Hospice
South Coast
Affirming life... every day in every way
Impilo ibalulekile ngaso sonke isikhathi
NPO Reg. No. 002-411

Annual Review 2016
2015/2016 has been a productive year where, after a turbulent two years of extreme change we managed to settle into a dynamic up-to-date Hospice Model that meets today’s needs and is based on a firm foundation of maintaining good practice in quality palliative patient care. This has been done whilst transforming to fit within a well-controlled financial budget.

To achieve this requires a highly motivated and dedicated team who have had total commitment to our mission, as well as a hardworking and creative support team that constantly relooks at strategy and innovation to achieve the goals that have been set. Each person on the Hospice team has gone beyond the call of duty and they have achieved remarkable results with limited resources and reduced human capacity. With the cut back in staff numbers, many have taken up extra duties to fulfil the mission.

The renovation and re-opening of Kingfisher House the In-Patient Unit has stretched our capacity even further, whereby staff, volunteers and community have come together to ensure its sustainability.

Not only have they achieved what was set out in our strategic plan but in most cases we have expanded on our existing programmes.

What a remarkable team and I cannot even begin to express my awe in each individual who has truly made it happen! I am constantly humbled by the example that is set by these ordinary people who achieve extraordinary things every day. When I ask myself, what has motivated the entire team it can be answered very simply:

• The Patient and their loved ones. This cannot be said any other way. We each have a love for the patient and our compassion and empathy extends to their loved ones. For, is this not what we are here to do? To stand in the gap and be prepared to serve those in need. This applies to both the clinical department as well as the support team. Each one bringing their uniqueness and gifts in the way that we serve. One of my roles is to ensure that the support team, which includes the and clinical team are on the same page so to speak and that we each rely on each other to care for the patients and their families. We cannot succeed with an “us and them attitude”. Mutual understanding and respect allows us to achieve the unachievable.

• Being placed in a Community that Cares – our community has a heart for Hospice, and we see it in all the responses we receive to our various fund raising activities and initiatives. This encourages us to achieve what is required as well as strive for quality service at all levels. We strive to be the shining light in our community, offering comfort and compassion to the vulnerable at a time when they need it the most.

• Corporate and global grant makers: Although this area has become limited and is highly competitive there are constant grantees that see the value of the work that we do. These grants allow us the resources to grow and develop as a Hospice thereby serving our community in many ways and being an example to others. This also gives us the capacity to train and educate others to serve their communities.

It would be difficult to capture an entire 12 months within these pages, each programme has been highlighted in our annual review. Further information and videos can be accessed on www.southcoasthospice.co.za.

In closing, I would like to share this with you: Each morning as we gather together to start the day, we stand outside the inpatient unit. A candle is lit for all those who suffer, their families and all those that care for the ill. We sing together, a song of praise and then we bow our heads in humble prayer, each one different, and each one opening their hearts to a need or a longing.

For you see, we have learnt from Luke, the glorious physician
“For nothing will be impossible with God.” Luke 1:37
MISSION STATEMENT
South Coast Hospice Association is a non-profit organisation committed to serving the community of the Ugu Health District in KwaZulu-Natal.

We provide:
- Palliative care to patients with Cancer, HIV/AIDS and Motor –Neuron disease
- Care and support to TB/MDR-TB patients and families
- Psychosocial and bereavement support to families and children
- Training for our staff and volunteers, other health carers and the community

Care is given in the patient’s own home, backed up by our Palliative Care Support Centre and local health facilities.
South Coast Hospice - A Short Profile

Founded in 1983, South Coast Hospice Association Serves the community of the UGU Health District in KwaZulu-Natal. Providing quality Palliative Care for people Living with life threatening illnesses. (Cancer, HIV/Aids, Motor Neuron Disease and TB/MDR-TB).

We serve Patients on our programmes as well as their family members. In our last financial year, April 2015/March 2016, (5599 patients benefited from the services that we provide. Those 5599 received 24043 visits and 87383 interventions.)

The UGU district is 5866 km², and in the last survey, (2011), there were approximately 722 484 people living here – the area is made up of rural, urban, peri-urban, townships and farms. The unemployment levels are high. The majority of the population live in impoverished rural areas.

A challenge we face with our patients throughout all social and economic levels is that family units are fragmented and leave those suffering with illnesses without support and family care. This leaves many people, particularly the elderly, lonely and hopeless in their time of need. Children and youth face many adversities and through our psychosocial interventions, we strive to make a difference through our many interventions. Through our interdisciplinary team, South Coast Hospice, walks the journey alongside the patients and their families. To achieve our goals it is important that we acknowledge our strong partnerships within the community. We are extremely grateful to our founder, Kath Defilippi and her team for the solid foundation on which South Coast Hospice is built. We have deep appreciation for Dr Hilton Horsley who continues to serve as our Medical Director and Dr Andre Nell, our Medical Officer.

The perception is that hospice cares only for the dying, however, South Coast Hospice plays an integral role in the health, welfare and education of all the people they serve within the UGU district.

“Dear Di and the South Coast Hospice Team, Thank you for the link to SCH’s 2016 video, which I watched with a slight lump to the throat. You say, “we will always be here, no matter what form we take”. All I can say in response is: Amen! Phambili South Coast Hospice, Phambili!”

Blessings to one and all. Kind regards Graeme Wilkinson – Social Investment Specialist - Tshikululu
Programmes

Hospice at Home Services

Quality care is provided in a familiar environment, the patient's own home. We care for patients and provide pain management and. Psychosocial services are also provided, this includes Counseling and education to patient and care givers. Social grants can be accessed as well as food parcels when required. Dr Andre Nell, our medical officer, oversees all patient care through our interdisciplinary team. First assessments take place in the home which provides the initial statistics for Monitoring and Evaluation.

Expanded to include:
Treatment and care of patients with TB and Multi-Drug resistant TB

Due to insufficient bed space and overwhelming numbers at Murchison Hospital TB facility patients are discharged back to their homes. We partner with Murchison to treat and care for people living with Multi-drug resistant TB. These patients require a daily injection and intense support and encouragement to ensure adherence to treatment. The side-effects can be debilitating and the hospice team monitors and reports back to Murchison hospital on a weekly basis. This project is funded by HPCA’s, CASIPO project.
Inpatient Unit – Kingfisher House

Comprehensive end of life care, pain and symptom management and respite are provided in our.

The Rainbow room is a specialized child friendly room for the treatment care and support of both child and caregiver. Pain Control and counseling to families. When children have to be transferred from their home to hospital facilities in Durban, The Rainbow Room, may be used as an overnight stay

EXPANDED TO INCLUDE:
§ Practical training for the Home Based Care students
§ Day Clinic Facility – For medical interventions and general health checks

The Day Clinic Facilities provides the following services
• Consultations with the Medical officer – Dr Andre Nell
• Dispensing of chronic meds to patients that have been prescribed by the Medical Officer
• Medical intervention such as drips, bloods and wound care
• A weekly cancer screening service

Kingfisher House has a ‘quiet’ room where counseling for patients and their families are given and spiritual support is provided. Our social workers also meet patients in the ‘quiet’ room for psychosocial needs e.g. grants.
Mobile Clinic

Supporting Primary Healthcare Clinics – partnering with the Department of Health. Our mobile clinic supports and stands beside 4 overburdened primary healthcare clinics. We focus on providing quality, compassionate and efficient services to people living with HIV/AIDS. Efficient service brings dignity to people who can receive their treatment and return to their work places with less delay/salary losses.

The statistics of sexually transmitted infections are very high amongst vulnerable people, in particular rural women who are HIV positive. The link between cervical cancer in HIV positive women has been established. Through our approach we encourage many women to have regular pap smears done.

EXPANDED TO INCLUDE:
Sexual and reproductive health
High population outreach

Our mobile clinic working with the Department of Health, go to Further Education and Training colleges to counsel, screen and test for HIV. We also support special outreaches where the disabled are able to receive sexual and reproductive health education and interventions. This section of the population is extremely vulnerable and very few services are provided.
Orphans and Vulnerable Children

Specialised Memory Box projects are conducted 3 times a year in the school holidays, for children who are affected or infected by HIV/AIDS. These children have suffered many losses and this project focuses on building resilience in them. The children live in impoverished communities where drug, alcohol, sexual and physical abuse is prevalent.

EXPANDED TO INCLUDE:
Youth Projects

At our recent Memory Box Project we recognised together with the school principle and her team that further interventions are required and it is with this in mind that we have expanded the Memory Box Project to the formation of youth groups. (This is a pilot project, in collaboration with the school, the community and social workers. A model will be developed as the project progresses which will be shared with other Hospices, NGO’s and the Department of Social Development).
Support Groups Adults and Children

• Occupational therapy for cancer support groups - Alternative therapies such as hand and feet care, hair and grooming etc.
• Empowerment
• Skills development
• Education for patients and their families.
• Group counseling
• Art therapy
• Story-telling to address discrimination, shame and stigma
• Encouraging community members to help and support each other
Psychosocial and Bereavement Services

Counselling services are given to patients and families to help them cope with illness and death. Bereavement services is provided to the family.

Our Social workers assist with the application of social grants and also help with legal aid referrals.

Counseling is provided to maintain the family structure. When this is not possible, vulnerable children are referred to places of safety.

EXPANDED TO INCLUDE:
Trauma Counselling

Many people turn to us in times of trauma e.g. hi-jacking, armed robbery, abuse, murder of family members etc.
Training and Education

South Coast Hospice is HWSETA accredited. It takes team work to offer good quality training, this team includes:

Dirk Van Reenen – Training Manager
Sr. Dina Thorncroft – Clinical Manager and Sister Tutor
Diane Christensen - Psychological Counselor
Karin Warman – BA (Health Sciences and Social services), Counseling Psychology
Bapiwe Duma – Social Auxiliary Worker
Colleen Baxter – Care Giver
Tarryn Smith – BA Social Worker

The following courses are offered:
• Community Health Care
• I ACT (Integrated access to care and treatment
• Bereavement
• HIV/AIDS counseling
• Distance Palliative Care
• Introduction to Palliative Care

Ongoing skills development training for staff and volunteers.

EXPANDED TO INCLUDE:
• Workshops and Educational Presentations
• HCT counseling and testing protocols
• Youth development
Behind the scenes - Support services

At South Coast Hospice, the high quality of care and compassion we offer patients and families is supported on a foundation of activities that take place ‘behind the scenes’

Here at the Hospice we believe first impressions are very important and that’s why we are so grateful to The Savage Family Trust for funding the renovation of the entrance to Hospice and the Kingfisher Inpatient unit. This work was supervised by Hospice friend Ria Hackland and we can all be so proud of what was achieved. The Southern Natal Nomads stepped in and painted the exterior walls of the buildings on 29 Connor Street. We now have a refurbished Day Lounge which is used for our Day Care Support Group as well as an inviting place for staff, patients, their families and the community to come to. Our Thursday mornings Kingfisher Tea Club has been most successful and long may it continue.

"I love the tree of remembrance…. Spending time there with my family is really important to me for it was here that my husband was shown love and compassion"

We pride ourselves on keeping the Hospice clean, comfortable and safe for everyone. Whether you are visiting the Hospice as a patient, or coming in to spend time with a relative or friend, you can always expect the highest standards from the Support Services Team. Currently there are nine Hospice Support Service members working silently in the background to keep the flow of information, documentation, maintenance, transport, accounting and human resources moving so the direct care staff can do what they do best “Do more” for our patients each and every day. This includes the essential Monitoring and Evaluation Statistics collection office, ensuring that quality data is captured and recorded. This ensures that funders have up-to-date information regarding the interventions that take place. The not so silent seven Hospice Superheroes form the Grant Writing and Fundraising Teams which includes our three retail thrift stores link Hospice to our Community, National and International supporters and grant makers. The Life Blood of our Hospice sustainability. 17 remarkable people working to ensure that 22 dedicated individuals can care in the best possible way for those whom we serve.

Front Row: Alf Gore-Finance Manager, Darryl King-Fundraising assistant, Di Van Dyk-CEO, BT King-Fundraiser, Harry Manci - Maintenance
2nd Row: Olga Du Plessis-Bookkeeper, Harda De Kok-Retail shop, Shamila Clothier - Operations Manager, Nokuhkanya Ngobese - Domestic
Back Row: Tracy Visage – Finance Assistant, Ronel Fitchet – Grant Administrator
Goodwill Gesture

After you’ve taken care of loved ones, leaving a gift (or ‘Legacy’) in your Will to South Coast Hospice is a great way to invest in your community and help guarantee the future of Hospice care for local people.

None of us know what the future holds and it’s easy to put off making a Will, or updating an existing one. People are often under the misconception that should they die, their loved ones will automatically receive everything. Unfortunately this is not necessarily the case. Taking the time to have a valid and up-to-date will is the only way to safeguard your family’s future and ensure that your assets and estate go to the people and causes closest to your heart. As you plan for the future, we hope that you will consider making a Good Will gesture and leave a gift to South Coast Hospice in your Will. Over the years gifts left to South Coast Hospice in people’s Wills have contributed to our sustainability in the most meaningful way and is one of our most important streams of income.

If you would like to discuss making a Good Will gesture and leaving a gift to South Coast Hospice in your Will, or inform us that you have already done so, please contact our CEO or Finance Department. 039-6823031 or diane@schospice.co.za.

The Ann Hobbs Memorial Fund has been created specifically for the ongoing sustainability of the inpatient unit, Kingfisher House

ESTATE LATE JP CHENEY
ESTATE LATE WIGGETT PS
ESTATE LATE E. RENWICK
ESTATE LATE D WOOD

Support
South Coast Hospice
By making a
good will
gesture

Annual Review 2016
## Statistics 2015-2016

<table>
<thead>
<tr>
<th>SERVICES RENDERED</th>
<th>Male</th>
<th>Female</th>
<th>Asian</th>
<th>Black</th>
<th>Coloured</th>
<th>White</th>
<th>TOTAL - PATIENTS &amp; CLIENTS</th>
<th>No. Visits</th>
<th>No. Interventions</th>
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<tr>
<td><strong>BEREAVEMENT - SOCIAL WORKERS</strong></td>
<td>30</td>
<td>80</td>
<td>0</td>
<td>91</td>
<td>18</td>
<td>1</td>
<td>110</td>
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<td>524</td>
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<td><strong>COUNSELLING - SOCIAL WORKERS</strong></td>
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<td>2</td>
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<td>23</td>
<td>6</td>
<td>285</td>
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<tr>
<td><strong>BEREAVEMENT - DIANE CHRISTENSEN</strong></td>
<td>32</td>
<td>90</td>
<td>10</td>
<td>3</td>
<td>0</td>
<td>109</td>
<td>122</td>
<td>192</td>
<td>196</td>
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<tr>
<td><strong>COUNSELLING - DIANE CHRISTENSEN</strong></td>
<td>98</td>
<td>186</td>
<td>39</td>
<td>10</td>
<td>4</td>
<td>231</td>
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<td><strong>SOCIAL WORKERS - GRANTS DONE</strong></td>
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<td>43</td>
<td>0</td>
<td>60</td>
<td>0</td>
<td>3</td>
<td>63</td>
<td>122</td>
<td>123</td>
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<td><strong>MOBILE CLINIC</strong></td>
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<td>2733</td>
<td>17</td>
<td>3528</td>
<td>9</td>
<td>13</td>
<td>3567</td>
<td>4567</td>
<td>30752</td>
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<td><strong>MEMORY BOX CHILDREN - WORKSHOP</strong></td>
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<td>42</td>
<td>0</td>
<td>58</td>
<td>13</td>
<td>0</td>
<td>71</td>
<td>377</td>
<td>3873</td>
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<td><strong>ICHC TEAM - &amp; MDR TEAM - PATIENTS VISITED</strong></td>
<td>39</td>
<td>41</td>
<td>0</td>
<td>80</td>
<td>0</td>
<td>0</td>
<td>80</td>
<td>1523</td>
<td>11454</td>
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<tr>
<td><strong>URBAN TEAM - PATIENTS VISITED</strong></td>
<td>55</td>
<td>54</td>
<td>15</td>
<td>1</td>
<td>1</td>
<td>92</td>
<td>109</td>
<td>886</td>
<td>4327</td>
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<tr>
<td><strong>INFECTED CHILDREN VISITED</strong></td>
<td>9</td>
<td>9</td>
<td>0</td>
<td>18</td>
<td>0</td>
<td>0</td>
<td>18</td>
<td>108</td>
<td>568</td>
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<tr>
<td><strong>AFFECTED CHILDREN VISITED</strong></td>
<td>6</td>
<td>11</td>
<td>0</td>
<td>15</td>
<td>2</td>
<td>0</td>
<td>17</td>
<td>51</td>
<td>147</td>
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<tr>
<td><strong>INPATIENT UNIT</strong></td>
<td>33</td>
<td>31</td>
<td>3</td>
<td>17</td>
<td>0</td>
<td>44</td>
<td>64</td>
<td>12145</td>
<td>26312</td>
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<td><strong>HOSPICE CLINIC</strong></td>
<td>67</td>
<td>109</td>
<td>7</td>
<td>98</td>
<td>0</td>
<td>71</td>
<td>176</td>
<td>518</td>
<td>1647</td>
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<td><strong>HOUSEHOLD MEMBERS VISITED</strong></td>
<td>151</td>
<td>414</td>
<td>52</td>
<td>279</td>
<td>24</td>
<td>210</td>
<td>565</td>
<td>1495</td>
<td>3786</td>
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<tr>
<td><strong>DAY CARE LADIES</strong></td>
<td>0</td>
<td>7</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>5</td>
<td>7</td>
<td>114</td>
<td>456</td>
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<tr>
<td><strong>SUPPORT GROUPS</strong></td>
<td>13</td>
<td>48</td>
<td>0</td>
<td>59</td>
<td>2</td>
<td>0</td>
<td>61</td>
<td>197</td>
<td>560</td>
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<tr>
<td><strong>PAP SMEARS DONE</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td><strong>FOOD PARCELS DISTRIBUTED</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>205</td>
<td></td>
</tr>
<tr>
<td><strong>GRAND TOTAL</strong></td>
<td>1496</td>
<td>4103</td>
<td>147</td>
<td>4571</td>
<td>96</td>
<td>785</td>
<td>5599</td>
<td>24043</td>
<td>87383</td>
</tr>
</tbody>
</table>

### TRAINING RECEIVED BY COMMUNITY MEMBERS
- **36** | **149** | **12** | **144** | **7** | **22** | **185** | Total courses - 19

### TRAINING RECEIVED BY STAFF MEMBERS
- **7** | **30** | **1** | **15** | **1** | **20** | **37** | Total Training Sessions – 22

33 Years of Care & Support

Annual Review 2016
It is pleasing to report that, following the restructuring and down-sizing towards the end of last year, South Coast Hospice and its team have performed admirably in all aspects during the year under review. Particularly pleasing was the reopening of an upgraded inpatient unit which is fully functional and incorporates doctor consulting facilities. Upgrading was financed through donor support and extended to cover a revamped day care lounge, entrance, the downstairs garage area and painting of buildings.

Despite a restrained economy and changing donor focus in both corporate and public social spending, Hospice was blessed to receive a further R2 million tranche of a bequest and R1.5 million from a major sponsor who has discontinued further training sponsorships. Recognising the need to ensure operating continuity we continue to actively pursue all areas of potential donor support, in-house fundraising and cost reduction. Our sincere thanks go to Di Van Dyk and her team of staff and volunteers, for their commitment and dedication in ensuring a successful outcome for the year. We remain aware of the need for corporate governance and human capital development, including succession planning.

To my fellow board members, thank you for your valued contribution this past year, each of you play an important part in the great work Hospice does within the community. Special thanks to Richard Savage, Hilton Horsley and Rob Nichols for the pivotal roles they play in giving generously of their time, talents and resources to Hospice. To all of you in the local community and business we thank you for your ongoing support of Hospice. Know that we both need and value it greatly.
This has been my fifth year as Honorary Treasurer of South Coast Hospice. It is an utmost privilege to be associated with and to serve an organisation as professional and caring as this. On a monthly basis, financial reports are prepared and presented to the Board. I have pleasure in presenting my report and the audited Annual Financial Statements for the year ended 31 March 2016. Subsequent to the meeting a copy of these statements will be available for perusal. The results for the year under review reflect an operating surplus of 2 532 847 (+1 538 539; +154.7%). The operating income for the year amounted to 6 805 053 (+548 734; +8.8%) while the operating expenses were 4 272 206 (-989 805; -18.8%). Other income received was in the form of interest and a profit on the sale of fixed assets to the amount of 178 348 (-21 716; -10.9%). Taking this income into account the net surplus for the 2015/2016 year was 2 711 195 (+1 516 823; +127.0%).

**INCOME**

Total income for the year was 6 983 401 (+527 018; +8.2%), is accounted for as follows:

<table>
<thead>
<tr>
<th>Division</th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>In-house fundraising committee</td>
<td>459 912</td>
<td>406 919</td>
</tr>
<tr>
<td>Donations</td>
<td>549 065</td>
<td>593 524</td>
</tr>
<tr>
<td>Charity shops</td>
<td>359 675</td>
<td>411 017</td>
</tr>
</tbody>
</table>

The income generated by these divisions contributed 19.6% (2015: 21.9%) of the total income. In a very difficult year, once again the Fundraising Committee has excelled, contributing significantly to the annual income.

Bequests

2133 321 2 041 403

Bequeathed funds are always highly appreciated and fluctuate annually. During the current financial year bequests were 91 918 (+4.5%) higher than in the previous year.

Training Division

214 467 192 563

Once more this year the training division has contributed substantially. The service that they provide not only contributes significantly financially but also provides a valuable service to the community. During the current financial year training fees were 21 904 (11.4%) higher than in the previous year.

Support Funding

4 973 153 4 565 931

During the current financial year support funding was 407 222 (8.9%) higher than in the previous year due to the increased First National Bank funding received.

**EXPENDITURE**

Expenditure amounted to 4 272 206, a decrease of 989 805 (18.8%) over the previous financial year. All expenditure is carefully analysed and assessed. Only essential services and goods are authorized. Heads of department are congratulated on their continued efforts to limit expenses in all areas, despite the difficult economic times. Departmentally, expenditure was incurred as follows:

<table>
<thead>
<tr>
<th>Department</th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration</td>
<td>14.9%</td>
<td>11.0%</td>
</tr>
<tr>
<td>In Patient Unit</td>
<td>27.0%</td>
<td>15.9%</td>
</tr>
<tr>
<td>Training</td>
<td>20.5%</td>
<td>13.6%</td>
</tr>
<tr>
<td>Home Based Care</td>
<td>37.6%</td>
<td>59.5%</td>
</tr>
</tbody>
</table>
The distribution reflects expenditure based on the number of staff per department. Costs have been well contained and ended the year 201 157 (4.9%) over budget. It is very rewarding to be involved with a professional organisation such as South Coast Hospice. Every person associated with South Coast Hospice, from Employees, to the Board Members, to the Volunteers, give so much of themselves. I would like to thank Mrs. Di van Dyk and Mr. Alf Gore and Ms. Shamila Clothier, along with all involved in the finance department for maintaining records of such a high caliber. Once again it has been an absolute pleasure and privilege to be associated with and to serve South Coast Hospice.

**Income and Expenditure Summary**

<table>
<thead>
<tr>
<th></th>
<th>31/03/2016</th>
<th>31/03/2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating Income</td>
<td>6 805 053</td>
<td>6 256 319</td>
</tr>
<tr>
<td>Operating Expenses</td>
<td>4 272 206</td>
<td>5 262 011</td>
</tr>
<tr>
<td>Operating Surplus</td>
<td>2 532 847</td>
<td>994 308</td>
</tr>
<tr>
<td>Finance Income</td>
<td>158 348</td>
<td>22 918</td>
</tr>
<tr>
<td>Loss/Profit on Sale of Property, Plant &amp; Equipment</td>
<td>20 000</td>
<td>177 146</td>
</tr>
<tr>
<td>Net Surplus for the Year</td>
<td>2 711 195</td>
<td>1 194 372</td>
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**Balance Sheet Summary**

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<tr>
<th></th>
<th>31/03/2016</th>
<th>31/03/2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Current Assets</td>
<td>4 964 672</td>
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<tr>
<td>Current Assets</td>
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</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td>9 762 784</td>
<td>6 886 372</td>
</tr>
<tr>
<td>Capital and Reserve</td>
<td>9 317 325</td>
<td>6 556 239</td>
</tr>
<tr>
<td>Current Liabilities</td>
<td>445 459</td>
<td>330 133</td>
</tr>
<tr>
<td><strong>Total Equity and Liabilities</strong></td>
<td>9 762 784</td>
<td>6 886 372</td>
</tr>
</tbody>
</table>

This summary of our financial situation is based on our full audited Annual Financial Statements for the year ended 31 March 2016, which were approved at our Annual general Meeting held on 30 June 2016. A copy of these Annual Financial Statements may be obtained from our offices at 29 Connor Street, Port Shepstone.
Volunteering

Volunteers are vital to our hospice in helping to deliver high quality care. Our history tells us that Volunteers formed the foundation of South Coast Hospice and if we could conduct a survey over the 33 years, we could never put a value on the work that they have done in all elements of Hospice. Some Hospices see this as a saving of finances on the bottom line however, hospice volunteering is not just about saving money. It is about making a difference to patients and families. For volunteers, it can also be a way of:

- Making new friends
- Giving time and skills to the local community
- Learning new skills
- Finding a way into paid work or a change of career.

What volunteers do?
There are lots of opportunities to get involved. Volunteer roles can include:

- Offering practical support and companionship through innovative schemes that hospices run in local communities
- Taking a leadership role as a board member and making sure our association is running well and is doing what it was set up to
- Working within a hospice in the wards or in day hospice services
- Providing administrative help
- Supporting retail activities and helping with the running of a busy shop - for example, working on the tills, creating displays and sorting and marking items.
- Helping out at fundraising events
- Offering specialist skills such as hairdressing or complementary therapies.

Volunteers are an integral part of the team we thank all volunteers past and present for your invaluable support.
Notes from the clinical inter disciplinary team:

“I have no home to return to and there is no one to take care me”.
We bent the rules to breaking point, keeping the patient in the inpatient unit for far beyond the stipulated 10 days. She gradually deteriorated, and eventually passed away peacefully, pain-free, and cared for.

“Please take me to Hospice, I am frightened and in pain here”
A patient who desperately requested to come to hospice from the hospital, and could not thank us enough for bringing her to this place of care and comfort. Her visit from the minister put her spirit at peace, and she died 2 days later. Her family were so grateful that she was so at peace in her last days.

“My husband is too ill to be moved to Hospice, please, what can I do?”
Comfort and counseling were provided to him and his wife, so that when he passed away, she was prepared, and able to cope.

“We are very worried, this man is very sick, his family cannot take care of him. I think he is going to die”
He had severe social support issues, and had been admitted to hospital with no resolution. He was admitted to the IPU where he was diagnosed with MDR, and referred to Murchison for management. After a few months he was discharged to receive his injections from the Hospice MDR Palliative Care Team. He was enabled to obtain a grant, his family are coping and able to support him, and he is well on the road to recovery.

“Please come to the school we have three siblings who we are very worried about”
Three children from a local primary school were referred for grief and bereavement counseling, as they had been orphaned by AIDS. After assessment, it was found that one of the children had serious health issues as a result of neglect. This child was seen by Dr Nell at the Hospice Clinic and received medical attention. With the assistance of PEP vouchers the children were all kitted out with new school uniforms and shoes. They continue to receive ongoing care and support from the Social Work Team.

Brother, Sister, let us serve you, we are pilgrims on the road
We will weep when you are weeping;
when you laugh we’ll laugh with you;
We will share your joy and sorrow
till we’ve seen this journey through.

Taken from The Servant Song – Composed by Richard Gilliard
Thank you for your support

PROTRANS
DRS BASSON AND LOUW
SHAMROCK PACKAGING
COMBINED OPS (MOTHS)
FUCHS FOUNDATION
MARGATE CONSTRUCTION
PROPERTY PORT PONDEROSA PINE TRADING
EXCELSIOR SECURITY SERVICES
GLOBAL PACKAGING
NATIONAL BRANDS
DAVE AND LESLEY BOYD
IMO R PARK
BHP BILLITON (GAYE)
JAXX RESTAURANT
MRS CHRISTINE MOLDT
SPAR KZN
UVONGO METHODIST CHURCH
L POTGIETER
ESME HOWARD
SAN LAMEER HOMEOWNERS ASSOCIATION
KEAL PROPERTY GROUP
PORT SHEPSTONE HIGH SCHOOL
SPAR GROUP LTD
MR HARDWARE – BUILD IT
S CHELLAN OAK TRUST
THE OLIVER TRUST
MARK MCNULTY FAMILY
FALLEN FRIENDS
LAKE ELAND GAME RESERVE
HIBISCUS COAST SECURITY DISTRIBUTORS

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PO BOX 504, PORT SHEPSTONE, 4240
NEDBANK
KWA-ZULU NATAL, SOUTH AFRICA
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BRANCH CODE: 198765
PBO 930002132
SWIFT CODE: NEDSZAJJ

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Annual Review 2016