



# Next Chapter 2025



HammondCare's Strategy and Ambition

Inspired by Jesus' words in Matthew 25:35-36,

**'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.'**

# Next Chapter 2025



HammondCare's Strategy and Ambition



# Welcome to the Next Chapter

## HammondCare 2025

Welcome to the summary of the 'Next Chapter' for HammondCare. It highlights our strategy and ambition.

**My hope, as you read on, is two things.**

**Firstly, that you are inspired.**

It is hard not to be as we consider the first moments of HammondCare with the Rev Bob Hammond, who helped the homeless in the Great Depression, through to the stories of relationship-based dementia, palliative and home care we provide today.


**Secondly, that you can see your role in this.**

We all have a role in the Next Chapter. The ambition we have is to lead the world in relationship-based care and to continue to care for many, who others can't or won't. Every role at HammondCare is connected to this ambition.

In the following pages you will see some of our history, capability and confirmation of our mission.

I look forward to celebrating your role in the Next Chapter of HammondCare.

Cheers



**“Our history, expertise and mission present us with the opportunity for generational change.”**





# Relationship-based care for complex needs

## Stories that can change the world

HammondCare's Next Chapter Strategy takes our much-loved Mission – of which not one word has changed – and considers the focus it should take as we head towards 2025.

Based on extensive internal consultation, this renewed focus is described in our Ambition and it has two key parts, unpacked on these pages.

The first is something for which we're already well known, but as you can see, it's time to take this to a whole new level:

**‘To set the global standard of relationship-based care, for people with complex needs.’**

Our relationship-based care includes our unique model of care, the world-class approach to building design and the best clinical care – all working together.

It is motivated by the words of Jesus, seen on the inside cover, which inspire us to really see the person in front of us, to know who they are, and bring to them the very best of care with love and from our hearts.

It's who we are and what we do every day – in every one of our services – but we want to increase visibility of this approach to influence the global understanding of what good care really looks like.

But how do we communicate relationship-based care to the world?

Well, there's nothing more powerful than a story.

It is your stories of relationship-based care, central to your work every day, that can help shape global understanding and in the process, improve millions of lives.

Through these relationship-based care stories we learn, grow and improve – because we are all a part of Next Chapter: HammondCare 2025.

# Providing care where others won't or can't

## Saying yes when no one else will

A woman smiles broadly with relief when we agree to provide home care for her husband after being rejected numerous times.

Someone's grandmother walks through the garden of Linden Cottage, after months of being heavily medicated in a psychiatric ward.

A palliative care patient tells how their tears of frustration have changed to tears of joy as their symptoms are finally managed.

An elderly man gazes over his farm, cuppa in hand, as our care worker arrives from a distant town.

HammondCare has thousands of interactions with people every day, and at the core of this care are those who have no other option. If not us, then...

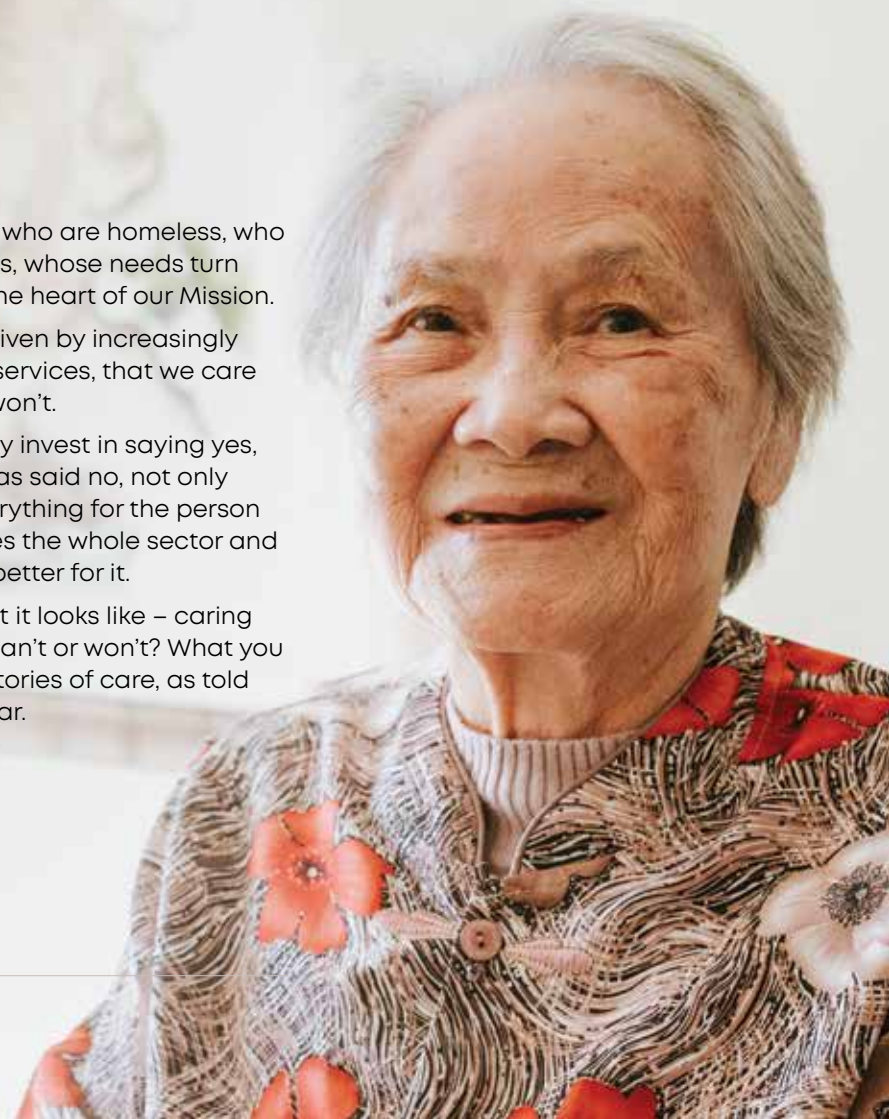
Every single person matters, and alongside this, we know that when we care for those with the most severe symptoms, the most

complex needs, those who are homeless, who are in remote locations, whose needs turn others away – this is the heart of our Mission.

Our Next Chapter is driven by increasingly seeing, across all our services, that we care when others can't or won't.

And as we intentionally invest in saying yes, when everyone else has said no, not only does that change everything for the person before us, but it shapes the whole sector and our society becomes better for it.

How will we know what it looks like – caring for those that others can't or won't? What you do will show us, your stories of care, as told above, will make it clear.





**It's in our DNA  
and not one word  
has changed**



# Mission

**Our passion is improving quality of life for people in need,  
serving and working as an independent Christian charity.**



Our greatest  
strengths for the  
deepest needs



# Ambition

To set the global standard of  
**relationship-based care, for people with complex needs** and to  
**increase our care for those that others won't or can't.**



Leadership  
positions protected  
and enhanced

> **Complex Dementia**

Leaders in practice  
& research

> **Home Care**

Recognised for  
differentiated care

> **Palliative Care**

Embedding our expertise  
wherever the client is

**Emerging Models**

Homelessness and  
International



# Where we focus

**Complex Dementia | Home Care | Palliative Care**

**Let's do this . . .  
Our road map  
showing how**



# How we impact

- > Best people,  
highly valued**
- > Operational  
excellence**
- > Data-driven,  
evidence-based**
- > Shape the sector**

How do we know  
we are making a  
difference?



# How we measure

- › **Lives impacted**
- › **Quality of life**
- › **Quality of care**
- › **Social dividend**
- › **Financial sustainability**

Bringing it all together to form our Next Chapter strategy

# Strategy on a page

Next Chapter: HammondCare 2025



Next Chapter



## Mission

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## Ambition

To set the global standard of **relationship-based care, for people with complex needs**

and to

**increase our care for those that others won't or can't.**



## Where we focus

➤ **COMPLEX DEMENTIA**  
Leaders in practice & research

➤ **HOME CARE**  
Recognised for differentiated care

➤ **PALLIATIVE CARE**  
Embedding our expertise wherever the client is

**EMERGING MODELS** – Homelessness and international



## How we impact

➤ Best people, highly valued

➤ Operational excellence

➤ Data-driven, evidence-based

➤ Shape the sector



## How we measure

➤ Lives impacted

➤ Quality of care

➤ Financial sustainability

➤ Quality of life

➤ Social dividend

Inspired by Jesus' words in Matthew 25:35-36, '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'.



# Best people highly valued

## Celebrating capability with heart

It was a tough call for Brenda and her sister to bring their father Kenneth to live at Bottlebrush Cottage at HammondCare Waratah, but they knew there was no other option.

His needs were complex, but Kenneth didn't want to go into care – they were expecting a difficult transition.

The team at Waratah, and across our services, approach care by asking, 'what would I want for my family?' They love supporting older people, respect the rich lives they have led, and know the privilege it is to share in the journey of care. They are also highly skilled.

To Brenda's pleasant surprise, Kenneth settled in quickly and enjoyed his new life. She and her sister enjoyed visiting their dad thanks to the care team's heartfelt approach.

"It was a pleasure to visit him as his room was lovely and clean and the staff were always so friendly."

After Kenneth passed away, the relationship-based care of our team continued.

"When we went to pick up his belongings, my sister and I were met at the door with hugs from the staff and were able to spend some time in Dad's room – which was a really important part of the process.

"They came in with us and it was really personal. I received a call from pastoral care to check we were ok... and I received a beautiful hand-written card with an extended offer of support.

"It just makes things so much easier knowing that Dad was in the very best care with the kindest, most genuine people I have met."

The best people... that's how we impact. That's why we look for those with the right heart, who love caring for people with complex needs, who want to make a difference. You will be highly valued – with investment in training, recognition and other benefits – because you matter.

# Measuring progress – lives impacted

## When others say no, we say yes

“The man I’m visiting today lives around 57 kilometres from our office. The first question his family representative asked was, ‘will you go?’” says Care Team Manager Nicole.

### ‘And I said, “Yes, we will go.”’

For John, being on his farm, surrounded by his animals and the countryside, is what makes life worth living. Growing older and with very serious health needs, this is harder, but still possible with the right support.

But when you call Moonan Brook home – with a population of 23 in the Upper Hunter – finding the right support is harder than it should be.

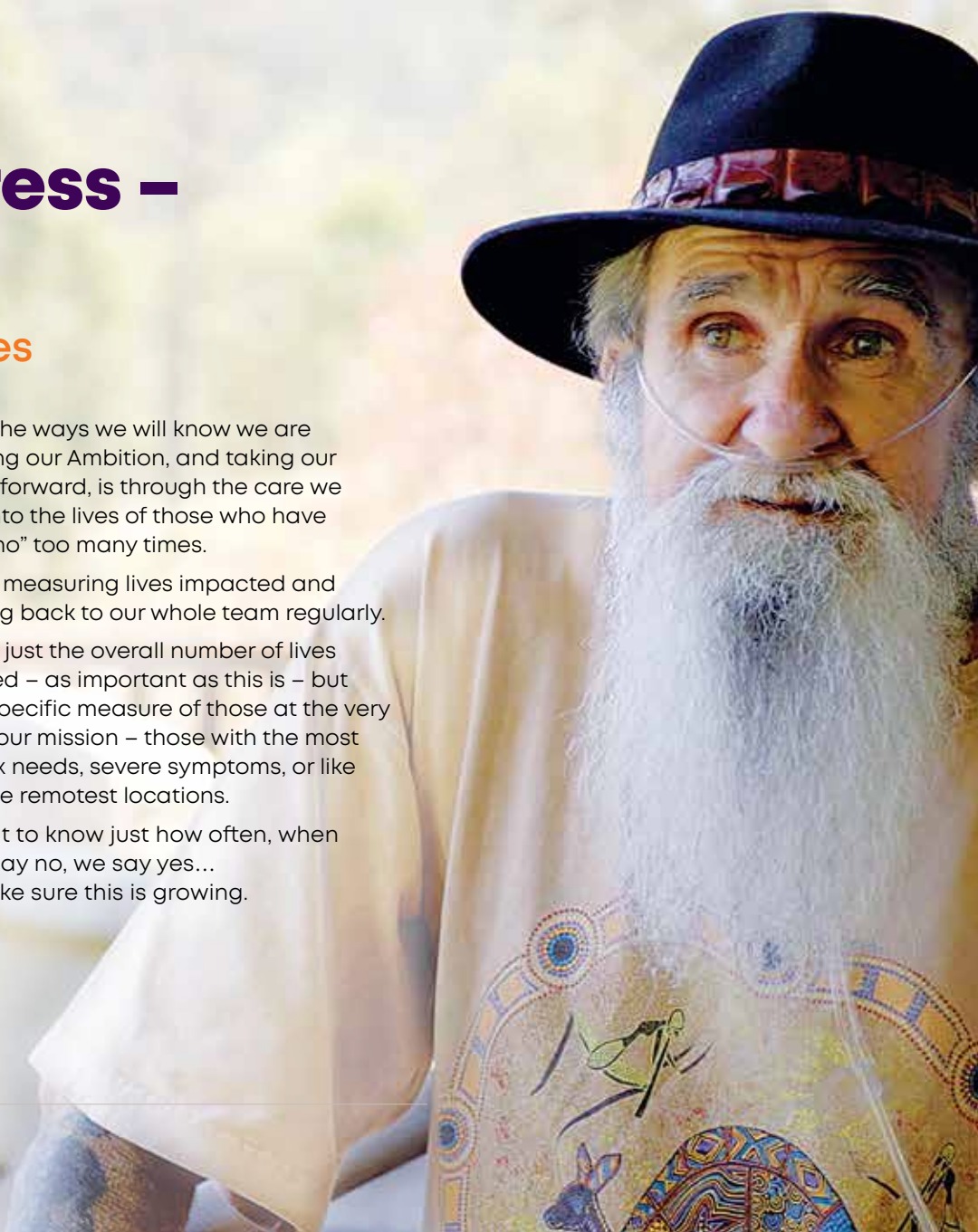
Fortunately, the HammondCare At Home team at Scone are a living, breathing representation of our Mission and express this through our Ambition: ‘to care for those others won’t or can’t.’

One of the ways we will know we are achieving our Ambition, and taking our Mission forward, is through the care we invest into the lives of those who have heard “no” too many times.

We’ll be measuring lives impacted and reporting back to our whole team regularly.

And not just the overall number of lives impacted – as important as this is – but also a specific measure of those at the very core of our mission – those with the most complex needs, severe symptoms, or like John, the remotest locations.

We want to know just how often, when others say no, we say yes...  
And make sure this is growing.



# Measure our progress – the nuts and bolts

This is more interesting than you think!

**HammondCare has always believed it is better to be judged by what you do, and not just what you say you are going to do. Look at the faith in action of Rev Bob Hammond for starters – right through to today.**

Because we are serious about our Next Chapter Strategy and Ambition, a range of specific measurements have been developed so we can double-down on our progress and be sure we are impacting lives.

## **Lives impacted**

‘Lives impacted’ is not just overall numbers, but our capacity to serve people with complex needs, including those living with dementia, requiring palliative care, living remotely and experiencing homelessness. We want this area of support to grow by 50 per cent by 2025.

## **Quality of life**

We are not just trying to maintain quality of life for people in need, we are trying to improve it. We’ll be holding ourselves to account by using Voice and Health Experience surveys so the people we care for, and the people who care for them, can tell us what they really think. And importantly, are we improving quality of life and would they recommend us to others?

## **Quality of care**

We are developing a range of empirical, quantifiable metrics to provide data that stands up to rigorous, external scrutiny, to show that the quality of care we provide is strong and improving. And as part of this, our goal is zero repeat unmet assessments – we’ll use all our learning across the organisation to get it right, and keep doing so.

## **Social dividend**

Our social dividend means the value of services and activities that wouldn’t take place if we didn’t exist. We are aiming to achieve a social dividend of more than \$200 million from 2021-2025 and that’s something that should energise every team member, daily. This will not only change individual lives, but make Australia a stronger place.

## **Financial stability**

To achieve the measures above, we need to be financially sustainable. Part of this is our responsibility – to be good stewards of what we have, and part of it is our advocacy for better resourcing. But when you hear budgets, finances and numbers discussed, the discipline behind that is – the more financially sustainable we are, the more capacity we have to care, especially for those others can’t or won’t.



# How we measure

## Next Chapter: Measuring progress



### Mission

Our passion is improving quality of life for people in need, serving and working as an independent Christian charity.



### Ambition

To set the global standard of **relationship-based care, for people with complex needs**

and to

**increase our care for those that others won't or can't.**



### Lives Impacted

- › **Target 50% baseline increase in capacity for complex needs**  
(high care, dementia, palliative, remote, homelessness)



### Social Dividend

- › **Create \$200m+ (cumulatively) in social value by 2025**  
(Social Ventures Australia providing external validation)



### Financial Sustainability

- › **Operating EBDA = 10% of revenue**
- › **External debt ratio < 25%**



### Quality of Care

- › **Actively exploring and drafting approaches to Quality of Care metrics**
- › **Zero repeat unmet assessments by regulator**



### Quality of Life

- › **Benchmarked Survey data**  
(utilising Voice Project surveys + Health Experience survey)
- › **5 organisation wide 'headline' questions including NPS**

# Extending our impact

## Where we hope to be by 2025

**Through our extensive strategic review and consultation for Next Chapter, it became clear HammondCare has a number of leadership positions that allow it to do more and have greater influence.**

Being a leader in complex dementia, palliative and differentiated home care are three areas of leadership, alongside other core areas of service, that remain vital to who we are and what we do.

Leadership positions need to be nurtured and developed – it's much harder to get good things done if they are lost. That's why we have painted a picture of how HammondCare will look different, as a result of our Next Chapter Strategy and Ambition – a truly One HammondCare Approach.

**Different but the same, going from good to even better.**

We will be a globally recognised leader in complex dementia as our stories of care, research and practice and in particular, our investment in caring for those others won't or can't, enable us to set the global standard for relationship-based care.

Our palliative care expertise, strongly based in our hospitals and research, will be translated, embedded across all our services and expanded in the community to meet the increasing need for quality palliative care, where and when people need this, increasing our impact.

Research will be increasingly focused and tied to our model of care so that we can continually challenge and test ourselves. We will use this evidence base to continually improve what we do, and expand our influence by shaping the sector.

Continued adaption to new technology will support our team in improving care through streamlined and efficient processes – so the focus is on people. 'What does the data say?' will be a common question as we utilise and improve data collection and analysis in every sphere of our work.

We know how to do great things together, but can't always say how we got there. By developing best practice road maps, especially in opening new services, our growth will be supported by established metrics that ensure consistency across all services.

And last, but definitely not least, our frontline staff will feel more connected to, and valued by, senior leadership. Our plan to elevate our people includes celebrating service and excellence at every opportunity, so that everyone will feel valued.

# How will HammondCare look different?

One HammondCare Approach



**Globally recognised leader** in complex dementia

**01**



**Palliative care** embedded across all our services and expanded in community

**02**



**Research tied** to our model of care and shaping the sector

**03**



**Technology & data** improving care and decision-making

**04**



Codify **best practice** and establish metrics and consistency across all services

**05**



**Elevate our people** – everyone will feel valued

**06**





# It's all about the need

## Why we are committed to the Next Chapter

As just one example of significant unmet need, most Australians say they would prefer to die at home but when it comes to the time, it often seems too hard.

Carol was a fit 74-year-old struck down by pancreatic cancer with severe symptoms. As her last days approached, her family felt she was too sick to stay at home.

But the alternative, moving in with daughter Kasey, also seemed impossible.

"I was reluctant... I didn't think my house was suitable... I didn't know how I'd manage personal care... I was worried she would be in pain."

This is why we want our services available to more people and to influence care everywhere... because of what happens next.

"Having the palliative care nurses so involved and accessible made the most enormous difference. Through their education, reassurance and support, they gave me so much practical help and knowledge.

"All this care and support was given with such genuine kindness and compassion for Mum

and us. We felt very empowered in handling Mum's symptoms... it allowed us to keep Mum at home until she died.

"Our beautiful mother had one of her children or grandchildren holding her hand, brushing her hair, playing music, reassuring her, telling her they loved her every minute of her final day.

"When Mum died at 12:45am her three children were holding her. It was exactly as she would have wanted..."

This is how our relationship-based care, and caring where others can't or won't, makes all the difference – and why we need to grow and improve.

Another example is from HammondCare Darlinghurst, where staff bake cakes and scones alongside roast dinner most days. Not only are the residents delighted, ambulance and patient transport drivers who often visit notice the beautiful aromas.

"Is this a normal aged care home, as it does not smell like any other place we have visited!"

As the team member who reported this said: "It is our normal that sets us apart..."

# The need in numbers\*

What are the gaps we are seeking to fill?



**93,000**

people with complex dementia can't get the residential care

**they need**

**100,000**  
people  
are waiting

for a  
Home Care  
Package



Relationship-based  
approaches to complex  
dementia care are up to

**9x**

**more  
successful**

than prescribing antipsychotics



People living with dementia  
compared to those without are

**up to  
3x  
less likely**

to be referred to palliative  
care teams or be  
**prescribed palliative  
care medications**



**only  
14%**

of people die at home



**more than  
70%**

want to die at home

**up to  
48%**

of people living with  
dementia in aged care are  
prescribed antipsychotics



**but only  
10%**

of these prescriptions  
are appropriate

# How can we take what we do and change the world?

## It starts and finishes with relationship-based care

**As you put down this book, hopefully having gotten to the last page, your mind will turn to the task ahead. It might be...**

- Supporting a person who lives with complex dementia.
- Holding the hand of someone facing their final hours.
- Being the only visitor this week for an older person living at home.
- Hopping in the car to visit a remote client.
- Checking on a patient recovering from stroke who has rung their buzzer at 2am.
- Making sure everyone on the team gets their pay on time.
- Paying our suppliers and making sure we have plenty of PPE.
- Responding kindly and with compassion to a complaint.

These are just a small sample of the kind of work, done together, that makes it possible to set the global standard of relationship-based care.

It might seem routine and commonplace, but we do amazing things at HammondCare and this is especially seen when we tell our stories of care.

**‘The truth is, we are all a part of the Next Chapter. What we do together, the stories that we share, the care we provide, the enabling support we give, can help change the global view of what good care looks like.’**

The Royal Commission showed us sadly that good care for older people and the vulnerable can sometimes be hard to find.

But when the commissioners wanted to show what good care looked like, in their final summary, they told two stories – and one was of our team member Marlene who walked six kilometres in total during the height of Covid-19 to support a dying client.

These are not made-up stories, even though some seem hard to believe, they are our Mission in Action, they are the telling of our relationship-based care and we know they will keep on coming.

**So don't be surprised, it's not the first time a story has changed the world...**

**Together  
let's set the  
global standard  
in care**





# Next Chapter 2025

As an independent Christian charity, HammondCare champions life.