



annual report

2016





chairperson's report

Last year I asked the question "what would the founding trustees think of Progress to Health after 20 years"? This year I would like to reflect on where we have come from during my time on the board.

When I started Progress to Health had just been through what can only be described as a nightmare. The organisation came extremely close to shutting down. Through sheer hard work and negotiation, we remained open but had to instigate significant changes.

The impact of these changes cannot be under-estimated and required every part of the business to be reviewed, changed and improved while meeting some strict mandatory requirements. It was only through dogged determination, a willingness to tackle the hard questions by the staff that the organisation survived.

This whole change process took more than 5 years and included a significant change to the way the organisation perceived itself and the way

it wanted to be seen. In my opinion this has been the most significant and most important thing over the past 10 years.

Since then have we been able to use the stability established to plan for the future. The board and staff started to look closely at the organisation – what it can offer and the image it wanted to portray to the individuals and community who receive services.

In 2012 the board started to set longer term goals with the aim of establishing what the future direction and plan would be.

By 2014 we had a robust strategic plan and had set 5 year goals and aspirations knowing that these may take longer but willing to review and debate them along the way.

Over the past 24 months, we have started to see true changes in the way the organisation is viewed by the community and other organisations.

The quality of services and what we can deliver is much

more defined and accepted however we still have some way to go before we will meet our goals. But that is what it's about – getting to a level of service delivery only to move the goalposts again, keep striving to be better and keep the hope and aspirations alive.

Some old adages are true – out of adversity comes opportunity, but it is the willingness to grab hold of the opportunity that is the key. Sometimes knowing it will be a long hard road can be daunting but keep putting one foot in front of the other.

Without this, Progress to Health would not have been able to achieve what it did last year or this; would not be able to look forward with hope and determination or keep aiming for "communities without barriers".

Finally, I would like to thank my fellow board members and all of the staff for the work that they do every day. The work that helps change people's lives and of that they should all be proud.



david ireland

Chairperson

Board of Trustees

Progress to Health

chief executive's report

The health and disability sector has been in constant change over the last few years, the only real difference being more requirements with little or no additional resourcing. Two responses arise - the urge to curl up and protect what we have, or "here we are - bring it on!"

I'm very proud of my team and board that we still have the energy and drive for the latter.

Business - To grow and diversify our business base to reach \$5.5million by 2019.

- Various business initiatives achieved income around \$10,000.
- A strong relationship with WDHB Mental Health and Addictions team providing recovery advisory services.
- Partnership with AgNZ for delivering a horticultural programme.
- Provision of individually funded services also looks likely in the new financial year.

Clients - To deliver excellent client focused services.

- The majority of people supported lived in Hamilton, New Plymouth, Tokoroa, Te Awamutu and Putaruru.
- Most people accessing services live in rented accommodation, followed by those living with family or in their own home.

- With a better collection system, the number of clients who are smokers has increased to 43%, and a significant increase to 23% who say they have never smoked tobacco.
- For those where the information has been recorded, 27% have a certificate, diploma or degree.

Employees - To be the employer of choice in the health & disability sector

- Staff turnover was 40% lower than last year.
- We achieved a surplus, despite funding, generally, remaining static.

Services - To be recognised as the leading national provider of health & disability services

- Participation in advisory groups and consultation processes. Representation on national, regional and local boards, advisory groups and other networks.
- Progress to Health is actively involved with Platform, Inclusive NZ, the WDHB Local Advisory Group for mental health and addiction services, the smoke-free working group, the Enabling Good Lives project and consumer networks.
- An integral member of the Leadership Group for

the Enabling Good Lives Waikato Demonstration. Bringing a diverse group of people together to craft a new approach is not without its tensions, but we believe in EGL's principles and will work to it a success.

- The opportunity to present at various workshops and conferences, as well as attend as participants.
- We ran a series of successful workshops on facilitation skills in partnership with Interactionz.
- PressGo has supported organisations to educate their staff on self-care and wellbeing; and on policies that support the approaches wanted. Also provided workshops on mental health as a hazard in light of the new health and safety legislation.

I want to acknowledge and thank everyone that has continued to assist us such as Spark, Bullseye Best Brands, PC Hardware and Wild Bamboo; also the continued support of the Waikato, and Taranaki DHBs, and the Ministry of Social Development.

By following us on Facebook, you'll be well aware of the contributions made by our team, not only to individuals' lives, but also to the success of Progress to Health itself. For that, they have my sincere appreciation. ►

Mary Kay Palmer,
John McIntosh, Des Chia

David Ireland, *Chairperson*
Sanjay Weerasinghe, *Trustee*
- *Resigned*
Diane Hallifax, *Deputy Chair*
Hayley Beach, *Treasurer*
Matt Watson, *Trustee*
Alan Withy, *Trustee*
Michael Bland , *Co-opted*
Maree Munro , *Co-opted*

Ellice Tanner Hart

Campbell & Campbell
Accounting Consultants

Westpac Bank

Karen Covell - *Chief Executive*
Angela Meyrick - *Business Development Manager*
Karen Scott - *Community Development Manager*

Noeline Kuru - Team Leader,
Consumer Resource &
Information Service (Waikato)
Patty Posthuma - Team
Leader, Take Part & Options
teams (Waikato & Taranaki)

Craig Verran - *Finance Administrator*
Nicolle Zimmerman - *Administration Assistant*
Danielle Wall - *Executive Assistant*

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Communities without barriers

To connect individuals with their communities

- > Flexible
- > Inclusive
- > Responsive

continued ...

► Our leadership team has continued to develop their skills and abilities. My gratitude goes to Patty Posthuma and Noeline Kuru.

Karen Scott, our community development manager, has worked tirelessly to introduce service improvements and the fresh look she has achieved has been set to a very high standard.

Angela Meyrick, our business development manager, has worked on the challenge to find new revenue and business opportunities. Angela has completed her auditor certification, and this is now a service we've added to PressGo's menu.

Our backroom team of Nicolle, Danielle and Craig also deserve pats on the back –they have embraced our values of being flexible, inclusive and responsive – always willing to do the ‘odd’ things that crop up!

I would like to recognise David Ireland, who along with Diane Hallifax, Hayley Beach, Matt Watson, Alan Withy, Maree Munro, Michael Bland and Mark Etheridge have truly taken their foot off things operational and focussed solely on steering Progress to Health towards its four strategies and our future. Thank you for the time and belief you've placed in Progress to Health, and for the support you've given to staff, management and to me.

The road ahead is not going to be the easiest, and I foresee potholes, dead-ends and maybe some U-turns, but I can also see challenges, successes and probably some complete surprises!

Thank you for your interest in Progress to Health, for working with and supporting and when I am looking to what lies ahead, I find it hard to go passed the words of Robert Frost, *"Two roads diverged in a wood, and I – I took the one less travelled by, And that has made all the difference."*⁷



Chief executive

Progress to Health

Blau

¹ Robert Lee Frost (March 26, 1874 – January 29, 1963), American poet – The Road Not Taken

Statement of Financial Performance

| | JUNE 2016 | JUNE 2015 |
|---|------------------|------------------|
| | \$ | \$ |
| Revenue | | |
| Revenue from providing goods & services | | |
| Ministry of Social Development | 395,727 | 397,740 |
| Waikato District Health Board | 877,404 | 844,703 |
| Taranaki District Health Board | 363,231 | 361,892 |
| Ministry of Health | - | 63,750 |
| Sundry Income | 10,380 | 14,116 |
| | 1,646,742 | 1,682,201 |
| | | |
| Interest, dividends & other investment income | | |
| Interest income | 16,633 | 20,329 |
| | | |
| Donations received | 807 | - |
| | | |
| Total Revenue | 1,664,182 | 1,702,530 |
| | | |
| Expenses | | |
| Employee related payments | | |
| Wages & salaries | 1,080,708 | 995,790 |
| | | |
| Costs relating to providing goods & services | | |
| Service costs | 358,410 | 372,881 |
| Centralised costs | 189,754 | 180,386 |
| | | |
| Other expenses | | |
| Audit fees | 3,351 | 3,889 |
| Depreciation | 14,606 | 16,303 |
| | | |
| Total Expenses | 1,646,829 | 1,569,249 |
| | | |
| Surplus/(Deficit) for the year | 17,353 | 133,281 |

| | NOTES | JUNE 2016 | JUNE 2015 |
|------------------------------------|----------|----------------|----------------|
| | | \$ | \$ |
| Revenue | | | |
| Current Assets | | | |
| Bank accounts & cash | Note 2.1 | 341,332 | 303,470 |
| Accounts receivable | | 233,877 | 123,841 |
| Interest received | | 605 | - |
| Short term deposits | Note 2.2 | 257,567 | 247,827 |
| | | 833,381 | 675,138 |
| | | | |
| Non-Current Assets | | | |
| Property, plant & equipment | Note 2.4 | 55,701 | 60,816 |
| | | | |
| Total Assets | | 889,082 | 735,954 |
| | | | |
| Current Liabilities | | | |
| Accounts payable & sundry accruals | Note 2.3 | 95,724 | 77,713 |
| Employee costs payable | | 69,350 | 49,143 |
| Contract revenue in advance | | 97,557 | - |
| | | 262,631 | 126,856 |
| Non-Current Liabilities | | | |
| Loans | | - | - |
| | | - | - |
| | | | |
| Total Liabilities | | 262,631 | 126,856 |
| | | | |
| Net Assets | | 626,451 | 609,098 |
| | | | |
| Accumulated Funds | Note 4.0 | | |
| Accumulated surpluses /(deficits) | | 511,343 | 545,465 |
| Financial reserve | | 115,108 | 63,633 |
| | | | |
| TOTAL EQUITY | | 626,451 | 609,098 |
| | | | |

Note 2.1: Bank accounts & cash

Note 2.2: Term deposits

Note 2.3: Accounts payable & accruals

Note 2.4: Property, plant & equipment

Note 4.0: Reserves

| | JUNE 2016 | |
|---|-------------|--|
| | \$ | |
| Cash flows from operating activities | | |
| Cash was received from: | | |
| Donations received | 807 | |
| Receipts from providing goods & services | 1,634,563 | |
| Interest, dividends & other investment receipts | 5,989 | |
| | 1,641,359 | |
| | | |
| Cash was applied to: | | |
| Payments to suppliers & staff | (1,594,006) | |
| | (1,594,006) | |
| | | |
| Net cash flows from operating activities | 47,353 | |
| | | |
| Cash flows from investing & financing activities | | |
| Cash was received from: | | |
| Receipts from sale of property, plant & equipment | - | |
| Receipts from sale of investments | - | |
| Withdrawal of short term investments | - | |
| Funds from funds borrowed (loans) | - | |
| Capital contributed from owners or members | - | |
| | - | |
| | | |
| Cash was applied to: | | |
| Purchase of property, plant & equipment | (9,491) | |
| Payments to purchase investments | - | |
| Purchase of investments | - | |
| Capital repaid to owners or members | - | |
| Other | - | |
| | (9,491) | |
| | | |
| Net cash flows from investing & financing activities | (9,491) | |
| | | |
| Net increase/(decrease) in cash & cash equivalents | 37,862 | |
| Cash & cash equivalents at beginning of year | 303,470 | |
| Cash & cash equivalents at end of year | 341,332 | |
| | | |
| This is represented by: | | |
| Bank accounts & cash | 341,332 | |

| | THIS YEAR | LAST YEAR |
|---------------------------------------|----------------|----------------|
| Bank - current accounts | 10,660 | 9,978 |
| Bank - online saver accounts | 214,714 | 229,009 |
| Bank - capital reserve account | 115,108 | 63,633 |
| Petty cash | 850 | 850 |
| Total bank accounts & cash | 341,332 | 303,470 |

The following financial statements provide an excerpt from the audit report completed and provided by Mark Campbell of Campbell and Campbell Accounting Consultants, Hamilton. The full audited financial statements are available on request by contacting Progress to Health's Administration Centre.

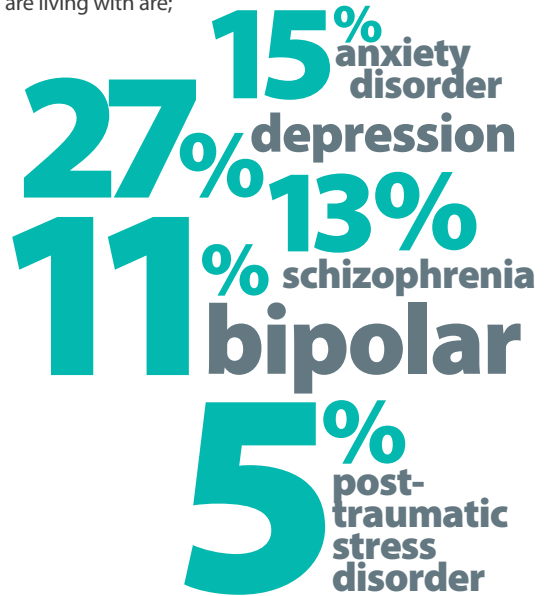
individuals accessed our services an increase on last year

53% of referrals were self referral or via family

66  **people were in or have gained employment during the year, ranging between 1 hour and 40 hours per week.**

clients have become volunteers, gaining experience amongst other areas in retail, outdoor work experience, office and administration work, hospitality; community service, caregiving and animal care.


The most common mental health conditions people are living with are;




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