



HammondCare 

Annual Report 2025

We do.



We do complex.

For 93 years our passion has been improving quality of life for people in need, regardless of the circumstances.

It's this enduring Mission in 2025 – motivated by the words and actions of Jesus* – which means when it comes to care, we're not afraid to say:

we do complicated, we do unexpected, we do complex.

Annual Report 2025 is dedicated to thousands of residents, clients and patients who, in trusting us to care, have discovered that when they don't know what to do or where to turn, we do. Also, to the thousands of team members who every day are ready to say, 'we do', no matter how complex the care.

"I was hungry and you gave me something to eat, I was thirsty and you gave me something to drink, I was a stranger and you invited me in, I needed clothes and you clothed me, I was sick and you looked after me... Truly I tell you, whatever you did for one of the least of these brothers and sisters of mine, you did for me."

Matthew 25:35-36,40

A still from our new 'We Do' campaign, featuring team member Liz Crisologo

Board Chair report

A year of strength and purpose guided by our Mission

Guided by our enduring Mission, we have continued to deepen our commitment to caring for those in need, with a clear ambition to lead nationally in complex care, specialising in dementia and palliative care.

Throughout the year, HammondCare has built on its capabilities through the implementation of the Next Chapter Strategy, enabling us to deliver high-quality care to people with complex needs. This has been especially important in a time of significant sector transformation, including the introduction of the new Aged Care Act and Support at Home reforms. These changes have required a focused and agile response, and HammondCare has met the moment with strategic investment in clinical capability, operational flexibility and leadership alignment. Every decision is anchored in our Mission, and every step guided by the lived experience of clients, residents, patients and staff.

Our Christian ethos remains central to our work. This year, it's been further shaped by HammondCare's organisational theology which has helped inform our approach to clinical care quality and complex ethical issues, including voluntary assisted dying. Our commitment to care is grounded in the love and teachings of Jesus Christ, and this remains front of mind in every aspect of our work.

Establishing centres of excellence

A personal highlight of the year was the Board's approval of the Northern Sydney Masterplan – a flagship initiative I've seen evolve during my time on the Board. This visionary plan reflects our long-term goal to establish centres of excellence across Northern Sydney, driven by innovation and a steadfast commitment to quality care.

We've also made significant strides in our digital transformation, building the infrastructure needed to support complex care at scale. As part of this journey, we are exploring the use of artificial intelligence to enhance productivity, free up time for frontline care and improve the experience for those we serve.

Financially, HammondCare has delivered a strong underlying result enabling us to invest strategically. Our balance sheet remains stable, supported by healthy prudential reserves.

I acknowledge the exceptional leadership of CEO Andrew Thorburn and his team. Through the Next Chapter Strategy, they have reshaped our operating models, bringing greater alignment with our Mission and positioning HammondCare strongly within a reforming sector. I am thankful to the Board and HammondCare team – particularly our frontline staff – whose passion and dedication continue to deliver life-changing care every day.

Dedicated contributions

We also recognise the dedicated service of retiring Board members: Robyn Langsford, after 16 years across two terms, and Glynn Evans, who retired at the last AGM, after 11 years. Their contributions are deeply valued. We confirmed Carl Gunther as Chair of the Audit and Finance Committee, Kate Thomas as Chair of the Property and Sustainability Committee, and Peter Bailey as Deputy Chair. Special thanks also to David Lewis, retiring as Company Secretary after 22 years of faithful service.

As I prepare to retire from the Board and my role as Chair at the upcoming AGM, I am grateful for the privilege of serving HammondCare since 2016. Though stepping back from formal leadership, my prayerful support remains with HammondCare, and I look forward to staying connected through the Association.



Yours in Christ,
Kok Kong Chan



Chief Executive Officer report

Our Mission reminds that care is a relationship, not a system

Taking on the role of CEO has been a profound privilege. It has deepened my appreciation for the enduring relevance of our Mission, especially in a time of reform and rising complexity across aged care.

Amidst these changes, our purpose remains unchanged: to serve older Australians who face challenges in accessing care, with deeply personal and courageous care that is grounded in faith.

It's about Olga and Basil

At the heart of our work are people like Olga and Basil – two remarkable individuals whose stories reflect the dignity and value of those we are called to serve. Their experiences remind us that care is not a system – it is a relationship. It's about being present, listening deeply and responding with compassion.

It is for Olga and Basil, and thousands like them, that we launched our Next Chapter Strategy and Ambition. This is not about growth for its own sake. It's about stepping into the spaces where others hesitate. Where care is complex, unpredictable and deeply human. Where some might say 'too hard' – HammondCare says 'we do'.

Our complex care ambition

Our Ambition is clear: to lead in complex care nationally, specialising in dementia and palliative care. This is not just a strategic direction – it's a missional one. It's about being present in the lives of those who need us most, and doing so with courage, compassion and conviction. I've been encouraged by how our people have responded. From the Board to our frontline teams, there's been a shared commitment to innovate, integrate and serve. We've adopted six-month sprints to drive real-time change, so we can deliver complex care to people like Olga and Basil sooner.

This year has also been a time to reflect on our Christian identity and Mission. This identity is informed by our organisational theology and is the driver behind all that we do. As stewards of this generation, we've made a commitment

to ensure our Christian identity is not only core to who we are, but also accessible to every member of HammondCare – and felt by those we serve.

Our Northern Sydney Masterplan is underway, with transformation planned for Greenwich, Wahroonga and North Turramurra. We've also begun the redevelopment of Bond House in Hammondville – our heartland. These are not just capital projects. They are expressions of our Mission – places where older people with complex care needs will be known, valued and cared for.

To support this, we've undertaken a major organisational redesign. We've aligned leadership and clinical structures to ensure we can respond with pace and quality. Complex care takes all of us, working together, to lead where others can't or won't.

Heartbeat of HammondCare

I've thoroughly enjoyed spending time at our sites across Australia, meeting our frontline teams and the people we serve. I am continually inspired by their dedication and want to thank them for their service. Their commitment and compassion are the heartbeat of HammondCare.

I also want to acknowledge Kok Kong Chan, our outgoing Chair. His leadership has been courageous, principled and deeply faithful. Over nine years, including as Chair, Kok Kong has helped guide HammondCare through a pivotal era – working alongside three CEOs and championing our Mission with integrity.

Continued over page



The heartbeat of HammondCare... sharing a day with the frontline team at Cardiff, NSW



We are grateful for his commitment and thank him for the legacy he leaves as he continues on our Association. Thanks also to our entire Board for their support, hard work and ongoing commitment to HammondCare.

Thank you to our Leadership Team who have shown great vision during a year of significant transformation. We've delivered record statutory revenue of \$620 million in FY25. This financial strength enables us to invest in our Next Chapter initiatives and progress major projects.

Innovation, integration, interstate

The new Aged Care Act, effective 1 November, brings significant reform. It's keeping our teams busy, but it also introduces important measures for financial sustainability, particularly in residential care.

Looking ahead, we're focused on three enablers of our Ambition – innovation, integration and interstate growth. Innovation is about improving the quality of care we provide. The launch of Hammond Innovations is a bold step forward, bringing practice-based research and thought leadership to the forefront of dementia and palliative care in Australia.

Integration means embedding our specialist expertise across HammondCare, translating research into practice, expanding community care and mentoring frontline teams. And our Mission calls us to provide more complex care to more people, so we're investing in local and interstate partnerships to extend the reach of our specialist services.

Stories that matter

We're also using technology to improve both the quality of care we provide and the experience of our people, and we'll continue to invest here to enable us to deliver complex care at scale.

As you read through this Annual Report, I hope you are encouraged by the stories within – stories of care, courage and conviction. They reflect the heart of HammondCare and the extraordinary people who bring our Mission to life every day.

Thank you for your continued support and partnership. It is a privilege to serve alongside you.

Warm regards,
Andrew Thorburn

Next Chapter progress

Our focus is complex dementia and palliative care

Our Next Chapter Ambition 'to lead in complex care nationally, especially dementia and palliative care' highlights a willingness to prioritise complex areas of care, underpinned by greater integration, innovation and a growing national presence.

Launched in late 2024, 'sprints' help deliver our Next Chapter Strategy with agility, recognising the fast-moving sector of which we are a part. Already we are seeing strong progress:

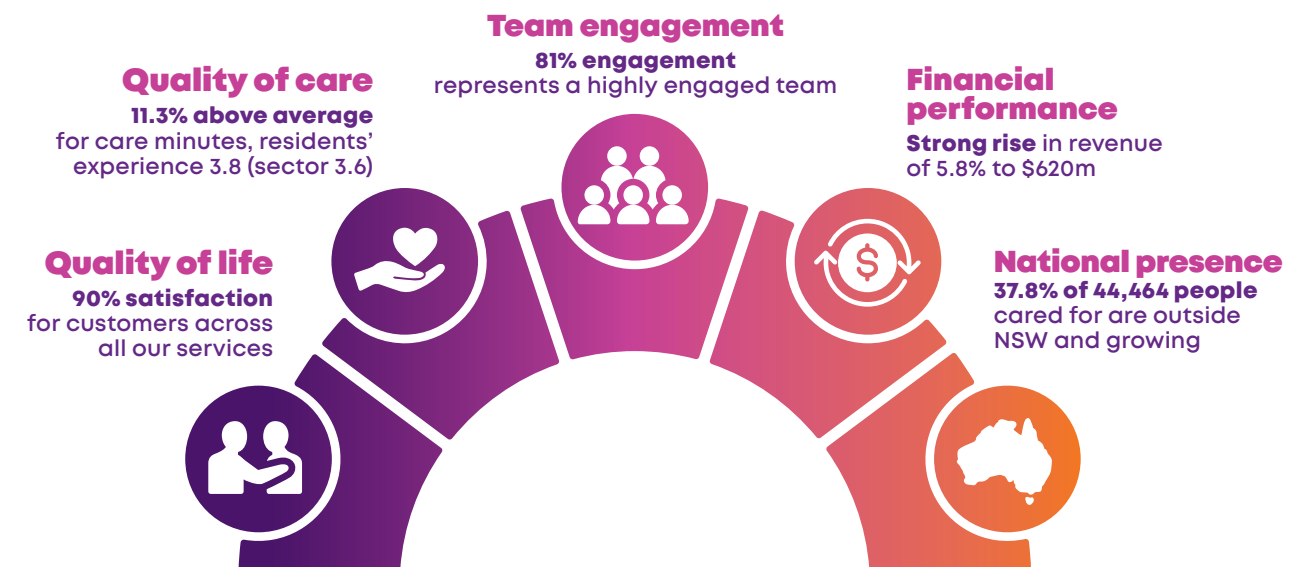
- Integration of care such as the redevelopment at Greenwich Hospital, which will become a centre of excellence for complex care; the inclusion of seniors living in HammondCare Home Care; and greater knowledge sharing.
- Innovation through rapid testing of ideas and accelerating improved ways to care, led by Hammond Innovations, which incorporates The Dementia Centre, The Palliative Centre and The Centre for Positive Ageing.
- Interstate activity through a serious national presence achieved by extending care and services around our home care and dementia advisory networks, and key interstate development opportunities.

Embracing rapid change

- Many processes are evolving through technology and AI, including digital platforms for residential care, home care, dementia support, people services and communications.
- Organisational design was reinvented to strengthen growth and responsiveness. This process has helped our Care and Enabling Units to better align with the needs of the people we serve and the opportunities to extend our complex care.
- Pioneering Hammond Innovations, establishing new partnerships and developing new advisory channels are helping us enter new frontiers.

All of this serves our Mission – our passion is improving quality of life for people in need, founded on the words and actions of Jesus as seen in Matthew 25:35–36, 40: 'I was hungry and you gave me something to eat, I was thirsty and you gave me something to drink, I needed clothes and you clothed me, I was sick and you looked after me... Truly I tell you, whatever you did for one of the least of these brothers and sisters of mine, you did for me.'

What the data says



Highlights of the year

Care that reaches every need

A new chapel for Caulfield

HammondCare Caulfield celebrated the opening of its new chapel, first envisioned a decade ago by Pastoral Care Manager Joanne Jarlett. Residents, families, volunteers and teams gathered for a joyful service of worship and thanksgiving. CEO Andrew Thorburn described the chapel as 'a place of love, gathering, spiritual renewal, prayer and peace where all are welcome'.



We do complex care

This year, HammondCare launched its bold 'We do' campaign, declaring a commitment to meeting the most complex care needs of older Australians, including those at end of life or living with dementia. Developed in-house and produced with Cadence Media, the campaign features real team members and powerful stories that reflect our Mission.

Digital innovation driving better care

Digital transformation continues at pace with the launch of 'HammondCare Hub' in Home Care, Health Cloud (both Salesforce platforms) in the Dementia Support Australia program, and the upcoming rollout of Workday. These technology platforms are delivering major efficiencies and improvements in the support of teams, clients and families.



The Plant Room Café opens at Hammondville

We welcomed our second Plant Room Café to our Hammondville site. It's a vibrant social hub built in partnership with The Disability Trust. Open six days a week, the café offers great coffee and fresh meals while providing supported employment for people living with disabilities.

Farewell to Bond House, a pioneering aged care milestone

Demolition began at Bond House, marking a major milestone in HammondCare's 93-year history. Built in the 1950s, Bond House was one of Australia's first purpose-built nursing homes. It will be replaced by two multi-storey homes, part of a \$63 million transformation of Hammondville into a contemporary, integrated village.



Support in the last days of life

HammondCare's Last Days workshops were recognised with an *Inside Ageing* 'Future of Ageing' Award for community engagement. Since 2021, close to 1,000 people have attended workshops. And in 2024, with generous support from The Profield Foundation, the program expanded into regional NSW, Victoria and Queensland.



Arts on Prescription launches in the Hunter region

HammondCare's Arts on Prescription program launched in the NSW Hunter region this year, bringing creative therapy to older people, including those living with dementia, Parkinson's disease or experiencing isolation. Led by professional artists, the program supports wellbeing and social connection through art.



Braeside volunteers recognised at NSW Parliament

At a special event at NSW Parliament House, Health Minister The Hon Ryan Park and Member for Fairfield Dr David Saliba presented certificates to HammondCare's incredible Braeside Hospital palliative care volunteers. The Minister expressed his gratitude for the work the volunteers do, supporting patients at the end of their life.

At a glance



44,464
cared for



5,986
team members



850
volunteers



91
service locations



602
supporters



\$35.5m
social dividend

Service locations

Residential Care

- Cardiff NSW
- Erina NSW
- Horsley NSW
- Scone NSW
- Sydney NSW
 - Darlinghurst
 - Hammondville
 - Miranda
 - North Turramurra
 - Wahroonga
- Waratah NSW
- Woy Woy NSW
- Adelaide SA
 - Daw Park
- Melbourne VIC
 - Caulfield

Home Care

- Canberra ACT
- Batehaven NSW
- Bathurst NSW
- Broken Hill NSW
- Cardiff NSW
- Casino NSW
- Coffs Harbour NSW
- Dubbo NSW
- Goulburn NSW
- Green Point NSW
- Horsley NSW
- Kyogle NSW
- Lismore NSW
- Merimbula NSW
- Narara NSW
- Nowra NSW
- Picton NSW
- Port Macquarie NSW
- Scone NSW
- Sydney NSW
 - Berowra
 - Caringbah
 - Hammondville
 - Manly
 - Miranda
 - Mona Vale
 - North Turramurra
 - Penrith
 - St Leonards
 - Terrey Hills
 - Wahroonga
- Tuggerah NSW
- Tweed Heads NSW
- Wentworth Falls NSW
- Brisbane QLD
 - Carindale
 - Chermside
- Melbourne VIC
 - Yarraville

Healthcare & Hospitals

- Sydney NSW
 - Greenwich
 - Mona Vale
 - Prairiewood
 - Wahroonga
- Centre for Positive Ageing Hammondville
- Far West Local Health District (pain service)
- Northern Beaches Hospital (palliative care consult)
- Southern NSW Local Health District (palliative care)

Dementia Support Australia

- Canberra ACT
- Albury NSW
- Cardiff NSW
- Coffs Harbour NSW
- Dubbo NSW
- Horsley NSW
- Lismore NSW
- Nowra NSW
- Port Macquarie NSW
- Sydney NSW
 - Greenwich
 - Hammondville
 - Penrith
 - St Leonards
- Tamworth NSW
- Tuggerah NSW
- Waratah NSW
- Darwin NT
- Brisbane QLD
 - Chermside
- Cairns QLD
- Gold Coast QLD
- Sunshine Coast QLD
- Adelaide SA
 - Daw Park
- Hobart TAS
- Launceston TAS
- Ballarat VIC
- Drouin VIC
- Geelong VIC
- Melbourne VIC
 - Malvern
 - Yarraville
- Wodonga VIC
- Perth WA
 - Osborne Park

Research

- Sydney NSW
 - Greenwich
 - Hammondville
 - Prairiewood
 - St Leonards
- Adelaide SA
 - Daw Park
- Melbourne VIC
 - Malvern
- Perth WA
 - Osborne Park



HammondCare acknowledges and pays its respects to the Traditional Custodians of the lands on which our services operate.



Bill Yeates
Living Experience
Associate Consultant,
Advisory Care &
Partnerships

**We do a
special kind
of care.**

**Care at your place,
our place, any place**

Care at your place

Flexible care: supporting clients
when needs become complex

After Home Care client Sheila experienced back issues in 2022, her daughter Sharon could see that getting more support at home was becoming a priority.

‘Mum and Dad have always been such humble, hardworking people who just get on with things,’ Sharon shares. ‘But I could see the strain on Dad’s face during my visits; caring for Mum was starting to take its toll.’

Then when Sheila was unexpectedly hospitalised for five months after an operation, she said ‘I wish we’d got help sooner’.

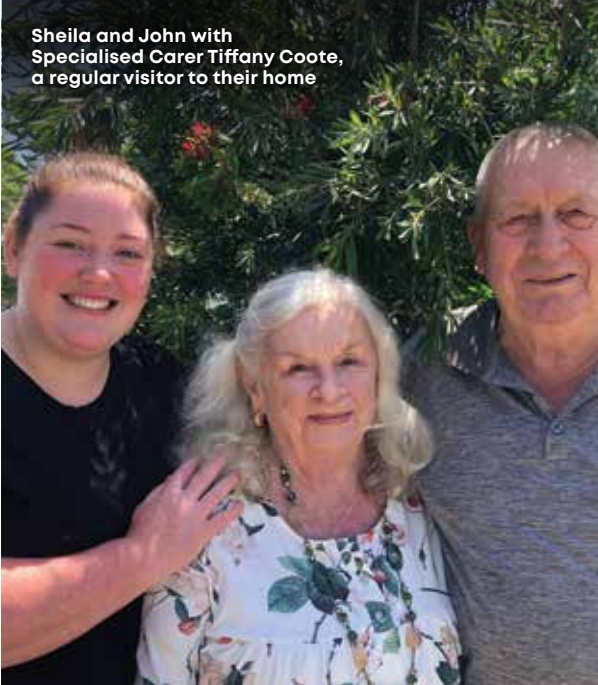
Sheila and her husband John, both in their 80s, have lived in a picturesque fishing village on the NSW South Coast for over 50 years.

Initially reluctant to get outside help, the couple have now been receiving support from the local HammondCare Home Care team for two years – support that’s evolved as their needs have become more complex.

‘HammondCare is like family to us. The team notice things when they visit, and the first thing they do is always ask how we are going. Tiffany, a regular visitor, feels more like a granddaughter than a paid helper.’

After a bad fall in the local town of Nowra, Sheila required five stitches in her neck, and her care team were quick to escalate clinical support from Registered Nurse and Clinical Partner Mel Sparkes.

‘Mel ordered a moon boot for me to wear as I had broken a small bone in my foot during the fall. On her next visit she was concerned about my psoriasis.’ Two days later there was a delivery of new cream to their house for Sheila to try.



John adds, ‘We’ve recommended HammondCare to a lot of people, some of them are older than us and aren’t receiving any care yet. With the additional support, we can keep enjoying our wonderful life here in our own home, where we belong. Even when the unexpected happens.’

Sharon is relieved as well, now her parents are receiving the support they need. ‘Knowing that both Mum and Dad are being cared for, and that the support is flexible to meet their challenging needs means I can focus on other things too.’

‘HammondCare has been a godsend,’ Sheila pipes in.

Home Care

Home care is a key focus of our Next Chapter Strategy. Offered in NSW, ACT, Victoria and Queensland, our services enable clients to continue enjoying life in their homes, thanks to support from a consistent team of trained care workers.



10,402
people
cared for



875,393
home care
visits



36
locations



1,740
dedicated
staff

Shane’s lasting legacy follows a devastating diagnosis

It was during a family bush walk along the popular Spit Bridge to Manly track when Shane, 65, experienced the first symptoms of Motor Neurone Disease. Diagnosed with an aggressive form of the disease, he was given 12–18 months to live.

Forced to stop work, Shane and his wife Julie also had to shelve retirement plans. With encouragement from a close friend, he began writing the book he’d always dreamed of. *Two Feet Off the Edge* is a personal reflection of Shane’s spiritual beliefs intertwined with short stories of adventures and memories.

In the introduction, Shane writes, ‘When you are faced with your own cliffs, remember that being two feet off the edge is not a place of danger, but a place of opportunity.’

During this challenging time for Shane and his family, Clinical Nurse Specialist Helen Napthali from HammondCare’s community palliative care service was a regular visitor to their house. Helen’s consistent presence helped build a trusting relationship with Shane, Julie, and their daughters Brooke and Tamika.

‘Shane’s symptoms were managed comprehensively by our combined allied health team, including physiotherapists and occupational therapists,’ shares Helen. ‘As his needs became more complex, we worked together to meet his changing situation.’

Working in tandem with the local health network, and the Motor Neurone Disease Research Centre at Macquarie University Hospital to provide 24-hour support, Helen’s team enabled Shane to keep living at home



Shane and Helen at his book launch

for as long as possible surrounded by his loved ones, including his two grandsons, Sammy (5) and Ziggy (3).

By the time Shane had finished writing his book he was unable to talk. He communicated through Julie that he needed support for a book launch. Anne Henman, a social worker from Helen’s team, made this happen, with financial support from HammondCare Foundation – which funded the cost of catering and the publishing of 250 copies of Shane’s book.

Shane died on 3 November 2024 at Macquarie University Hospital.

Healthcare & Hospitals

HammondCare’s health services provide palliative and supportive care, rehabilitation, older people’s mental health, pain management and other vital support services.



3,553

people cared for in hospital



3,455

people cared for in community and outpatient care



11,365

positive ageing visits by allied health



41,762

bed days



524

dedicated staff

Rebuilding strength at home

Caring for a loved one can be one of life’s rewards – and one of its toughest challenges. It can mean putting your own health last. With HammondCare’s Short-Term Restorative Care (STRC) program, patients can rebuild strength and confidence.

When 91-year-old Laurie began to feel out of breath, struggled to move around and lost 13 kg in just a few months, she realised she needed some extra help. Laurie is the primary carer for her husband Nandy, who lives with Parkinson’s disease.

‘I need to stay as well as possible,’ Laurie said. ‘But I was running out of strength.’

That’s when Laurie was referred to the STRC program. Over eight weeks, Laurie received tailored support from a HammondCare allied health team, including a physiotherapist, occupational therapist, exercise physiologist, dietician, as well as a program coordinator.

Describing the team as her ‘angels’, Laurie shared, ‘It’s been an enormous help, and I feel thoroughly supported.’

The team visited Laurie at home and set out some achievable goals, including gentle exercises and a focus on healthy eating. She soon noticed the changes: better stamina, improved mood and more energy to care for Nandy. Her daughter Kim noticed too.

‘It’s like the sun has shone into my parents’ house again,’ Kim said.



A government-funded program, STRC provides intensive allied health support, nursing and personal care services, as well as practical supports like equipment and in-home technology.

Under the new Support at Home reforms from 1 November 2025, STRC will become the Restorative Care Pathway, expanding from eight to 12 weeks – more time for even better outcomes.

For Laurie, the benefits are already clear. She can move more easily and breathe better. Most importantly, she has the energy to keep caring for Nandy while they continue living their life together at home. ‘I feel like myself again, and that means I can keep being here for him.’



Research spotlight

A landmark study of HammondCare’s STRC program confirmed its effectiveness in helping older people stay strong and independent at home:

- 484 clients (average age 81) followed over two years.
- 99% remained living in their own homes after STRC.
- Statistically significant improvements in daily function (MBI scores).
- Outcomes also measured in nutrition, frailty, goal attainment and patient-reported wellbeing.

Published in *BMC Health Services Research* (2025)

Care at your place

Living independently, with support easily at hand

With nearly 300 HammondGrove independent living units across three locations, and plans for more in the near future, seniors living is a key part of our care for older people.

A crucial benefit of these vibrant communities is their colocation with aged and dementia care – both residential and in the home – as well as extra services such as restorative and allied health care. This integration will only increase as we develop new Next Chapter models to help older people more easily receive the care they need at home or around the corner.

In keeping with a positive ageing approach to enabling independence, our seniors living units feature no internal stairs, wider doors and hallways, rails and ramps, access to outdoors, easy to use kitchens, and support with gardening and repairs.

These homes and communities provide a natural connection to other support which residents can access when and where it suits. This might be exercise classes and mobility support, interest groups and outings, and beautiful community facilities ranging from pools to gyms, libraries to theatres, bowling greens to art and craft rooms.

Of course as needs change, there's ready access to next steps such as aged, dementia and palliative care.

Our independent living units are offered in Hammondville and Miranda in Sydney, and Scone in the upper Hunter, NSW. Several new locations are in planning for the near future.

Special award for beloved Village Manager

Our Hammondville Village Manager from 2015 to early 2025, Sue Hunt, this year posthumously received our highest team honour, the annual Bob Hammond Award. Sue was highly regarded and much loved not only by the residents of HammondGrove Hammondville, but the many team members who worked with her across a remarkable 29 years of service in several key roles.

Sue's sudden and untimely death from natural causes in March this year, was met with a wave of grief across our organisation, as tributes flowed in acknowledging her servant hearted leadership, can-do approach and tireless commitment to our Mission and the people we serve.

Husband Darrell and daughter Ilana received the award on her behalf at our annual Mission Celebration in May, where among many other words of praise, it was said of Sue, 'nothing was too much trouble, nothing fazed her, she didn't like a fuss about herself, but she never stopped giving to others.'



Care at our place

Personalised care helps restore peace for a Vietnam veteran

Robert, a Vietnam War veteran and HammondCare Caulfield resident, has vascular dementia and post-traumatic stress disorder. A side effect of this complex diagnosis meant he was often convinced he had to urgently catch a flight – causing him and his family much distress.

Every morning Robert would routinely empty his cupboards and drawers, and pack all his personal items, including his bedding, to ready himself for the trip. Sometimes he'd even attempt to climb out of his bedroom window to make his flight in time.

Household Support Carer Jarryd was recognised with a HammondCare Mission in Action award for developing a care plan to help ease Robert's anxiety. A rigorous morning exercise routine to keep him engaged, attending ANZAC Day events, and understanding his war experiences and his personal triggers all helped to create a more peaceful living experience.

'Robert's army training led him to do things in a disciplined way, like packing up his personal items,' explains Jarryd.

'It's great to see him now more settled and making new friends in his cottage.'

Jarryd and his team also created opportunities for Robert to contribute to the daily routine of the cottage, including light duties in the kitchen, which he really enjoyed. This helped him to feel valued, and by contributing to regular, ongoing activities he had purpose.

Robert's wife of 44 years, Many, speaks glowingly of Jarryd's approach to his care:



'All I can say is Jarryd is a gem. He's not allowed to leave his job!'

Associate Professor Steve Macfarlane, Head of Clinical Services with Dementia Support Australia, said while every case is unique, the behaviour of needing to be somewhere is common with dementia.

'Invariably, this behaviour responds poorly to medications and so innovating non-pharmacological strategies like Jarryd put in place reflect best practice,' A/Prof Macfarlane explained.

Residential Care

HammondCare's Residential Care homes are located across NSW, SA and Victoria. Our approach in these homes is to offer a sense of belonging and being at home, with a particular commitment to dementia-specific and complex care.



2,826 people cared for



15 care homes



13 locations



2,770 dedicated staff

Care at our place

Supporting clients to live at home, and their carers too

Our social clubs and respite cottages help clients to connect with new friends locally, while their carers take a well-earned break – especially supporting those with dementia to keep living at home, surrounded by the people and things they love.



Caring for a loved one with complex needs can be challenging for carers too. Our programs offer much needed time out, and a chance to recharge the batteries.

Emily Garay, manager of **Lucinda Cottage**, did some homework when new client Kim came to stay. 'I found out that Kim used to breed Golden Retriever dogs. One of our care team has a beautiful dog of the same breed, named Terry.'

Now when Kim comes to visit, Terry is there too. Kim looks forward very much to his cottage stays and seeing his new companion.

Kim's wife Diana shares, 'I look forward to Kim's visits to Lucinda Cottage. It gives me time to pursue activities I enjoy, meet with

friends, shop and attend appointments knowing Kim is happy and being well looked after. I have more relaxation time and get to catch up on uninterrupted sleep. Thank you everyone at Lucinda Cottage.'

At **Tallowood Social Club**, Manager Ethan Redman organised a memorable trip to Emu Heaven, a well-known tourist destination in Queensland – and home to over 1,000 emus. 'Our visitors enjoyed looking out the window and commenting on the scenery,' shares Ethan, who was also the minibus driver for the day.

'Witnessing how much of a positive impact this experience had on them is what drives us. One client often asks for his wife when he's at the social club. He didn't mention her at all that day.'

The **Ironbark Social Club** team got creative when they discovered a client had just become a grandparent again. They left a photo of the new baby on his favourite chair; he was over the moon when he recognised it, showing the picture of his grandson proudly to other visitors.

The client's daughter exclaimed, 'Thank you so much for all that you do! Dad's grandkids are the light of his life. He doesn't remember them sometimes when they're not in front of him, but when he sees them in the moment, he adores them.'



Care at our place

A community of support

Sometimes it's the smallest gestures that mean the most: a kind word, a listening ear, or a team that goes the extra mile. For the almost 1 in 10 older Australians living with a mental health condition*, those gestures, and the right environment, make a difference.

When David** came to HammondCare's Riverglen Unit at Greenwich Hospital, he was experiencing severe depression. With specialist treatment and encouragement from the team, he found support during a very difficult time.

Today, David returns to Riverglen twice a week, not as a patient but as a volunteer, spending time with people going through similar challenges and listening to their stories.

That sense of belonging is at the heart of Riverglen. The 20-bed acute Older Person's Mental Health (OPMH) unit supports people over 65 living with complex mental health conditions such as severe depression, bipolar disorder and psychosis.

The focus at HammondCare's OPMH units at Greenwich and Braeside Hospitals is on creating a homelike environment. Patients are encouraged out of their rooms to share meals in a communal dining area, join group activities, spend time in the courtyards or take part in art therapy and exercise programs.

This year, the team was recognised with two awards from Northern Sydney Local Health District for Most Improved Overall Experience across both the Your Experience of Service Survey and the Carer Experience Survey.

'I'm very proud of the work the team does every day to support older people with mental health issues,' shares Khima Neure, Director of Nursing and Operations.

'These surveys are completed by patients and their carers, and reflect the team's commitment to supporting people to live as well as they can.'

The multidisciplinary team includes nurses, consultants, a psychologist, social worker, physiotherapist, occupational therapist, recreational officer and art therapist. Together they create a safe and supportive environment where recovery is nurtured through relationships.

For Nurse Unit Manager Biren Thapa, David's story reflects the spirit of the unit: 'He values Riverglen as a place where he was supported during a very difficult time. Now, by volunteering, he offers others the chance to feel that same sense of hope and connection.'

* Australian Institute of Health and Welfare (2024). 'Mental health in aged care'. Australian Government.
** Name has been changed.



Care at our place

Holding on to what matters most

Living with terminal illness can cause significant distress. Yet for many, it can also be an opportunity for reflection and growth. For Trish, HammondCare's Embrace program was a safe space to talk about what is really happening – and to find a greater sense of meaning and purpose.

A mother of six and grandmother of 15, Trish was diagnosed with non-curable oesophageal cancer in 2018 after experiencing difficulties swallowing while on holiday.

'Oesophageal cancer is not like breast cancer – there are no support groups, not even a general support group at the hospital,' she says. That's where Embrace stepped in.

The group-based therapeutic program supports people through the complex emotional, psychological and spiritual challenges of illness. Professor Melanie Lovell, HammondCare Senior Staff Specialist in Palliative Care, led the program's development.

'Treatment is not just about physical symptoms but looking at the whole person – what they are experiencing and how they can draw on those experiences to focus on what's important in life.'

Co-facilitated by Pastoral Care and Social Work teams, Embrace has so far supported more than 30 people across inpatient and community palliative care services.

Sessions combine reflection, practical strategies and peer connection.



Trish at home with a beloved photo of her family

Dr Peter Archer, Head of HammondCare Pastoral Care (Healthcare & Hospitals) and Pastoral Care Research, and one of the developers of Embrace, says the program uses powerful metaphors to help participants reframe their experiences – such as the Japanese art of *kintsugi*, where broken pottery is repaired with gold.

'These metaphors remind us there is always the potential for positive change and growth, even as the cracks and scars remain a part of who we are – and are becoming.'

The program has been formally evaluated with research generously funded by HammondCare Foundation, with support from the David and Judith Taylor Foundation.

For Trish, one of the most valuable aspects of the program was the chance to share her experience with openness and honesty.

'You can't always voice your feelings with your family ... Participating in the Embrace program was a wonderfully freeing experience.'



Research spotlight

This study evaluated the Embrace program for people with life-limiting illness across two six-week programs involving nine participants. Weekly small group sessions explored meaning and purpose. Research results indicated that:

- participants valued the supportive group setting and experienced growth as 'positive psychological change' even in their challenging circumstances
- participants reported greater understanding of how to live with meaning and hope despite illness.

Published in *Patient Education and Counseling* (2025)

Care at any place

Providing crucial dementia care and support for Caroline's family

Despite being medically ready for discharge, many people living with dementia remain in hospital due to the absence of a coordinated, dementia-informed transition plan – bringing many emotional challenges for the person living with dementia and their family.

This was the experience for Caroline, guardian for her 98-year-old grandfather who was legally blind and living with dementia. His situation became more complex when he was moved between care homes and hospitals due to escalating behaviours.

When a social worker at Royal Hobart Hospital referred him to the Hospital to Aged Care Dementia Support Program (HACDSP), delivered through Dementia Support Australia (DSA), everything changed.

The program, now in 11 locations nationally, provides specialist support for smooth transitions from acute care back to home, or residential care. The DSA team created a tailored plan, a more suitable care home was soon found and excessive medication was ruled out.

The team also helped the family to document his personal history, preferences and triggers. On the day of the transition, a team member helped him decorate his new room with special items, like pictures of Model T Fords, and provided a toy companion cat, while Caroline completed the necessary paperwork.

Caroline's grandfather became more settled; he even felt comfortable enough to nap in the common area at his new care home.

Caroline shares, 'Our family felt heard and seen from the start. The DSA team encouraged us to reflect on the progress



Caroline enjoys a special outing with her grandfather

being made to settle him. And my grandma's feelings of powerlessness were legitimised throughout the process, no longer being his fulltime carer.'

Bethany Kings, DSA's Head of National Programs HACDSP and Respite, explains, 'It's about providing quality care for Caroline's grandfather, and empowering the wider family through education, like planning meaningful visits around his other activities to reduce stress.'

Caroline concludes, 'I don't think we could have expected a better outcome. It felt like an enormous weight had been lifted off our shoulders.'

Dementia Support Australia

A service led by HammondCare, DSA is funded by the Australian Government. It has been operating nationwide since 2016, providing free advice and support, tailored to the person living with dementia where changed behaviours impact care.



24,228
people
cared for



640,309
service activities
across DSA



31
locations



284
dedicated
staff

Care at any place

Volunteering precious time and experience for people in need

HammondCare's 850 (and growing!) dedicated volunteers play a vital role in supporting residents, patients and clients with company and friendship – meeting them wherever they are, on any given day.

Volunteers are valued for their support and experience, from volunteer Robyn who brings a unique perspective to the role, to the popular four-legged friends who visit our care homes.

Robyn, who was diagnosed with Alzheimer's disease seven years ago, volunteers at HammondCare Erina every Monday. She helps the Pastoral Care team with preparations for church service and provides companionship for a resident she's made a special connection with, in one of our high care cottages.

'Robyn's days as a volunteer are built around the things she enjoys most and feels confident doing,' explains Volunteer Coordinator Jo Currie. 'We encourage people from diverse backgrounds and lives to volunteer, with an inclusive approach – always ensuring we provide the support where it's needed.'

At HammondCare Daw Park in Adelaide, Cavoodle Charlie is a familiar face. Charlie's owner Liz, despite a busy life with work and family, rarely misses their weekend visits.

'On Saturday mornings, when I grab Charlie's treat bag, his lead and HammondCare bandana, he gets very excited, as he knows we're off to visit the residents. He loves it as much as they do!' shares Liz.

'Residents enjoy giving Charlie treats during his visit, including Michael who loves to take Charlie for a walk around the cottage – as if Charlie is his own dog. The joy on both their faces is infectious.'

Volunteer Coordinator Kathy Moritz shares the impact: 'A visit from a pet volunteer can evoke precious memories for the people we care for, including those living with dementia, who may have been pet owners in the past; the physical contact can have a calming effect too – often enhancing mood.'

Kathy adds, 'Our Volunteer Services team take the time to match volunteers with people who share similar passions, making every interaction meaningful and enjoyable. Whether it's providing companionship, arranging home visits, or engaging in art and music therapy, there's a HammondCare volunteer ready to share in their interests and hobbies.'



Daw Park resident Michael meets volunteers Liz and Charlie



Volunteer Robyn (left) and Jo

Care at any place

All welcome at HammondCare Darlinghurst's social club



Safety and connection are at the heart of care for residents at HammondCare Darlinghurst, a care home for older people who are homeless or at risk of homelessness. Which is why the new social club, led by manager Saroj Katuwal, is having a real impact.

'Social club is a safe space where residents can come together to socialise. We encourage them to leave their rooms and to spend time with other people – something they may not be used to doing. We're always exploring new activities to support connection.'

Resident Barry is a regular visitor. It's thanks to a referral from Dianne, a social worker at St Vincent's Hospital's Homeless Health Service that he now calls Darlinghurst his home.

Despite having a leg amputation, developing a pressure sore on the heel of his other foot, and requiring dialysis twice a week at nearby St Vincent's Hospital, Barry lives a full life.

Attending social club has helped Barry feel more settled at Darlinghurst; he now has something to look forward to on the days

when he doesn't have other activities planned. And he meets like-minded people from the local community who are invited to share their experiences as guest speakers at these special gatherings.

Barry was also asked to share his unique story. He's travelled the world as an engineer and a professional sailor. And although he recently lost one of his three sons to a brain tumour, and another son is not in contact, he remains positive.

Supported by Saroj and the team, Barry gave an excellent presentation titled 'Waves of Wisdom' at the social club, as he recounted how he and his son Jeremy enjoyed many successes racing on Sydney Harbour aboard their yacht, *Devil's Lair*.

'I think I've had a wonderful life; I've been blessed,' says Barry.

Caring for older Australians at risk of homelessness

- Every night more than 19,378 Australians aged 55 or above are experiencing homelessness, representing one in seven (15.8%) of the overall homelessness population.
- The City of Sydney has one of Australia's highest concentrations of older people experiencing homelessness with 10% of Specialist Homelessness Service users aged over 60.
- In 2021–22, although 13,000 Australians aged over 55 requested long-term housing from Specialist Homelessness Services, only 9% were granted this option.
- Service participants valued the supportive group setting and experienced growth as 'positive psychological change' even in their challenging circumstances.

Source: ABS (2021). Estimating homelessness: census; AIHW (2025). Specialist homelessness services annual report 2023–24

Care at any place

Sharing dementia design to shape better care

Good design is not about buildings, it's about people. For someone living with dementia, a well-designed space can mean the difference between feeling anxious or confident, withdrawn or connected.



Above: Our stand at the Melbourne Design Show showed how a simple flooring choice can feel like a gaping hole to a person living with dementia

Design has been central to HammondCare's Mission for decades, and we're committed to sharing what we've learned so others can create better places of care.

This year, the Dementia Design School provided the care sector with practical tools that make a difference. For Tapestry, a network of six aged care providers in Melbourne, HammondCare hosted a two-day program for 25 participants, from clinicians to property managers. They explored how small changes – like natural light, clear wayfinding and homelike layouts – can restore independence and dignity.

'The two days were invaluable. It was a chance to learn and bring ideas back to their teams,' explained Craig Bardrick, CEO of Basscare.

For Daniel Jameson, HammondCare Design Lead, the difference lies in our approach:

'Unlike other organisations that share valuable knowledge about dementia design, HammondCare stands apart because we also deliver care in that space every day.

This experience means our insights are continually shaped by the realities of supporting people living with dementia.'

Internationally, HammondCare was engaged to consult on the design of St Andrew's Community Hospital in Singapore, a new 240-bed facility. While not dementia-specific, the project has embraced principles that reduce stress and support independence.

We also stepped onto new stages, including the Melbourne Design Show, where we spoke to architects, designers and students. Many left moved and motivated to take these insights into their own practice.

Knowledge sharing also extended through publishing. More than 1,500 books were purchased in 2024, with titles such as *Talking Sense*, *DesignSmart* and *The Room Outside* providing practical guidance worldwide.

As Australia adopts new Aged Care Design Principles and Guidelines, our commitment remains unchanged: to design spaces where people living with dementia feel at home, supported and able to live life to the fullest.

Dementia Design reach 2024–25

From care homes to hospitals, classrooms to design shows, our dementia design expertise is helping providers, architects and designers create enabling spaces for people living with dementia.

- 12 design reviews auditing care environments
- 2 major consultancy projects, including St Andrew's Community Hospital (Singapore)
- 2 bespoke Dementia Design Schools
- 2 open Dementia Design Schools, engaging 30+ organisations
- 41 architects and interior designers at a dementia design webinar

Nisha Sharma
Specialised
Dementia Carer,
Residential Care

**We know
what to do.**
Making care happen

A safe place when care feels too far out of reach

When someone is living with dementia and experiences severe behaviours and psychological symptoms (BPSD), it can feel like the health care system has run out of options. Long hospital stays and constant distress take their toll on both the person and their family.

The national Specialist Dementia Care Program (SDCP) is offering hope. New HammondCare research, published in the *Australasian Journal on Ageing*, has found promising evidence that SDCP units are improving outcomes for people with the most complex needs.

‘The SDCP can help to address hospital bed availability through improved care options for people experiencing very severe BPSD,’ explains co-author Dr Thomas Morris.

HammondCare operates all seven SDCPs in New South Wales as well as sites in Caulfield, Victoria and Daw Park in South Australia, making us the nation’s largest provider of this model of care. With homelike cottages, small resident numbers and multidisciplinary teams practising person-centred care, residents living with BPSD are experiencing smoother transitions back to mainstream care, and less reliance on psychotropic medications.

For Portuguese-born Alfredo, the program reshaped his future.

‘Alfredo spent more than 120 days in hospital, and no aged care home felt able to take him, but when we heard his story, we knew we had to help,’ recalls SDCP Manager Pratiksha Shrestha.

Alfredo arrived at HammondCare Cardiff’s Quintral Cottage SDCP in December 2023. The experienced care team focused on reducing antipsychotic medication,



Paulo and Alfredo

addressing unmanaged pain, and creating a calm, homelike environment. Familiar activities like gardening gave him purpose again.

Slowly, Alfredo began to settle in and enjoy daily life.

‘The care he has been given there has certainly been special, it was a safe environment for him,’ his son Paulo said. ‘In his final years of life, he is comfortable.’

After more than a year at Quintral Cottage, Alfredo achieved a milestone his family never thought possible – he moved into a regular dementia care cottage. He died peacefully in June 2025, aged 79, leaving his family grateful that his final chapter was lived with dignity and connection.

With 22 SDCP units open in 2024 and more on the way, research continues to explore how this model can inform national dementia care policy and practice. Referrals into SDCPs are coordinated by Dementia Support Australia, which undertakes specialist assessments using the National Behaviour Assessment (NBA) to determine eligibility.

Research in 2024

Our research spans diverse fields, driven by partnerships, innovation and a commitment to best practice care for people with complex needs.



57
research projects



67
publications



13
education and awards



5
new grants

In the Arena: ideas and voices shaping dementia care

In September 2024, well over 1,100 people from across Australia and around the world gathered in Sydney for the International Dementia Conference. Over two days, the conference became a place for listening, learning and challenging the way the sector thinks about dementia care.

Delegates heard from researchers, care practitioners, people with lived experience and global experts. Sessions covered everything from tackling complex negative media stereotypes, to exploring unexpected aspects of sexuality and consent in aged care, and the future of palliative care in an era of voluntary assisted dying.

The Hon Annika Wells, then Minister for Aged Care, opened the conference with a call to keep lived experience at the heart of reform. Her message was clear: aged care policy must be shaped by the voices of those who live it every day.

The event was expertly guided by respected author and journalist Leigh Sales, and international experts brought fresh perspectives, including Dr Tom Russ from the UK on advances in diagnosis and treatment, and Professor Samir Sinha from Canada on the challenges and opportunities of aged care reform.

IDC2024 by the numbers



1,100+
delegates from Australia and overseas



12
international speakers from 8 countries



50+
research papers presented

One of those voices was Luke Campbell, who spoke of caring for his wife Lisa after her diagnosis of younger-onset dementia in 2020.

Luke described the four-year journey to diagnosis, the lack of a care plan at that critical moment, and the distress of seeing Lisa placed in an aged care environment that didn’t meet her needs.

‘Having to try and navigate the different services by myself was very difficult and continues to be,’ shared Luke.

Luke’s plea for a ‘fast pathway’ for younger-onset dementia to be included in the NDIS, similar to that for Motor Neurone Disease, resonated across the room. It was a reminder that research and policy matter most when they change lives.



Care Fund recipient Penny receives life-changing support

For people like Penny, a proud First Nations client living on Dharawal Country, HammondCare Foundation's Care Fund bridges the gap between crisis and stability.

'I didn't think anyone would hear me. I'd been let down before. I was just trying to hold on,' shares Penny.

When Penny first connected with HammondCare, life felt like it was closing in. Chronic pain made sleep near impossible. Her fridge barely worked, and fresh food was a luxury she often went without.

Forced into medical retirement due to complex health conditions, Penny was suddenly living on a drastically reduced income.

But when she mentioned her broken fridge to Sue Chadburne, a HammondCare Care Navigator, something shifted. Sue didn't just listen – she acted.

The very next day, Penny was approved for a brand-new fridge through the Care Fund. 'It floored me,' she said. 'I was overwhelmed. Suddenly I could keep food fresh. Cold water on a hot day felt like a gift.'

Not long after the fridge arrived, Penny received a new mattress – one that eased her pain and helped her sleep through the night. The impact wasn't just physical. It was deeply emotional.

'I used to wake up in tears, and I dreaded going to bed, knowing when I woke up again I'd be in pain. Now I start my day with energy. I'm eating properly again. Seriously, it's changed everything.'

The HammondCare Foundation's Care Fund was created to support people in our care who are facing hardship and have nowhere else to turn. It provides fast, practical help – like grocery vouchers, essential white goods, furniture, bedding, clothing, and one-off medical or utility costs – when other funding sources fall short.

The Care Fund has been made possible entirely by generous donations. Since its launch, it has helped dozens of people across home care, residential care and hospital services – restoring dignity, comfort and hope when it's needed most.

Penny adds, 'I feel seen and valued; I'm not just a name on a page. I know I matter now.'



The Care Fund in FY25



137 referrals received

112 referrals approved

How we've supported people in need:

- 28 equipment (e.g. wheelchair)
- 26 emergency housing assistance (e.g. hoarding and squalor cleans)
- 25 essential furniture items (e.g. bed)
- 24 white goods and electronics (e.g. fridge)
- 23 medical bills
- 14 food/grocery vouchers
- 6 clothing and bedding
- 3 transport
- 3 utilities
- 2 home modifications.

How we've changed lives, thanks to donor generosity

Braeside Hospital

A gala dinner organised by a grateful family along with the HammondCare Foundation and Braeside teams, funded much needed rehabilitation equipment. 'Now we can further support patients to retrain their walking ability, especially amputee patients,' shares Physiotherapy Manager Lionel Wong.

Palliative Care

Palliative care patient Denice was desperately wanting to fulfill her dream of reconnecting with horses. Thanks to the Foundation's Dreams Project, two ponies visited her in hospital, so Denice could share her love of horses with her children – creating a lasting memory for her family.

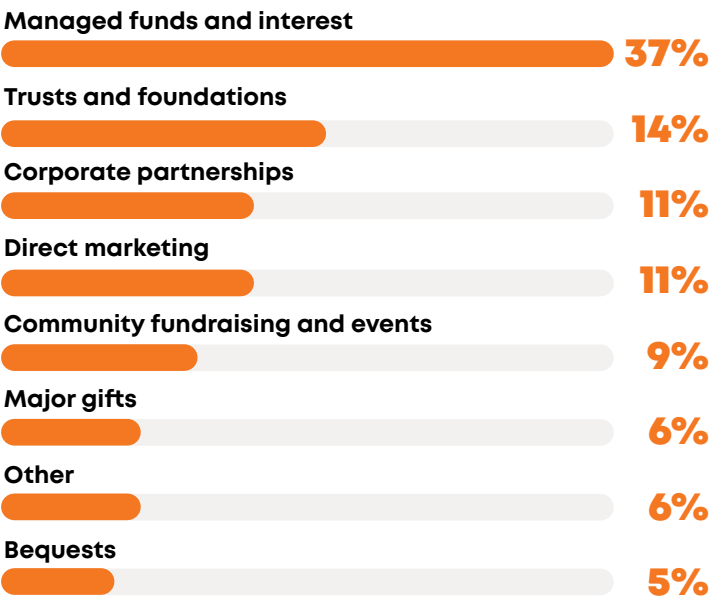
Home Care

Bob's complex mobility issues were making it difficult to access their caravan where he lives with his wife Mary, increasing the burden on her. HammondCare Foundation's Care Fund financed custom steps and a handrail, creating increased dignity, independence and safety.

In 2024–2025, the HammondCare Foundation raised

\$1,931,978

Donations by income source



You can help make a difference

HammondCare's Mission is to improve quality of life for people in need. Supporting the Foundation helps expand care programs, undertake research and grow services for people who need us most.



Regular giving

Monthly gifts help us plan for the greatest impact and meet unexpected needs for the people we serve.



In memory

Celebrate and remember the life of a loved one by giving a gift in memory. Honouring them extends care to others in need.



Bequest

A Gift in Will, no matter how large or small, will leave a lasting legacy. It's a simple and meaningful way to support the future work of HammondCare.



Partnerships

Together we can achieve so much. Partnerships are vital to our ongoing work. We're keen to talk with individuals, businesses, corporate organisations, trusts and foundations interested in joining forces to help advance our Mission.



Volunteering

A team of 850 trained volunteers generously offer their time, commitment and skills to enhance the work of HammondCare.

If you'd like to learn more, please visit hammondcare.com.au/volunteer



LEARN MORE ABOUT THE FOUNDATION AND HOW YOU CAN SUPPORT OUR WORK

Social dividend

Focusing resources to say ‘we do’

With a commitment to complex care, our social dividend demonstrates how we steward our resources to support older people, regardless of their circumstances.

\$35.5m

Mission-led social dividend

Residential Care



HammondCare contributes

\$4m

to support financially disadvantaged residents

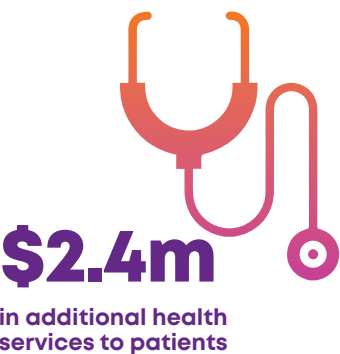


savings to the health and aged care system from cottage model of care

Home Care + Independent Living



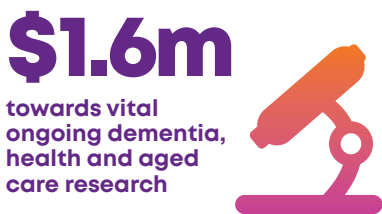
Health



Homelessness



Research and social support to improve quality of life for people in need



Note: Some social dividend calculations have been adjusted from previous years due to aged care reforms and other changes.

Sustainability

Caring now and into the future with sustainable development

Aligning with our Next Chapter Strategy, in 2025 our sustainability efforts have centred on sustainable growth when building future capability.

The guiding principles of stewardship and resource management drive us to set the national standard for compassionate, sustainable and Mission-led care. For example, the following sustainability features have been incorporated into designs for HammondCare Greenwich, our new flagship site and centre of excellence for complex care.

Sustainable operations

- Introduction of onsite organic and food waste recycling.
- Development of community gardens that support circular waste practices.

Community and wellness integration

- Creation of more opportunities for local community integration with added amenities and services to outdoor spaces.

Flexible and resilient design

- Increased rainwater collection capacity and water efficient fixtures.
- Targeted increases in tree canopy to mitigate urban heat island effects.

Responsible construction

- Reduction in use of concrete and steel mass; replaced by responsibly sourced structural timber.

Quality care environments

- Air handling systems specifically designed to reduce airborne bacteria level.
- Openable windows to allow natural ventilation.

How we’ve performed against our targets over the last 12 months



Energy efficiency
Our solar fleet generates 22% of our energy needs

Increased capacity of our solar arrays and investment in lower energy assets mean HammondCare now generates 22 per cent of our operational energy needs, an increase of 0.3 GWh from previous years.



Waste reduction
37% of waste diverted from landfill

FY25 has seen continued strong performance in waste diversion, with HammondCare improving on prior years with over 9,000 m³ (>37 per cent) of waste generated being recovered or recycled.



Sustainable design
Committed to sustainable development

When thoughtful design meets functionality for a cleaner, greener community, everyone wins – especially the people we care for. Our ongoing commitment is shown through our tailored site and community specific sustainability plan for all major capital developments.

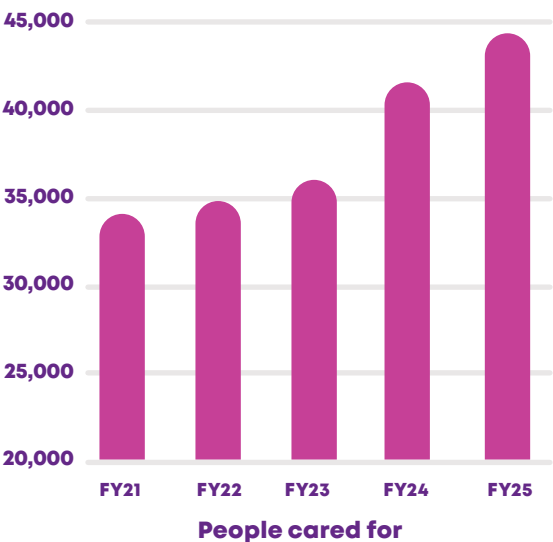


Sustainable travel
Hybrid electrical vehicles (HEV) now make up 47% of our fleet

Hybrid vehicle capacity is now nearing 50 per cent, with further internal combustion engine replacement scheduled for 2026 end-of-life vehicles. Transitioning to an HEV fleet is currently reducing travel-related carbon emissions by up to 50 tonnes each year.

Growing the reach and quality of our complex care

We continue to serve more older people each year, reflecting our Ambition to lead nationally in complex care.



Our Mission in Action

96% of residents and clients say: 'I am treated with respect and dignity.'

96% of residents and clients say: 'HammondCare staff are caring.'

93% of residents say: 'HammondCare staff treat me as an individual.'

Partnering in Care 2025 survey: Residential and Home Care

Our team go above and beyond

5,986 full-time, part-time and casual staff as at 30 June 2025.



Workforce stability strengthens

Our larger FY25 workforce shows even stronger stability with workforce attrition down to 17.3%, below the sector total of more than 20%.*

While some of our improved stability is due to sector-wide factors such as ongoing aged care Work Value Case wage increases, internal emphasis on improving employee benefits, connection, training, opportunities and belonging plays a significant role. Future stability continues to face the challenge of overall care workforce shortages, particularly for nurses.

*Source: AIHW residential aged care quality indicators Jan–March 2025



92% of our team say: 'Team members treat clients, residents and patients with respect.'

91% of our team say: 'I understand how my role contributes to the overall success of HammondCare.'

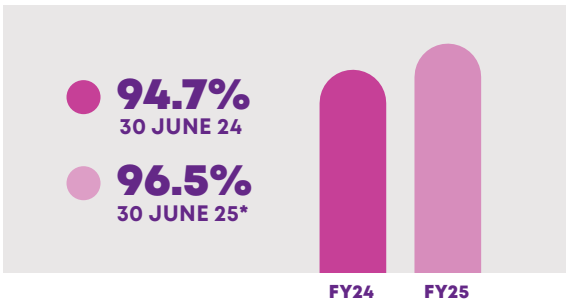
Safety and wellness are a priority

Our Next Chapter prioritises a team that is skilled, empowered and valued, supported by capable leaders, wellbeing resources and safe work practices. Our residential care workers compensation expense ratio to staff costs in FY25 is 2.5%, on par with the sector average.

How we engage with our care community

Occupancy in care homes

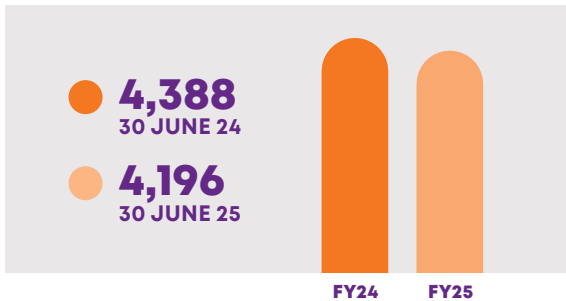
Consistently high occupancy continued across our residential care homes.



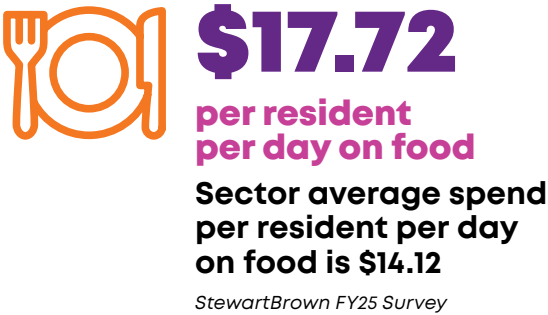
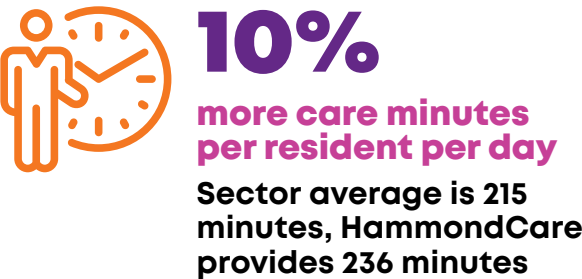
*Sector average is 94.2% (Source: StewartBrown)

Home Care Packages

A small decline in HCP clients reflects continued change as well as lengthy waiting lists for assessment and allocation.



Sector benchmarks



Making an informed choice

The Star Ratings system aims to help older people and their families make informed care choices, while encouraging providers to improve service performance.

While supporting the role of Star Ratings, we are concerned the current design does not adequately consider the specific needs and complexities of care for residents living with dementia, penalising providers who specialise in dementia care. Despite this, HammondCare has consistently achieved an overall star rating of between 3 and 4.

Source: Australian Government Department of Health and Aged Care



Record revenue, strong execution

Total revenue grew to \$620m

Residential Care revenue grew by \$24m to reach \$261m. Revenue growth came mainly from strong occupancy – an average of 96.5 per cent for the full year for established homes – and higher subsidies for care.

Advisory Care total revenue increased by \$7m to \$66m. This was primarily due to the Hospital to Aged Care Dementia Support Program, a newly funded program that began during the year.

	FY25 \$M	FY24 \$M	INCREASE \$M	INCREASE %
Residential Care	260.5	236.6	23.9	10.1%
Home Care	171.4	173.1	-1.7	-1.0%
Independent Living	9.0	7.9	1.1	13.9%
Health	65.5	62.8	2.7	4.3%
Advisory Care	66.2	58.8	7.4	12.6%
Other	47.2	46.7	0.5	1.1%
Total	619.8	585.9	33.9	5.8%

Our underlying net surplus for FY25 was \$1.2m

During FY25, HammondCare recorded an underlying net surplus of \$1.2m, compared to an underlying net surplus of \$14.6m for FY24. The FY25 results include IT investments to upgrade systems of \$12.2m (2024: \$6.3m). The FY24 result also included an extraordinary donation of \$8.9m.

Total comprehensive income including non-operational items for the year recorded a surplus of \$10.3m, a decrease of \$34.8m compared to FY24, mainly due to an unrealised loss on revaluation of investment property in accordance with accounting standards.

The Residential Care business finished the year with a deficit of \$1.4m, which represents an improvement on the previous year (2024: deficit of \$2.2m). Management continues to deliver strong results returning the business to a more sustainable financial position. Occupancy levels have remained steady at around 96.5 per cent for established homes. HammondCare continued to exceed overall care minute targets over the year, providing

236 minutes per resident per day, versus a target of 215 minutes.

HammondCare Home Care recorded a deficit of \$3.2m for FY25 (2024: surplus of \$6.7m). The deficit was mainly due to a \$6.6m investment in software to enable compliance with the upcoming sector reforms and to enable future growth. Improving and growing Home Care Packages continued to be a key management focus.

Our Health services recorded a deficit of \$3.1m (2024: deficit of \$3.7m). The improved result was driven by a strong operational focus on performance, increased Private Health Insurer funding rates and increased activity related to the Short-Term Restorative Care program. Government and private health funding not keeping pace with rising costs continues to be a challenge.

Independent Living Unit operations continue to deliver strong results, recording an operating surplus of \$4.7m during FY25, up \$0.6m from the previous year.

Our strong balance sheet provides stability for future growth

The financial position of HammondCare remains strong. All bank loans were repaid. Zero Real Interest Loans (ZRILs) reduced to \$9.8m (2024: \$11.7m) as of 30 June 2025. In addition, HammondCare maintains a self-imposed prudential reserve, which is premised on being able to readily fund the replacement of large assets and/or repay residential liabilities, in the event of a significant adverse event. HammondCare has total liquid assets (cash, cash held on term deposit, managed fund assets) as of 30 June 2025 of \$177.3m (2024: \$138.5m), to apply against the Group's prudential reserve. New prudential and financial standards will be introduced as part of the new Aged Care Act. Based on draft standards, HammondCare continues to exceed minimum requirements.

In FY25, HammondCare's total assets increased by \$44m, achieving total assets of \$1,165m. This increase is attributable to higher liquid assets and fixed assets, partially offset by lower right-of-use assets.

Our total liabilities increased by \$34m, reaching \$804m. The increase in total liabilities is attributable to an increase in RAD liabilities from higher occupancy and new services, and an increase in ILU entry contributions partially offset by a decrease in lease liabilities.

As a result of movements in assets and liabilities above, HammondCare had Net Assets of \$361m, an increase of \$10m.

\$10m increase in assets to \$361m

	FY25 \$M	FY24 \$M	INCREASE \$M	INCREASE %
Total assets	1165.1	1121.3	43.8	3.9%
Total liabilities	804.1	770.6	33.5	4.3%
Net assets	361.1	350.7	10.3	2.9%

Sustainable cash flow to invest for the future

Capital expenditure \$40m

HammondCare generated earnings before depreciation and amortisation (EBDA) excluding IT Investments of \$33m in FY25 (FY24: \$33m).

From a financial accounting perspective, the cash inflow from operating activities was \$32m (FY24: \$53m).

During FY25 the Group has continued to invest for the future with total capital expenditure of \$40m.

Continued net inflows of accommodation deposits and entry contributions (\$51m), resulted in HammondCare finishing FY25 with no bank debt (FY24 bank debt \$8m) and a cash-on-hand balance of \$16m (FY24 cash balance \$5m).

	FY25 \$M	FY24 \$M	INCREASE \$M	INCREASE %
Capital expenditure	40.1	34.6	5.5	15.9%

Our Board

Governance is a key part of being an organisation that not only says ‘we do’ when people ask, ‘who can help?’, but also knowing what to do and having the capacity to do it. Our Board is equipped with clinical, business, financial, legal and construction knowledge and experience, to ensure our Mission and Next Chapter Strategy benefit from excellence in governance.



Kok Kong Chan
Chair

BCom MSc
(Management) CPA
Australia GAICD

An advisor and founder of Chairs Global, Kok Kong was a founding Partner of Maritana Partners, a previous Senior Partner at Egon Zehnder and CEO of HeartScan. He's the Chair of the Foundation Committee and the Board Development and Remuneration Committee – and became a HammondCare Director in 2016 and Board Chair in 2021.



Peter Bailey
Deputy Chair

BE MEngSc Hon
Doctor of Eng GC
Management
FIEAust GAICD

Peter is an accomplished CEO, Company Director and Engineer with a proven record of business and engineering design leadership. He is a Trustee Director of global engineering consultancy Arup, Director of the Green Building Council of Australia and holds an Honorary Doctorate from UTS. Peter joined the Board in 2023, is a member of the Board's Property and Sustainability Committee and the Board Development and Remuneration Committee.



Kate Thomas
Director

BA LLB

As Special Counsel at Clayton Utz, Kate has more than 25 years of experience in property and commercial law, corporate advisory and managed investments. She joined the HammondCare Board in 2015 and is Chair of the Property and Sustainability Committee. She is a member of the Board's Association Development; Board Development and Remuneration; and Quality, Safety and Care Committees.



Adrian Blake
Director

B.E. (Civil) (Hons)
MBA MIEAust
CPEng NER

Having held senior executive positions with several global and Australian organisations working in the Asia-Pacific, Middle East and UK, Adrian is Principal of BlakeGroup Advisory and Engineering. He joined the HammondCare Board in 2018 and is a member of the Board's Property and Sustainability Committee.



Carl Gunther
Director

B. Business
Chartered
Accountant
GAICD

Carl retired as a partner of KPMG in 2019. He's a Director of Anchor RE (Christian SRE in Schools) and a Finance Committee member for the NSW Aboriginal Land Council. Carl joined HammondCare as a Director in 2020 and is Chair of the Audit and Finance Committee, and a member of the Foundation and Association Development Committees.



Linda Justin
Director

RN BN MBA MSc
(Coach Psych)
GAICD

Linda is a Director of Just Impact, the Commonwealth Association for the Ageing (CommonAge) and MTC Future Ready, having consulted and held senior management roles across health and human services. Linda is a casual lecturer with the Faculty of Health at UTS where she is completing a PhD. Linda joined the Board in 2020 and is Chair of the Quality, Safety and Care Committee.



Robyn Langsford
Director

BCom Chartered
Accountant GAICD

A partner at KPMG, Robyn works with Australian mid-market entities focusing on family groups and private businesses across a diverse range of sectors. Robyn rejoined the Board in 2012 and is a member of the Audit and Finance, Board Development and Remuneration, Association Development, and Foundation Committees.



Dr Joanne Lewis
Director

RN BN MPallC PhD
A/Prof

Joanne has worked as a senior clinical nurse in palliative care for nearly 20 years, completing a PhD in 2013. She is an Associate Professor of Nursing at Avondale University and an Adjunct Associate Professor at UTS. Her teaching and research focus on palliative care and aged care. Joanne was elected to the Board in 2023, and is a member of the Quality, Safety and Care; Medical Appointments and Advisory; as well as Association Development Committees.



Andrew Thorburn
Chief Executive Officer

BCom MBA
Dip Mktg Grad
Cert Div

Andrew began as CEO in June 2024. His recent experience was in Impact Investing, assisting entrepreneurs with start-ups, and in the not-for-profit sector. Before this he worked in banking for more than 30 years, including as CEO of Bank of New Zealand (2008–14) and CEO of National Australia Bank (2014–19).

Being present when it matters

To serve people with compassion, especially those facing the hardest challenges, is at the heart of our Mission.

Across every service, our teams embody this commitment in how they care, listen and respond.

- 1 'The unpredictable nature of a person's needs and behaviours means managing often sudden cognitive, emotional and physical challenges simultaneously. We coordinate care across multidisciplinary teams while navigating evolving care plans.'

Ayesha Sijapati, RN
Specialist Dementia Care
Program Manager,
Residential Care

- 2 'Complex pain management that is not adequately controlled or home care dynamics can be challenging. There are often clinical changes with sudden deterioration of patients that result in hospital admission and even death.'

Dr Johann Monzon
Career Medical Officer,
Healthcare & Hospitals

- 3 'Dementia is progressive and incurable. As time passes, it doesn't just affect my memory, it will also impact how I communicate, express emotions and connect with people. It also changes how others see me and that can be very hard.'

Bill Yeates
Living Experience Associate
Consultant, Advisory Care
& Partnerships

- 4 'Situations require quick thinking, adaptability and problem-solving. A sudden decline in a client's health or coordinating complex care needs across multiple services requires me to stay alert and responsive.'

Ecaterina Rusu, RN
Clinical Partner, Home Care

- 5 'Planning for the unexpected requires sensitivity and compassion, having gentle yet direct conversations with patients and families, encouraging them to think and plan ahead.'

Lynette English, RN
Clinical Nurse Specialist
(Community Palliative Care),
Healthcare & Hospitals

- 6 'Every day is different. Some situations are straightforward, while others are more complex or emotionally sensitive, such as helping someone transition from their home into residential care.'

Nisha Sharma
Specialised Dementia Carer,
Residential Care



INDEPENDENT • CHRISTIAN • CHARITY

Cover photo: Lynette English, RN, Clinical Nurse Specialist (Community Palliative Care),
Healthcare & Hospitals, HammondCare

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