

## SUMMARISED STATEMENT OF COMPREHENSIVE REVENUE AND EXPENSES

	2016	2015
	\$	
<b>Revenue from Exchange Transactions</b>		
Canterbury District Health Board	4,774,203	4,586,018
Ministry of Social Development	756,754	378,636
Accommodation/Rental/IRRS	1,037,668	974,526
Interest Received	18,994	31,929
Other Operating Revenue	40,530	30,284
	<u>6,628,150</u>	<u>6,001,393</u>
<b>Revenue from Non-exchange Transactions</b>		
RATA Foundation - Conditional Capital Grant	893,172	1,070,000
Social Housing Unit - Conditional Capital Grant	1,747,013	1,272,007
	<u>2,640,185</u>	<u>2,342,007</u>
<b>Total Revenue</b>	<u>9,268,335</u>	<u>8,343,400</u>
<b>Expenses</b>		
Audit Fees	8,722	9,863
Interest Expense	70,215	83,064
Rental Expense	481,565	417,865
Wages	3,698,125	3,315,075
Other Operating Expenses	1,424,533	1,416,339
Depreciation	364,891	343,650
Net Loss /(Gain) on Disposal of Fixed Assets	(5,048)	9,726
<b>Total Expenses</b>	<u>6,043,003</u>	<u>5,595,581</u>
<b>Total Surplus / (Deficit) for the Period</b>	<u>3,225,332</u>	<u>2,747,820</u>
<b>Other Comprehensive Revenue and Expense</b>		
Net Increase on Property Revaluation	2,522,190	-
<b>Other Comprehensive Revenue and Expense for the Period</b>	<u>2,522,190</u>	<u>-</u>
<b>Total Comprehensive Revenue and Expenses for the Period</b>	<u>5,747,522</u>	<u>2,747,820</u>

## SUMMARISED STATEMENT OF FINANCIAL POSITION

	2016	2015
	\$	\$
<b>ASSETS</b>		
<b>Current Assets</b>		
Cash & Cash Equivalents	431,887	1,690,036
Receivables from Exchange Transactions	810,527	537,320
Prepayments	145,669	135,687
<b>Total Current Assets</b>	<u>1,388,083</u>	<u>2,363,044</u>
<b>Non-current Assets</b>		
Property, Plant & Equipment	19,881,073	12,262,799
Building Work in Progress	2,783,136	2,939,349
<b>Total Non-current Assets</b>	<u>22,664,209</u>	<u>15,202,148</u>
<b>Total Assets</b>	<u>24,052,292</u>	<u>17,565,191</u>
<b>LIABILITIES</b>		
<b>Current Liabilities</b>		
Payables	1,550,534	721,271
GST Payable	113,633	99,508
Current Portion of Long-term Borrowings	139,249	104,611
<b>Total Current Liabilities</b>	<u>1,803,416</u>	<u>925,389</u>
<b>Non-current Liabilities</b>		
Term Loans	2,125,251	2,263,699
Suspensory Loans	279,764	279,764
<b>Total Non-current Liabilities</b>	<u>2,405,016</u>	<u>2,543,463</u>
<b>Total Liabilities</b>	<u>4,208,431</u>	<u>3,468,852</u>
<b>Net Assets</b>	<u>19,843,861</u>	<u>14,096,339</u>
<b>NET ASSETS/EQUITY</b>		
Accumulated Funds	14,019,064	10,793,732
Asset Revaluation Reserve	5,824,797	3,302,607
<b>Total Net Assets/Equity</b>	<u>19,843,861</u>	<u>14,096,339</u>

## SUMMARISED CASH FLOW STATEMENT

	2016	2015
	\$	\$
<b>Cash Flows from Operating Activities</b>		
<b>Receipts</b>		
Receipts from Non-exchange Transactions	2,555,185	2,342,007
Receipts from Exchange Transactions	6,429,961	5,958,315
	<u>8,985,146</u>	<u>8,300,322</u>
<b>Payments</b>		
Payments to Suppliers	1,081,969	2,033,719
Payments to Employees	3,698,125	3,315,075
Interest Paid	70,215	83,064
	<u>4,850,309</u>	<u>5,431,857</u>
<b>Net Cash Flows from Operating Activities</b>	<u>4,134,837</u>	<u>2,868,465</u>
<b>Cash Flows from Investing Activities</b>		
<b>Receipts</b>		
Sale of Fixed Assets	16,466	5,398
<b>Payments</b>		
Purchase of Fixed Assets	(164,328)	(164,429)
Building Work in Progress	(5,141,314)	(2,081,171)
<b>Net Cash Flows from Investing Activities</b>	<u>(5,289,177)</u>	<u>(2,240,202)</u>
<b>Cash Flows from Financing Activities</b>		
<b>Receipts</b>		
Loan Drawdown	420,000	1,150,000
<b>Payments</b>		
Loan Repayment	(523,810)	(817,026)
<b>Net Cash Flows from Financing Activities</b>	<u>(103,810)</u>	<u>332,974</u>
<b>Net Increase/(Decrease) in Cash and Cash Equivalents</b>	<u>(1,258,149)</u>	<u>961,236</u>
<b>Cash and Cash Equivalents at Beginning of Period</b>	<u>1,690,037</u>	<u>728,801</u>
<b>Cash and Cash Equivalents at End of Period</b>	<u>431,887</u>	<u>1,690,037</u>

## Comcare's Mission:

To contribute positively to the recovery of people who experience mental illness, through the provision of quality community services, social housing and by supporting mental health sector development

For more information on Comcare Services, please refer to [www.comcare.org.nz](http://www.comcare.org.nz)

## DIRECTORY

## Board 2016

Professor Andrew Hornblow (Patron/Trustee)

Assoc. Prof. Pauline Barnett (Chair)

Mr David Griffiths (Deputy Chair)

Mrs Sandy Lockhart

Dr Sue Nightingale

Mr Oliver Roberts

Mr Peter Young

Mr Murray Hendy

## CEO

Kay Fletcher

Office

251 Lichfield Street

PO Box 22 004

Christchurch 8140

Phone: 64 3 377 7020

Email: [enquiries@comcare.org.nz](mailto:enquiries@comcare.org.nz)

Website: [www.comcare.org.nz](http://www.comcare.org.nz)

## Auditor

Nexia Christchurch Ltd

## Solicitors

Trollope & Co

## Bank

Westpac

## Acknowledgements

We would like to acknowledge the significant support of the following organisations that enables Comcare Trust to continue its work on behalf of people who experience mental illness in Canterbury.

Canterbury District Health Board

Ministry of Social Development

Ministry of Business Innovation & Employment via Social Housing Unit

The Rātā Foundation

Supporting Families NZ



## Chair &amp; CEO Report 2016

Comcare's vision is for people who experience mental illness to live well.

Stated 30 years ago, this has as much resonance today as we strive to support our clients gain full citizenship; that is, the same access to employment, housing, healthcare, social and welfare supports as others in society. These elements, the crucial determinants of mental well-being form the basis of health planning today.

While continuing our work across each of these tranches, 2015-16 has been notable for our achievements in three areas: housing, access and coordination improvements for our sector, and physical health and wellbeing initiatives.

In housing, Comcare has formalised its transition to a registered Community Housing Provider with the development of a separate social housing division. This new team, by year end will have completed our 3 year project to build 60 one bedroom flats across 10 sites. Our thanks to the support of the Social Housing Unit and The Rātā Foundation for their significant financial contributions that, when joined with Comcare's resources, helped make this possible. Comcare is now well underway with planning its next project as the need for single person accommodation in Christchurch remains one of the highest in the country.

Moving our social housing to a separate division has enabled our Housing Support Service to focus on a much wider population. The team has contracted with MSD and CDHB to double our provision of short-term tenancies for those in urgent need, relieving congestion in inpatient services and assisting those in the general community in extreme housing need. In addition, new short term DHB funding is supporting those in high need get the assistance they need to navigate the MSD Housing Assessment process promptly, with an accurate description of their urgent housing status and support while waiting for a longer term housing solution.

In terms of access and coordination, Comcare has focused this year on refining its role as the intake portal for community support work and other services (CAP). This has successfully fostered collaboration between colleague provider organisations, provided real time data on sector capacity to funders, assisted primary care to navigate NGO services and significantly reduced wait time for service to clients. The success of this work is demonstrated by the continued development of coordinated access to services, now including household assistance and personal cares.

Physical health and well being initiatives have built on our endorsement of the national Equally Well campaign. This year Comcare has created momentum in this important area by asking all its services to review their practice and to incorporate a physical health and wellbeing dimension to their service plans, including providing regular education sessions for clients and staff together. Related to this, Peer Health Coaching, has been financially supported by Comcare's Board, as an independently evaluated pilot project. While we await the results of the pilot evaluation with interest, we have seen referrals increase as clients and referrers experience positive results. Comcare has been active in supporting the national champions of the Equally Well movement and we celebrate the recent 2016 TheMHS Award won by the initiative.

As always we thank those who generously support our organisation with time, creative thinking and funding support. We particularly acknowledge our on-going relationship with our major service funders, the Canterbury District Health Board. We also acknowledge our dedicated staff teams. Once again this year, have achieved exceptional levels of service and professionalism and are always thinking of how to go the 'extra mile'.

A special thank you to our Trustees who have the understanding of the wider role that Comcare can play in the community and who continue to support staff innovation in sector development and education, both nationally and locally.



Pauline Barnett  
Chair



Kay Fletcher  
Chief Executive



# Peer Health Coaching

Peer Health Coaching (PHC) began in May this year, and to date 18 clients have been referred and worked with coaches to achieve a specific and defined physical health goal. Coaches and clients meet either on a weekly or fortnightly basis, for six hour-long sessions as well as a pre and post programme meeting. Together they work to identify and refine the client's health goal, and to create action steps for the client to work on each week.

Three clients have completed the programme and all have reported making lifestyle changes to help them achieve their goal. Of the three, two clients achieved their goal within the PHC period. The third client reported that they were progressing toward their goal, and felt confident they would be able continue to work toward it independently.

Clients have spoken positively about the PHC process, and especially about the work of the coaches, with all reporting that their coach met or exceeded their expectations. One client reported that their coach has 'helped me to look after myself,' with weight loss and increased fitness reported as an outcome. Another reported that their coach was a 'huge positive influence' and was a 'calming presence who came across as a real person who was at my side'.



Peer Health Coaching



PEOPLE OFFERED EMERGENCY HOUSING 98



2,165 CLIENTS RECEIVED SERVICES

# Comcare Board of Trustees



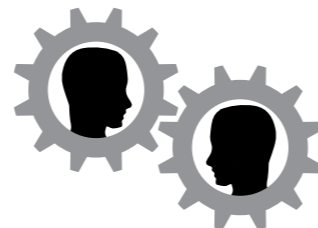
L to R - M Hendy, P Young, P Barnett, A Hornblow, P Renison, O Roberts, D Griffiths, S Lockhart



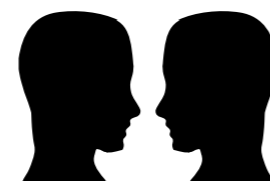
CLIENTS RECEIVED COMMUNITY SUPPORT 690



SOCIAL HOUSING TENANCIES 141



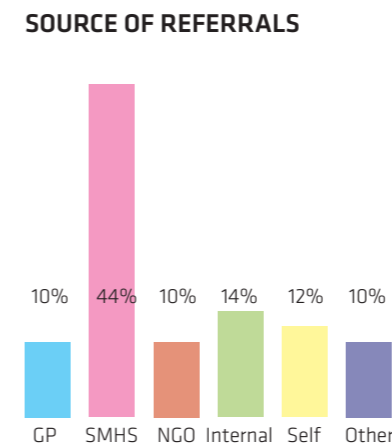
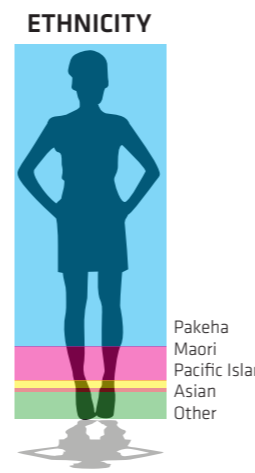
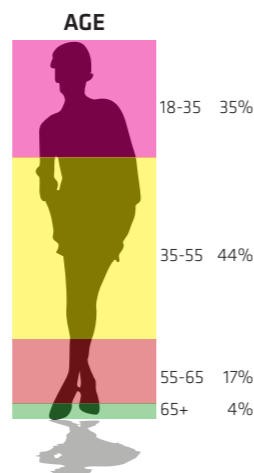
CLIENTS SUPPORTED INTO WORK 164



CLIENTS RECEIVED PEER SUPPORT 187



CALLS TO WARMLINE 6,094



# Equally Well

This year Equally Well was embedded in Comcare's work with its clients through monthly presentations for staff and clients, the introduction of a Health Prompt to assist and support clients address any physical health issues. Each service has developed its own action plan related to the type of work it does with clients to help improve the physical health outcomes of the people we work with.



# Housing

This year, 24 single person flats and a 4 bedroom house were completed and tenanted.



# Property Management Services

Comcare partnered with Ngai Tahu to provide property management services for a Whanau housing project on Lincoln Rd. The first family moved in in June.



# Urgent Housing

Comcare was one of three local providers awarded a CDHB contract to provide support and housing facilitation services for clients in urgent housing need post-earthquake.

# Homebased Support

In July, Comcare began coordinating homebased support for people with mental illness through the Community Support Access Pathway (CAP).

# Dr Sue Nightingale

In August, Dr Sue Nightingale resigned as Trustee from Comcare's Board. Sue's contribution to the governance of Comcare during her time as a Trustee has been instrumental in shaping the work we do in our community. Sue's wisdom and insight will be greatly missed and we wish her every success in her new role as Chief Medical Officer at Canterbury District Health Board.



# Peri Renison

In October, Peri Renison joined the Board as a Trustee. Peri is well known across Specialist Mental Health Services having worked as a psychiatrist in Christchurch for almost 20 years. Peri is now the Chief of Psychiatry with the CDHB and Director of Area Mental Health Services for Canterbury.



# TheMHS Conference

In August, eight members of staff from across the organisation attended the TheMHS Conference in Auckland.



COMCARE 2016 HIGHLIGHTS