



**annual report**





# annual report 2018

## **Founding Trustees**

Mary Kay Palmer  
John McIntosh  
Des Chia

## **Board of Trustees**

David Ireland, Chairperson  
Diane Hallifax, Deputy Chair - Resigned  
Hayley Beach, Treasurer  
Michael Bland  
Maree Munro - Resigned  
Mark Etheridge  
Gillian Holm - co-opted  
Andrew Corkill - co-opted

## **Solicitor**

Ellice Tanner Hart

## **Auditors**

Campbell & Campbell Accounting Consultants

## **Bankers**

Westpac Bank

## **Leadership Team**

Karen Covell - Chief Executive  
Angela Meyrick - Operations Manager  
Sue O'Donnell - Business Development Manager  
Noeline Kuru, Team Leader  
Patty Posthuma, Team Leader

## **Administration Team**

Nicolle Zimmerman, Executive Assistant  
Catherine Cook, Business Development

## **Administration Centre**

25 Claudelands Road, Hamilton East 3216  
(PO Box 19-082, Hamilton 3244)  
ph: 07 829 4826  
[www.progresstohealth.org.nz](http://www.progresstohealth.org.nz)



1  
2018

## contents

- 01.** Chairperson's report
- 02.** Chief executive's report
- 03.** Statement of financial performance
- 04.** Statement of financial position
- 05.** Statement of cash flows



2

2018

# Chairperson's Report

**Firstly welcome to the 2018 AGM.**

**It is fair to say that Mental Health & Addictions has been in the spotlight much more recently than in previous years. With the highest youth suicide rate in the world and a system that is creaking at the seams it is certainly one of the most challenging times that the sector has seen.**

The government has clearly signalled the need for changes and while the national Mental Health Enquiry offers some hope, it cannot be seen as the panacea for all.

It is also clear that key factors such as housing and employment are highest on the governments' agenda.

Our staff see the impacts of a lack of housing and employment every day but do an amazing job in supporting people during these challenging times but the value staff add in many ways is immeasurable.

While the recent pay equity settlement helps to acknowledge the value that staff add to people's lives in many ways it does not actually show the value added.

The settlement has provided added financial security however it is easily

argued that with house price rises and rent increases this has been quickly negated.

While our staff deliver services in a professional and supportive way, we should also consider the countless number of people who provide support in an unpaid capacity. The family, aunties, uncles, grandparents and friends who also walk alongside

the individuals and communities that deal with the daily challenges in our sector

I firmly believe that the true answers lie within the individuals and communities as only they truly understand what works for themselves. The difficulty is finding the right balance between supporting and directing.

## 2018

With this in mind it has been pleasing the Progress to Health has continued it's move towards service delivery being undertaken fully within the community environment and not in offices and buildings.

Previously I mentioned all the unpaid supports people have but I think we should also acknowledge all the people who provide support in other capacities such as fund raising, or being on a committee or board.

The time commitments involved in supporting organisations within the sector can be considerable, not to mentioned the emotional investment that people make.

As communities and life in general becomes faster people are becoming time poor so acknowledge the work of the volunteers is also important.

To that end it is with sadness that the board recently accepted the resignations of two board members.

To Di Hallifax and Maree Munro, I can only thank you for your time, energy and input into Progress to Health. As mentioned before what you have added cannot really be measured but the impact you have had has contributed to improving the lives of people in our communities and for this we are truly grateful.

Finally I do wish to thank Karen and all the staff who daily represent the organisation with pride and professionalism and who also help to change and improve lives. I can only hope we continue to do what we do but also improve on what we do.



**David Ireland**  
**Chairperson**

BOARD OF TRUSTEES  
Progress to Health

A handwritten signature in blue ink that reads "D Ireland".

# Chief Executive's Report

**Change in government, the Mental Health Inquiry, the Disability System Transformation, Enabling Good Lives, Pay Equity Settlements, and then there's business as usual - whatever that may mean these days! I'm very proud of my team and our board that we have the energy and drive to meet the challenges and the opportunities that constant change brings. Our strategic direction provides us with a clear pathway for the coming years, but as with everything remains a living and changing thing. Following are some key achievements from the last year, that we would like to share with you:**

## **Our Communities**

- Our services were accessed by 650 individuals; the average age has risen slightly to 41 years old; the youngest being 17 and the eldest 76 years old. For the first time in several years, women were the majority of people we supported.
- Whilst most identified as NZ European (60%), followed by Maori (29%), we are continuing to see people from a broad spread of countries.
- The most common referral sources were self/family referrals, adult community mental health teams and other community support services.
- The most common mental health conditions people are living with are depression (28%), anxiety disorder (22%), schizophrenia (10%), bipolar disorder (9%), and post-traumatic stress disorder (6%).
- The more common physical health conditions or disabilities people are living with are asthma (12%), epilepsy (10%), arthritis (9%), intellectual disabilities (8%), epilepsy (8%).

## 2018

- 94 people were in or have gained employment during the year (an 88% increase on last year), ranging between 2 and 40 hours per week. The average weekly hours were 16 (an increase of over 16% on last year).
- 44 had become volunteers, gaining experience amongst other areas in retail, outdoor work experience, office and administration work, hospitality; community service, caregiving, education, manufacturing and animal care.
- Most of the people supported lived in Hamilton, followed by New Plymouth, Tokoroa, Cambridge and Te Awamutu respectively.
- 23% are living alone in rented accommodation; 17.5% are renting with others; 14% are living with their family; 11% are in supported accommodation and 9.5% are living in their own home.
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- The number of clients stating themselves to be smokers has remained static at 36%, with the majority smoking between 6 and 10 cigarettes a day (last year the majority were smoking between 11 and 15 a day). We can report a decrease to 30% who have said they have never smoked tobacco and a significant increase to 13% who consider themselves as ex-smokers.
- For those where the information has been recorded, 27% have a certificate or diploma, 4% a degree and 1.5% have a postgraduate qualification. 33 people are in some form of study, ranging between an hour to 40 hours per week.
- We again reached 100% compliance for PRIMHD<sup>1</sup> reporting.
- We continue to encourage all levels of Progress to Health to participate in advisory groups and consultation processes. As a result, we are represented on national, regional and local board, advisory groups and other networks.
- Specifically, Progress to Health has been actively involved with Platform, Inclusive NZ, the Waikato DHB Local Advisory Group for mental health and addiction services, the Enabling Good Lives project and consumer networks.
- We have also had the opportunity to present at various workshops and conferences, as well as attend a variety of conferences as participants.

<sup>1</sup>PRIMHD (pronounced 'primed') is a Ministry of Health single national mental health and addiction information collection of service activity and outcomes data for health consumers.

## Our People

- Our staff turnover was 37%. Our average length of service has increased to just over 5 years.
- 6 staff members have embarked on study with Careerforce and one is pursuing a degree via CapableNZ

## Our Resourcing

- Our various business initiatives brought in income to the tune of \$57,000.
- Provision of individually funded services has remained static.
- For the 11th year running, we achieved a surplus, despite funding, in general terms, remaining static to last year. Importantly, we were able to fully implement our remuneration policy, upgrade resources and equipment.
- Through PressGo, we have been able to provide support to collegial agencies, along with a growing range of businesses, to educate their staff on self-care and wellbeing; and on policies and procedures that support the approaches the organisations want. We have also been able to provide workshops on Mental Health First Aid and Stress in the Workplace.

## Our Infrastructure & Systems

- We have successfully migrated to Microsoft 365, and switched to an on-line payroll software. This means that along with our use of Xero and RecordBase, we are completely cloud-based for our business operation, opening up opportunities for methods of working and flexibility for both staff and people accessing our services.

Annual reports are great vehicles for being able to acknowledge and thank the people and organisations that have continued to assist and support us, including but not limited to, Interactionz, Spark, Bullzeye Best Brands, Dynamo6 and Wild Bamboo. I would also like to acknowledge the continued support of the Waikato, and Taranaki District Health Boards, and

the Ministry of Social Development.

For those of you who follow us on Facebook, you'll be well aware of the collective and individual contributions made by our frontline staff, not only to individuals' lives, but also to the continued success of Progress to Health itself. For that, they have my sincere appreciation.



# 7 2018

My gratitude goes to our team leaders Patty Posthuma and Noeline Kuru for all they have achieved this year.

Sue O'Donnell, our business development manager, has worked tirelessly alongside Catherine Cook to reintroduce PressGo and the fresh look she has worked to achieve has been set to a very high standard and we are starting to see get results and support from businesses and organisations across the North Island.

Angela Meyrick, our operations manager continues to work on the nuts and bolts of Progress to Health, ensuring our systems and processes are as effective and efficient as they can be. She also continues to conduct audits, as part of PressGo's menu of support.

Nicolle, our "go-to" deserves a big pat on the back – during the year, she has certainly embraced our values of being flexible, inclusive, responsive and passionate – always being willing to do the 'odd' things that crop up!

I would also like to acknowledge David Ireland, who along with Diane Hallifax, Hayley Beach, Maree Munro, Michael Bland, Mark Etheridge and most recently, Gillian Holm and Andrew Corkill have truly taken their foot off things operational and focussed solely on steering Progress to Health on its strategic path 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!

Finally, but not least, I would like to thank you for your continued interest in Progress to Health, for working with us, supporting us and for joining us on occasions like this evening.



**Karen Covell**  
**Chief Executive**

Progress to Health

A blue ink handwritten signature of Karen Covell, followed by a period.

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.

## Statement of Financial Performance

	JUNE 2018	JUNE 2017
	\$	\$
<b>REVENUE</b>		
<b>REVENUE FROM PROVIDING GOODS &amp; SERVICES</b>		
Ministry of Social Development	417,089	404,024
Waikato District Health Board	901,412	903,390
Taranaki District Health Board	368,074	364,429
Business Initiatives	6,044	34,165
Sundry Income	51,650	20,991
	1,744,269	1,726,999
<b>INTEREST, DIVIDENDS &amp; OTHER INVESTMENT INCOME</b>		
Interest income	9,564	11,932
<b>DONATIONS, GRANTS AND FUNDRAISING INCOME RECEIVED</b>		
Grants received	0	2,920
	0	2,920
<b>TOTAL REVENUE</b>	<b>1,753,833</b>	<b>1,741,851</b>
<b>EXPENSES</b>		
<b>EMPLOYEE RELATED PAYMENTS</b>		
Wages & salaries	1,026,222	1,157,965
<b>COSTS RELATING TO PROVIDING GOODS &amp; SERVICES</b>		
Service costs	281,887	324,005
Centralised costs	214,528	195,612
<b>OTHER EXPENSES</b>		
Audit fees	4,037	3,910
Depreciation	9,278	11,250
Loss on disposal of Fixed Assets	857	2,798
<b>TOTAL EXPENSES</b>	<b>1,536,809</b>	<b>1,695,540</b>
<b>SURPLUS/(DEFICIT) FOR THE YEAR</b>	<b>217,024</b>	<b>46,311</b>

## Statement of Financial Position

	NOTES	JUNE 2018	JUNE 2017
		\$	\$
<b>REVENUE</b>			
<b>CURRENT ASSETS</b>			
Bank accounts & cash	Note 2.1	525,569	369,013
Accounts receivable		153,649	135,392
Interest received		3,513	2,756
Short term deposits	Note 2.2	274,613	266,308
		957,344	773,469
<b>NON-CURRENT ASSETS</b>			
Property, plant & equipment	Note 2.4	30,997	44,504
<b>TOTAL ASSETS</b>		<b>988,341</b>	<b>817,973</b>
<b>CURRENT LIABILITIES</b>			
Accounts payable & sundry accruals	Note 2.3	41,262	64,224
Employee costs payable		57,293	80,987
		98,555	145,211
<b>TOTAL LIABILITIES</b>		<b>98,555</b>	<b>145,211</b>
<b>NET ASSETS</b>		<b>889,786</b>	<b>672,762</b>
<b>ACCUMULATED FUNDS</b>	Note 4.0		
Accumulated surpluses /(deficits)		698,195	542,654
Financial reserve		191,591	130,108
<b>TOTAL EQUITY</b>		<b>889,786</b>	<b>672,762</b>

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

## Statement of Cash Flows

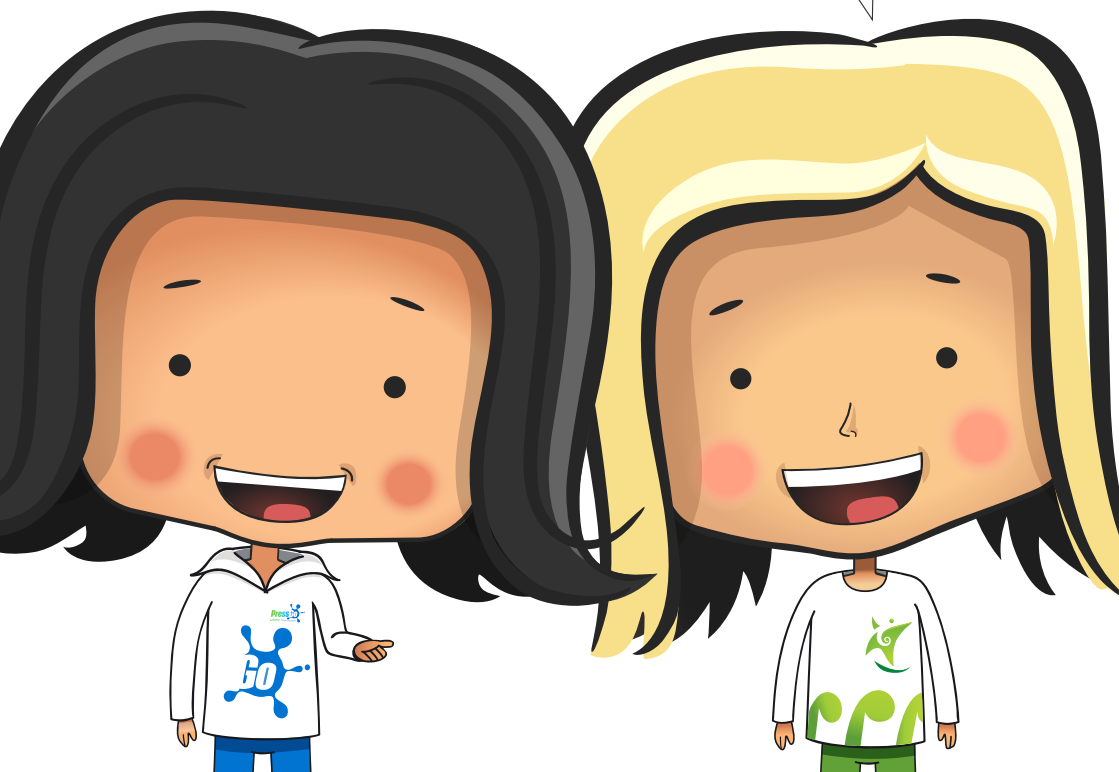
	JUNE 2018	JUNE 2017
	\$	\$
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>		
<b>CASH WAS RECEIVED FROM:</b>		
Grants and Donations received	0	2,920
Receipts from providing goods & services	1,707,005	1,727,927
Interest, dividends & other investment receipts	503	1,041
	<b>1,707,508</b>	<b>1,731,888</b>
<b>CASH WAS APPLIED TO:</b>		
Payments to suppliers & staff	(1,574,188)	(1,701,356)
	(1,574,188)	(1,701,356)
<b>NET CASH FLOWS FROM OPERATING ACTIVITIES</b>	<b>133,320</b>	<b>30,532</b>
<b>CASH FLOWS FROM INVESTING &amp; FINANCING ACTIVITIES</b>		
<b>CASH WAS RECEIVED FROM:</b>		
Receipts from Sale of property, plant and equipment	25,761	0
	25,761	0
<b>CASH WAS APPLIED TO:</b>		
Purchase of property, plant & equipment	(2,525)	(2,854)
<b>NET CASH FLOWS FROM INVESTING &amp; FINANCING ACTIVITIES</b>	<b>23,236</b>	<b>(2,854)</b>
<b>NET INCREASE/(DECREASE) IN CASH &amp; CASH EQUIVALENTS</b>	<b>156,556</b>	<b>27,681</b>
<b>CASH &amp; CASH EQUIVALENTS AT BEGINNING OF YEAR</b>	<b>369,013</b>	<b>341,332</b>
<b>CASH &amp; CASH EQUIVALENTS AT END OF YEAR</b>	<b>525,569</b>	<b>369,013</b>
<b>THIS IS REPRESENTED BY:</b>		
<b>BANK ACCOUNTS &amp; CASH</b>	<b>525,569</b>	<b>369,013</b>

11

# 2018

Find out more about PressGo  
**[www.pressgo.co.nz](http://www.pressgo.co.nz)**

Support the work of Progress to Health  
**[www.givealittle.co.nz//org/pth](http://www.givealittle.co.nz//org/pth)**



**Hamilton Resource Centre**

19 Hood Street, Hamilton

**Administration Centre**

25 Claudelands Road, Hamilton  
Ph 0800 77 57 57

**T.R.E.E Nursery**

41 Duke Street, Ngaruawahia

**New Plymouth**

15 Dawson Street, New Plymouth

**Tokoroa**

22 Bridge Street, Tokoroa



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[www.progresstohealth.org.nz](http://www.progresstohealth.org.nz)