harbour hospice

Te Kahu Pairuri mai i Takarunga ki Te Hana

Impact report

HARBOUR HOSPICE TRUST 1 July 2021 - 30 June 2022

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Compassionate Aroha Inclusive Mo te Katoa Professional Tautikanga

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Last year we spoke of surviving a global pandemic. What we didn't know was that an even more disruptive year was about to follow. In this report we look back on an incredibly difficult 12 months due to Covid-19 resurfacing in the community and its long-tail impact from the previous year.

But we also have much to celebrate in the immense hurdles we overcame with your support. We continued to deliver quality care to patients and their families and whānau, and the camaraderie that our teams showed - from the clinical and support staff right through to our supporters and volunteers - once more proved that our people are extraordinary, in extraordinary times.

a message *of thanks*

Ann Tod
Harbour Hospice
Trust Chair

Jan Nichols
Harbour Hospice
Chief Executive

In August 2021 Auckland went into an extended lockdown then just as we began to experience a return to normality a new strain of the virus, Omicron, entered the community. The long tail of Covid-19 from the previous year began to leave its sting - and a national nursing shortage, exacerbated by New Zealand's borders being closed, was added to the mix.

The knock-on effect saw referral numbers across our service drop, with patients fearful of the virus spreading or of being separated from family and whānau due to necessary visitor restrictions. Our nursing teams were put under immense pressure due to sickness, new processes and restrictions and the national nursing shortage made it harder to attract candidates for vacancies. Fundraising income sources stalled with the temporary closure of our 17 retail shops and postponement of many fundraising events. Some of our more vulnerable volunteers, understandably, did not feel safe to return to their roles when lockdown restrictions lifted.

Those were the lows. There were also many highs. We were fortunate that the redevelopment of 7 Shea Terrace stayed on track, and we were able to re-open its Inpatient Unit (IPU) in January 2022. We launched an innovative new community nursing training programme to attract and retain nurses to support patients in their homes and our Poi team developed new ways of supporting health professionals in the wider community. We built on our hybrid model of working, with further technology rolled out to enable all staff to connect to hospice resources and patients from wherever they were in the community.

Our largest annual fundraiser, Vintners' Brunch, went ahead, with our supporters raising an incredible $382,000.

And we saw you continue to show your loyal support, donating an incredible $2.2 million net, on top of more than $2 million in support of the North Shore redevelopment project.

We couldn't have got through this year without you.

As we look back, we are struck by the fact that we've never seen a better example of hospice services being "more than a building". Care and support continued in the community at the height of the pandemic, as well as through a six-month relocation of staff during an intense construction phase at 7 Shea Terrace. All of this was achieved through exceptional team work, supported by advanced technology and hybrid working. Towards the end of this difficult year we began to experience a lift in referral numbers once more.

We'd like to take this opportunity to give immense gratitude to Nicolette Bodewes, who after several years in both Chair and Deputy Chair roles on our Board of Trustees, has stepped down but will continue as a trustee for the board. We are so grateful to Nicolette for her leadership throughout the transition to Harbour Hospice, her input into the Shea Terrace redevelopment project and support during the global pandemic.

We'd also like to thank you for continuing to stand by us in these difficult times. Your support has been phenomenal and, as we look to the future with cautious optimism, we hope you will continue to show us your loyal support.

Harbour Hospice is well placed to manage the headwinds that may beset us. We have achieved much in terms of disaster management and recovery, organisational structure, financial sustainability and facility development.

We now look forward to further focusing on the growing numbers of people who require palliative care in our community and the ways that our team can be supported to deliver the best care possible to as many people as possible.

our reach

Our service area goes from Devonport to just South of Mangawhai. Takarunga (or Mt Victoria, which many use as a reference to Devonport) and Te Hana are the two maunga within this area.

Te Kahu Pairuri mai i Takarunga ki Te Hana

Covered by the cloak of hospice from Devonport to Te Hana

Tui House

47 Morrison Drive, Warkworth

COMMUNITY SERVICE HUB
outpatient clinics, day programmes, support groups, complementary therapies, day respite, community meeting spaces
TRAINING CENTRE

Hibiscus House

2A John Dee Crescent, Red Beach

INPATIENT UNIT (IPU)
COMMUNITY SERVICE HUB
outpatient clinics, day programmes, support groups, complementary therapies, day respite, community meeting spaces
TRAINING CENTRE

North Shore

7 Shea Terrace, Takapuna

INPATIENT UNIT (IPU)
Multi-use community spaces available from 2023

the impact we made **with your support**

This year was once again affected by the pandemic, but with the resilience of our teams and the strength of community support behind us, we got through it.

Traditional sources of income were heavily impacted and this year we needed your support more than ever.

Crucial funding by the Waitematā District Health Board (Te Whatu Ora from 1 July 2022) covered 50.6% of our operational income. With a total service cost of $14.8 million we rely on our 17 Harbour Hospice Shops, fundraising events and activities, valued donors, bequestors, Trusts and volunteers to help us meet the $7.3 million net shortfall. This year you donated an incredible $7.1 million.

We could not have survived the last two years without this support. Your generosity is the reason we can keep our care and support free of charge for the rapidly growing number of patients, families and whānau who need it.

1 in 3
people who died in our community were cared for by Harbour Hospice

1239
patients, families and their whānau received specialist care and support

$14.8m
total cost of patient services

50.6%
Waitematā District Health Board funding

we need to raise
$7.3m*
to meet the shortfall
*net

$2.79m*
worth of time donated by 1230 volunteers
*based on minimum wage

$2.84m*
raised by our 17 shops
*net

more than
2000*
contacts to support grieving families
*phone calls, telehealth and in person

36.5%
of people in our care died at home

harbour patients

numbers

We provided care and support to 1239 patients, families and whānau

		existing patients	new patients
North Shore	698	343	896
Hibiscus Coast	370	28%	72%
Warkworth/Wellsford	171		

ethnicity

European	Asian	Māori	Middle Eastern Latin American African	Pacific
1044	103	53	22	17

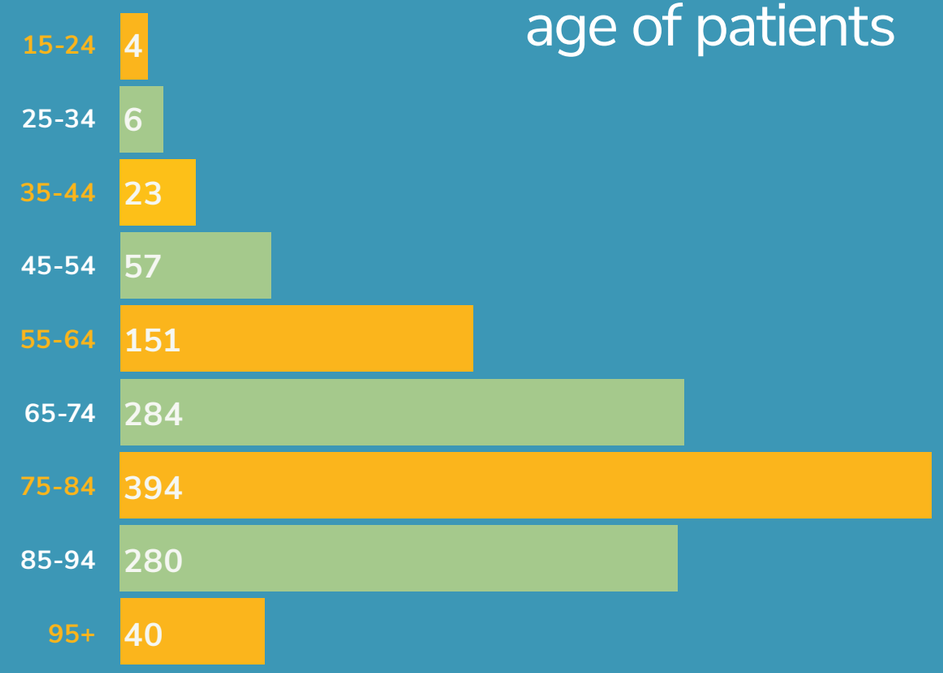
diagnosis

Cancer	Other illnesses
851	388
69%	31%

place of death

Home	Residential care	Inpatient Unit	Hospital
246	191	128	105
37%	28%	19%	16%

age of patients



our strategic plan *four key areas*

Grow with & empower the people we serve

Ensure our service is accessible to all who need it

Support local systems to improve palliative care

Strengthen our contribution nationally and globally

Right now we are caring for close to 400 patients every day, with demand for palliative care across our region expected to increase by 50% in the next 14 years, and 90% in the next 40 years.

Our strategic plan is focused around four key areas, designed to increase our impact and positively influence the way people experience death, dying and loss.

Over the last 12 months, like many others, we've experienced a crash course in adaptation with the pandemic creating ongoing uncertainty and challenges. But despite this, our focus has remained solid, and with you behind us we've been able to positively impact people's final days, weeks and years of life while continuing to build a sustainable model of care that will reach more local families in the future.

We're incredibly proud to share these stories that show the impact of your generous support.

Grow with & empower the people we serve

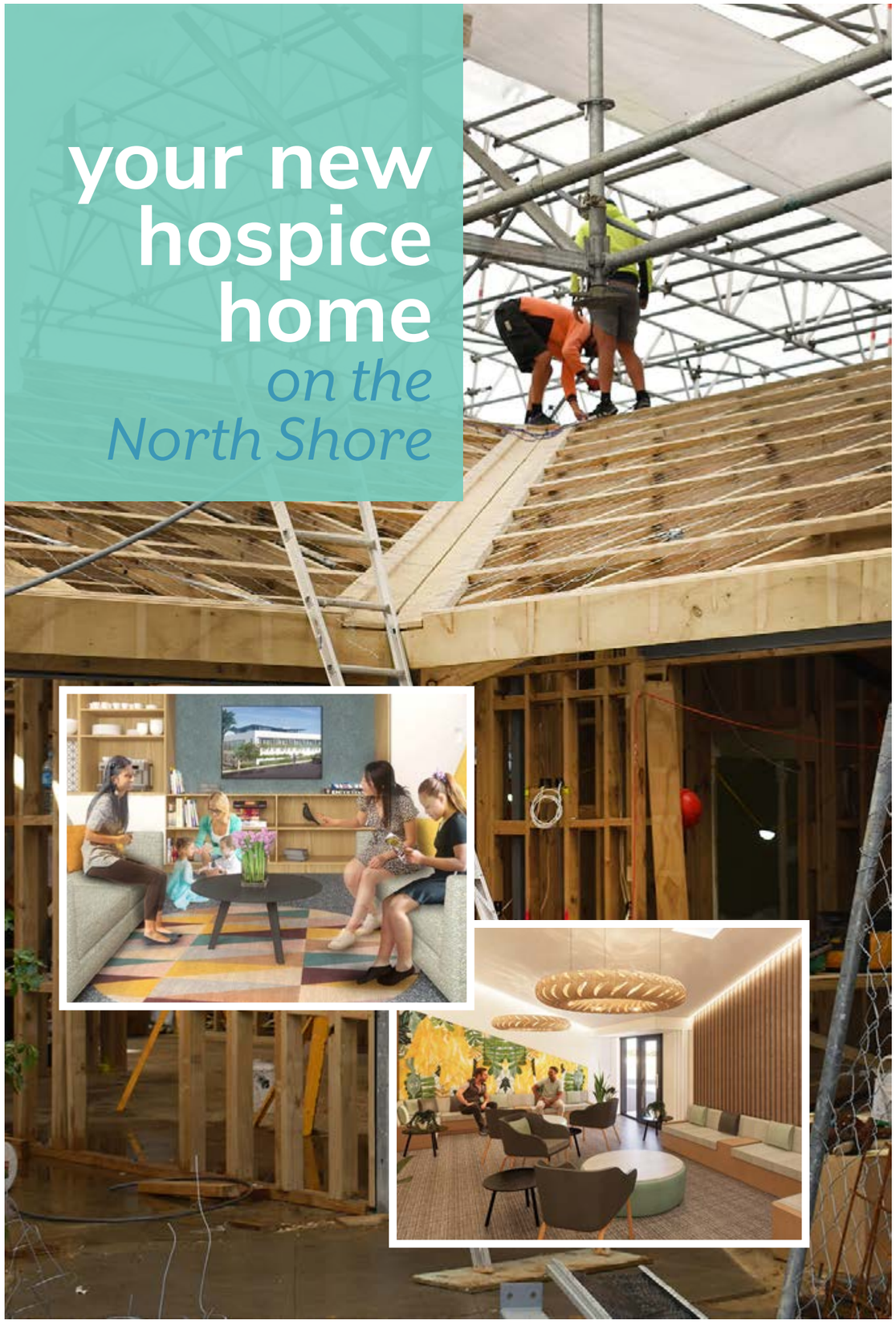
you helped us

meet the rapidly growing need for care

The need for specialist palliative care is growing, as is our need for the incredible nurses, doctors and support teams who care for those at the end of life.

People are living longer and experiencing more complex symptoms. As the needs of our community grow and evolve so must we to ensure that everyone who is dying, along with their family and whānau, experience the highest level of care, compassion and support.

your new hospice home *on the North Shore*



The redevelopment of our North Shore hospice building at 7 Shea Terrace will ensure that the growing palliative care needs of the North Shore community will be met for many years to come.

This vital project began as an ambitious $20 million redevelopment, but with your incredible generosity we have less than $1 million left to raise and in January 2022 we achieved a major milestone with the re-opening of our Inpatient Unit (IPU). Patients and their families are once more able to receive specialist care with the redesign offering modern fit-for-purpose spaces and lighter, brighter patient rooms.

Construction has continued around the IPU, with Auckland Council granting consent for the final two stages of the project. Two areas of the building that the team is especially excited about are the dedicated whānau space and the area for the multi-disciplinary teams to work from.

The whānau space

This special space allows two families to stay overnight while their loved one is being cared for in the IPU. Each family has their own bedroom and ensuite and can enjoy meals together and unwind in a shared kitchen and lounge area while their loved one is cared for nearby.

The whānau area not only puts families close to their loved one and the clinical team, it also places them near the Family Support team, who are there for families to offer emotional, cultural and spiritual support, and connect them with other support services.

The new area for the multi-disciplinary (MDT) and community teams

Most patients are cared for at home during their final weeks and months of life and it's the community nurses, family support and multi-disciplinary teams who play a huge part in making this happen.

The teams provide patients with social work support, counselling, cultural and spiritual care, physiotherapy and occupational therapy, complementary therapy, as well as nursing and medical care in their homes or as outpatient care. The new space will include complementary therapy, consultation and clinical rooms, as well as a training room and spaces for programmes and support groups. It will enable the teams to work together seamlessly to provide high-quality holistic care for patients, their families and whānau.

> “The relief that people feel when hospice moves in to help them is overwhelming.”
> Phillippa Holley

Phillippa’s *passion*

Phillippa Holley is one of several Harbour Hospice volunteers to have also contributed financially to the North Shore redevelopment.

Phillippa Holley has been known to flag down passing motorists and ask for help to load furniture that’s been left on the side of the road into her car, to sell in our hospice shops.

The Link Drive hospice shop volunteer has knocked on people’s doors, if they’re selling their home, to ask if they’d consider donating what they’re not taking with them, for the same reason. And you should see her in action when she spies a Victorian pickle fork in a pile of discarded cutlery.

Phillippa, a retired businesswoman, has passionately supported Harbour Hospice for more than 20 years – not only as a volunteer but also as a generous donor. She and her husband Len have made substantial gifts over the years to support hospice and the redevelopment of our North Shore site. Phillippa has also left a gift in her Will to Harbour Hospice. “Where else do you find an organisation that will support one in three people who die in its community?” Phillippa explains. “The relief that people feel when hospice moves in to help them is overwhelming.”

The recipient of two nominations and one award for Harbour Hospice’s Outstanding Volunteer of the Year feels this especially keenly because her own mother died “alone in a nursing home”.

"I was in England unable to get home in time to be with her and the family had done all they could, but her suffering was beyond their ability to cope. I don't want anyone to have to go through that.”

thank you *for your generosity*

In this financial year generous donors gave $2m to help fund the North Shore redevelopment. We couldn’t be more grateful to the individuals, trusts, foundations, community groups and corporate supporters who have so generously supported this project.

TRUSTS

Ralph & Eve Seelye Charitable Trust
Ernest Hyam Davis & Ted & Mollie Carr Legacies
Lottery Community Facilities Fund
The Trusts Community Foundation
The Douglas Charitable Trust
The Dines Family Charitable Trust
W & W A R Fraser Charitable Trust
Grassroots Trust Ltd
Norah Hamblin Memorial Trust
Freemasons Foundation
Potter Masonic Trust
The Hooper Residence Trust

INDIVIDUALS

Stephen & Margaret Tindall
Paul Blackwell
Graham Gibbs
Hugh Stedman
Ian Coombridge
Tony Shale
Greg & Felicity Smale
James Grigor
Rhonwen Moratti
Barbara Opperman
Jan Nichols
Brian L. Peak
Ann Tod
Humphrey Nisbet
Evan Henning
Jenny Swan
Carmel Conaghan
John Gibb
Meryll Caisley
Rob Tunnicliffe
Roger Hall
Bill and Lindsay Speedy
Don and Louise Galbraith

COMMUNITY GROUPS

Rotary Club of East Coast Bays
Rotary Club of Auckland Korean

BUSINESSES

Smales Farm
Westfield Albany

programmes launched

to grow palliative care specialists

Harbour Hospice has not been immune to the critical nursing shortage impacting healthcare right across Aotearoa. To address the urgent need for more specialist community nurses, an innovative programme was created to recruit and train nurses from other parts of the healthcare system with an end goal of joining our community team.

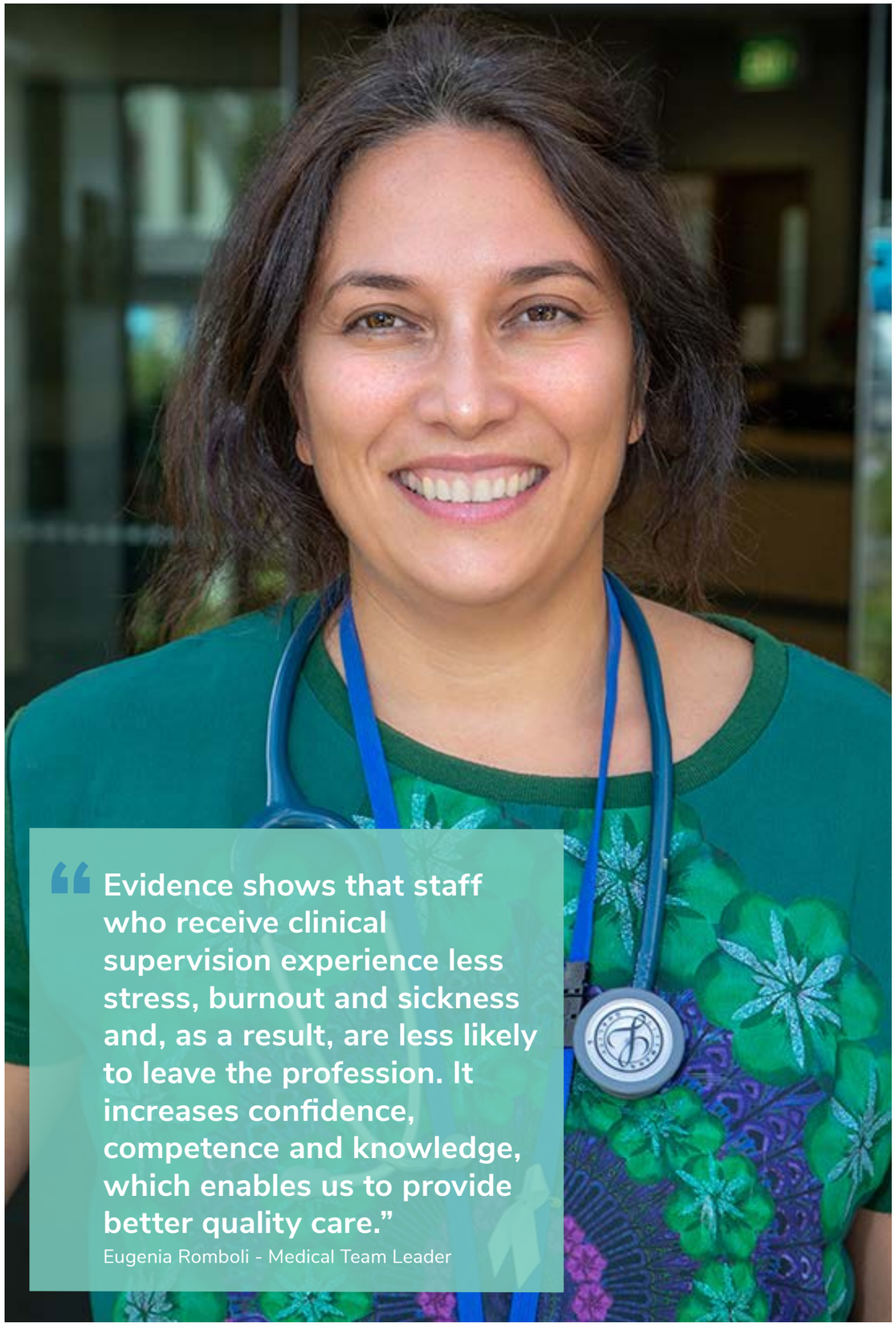
6 registered nurses trained and employed as palliative care nurses

With your support, we successfully recruited six registered nurses (RNs) with limited or no palliative care experience through this programme. They've come from surgical, oncology, district nursing and aged care disciplines, with one nurse recruited from the United Kingdom.

Community Nurse Team Leader Jarna Standen says the programme has been essential in planning how we manage the current national shortage of nurses. "With more skilled nurses on the road we are reaching more people, sooner," she said. "And through Covid-19, continuing to recruit these nurses and invest early in their development has been essential in ensuring we are able to continue delivering the service."

In addition, a competency development programme for community RNs to progress to Clinical Nurse Specialist (CNS) level has been developed. The programme, designed to further develop and retain our nurses, can be tailored to individual needs and levels of expertise. We have three RNs currently completing this learning.

"With more skilled nurses on the road we are reaching more people, sooner." Jarna Standen
Community Nurse Team Leader



> “Evidence shows that staff who receive clinical supervision experience less stress, burnout and sickness and, as a result, are less likely to leave the profession. It increases confidence, competence and knowledge, which enables us to provide better quality care.”
>
> Eugenia Romboli - Medical Team Leader

find, grow & retain the best

21
new clinical & support role hires

29
staff undertook clinical supervision

To keep up with the community’s growing need for palliative care, the latest research and healthcare advancements, we must attract and retain the very best people.

In pre-Covid times supporters like you helped us fund vital training, projects and world-class conferences to ensure our specialist teams could continue to deliver the highest level of care and support. While many of these face-to-face opportunities were limited, a lot was achieved through online learning and education to upskill our workforce. Workshops, learning and development programmes covered topics including advanced palliative care, assisted dying, community nursing, leadership, tikanga, cultural and inclusive IQ, reflective practise and more.

Alongside our Nursing Development Programme and Clinical Nurse Specialist (CNS) development programme, your support enabled us to give our critical clinical teams tailored support through professional supervision. Twenty-nine staff took up this support, designed to help them reflect, learn and grow in their professional practice in a safe way.

We also responded to the critical nursing shortage by appointing a specialist recruiter who continued to seek out the best talent in a very tight labour market.

Health, safety and wellbeing was strengthened with our senior leaders across clinical and non-clinical teams doing an exceptional job of keeping everyone safe amidst an ever-changing situation. We were not only able to retain our high levels of compassionate care in the community, but also extend that care and support to our staff and volunteers with health, safety and wellbeing managed in-house.

Throughout the pandemic this level of care for our own people proved invaluable for the many patients and families who needed us.

> **"The pandemic has normalised the need for remote service delivery, with technology presenting us with new opportunities to connect with those who need our support more often."** Samantha Harpur - IT Manager

embracing digital transformation

100%

of clinical staff can now work from anywhere

2405

virtual contacts with patients, families & healthcare practitioners

Your support has enabled us to keep up with ever-changing technology needs and advancements that in turn improve so many aspects of our service and the care we're able to give our patients.

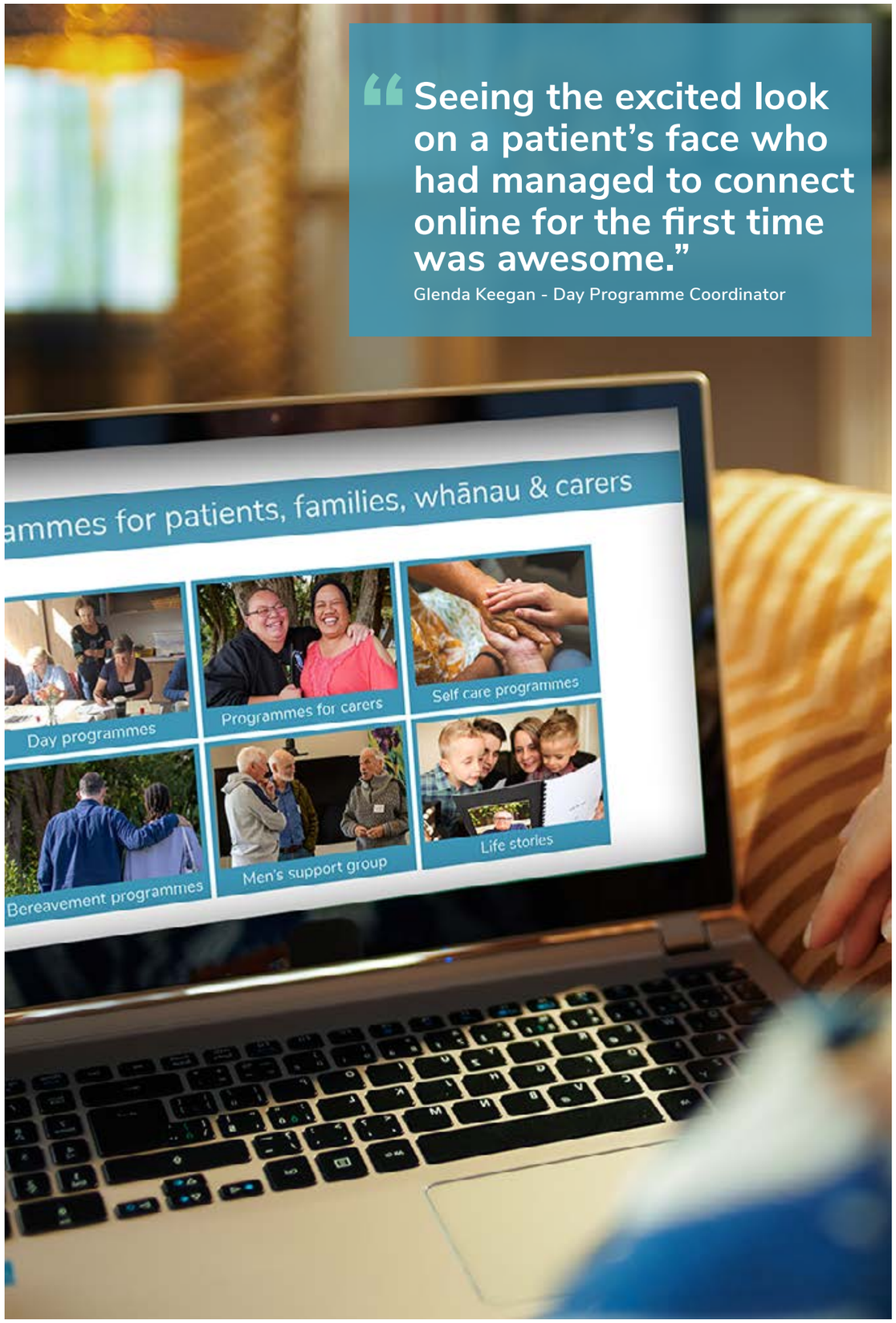
A key priority was to get our clinical and community teams hardware that isn't reliant on being connected to Wi-Fi. "They're on the road a lot and visiting patients in their homes so we don't want them to have the hassle of needing to hotspot off their phones. Surface Pros were the way to go, with laptops used for the admin and support teams who could work from home," Harbour Hospice IT Manager Samantha Harpur explains.

"The pandemic has normalised the need for remote service delivery, with technology presenting us with new opportunities to connect with those who need our support more often. We still have more to do, but we're making steady progress."

An example of this is making further refinements to healthcare collaboration tool PalCare to improve the way we connect and work alongside other health practitioners to deliver the most effective care for patients. This system allows us to do this in a safe and timely way.

As well as this, a core focus was on ensuring staff were set up to work safely from home with the right equipment and ergonomic, safe workstations and cyber security safeguards.

Ruth Reidy - Registered Nurse CPC



> **"Seeing the excited look on a patient's face who had managed to connect online for the first time was awesome."**
> Glenda Keegan - Day Programme Coordinator

day programmes *go online*

In 2021 our outpatient day programme went online, enabling patients to participate from the comfort and safety of their homes. The move was in response to Auckland going into lockdown but also part of the team's overarching goal to extend our reach.

Many patients took up the opportunity to connect online, and the majority of those continue to attend regularly. Day Programme Coordinator Glenda Keegan says, "Initially, we spent a lot of time helping people get connected and comfortable with the new format. There were a lot of one-on-one trial sessions over the phone to talk through technical issues, and it was a little stressful for some. But seeing the excited look on a patient's face who managed to connect online for the first time was awesome, especially for those who were living alone."

Glenda says many patients enjoyed meeting others online from all the different areas Harbour Hospice operates in. "And those who had already struggled to attend face-to-face sessions due to physical/fatigue limitations especially appreciated being able to attend from home. Spouses also enjoyed joining in."

We are very pleased to see the return of face-to-face sessions, but we can now give people the option to attend virtually which has proved successful and popular.

Ensure our service is accessible to all who need it

you helped us *improve access*

Free specialist palliative care should be accessible to every New Zealander who needs it, but right now this isn't the case.

With your generous support, we are working in partnership with other health providers to ensure Harbour Hospice reaches everyone, with a specific focus on equitable access and health outcomes for Māori, Pacific and Asian people and those with non-cancer illnesses.

> “Part of my role is to get our Māori people to understand that there are resources and support available to help them.”
> Kaumātua - John Marsden

Kaumātua John Marsden & Harbour Hospice hospice Kaiāwhina, Barb O'Loughlin

committed to change *& continual learning*

50%
increase in the number of Māori using Kaiāwhina and cultural support from 2019

For more than 10 years our kaumātua and kaiāwhina have played a valuable role in the charity with our rōpū, Mahinga Ngātahi, formed in 2019 to further address inequity around access of service for tūroro Māori (Māori patients).

We are committed to active learning and making change where needed, working alongside kaumātua John Marsden to ensure we meet our obligations under Te Tiriti o Waitangi, Treaty of Waitangi.

“Part of my role is to get our Māori people to understand that there are resources and support available to help them,” says Matua John.

“There's more work to be done. We haven’t reached the goal line yet. But the efforts that are being made, they're progressive and they are being noticed.”

Jeanne Warmington and Cass Vos

> **“The biggest impact we’ve made has been in helping to open dialogue around what’s usually quite a sensitive matter in order to change perspective and awareness around cultural factors.”**
> Cass Vos - Mahinga Ngātahi co-chair

mahinga ngātahi
working together in unison

Mahinga Ngātahi meets every six weeks and is steered by Kaumātua John Marsden and Kaiāwhina Barb O’Loughlin. It consists of 12 members and is co-chaired by Family Support Team Leader Jeanne Warmington and Executive Assistant Cass Vos.

Cass says, “The biggest impact we’ve made has been in helping to open dialogue around what’s usually quite a sensitive matter in order to change perspective and awareness around cultural factors. By doing this there is huge capacity for us to become more compassionate, more multicultural and more inclusive to provide equity of access for all.”

Jeanne explains that this is an ongoing piece of work, with feedback from tūroro Māori and their whānau used to better understand the needs of Māori in hospice care. “It helps inform our Māori care plan which we work from to get care culturally right and meet people’s needs individually.”

> **“We’re not treating this as a tick box exercise, but as real engagement with Māori and with our Pacific community so that we truly have people with lived experience involved in our service.”** Chris Meade - Service Improvement Manager

education programmes *foster engagement*

Covid-19 lockdowns made it difficult to continue internal education programmes at the same pace, but the team pivoted to run programmes online and the attendance of some, such as Clinical Toolbox sessions, actually increased. Learning around Māori tikanga or traditions also remained steady.

New learning was introduced including Assisted Dying education for non-clinical and clinical staff, with the End of Life Choice Act coming into effect in November 2021. New Māori Care Plans were developed to take into account Te Ao Māori, the Māori world view, in formulating a care plan with Māori patients.

In June 2022 Harbour Hospice underwent its first audit under the new Ngā Paerewa Health and Disability standards. Service Improvement Manager Chris Meade says the auditors were encouraged by the progress we have made towards implementing the new criteria fully.

The primary focus of the new Ngā Paerewa standards is to improve access and outcomes for Māori and Pacific patients, family and whānau, so in this audit there was an increased focus on cultural assessments. “We’re not treating this as a tick box exercise, but as real engagement with Māori and with our Pacific community so that we truly have people with lived experience involved in our service,” Chris says.

> **“It really helped to have another Māori person who understood his viewpoint, and how he wanted things done.”**
> Josh Tohovaka

Josh’s story

as told to Harbour Hospice

Dad was really against having hospice care because he thought it was only for people who were days away from dying.

He was worried, too, that hospice would take more away from him by treating him like an invalid. He was a proud man who had always provided for his family.

But a hospice nurse came to see us and she was so good. She joked around with him and made him feel normal. He would talk a lot to the hospice kaiāwhina. He found it really helped to have another Māori person who understood his viewpoint, and how he wanted things done. And he talked to a hospice counsellor about what would happen after he died and about losing his dignity. They really helped him get his mind back to the positive.

What I loved about hospice is they made things easier for me. I could spend weeks trying to talk to Dad about something and he wouldn’t listen – then one visit from hospice and he’d change his tune. They really were just so good, and in the end, Dad died peacefully at home in his sleep.”

> **“I believe Mum felt that she was embraced wholly - as a person, as a woman, as a Pacific Islander and as a patient with terminal cancer.”** Kenina Court

David with Vincent Maire - Spiritual Carer

saying yes to life

A growing number of Hospice patients have non-cancer illnesses and our clinical staff come from a broad range of disciplines to ensure patients' wide and varied palliative care needs are met. Harbour Hospice supports a growing number of local care providers who look after non-cancer patients.

Take a peek in David Seymour's room at Maygrove Village Hospital in Orewa and you'll be overwhelmed by the number of model cars on display. 'Motoring enthusiast' would be your first guess – and you'd be right. But what you wouldn't realise is that these cars represent more than just a hobby. They reflect David's choice every day to keep living.

David has Motor Neurone Disease (MND) and in the past five years it has robbed him of almost everything. Before his diagnosis he'd lived a full and active life as a successful real estate agent, juggling career with family life, keeping fit and collecting Mustang cars.

Now David lives in full-time residential care with the support of a Harbour Hospice Community Palliative Care Nurse.

David has lost all mobility except for the movement of his head. He has a good network of supportive friends and family and enjoys regular sessions with Harbour Hospice spiritual advisor Vincent Maire. But if it wasn't for the thrill he gets from wheeling and dealing online to expand his collection, David might have given up on life. In fact, he made sure he'd one day have the choice.

David Seymour is a friend of David Seymour, the MP and he helped the MP prepare New Zealand's End of Life Choice Bill referendum. "I endorsed it as a terminally ill person and I even ended up being the Act Party candidate for Whangarei in the 2020 election," David says.

David was excited when the bill was passed, because it meant that people who were terminally ill like himself had some choice in when and how their life ended, enabling them to die on their own terms. But ironically, now he has that choice David chooses not to take it.

"Choice is what it's all about and right now I say yes to life. I get out of bed and check eBay to see what new listings there are. I enjoy visits from friends, my son, the grandchildren and I look forward to my visits from Vincent.

"There are hard days. But there are enough good days to keep saying yes."

Main image - Luke & Annie. Insert -Gladys

> **“This demonstrates how volunteers and clinical teams can work together for the best possible care of patients.”** Louisa Christian - Nav-CARE coordinator

new programme
eases life for patients

The Nav-CARE programme sees specially trained volunteers take on an advocacy role for patients, offering compassionate and practical support and helping connect them with other resources in the community that can help.

When Harbour Hospice Nav-CARE volunteer Mao Gladys Youseff was introduced to 54-year-old wheelchair-bound patient Luke Felise, Luke was living in temporary motel accommodation with his former partner and full-time carer Annie.

Luke, who also suffers from several palliative conditions, had been missing important specialist appointments because messages had not reached him. He and Annie had also found it difficult to attend appointments because Annie could not lift Luke in and out of his wheelchair. Annie says, “I had been trying to stay on top of everything, but it was so much better after Gladys came.”

To begin with, Gladys helped them set up new appointments and ensured that future ones would be confirmed by email and mobile; she spoke with the motel receptionists to make sure messages were taken to Luke every day. Luke’s GP arranged some home visits.

Then when Luke’s needs changed and he needed full-time care, Gladys worked alongside Luke’s family, with the support of a Harbour Hospice social worker, to find and secure a suitable room for him within a residential care facility close to family. This brought immense relief to Luke and Annie. “We feel very grateful to Gladys,” Luke says.

Nav-CARE coordinator Louisa Christian adds, “This demonstrates how volunteers and clinical teams can work together for the best possible care of patients.”

Luke died peacefully on 16 March 2023. The day before he died Gladys spent the day with him and they sang Samoan songs together. She says, "It was an honour for me to look after someone from my own people and I am grateful to Harbour Hospice for always trying to make a difference to one's quality of life."

poi

Support local systems to improve palliative care

you helped us

strengthen the level of care in our community

Harbour Hospice works alongside many healthcare professionals and is committed to supporting the development of knowledge, skills and confidence for both healthcare professionals and others who are caring for people with a life limiting illness.

Thanks to your support, our Poi (Palliative Outcomes Initiative) team was able to extend their reach to more patients in the community who previously would not have had contact with Hospice.

Harbour Hospice Poi team

The Poi team works with general practice teams and residential care facilities to help staff identify patients in the last 6-12 months of life and develop strategies to improve their overall quality of life. It includes staff from specialties such as nursing, psychotherapy, medicine, social work and cultural care. GPs consult with patients who have palliative care needs, then produce a Palliative Pathway Activation plan (PPA) to implement with support from our multi-disciplinary Poi team.

the power of poi

With Covid-19 impacting nursing numbers and workload in the community, our Poi team trialed a new way of engaging with local services. Processes were streamlined, simplified and made more accessible making it easier for those community providers to help support patients who tend not to get referred to Hospice.

The eight-month initiative was launched in July 2021, involving nine local residential care facilities that met with a Harbour Hospice Specialist Palliative Care Nurse Facilitator on a monthly basis to discuss patients.

A total of 46 meetings were held and 63 residents were discussed. Of the 63 residents, 70% died within the eight months of this project, and just over half of that group were managed without the need for specialist palliative care services. Only 30% required full specialist hospice care.

“What that 70% showed was that people were being correctly identified as entering the final months of their lives,” Harbour Hospice Poi Team Leader Dr Heidi Conway says. “The Poi team also found that some residents were discussed at multiple meetings, validating the importance of nurturing ongoing relationships because end-of-life care needs of patients can evolve and change rapidly.”

Clinical Nurse Specialist Carol Adams, who joined Poi in 2021 with 20 years of palliative care experience at Harbour Hospice behind her, noted that monthly meetings became more and more well-attended.

"I started with one clinical manager or one nurse at each site but then the groups got bigger and bigger. As the initiative progressed the nurses gained more confidence in family meetings, which I attended in a coaching capacity. Now the nurses are addressing many issues themselves and are much more confident in their communication."

A further nine residential care facilities have signed up to be involved in 2023.

feedback

"The monthly discussions boosted our confidence and helped us better understand how to approach situations. It has been so beneficial for us, our patients and in particular their families."

"We know that at any time we have support in our work."

"We learned that conversations around end-of-life care need to be done earlier and not in the last few weeks. This has helped us to give families more awareness."

31%
of Aged Residential Care providers have activated a PPA* for at least one resident

*Palliative Pathway Activation plan

100%
of Primary Health Organisations have at least one enrolled patient receiving a PPA

trained by Harbour Hospice

5 new Link Nurses **2** GPSIs **1** psychosocial intern

91%
of Poi patients were 65 years or older, delivering on our goal to reach older people earlier

1%
of those in Poi died in hospital

81% **of those with a PPA (who lived longer than one month once plan was in place) didn't use ambulance or hospital services**

Strengthen our contribution nationally & globally

you helped us

educate & innovate

Death, dying and loss is not something to fear. Through education and awareness we're working hard to help change the way people experience and perceive death, dying and loss.

Through research and innovation we want to lead the way in understanding how we can improve and nurture a positive end-of-life experience for patients and their loved ones.

leading the way *in narrative therapy*

Harbour Hospice counsellor Sasha Pilkington is chartering new territory in the teaching of contemporary narrative therapy in palliative care through writing "teaching tales".

Teaching tales are a form of teaching through storytelling, where instead of the author explaining how to do something, they write a story that illustrates what it looks like – in Sasha's case, providing the reader with a window into the therapy room, alongside herself and her client.

This year Sasha was published as a contributing peer and writer in an internationally acclaimed book, Reimagining Narrative Therapy Through Practice Stories and Autoethnography, edited by Travis Heath, Tom Stone Carlson and David Epston. The book is made up of individual client stories (Sasha's story is "Blossoming in the Storm", chapter five) that paint sessions between counsellors and their clients in detail, moving beyond the standard narrative practice of teaching by showing transcripts and teaching narrative therapy through autoethnography.

Peers have welcomed the new approach with open arms. "People are really appreciating being able to see these questioning practices in context, and there's a lot of excitement about the idea of using stories as pedagogy for narrative therapy - using this as a way of learning rather than reading a textbook," says Sasha.

> **"Reading this book is not like reading yet another textbook on therapy. It will not teach you but show you the spirit of narrative practice. We can think of no better way to engage with narrative practice."**
>
> Anette and Allan Holmgren, Psychologists and directors of DISPUK, Danish Institute for Training in Narrative Therapy

collaborative study
sees vital drug funded

Harbour Hospice collaborated with members of the New Zealand Hospice Pharmacist Group, resulting in Pharmac fully funding a drug vital to the care of hospice patients.

Famotidine is used to treat bowel obstruction, indigestion, reflux and ulcers. Its equivalent had been withdrawn from the New Zealand market and a replacement was needed quickly, Harbour Hospice Clinical Pharmacist Emma Keer-Keer explains.

With little to no research available on what drugs Famotidine could be safely mixed with, Emma and her counterparts spent a year collecting and analysing this important data, which will be added to the Palliative Care Formulary Syringe Driver Database that can be accessed worldwide.

“This is the first time we’ve done a collaborative study across multiple hospices from a pharmacist perspective and we have agreed to do another, going forward,” Emma says. “It’s exciting. This is the beginning of what we’re hoping will be an ongoing collaborative relationship.”

Later that year Emma and her colleagues presented their research findings at the Hospice New Zealand Palliative Care Conference.

> **“This is the beginning of what we’re hoping will be an ongoing relationship.”**
> Emma Keer-Keer - Clinical Pharmacist

all of this because of you

Our community is the reason we are here today. With you standing alongside us and supporting us in many ways, you've helped us reach those who need care right now, and ensured we can be there for those who need us in the future.

$2.84m*
raised by 17 shops
*net

Left - Libby & Jai - retail volunteers. Right - Duncan Armstrong & Judy Power - retail volunteers

critical funds raised through retail

Raising $2.84 million (net) in the last year, our 17 Harbour Hospice Shops continue to be vital to our survival. Every dollar spent goes back to the heart of our service, making life better for those we care for.

With their stand-out bright pink branding, our shops are well-known and loved. More than places of trade, they provide a connection back to the care we provide, and a social hub for volunteers and the community.

Auckland's extended lockdown hit our shops hard, forcing temporary closures and over $1 million (net) loss of income during those periods. When we re-opened you were there, eager to get in behind us as volunteers, donors and customers.

"We are so grateful to our community for helping us through another disruptive year. They knew we would be hurting, so they came back in force, volunteering their time, donating goods, spending and reconnecting with us back in store," Retail Manager Maria Baird says.

The challenges we've faced in the past year have also been tough for our managers and volunteers, who view the shops as so much more than a place of work. "This work holds such a special place in their hearts and in their lives. The passion and loyalty from everyone involved is really special," Maria says.

"There are a lot of people involved in the day of a hospice shop and none of our success could be achieved without every single one of them."

66%
of our volunteers work in our shops

19.2%
of our funding comes from our shops

Sally's *legacy*

Gifts in Will have a direct and significant impact on patient care.

This year we received $3.3 million in Gifts in Will and building donations. People bequeath to hospice for all sorts of deeply personal reasons. For Sally Tetro, it was about honouring the elderly and the grandparents she didn't have.

At 85 years old Sally Tetro is the proud grandmother of eight grandchildren. They all live near her, so she hosts 'cousins evenings', where the kids, who range in age from 17 to 29, come over for pizza and pavlova.

Before Sally became a grandmother she had little understanding of what that wonderful relationship between grandparent and grandchild can be. "I never had any grandparents and until I met my late husband, who had grandparents, I hadn't realised that being an older person didn't equate to shawls and rocking chairs." And then her own grandchildren taught her that being around them "kept me young".

That spurred her into thinking, "Here are these people in the community who are coming to the ends of their lives, and whatever situation they're in, hospice can do so much for them." So Sally decided to leave a gift in her Will to Harbour Hospice.

Sally says, "I love the idea that I can carry on making an impact long after I'm gone."

$3.3m
received in Gifts in Will & building donations

> **"I love the idea that I can carry on making an impact long after I'm gone."** Sally Tetro

Mike & Peggy Dawson

> “Hospice is a magnificent, beautiful service.” Mike & Peggy Dawson

donors who gave monthly	our Hospice Hearts whānau grew by	donors collectively donated
236	18%	$79k

enabling care *each & every day*

Our Hospice Hearts regular donors are an incredible bunch of people who choose to donate monthly. Your generosity means so much, especially in a year that has been challenging for so many.

This year we saw our Hospice Hearts whānau grow by 18%, collectively donating $79,000.

Mike and Peggy Dawson are just two of our regular donors who have a special and unique connection to hospice.

The couple have been involved with Hospice for more than 30 years. Mike fundraised with a group of proactive businessmen during North Shore Hospice’s early years and Peggy gave massage training for our staff.

But it was Mike’s personal experience in 2018 that reinforced for them that their years of dedication had been rightly directed. Mike became unwell with stage four lymphoma and was “in the departure lounge” by Christmas Eve that year, Peggy explains. “Two nurses came to care for me and they were very sincere in what they were doing. They took their time, they didn’t rush things and they listened. That’s a really big thing,” Mike said. "Hospice is a magnificent, beautiful service," added Peggy.

The couple thought Mike’s days in hospice care would be his last, but his health took a miraculous turn for the better and he was discharged. Mike’s story is not unheard of.

Some of our patients do move in and out of our care. The couple know that when Mike needs to go back into hospice care “the love and support we receive will be beautiful”.

Mike and Peggy have seen the work of hospice in action and donate regularly to ensure that community care and support continues well into the future.

you supported **our events**

Planning events in a pandemic hasn't been easy, but once again our community showed us their commitment to supporting Harbour Hospice as guests, donors, volunteers or by running an event themselves. Here's some highlights from the past year...

With 400 guests, around 5000 plates of food and matching wines and over 100 live and silent auction items, the 24th Harbour Hospice Vintners' Brunch raised $382,000. Proceeds from this iconic event, co-hosted by Hospice patron Judy Bailey and wine expert Vic Williams, went towards patient care and support, with money raised from two auction items going toward the redevelopment of the North Shore.

Aaron Carter has participated in many of the Coastal Challenge events he has organised, but this year was different. Aaron's mother Sandy died at age 50 in Harbour Hospice care and this year Aaron turned 50, which inspired him to create a 50km run for the event. He and the other runners raised more than $70,000 for Harbour Hospice. "This would have meant a lot to Mum because hospice took such good care of her."

A huge thank you to the wonderful artists and donors involved in making our 16th annual Art Sale & Exhibition, at the Estuary Arts Centre in Orewa, a huge success. Around $34,000 was raised, with 170 pieces of art, created by 93 artists, sold.

We were incredibly lucky to hold our annual mARTakana art exhibition and sale, with the event concluding just hours before the nation moved into the Red traffic light setting. The local community always comes out to support this event with more than $21,000 rasied.

Vintners' Brunch $382k

Art Sale & Exhibition $34k

Aaron Carter $70k

mARTakana $21k

the enduring value of volunteers

There is nothing more inspiring than the collective power of community volunteers. Without them, we simply couldn't do what we do.

More than 1200 kind-hearted locals donated an incredible 130,000 hours to Harbour Hospice in the last year. Their individual contributions resulted in a huge collective effort to support hospice in our retail shops, gardens, at home with patients and so much more.

In another disruptive year, we were humbled by the way our volunteers supported Harbour Hospice and each other.

"During Auckland's 107-day lockdown they remained loyal until it was safe to return to their roles, and some of our life story writers even continued taking down patients' stories remotely," Volunteer Services Manager Vicki Parker says.

"In the shops, many covered one another's shifts when people were sick with Covid-19. Some even stepped out of their normal roles and into retail ones to help keep our shop doors open. We can't thank our volunteers enough."

These exceptional humans are honoured annually at our Long Service Awards that occured during Te Wiki Tūao ā-Motu (National Volunteer Week). Here we acknowledged those who have given five, 10, 15, 20, 25 and even 30 years' service.

Zenobia Chotsy loves cooking, so it was an easy decision to volunteer in our Inpatient Unit kitchen at Hibiscus House.

"A lot of thought goes into what people will enjoy and I feel blessed when I come home from my Wednesday shift having been able to help others in some small way."

Craig King began volunteering as a driver for hospice patients on the North Shore five years ago. He always follows the same routine with every pick-up - he holds the door open for the patient, adjusts the radio volume and checks they're warm enough - then creates a comfortable silence.

"Some people tell me everything. Some tell me nothing. It's allowing them to let go of what they want to let go. Whatever they say, I leave it there in the car."

Val Aston and her small team of volunteers cater for funerals and social occasions in Warkworth. The group has catered for more than 360 occasions, raising tens of thousands for hospice.

"We work together like clockwork and can swing into action with just a few days' notice. We love making others happy."

Harbour Hospice Trust is a registered charity under the Charities Act 2005. These summarised figures have been taken and consolidated from the Trust and the Harbour Hospice Foundation.

The Trust covers all our operational costs, while the Foundation holds reserves for our future capital projects as well as meeting any operational shortfalls.

For the year ended June 2022 the cost of providing Hospice services in our community exceeded the income generated through the Waitematā District Health Board (WDHB) and other direct service funding by $7,314,024.

This operational deficit is normally offset through the funds raised from our retail shops and fundraising initiatives. This year Covid-19 once again had a major impact on our 17 shops, which were closed for a significant part of the year. The pandemic also impacted our ability to fundraise through events. When our shops were able to reopen, they performed strongly generating a net income of $2,843,473 (down 33% from the year prior). Fundraising generated $1,051,661 (down 9% from the year prior). This was helped hugely by our ability to hold our largest annual fundraising event, Vintners' Brunch.

After retail and fundraising income, we were still left an operating deficit of $3,168,890. We were able to claim additional support through the government's Wage Subsidy Scheme and Resurgence Support Payments and a specific additional allocation of funds from the Ministry of Health. This totalled $1,757,826.

After other income, including contributions towards capital purchases, our operating Trust showed a net deficit for the year of $440,740.

The Harbour Hospice Development Foundation receives income through Gifts in Will (bequests) and specific fundraising campaigns for identifiable capital and strategic projects.

Funds generated are used for the relevant projects or are invested to ensure a sustainable future.

During the year our Foundation received $1,452,037 (net of project costs) in support of the North Shore redevelopment project. To June 2022 the Foundation generated a net surplus of $1,376,372.

Our consolidated and published financial statements therefore reported a net surplus of $935,632.

harbour financials

Harbour Hospice Trust

WDHB core contract (gross)	$7,071,745
WDHB innovation funding (Poi)	$416,561
Operational Funding Deficit	$(7,314,024)
Retail (net)	$2,843,473
Fundraising (net)	$1,051,661
Covid-19 Relief & Wage Subsidy	$1,757,826
Other	$356,324

Harbour Hospice Development Foundation

Gifts in Will & building donations (net)	$3,114,753
Investment & interest returns (losses)	$(396,240)

Reported net surplus (consolidated before revaluation of property & impairment)	**$935,392**
Total comprehensive revenue & expenses (after revaluation of property & impairment)	**$935,392**

Where does our money come from?

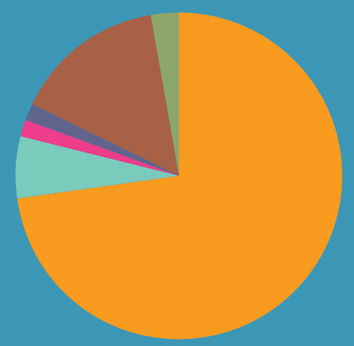
Operational funding source

WDHB core contract (gross)	50.6%
Retail (net)	19.2%
Fundraising (net)	7.1%
Covid-19 support & Wage Subsidy 2022	11.9%
Reserves	9.1%
Other (includes West Auckland)	2.1%

Where does our money go?

Operational funding expenditure

Caring for patients	72.8%
Support services	6.3%
Facilities & buildings	1.7%
Education & training	1.5%
Administration	15.0%
Depreciation	2.7%



thank you *for supporting our essential services*

Charitable Trusts and Foundations are crucial in helping us meet the challenging funding shortfalls we face. Grants received in the last year helped us deliver community and inpatient care, spiritual and social support, education, buy essential items for patients and families and redevelop and fit out our North Shore facilities.

AK Franks Charitable Trust, proudly managed by Perpetual Guardian
Akarana Community Trust
Allan & Louisa Stewart Charitable Trust
Ara Lodge No 348 IC Charitable Trust
BlueSky Community Trust
Boyd Clarke Foundation
Charles Rupert Stead Charitable Trust, proudly managed by Perpetual Guardian
Constellation Communities
Dairy Flat Community Trust
David Levene Foundation
Dorothy Williams Charitable Trust, managed by Public Trust
Dragon Community Trust
Ernest Hyam Davis & The Ted and Mollie Carr Legacies, proudly managed by Perpetual Guardian
Four Winds Foundation
Freemasons Foundation
Grassroots Trust Ltd
The J A Redwood Charitable Trust, proudly managed by Perpetual Guardian
Kelliher Trust
Lake Memorial Charitable Trust, proudly managed by Perpetual Guardian
Lister Presbyterian Health Trust
Lottery Auckland Community
Lottery Community Facilities
Louisa & Patrick Emmett Murphy Foundation, managed by Public Trust
Maurice Paykel Charitable Trust
Milestone Foundation
Norah Hamblin Memorial Trust
North & South Trust Ltd
NR & JH Thomson Charitable Trust, proudly managed by Perpetual Guardian
New Zealand Community Trust
Oxford Sports Trust
Potter Masonic Trust
Pub Charity Ltd
Ralph & Eve Seelye Charitable Trust
Skills4Work
The Douglas Charitable Trust
The Jogia Charitable Trust
The Lion Foundation
The Reed Charitable Trust, managed by Public Trust
The Sealgair NZ Charitable Trust
The Trusts Community Foundation
The Wilks Charitable Trust, managed by Trustee Executors
Walter and Rana Norwood Charitable Trust
Westfield Local Heroes/Scentre Group
W & W.A.R Fraser Charitable Trust
Zelda Roberts Charitable Trust, managed by Public Trust

Kia hora te marino,
kia whakapapa pounamu te moana,
kia tere te kārohirohi i mua i tou huarahi, ā,
ko tou hoa haere ko te rangimarie

May the calm be widespread,
may the ocean glisten like greenstone,
may the shimmer of light
dance across your pathway
and may peace itself be your travelling companion

harbourhospice.org.nz