Progress to Health

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Annual Report





Founding Trustees

Mary Kay Palmer John McIntosh Des Chia

Board of Trustees

Andrew Corkill	Chairperson
Hayley Brooke	Treasurer (formerly Beach and Annals)
Mark Etheridge	
Nick Johnston	Deputy Chairperson (resigned 20th April 2022)
Mark Brown	Deputy Chairperson (appointed 20th April 2022)
Cheri-Lee Atkinson	
Hayley Arnet	
Josh Maniam	(co-opted 20th April 2022)
David Slone	(co-opted 20th April 2022)
Nick Johnston Mark Brown Cheri-Lee Atkinson Hayley Arnet Josh Maniam	Deputy Chairperson (appointed 20th April 2022) (co-opted 20th April 2022)

Leadership Team

Karen Covell	Chief Executive
Angela Meyrick	Operations Manager (resigned 13th July 2022)
Patty Posthuma	Team Leader
Vanessa Foster	Team Leader

Administration Team

Nicolle Zimmerman -Business Support CoordinatorCatherine Cook -Business Development

Administration Centre

18 Rostrevor Street, Hamilton 3240 (PO Box 19-082, Hamilton 3244) ph: 07 838 0302 www.progresstohealth.org.nz

Solicitor

Ellice Tanner Hart Tompkins Wake Auditors

PKF Hamilton

Bankers

Westpac Bank ANZ Bank SBS Bank

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Ngā mihi ki tēnei hui e te whānau, welcome to the 2022 AGM for Progress to Health

It feels as if we have come through the Covid challenges of the last couple of years and as an organisation are stronger for the experience. If there's one thing we have learnt however, it is that we cannot rest on our laurels as there is change everywhere that must be navigated and we never quite know what new and fun obstacle is on the horizon! As Board Chair I have great confidence in the people sitting around the table with me to tackle these issues head on and that due to the trust, diversity of thinking and strategic focus of our tight knit ropu we will continue to succeed in this everchanging external environment. Thanks to Mark, Mark, Hayley, Hayley, Cheri-Lee, David, Josh and until recently, Nick, for all your excellent input and commitment.

The embedding of the health system reforms of the last year are now well and truly underway and the establishment of the Ministry of Disabled People will also overtime spell change for small not for profits like Progress to Health. With these transformational system shifts underway it is heartening that as a board we are still very much engaged on delivering our strategic plan. Mid-way through the first threeyear strategic cycle of the plan the organisation continues to operationalise our strategy in everything it does as it works toward the ultimate vision of 'Communities Without Barriers'. Throughout the last year we have had special guests at Board meetings to ground us, remind us of why we are here and to help us navigate the complexity we are faced with daily. A big thank you to Gerri Pomeroy for your work with us regarding the new Ministry and to our inaugural chair, the late John McIntosh, who graced us with his presence at our board meeting only two weeks prior to his passing. John, you are spoken of and thought of often in our mahi.

The people of Progress to Health continue to shine and undertake their work with commitment and passion. Outside of the regular client facing work the Caro Park Community Garden continues to flourish and PressGo keeps building its online presence in the Waikato and beyond. I want to particularly note the strong leadership of Patty and Vanessa in their people management roles, the bubbly positivity and can-do attitude of Cat and the responsive and organised Nicolle – without this team leading the organisation our strategy would be meaningless! Karen, thanks for your unwavering loyalty to Progress to Health and the open and honest way in which you deal with us as a board.

To all of you stakeholders, suppliers and friends of Progress to Health, thanks for your continued support and we look forward to continuing our close relationships long into the future.

Noho ora mai

Andrew Corkill Chairperson Board of Trustees Progress to Health

The people of Progress to Health continue to shine and undertake their work with commitment and passion

Andrew Corkill

Chairperson's report



Tenā koutou, it's so good to be able to see you all in person at this year's gathering

COVID is still lurking, and we have certainly all learnt how to live and work while still keeping ourselves as safe as we can and have continued to provide support to people choosing to use our services. Hopefully, we will continue to come out from behind our screens and that the news that restrictions are to be further reduced aren't too far away.

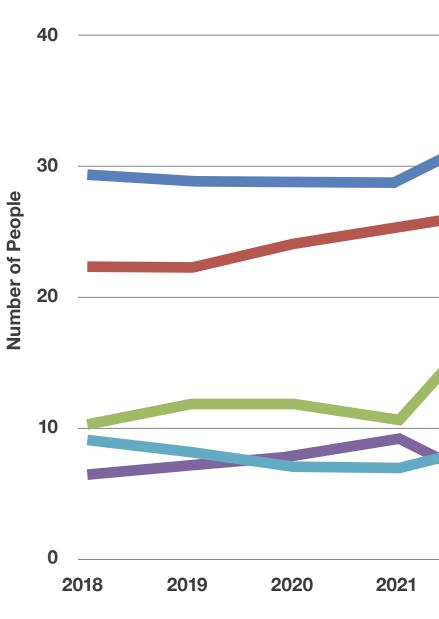
Following are some key achievements from the last year, that we would like to share with you:

Services:

- Our services were accessed by over 400 individuals; the average age being 42 years old; the youngest being 18 and the eldest 80 years old. Nearly 60% of the people we supported identified as being female.
- Whilst most identified as NZ European (61% down by 2%), followed by Māori (29% up slightly from last year), we are seeing an increased number of people from a broad spread of countries.
- The most common referral sources were self/ whanau referrals (36% down by 13% on last year), followed by community support services (28% up by 4%) and adult community mental health (18% down by 4%). Referrals from GPs are up to 13% and referrals from Police continue to increase. Referrals were also received from Oranga Tamariki, Community Link Waikato, Day Hospital, hospital (not a mental health department), public health, private practitioners and the Ministry of Social Development.
- The most common mental health conditions that we are supporting people to live with are depression (33%, up by 6%), anxiety disorder (26% up by 1%), schizophrenia (20% up by

9%%), bipolar disorder (9% up by 3%) and post-traumatic stress disorder (5% down by 4%). We expect the increases are still related to the pandemic and levels of hardship being experienced by people, such as increased food costs, petrol prices, access to housing etc.

• The more common physical health conditions or disabilities people are living with are intellectual disability (9%, no change from last year), asthma (3% down 5%), epilepsy (3%, down by 3%), arthritis (5%, down 3%), and non-insulin dependent diabetes (down 3% to 3%). On the increase are people living with head injuries (3%), fibromyalgia (3.5%) and vision impairments (2%).



Mental Health Diagnoses

Chief executive's annual report

Depression Anxiety Disorder Schizophrenia Bipolar Disorder PTSD

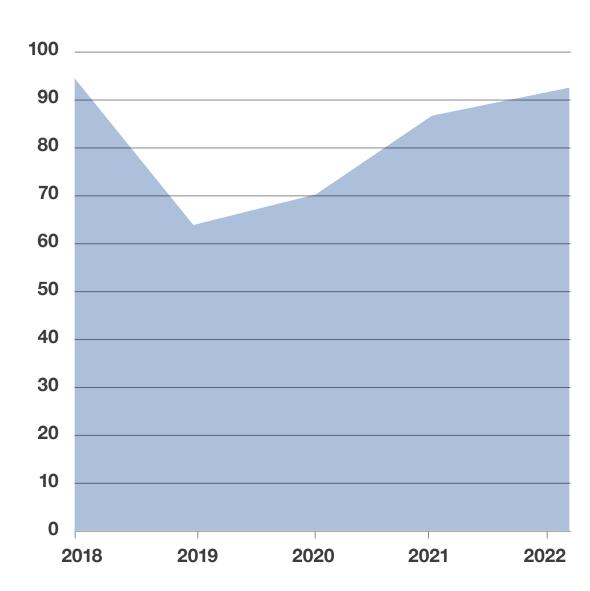


average age of individuals accessing our services

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2022





Gained Employment

Living Situation



- 92 (up by 6) people were in or have gained employment during the year. The average weekly hours sit at just over 15 hours.
- · 27 (down by 14) are volunteering in retail, outdoor work, community service, caregiving, education, trades and animal care.
- Most of the people supported lived in Hamilton (47%), followed by Tokoroa (15%), New Plymouth (11%), and Taupō (8%).
- 77% of people opted out of stating a religion of choice or opting not to answer, but for those that did 12% said they were Christian (without being more detailed), followed by those that specifically identified themselves as being Catholic (2%), Anglican (2%) or Mormon (1%).
- 26% (no change) are living alone in rented accommodation; 22% (up by 4%) are renting with others; 17% are living with their family (down by 1% on last year); 12% are in supported accommodation (down by 1%) and 13% are living in their own home (up by 1%); 9% are boarding. Less than 1% are reporting that they have no fixed abode, repeating a similar result to last year.
- People are also asked what they consider their main daily activity to be – 50% (down by 2%) said they pursue hobbies; 14% (down by 2%) said they're seeking employment, 12% (new collection) said they were in full-time employment, 7% (up by 1%) said they are caring for others; and 5% (no change) consider volunteering to be their main activity.



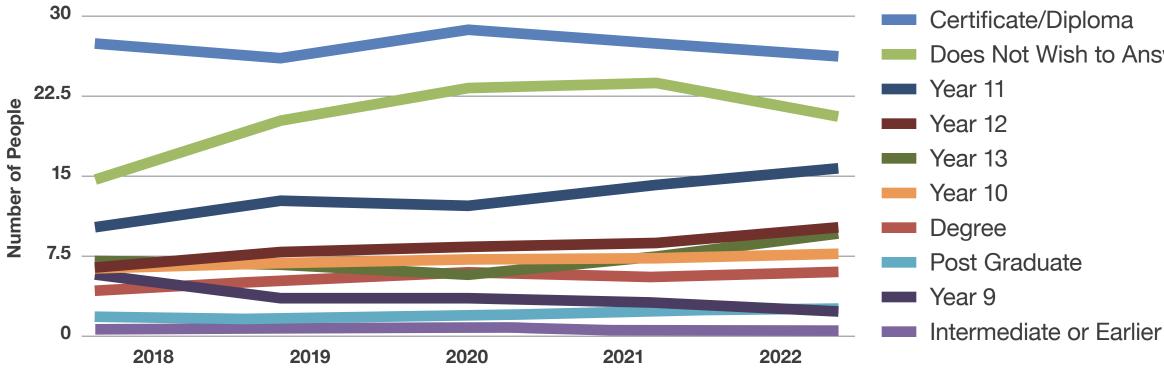
people were in or have gained employment during the year

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ODA

Highest Qualification



• 40% (down 1%) of current clients have told us that they have been or are smokers; 34% (down 2%) have never smoked tobacco and 24% (up 2%) are ex-smokers. 69.5% (up 23.5%) have been given advice to quit in the last 6 months and/or have been referred to cessation services.

Staff & Culture

- Our staff turnover was just over 12%, equals 3 employees (down by 12% on last year). Of the staff that left, one returned to their home overseas and two stayed in the mental health and addiction sector.
- Our average length of service has remained at 6 years.
- 2 further team members have successfully completed their Level 4 Certificate in Health & Wellbeing.

For those where the information has been recorded, 36% (up 30%) have a certificate or diploma and 7% (up 6%) has a degree and 5% are postgraduate.

Funding Independence

- For the 14th 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. Plus, we continue to hold events throughout the year. As we continue to move away from tight COVID restrictions, our public and in-company workshops have commenced in person again.

Does Not Wish to Answer

Chief executive's annual report

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further team members have successfully completed their Level 4 Certificate in Health & Wellbeing

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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, 2degrees, Bullzeye Best Brands, Fuji-Xerox, Elite, Dynamo6 and Wild Bamboo. I would also like to acknowledge the continued support of what were the Waikato, and Taranaki District Health Boards, and the Ministry of Social Development.

A special mention also to Janet Steffert and Tanya Geldenhuys from Enrich Group for supporting our HR and finance functions.

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.

To the leadership team, Patty Posthuma and Vanessa Foster – thank you for your continued commitment to the work of Progress to Health. I acknowledge that the contribution made by Angela Meyrick, who after a significant time with us has stepped away to pursue new challenges.

I would also like to acknowledge Cat Cook, and Ruth Taylor for their work in the PressGo space. Their flexibility and responsiveness to our changing environments to still meet the audience's needs was astounding.

Nicolle, our business support coordinator, certainly embraces 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 Andrew Corkill, who along with Hayley Brooke, Mark Etheridge, Mark Brown, Cheri-Lee Atkinson, Hayley Arnet, Josh Maniam and David Slone have kept their focus on steering Progress to Health on its strategic direction 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 the Progress to Health whanau. I would also like to acknowledge Nick Johnston who careful and considered comments were so valuable during his time on the Board.

Many of you in the room knew John McIntosh, and I would just like to acknowledge John McIntosh, one our founders, our inaugural chairperson and our inaugural patron, and my friend, who we lost earlier this year, and to say thank you to Marilyn, for joining us this morning.

Finally, but not least, I would like to thank you for your continued interested in Progress to Health, for working with us, supporting us and for joining us when times allow.

The rest of 2022 and probably the next wee while to come, will continue to bring challenges and opportunities. By the time we gather next year, Te Whatu Ora | Health New Zealand, Te Aka Whai Ora | Māori Health Authority and Whaikaha – Ministry of Disabled People will have moved out of their infancy and the positive changes to the health and disability landscape that we have been hoping for will be coming to the fore.

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Karen Covell Chief executive

Chief executive's annual report

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Waiho i te toipoto, kaua i te toiroa

Let us keep close together, not far apart



	Notes	June 2022	June 2021
		\$	\$
REVENUE			
Revenue from providing goods & services			
Ministry of Social Development		536,848	485,735
Waikato District Health Board		1,143,866	1,064,889
Taranaki District Health Board		229,633	280,006
Business Initiatives		1,150	12,120
Sundry Income		17,037	11,236
		1,928,534	1,853,986
Interest, dividends & other investment income			
Interest income		5,195	3,670
Donations, grants and fundraising income received			
Donations received		30,527	3,905
TOTAL REVENUE		1,964,256	1,861,561
EXPENSES			
Employee related payments			
Wages & salaries		1,337,140	1,261,304
Costs relating to providing goods & services			
Service costs		241,728	256,736
Centralised costs		287,742	269,052
Legal costs		26,694	25,838
Other expenses			
Audit fees		7,400	4,148
Depreciation	2.5	5,430	6,371
Loss on disposal of Fixed Assets	2.5	-	1,072
TOTAL EXPENSES		1,906,134	1,824,521
SURPLUS/(DEFICIT) FOR THE YEAR		58,122	37,040

Statement of financial performance

The following financial statements provide an excerpt from the audit report completed and provided by PKF Hamilton. The full audited financial statements are available on request by contacting Progress to Health at admin@progresstohealth.org.nz

Note 2.1: Bank accounts & cash Note 2.2: Term deposits Note 2.3: Accounts receivable Note 2.4: Accounts payable & accruals Note 2.5: **Property plant & equipment** Note 4.0: **Reserves**



	Notes	June 2022	June 2021
		\$	\$
Current Assets			
Bank accounts & cash	2.1	918,423	944,660
Accounts receivable	2.1	131,864	124,295
Interest received		356	798
Prepayments		6,094	6,669
Short term deposits	2.2	303,010	298,823
		1,359,747	1,375,245
Non-Current Assets			
Property, plant & equipment	2.5	15,110	17,222
TOTAL ASSETS		1,374,857	1,392,467
Current Liabilities			
Accounts payable & sundry accruals	2.4	54,088	135,995
Employee costs payable - Holiday pay accrual		85,761	108,924
Wages accrual		36,338	
		176,187	244,919
TOTAL LIABILITIES		176,187	244,919
NET ASSETS		1,198,670	1,147,548
ACCUMULATED FUNDS	4.0		
Accumulated surpluses /(deficits)		1,006,389	955,957
Financial reserve		192,282	191,591

Statement of financial position

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Note 2.1: Bank accounts & cash Note 2.2: Term deposits Note 2.3: Accounts receivable Note 2.4: Accounts payable & accruals Note 2.5: Property plant & equipment Note 4.0: **Reserves**



	June 2022	June 2021
	\$	\$
Cash flows from operating activities		
Cash was received from:		
Donations received	527	3,905
Receipts from providing goods & services	1,843,685	1,902,418
Interest, dividends & other investment receipts	5,637	505
Net GST	4,624	
	1,854,473	1,906,828
Cash was applied to:		
Payments to suppliers & staff	(1,877,392)	(1,807,065)
	(1,877,392)	(1,807,065)
Net cash flows from operating activities	(22,919)	99,763
Cash flows from investing & financing activities		
Cash was received from:		
Receipts from Sale of property, plant and equipment	0	0
	0	0
Cash was applied to:		
Purchase of property, plant & equipment	(3,318)	(4,815)
Net cash flows from investing & financing activities	(3,318)	(4,815)
Net increase/(decrease) in cash & cash equivalents		
Cash & cash equivalents at beginning of year	(26,237)	94,948
Cash & cash equivalents at end of year	944,660	849,712
	918,423	944,660
This is represented by:		
BANK ACCOUNTS & CASH	918,423	944,660

Statement of financial cash flows

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of people we support are living alone in rented accommodation

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