Annual Report Year in Review



Financial Year 2019-20

Baptcare

baptcare.org.au

Celebrating YEARS

Baptcare Annual Report 2019-20 - Contents

Our 75th Anniversary of supporting communityPage 1
Service impact and reach; Mission, vision, values Pages 4-5
Chief Executive's Year in reviewPage 7
Our Board and Message from the ChairPages 9-11
Working with older peoplePages 12-20
Working with children and familiesPages 22-28
Working with people living with mental illnessPages 30-32

Working with people living with disability	.Pages 34-38
Working with people seeking asylum	.Pages 40-42
Working with people experiencing homelessness	.Pages 44-46
Our research	Page 48
Our people	.Pages 50-53
Fundraising and donors	Page 54
Financial Statement	Page 56
Acknowledgements & Appreciation	Page 64

Acknowledgement of Country



Baptcare acknowledges Aboriginal and Torres Strait Islander peoples as First Australians and recognises their culture, history, diversity and their deep connection to the land. We acknowledge that we are on the land of the traditional owners and pay respects to Elders past, present and emerging.



75 years partnering with our communities

The Baptcare story began on 24 February 1945, with the founding of Strathalan, our first residential aged care community in Macleod. Strathalan was made possible largely by a group of visionary women, led by the formidable Mary Pope.

In the final months of World War II, they worked together to raise £4,000, to buy the Strathalan homestead. Many, at the time, thought their task impossible.

Throughout our history, Baptcare has continued to respond to the needs of our community and remained open to new ways of serving:

- The response of an Aberfeldie Baptist Church family to the needs of mothers and children fleeing abuse, inspired a group of local women to work together to establish an organised service that could offer families emergency foster care and counselling. And so, Abercare was born in 1981. In its first year, the service received 71 referrals. By 1985, that had grown to 100, and would rise even further in the ensuing years.
- In 2020, our Family and Community Services team worked with over 1,800 families, carers, young people and children in Victoria and Tasmania. In the last financial year alone, we were able to support and place around 100 children in foster care and kinship care.

These are but two small glimpses into the work of Baptcare over the last 75 years. What we do may change, but how we do it remains the same. We will continue to bring to life our mission of 'Partnering for fullness of life with people of all ages, cultures, beliefs and circumstances'.

Through partnering, working with, and walking alongside our residents, customers and clients, we are blessed with wonderful opportunities to connect with people from diverse backgrounds and circumstances, and to nurture rewarding one-on-one relationships. In the last financial year alone, our staff and volunteers have worked alongside over 18,250 people from all walks of life. We are delighted to share some of their stories with you in this annual report.



A brief history of Baptcare

Strathalan opens

Strathalan Homestead opens as 'Strathalan Aged Care Home' in 1945



1945



Abercare

Family Services

Abercare Family Services joins BSS

and eventually becomes Baptcare's

1981

Public housing development

BCC develops a public housing project with Wangaratta Baptist Church

1996

1995



1972

•

Church Nursing Service

Baptist Social Services Dept (BSS) becomes responsible for Church Nursing Service. BSS is a department of the Baptist Union of Victoria (BUV)

BSS becomes Baptist Community Care

Baptist Social Services (BSS) incorporated and changes its name to Baptist Community Care (BCC)

2 Baptcare – Annual Report

pictorial timeline

Baptcare Family Services

Abercare Family Services becomes Baptcare Family Services and is expanded into Tasmania. Disability Gateway is also established

> Family and Coramunity

Baptcare co-partners with NDIS

Local Area Coordination delivery commenced in Tasmania & three regions of South Australia



2006

•



BCC branded as Baptcare

Baptist Community Care is rebranded as an abbreviated name, linking Baptist and Care – Baptcare



2013

•

Baptcare Affordable Housing

Baptcare Affordable Housing (BAH) registered as a separate business entity to Baptcare

2016-18



2020

Strathalan turns 75

Strathalan celebrates its 75th anniversary in 2020

Our Service impact across three states



Service impact across three states

With the support of over 3,300 committed staff and 1,100 passionate volunteers, services were delivered to more than 18,250 people across Victoria, Tasmania and South Australia in both metropolitan and regional areas.

Baptcare Mission, Vision and Values

Our Mission, Vision and WE CARE Values are at the heart of what we do







Our **Vision** is to create communities where every person is cherished.



Service offerings in three states

In Victoria, Baptcare offers predominantly Aged Care services, and Family and Community Services. In Tasmania, we mostly provide NDIS, Mental Health and Family and Community services. In South Australia, all offerings are NDIS-related services.



Wellbeing: you living your life with meaning, we partner with you to enhance your health, safety, comfort and spirituality.

Ethics: being genuine with you, leading with integrity and fulfilling Baptcare's purpose in harmony with community expectations.





Accountability: fulfilling our commitments to you and accepting our responsibilities to continually improve.

Respect: understanding and

and protecting your dignity.

up for your equality

with you.





Effectiveness: being focused on achieving the best outcomes for you,

embracing your individuality, standing

YEARS

Graham Dangerfield

"In response to COVID-19, Baptcare staff and volunteers have been the embodiment of adaptability, devising alternative and innovative ways to ensure we stay connected with our residents, customers and clients."

Celebrating

Chief Executive's Year in Review

This year marks Baptcare's 75th birthday. Just over 75 years ago, a group of ordinary people with big hearts stepped out in faith to respond to local community need during a time of scarcity after the war.

These small steps grew into today's Baptcare. All these years later we continue their legacy and inclusive faith through our mission to partner for fullness of life with people of all ages, cultures, beliefs and circumstances.

As I reflect on our founders, I wonder if they ever imagined their local work would expand to communities across South Australia, Victoria and Tasmania, and would continue in a new and changed world.

In 2020 alone, momentous and unforeseen changes have occurred. The calendar year began with a devastating bushfire season that destroyed 1.5 million hectares¹ across Victoria and ravaged local communities. This was soon followed by the COVID-19 pandemic, unprecedented in its global reach. As we work with people in aged care, family and community services, disability services, social housing, and asylum seeker support, Baptcare is keenly aware of the physical, mental, financial, social and spiritual impacts felt by many this year, and the subsequent increased need in the community.

In response to COVID-19, Baptcare staff and volunteers have been the embodiment of adaptability, devising alternative and innovative ways to ensure we stay connected with our residents, customers and clients, and working with them to prepare for, and navigate, what has been a difficult time for many.

This has resulted in practical measures, such as: Disability Services and Family and Community Services teams moving from in-person interaction with clients, to online and phone appointments, to maintain continuity of programs; our Sanctuary Foodbank adopting an online ordering system to ensure COVID-safe practices in food distribution; keeping connected with residents in our Retirement Living communities to support their wellbeing, through delivery of care packages, letterbox meet and greets, and socially distanced happy hour; staff at our Residential Aged Care facilities bringing in homemade treats for residents missing family visits and outside contact.

Data source:

1. Eastern Victorian Fires 2019–20 State Recovery Plan https://www.vic.gov.au/bushfire-recovery-programs-and-initiatives

Chief Executive's Year in Review

(Continued from previous page)

As we've faced the challenges of 2020, and the road ahead has not always been clear, we are sustained by the same values and faith of our founders from 75 years ago: "For we walk by faith, not by sight" – 2 Corinthians 5:7.

I'm so proud of how everyone at Baptcare, in both frontline and support teams, has stepped up, often going above and beyond in their commitment to our residents, customers and clients, and to each other. The past year has certainly tested our mettle and I'm confident that we will emerge into a new COVID-normal, equipped with valuable insights and learnings.

I hope you enjoy the stories in this Annual Report, which not only illustrate the resilience, dignity and optimism of the individuals concerned, but also depict Baptcare's mission in practice.

More than ever, this past year has reinforced for me that the heart of Baptcare is its people – our Board and Executive Leadership team, our staff and volunteers, supporters and donors, and, so importantly, the individuals and families we come alongside and support, to achieve and maintain fullness of life, whatever that means for them. Together, we are the Baptcare community, and I am deeply grateful to everybody for their contribution.



Above: The original Strathalan Homestead in Macleod, now the site of Baptcare Strathalan Community.



















Baptcare Board members

At left: Robina Bradley – Chair. Above, left to right, top to bottom: Matthew Hick, Ross Dawson, Brandon Howard, Tim Farren, Julianne Rose, Assyl Haidar, Mark Trajcevski, Hamish Blair, Michelle Dobbie.

Graham Dangerfield, Chief Executive was present at all Baptcare Board meetings.

YEARS

Robina Bradley

"At the centre of everything we do at Baptcare, is a genuine respect for the people we have been called to work with."

Celebrating

Message from the Chair

It's my deeply held personal belief that every person has the right to live, and age, with dignity, and I am proud to chair an organisation where every person's value and agency is recognised. At the centre of everything we do at Baptcare, is a genuine respect for the people we have been called to work with.

Our mission invites us to promote and support fullness of life, especially where need is greatest, inspired by John 10:10 – "I come to give life – life in all its fullness". In practical terms, this translates to working collaboratively with individuals, without judgement, to support them to achieve the goals they set for themselves.

In 2020, there has been increased community scrutiny of the safety and quality of care services, with the advent of COVID-19 and the heightened risk for older Australians and people with pre-existing conditions or vulnerabilities.

In parallel, two Royal Commissions are underway to shine a light on problems in the Aged Care and Disability sectors and identify opportunities for improvement. The Royal Commission into Aged Care Quality and Safety released an Interim Report in October 2019, which submitted 124 recommendations for reform. The work of both Royal Commissions will continue into 2021, and Baptcare looks forward to the release of the Royal Commissions' Final Reports. We believe they will bring greater transparency and foster a more inclusive society.

As a for-purpose organisation, we aim to create communities where every person is cherished. The stories in this Annual Report, from across Baptcare, show the breadth of our mission in action: working in partnership with individuals and families, to provide a sense of belonging and connection when they need it most, so they feel empowered to pursue and inhabit a full life, on their own terms.

It is a great honour to work with the dedicated and experienced directors on Baptcare's Board, with our Chief Executive, Graham Dangerfield, and with an Executive Leadership team focused on providing the best of care for everyone. I would like to take this opportunity to commend and thank our outgoing Board member, Michelle Dobbie, who resigned from the Board in June 2020, and to extend a welcome to Mark Trajcevski and Hamish Blair, who joined our Board in February this year.

Finally, I thank our Baptcare staff, volunteers and supporters for your diligence, expertise, energy and enthusiasm for our work, in what has been an extraordinary year. Your commitment to those we have the privilege to work with, is enormously valued.

Working with older people

Baptcare draws on over 75 years' experience in aged care services, supporting older people to age with dignity, on their own terms. We are committed to, and remain focused on, service improvements and quality of care.

Baptcare has 15 residential aged care communities in Victoria, and one in Devonport, Tasmania. Each community provides a warm and inviting environment that more than 2,000 residents have called home this year. These communities can accommodate all levels of required care and cater to the individual care needs of each resident.

In addition, Baptcare has six retirement living communities. Many are co-located with our residential aged care communities. More than 200 residents currently enjoy the full benefits of living an active and independent life, with the knowledge that additional support services are available to them if, and when, their circumstances change.

Our In Home Care service partners with our customers to age in place and remain in their homes. In the last year, more than 370,000 hours of personal care, home care, social support, and respite services, were provided to more than 3,600 older people in Victoria and Tasmania. We were also able to help them maintain their health and manage pain and chronic conditions through nearly 10,000 hours of expert nursing and allied health services, such as physiotherapy and occupational therapy.

Our new self-managed service model is another way we partner with customers who prefer more control of how their Home Care Package is managed. It enables customers (or a nominated person) to take the lead in managing their home care services, while Baptcare looks after the back-office administrative work and provides set up and ongoing coaching and support, as required. By the end of June this year, 50 customers had signed up for Baptcare Self-Managed.

Aged Care snapshot

AGEING POPULATION ON THE RISE

Australia's population is ageing as a result of sustained low birth rates and increasing life expectancy. In 20 years, the proportion of the population aged 65 years has increased significantly



Proportion of Australians over 65 in 2000



over 65 in 2020

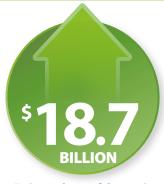
LIVING WITH DEMENTIA

In 2020, there are an estimated 459,000 Australians living with dementia, and it's the second leading cause of death in Australians.

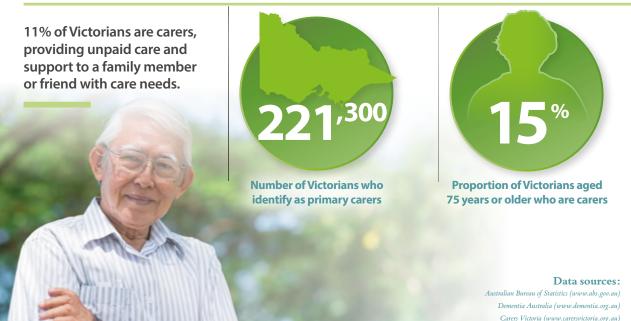


Proportion of Australians over 85 with dementia

CARERS IN THE COMMUNITY



Estimated cost of dementia by year end 2025



Barbara & Sam's Story



"I could see how good Karana was, so after my husband died, and I'd been living alone for ten years, I thought it would be nice to come here."

* Image changed to protect privacy

When it came time for Barbara to move into Residential Aged Care, she knew she wanted to be a part of the Karana community.

Barbara: I'd grown up in the area and I used to visit a friend who was living here. I'd take her to listen to Sam (*Samantha Lo, Baptcare Spiritual Care Coordinator and Chaplain*) playing the harp. I could see how good Karana was, so after my husband died, and I'd been living alone for ten years, I thought it would be nice to come here. I liked the gardens, and the people. I was a Methodist and was familiar with the local Baptist Church, so I decided this was the place for me. I like to join in, so I go to anything that's on here: exercises, Bible group...

Sam: Barbara always does the Bible readings for us in chapel services.

Barbara: I can't sing or play the piano, but I can read. I used to do a lot of reading for The Blind Institute; reading books that students needed for their studies. I lived not far from Latrobe University, so I'd go to the library there and record myself. I reckon I was learning a lot too.

Sam: We have a Bible 'study' group, with reading, conversation and, of course, coffee and cake! It's very popular and includes people from different faith backgrounds. It's a good way for new people to join a group that's not too big, get to know a few people and feel a sense of belonging. Barbara is very good at drawing out other people's stories; inviting other people to speak.

Barbara: I learnt that from being a teacher. Sometimes you know people have something to say; they just need to be encouraged. It's good to hear different views.

Sam: If I've got a new person, and I know they might be a bit overwhelmed, I just have to word up Barbara and a few of the other ladies, and say, "Can you take them under your wing?"

It's one thing for me to come alongside a new person, but it's a whole new level for a peer to come alongside. I can only imagine what it's like to leave my own home and move into Karana. They know.

Barbara: It's just being friendly. Letting people know that there are certain things on that they might enjoy, like the hymn singing, discussion groups, Friday night harp concerts with Sam... I don't know what we'd do without Sam.

Sam: It goes both ways. The way Barbara thinks and acts, and lives her faith, is extraordinary. And with the wider Bible study group, sometimes I'll ask them to pray for me, like when I have a funeral coming up.

The compassion and inclusion of the Karana community is exemplified by their Memory Garden, which has become a tradition that allows residents and staff to share memories and show their love and support for each other.

Sam: The Memory Garden started when a resident, Marion, said she'd love us to plant a red geranium after she died, "so you don't forget me." So now, when somebody dies, I'll invite the family to come and plant something. It's also a way for residents and staff to say goodbye.

Barbara: It's lovely to have a garden where memories can continue on.

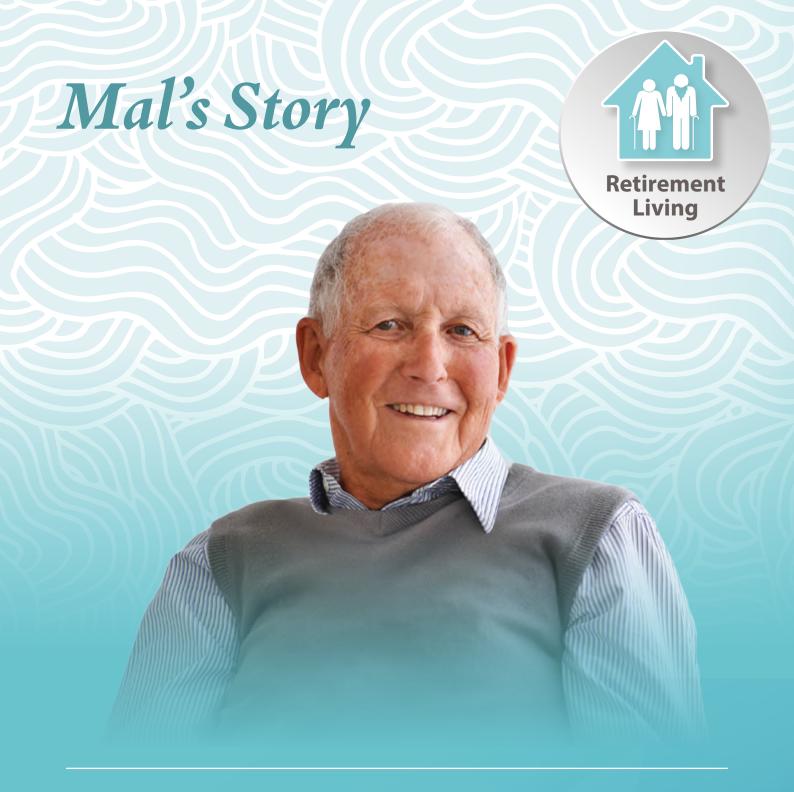
Sam: We had two sisters here, Pat and Joyce, who'd always lived together, and who kept to themselves at Karana. When Joyce died, Pat was on her own. I invited some residents to join in a memorial service and rose planting in the garden, and they all turned up so Pat would know she wasn't alone. Pat was staggered that people, even ones she didn't know, would turn out to show their love. This year, the mum of our chef MJ, died in Iran of COVID-19. I asked MJ if she'd like something planted in the Memory Garden. With her blessing, we welcomed staff and residents to attend, and so many came. It was phenomenally powerful for MJ to feel the love from all those people that day.

Barbara: It was very moving. We felt lucky to do that; to be able to be with her.

Sam: At the end, MJ said, "I haven't got my family in Australia but today you've become my family."

It's that spirit of community and empathy that makes Karana such a good fit for Barbara.

Barbara: I'm glad I made the decision to come to Karana. I have no regrets. It's a great place to live.



"There are so many interesting people here, with so many stories. I hope all Strathalan residents achieve the same level of happiness that Beryl and I have enjoyed here."

* Image changed to protect privacy

When Mal and his wife, Beryl, joined Strathalan's Retirement Community 18 years ago, they fully embraced the opportunity to enjoy their retirement. It was also an investment in their future.

Mal: All those years ago, having residential aged care next door was a factor in our choice of Strathalan, but not for one moment did we think we'd need it. Being residents in the retirement community, we have first bite of the apple when it comes to getting a place. My wife, who has dementia, is now living there.

The signs of Beryl's cognitive decline are easier for Mal to see in retrospect, than they were at the time.

Mal: It was coming for a while; Beryl's memory was going, and she had mood swings. She'd do things like get up at 3am to clean the toilet, or she'd do a wash with only one hand towel. We had pizza one night, and she took the empty pizza box and put it away in a cupboard.

We knew sooner or later she'd have to go into care, but we needed to take her on the journey, to get her prepared for it. I'd looked after Beryl for 30 odd years, while she suffered from chronic fatigue syndrome, but I couldn't look after her any longer. It was beyond my capability.

Beryl going into aged care was physically and financially big and very emotional for both of us. Fortunately, I've had support here. James Coe (*Baptcare Client Relationship Partner*) led me through the paperwork for My Aged Care.

Every Thursday, Bronwyn (*Bronwyn Madder, Spiritual Care Coordinator*) rings to check in with me, to see how I'm faring. That's the warmth of Strathalan – it's not just bricks and mortar.

When Beryl was first admitted, Angela (*Angela Tupaz, Strathalan Residential Care & Services Manager*) and Susan (*Nurse Unit Manager*) spent an hour with me. They wanted to know what to look out for with Beryl, what dietary requirements she has, that type of thing. I found that all very reassuring.

On top of that, it's knowing Beryl's being looked after. Even though I still worry, I'm extremely pleased with them; they can't do enough for her and the other residents. I've made a point of introducing myself to the staff who look after Beryl and thanking them for what they do.

I'm pretty domesticated because I'd been doing the cooking, washing, and shopping already, so it hasn't been such a big transition for my day to day life. Naturally, I miss Beryl, there's no question, but it's the reality and you just have to adjust to it. She's ok, she's in a great spot. I'm doing ok. It's only a five-minute walk for me to see her. You can't ask for more than that.

Mal believes life at Strathalan can be summed up by these three words: contentment, happiness, and security.

Mal: I was 69 years old when Beryl and I moved to Strathalan. We've had the benefit of all those years here together. It's not just a matter of living in a unit. We've had movies, bingo, bus trips and guest speakers. Our lifestyle has been improved through Baptcare's excellent management and by the warmth of fellow residents. There are so many interesting people here, with so many stories. I hope all Strathalan residents achieve the same level of happiness that Beryl and I have enjoyed here. I highly recommend the decision to reside at Strathalan.



"I'm an independent person; I was happier to be giving care than being on the receiving end of it... I'm able to stay here in my home, live my own life, and enjoy it within its limits."

* Image changed to protect privacy

After Joan's husband died, she remained actively involved in their local community, until her mobility was impacted by two serious incidents.

What was your situation prior to coming to Baptcare?

Joan: About five years ago, I had a fall in my bathroom, that caused a cerebral haemorrhage and a minor stroke. I went to rehab, where I learned to walk again, and my speech recovered. I was determined and worked my butt off to get back home. Before too long, I could drive my car again, but I needed a walking frame to leave the house.

How were you introduced to Baptcare?

Joan: My daughter arranged it all. I was assessed for a Level 4 Home Care Package with Baptcare after the fall, but I mostly used it for house cleaning, gardening, and travel escorts. I'm an independent person; I was happier to be giving care than being on the receiving end of it. Three years ago, I was involved in a nasty car accident which put me in hospital and rehab for five months. Now there was talk of full-time aged care. I had to prove I could cope at home with the level of services available to me. I now became an even bigger problem to myself and to my family, as none of them lived in the district.

The hardest thing was that I couldn't drive anymore. I don't like being dependent on other people and felt imprisoned in the house, until the TAC (Transport Accident Commission) got me a scooter. We moved here to Inverloch nearly 40 years ago, and were involved with Rotary, Probus, and the Church. I've always had an outgoing interest in everything, so it was hard to feel I'd lost all that; it was horrible.

How has being with Baptcare impacted your life?

Joan: I use my Home Care Package for a lot more. My balance has worsened so I use the walker full-time – I accept that now. My hands are my biggest frustration. I broke my left wrist and did some nerve damage that affected my right hand, so they're both weak. Carers come to put on my compression stockings every morning and return in the evening to remove and wash them, because I've lost the power in my hands to do that. Once the basics with Baptcare were worked out, it was up to me what tasks I asked for help with. I don't ask people to do things I can do myself. I can bring my washing in, but I need someone to hang it out for me. The girls make my bed, bring my newspaper in, wheel the bins out to the kerb, do my eye drops, and open things. They're a nice bunch of women, they've become my friends. They'll look around and notice things; always there to do that bit of extra.

I'm a coeliac and do most of my own cooking, although I get some frozen meals through Baptcare. Once a month, Michelle (*Michelle Brown, Baptcare Care Worker*) takes me to Wonthaggi and we do a big coeliac shop. We have an enjoyable afternoon, with a coffee if time allows. I also get driven to appointments, including my weekly physio appointment. Baptcare provides for my garden's care, and they also deal with safety issues, such as door handles and locks, which I can now manage.

What does it mean to you to be able to receive Aged Care services in your home?

Joan: I'm able to stay here in my home, live my own life, and enjoy it within its limits. We used to live in Leongatha and were very involved in the Uniting Church there. Now, through Baptcare, I go to services each month, and stay for lunch with old friends who've been part of the church community with me since our kids grew up in it. That's very important to me.

I'm going to Abbey Gardens (*Baptcare Residential Aged Care community*) in January for respite. My brother was living there, and they were so wonderful with him, so that's where I've chosen to go. The idea is to give me a break, and get my foot in the door, for when I need to move there. Abbey Gardens seems to be an alive place, with activities, a cafeteria, etc.

For now, I'm reliant on In Home Care. I know I can ring Donna (*Donna Renhard, Care Consultant*), at any time and ask for extra help because I've got package funds available. The Morwell staff are always so pleasant and so helpful with the many phone calls. Knowing some caring person is coming each day is wonderful. It gets me out of bed each morning.



"I appreciate that my suggestions are taken on board, like using a preferred carer. Baptcare recognises that continuity of an established relationship is very important for people receiving care."

* Image changed to protect privacy

Pip's husband, Alex, suffered a massive stroke on New Year's Day 2009, leading to brain surgery and an extended period of rehab. He has vascular dementia resulting from that episode and has now been diagnosed with Alzheimer's.

What was your situation prior to signing up to Baptcare Self-Managed (BSM)?

Pip: I resigned from my job as Operations Manager with the Royal District Nursing Service (RDNS) about the time Alex's Home Care package came through. He'd had an ACAS (Aged Care Assessment Service) assessment straight after rehab, and been an RDNS client, but he was reassessed in November 2012 and put on a waiting list for a Home Care package. Six weeks later, I got a phone call from Baptcare. Alex was signed up to a fully managed Home Care Package (HCP) with Baptcare.

The best thing was having a Care Manager; I felt there was someone overseeing our needs. We had several different Care Managers over the years. By the final one, her role with us was mostly about overseeing how the funds were spent.

How were you introduced to Baptcare Self-Managed?

Pip: Karl (*Karl Richards, Baptcare Local Community Partner*) rang to ask if we'd like to switch. I could see my work history and time caring for Alex made me a good candidate. Karl came out to set up Alex's profile on the (*external to Baptcare*) online platform for selecting and rostering workers. He set me up very well, over three or four sessions.

How has Baptcare Self-Managed changed your experience of Home Care services?

Pip: We had one carer already that we wanted to continue using. And we have found another on the online tool: a 62-year old ex-electrician. We've got a great rapport with him, and I've offered him an extra shift so I can reinforce the manual handling he has to do with Alex.

Organising shift changes is straightforward as I communicate directly with the carers.

How does Baptcare support you to manage Alex's Home Care Package?

Pip: It's all quite easy. As well as the rostering, I check the monthly statements Baptcare sends, and validate that services have occurred, so Baptcare knows to pay the invoice when it arrives. I've worked with Sam (*Sam Tea, Self-Managed Administration Coordinator*) on how I need to provide the information on the form so invoices can be reconciled. I speak to him most months because we're still tweaking it. He has offered me an Excel training session, which I don't personally need, but I think it's good to offer that to people.

I'm working with an occupational therapist to replace Alex's powered wheelchair with a new manual chair, and purchasing a new mattress. I'm keeping in touch with Karl, so he knows they're being considered. Karl is amazing to deal with. He's so organised, pleasant and efficient, so things just get done.

What are the key benefits of BSM for you?

Pip: I appreciate that my suggestions are taken on board, like using a preferred carer. Baptcare recognises that continuity of an established relationship is very important for people receiving care. The dealings I now have with Baptcare are very professional and clear, and the BSM process has been refined over time.

What type of person do you think is a good candidate for BSM?

Pip: My experience helped me slip into doing this without issues. I think for people who are new to being a carer it might be more difficult, and maybe you'd need more guidance and oversight. But it's perfect for us; I'm really happy with it.

Working with children and families

Baptcare's commitment to partner for fullness of life extends to families and children through the work of our Family and Community Services (FACS) team. Our integrated services, such as parenting information, advice, and practical support, are informed by research and focused on the safety and wellbeing of children, young people, and families.

We work alongside young people who are vulnerable or at risk, experiencing homelessness, and facing risk of statutory intervention. Our foster care and kinship care programs support carers to provide a safe and nurturing environment for children who require out-of-home care. In the last year, we have been privileged to support almost 1,900 families, carers, children and young people across Victoria and Tasmania.

What clients say about our services

Listening to, and learning from, feedback is an important part of our work. In December 2019, we received feedback from 145 clients whom we worked with in Victoria and Tasmania. This is what they told us:

- Over 97% of clients were 'very' or 'mostly' satisfied with Baptcare's service
- 74% of clients rated our service as 'excellent'
- Over 80% would 'definitely' recommend our service to friends or family if needed.

It was heartening to receive such positive feedback, but we don't intend to rest on our laurels. We asked clients to tell us how Baptcare can improve its services, and this is what they said:

- Make it easier to contact Baptcare
- Increase contact time spent with clients
- Improve timeliness of contact and communication
- Make it easier to provide feedback.

In response, we have committed to the following:

- Strengthening service expectations by engaging with our clients to identify improvement opportunities in the feedback process, communication channels, and contact time between staff and clients
- Exploring tools to improve and increase communication with clients SMS, video, etc.
- Ongoing training and supervision in procedures, tools and systems, to ensure staff capture accurate, timely and complete information, to improve the volume and quality of feedback received.

The full survey results for 2019 are available at: baptcare.org.au/facs-clientsurvey

Family services snapshot

FAMILY VIOLENCE

Family, domestic and sexual violence is a major national health and welfare issue that can have lifelong impacts on families. A 2016 Australian Bureau of Statistics survey found 2.2 million Australians have experienced physical and / or sexual violence from a partner and 3.6 million Australians have experienced emotional abuse from a partner.



Number of children under nine assisted by specialist homelessness services in 2017-18 due to family violence



Proportion of women who've experienced physical or sexual violence from a current or previous partner

CHILD PROTECTION

In Australia, statutory child protection is the responsibility of state and territory governments, to assist vulnerable children who have been, or are at risk of being, abused, neglected or otherwise harmed, or whose parents are unable to provide adequate care and protection. 45,000 children in Australia are unable to live with their parents, due to abuse or neglect.



Proportion of Australian children in out-of-home care who are placed with relatives



Number of Australian children receiving child protection services in 2018-19

Data source: Australian Institue of Health and Welfare (www.aihw.gov.au

Family and Community

FAMILY & COMMUNITY SERVICES – VICTORIA

SERVICE OR PROGRAM	DESCRIPTION
Integrated Family Services (IFS): 733 individuals supported	The IFS program offers in-home support to families with children aged 0-18 years of age. It offers support to develop practical parenting skills in addition to information and advice around household budgeting and time management. It also focuses on child/adolescent development and behaviour management.
Families First (FF): 43 children/young people supported	This program for child protection works with families to prevent children being placed out-of-home when there is a crisis. It also intervenes to reunify a family where a child has been living in out-of-home care. The FF program runs between 4-8 weeks and involves regular home visits by a Baptcare practitioner. This service is part of the Family Preservation team.
Parenting Assessment & Skills Development Services (PASDS): 30 individuals supported	This program is available to parents with children aged between 0-3 years who are currently DHHS clients. PASDS assesses whether these at risk children are growing up in a safe environment and assesses parenting capacity and competency. PASDS also works with parents to increase skill development. This is part of the Family Preservation team.
Kinship Care (KC): 54 children/young people supported in KC & KCFS	KC is directed at children or young people who are placed with a family member, friend of the family or someone in the young person's community because they're unable to stay at home with their own parents. Support includes: case manager; carer training and advice; and support groups. KC First Supports (KCFS) is for new care placements.
Foster Care: 40 children supported	This program offers accredited foster carers to care for at risk children (referred by DHHS). Based on the needs of the child, placement can be either General or Intensive – with different care durations – from one night emergency care to long-term care.
+Waves (Positive Waves): 169 individuals supported	+Waves offers free therapeutic services for children, young people and adults who are recovering from their experience of family violence. Services include individual counselling, family work and group programs.
+Shift (Positive Shift): 52 individuals supported	+Shift delivers a therapeutic evidence-based group for women who use violence in intimate relationships. It also connects women and families to supports in their community.
Targeted Care Packages (TCPS): 18 children/young people supported	TCPS is a DHHS Child Protection funded package available to children and young people who are at high risk of entering residential care or who are transitioning from residential care to a home-based environment. Targeted package amounts include funding for a key worker and provide an individualised holistic response to children and families.
Home- Start: 62 individuals supported	Home-Start is a mentoring service that connects vulnerable families with children under the age of five with a suitable volunteer mentor. A dedicated mentor visits the family weekly to offer practical and emotional support, and to link them to other relevant services. Home-Start also provides a supported weekly playgroup. 35 children were in the playgroup this year.

...listing of services

FAMILY & COMMUNITY SERVICES – TASMANIA

SERVICE OR PROGRAM	DESCRIPTION
Integrated Family Support Services (IFSS): 153	IFSS provides practical parenting assistance and strategies, casework and case management services for vulnerable families with children aged birth 0-18 years.
individuals supported 390 children supported	Eligible families may be struggling with inter-generational patterns of family vulnerability, child abuse or neglect, physical or mental health conditions, intellectual disability, poor financial management, drug and alcohol misuse and family violence.
	Casework may include a range of activities such as group work, practical support, parenting and household management strategies, skills development, counselling and mediation.
	SafeCare, Mothers in Mind and Caring Dads programs are also part of the IFSS service.
Strong Families Safe Kids Advice and Referral Line: 2514 conversations held	This is the first point of contact for anyone – including children or families – who is concerned about the safety and wellbeing of a child or a family. The Advice and Referral Line is comprised of a coordinated network of government and non-government staff. Support ranges from information and advice, referrals to existing support services and, where necessary, wellbeing assessments and referrals through to Child Safety Services.
Targeted Youth Support Service (TYSS): 21 children/young people supported	TYSS works with young people aged 10 to 18 years who are identified as having significant and/or multiple risks or issues. TYSS works collaboratively with young people, families, service providers and/or community members by focusing on a range of individual needs. It focuses on re-engaging young people in education, training, employment and housing with the aim of improving their health and wellbeing.
Grandparents Supporting Grandchildren and Other Relative Carers (GSGC): 17 individuals supported 28 children supported	The Grandparents Supporting Grandchildren and Other Relative Carers (GSGC) program provides support through case management and group work to grandparents or relatives who voluntarily accept a child or children of family members into full-time care, ensuring that the needs of the child or children are addressed.
Lead Support Coordination Service (LSCS) 29 individuals supported	LSCS is a service that provides coordination for people who have multiple and complex needs. Coordinators work in partnership with their clients to provide coordinated services and support, to identify changing circumstances, and to engage, manage and develop their own support networks.
Foster Care: 3 children supported	This out-of-home care program recruits, manages and supports foster carers and foster care placements for children who are unable to live with their parents for short or long periods of time.



"It makes you feel proud, to know that you've both taught and learned from the children in your care. The ones that stay a while, they stay in your heart."

* Image changed to protect privacy

Carolyn and her husband, Joe, have been fostering children for 37 years – the last decade with Baptcare. She's not sure how many children they've welcomed into their home in that time.

Carolyn: I stopped counting at 400. We have three kids of our own and our youngest was 18 months old when we started fostering. Some children stayed for a couple of days or a week, some stayed longer. We've had children of all ages, including teenagers. I love kids and feel very lucky to have a job I love.

The most important thing to tell the children is, "We're going to keep you as safe as we can, whether you are here for a short time or a long time. We'll do our best to love you and care for you."

A lot of fostering in the early days was due to mums being ill, or not able to look after their children for a while. Today it seems more children are in situations of physical or emotional abuse – or maybe it's just that we pick up on that more these days.

As a foster carer, you have to remember, this isn't your child. You have a responsibility to ensure everyone knows what's going on with the child, so communication is key. And it goes both ways. Some Baptcare workers are just exceptional. You can't believe the time and work they put in, and how comfortable you feel with them. If I don't think things are being done properly, I raise an issue, and Baptcare listens.

Being patient and calm are essential traits for a carer to begin with, but you keep learning in this job. We get access to seminars, meetings, and information to learn how to deal with children from all kinds of environments.

I had a terrific experience recently with a little girl who came to us at eight days old. After six months, her mother decided she wanted to see her daughter, so we met the mum a couple of times at the DHHS (*Department of Health and Human Services*) offices. She wanted to know everything about her baby, and I could feel that she really wanted her child. They were eventually reunited and, although as the foster carer you don't normally get told much, I've heard that they're doing really well.

We've kept connected with some kids who've moved to permanent care, exchanging Christmas cards every year. It's lovely to know how they've gone on in life. It makes you feel proud, to know that you've both taught and learned from the children in your care. The ones that stay a while, they stay in your heart, and the memories don't fade.

There are not enough people willing to look after kids. My advice to people who are interested in fostering, is to try it for a while and see if you like it. There are so many children out there who need support, and they deserve that. Every child deserves the best possible love, care and support you can give them.



"It has been five and a half years since our daughter passed and we have survived. Every day brings a new challenge, but it keeps us on our toes. They say, what doesn't kill you makes you stronger."

* Image changed to protect privacy

Children or young people are sometimes placed with a family member, friend of the family, or someone in their community. Sheryl and her husband took on the care of their three grandchildren after a family tragedy.

Sheryl: Five years ago, in the middle of the night, we received a frantic phone call from our granddaughter, that changed all our lives forever. My husband instructed our terrified grandchild to call an ambulance, but there were already five in attendance. Have you ever tried to get dressed, still half asleep, trying desperately to understand what's happening?

Our daughter, our grandchildren's mother, died that night.

We travelled to Hobart as fast as the law would allow but, sadly, we did not get to say goodbye. I don't think I will ever forget the raw pain I felt upon seeing two police officers walking slowly towards our car as we pulled up at the hospital.

Our daughter left us with three grandchildren, all of whom had already had enough trauma in their young lives prior to this awful event. My husband and I had to put our grief on hold because these three children needed us.

So began our lives as grandparents raising grandchildren. We had no idea where to go for help, as I had worked full-time all my life and our children were grown and independent. A case worker, appointed to us from Baptcare, helped guide us through our trauma and, believe me, there were plenty of trials along the way.

Through Baptcare, Sheryl and her husband were introduced to the Grandparents Supporting Grandchildren and Other Relative Carers (GSGC) program's support group. The peer support group provides a space where people who are experiencing similar circumstances can meet and share their heartache, obstacles, and challenges, and also celebrate successes. It is a space where strong friendships have been forged and problems eased through sharing.

Sheryl: Initially we were reluctant to attend but, once we did, we stayed.

The support and love from other grandparents has been phenomenal and we each have our own story. We are all in the same boat, for whatever reason; different oars perhaps, but we are all grandparents entrusted with the raising of our grandchildren.

We still attend the fortnightly meetings. Often our granddaughter comes with us, as she feels part of this extended family too.

It has been five and a half years since our daughter passed and we have survived. Every day brings a new challenge, but it keeps us on our toes. They say, what doesn't kill you makes you stronger.

Working with people living with mental illness

Baptcare's commitment to work with people living with mental illness began through the MyCare (now Foundations) program in 2013. What began in response to a service gap identified by the Tasmanian Mental Health Services, is now a successful, nationally accredited, evidence-informed program that supported almost 400 Tasmanians this year.

Our services have grown rapidly to incorporate a range of programs under the banner of Mindset Tasmania, a state-wide, community-based mental health service funded by the Tasmanian and Commonwealth Governments. These programs provide a continuum of state-wide mental health services that range in intensity – depending on client requirements.

The suite of services offered by Mindset includes:

- **Foundations** working with adults with severe mental health issues not requiring 24-hour support, in partnership with Tasmanian Mental Health Services
- **Choices** in partnership with The Royal Hobart Hospital, supporting people exiting the Department of Psychiatry (or other mental health accommodation) to reintegrate into the community, including transitional accommodation when necessary
- **Connections** working with adults with severe and persistent mental health issues, providing therapeutic service access (low, medium, and high intensity) and connection to universal and special services
- **Horizons** providing group and short-term individual interventions for people with severe and episodic mental health issues, equipping them with the tools to take charge of their mental wellbeing
- **Mental Health TasConnect** a free and confidential mental health referral phoneline, helping people navigate the mental health system and referring them to the right supports, as well as providing access to support from peer workers when applying for the National Disability Insurance Scheme (NDIS).

Mindset has also developed a strong peer worker-based workforce. This is an important feature of the Mindset model, as it ensures programs can provide holistic and integrated support to our client groups.

Mental Health snapshot

PEOPLE LIVING WITH MENTAL HEALTH ISSUES

One in five Australians aged 16-85 will experience a mental illness in any one year, the most common being depression, anxiety and substance use disorder.

Tasmania's suicide rate is higher than the national average, and is rising. There were 108 deaths by suicide in 2019, compared to 78 the previous year.



Proportion of Australians who will experience mental health issues at least once in their lifetime



Age range of people for whom suicide is the leading cause of death in Tasmania

YOUNG PEOPLE WITH MENTAL HEALTH NEEDS

In Tasmania, young people aged 18 to 24 years have the highest prevalence of mental illness than any other age group. In 2018, an estimated 1 in 7 children / adolescents aged 4–17 self-reported as having had a mental disorder in the previous 12 months.



Percentage of children 4-17 who self-reported 'mild' mental health disorders in 2018



Percentage of young people aged 18-24 experiencing mental health issues

Data sources: Primary Health Tasmania (www.primaryhealthas.com.au) Tasmanian Department of Health (www.dhhs.tas.gov.au/publichealth/publications) Australian Bureau of Statistics (www.abs.gov.au)



"I wasn't getting on well with anybody – particularly my family. And because my mental health was so bad I wasn't looking at my physical health. I was evicted from my house and then had to live in a shelter which was inappropriate."

* Image changed to protect privacy

Choices operates in the south of Tasmania in partnership with the Royal Hobart Hospital. The program receives referrals for people while they are in inpatient facilities such as the Department of Psychiatry, or other mental health residential or respite accommodation. It then supports people following discharge, to assist with their reintegration into the community.

Choices operates transitional accommodation sites – Karingal, for men, and Rose Cottage, for women – that support people who are currently homeless and unable to be discharged from the Royal Hobart Hospital because of their homelessness.

Jon, a Royal Hobart Hospital participant in the Choices Program, was referred to Karingal for short-term accommodation.

Jon: Before being referred to Baptcare I was living in a housing property in New Norfolk. The house was run down. My mental health was not good and, as a result, I was engaging in drug use which further exacerbated my mental health. I wasn't getting on well with anybody – particularly my family. And because my mental health was so bad, I wasn't looking at my physical health.

I was evicted from my house and then had to live in a shelter which was inappropriate. The shelter was rife with drugs and didn't improve my mental health.

Around this time, I was hospitalised and referred to Choices, and was approved for a rapid rehousing tenancy. Having the support of Choices whilst I moved to my new house was helpful. They helped me with purchasing some furniture and moving in to my new house. They helped me get to know the local area and learn how to catch the buses so I knew how to get around.

Since that time, I was also assisted to access the NDIS and have a regular support worker. I have stronger relationships with my family now and I will be spending Boxing day with them. My brother has helped me plant a garden at my house. I've also been going to a great GP who has helped me get to the bottom of some long-standing physical health issues.

I'm very appreciative of the support that Choices offered to me. Thank you.

Working with people living with disability

NDIS Local Area Coordination

Baptcare has an enduring commitment to work with people living with disability. We partnered with the National Disability Insurance Agency (NDIA) to become a Partner in the Community in Tasmania in 2013, and in South Australia in 2018. As a Local Area Coordination (LAC) and Early Childhood Early Intervention (ECEI) partner, we support people living with disability to identify and access the support services they need to live life on their own terms in their community.

Our team of Local Area Coordinators works directly with those living with disability – both people who have, and people who have not, met the NDIS access requirements. We work with people to understand what is important to them and what they want to achieve, and then support them to determine the best way to do this. This year we supported 8,500 NDIS participants.

Early Childhood Early Intervention (ECEI)

We help children (aged 0-6) with disability and / or developmental delay, and their families or carers, get the support services they need, at the right time and for the right duration, to enable them to live the life they want and achieve the best possible outcomes throughout life. This year we supported more than 630 children in Tasmania.

Our Early Childhood Coordinators are experienced in early childhood intervention supports. They work with families and carers to determine the best support for the child and the family. This includes identifying available government and community support services and short-term intervention supports. Where required, we help request NDIS access and work with families to develop a plan.

Baptcare also facilitates Information, Linkages and Capacity Building (ILC) activities – nearly 500 completed this year, just for ECEI alone – which aim to connect people with disability with their communities, increasing their knowledge, skills, and confidence, while improving their access to mainstream services. We also conducted nearly 2,700 Community Engagement and Capacity Building activities throughout the year.

What clients say about our services

Listening to, and learning from, feedback is an important part of our work. Between September and December 2019, we received feedback from 50 clients whom we worked with in Tasmania and South Australia. This is what they told us:

- 95% of families say they feel more confident to support their child
- 93% of people with a Local Area Coordinator in South Australia were satisfied with the supports provided.

Additionally, 43% of our staff working in Disability report living with a disability themselves, and a further 45% identify as being a carer. This means 88% of our staff working in Baptcare as a partner to the NDIA have lived experienced of disability.

Disability snapshot info

DISABILITY IN AUSTRALIA

The prevalence of disability increases with age – one in nine people aged 0-64 years, and one in two people aged 65 years and over, live with a recognised disability.



Percentage of Australians aged 0-64 living with disability



Percentage of Australians over 65 living with disability

NDIS PARTICIPATION

Of the total NDIS participants in Australia as at June 2020, 31% were fully or partially managing their own plan.



Total number of NDIS participants in Australia as at 30 June 2020



Proportion of NDIS plans activated within 90 days

CHILDREN LIVING WITH DISABILITY

9,804 new NDIS participants as at June 2020 were children aged 0-6 years. A total of 8,197 children were receiving initial supports in the ECEI gateway.

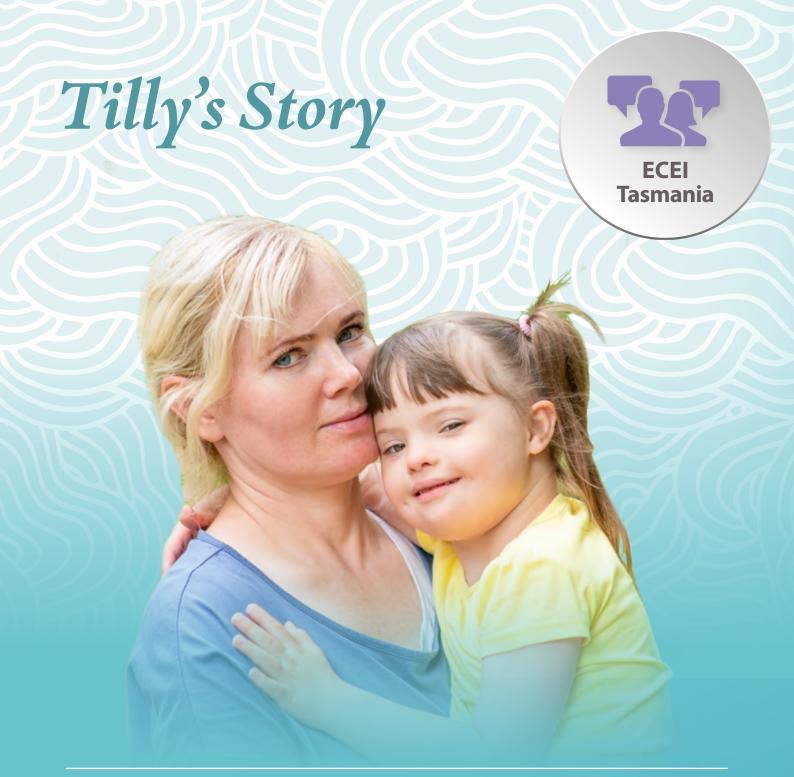


Proportion of new NDIS participants as at June 2020 aged 0-6 years



Increase since March 2020 of children 0-6 years receiving ECEI initial supports

> Data sources: National Disability Insurance Scheme (www.ndis.gov.au) Australian Bureau of Statistics (www.abs.gov.au)



"It's normal for mums to have some nerves, their first child going off to kindy, especially when there's concerns about communication. Tilly wasn't speaking a lot a year ago."

* Image changed to protect privacy

When Baptcare Early Childhood Early Intervention (ECEI) Coordinator, Sharyn, met Tilly last year, the little girl was about to start school and Tilly's mum, Jodine, had some concerns.

Sharyn: Jodine was really nervous about how Tilly was going to manage when she went to school, especially about how Tilly would be able to communicate with her teachers at school without Mum being there. It's normal for mums to have some nerves, their first child going off to kindy, especially when there's concerns about communication. Tilly wasn't speaking a lot a year ago.

Jodine: I was just worried that she was going to get picked on and she couldn't say anything to me.

Tilly started school a few months after Sharyn began working with the family and has settled into her class happily.

Sharyn: She loves it, it's been great. She's been able to access speech [therapy], occupational therapy, and physiotherapy, through her NDIS plan. She's been doing that for a year now.

One of Tilly's favourite activities these days is her BrightStars dance class.

Sharyn: There were concerns that one of Tilly's legs isn't as strong as the other, and she used to shy away from gross motor activities; from playing in the playground. So we needed some supports around working to strengthen that leg and her gross motor muscles. Tilly started off doing dancing in a group specifically for children with difficulties, with Down syndrome.

Jodine: They are so good. They get together once a fortnight and they just dance.

Recently Tilly started playing T-ball in a regular, mainstream setting.

Sharyn: So that's been a huge, exciting thing for her to go into a sports club in a mainstream setting with other children. When I look back now, a year later, she's going great guns.

Jodine: Sharyn came in and made it so easy. I was so nervous, but she made it so easy. She communicated in easy language that I could understand. She made me think that I can do it as a parent, and I'm not alone. And what I'm doing is the right thing for Tilly. I think that's the biggest thing. And I'm not alone; I have got support and I can talk to them.

It gives you hope for the future, that she can do things that other children can do. She's just going to do it in her own time, in her own way.

Mark & Sandra's Story

Local Area Coordination

"I'm hoping that I can give myself a future of some sort. I set myself some short- and medium-term goals, and I've never looked at myself like that before – achieving things."

* Image changed to protect privacy

To see Mark standing proudly beside his Mitsubishi 4WD, is to see a man who is finally coming into his own, after years of living an isolated and disenfranchised life with his mum. His sister, Sandra, remembers what life used to be like for Mark.

Sandra: He wasn't allowed to have friends in. He didn't go anywhere. He couldn't make himself a coffee, let alone cook, because Mum wouldn't let him. He didn't know how to wash his clothes. He didn't know how to do anything. Mum supervised everything.

Sandra accompanied Mark to his first appointment with Wayne, his Local Area Coordinator (LAC) at Baptcare, to discuss an NDIS plan.

Mark: He was straightaway really welcoming. This guy was more than willing to listen, take on board and help me as much as [he] could. I was absolutely amazed, actually. The effort they put into it; I thought, these people are absolutely genuine.

Being on an NDIS plan has given Mark the opportunity to engage with professional support on an ongoing basis, without feeling pressured.

Mark: I'm hoping that I can give myself a future of some sort. I set myself some short- and medium-term goals, and I've never looked at myself like that before – achieving things. So it's a profound change, and I realise I've got to give myself a chance and give other people a chance to work with me.

Sandra has seen the positive changes it's brought to Mark's life and his relationships.

Sandra: He is now getting the help he needs, and they're able to tell him how to cope with situations. Because he doesn't want his sister nagging him and I don't want to nag him. We've got a good relationship, you know.

He's besotted with Emmy, my little granddaughter; the two of them just really click. Sonia [my daughter] and Emmy like cooking. They were making something, and I said, "You'll have to show Mark how to do it." So they had a cooking day together, down at Mark's place. This is normal to other people, but it was so abnormal for Mark. I rang him that night and he said he'd just had the best day ever. It's just brought some normality into all our lives.

Mark: That's why I'm lucky to have this network of support behind me. Without that, I wouldn't be here today. No doubt, no doubt at all.

Sandra: I can't thank Baptcare enough, I really, really can't. They've been brilliant.

Working with people seeking asylum

Our continued commitment to working with those seeking asylum began in 2007, through the establishment of the Sanctuary program. Housing for people seeking asylum is hard to come by and few asylum seekers arrive with accommodation arranged. Baptcare is one of three not-for-profit agencies providing transitional housing and support to people seeking asylum.

Through our Sanctuary rooming houses, Baptcare provided transitional housing, food relief and case work for 85 men this year. Our work is strength-based and person-focused, using culturally appropriate approaches to improve the wellbeing, independence, and social participation of residents.

Apart from providing secure housing, our focus this year, particularly in light of COVID-19, has been to provide safe planning, information, and support for the men in our rooming houses. We've maintained regular contact with them and supported their health care needs, including a focus on mental health.

We have 13 residential houses and units in the community which provided transitional housing, food relief and case work for 52 women and children. These are our Houses of Hope.

These residents are supported by Baptcare case workers and community volunteers who connect them with their local communities and important local services such as schools and health agencies. Our Houses of Hope residents also required safe planning, information and support related to COVID-19 this year, as well as support and advocacy to facilitate children in the program to participate in remote schooling.

We were also able to provide an estimated \$2100 per week in food relief, via the Baptcare Sanctuary foodbank, for people seeking asylum who reside at our Preston and Brunswick rooming houses and Houses of Hope.

We have been blessed with the generosity and support of many individuals, organisations, and churches since Sanctuary's inception, and the West Preston Baptist Church (WPBC) is a great example. Their members have been regular visitors at the rooming houses, often visiting to prepare a meal and eat with residents. Through their connections with food rescue organisations, they helped set up the foodbank, originally onsite at the Brunswick and Preston rooming houses.

COVID-19 presented a challenge to continuing the foodbank services onsite. Undeterred, volunteers, with the support of the WPBC, set up a remote site at the church. Donations were received and food parcels packed for distribution. An online ordering platform was developed to ensure food parcels met the needs of those seeking asylum, and, thanks to the generosity of many donors, we expanded our operations to include Houses of Hope residents.

Food is an essential human need, and Sanctuary will continue to work with churches and the local community to ensure that food needs of residents are met.

Sanctuary snapshot info

ASYLUM SEEKER STATISTICS

People seeking asylum who arrive by sea on or after 13 August 2013 are not allowed to settle on Australia's mainland and are processed by a separate 'Fast Track' process.¹



Number of people arriving by boat seeking asylum in Australia as at 30 June 2020 ²



Asylum seekers going through 'Fast Track' process still waiting for a decision on their application as at 1 July 2020 ³

IMMIGRATION DETENTION

There were 2,361 people in immigration detention in Australia, either in facilities or community detention in 2019/20, 74% were adult males.⁴



Average number of days asylum seekers held in detention facilities ⁵



Proportion of asylum seekers in detention facilities detained more than 12 months ⁶

Data source:

 Refugee Council (refugeecouncil.org.au/fast-tracking-statistics)
 Refugee Council (refugeecouncil.org.au/asylum-community/3)
 Refugee Council (refugeecouncil.org.au/fast-tracking-statistics)
 Ach Department of Home Affairs (homeaffairs.gov.au/research-and-stats/ files/immigration-detention-statistics-30-june-2020.pdf)



"After all I've been through, I can proudly say, no one can break me. Except maybe, with kindness and love... and it gave me a better perspective on life, and what my family and friends mean to me."

* Image and name changed to protect privacy

After three and half years in immigration detention centres, Yashmit* has found, in Sanctuary, a place to rebuild his faith in humanity and in himself.

What was your situation prior to coming to Baptcare?

Yashmit: I came to Australia in 2001 and I applied for protection after the first year. It took six and a half years for my application to be processed. When I'd call to check progress, they'd say, "You don't need to call us; we will let you know."

By 2005, I stopped contacting the Immigration Department and gave up on everything. I stopped going to uni and quit my job. From there, my life went south.

In 2015 I found out my visa had expired in November 2008. After lodging six FOI (*Freedom of Information*) requests I discovered that the government had lost all my paperwork. So, as an 'unlawful non-citizen', I was sent to detention, firstly at Villawood, in Sydney, for about 14 months, then Perth for three and a half months, before ending up in Broadmeadows.

When I was finally released from detention, in September 2019, it happened suddenly and I was given half an hour to leave. But I took three hours because I insisted on saying goodbye to my friends. Now I'm on a Bridging Visa E. That means I have no Centrelink benefits or Medicare, but at least I'm lucky I have a work permit.

How were you introduced to Baptcare?

Yashmit: When I got out of detention, I stayed with my aunty for a few months. A friend told me about Cabrini Asylum Seeker and Refugee Health Hub in Brunswick. I met a psychologist there, who referred me to Baptcare Sanctuary.

Yashmit moved into Sanctuary's Preston rooming house in January 2020.

How has being with Baptcare impacted your life?

Yashmit: When you've spent a lot of time in detention, you always think of the negative first to protect yourself. So, I was nervous moving in, but now I feel I'm safe here. I'm trying to change my mentality; it's going to take time. I'm pretty sure everybody here has the same feeling.

At least I can express my feelings. Some of the people here cannot, they are too scared. Residents are living under enormous mental pressure and uncertainty. There's bound to be some arguments, but I've never seen any fights. We cook together, help each other, talk.

Sanctuary staff and volunteers try to talk with residents – it's helpful. Even I try. If I see someone looking sad, I say, "Look, you don't have to tell me anything, but if you'd like to, you can trust me."

I also don't want my friends in detention to think they're forgotten, so a group of us do video chats every weekend. I'm still alive because of the close friends who came to visit me in detention, so I want to give something back.

After all I've been through, I can proudly say, no one can break me. Except maybe, with kindness and love. In detention, I reflected on the mistakes I've made, and it gave me a better perspective on life, and what my family and friends mean to me.

I'm not sure what the future brings. My visa application has been pending since March. My greatest challenge is to cope with the uncertainty. With this process, you don't know what's going to happen in the next hour. That kills people inside. But I'm very strong.

Baptcare is very reassuring for people in limbo. I think this organisation is wonderful. Everyone at Sanctuary has the intention in their hearts to help others. To be honest, I'd lost faith in this type of thing, but I'm getting faith in humanity again since living here.

Working with people experiencing homelessness

At Baptcare, we believe that secure, appropriate, and affordable housing is a basic human right. Housing provides the foundational stability for individuals and families to experience wellbeing and create a full, independent life for themselves.

It's difficult to invest in yourself, your future, and your community, when you are focused on just surviving. Having a home, and all that entails beyond the mere bricks and mortar, not only benefits the individual but is also key to building strong, sustainable, and integrated communities.

Through Baptcare's subsidiary, Baptcare Affordable Housing (BAH), we are committed to addressing the shortage of affordable housing in the community, by providing quality homes across Victoria and Tasmania. We currently manage 100 apartments, units and houses, that are home to 170 residents, with an average occupancy rate of 98.7% for the past year.

This year we purchased, and welcomed new renters into, eight one-bedroom affordable housing units at Ringwood. We also became a participating agency on the Victorian Housing Register (VHR), which is a Social Housing waiting list, covering both the public and community housing networks.

We continued to develop our proposal for our Albion site, to build 20 new social housing units, and have received our planning permit. We commissioned a report into local need and we plan to construct our units in accordance with the report's findings.



Housing affordability...

HOUSING AFFORDABILITY AND RENTAL STRESS

With less and less Australians able to afford to own their own home, the rental market is crowded, pushing rents up and reducing the availability of affordable properties.

The mean weekly housing cost for private renters in Australia is \$399, with nearly half of renters reporting they find it difficult to get by on their current income.

Low-income earners are feeling the pinch in greater numbers. In capital cities, 47.8% of them report experiencing rental stress.



% of Melbourne rentals affordable for people on Centrelink



% of total renters in financial stress



Annual increase in Tasmanian median rent as at 31 March 2020



10-year increase of low-income earners in rental stress

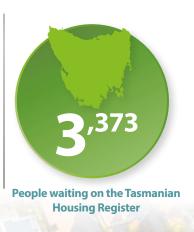
HOMELESSNESS ON THE RISE

Public Housing cannot meet the demand of people seeking affordable housing to avoid homelessness.

As at 30 June 2020, the average waiting period, even for people who've received priority, is 12 months. For others, the wait can be much longer.



People waiting on the Victorian Housing Register



Data sources:

Dept of Health and Human Services Victoria (dhhs.vic.gov.au) Tenants' Union of Tasmania (tutas.org.au) Consumers Affairs Victoria 2020 (www.consumer.vic.gov.au) Australian Bureau of Statistics (www.abs.gov.au) Housing Vic (www.housing.vic.gov.au) Dept of Health Tasmania (www.health.tas.gov.au)



"I had a mini-stroke five years ago and had to give up bus driving. I couldn't even drive a car for six months. I wasn't in a good space. When your income goes from \$800-\$1200 a week to less than \$700 a fortnight – it's hard."

* Image and name changed to protect privacy

Harry and Sue have embraced life as Affordable Housing residents at Baptcare's Coasthaven Community in Norlane.

What was your situation before coming to Baptcare Affordable Housing?

Harry: My wife, Sue, and I were living in Corio. I was a bus driver for 20 years, in Melbourne and then in Corio. You meet a lot of interesting people. Even now, when I visit the Corio Shopping Centre, people call out, "Hi Harry!"

But I had a mini-stroke five years ago and had to give up bus driving. I couldn't even drive a car for six months. I wasn't in a good space. When your income goes from \$800-\$1200 a week to less than \$700 a fortnight – it's hard.

How were you introduced to Baptcare Affordable Housing?

Harry: Sue saw an ad for Baptcare Affordable Housing in the local newspaper. I rang up and answered some questions and was told we qualified for a two-bedroom unit. So we filled out the paperwork. When they phoned me to say a unit was available and we could move in within a few days, I went home and told Sue. She gave me a big hug and kiss and said, "Yes, we'll take it, we'll take it! Ring them back straightaway!"

How has living in Baptcare Affordable Housing impacted your life?

Harry: I still have to deal with my health issues but the stress levels are not there because of the drop in rent. The financial burden lifted once we moved in here. It makes things a lot easier for us: I pay the bills and Sue pays for the food.

Not all the units in the community were finished when we moved in but there were quite a few residents here already. Within a year or so, all the units' residents were great friends and we decided to have a street party one Christmas, where everybody pitched in with food.

Some people have put in plants or flowers out the front. Sue's done the same with our place; she's the gardener. The neighbourhood is really great; everybody talks to everybody. And if there are any issues, Helen (*Helen Thompson-Boyd, Baptcare Housing Officer*) is the best. If something needs to be done, she gets it done.

As a Baptcare Affordable Housing resident, Harry has sought ways to continue his community and social connections.

Harry: There's plenty of room for our family to visit. We have Sunday dinner here each week and they all come around. It's really nice. I volunteer at Coasthaven (*Baptcare's Residential Aged Care facility*) at the end of the street. Prior to the COVID lockdown, I was there three days a week, playing cards with the residents, joining in on the exercise classes, and running weekly bingo sessions – for chocolates; no money involved! I see residents out for their walks sometimes, and they say, "When are you coming back?" I say, "As soon as I'm allowed to!"

Our research

Across Baptcare, we are building evidence-informed services through research. We aim to provide programs and services that support the people we come alongside to achieve their goals for a full life.

While we love hearing residents, customers and clients say what they like about Baptcare, anecdotal stories must be supported by demonstrable evidence, otherwise funding may stop, and great programs fold.

Baptcare is committed to research because it enables us to make evidence-based, pragmatic decisions about how we deliver high quality, customer-led, responsive care, that improves the experience and lives of residents, customers and clients, and their carers and families.

In 2019-20, in addition to our ongoing research agreement with the University of Melbourne, we partnered with Monash University, RMIT University, and Whitley College, to undertake collaborative research, aimed at accelerating our research impact, and accessing world-class expertise, skills, resources and networks to drive innovation and best practices within Baptcare.

Key research initiatives and outcomes during 2019-20 include:

- Funding a Postdoctoral Fellow at Monash University to evaluate Baptcare's MyCare (now known as Foundations) and Choices Mental Health programs
- Announcing funding for the inaugural Baptcare Mary Pope PhD Scholarship in Spiritual Care and Ageing at Whitley College, the Baptist College of Victoria
- Collaborating with the University of Melbourne and Berry Street, funded by a Department of Social Services grant, to continue an independent evaluation of the +SHIFT program
- Collaborating with Monash University and three hospital networks, funded by the federal government's Medical Research Future Fund, to co-design integration and implementation of Baptcare's MyCare Ageing a volunteer-based, patient-centred program for patients with dementia and/or delirium
- Completing a scoping study, with Monash University, into the transition out-of-home care process in Tasmania, to address the risk factors associated with young people in care and improve wellbeing when they transition into the community
- Continuing Quality of Life outcomes measurement to better inform our work
 across our Housing, Mental Health, Disability, Asylum Seeker, Residential Aged Care,
 In Home Care, and Family and Community services.

Partnership with Monash University AN EVALUATION OF BAPTCARE'S MYCARE AND CHOICES MENTAL HEALTH PROGRAMS

Implementing evidence-based programs is considered 'best practice' for community mental health because they are well-implemented, meet the needs of clients and the broader community, and are more likely to result in significant positive client outcomes, having been trialled, tested, and proven to be effective.

Baptcare partnered with the Monash Centre for Health Research and Implementation, Monash University, to build the evidence base of our MyCare and Choices programs. This represents our commitment to deliver evidence-informed programs, and to set them apart from others across the community health sector in Australia.

Since 2018, a team of researchers has been embedded in Baptcare, developing a strong and collaborative relationship with the MyCare and Choices teams. This has enabled stakeholder engagement across all levels, including clients, staff, and senior executives involved in the programs.

Preliminary qualitative findings from clients and staff have uncovered key strengths of MyCare and Choices and the factors that underpin success, e.g. the combination of housing and community support provided by Choices, and the holistic support provided by MyCare, differentiate these programs from other services.

Preliminary quantitative data suggests that engagement in such programs can bring significant and sustained improvements in key mental health outcomes and psychosocial functioning for clients. Throughout the programs, clients experienced decreased severity of clinical symptoms, problematic and risk-taking behaviours, and functional impairment associated with psychosis, depressive, or anxiety symptoms.

Data also suggests that clients participating in MyCare and Choices achieve a significantly greater capacity to manage daily life (e.g. work, study, maintaining a healthy lifestyle and personal hygiene etc.). They also displayed improvements in social functioning, including reporting reduced feelings of social isolation and withdrawal, and improved connections and relationships with others, as well as boosted self-esteem and self-confidence. A notable outcome is that clients secure more stable housing following engagement with MyCare and Choices, improving their overall living conditions and prospects for the future.



MONASH University

Baptcare

Our people

Baptcare is committed to nurturing a respectful, inclusive workplace. We value the diverse backgrounds, skills and expertise, experience and focus of our staff and volunteers. This diversity reflects our community and those we work alongside. Our mission has been always, and continues to be, one of inclusivity.

Through the year we gather nominations for recognition of staff and volunteers who embody Baptcare's WE CARE values. A Safety Star category has also been added to reflect our commitment to promote a safer workplace and the organisation's safety initiatives. In 2019-20, 13 individuals and seven teams were nominated by their peers for recognition.

We want to take this opportunity to acknowledge each of our more than 3,300 staff who live our values every day. Their commitment to, and care for, our residents, customers and clients, and each other, is reflected in the stories we have shared in this annual report. We hope that these staff profiles provide a glimpse of our mission and values in action across the organisation.



Nicole Watson Care Coordinator Mindset Foundations

AVERAGE DAY...

An average day can be unpredictable. I provide outreach support to those with complex mental health needs, which can entail working from the office, in the community, or in the homes of those we work with, down back country roads and secluded small towns along the north west coast of Tasmania.

WHAT I ENJOY MOST

The most enjoyable part of my role as Care Coordinator is having the privileged opportunity to be welcomed into the lives of the people we work with. There is no better feeling than being able to share a participant's journey and support them in reaching their own individual successes.



Penny Davis Spiritual Care Coordinator In Home Care

AVERAGE DAY...

Visiting customers in their homes, listening to them and supporting their spiritual and emotional journey. I run a group where we do spiritual practices, make craft and share a cuppa. I also provide emotional and spiritual care to our staff, formally and informally, through regular check-ins and meditation and reflection sessions.

WHAT I ENJOY MOST

Working collaboratively with our In Home Care team to make a difference in the lives of some of our most vulnerable customers. Being present with people as they navigate grief and loss is a sacred space that I feel honoured to be trusted with.



Naimo Omar Personal Care Attendant Residential Aged Care

AVERAGE DAY...

I assist residents with showering, dressing, eating, and toileting, including the use of safe transferring equipment.

I also encourage our residents to participate in social and recreational activities.

WHAT I ENJOY MOST

It's an honour, and is rewarding, to know every day I can make a difference. Knowing everyone shares the same vision and dedication to the mission, and seeing my residents looking good, feeling great, and just empowering them to stay positive and to enjoy everyday life.

Diversity and inclusion

Our mission, vision and values are also brought to life through the Diversity & Inclusion (D&I) Working Group. This is an organic group of 25-30 staff members from across Baptcare, who are passionate about recognising, embracing, and celebrating diversity and inclusive practices with those we work alongside, our communities, and our colleagues.

Baptcare is an inclusive service provider who welcomes diversity and promotes cultural safety. We respect people of different cultures (including Aboriginal and Torres Strait Islander peoples), genders and sexual identities, beliefs, ages, and abilities.

While aiming to be inclusive of all, Baptcare's Diversity Strategy focuses on five pillars of diversity and inclusion: age, ability (including mental health), culture, LGBTIQ+, and religious freedom. Baptcare is also currently engaged in five inclusion projects supporting these key areas of diversity and inclusion. Focusing on five broad areas of diversity allows us to dedicate expertise and resources in alignment with our organisational mission, vision, and values, and reflect the needs of our communities.



Tina Crowe-Mai * Local Area Coordinator NDIS Baptcare

AVERAGE DAY...

My job is to guide people to understand and use their National Disability Insurance Scheme (NDIS) plan. I talk to many people every day regarding any problems or questions they may have about the plan or community services, to assist them to use their plan in the way they think is best for their lives.

WHAT I ENJOY MOST

It is amazing to work with staff and people who share their lives and experiences so willingly and make you feel welcome in a heartbeat. Working in my role at Baptcare I feel very fortunate to be a part of something big and life-changing, as I see the positive changes that the NDIS makes happen for so many lives.



Rachel Ho * Occupational Therapist In Home Care

AVERAGE DAY...

Working with older people receiving services through Home Care Packages (HCP), Commonwealth Home Support Programme (CHSP), and Short-term Restorative Care (STRC). Supporting them to achieve reablement goals, recommending home modifications, and prescribing equipment to ensure their safety at home or out in the community.

WHAT I ENJOY MOST

I enjoy the holistic approach and seeing the improvements in my customers' quality of life, like working with customers throughout their 8-week journey in STRC and witnessing the impact of practising safe transfers and using equipment safely to increase their independence. It's very rewarding to help them achieve their goals.



Heather Cupples * Lifestyle Coordinator Residential Aged Care

AVERAGE DAY...

My team and I work with staff, volunteers, residents and families at Abbey Gardens Community to bring activities and events to life, e.g. puppets listening to residents' stories, and twice-weekly bingo. We involve residents in planning and running big events, such as a quilt show, Oaks Day, Christmas concerts, multicultural days.

WHAT I ENJOY MOST

I so love the joy that lights up a resident's face, the satisfaction that a volunteer gets from sharing their life, holding hands, dancing, singing, telling jokes. We are the 'smile people' when things are tough; we keep the show rolling. We make a home, with every family member cherished and, of course, busy with living!

Honour roll of long-serving staff members



Dianne's Story

Dianne commenced working as a Care Assistant at Baptcare Strathalan Community in July 1975. After a couple of breaks, when she left to have children, she returned in 1980 and stayed for 40 more years.



Dianne: The length of time I stayed at Strathalan shows how much I enjoyed working there. I developed friendships with other staff members that are still going strong today. The care at Strathalan is excellent; I couldn't fault it. Knowing that my residents were safe and happy was the main thing for me.

From the beginning, it was the residents that drew me in. I enjoyed talking to them about their lives and their history. Over the years I became very good friends with a lot of the residents and their relatives. I've got letters from families saying thank you for the way I looked after their parents. I'd approach it like I was looking after my own mum.

Dianne established some festive traditions through the years and, although she recently retired, she remains involved as a valued member of the Strathalan community.

Dianne: Every Easter I'd buy an egg for each resident, and at Christmas I'd go shopping in my own time, to buy presents for residents, with money donated by the Friends of Strathalan. This year someone else will buy the presents but the Strathalan team have asked me to come back and give the gifts out on Christmas Day.

Volunteers

SHARING PASSION AND COMMITMENT

Volunteers have been a large part of Baptcare since our inception in 1945. Today, there are more than 1,500 volunteers registered with Baptcare. Our volunteers reflect the diversity of our community, our staff, and our residents, customers and clients. They come from all backgrounds and walks of life – retirees, students, part-time workers, stay-at-home parents, and skilled professionals. What they share is a passion for, and commitment to, supporting people in need.

The onset of COVID-19 reduced the number of active volunteers from over 1,100 to around 630 this year. Despite the limitations of COVID-19, our wonderful volunteers still managed to provide more than 60,000 hours of service, with almost 39,000 of those within our residential aged care communities.

Some of the activities our volunteers took part in this year include:

- Remote book club
- Phone calls, skype/face time/zoom calls
- Writing letters/emails/cards
- Footy tipping
- History presentations
- Musical performances

- PPE deliveries
- Meal deliveries
- Zoom English tutoring sessions
- Food drives to collect donated food
- Sanctuary foodbank



Fundraising and donors

Fundraising

Baptcare receives state and federal government payments and grants for the provision of aged care, home and community care, and family and children's services.

In addition to these services, Baptcare supports several vulnerable communities through its Home-Start and Sanctuary programs. This is made possible by the generous donations from, and partnerships with, the churches, companies, trusts, and foundations listed below. Additionally, magnanimous donations from individuals contributed greatly to our overall fundraising total – for example, nearly \$70,000 was donated by just 26 individuals.

In the last financial year, the generosity of our partners helped us raise over \$470,000 towards our work alongside those in need. We would like to acknowledge the following partners for their support throughout this financial year.

Donors list

Beverley Jackson Foundation	The TG & JM Matthews Foundation
Collier Charitable Fund	Estate of the late Trevor Norman Bradley
Marshall Fund and The Red Bowl Fund, Charitable Fund Accounts of Lord Mayor's Charitable Foundation	Aberfeldie Baptist Church
	Essendon Baptist Community Church
The Danks Trust	Ivanhoe Baptist Church
The Jack & Hedy Brent Foundation	Moonee Ponds Baptist Church
The Mercy Foundation	West Preston Baptist Church
The Ross Trust	Westgate Baptist Community Church
The William Angliss Charitable Fund	Friends of Westhaven Community
Mission Enterprises Blackburn Ltd	
Alfred Noel Curphey Bequest Trust	

Note: The 2020 Baptcare Golf Day was postponed due to COVID-19 restrictions.



Our Home-Start and Sanctuary programs care for families and individuals with needs not met by any government programs. With your help, we can make a difference to the lives of young families and people seeking asylum. To find out how you can help, visit:

baptcare.org.au/get-involved/donate

Financial statement

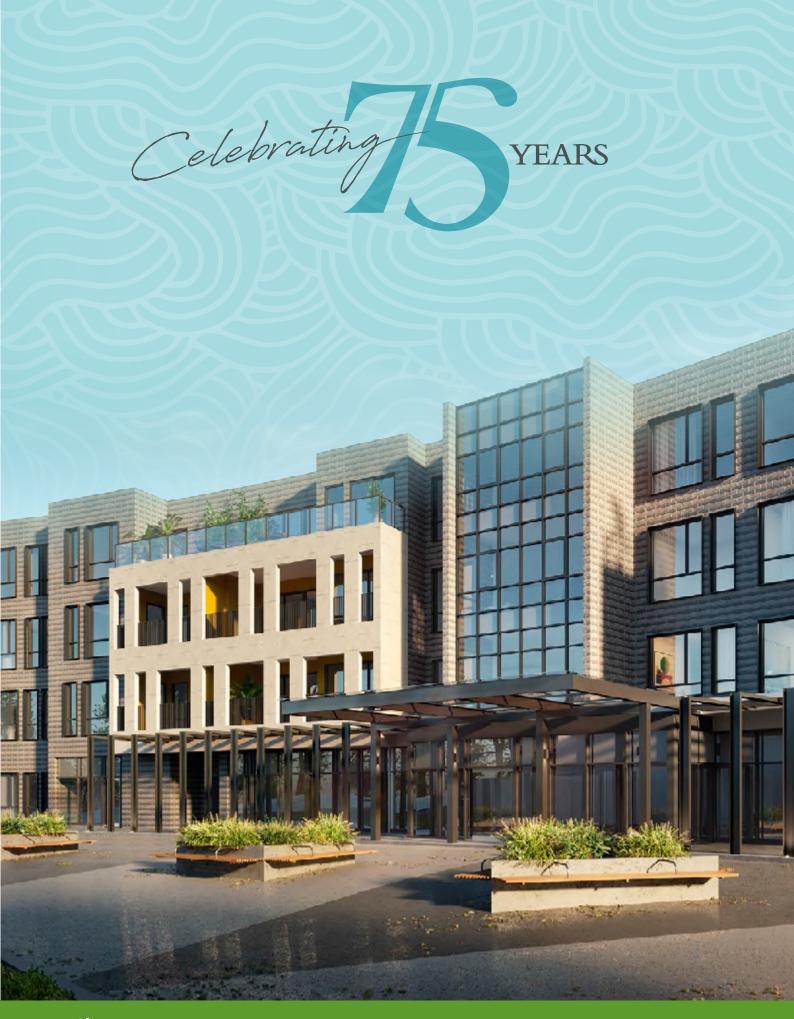
Baptcare is a not-for-profit, faith-based charitable organisation. In order to sustain its charitable activities, achieve the Board's five-year investment and development strategy, and continue to provide for the future replacement of operating assets, it is critical that Baptcare makes strong cash surpluses overall. Despite the impacts of COVID-19, Baptcare remains in a sound financial position, with strong cash flows, quality buildings, and a sustainable business model.

Operating revenue, excluding imputed RAD revenue, for the year was \$261 million, growing by 14.1%. A net surplus of \$0.7 million was generated and a strong cash position of \$19.2 m was also achieved. The fulfilment of our strategic objectives is expressed in the delivery of the principal services and programs below:

- Aged care Communities for the aged and people with disability
- Retirement Living Communities providing independent and assisted living units
- Providing Home Care services and Day Care Centres to the aged community
- Providing Nursing and Allied Health services
- Providing Family and Community Service programs, including foster care, counselling, preventative education, disability support and mental health services
- Providing Local Area Coordination, Information, Linkages and Capacity Building, and Early Childhood Early Intervention services in partnership with the NDIS
- Providing affordable housing solutions and asylum seeker accommodation and support services.



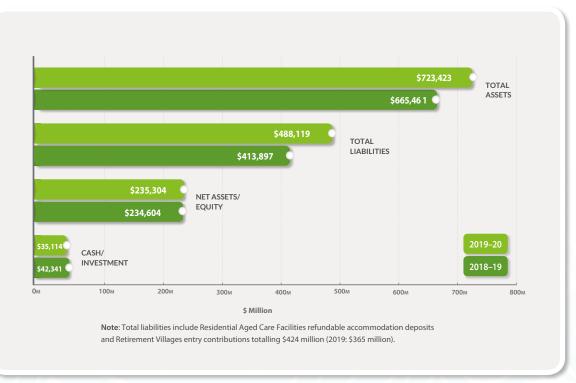
Above: Architectural render of The Orchards Retirement Living apartments



Above: Architectural render of Strathalan Retirement Living apartments

Financial data

Financial position



Total assets at the end of this financial year was \$723.4 M, an increase of \$57.9 M from the previous financial year. Our operating revenue increased by 14.1 percent from the previous financial year to \$277.8 M. The main source of revenue – \$202.8 M – was provided by government subsidies and contributions, an increase of \$25.31 M. Resident Client and Customer revenue also increased by just over \$10.0 M.

On 30 January 2020, the spread of novel coronavirus (COVID-19) was declared a Public Health Emergency of International Concern by the World Health Organisation (WHO). Subsequently, on 11 March 2020, WHO characterised COVID-19 as a global pandemic.

Baptcare will continue to monitor the impact of COVID-19 but at the date of this report it is too early to determine the full impact this virus may have on the organisation. Victoria, subsequent to year end, continues to be significantly impacted with recent Stage 4 lockdown restrictions experienced. Whilst provision of services is continuing, ongoing restrictions may impact occupancy and capital projects as residents are personally impacted financially.

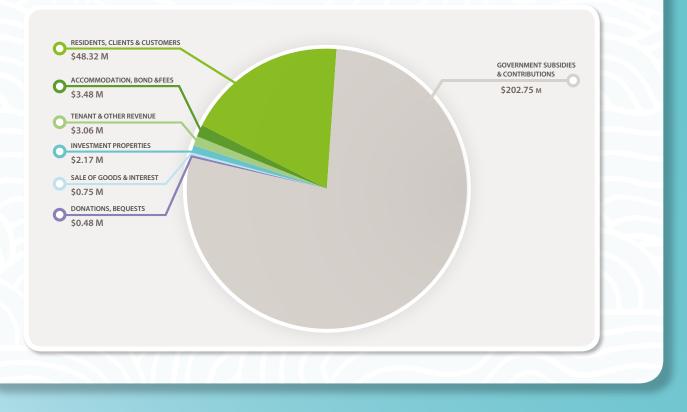
No other matter or circumstance has arisen since 30 June 2020 that has significantly affected, or may significantly affect Baptcare's operations, the results of those operations, or Baptcare's state of affairs in future financial years.

... for financial year 2019-20

Financial performance



Source of Revenue



Acknowledgements & Appreciation

In a year like no other, we would like to acknowledge the extraordinary effort, courage and commitment of our staff and volunteers. We thank our many residents, customers and clients for the privilege of walking alongside them.

We have appreciated the generosity of our supporters and donors. And special thanks to the Baptist Union of Victoria and affiliated churches throughout Victoria, South Australia and Tasmania for their partnership this year.





Thank you!

Annual Report Year in Review











baptcare.org.au