Arts on Prescription, which promote wellness for older people, or the Dreams Project, which fulfils the lifelong dreams of palliative care patients.

**Improve care quality across our services**
Our holistic care goes above and beyond the medical treatment we already provide. Programs such as massage therapy, art therapy and bereavement support have been proven to improve the quality of life for the people we serve.

**Provide capital works for people in need**
We invest in capital works such as our residential care home for older people who are homeless or at risk of homelessness in Sydney.
Thank you

We’d like to thank our generous supporters and partners for their commitment to HammondCare’s work and vision.

We can’t do the work we do without you.

A huge thank you to the following supporters:

- Bendigo Bank
- Bickerton Masters
- Bluesand Foundation
- Canley Heights RSL & Sporting Club
- Danks Trust
- Erica Foundation
- Estate of the late Ethel May Murray
- Estate of the late Fredrick Archer
- Estate of the late Janis Salisbury
- Hildanna Foundation
- Hogan Family Foundation
- Innovate 360
- James N Kirby Foundation
- JHA Engineers
- Karen & John Kightley
- Miss Sheila Spencer
- Mr Richard Jamieson
- Mrs Susan Maple-Brown AM
- Perpetual Foundation - Bendix Family Charitable Endowment
- Profield Foundation
- Sarah & Michael Lawrence
- Skipper-Jacobs Charitable Trust
- Stella & Kok Kong Chan
- The City of Sydney
- The Friends of Strathearn
- The Ian Potter Foundation
- The Snow Foundation
The Dreams Project made dreams come true for palliative care patients

Our Dreams Project fulfills the lifelong dreams of patients in palliative care. In 2018, funding let us bring 17 dreams to life. Patients with life-limiting conditions enjoyed incredible experiences and created unforgettable memories with their families during a difficult time. Some of the wishes included family photo shoots, a family reunion, a girl’s trip to the theatre and precious time away with family.

HammondCare Darlinghurst to transform the lives of older people at risk of homelessness

We’re on track for the 2019 launch of HammondCare Darlinghurst, a permanent home for 42 older people at risk of homelessness with high-care or complex health needs. A first of its kind in Sydney, the project is being brought to life with the generous support of individuals, the City of Sydney, which provided a $1.5m grant, and a significant partnership with The Ian Potter Foundation. We’re delighted to announce The Ian Potter Foundation’s generous leadership pledge of $2.5 million.

Empowering people to choose end-of-life care in their own home

HammondCare believes that every person, regardless of their background or location, deserves a choice in the location of their end-of-life care. Studies indicate that more than 70% of Australians would prefer to have end-of-life care in their own homes. With funding from the Erica Foundation, we equip healthcare professionals with the tools and training to support people so their palliative care needs can be met in their home.

HammondCare’s Golf Day raised a record $100,000 in donations

Our fifth annual Golf Day was a huge success with over $100,000 raised for HammondCare Darlinghurst. A big thank you to corporate sponsors and volunteers including first time major sponsor and co-host Bickerton Masters Architects. We had a fantastic event with the 32 teams and can’t wait for our next Golf Day in October 2019. Special thanks to Peter Kelly, HammondCare’s ambassador who helped coordinate the event.
Foundation income

<table>
<thead>
<tr>
<th>Category of income</th>
<th>2017-2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bequests</td>
<td>$218,078</td>
</tr>
<tr>
<td>Donations - Undesignated</td>
<td>$47,680</td>
</tr>
<tr>
<td>Donations - Designated</td>
<td>$3,346,059</td>
</tr>
<tr>
<td>Trusts, foundation and grants</td>
<td>$45,990</td>
</tr>
<tr>
<td>Total</td>
<td>$3,657,807</td>
</tr>
</tbody>
</table>

Donations by income source

- **Major Donors and Grants**: 73%
- **Community fundraising**: 7%
- **Bequests**: 5%
- **Appeals**: 5%
- **In Memory**: 3%
- **Corporate support**: 3%
- **Events**: 2%
- **Other (including interest)**: 2%

The year ahead

HammondCare Darlinghurst remains one of our key fundraising priorities for 2018-2019. We have a funding gap of $4.7 million required in order to complete the building and offer the full breadth of HammondCare’s service capability in this vitally needed care home.

Central to the planning process is our research project to measure the best model of care for the new Darlinghurst residents. This project is being funded through a grant from The Perpetual Foundation and The Bendix Charitable Endowment Trust, as well as further grants and a portion of funding from The Ian Potter Foundation.

Across Health and Hospitals, we continue to raise funds for new equipment in our palliative care and rehabilitation facilities, as well as the maintenance and upgrades of spaces used by patients and their families.

Join us in partnership

We’d like to thank everyone who gave their time and resources to support HammondCare. We wouldn’t be able to do this life-changing and vital work without you. Here are some of the ways that people support us.

**Volunteering**
We have 960 trained volunteers who generously offer their time, commitment and skills. Our door is always open to more volunteers.

**Regular Giving**
Monthly gifts allow HammondCare to plan the impact we can have, and meet unexpected needs for the people in need we serve.

**In Memory**
Family and friends choose to remember loved ones in our care through a generous gift that contributes to our vital services.

**Bequest**
Leaving a legacy in a will is a simple and meaningful way people support the future work of HammondCare.

**Partnerships**
Our partnerships are vital to our ongoing work. These include individuals, businesses, private and corporate trusts and foundations.
Social impact can be measured in different ways.

Throughout this Report there are some stories of how HammondCare has made a difference in people’s lives. These stories are emblematic of the qualitative contribution to Australian society that HammondCare makes.

In addition, HammondCare annually calculates its financial contribution to Australian society. We call this our ‘social dividend’: a calculation of the cost of services and activities that would not otherwise occur if HammondCare did not exist. It is the calculation of the financial benefit to Australia of being a ‘for purpose’ charity.
Social Dividend: The financial benefit to Australian society

Residential Care

HammondCare contributes $3.4m to support financially disadvantaged residents.

45% of our residents are financially disadvantaged.

$8.2m savings to the health and aged care system by caring for residents in ‘Cottage-style’ model.*

Home Care

+5.2% additional care management hours are provided to home care clients.

$2.4m additional care hours and services provided to home care clients without charge.

Health and Hospitals

$1.7m additional hospital services provided to patients without charge.

Vital research and support provided to improve quality of life for those in need

$1.6m in vital ongoing aged and dementia care research funded by HammondCare.

$820,000 to facilitate volunteer services for clients, residents and patients.

$2.3 million pastoral care services provided to clients.

*Based on independent research - published in Medical Journal of Australia June 2018.
Working towards a positive future

At HammondCare, we are dedicated to being wise with our resources and good stewards of the environment.

Not only does this align with our values as a Christian organisation, but it enables us to build a business that’s fit for the future; one that meets the evolving expectations of our staff, clients and stakeholders.

While we have had a commitment to reduce our environment footprint for some years, it was only in the 2016-2017 year that we articulated that commitment in a formal statement.

In the 2017-2018, we developed a long-term environmental sustainability strategy for HammondCare that:

- **Reviewed industry best practices** across leading organisations in Aged Care
- **Assessed environmental impact hotspots** across our operations and supply chain
- **Benchmarked facilities** by comparing energy, waste and water across our sites
- **Assessed materiality** including defining our key stakeholders and their priorities
- **Implemented staff questionnaires** on our current sustainability initiatives and any gaps
- **Conducted sustainability workshops** with staff to embed sustainability across our services
Measuring our footprint

Following the analysis, we have established 2017 as our baseline year for measuring the footprint of our operations. Conscious that we’re still in the process of filling some data gaps identified as part of the project, we have calculated the following provisional resource use figures against which we can monitor progress:

- 11,687,639 kWh of electricity
- 3,417 m³ of material recycled
- 109,143 kL of water
- 850 MWh of solar energy [MC1]
- 6,856 m³ of waste to landfill
- 3,417 m³ of material recycled

Sustainability focus areas

To successfully advance our long-term sustainability strategy from the 2016-2017 plan, we are evolving our previous focus areas into the following:

1. energy and carbon emissions
2. water efficiency
3. waste reduction
4. work-related travel
5. sustainable building design
6. reporting and measurement
7. empowered staff
8. sustainability innovation
9. biodiversity and the natural environment

Our targets for 2018-2022

We have set targets across all of our key focus areas, underpinned by a number of detailed initiatives. These include:

- 20% reduction in energy consumption per m²
- Increasing renewable energy to 20% of total energy used
- 10% reduction in water consumption per m²
- Increasing the diversion of waste from landfill by 20%

Over the next five years, these targets will deliver a significant reduction in our environmental impact.

We care deeply about what we do, but we also care about how we do it. We want to encourage positive practices, not distort behaviour or business decisions in a negative way.

Our commitment to sustainability and environmental stewardship helps us build a business that in every sense, contributes towards a better future.
HammondCare maintained a strong balance sheet in 2017-2018 with healthy revenue growth across our portfolio of operations – notably Home Care, Residential Care, and Dementia Services. Our revenue of $276.8m in 2017-2018 represents a five year revenue growth of +55.5% from $178m in 2013-2014. This is as a result of our financially sustainable approach to strategically planned growth.

Further strengthening HammondCare’s financial position

Total revenue grew to $276.8m an increase of 9.7% from FY 2016-2017

HammondCare maintained a strong balance sheet in 2017-2018 with healthy revenue growth across our portfolio of operations – notably Home Care, Residential Care, and Dementia Services. Our revenue of $276.8m in 2017-2018 represents a five year revenue growth of +55.5% from $178m in 2013-2014. This is as a result of our financially sustainable approach to strategically planned growth.

2017-2018 financial snapshot

Managed growth across all key operations: +9.7% revenue increase

2017-2018 was a continuation of HammondCare’s long-term approach of diversified growth. 
- Residential revenue grew to $96.3m, due to a +20.1% increase in the number of residents we cared for 
- The deregulation of the Home Care market saw us expand our service footprint and open new locations 
- 2017-2018 was our first full year of Dementia Support Australia, involving more than 144,000 service activities

<table>
<thead>
<tr>
<th>Service</th>
<th>FY 2018 $m</th>
<th>FY 2017 $m</th>
<th>INCREASE $m</th>
<th>INCREASE %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residential Care</td>
<td>96.3</td>
<td>88.7</td>
<td>7.6</td>
<td>+8.6</td>
</tr>
<tr>
<td>HammondCare At Home</td>
<td>71.1</td>
<td>62.5</td>
<td>8.6</td>
<td>+13.8</td>
</tr>
<tr>
<td>Health and Hospitals</td>
<td>60.0</td>
<td>56.3</td>
<td>3.7</td>
<td>+6.6</td>
</tr>
<tr>
<td>Other</td>
<td>49.4</td>
<td>44.8</td>
<td>4.6</td>
<td>+10.3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>276.8</strong></td>
<td><strong>252.3</strong></td>
<td><strong>24.5</strong></td>
<td><strong>+9.7</strong></td>
</tr>
</tbody>
</table>

Expenditure

Total expenditure in 2017-2018 grew by +9.3% to $264.7m. This was largely driven by growth in employment costs associated with ensuring staff numbers are aligned with expanding operations. There was also capital expenditure of over $49m for capital works in NSW and Victoria.

Surplus

Our underlying net surplus for 2017-2018 was $12.1m, a +19.8% increase on 2016-2017. This surplus, which is net of any non-cash property revaluations, is used by us to upgrade existing services and re-invest in new ones. 2017-2018 saw an uplift in donations of $3.7m toward building HammondCare Darlinghurst – a much needed new care home to provide a permanent home to those who are homeless or at risk of homelessness.
Expenditure to meet growing client demand for services

HammondCare is committed to maintaining our high quality model of care as we expand our operations to meet the need in the community. This resulted in a growth in staff numbers to 3,852 staff and associated cost growth of +10.3%. Capital expenditure also grew as we began construction work at Hammondville, Cardiff and Darlinghurst in NSW; and Caulfield in Melbourne, Victoria.

Our financially sustainable balance sheet

HammondCare has a long and proven track record of delivering our services and managing operations in a financially sustainable manner. This is reflected in the growth of HammondCare’s net assets in 2017-2018 by $66.1m to $328.2m, a +25.2% growth from 2016-2017. Our balance sheet stability is a direct result of our focus on prudently managing the financial risks associated with growth.

HammondCare’s assets grew by $86.3m in 2017-2018 to a total of $731.1m. This primarily includes tangible assets such as land, buildings for residential care and independent living units.

Our liabilities grew by $20.2m to a total of $402.9m, consisting primarily of resident liabilities. Our total bank debt was $1m at 30 June 2018 and total liquid assets available were approximately $133m.

The year ahead, 2018-2019 will see HammondCare further build our asset base through capital expenditure on services in NSW and Victoria.

<table>
<thead>
<tr>
<th></th>
<th>FY 2018 $m</th>
<th>FY 2017 $m</th>
<th>INCREASE $m</th>
<th>INCREASE %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Employment Costs</td>
<td>201.9</td>
<td>183.1</td>
<td>+18.8</td>
<td>+10.3</td>
</tr>
<tr>
<td>Direct Costs</td>
<td>23.7</td>
<td>21.7</td>
<td>+2.0</td>
<td>+9.2</td>
</tr>
<tr>
<td>Non-direct Costs</td>
<td>39.1</td>
<td>37.4</td>
<td>+1.7</td>
<td>+4.5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>264.7</strong></td>
<td><strong>242.2</strong></td>
<td><strong>+22.5</strong></td>
<td><strong>+9.3</strong></td>
</tr>
</tbody>
</table>
Our Board at HammondCare ensures that everything we do across our operations is in line with our mission and long-term goals. Coming from a wide range of backgrounds and disciplines, the members of the Board offer a comprehensive and balanced set of skills, knowledge and experience to guide HammondCare in successfully executing our vision.

**John Kightley** BCom, MPhil Oxon, CA (SA), CFA Institute USA GAICD
Chair
John Kightley has extensive investment management experience and is currently the Chairman of Maple-Brown Abbott Ltd. Until 2009, he was Managing Director and CEO of Maple-Brown Abbott and has previously held senior positions with Norwich Investment Management and Allan Gray Investments (Cape Town, South Africa). He is the Chair of the HammondCare Board Development Committee and Chair of the HammondCare Foundation. John was elected as a Director in 2009.

**Robyn Langsford** BCom, Chartered Accountant
Director
Robyn Langsford is a partner of KPMG and has worked for many years in their Enterprise division. She is experienced in providing accounting, audit, tax regulatory compliance and a variety of advisory services to Australian family businesses and mid-tier entities. Robyn is married with three children. Robyn rejoined the HammondCare Board in 2012 and is a member of the Board’s Finance Committee.

**Neil Lewis**
Director
Neil Lewis has extensive experience in commerce, merchant banking, aviation and financial markets in Australia and overseas for over 30 years. Neil currently has business interests in the solar renewable energy sector, infrastructure and funds management. He is a member of the large wholesale AMP Infrastructure Equity Fund investment committee. Neil has recently worked with emerging businesses, renewable energy and assisting not-for-profit Christian organisations. He is a member of HammondCare’s Finance committee and has been a HammondCare Director since 2005.

**Michael J Monaghan** BA FIA FIAA FAICD
Deputy Chair
Michael Monaghan has over 30 years Board experience in investment management, superannuation, banking and consulting. He is currently a director of Alpha Vista Financial Services and Australian Ethical Investment Limited, formerly Managing Director of StatePlus and a partner of Deloitte Touche Tohmatsu, and held senior executive positions with a number of global organisations. He is Chair of the Finance Committee, a member of the Property Committee and the Board Development Committee, and became a Director of HammondCare in 2008.
Dr Louise Parkes  
BSc (Psychology) PhD (Psychology) Adjunct Fellow Macquarie University GAICD  
Director  
Dr Louise Parkes is experienced in developing organisational culture and employee voice. As Senior Consultant and head of research and development at Voice Project, she designs and manages projects on leadership, culture, engagement, and organisational change. The education and NFP sectors are her specialty. Louise is a registered psychologist and member of the Australian Psychological Society. She is Chair of HammondCare’s Quality, Safety and Risk Committee, a member of the Research Committee, and has been a HammondCare Director since 2010.

Glynn Evans  
B.Arch Dip. Building Construction ARAIA  
Director  
Glynn Evans is a retired former principal of Allen Jack + Cottier (AJ+C). He has a wealth of experience in designing public, commercial and residential buildings. The focus of Glynn’s practice is on design of health and dementia-specific facilities. He has served as an advisor to NATSPEC, and as a member of the Anglican Church Property Trust. Glynn joined the HammondCare Board in 2013 and is Chair of the Board’s Property Sub-committee.

Dr Annette Britton  
MBBS FRACP GAICD  
Director  
Dr Annette Britton has over 40 years medical experience, as a former Senior Lecturer in the Sydney Medical School, Director of the Medical Assessment Unit at Royal Prince Alfred Hospital (RPAH), Staff Specialist Geriatrician at RPAH and Balmain Hospital, lecturer in geriatric medicine at the University of New South Wales, and as the Director of Clinical Training at RPAH and Canterbury Hospitals. She is Chair of HammondCare’s Research Committee, a member of the Finance Committee and has been a Director since 2014.

Kate Thomas  
BA LLB  
Director  
Kate Thomas was admitted to practice in 1994. She has more than 20 years’ experience at Clayton Utz, one of Australia’s leading law firms, where she has been a Senior Associate since July 2000 and a Special Counsel since July 2011. Kate has extensive experience in property and commercial law, corporate advisory and managed investments. Kate joined the HammondCare board in April 2015 and is a member of the Board’s Property and Quality, Safety and Risk sub-committees.

Kok Kong Chan  
BCom M.Sc (Management) CPA Australia GAICD  
Director  
Kok Kong Chan is a founding Partner of Maritana Partners, a Board Governance and Leadership Advisory firm. He was a Partner of Egon Zehnder, previously Chief Executive Officer of HeartScan, an Asian diagnostic healthcare business, and Consultant to Arthur Andersen. He was the recipient of the Chevening Scholarship. He is a previous Director of the Centre for Public Christianity. Mr Chan is a member of the Board’s Foundation and Board Development Committees and became a HammondCare Director in 2016.

Dr Stephen Judd  
BA PhD FAICD  
Chief Executive  
Dr Judd has over 25 years in experience in healthcare and information technology. Since he became Chief Executive in 1995, HammondCare has grown from serving fewer than 250 clients with annual revenue of $8m to caring for over 14,000 people, with FY18 revenue of $276m today. He has authored books on dementia care, aged care design and the role of charities. Stephen has served on Government and industry committees and is currently a member of the Australian Aged Care Quality Agency Advisory Council.
Cover: Theresa Flavin, our Dementia Consultant living with dementia. Read her story on page 28 of this report.