Join our drive for a dedicated Hospice in Northern Tasmania...

Our Mission, Our Passion

Is to create a dedicated facility supporting individuals and their families at end of life.

The site shall be in close proximity to the Launceston General Hospital Precinct to facilitate the sharing of medical, catering, housekeeping and laundry services. Central location will allow easier accessibility via public transport for the greater community.

The home-like environment will provide a tranquil setting, with care tailored to each individual’s physical, emotional, cultural and spiritual needs.

OUR PROPOSED HOSPICE FOR NORTHERN TASMANIA

The Hospice will augment the existing palliative and end of life service providers currently operating in Northern Tasmania, thereby creating more choice. The Hospice could/ would also assist in the co-ordination of service delivery and provide a one stop shop for all things end of life, an integrated service delivery for end of life care. From a financial perspective the cost of providing a bed in the hospice setting is less than a bed in an acute hospital setting. From a service delivery perspective the provision of a coordinated acute/hospice, community/hospice interface will reduce acute bed demand & consequential bed block.

WHAT IS A HOSPICE

The Northern Hospice and Palliative Care Foundation Limited definition of a hospice is a dedicated facility supporting individuals and their families at end of life.

A place where palliative and end of life care is provided. Respite care can also be provided here if the facility is suitably designed and resourced.

A hospice will provide a home like environment, a tranquil setting, with care tailored to each individual’s physical, emotional, cultural and spiritual needs.

The Hospice will be:

• A centre of excellence
• Situated on the ground floor to allow easy access to tranquil gardens.
• A provider of 24 hour advice and support for the community and other health and aged care facilities.
• Offering a fully integrated service in palliative and end of life care.
• Providing people with a choice at end of life.
• Available for any age, religion, race or illness.
• Utilised as a facility for ongoing education, training and research.
• A project the community will want to be involved with and be willing to assist in funding.
• A facility provided admission for symptom control and introduction to services for the patient and respite for their carer.
• Offering bereavement support.

The Hospice will provide a high quality service, integrity, compassion, respect and universal access for the whole community.

Who would run it?

The Hospice would serve the whole community, run by the state, but with strong community participation to assist in fund raising & celebrating life Care would be delivered by both GP & specialist clinicians and clinical oversight and governance would be under the auspices of the Launceston General Hospital.

End of Life:

Within the community there is much confusion regarding terminology surrounding end of life. The following internationally recognised definitions have been adopted by the Northern Hospice and Palliative Care Foundation Limited.

Bereavement Support

Introduction to palliative services for patients

Respite for carers

A facility for ongoing education, training and research

What is good death

To know when death is coming and to understand what can be expected.
To be able to retain control of what happens.
To be offered dignity and privacy.
To have control over pain relief and other symptom control.
To have choice and control over where death occurs (at home or elsewhere).
To have access to information and expertise of whatever kind is necessary.
To have access to any spiritual or emotional support required.
To have control over who is present and who shares the end.
To be able to issue advance directives that ensure wishes are respected.
To have time to say goodbye and control over other aspects of timing.
To be able to leave where it is time to go and not to have died prolonged pointless.


As one of Australia’s top 20 cities we do not have a dedicated Hospice.

Location Population Beds
Bendigo, VIC 146424 10
Ballarat, VIC 100609 11
North West Tasmania (64) 113927
North East Tasmania (63) 143792
South Tasmania (62) 211656 10
Toowoomba, QLD 140020 6
Darwin, NT 72930 12
Gatine, QLD 224436 12
Caloundra, QLD 41283 10
Albany, WA 30656 4
Doooom, QLD (Nonza) 3142 6
Armadale, QLD (Gold coast) 3498 8
Bunbury, WA 7449 10
Tunhouse, QLD 178469 18

Survey Information: Telephone Survey 4/6U (B) Oliver Moll

Examples of Hospice provisions around Australia

What role would the community play?
Funding and spreading the word on the need for a dedicated Hospice in Northern Tasmania.

Volunteer role:
We are looking for volunteers to help us. People with specific skills such as Organising events, Communications, Catering, Clerical, Photographer etc.

To get a dedicated Hospice for Northern Tasmania we need your support

Talk with your Federal member and express your concerns. Discuss this with your Local member of State Parliament. Let your Local councillors know your concerns. Write to your Local paper. “Letters to the editor”
Editor@examiner.com.au Respond and be involved in radio station discussions about the Hospice.
Volunteer to help us raise funds and awareness of the need for our own dedicated Hospice.

Contact us to register your support:
The Northern Hospice & Palliative Care Foundation Limited
Email: launcestonhospice@gmail.com
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www.northernhospice.org.au