



ANNUAL REPORT & QUALITY ACCOUNT

2020 - 2021



Waipuna Hospice looked after me and did an amazing job of making me feel cared for, both medically and emotionally. If something is wrong, I know I can call Waipuna Hospice.

JAN GARRETT

Past Waipuna Hospice patient

GLOSSARY

IDT - Interdisciplinary Team

Palliative care - care for the terminally ill and their families

IPU - Inpatient Unit

SLT - Senior Leadership Team

DHB - District Health Board

Respite - Short-term period of rest or relief for primary caregivers

ARC - Aged Residential Care

PPE - Personal Protective Equipment

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YOUR WAIPUNA HOSPICE



SERVICES

Waipuna Hospice provides specialist palliative care for patients living with a life-limiting illness, and support services for them and their families and whānau. Our geographical area covers Waihi Beach to Paengaroa. Waipuna Hospice care is effective, equitable, valued, and accessible to all people in Tauranga and the Western Bay of Plenty regardless of age, gender, diagnosis, or ethnicity.

PEOPLE

Waipuna Hospice attracts, develops, and retains a high performing and engaged interdisciplinary team of staff and volunteers.

PARTNERS

Waipuna Hospice has sustainable relationships with key stakeholders across our region, including the Bay of Plenty District Health Board, local businesses, health providers, iwi, and our communities. We deliver care in partnership with a patient's primary healthcare team and alongside any other specialist teams involved.

DIVERSE COMMUNITY

Waipuna Hospice reflects the diversity of our communities in every aspect of our business.

FINANCES

Waipuna Hospice demonstrates strong financial stewardship while providing for the future needs of our community.

Vision

High quality
end of life care
for all

Mission

To provide the best
possible specialist
hospice palliative
care, enhancing the
quality of life for
those facing end of
life and bereavement

Values

Community
Advocacy
Respect
Empathy
Quality

A YEAR IN REVIEW

959

TOTAL PATIENTS

7,794

NURSE VISITS

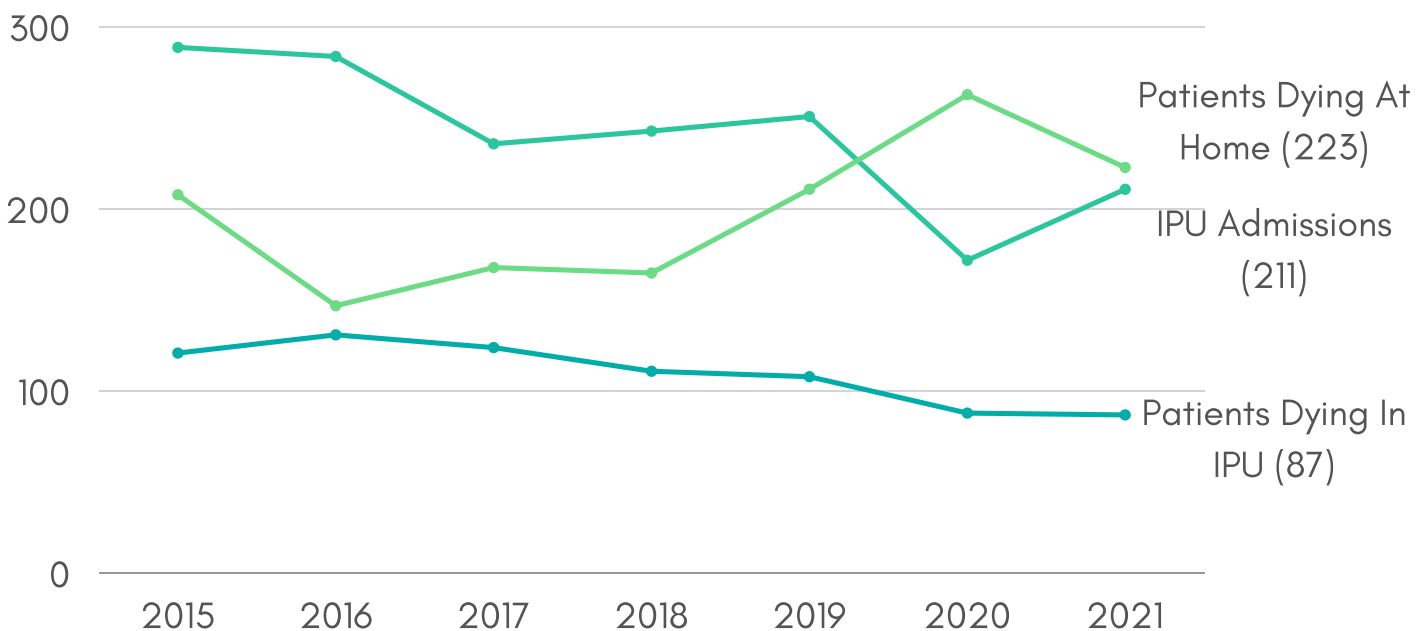
15,019

PHONE CALLS

3,886

FAMILY SUPPORT CONTACTS

Patient Trends



4,845

people, their family and whānau were supported by Waipuna Hospice last year.

252,826

KM TRAVELLED BY OUR TEAM

211

INPATIENT ADMISSIONS

928

CURRENT VOLUNTEERS

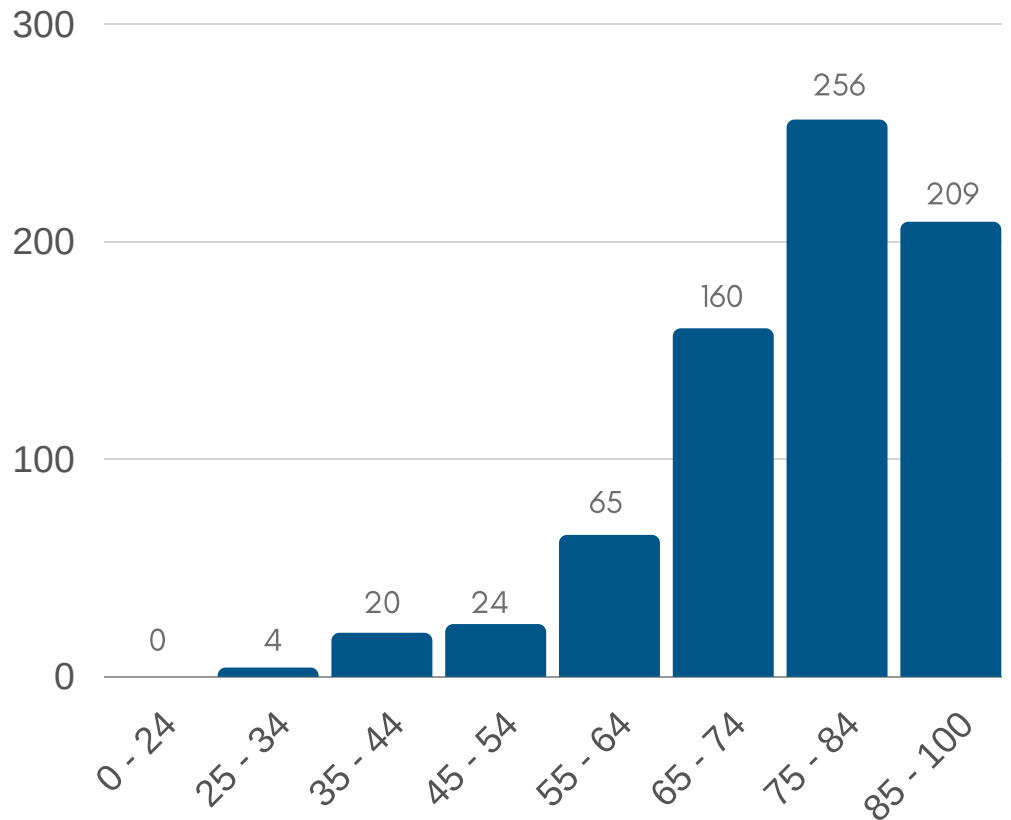
8.15

AVERAGE DAYS IN IPU

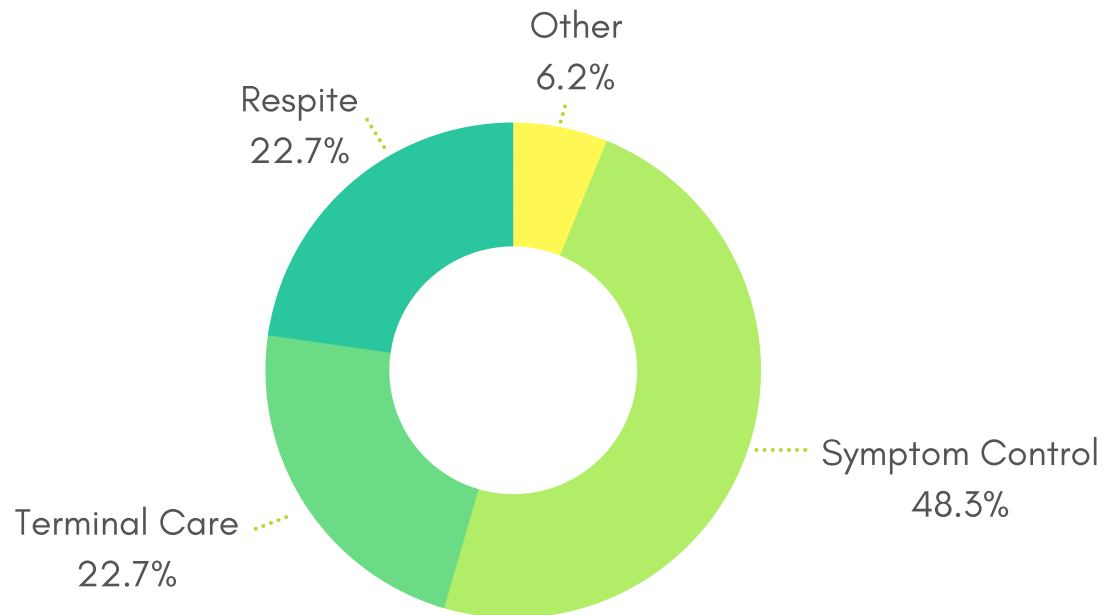
738

REFERRALS

New Patient Referrals By Age



Reasons For Admission To IPU





CHAIRPERSON REPORT

This year commenced with the COVID-19 lockdown of March 2020 behind us, but with an air of uncertainty nevertheless present as we continued to deal with its ongoing presence.

The Board and the Senior Leadership Team commenced the year with a focus on setting the strategic plan for Waipuna Hospice for the short, medium and long term. The strategy maintains the vision of high-quality end of life care for all and is split into six delivery areas including our services, people, partners, diverse community, finances, and facilities.

In these key areas, our services are now delivered through an interdisciplinary team model which looks to provide the services needed by hospice patients on a needs basis (e.g. in a particular case the needs may be of a social work nature).

A review of this model and patient and whānau feedback suggests that this model is working well, and is working predominantly in the home.

Like all organisations, recruitment in a COVID-19 environment has proved to be challenging, but finance wise Waipuna Hospice reported a strong end to the financial year. Against all odds, or perhaps due to the environment after the lockdown, the retail shops have performed extremely well and delivered great results. The volunteer effort for Waipuna Hospice is greatly appreciated.

This has been my first year as Chair of Waipuna Hospice and it has been a very rewarding role. Waipuna Hospice enjoys immense support from its community and I thank all our staff, volunteers, board, donors, partners, and supporters.

VANESSA HAMM
Chairperson



CEO REPORT

I had hoped that this report would not have to mention that “tricky little virus” but as we all know COVID-19 continues to ravage the world and have a significant impact on NZ.

Waipuna Hospice staff and volunteers have rallied in this last financial year to ensure that the organisation is looking ahead and is able to provide the services our community wants and expects at the end of their loved ones' lives. This has happened against a backdrop of a delayed mental health crisis due to the impact of restrictions on our lives – I am sure I am not alone in recognising that it seems to have been harder in some respects than it was during the initial lockdown.

But we push through, work together and support each other as we move into a new era for healthcare. Recent reforms announced by the Minister of Health will undoubtedly have impacts on the services funded and provided by Waipuna Hospice.

Our aim is to be part of the future and influence where we can for the best possible specialist hospice services for our region, our patients and their families and whānau.

The Board and SLT completed a refresh of our strategy this year, to start from 1 July 2022. This strategy focuses on six themes: our services, our people, our partners, our diverse community, our finances and our facilities. Each of these areas allows the organisation to remain focused on what our stakeholders need to provide the best possible palliative care.

In the second half of the financial year, the Waipuna Hospice Board approved a change to our senior leadership team. They agreed to provide additional leadership capacity for the team who support what is a team of considerable size – now nearly 160 employees. Plus, with nearly 1000 volunteers we are reaching a point

where we need to ensure the suitable capacity of our support teams as well as our clinical teams. These changes will help the organisation move into the next 20 years of care provision where current projections show a 50% increase in the number of deaths in New Zealand. We have to be prepared and build suitable capacity for this huge growth in patient numbers in the coming years.

Lastly, I want to thank the whole team for their hard work this year – from the retail team who continue to provide amazing results, allowing Waipuna Hospice to provide such an excellent service, to the fundraising and marketing team who work across the organisation raising funds for and awareness of our services. From the clinical teams who have consolidated our new interdisciplinary team model introduced at the end of the last financial year, to the volunteer teams

who work in so many aspects of the organisation from the board to reception, patient support, our shops and our depot. Also, thanks to the senior leadership and clinical leadership teams for providing leadership of the highest level to ensure that Waipuna Hospice is meeting the needs of our community.

**Thank you to you all –
and thank you to our
community, without
which Waipuna Hospice
could not provide such a
wonderful service.**



RICHARD THURLOW
CEO





“

The support, strength, and love that comes from Waipuna Hospice is incredible. There is nothing quite like it.

DENYS MOSS
Waipuna Hospice patient

CLINICAL SERVICES



CLINICAL TEAM REPORT

This past financial year has been somewhat extraordinary for the Waipuna Hospice clinical team. The team coped commendably with the many challenges that the COVID-19 pandemic imposed.

The new financial year saw the clinical team establish a new equilibrium; a single team divided into three interdisciplinary community teams.

The inpatient unit, which had temporarily closed during COVID-19 lockdown level four, reopened with a reduced number of inpatient beds allowing some of our resources to be redirected into patient's homes.

Waipuna Hospice recognised some years ago that the needs of our patients in the community were changing, and we had to adapt to meet this change.

Not only was there an increase in medical complexity, but there was an escalating need at a family, whānau, and caregiver level.

The team identified that a patient in their own home potentially needed the same level of care and support as a patient in the Inpatient Unit did and that we needed to expand the available resources in the patient's home. Therefore, a project to expand the interdisciplinary support of Waipuna Hospice for patients in the community began and led to the development of three interdisciplinary teams servicing the WBOP rather than a single community team.



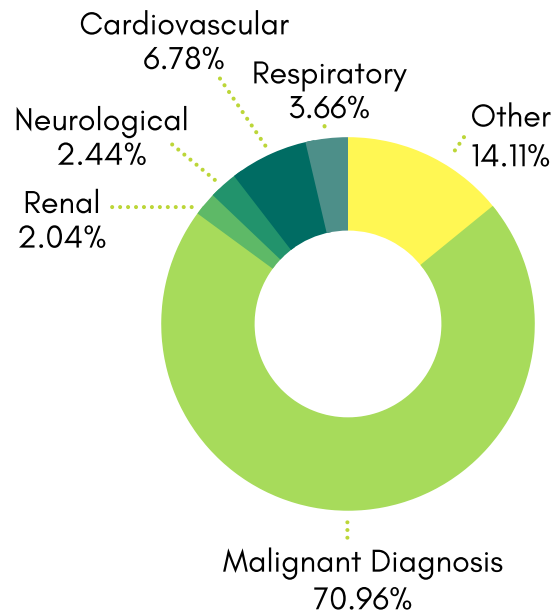
Each community team is now resourced with a social worker and counsellor alongside three community nurses, a nurse practitioner, and a clinical nurse specialist. There is also a medical officer/senior medical officer available for support, and teams have access to allied health and cultural and spiritual support for patients. Our clinical pharmacist is also able to contribute to a number of interdisciplinary discussions.

The clinical team would like to express its gratitude as so much of this change occurred over a short timeframe. The financial year commencing July 2020, therefore, has been the first real test of this revised community service delivery model.

It is pleasing to report that the community interdisciplinary team model has been a resounding success. An audit of clinical files suggests that most patients benefit from the involvement of multiple disciplines, and a number of patients have more



Primary Diagnosis



Almost

30%

of our patients have a primary diagnosis that isn't cancer.

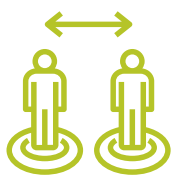
complex needs that require input from several disciplines staggered over time.

An increasing percentage of patients that are admitted into our Inpatient Unit are admitted due to carer crisis needs or the patient may be in their final days of life. This increase could be due to the fact that many patients have elderly caregivers (often a spouse) and providing around the clock care support in a home remains challenging for the healthcare system.

To help our community, Waipuna Hospice often visits patients daily and

on occasions can use a night nurse in the home overnight but ultimately we have finite resources here. Waipuna Hospice is carefully monitoring the demands on its inpatient beds to ensure that we retain sufficient resources to appropriately meet the specialist palliative care needs of the community.

The “post-COVID” world has seen changes in work pressures, personal expectations, job opportunities, and so forth. We have gained incredible nurses with a vast array of experiences and retained an experienced medical team although recruitment of an additional senior medical officer seems challenging in the current environment.

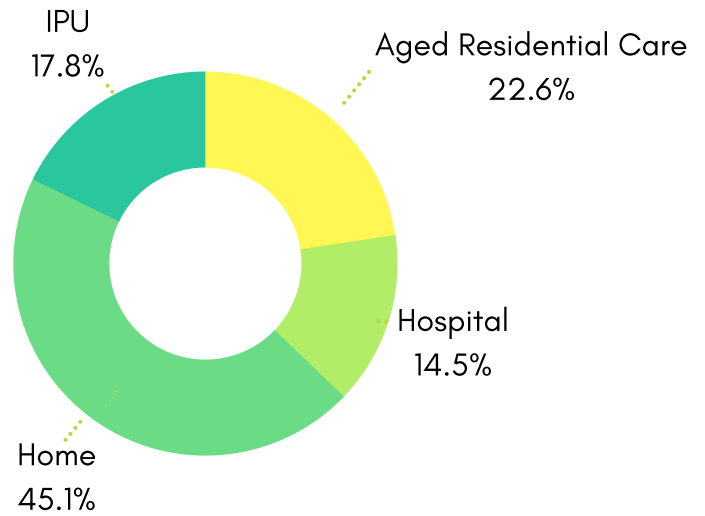


34-97

AGE RANGE OF PATIENTS ADMITTED INTO IPU

AVERAGE AGE: 73.7

Place of Death



We are valuing the input from the nurse practitioners, and all the team participants as a whole.

Waipuna Hospice couldn't imagine moving forward into the future without a strong interdisciplinary team approach to add value to patients, family, whānau, and carers.

Our focus going forward is to consolidate the interdisciplinary model of care for the remainder of the year whilst building greater networks within our community.





MEDICAL TEAM REPORT

There has been a significant shift in the medical team's focus over the past 12 months. Direct review and contribution to patient care remain foremost but an expanding component of the medical role is the "behind the scenes" support of the interdisciplinary team. When we share medical knowledge with the greater team it allows for increased planning and anticipatory care; potentially reducing the number of medical emergencies or periods of compromised symptom control in the patient's home. Increasingly, the medical team is working through the community nurse or nurse practitioner team and this model allows for a smaller resource to have a larger impact.

The medical team continues to contribute widely in the areas of education and training.



Small group training occurs several times each year (e.g. fourth-year medical students). In contrast, trainee interns (final year medical students) benefit from clinical attachments to Waipuna Hospice which are typically 6 weeks placements. This allows for contributions to inpatient care as well as care and assessments in the patient's own home.

Often a Waipuna Hospice attachment will be the student's first real exposure to an interdisciplinary team in action; a significant learning outcome by itself.

A research initiative driven by senior medical officer Dr Vicki Jones in collaboration with the University of Auckland is underway with funding attached to this project allowing for the appointment of a part-time research nurse.

This research is centred around what measures an inpatient hospice might take to help minimise confusional disorders in patients; it is research of

this nature that helps improve patient care and caregiver burden going into the future.

The Waipuna Hospice medical team remains small with a mix of SMO (senior medical officers with palliative medicine specialty training), and medical officer support. We also value the contribution made by our second-year house officers who rotate each quarter from the hospital.



1440

HOUSE OFFICER HOURS

"I have such admiration for all the work you do and am so appreciative of how welcome you made me feel. I will take these learnings and experiences with me and be sure to implement them in my work someday. In the meantime, I know they have made me a better Junior Doctor."

- KELSEY RAO,
house officer



NURSING TEAM REPORT

The changing of the guard has occurred at Waipuna Hospice in the last 12 months, as we said goodbye to some incredibly dedicated nurses that have worked for the most part of their 50-year nursing career with us at Waipuna Hospice. We feel extremely privileged that they chose Waipuna Hospice and that we could celebrate such an illustrious career with them.

Nurses are often humble by nature, so we really want to recognize and acknowledge those Nurses. Their contributions towards hospice care in our community are commendable.

We recognise a lot of change has occurred due to both the IDT model and saying goodbye to some of our longstanding nurses. Through this change, a “one team” approach has been embedded.



Our nursing staff have really supported each other and our patients by being flexible and increasing skills and knowledge to be able to work both in the community and the Inpatient Unit. We have been incredibly fortunate to recruit an amazing team.

A component of this recruitment has included an increase in nurse practitioners at Waipuna Hospice.

This creates exciting development opportunities and increased specialist palliative care skills supporting our staff and raising the bar for patient centered care in the community.





FAMILY SUPPORT REPORT

At Waipuna Hospice, our care is provided by an interdisciplinary team of staff who offer support and expertise with an emphasis on the whole person - physical, social, cultural, emotional and spiritual. The interdisciplinary team model enables our patients to benefit from a team of highly skilled professionals that have knowledge of the latest tools, research and best practice models to support patients to be able to achieve their goals, have pain and symptoms managed and have timely access to psycho-social and spiritual support.

With a dynamic group of 17 highly trained and qualified allied health professionals and support staff, the family support team plays a key part in the Waipuna Hospice interdisciplinary model. Our department includes five



3,886

FAMILY SUPPORT CONTACTS

social workers, two physiotherapists, two occupational therapists, five counsellors, a chaplain, and a kai whakamaru (Maori Liaison), meaning we are able to help and support our patients and their whānau in a variety of meaningful ways.

The interdisciplinary team model enables us to methodically plan and look to the future to ensure that we can continue to predict and respond to our community's needs, through providing a high level of service to our patients and their families/whānau within their environment of choice.

In 2021 the family support team had 3,886 contacts with patients and their families/whānau, which included 2115 community visits and 1771 phone calls.

Our team also holds a number of specialisations, including lymphedema massage, adolescent grief counselling, art in therapy, hand therapy, couples counselling and play therapy. The number of lymphedema referrals has progressively increased over the past three years, from 60 in 2018/19, 67 in 2019/20, and 77 in this financial year. We have met this increase in demand by employing a new Physiotherapist who specialises in this field.

We also have a designated 'Play Therapy Room' to support children in our community. Play therapy offers a safe and supportive space for children, designed to encourage the expression of thoughts, feelings and experiences through play and creativity. This allows children to process feelings at their own pace, in their own unique way.



Feelings of loss can be scary for children; however, with play therapy, they can distance themselves from the loss through symbolic play, for example, by making a character feel sad. In this way, children can process their feelings without confronting them directly. As a by-product, this supports the psychological wellbeing of their parents and the wider family/whānau as they also try and process their loss.



1771

**FAMILY SUPPORT
PHONE CALLS**



2115

**FAMILY SUPPORT
VISITS**

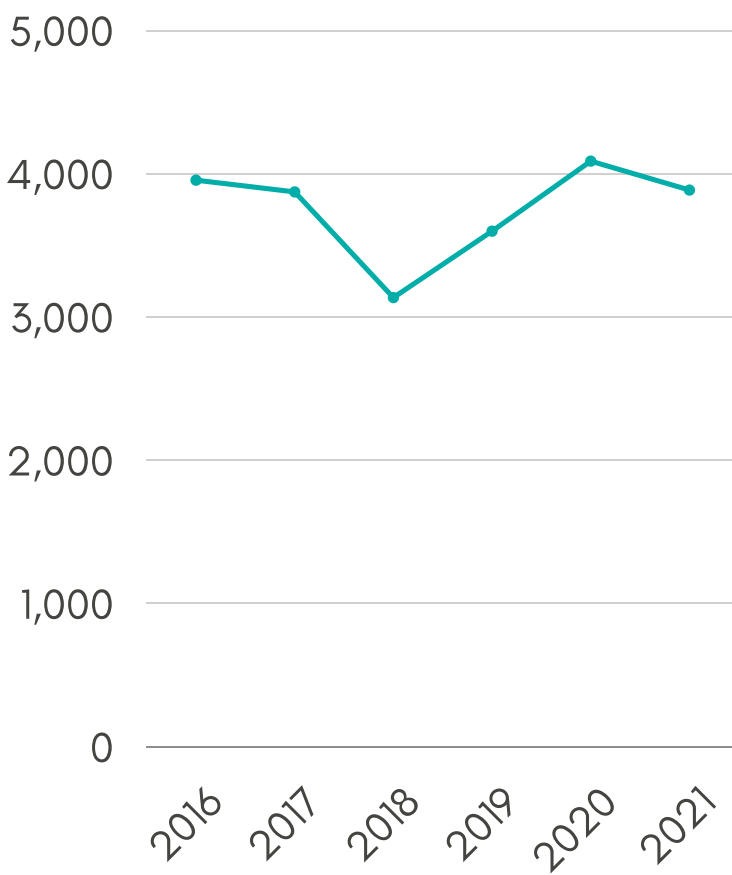
The number of referrals to our Child and Adolescent Counsellor has also progressively increased over the past two years. In 2020/21 the total number of referrals was 42, in comparison to 20 referrals received in 2019/2020.

Our team is fully invested in supporting whānau through facilitating various education sessions. We are also committed to working with various tertiary education providers and building professional practices within our Allied Health disciplines. We currently have a fourth year social work student and a third year counselling student on placement with

us at Waipuna Hospice.

It is very important that we build a greater level of understanding of the uniqueness of hospice care, and why it should be supported and continually developed as a community service, to ensure that it can be easily accessed by those who need it the most, now and into the future.

FAMILY SUPPORT CONTACTS MADE



"Working in an interdisciplinary team was particularly valuable due to the contribution of perspectives from a variety of professionals.

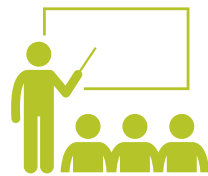
This placement reinforced the value of the social work perspective and skills at the decision-making table, and when working with patients and their families. Thank you Waipuna Hospice for a great placement".

- Rachael Anderson
4th year Social Work student





EDUCATION REPORT



47

TRAINING COURSES HELD

In the last year, Waipuna Hospice has strived to actively engage our external providers in our educational programs and continue to provide a range of education initiatives. These include the Hospice New Zealand programs (Fundamentals of Palliative Care for Health Professionals, Palliative Care for Health Care Assistant's and The Syringe Driver Medication Competency Workshop) as well as our Wound Management Workshop, Carer Workshop and Palliative Care Study Days for aged residential care facilities (ARC), facilitated with the PHO.

This year we have had a total number of 453 people participate in our education programs and sessions across a total of 47 days.

18 sessions have been held off-site, predominantly in ARC facilities. There was some postponement of courses and reduction in participant numbers in 2020 due to the COVID-19 pandemic.

In May/June 2021, we were fortunate to be part of the Hospice NZ and Hospice Waikato's working group for the Syringe Driver Medication Online Training (administration component) pilot. This blended learning approach to education is the way of the future and it has been exciting to play a part.

We also had the exciting opportunity to develop carer resource videos this year for the purpose of assisting family and whānau home carers, empowering them to feel more confident in undertaking care tasks.

To support the transition of the new interdisciplinary team model, we have had a significant focus on internal education over the past year too. We actively support professional development and are committed to providing education to all staff regardless of where they are in their career path. In recognition of the importance of upskilling our nurses, we conducted a number of study days to specifically cater to and support our staff. The focus was on both general organisational processes as well as looking at palliative care assessments and how we manage common symptoms in the palliative care setting.

In February we developed and commenced delivery of a mandatory Clinical Communication Skills Course for our clinical staff. This course incorporates advanced communication skills to assist with goals of care conversations.

A second component of the day is the Health, Quality and Safety Commissions Serious Illness Conversation Guide training.



453

TRAINING COURSE PARTICIPANTS

Part of this involves scenarios with the use of role-play and we would like to acknowledge the volunteer actors who share their time to assist us.

The overall aim of this training is to improve the timing and quality of conversations between patients, their families, whānau and our clinicians.

We continue providing regular in-service training to our staff on a variety of clinical and service delivery topics. We also have medical led case reflection forums on complex cases and short case study sessions focussing on disease progression, clinical assessment and complex symptoms. A big thank you to Jack Drummond, our medical officer for providing this.



MY HOSPICE JOURNEY: **JAN GARRETT**

Facing a terminal diagnosis alone isn't something any of us want to think about. However, having no family to turn to, no shoulder to cry on, and no hand to hold when things become too painful is an agonising reality for many. When Jan Garrett was diagnosed with terminal cancer she prepared to face it alone, with just her dog Honey for support. That is however until Waipuna Hospice began to care for her.

Jan was diagnosed with bowel cancer, and because she also suffered from several other conditions, there was nothing her doctors could do. So, Jan was referred to Waipuna Hospice.

"I didn't really know or understand what I was in for when my Doctor first suggested Waipuna Hospice. I had no conception of what was going to happen to me, or how my symptoms would develop."

After believing nothing could be done to help her, Jan was a little dubious of hospice care at the start.

"I suffer from fluid build-up in my legs. At one point my legs were almost double in size, and they felt like they were going to burst. I couldn't even touch them because the pain was excruciating. Then a nurse from Waipuna Hospice came to see me and offered to try lymphatic massage to help remove the excess fluid. I didn't



really believe that a massage was going to help, but I could feel the improvement instantly. The pain eased quite quickly and I could touch my legs again without being in agony. **I like to call hospice my miracle workers.**"

"I think that Waipuna Hospice helped me cope. They relieved my pain and symptoms so that my body could focus on keeping me alive longer".

"I am a widow who grew up an orphan, so I don't have any family around me. I am on my own completely. It's just me and my dog, and that was really scary until hospice started caring for me. They are there to check in with me, have a chat, and ease any pain I may be in, both physically and emotionally. **I know death is coming, and I am frightened to die, but I feel better knowing hospice is there to help.**"

We would like to thank Jan Garrett for sharing her story with us. Jan Garrett died 27/04/21.

“

Volunteers help Waipuna Hospice function. Without them we would just be a clinic of some kind. We would not be this big, pulsing heart.

SUE POLLARD

Waipuna Hospice volunteer, past employee and mother of patient.



VOLUNTEER REPORT



Our Volunteers bring unique perspectives and contributions and there is no stronger representation of generosity than in our 920 strong team. Some members of the team work in a regular role, others on an as-needed basis. Whatever their contribution every bit counts.

Their impact is difficult to capture, as the numbers do not truly represent the full contribution. Behind the numbers, we see the loyalty, kindness, flexibility, skills and talents; and many instances of people going the extra mile to help. Both staff and patients and their families have benefited hugely from our volunteers' generosity.

We have a strong and stable team of volunteers supporting patients in the community as drivers, visitors and biographers. We'd like to make a special thanks to our volunteer drivers who travelled 20,957 kilometres in their own vehicles for the benefit of our patients and families. Our retail volunteers are a more fluid team and the recruitment of volunteers



928
VOLUNTEERS



85,802
VOLUNTEER HOURS

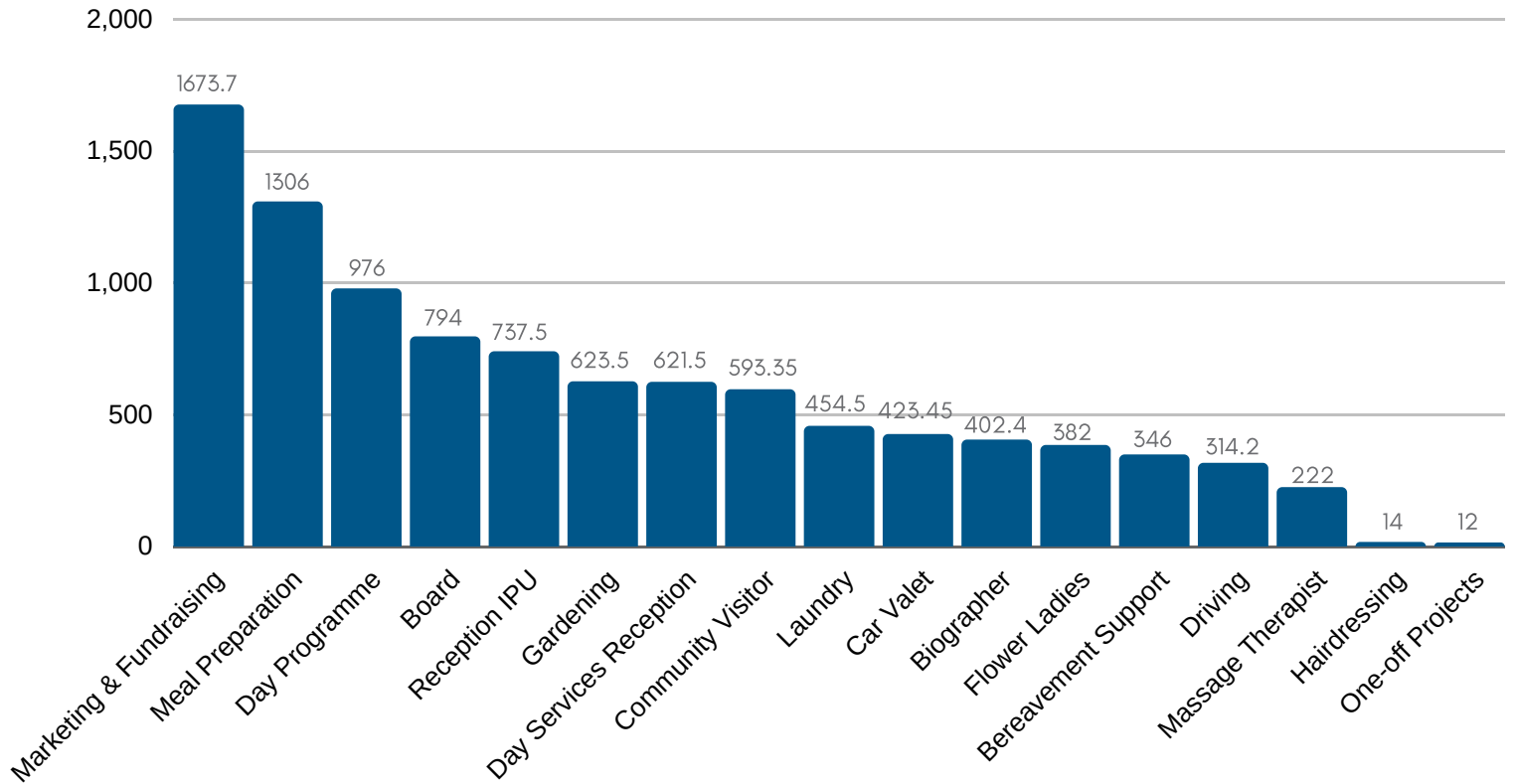
to work in our charity shops and depot is an ongoing challenge.

We continue to provide a volunteer education programme for all volunteers and peer support meetings for our patient-facing volunteers. This is one way we can give back to our volunteers.

I would like to again extend our thanks for their hard work and commitment which brings such enormous value to Waipuna Hospice.

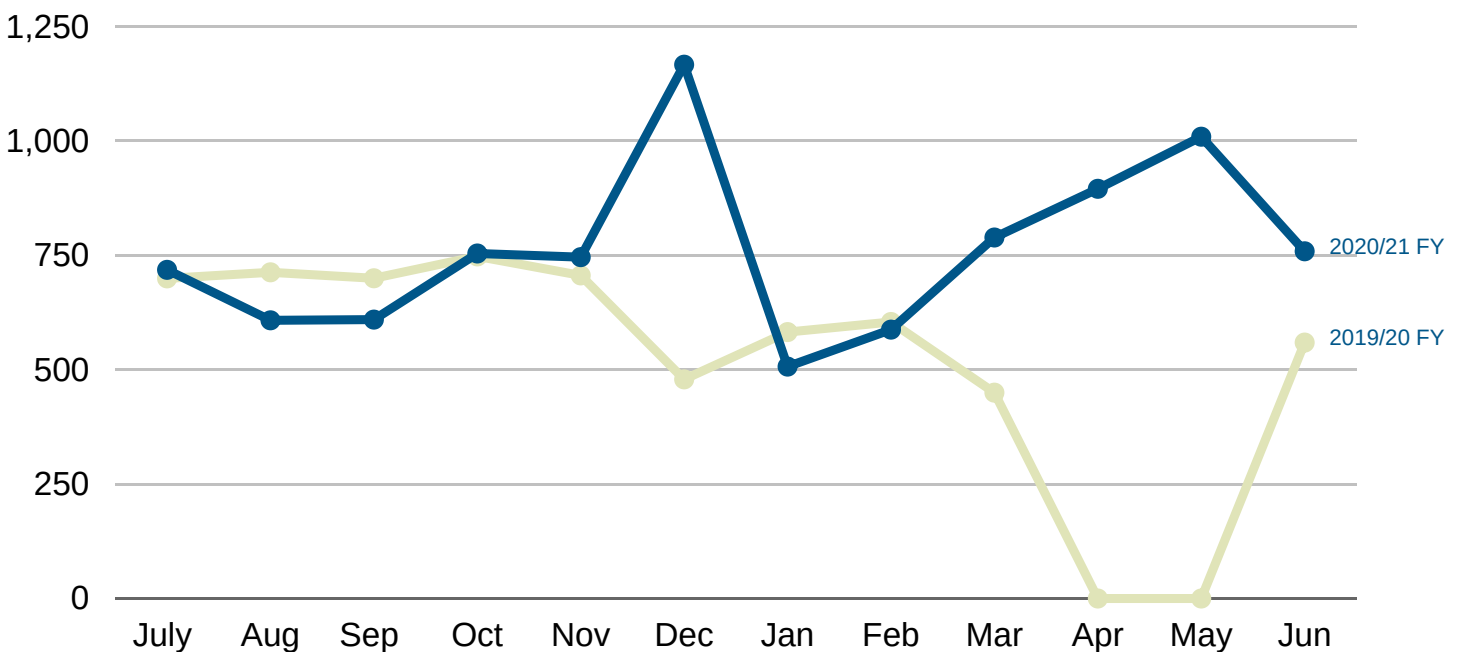
Palliative Care, Operations, & Admin Volunteer Hours

Excludes Retail data, which can be found on pages 31-32.



Palliative Care, Operations, and Admin Volunteer Hours By Month

Excludes Retail data, which can be found on pages 31-32.



MY HOSPICE JOURNEY: WARWICK MACKAY

Warwick Mackay has been a Waipuna Hospice volunteer for over 14 years, working in our retail sector and helping us raise necessary funds to support our community.

Warwick first heard about Waipuna hospice when a close friend was referred as a patient. After seeing the level of care provided, Warwick went on to become a Waipuna Hospice member, then later a volunteer.

During Warwick's time as a charity shop volunteer, he has seen and done it all.

“Over the years I've done just about everything involved in being a shop volunteer. From helping refurbish our shops, to making deliveries, picking up donations, fixing furniture and weed eater motors, helping on the till, stocking shelves, repainting goods...the list goes on. **You name it, I've done it”.**

“The most rewarding thing about being a volunteer for me is the people, both within the team and our customers. Waipuna Hospice isn't tied to one interest group, meaning our team and customers come from all walks of life. Every day I learn more about different people whom I work with as a volunteer. It's just so interesting.”



“I also enjoy encouraging people to realise that charity shops aren't junk shops. It's actually repurposing quality goods that would otherwise go to landfill - I find that very rewarding”.

For Warwick, volunteering is an important way for him to stay connected and active in the community during retirement.

“As we get older it's important that we stay in the cycle of life and continue to have worth. Some people find that difficult when they don't have a job. It's so important to get involved.

Volunteering gives us new friendships, new relationships, and new ideas from people who come from new walks of life. Volunteering gives us the chance to learn from that and find a new sense of worth in retirement”.

We would like to thank Warwick for sharing his story with us.

“

We were very moved by the level of care and compassion shown by Waipuna Hospice and are so grateful that this service was available at such a heavy family time, and at no cost.

JAMIE KELL

*Waipuna Hospice Fundraiser
Blue Lakes 24 Hour Running Challenge*



MARKETING & FUNDRAISING



Waipuna Hospice estimates the cost of providing end of life care in our region in 2021 will be \$10.1 million – a figure predicted to increase in the coming years. We have worked hard to raise funds and increase our effectiveness through strategic fundraising methods such as direct mail appeals, investing time and effort to develop third party fundraising partnerships, and improving our online and digital platforms. While there is no denying the pandemic has had and will continue to have, a significant impact on our capabilities, we've made plenty of progress in many areas of our marketing and fundraising activities.

We responded quickly and efficiently to the restrictions of lockdown. The evolving landscape meant we had to look to engage supporters in new ways and we've had significant achievements in our individual giving and bequest programmes.

The incredible support of all our donors helped Waipuna Hospice enormously this year, particularly during the height of the pandemic.

Your support when we urgently needed you was incredibly humbling.

You responded to our urgent COVID-19 appeal and donated over \$74,000 which gave us the ability to continue delivering care to people when they needed us most.

We can't thank everyone enough for continuing to support us through what was a challenging time, not only for us but for everyone.

The success of our Palliative Care in Compassionate Community Symposium raised the profile of Waipuna Hospice and demonstrated our leadership in providing specialist palliative care.

Throughout the year we created successful marketing campaigns and communications to build awareness, empathy and support of Waipuna Hospice and the services available.

As we operate in a time of rapid change, the intention is to continue increasing income streams through traditional and digital channels, in an integrated way, to better reach our audiences. Ensuring we enrich engagement, and grow giving opportunities, innovation in this area will continue to expand. We will continue to strengthen our relationships with key partners, corporate partners, grant-giving bodies, and our vital donors. Their incredible generosity continues to humble us, but we know the pandemic will have a lasting economic impact on many people and organisations and will affect our ongoing fundraising efforts. Those efforts have held up well, but we need more supporters, great and small, to ensure we keep up the standards of services and our campaigning ability in the future.

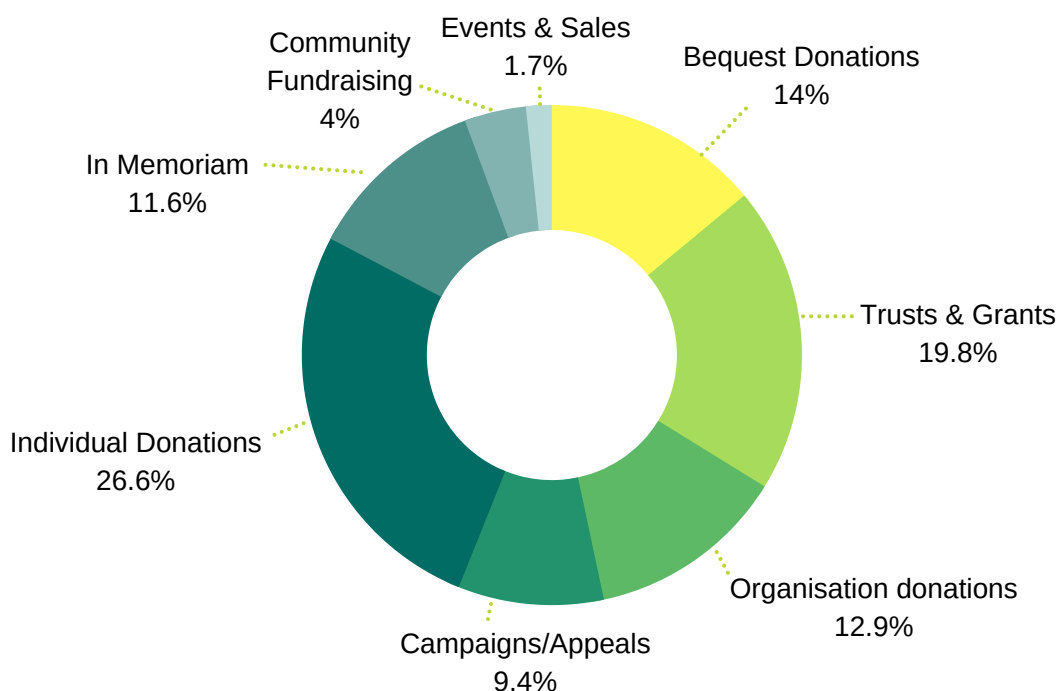
As a member of the Fundraising Institute of New Zealand, we are proud

that at all times we reflect and follow the professionalism and ethical fundraising practices that all members abide by when communicating with donors and supporters. We carefully steward the donations we receive from supporters like you. We are committed to investing your contributions efficiently and effectively to support terminally ill patients and their families in our community.

All the achievements listed in this year's annual report have only been made possible by the ongoing generosity of our supporters. With your support, we can continue to tackle challenges, refocus and rebuild priorities, while continuing to deliver excellence. Together we are making, and will continue to make, a real difference to the lives of people in Tauranga Western Bay of Plenty.

We're humbled by your generosity and support and would like to extend a heartfelt thank you from us all.

Income Summary



MY HOSPICE JOURNEY: **DEBRA MCLEAN**

"I can't put into words how much Waipuna Hospice helped us in the final 24 days of Phil's life, but I can hopefully help them be there for others in the future by fundraising". - Debra McLean

Phil McLean spent his final 24 days cared for by Waipuna Hospice. Then his wife Debra decided to give back by planning a 24-hour fundraiser.

"I had known Phil since I was knee-high to a grasshopper, but we didn't get together until much later after life had taught us a few lessons. **We were soul mates**", says Debra.

"When Phil was diagnosed with stage four bowel cancer in 2018 he wanted to be at home and make the most of the life he had left in his own space. With the help of Waipuna Hospice that was possible. Every day a nurse would come over to help with pain relief, assess Phil's situation, and check that everything was okay. They would always take their time to just be there."

"Any time, day or night, they were only a phone call away, for advice, or just a chat. **They always went above and beyond to make sure that not only Phil, but the whole family was okay**".

Eventually, Phil lost his battle and died on the 8th of February 2021.

"Life has been really hard since Phil



passed away, but the care and support from Waipuna Hospice has continued for myself and my three boys, from counselling to massages".

To honour their care, Debra decided to plan a 24-hour walking fundraiser.

"Services like Waipuna Hospice wouldn't exist without support from the community. That thought is what made me want to support them – they helped Phil and me so much, so I knew I had to do something to help."

"I can't put into words how much Waipuna Hospice helped us, but I can hopefully help them be there for others in the future with this fundraiser. I did this for them, and to honour Phil".

Debra raised over \$8,000 for Waipuna Hospice with her fundraiser, which will help us support others in the future.

We would like to thank Debra for sharing her story with us.

“

This is a regular for us and we always come away with something useful at a good price. Waipuna Hospice offers a vital and wonderful service to the community.

MARK W
Online review



RETAIL



We have had another great year in retail achieving well above our expectations in an environment of uncertainty as we came out of COVID lockdowns and the associated ongoing disruptions.

As we came into this new financial year, nobody knew what the economy would be like as the world struggled with lockdowns and illness. Thanks to our staff and volunteers, and the support from our wonderful community our retail sector thrived. However, this difficult environment did produce real challenges for our other revenue makers so the extra revenue from retail helped fill the gap to support the great work of Waipuna Hospice.

There was a noticeable shift in spending after lockdown. People looked for the quality and value of second-hand goods.

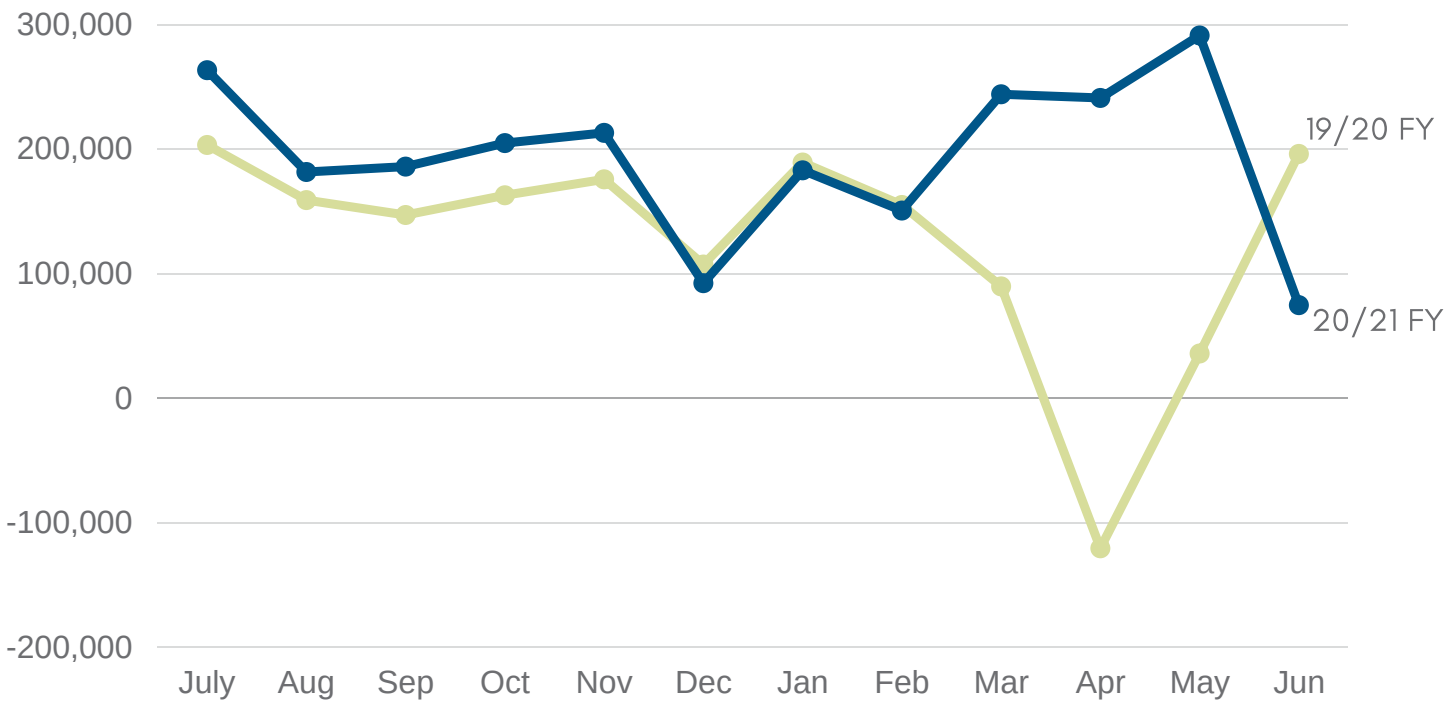
Thanks to the 310,000 transactions across all of our stores with an average spend of \$16 our retail income increased by nearly 15%. A truly outstanding result for which all involved deserve huge thanks.

Recycling and upcycling is also becoming an important part of our role as the community increasingly looks to reduce waste. Thanks to the efforts of our team huge quantities of cardboard and scrap metal were recycled, plus initiatives have been developed to keep clothing and linen waste to almost zero.

We would like to extend our utmost thanks to our local community who continue to support us, both by shopping with us and by donating their goods. We couldn't do it without you.

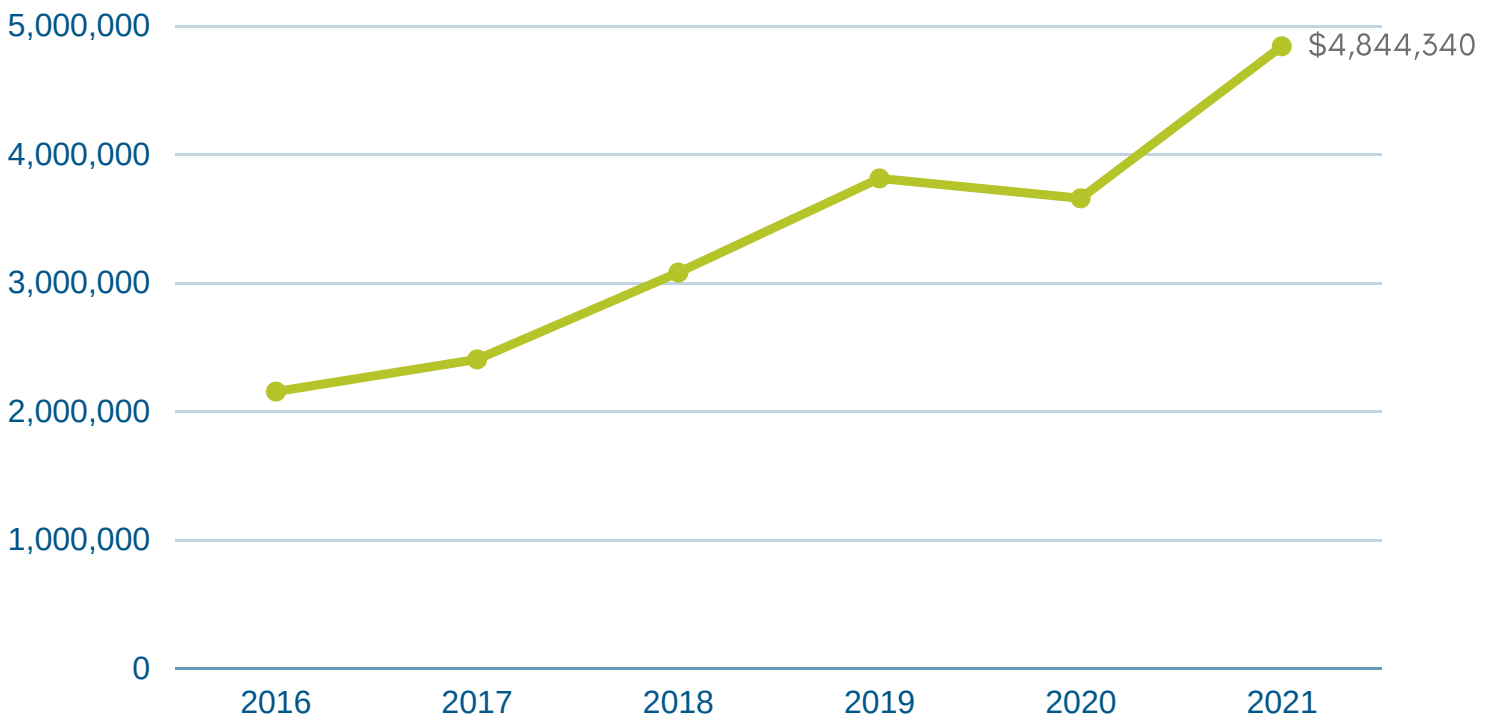


Shops Net Income (Including Depot)



This graph depicts the total net income of all our shops and Depot, inclusive of all costs.

Retail Income Summary



OUR HOSPICE JOURNEY: YOUR REVIEWS



First time going to a charity shop. Never going to buy new clothes ever again! Lovely people who were very helpful too :)

- stellar



I always find a good bargain here on such beautiful labelled clothing as well. It is nice the book section is tucked away at the back which gives a nice area with armchairs to sit and find a good book, especially for the children. There is also a lot of good bric-a-brac, my partner picked up a brand new video camera here a couple of months ago. Love how the kitchen/homeware is displayed wonderfully. Also, the staff are friendly and welcoming.

- Melissa



Awesome, well managed and maintained shop with friendly staff. Some good bargains, too!

- Lorna



What a great place to grab a bargain, plus it stops things going into landfills, and it's a great cause. Well done to the staff and volunteers.

- Andy



We lost my Dad last July and my Mum on New Years Day. Both my parents have been strong supporters of charity shops over the years and my Mum had a history of donating to the Katikati Waipuna Hospice shop. My brother and I found ourselves in a situation where we needed to clear out their villa in a short space of time and neither of us had much room for the remains of their estate. As difficult as it was to let go of many of their beloved items, the Katikati Waipuna Hospice Shop Manager made things so easy for us and Danielle in dispatch was so straightforward to deal with as well. I also met many of their team as they helped us remove as much as possible for resale. Both of my parents were looked after in their last days by Waipuna Hospice and I know they would have been proud that their cherished items would be on sold to be loved by others in the years to come. Thank you so much to Waipuna Hospice for helping us when you did. It was difficult losing both parents so quickly and you helped so much. You have an amazing shop.

- Mike



Always find a treasure to take home!

- Pamela



There was a great variety of goods, and the people were so lovely and friendly.

- Angela



Large op shop with friendly volunteer staff. Thank you for all your hard work, I appreciate being able to give my money to such a great charity in return for some cool stuff.

- Melissa



It is the best layout of a hospice shop we've ever seen. Everything was nicely presented and easy to see. Very well thought out and the staff were friendly and helpful. Easy to find sizes and no musty smells. Recommended.

- Lisa



“

At Waipuna Hospice we felt we received the understanding and help we needed.

JACKIE GRAHAM

Loving wife of past-patient Pete Graham

FINANCIALS

Financial Statements

Waipuna Hospice Incorporated
For the year ended 30 June 2021

Prepared by Ingham Mora Limited

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Directory

Waipuna Hospice Incorporated For the year ended 30 June 2021

Nature of Business

Hospice Healthcare Services

Address

43 Te Puna Station Road
Tauranga

Auditors

Baker Tilly Staples Rodway Audit Limited
Tauranga

Bankers

Westpac

Solicitors

Keam Standen

Board Members

Vanessa Hamm (Chairman) (Co-opted 06/20)
Mark Tingey (Chairman) (resigned 4/11/20)
Ben William Fredrick Van den Borst (Deputy Chairman)
Leona Louise Smith (Deputy Chairperson) (resigned 26/8/20)
Monique Louise O'Connor (Secretary)
Glenda Gaye Hutchison (Treasurer)
Shirley Ann Baker
Jeremy Ian Rossack
David McClatchy (Co-opted 02/21)

Chief Executive

Richard Thurlow

Statement of Comprehensive Revenue & Expenses

Waipuna Hospice Incorporated
For the year ended 30 June 2021

	NOTES	2021	2020
Revenue from Non - Exchange Transactions			
Corporate Sponsorship	2	184,040	250,591
Donations	2	1,108,309	2,053,830
Grants	2	819,975	362,471
Wages Subsidy		-	857,167
Total Revenue from Non - Exchange Transactions		2,112,324	3,524,059
Revenue from Exchange Transactions			
DHB Contracts		4,718,573	4,299,131
Shop Sales	3	4,844,340	3,661,009
Interest Received		3,086	2,831
Net Fundraising		83,833	97,562
Subscriptions		1,713	1,026
Depreciation Recovered		1,354	30,108
Sundry Income		105,165	114,378
Total Revenue from Exchange Transactions		9,758,064	8,206,046
Total Revenue		11,870,389	11,730,105
Expenses			
Audit Fee		14,600	16,220
Depreciation		308,104	293,064
Insurance		33,340	44,815
Loss on Sale of Fixed Assets		-	25,719
Other Operating Expenses	4	1,497,377	1,232,917
Rent	5	505,000	505,000
Shop Expenses	3	2,525,530	2,177,145
Wages		6,762,090	6,221,053
Total Expenses		11,646,041	10,515,933
Total Surplus / (Deficit) for the Year		224,348	1,214,172
Total Comprehensive Revenue and Expenses		224,348	1,214,172



The accompanying notes form part of these Financial Statements

Statement of Changes in Equity

Waipuna Hospice Incorporated For the year ended 30 June 2021

	2021	2020
Equity		
Opening Balance	2,754,940	1,540,768
Recognised Revenue and Expenses		
Net Comprehensive Revenue & Expenses for the Year (Page 4)	224,348	1,214,172
Total Recognised Revenue and Expenses	224,348	1,214,172
Total Equity	2,979,288	2,754,940
Equity at End of the Year	2,979,288	2,754,940



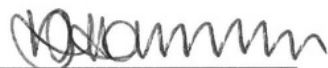
The accompanying notes form part of these Financial Statements

Statement of Financial Position

Waipuna Hospice Incorporated As at 30 June 2021

	NOTES	30 JUN 2021	30 JUN 2020
Current Assets			
Bank and Cash	11	1,989,505	1,574,955
Receivables for Exchange Transactions	11	166,151	154,113
Prepayments		116,098	142,346
GST Receivable		-	66,348
Loan to Foundation	5	1,164,609	964,246
Total Current Assets		3,436,362	2,902,008
Non-Current Assets			
Fixed Assets	14	525,545	670,757
Other Non-Current Assets			
Waipuna Hospice Foundation	5	57,973	55,711
Total Non-Current Assets		583,518	726,468
Total Assets		4,019,880	3,628,476
Current Liabilities			
Provisions	11	837,636	553,661
Accounts Payable	11	180,761	241,138
GST Payable		14,195	-
Non - Exchange Liabilities	11	8,000	78,737
Total Current Liabilities		1,040,593	873,536
Total Liabilities		1,040,593	873,536
Net Assets		2,979,288	2,754,940
Equity			
Capital		594,629	594,629
Accumulated Comprehensive Revenue & Expenses		2,384,659	2,160,311
Total Equity		2,979,288	2,754,940
Total Accumulated Funds (Deficit)		2,979,288	2,754,940

For and on behalf of the Society:



Chairman
Date: 1 November 2021



Chief Executive Officer
Date: 1 November 2021



The accompanying notes form part of these Financial Statements

Statement of Cash Flows

Waipuna Hospice Incorporated For the year ended 30 June 2021

	NOTES	2021	2020
Cash Flow Statement			
Cash Flows from Operating Activities			
Receipts			
Receipts from Non-Exchange Transactions		2,041,587	2,780,735
Receipts from Exchange Transactions		9,743,158	9,031,973
Interest Received		824	644
Total Receipts		11,785,569	11,813,352
Payments			
Payments to Suppliers		(2,354,524)	(2,291,295)
Payments to Employees		(8,065,670)	(7,731,784)
Total Payments		(10,420,194)	(10,023,079)
Net Cash Flows from Operating Activities		1,365,375	1,790,273
Cash Flows from Investing Activities			
Receipts			
Sale of Property, Plant & Equipment		3,138	121,739
Total Receipts		3,138	121,739
Payments			
Purchase of Property, Plant & Equipment		(172,851)	(392,905)
Total Payments		(172,851)	(392,905)
Net Cash Flows from Investing Activities		(169,713)	(271,166)
Cash Flows from Financing Activities			
Payments			
Loan Repayment		-	-
Loan Advanced		(781,113)	(953,454)
Total Payments		(781,113)	(953,454)
Net Cash Flows from Financing Activities		(781,113)	(953,454)
Net Increase / (Decrease) in Cash and Cash Equivalents		414,549	565,653
Cash and Cash Equivalents at 1 July		1,574,955	1,009,302
Cash and Cash Equivalents at 30 June	11	1,989,504	1,574,955



The accompanying notes form part of these Financial Statements

Notes to the Financial Statements

Waipuna Hospice Incorporated For the year ended 30 June 2021

1. Statement of Accounting Policies

Reporting Entity

The reporting entity is Waipuna Hospice Incorporated (the "Waipuna Hospice"). The Waipuna Hospice is domiciled in New Zealand and is a not-for-profit society incorporated under the Incorporated Societies Act 1908.

The financial statements of the Waipuna Hospice for the year ended 30 June 2021 were authorised for issue by the Board on the 1 November 2021.

Statement of Compliance

The Waipuna Hospice's financial statements have been prepared in accordance with Generally Accepted Accounting Practice in New Zealand ("NZ GAAP"). They comply with Public Benefit Entity International Public Sector Accounting Standards ("PBE IPSAS") and other applicable financial reporting standards as appropriate that have been authorised for use by the External Reporting Board for Not-For-Profit entities. For the purposes of complying with NZ GAAP, the Waipuna Hospice is a public benefit not-for-profit entity and is eligible to apply Tier 2 Not-For-Profit PBE IPSAS on the basis that it does not have public accountability and it is not defined as large.

The Board has elected to report in accordance with Tier 2 Not-For-Profit PBE Accounting Standards and in doing so has taken advantage of all applicable Reduced Disclosure Regime ("RDR") disclosure concessions. This decision results in the Waipuna Hospice not preparing a Statement of Service Performance for both reporting periods.

Changes in Accounting Policies

There have been no changes in accounting policies. All policies have been applied on basis consistent with those used in previous years.

Summary of Accounting Policies

The significant accounting policies used in the preparation of these financial statements as set out below have been applied consistently to both years presented in these financial statements.

(a) Measurement Base

These financial statements have been prepared on the basis of historic cost.

(b) Functional and Presentational Currency

The financial statements are presented in New Zealand dollars (\$), which is the Waipuna Hospice's functional currency. All financial information presented in New Zealand dollars has been rounded to the nearest dollar.

(c) Revenue

Revenue is recognised to the extent that it is probable that the economic benefit will flow to the Waipuna Hospice and revenue can be reliably measured. Revenue is measured at the fair value of the consideration received. The following specific recognition criteria must be met before revenue is recognised.



Revenue from Non-Exchange Transactions

Fundraising & Sponsorship

Fundraising non-exchange revenue is recognised at the point at which cash is received.

Grants

Grant revenue includes grants given by other charitable organisations, philanthropic organisations and businesses. Grant revenue is recognised when the conditions attached to the grant have been complied with. Where there are unfulfilled conditions attaching to the grant, the amount relating to the unfulfilled condition is recognised as a liability and released to revenue as the conditions are fulfilled.

Donations

Donated goods for sale are not recognised as an asset in the financial statements. They are recognised as income when those goods are sold, that is when risk and reward transfers to the buyer. Donated services are not recorded in the financial statements.

Wages Subsidy

Wages subsidy non-exchange revenue is recognised at the point it was paid out as wages over the 12 week period.

Revenue from Exchange Transactions

Government Contracts Revenue

Contracts Revenue is recognised as Income to the extent that the services have been provided.

Interest Revenue

Interest revenue is recognised as it accrues, using the effective interest method.

(d) Goods and Services Tax (GST)

The financial statements have been prepared on a GST exclusive basis where all items in the Revenue Accounts and Fixed Assets have been recorded exclusive of GST. Accounts Receivable and Accounts Payable are recorded in the Statement of Financial Position inclusive of GST. GST owing to or by the entity at balance date as recorded in the Statement of Financial Position, has been determined on an accruals basis. Income and expenses in relation to the trading shops have been recorded in accounts as GST inclusive due to the income being derived from donated goods.

(e) Inventories

Inventories are stated at the lower of cost (determined on a first-in first-out basis) and net realisable value.

(f) Changes in Accounting Policy

There have been no changes in Accounting Policy. All policies have been applied on bases consistent with those used in previous years.

(g) Financial Instruments

Financial assets and financial liabilities are recognised when the Waipuna Hospice becomes a party to the contractual provisions of the financial instrument.

The Waipuna Hospice derecognises a financial asset or, where applicable, a part of a financial asset or part of a group of similar financial assets when the rights to receive cash flows from the asset have expired or are waived, or the Waipuna Hospice has



transferred its rights to receive cash flows from the asset or has assumed an obligation to pay the received cash flows in full without material delay to a third party; and either:

- the Waipuna Hospice has transferred substantially all the risks and rewards of the asset; or

-the Waipuna Hospice has neither transferred nor retained substantially all the risks and rewards of the asset, but has transferred control of the asset.

Financial Assets

Financial assets within the scope of NFP PBE IPSAS 29 *Financial Instruments: Recognition and Measurement* are classified as financial assets at fair value through surplus or deficit, loans and receivables, held-to-maturity investments or available-for-sale financial assets. The classifications of the financial assets are determined at initial recognition.

The category determines subsequent measurement and whether any resulting income and expense is recognised in surplus or deficit or in other comprehensive revenue and expenses. The Waipuna Hospice's financial assets are classified as loans and receivables or as available for sale financial assets. The Waipuna Hospice's financial assets include: cash and cash equivalents, short-term deposits, receivables from non-exchange transactions, receivables from exchange transactions and investments.

All financial assets except for those at fair value through surplus or deficit are subject to review for impairment at least at each reporting date. Financial assets are impaired when there is any objective evidence that a financial asset or group of financial assets is impaired. Different criteria to determine impairment are applied for each category of financial assets, which are described below.

Loans and Receivables

Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active market. After initial recognition, these are measured at amortised cost using the effective interest method, less any allowance for impairment. The Waipuna Hospice's cash and cash equivalents, receivables from exchange transactions and receivables from non-exchange transactions fall into this category of financial instruments.

Available for Sale Financial Assets

Available-for-sale financial assets are non-derivative financial assets that are either designated to this category or do not qualify for inclusion in any of the other categories of financial assets.

Impairment of Financial Assets

The Waipuna Hospice assesses at the end of reporting date whether there is objective evidence that a financial asset or a group of financial assets is impaired. A financial asset or a group of financial assets is impaired and impairment losses are incurred if there is objective evidence of impairment as a result of one or more events that occurred after the initial recognition of the asset (a "loss event") and that loss event has an impact on the estimated future cash flows of the financial asset or the group of financial assets that can be reliably estimated.

For financial assets carried at amortised cost, if there is objective evidence that an impairment loss on loans and receivables carried at amortised cost has been incurred, the amount of the loss is measured as the difference between the asset's carrying amount and the present value of the estimated future cash flows discounted at the financial asset's original effective interest rate. The carrying amount of the asset is reduced through the use of an allowance account. The amount of the loss is recognised in the surplus or deficit for the reporting period.

In determining whether there are any objective evidence of impairment, the Waipuna Hospice first assesses whether there is objective evidence of impairment for financial assets that are individually significant, and individually or collectively significant for financial assets that are not individually significant. If the Waipuna Hospice determines that there is no objective evidence of impairment for an individually assessed financial asset, it includes the asset in a group of financial assets with similar credit risk characteristics and collectively assesses them for impairment. Assets that are individually assessed for impairment and for which an impairment loss is or continues to be recognised are not included in a collective assessment for impairment.

If in a subsequent period, the amount of the impairment loss decreases and the decrease can be related objectively to an event occurring after the impairment was recognised, the previously recognised impairment loss is reversed by adjusting the allowance account. If the reversal results in the carrying amount exceeding its amortised cost, the amount of the reversal is recognised in surplus or deficit.



Financial Liabilities

The Waipuna Hospice's financial liabilities include trade and other creditors.

All financial liabilities are initially recognised at fair value (plus transaction cost for financial liabilities not at fair value through surplus or deficit) and are measured subsequently at amortised cost using the effective interest method except for financial liabilities at fair value through surplus or deficit.

(h) Property, Plant & Equipment

Items of property, plant and equipment are measured at cost less accumulated depreciation and impairment losses. Cost includes expenditure that is directly attributable to the acquisition of the asset. Where an asset is acquired through a non-exchange transaction, its cost is measured at its fair value as at the date of acquisition.

Depreciation is charged on a straight line basis over the useful life of the asset. Depreciation is charged at rates calculated to allocate the cost or valuation of the asset less any estimated residual value over its remaining useful life:

Rates Used	
Leasehold Building Improvements	5 - 20% SL
Motor Vehicles	12.5 - 25% SL
Furniture & Fittings	6 - 21% SL
Office Equipment	9 - 40% SL
Loan Equipment	4 - 30% SL
Inpatient Equipment	4 - 40% SL
Day Services Extension	20 - 40% SL
IT Assets	18 - 40% SL
Shops	7 - 40%SL
Family Support	20% SL
Facilities	20 - 40% SL

(i) Significant Judgements and Estimates

In preparing the financial statements, the Board is required to make judgements, estimates and assumptions that affect the reported amounts of revenues, expenses, assets and liabilities, and the disclosure of contingent liabilities, at the end of the reporting period. The uncertainty from these assumptions and estimates could result in outcomes that may result in a material adjustment to the carrying amount of the asset or liability.

The Waipuna Hospice bases its assumptions and estimates on parameters available when the financial statements are prepared. However, existing circumstances and assumptions about future developments may change due to market changes or circumstances arising beyond the control of the Waipuna Hospice. Such changes are reflected in the assumptions when they occur.

Waipuna Hospice is a beneficiary of the Waipuna Hospice Foundation, a Trust formed to support the Society. The Board has determined that the society does not have power or benefit in its relationship with the Foundation. As such, there is no requirement to Consolidate the Financial Accounts of the two entities.



2. Revenue from Non Exchange Transactions

	2021	2020
Corporate Sponsorship		
Revenue	184,040	250,591
	2021	2020
Net Donations		
Donations - General	679,340	429,330
Donations - Funerals	192,205	96,612
Donations - Bequests	236,764	1,527,858
Total Net Donations	1,108,309	2,053,800
	2021	2020
Grants		
Operating Grants	800,080	307,234
Capital Grants	19,895	55,237
Total Grants	819,975	362,471

Grants were received from the following organisations during the year:

Pub Charity	Dragon Community Trust	Harcourts Foundation
Tauranga Energy Consumer Trust	Lion Foundation	Mackay Strathnaver Trust
New Zealand Charitable Trust	NZ Lottery Grants Board	Matrix Charitable Trust
Omokoroa Centre Trust	The One Foundation	Perpetual Guardian Tauranga
David Wallace Trust		

3. Revenue from Exchange Transactions

The results of the trading shops are summarised below.

Trading Shops

	2021	2020
Income		
Shop Sales	4,844,340	3,661,009
Expenses		
Advertising	1,656	1,656
Electricity	43,992	46,971
Insurance	38,049	29,497
Low Value Assets	32,245	18,789
Postage, Printing & Stationery	8,942	11,813



Rent & Rates	590,397	531,795
Sanitation & Rubbish	89,188	59,631
Staff Expenses	35,648	15,902
Sundry Expenses	109,194	81,750
Telephone & Tolls	12,989	12,747
Travel	48,918	44,094
Wages & Salaries	1,514,312	1,322,500
Total Expenses	2,525,530	2,177,145
Net surplus/(deficit) from shops	2,318,810	1,483,864
	2021	2020

4. Other Operating Expenses

ACC Levies	33,264	40,981
Cleaning	78,120	73,654
Computer Expenses	147,132	113,128
Contracting	84,424	64,074
Education / Training	79,650	34,107
Electricity & Gas	44,418	45,216
Food	29,947	27,513
Motor Vehicle Expenses	190,636	133,514
Nursing Supplies	93,629	92,731
Postage, Printing & Stationery	62,953	61,697
Professional Memberships	21,072	23,828
Repairs and Maintenance	83,110	57,045
Subscriptions & Levies	88,048	79,073
Supervision Expenses	11,892	30,585
Telephone Expenses	59,246	56,538
Travel	15,524	20,295
Other Operating Expenses	374,312	278,936
Total Other Operating Expenses	1,497,377	1,232,917

5. Related Party Transactions

Waipuna Hospice is a beneficiary of the Waipuna Hospice Foundation, a Trust formed to support the Society. During the year the Waipuna Hospice advanced \$1,164,609 to Waipuna Hospice Foundation as a loan.

The Waipuna Hospice rented premises from Waipuna Hospice Foundation. Rent during the year ended 30 June 2021 was \$505,000 (2020 \$505,000). This amount was offset against the loan. The balance of the loan as at 30 June 2021 was \$1,164,609. (2020 \$964,246). Interest is charged at the discretion of the Waipuna Hospice and no interest was charged for the year ended 30 June 2021.

In 2017 \$50,000 was donated from the Ngaire Crocker Fund. This has been advanced to the Waipuna Hospice Foundation to be held and invested on their behalf. These funds will be repaid to Waipuna Hospice as required to fund nurses training. The balance of the Ngaire Crocker Fund as at 30 June 2021 was \$57,974 (2020:\$55,711). Interest of \$2,262 has been received for the year ended 30 June 2021. This advance has been included on the Statement of Financial Position as Other Non-Current Assets.

There were transactions with the Waipuna Hospice Foundation for the bequest program contract for services provided for \$49,992. (2020 \$49,992). At balance date there was an accounts receivable amount of \$4,791 due from Waipuna Hospice Foundation (2020: \$4,791).



The Foundation has provided an unsecured guarantee of \$300,000 to the Westpac Bank in respect of the Society's overdraft facility.

There are no transactions with Board Members that are considered to be significant

No related party debts have been written off or forgiven during the year.

Key Management Personnel

The key management personnel, as defined by PBE IPSAS 20 Related Party Disclosures, are the Board, the Chief Executive Officer and the Executive Team. The aggregate remuneration of key management personnel and the number of individuals, determined on a full-time equivalent basis, receiving remuneration is as follows:

The total remuneration has increased this year as the costs of staff in key management positions are for a full year.

The members of the board do not receive any remuneration for their services.

	2021	2020
Total Remuneration	1,229,633	1,147,489
Number of FTE's	8.65	7.3

6. Contingent Losses and Gains

There were no known contingent losses or gains outstanding as at balance date (2020: \$Nil).

7. Capital Expenditure Commitments

There was no capital expenditure committed, at balance date (2020: \$Nil).

8. Contingent Assets and Liabilities

The Board is not aware of contingent liabilities as at 30 June 2021 (2020: \$Nil).

9. Income Tax Expense

The society has charitable status and is exempt from income tax.

10. Operating Lease Commitments

Operating leases are in place for vehicles and properties rented for all shops, depot, storage units and Hospice premises.

Commitments under non-cancellable operating leases are:

	2021	2020
Current	\$1,169,988	\$1,216,253
2 - 5 years	\$1,902,522	\$2,903,986
Later 5 years	\$ -	\$ -
Total Operating Lease Commitments	\$3,072,511	\$4,120,239



11. Categories of Financial Assets and Liabilities

The carrying amounts of financial instruments presented in the statement of financial position relate to the following categories of assets and liabilities:

	2021	2020
Financial Assets		
Bank & Cash	1,989,505	1,574,955
Accounts Receivable from Exchange Transactions	166,151	154,113
Waipuna Foundation Nurses Fund	57,973	55,711
Loan to Foundation	1,164,609	964,246
Total Financial Assets	3,378,237	2,749,025
	2021	2020
Financial Liabilities		
Trade & Other Payables		
Accounts Payable	180,761	161,792
PAYE Payable	-	79,347
Total Trade & Other Payables	180,761	241,138
Provisions		
ACC Accrual	9,262	15,361
Employee Holiday Pay Accrual	576,690	492,151
Employee Study Leave Accrual	4,160	-
Employee Wages Accrual	247,524	46,149
Total Provisions	837,636	553,661
Total Financial Liabilities	1,018,397	794,799
	2021	2020
Non - Exchange Liabilities		
Unspent Grants	8,000	78,737
Total Non - Exchange Liabilities	8,000	78,737

Non - Exchange liabilities consists of grant money received that has not been spent at year end. See accounting policy note 1(c) for further information.

12. Events After Reporting Date

Significant to balance date there have been the following material events.

On the 17 August 2021 the New Zealand Government announced an alert level 4 lockdown for all of New Zealand in response to a community transmission of the Delta variant.

Waipuna Hospice Inc. was a designated essential service during the Covid-19 lockdown alert levels and continued to provide healthcare services during this period. Waipuna Hospice Inc. retail stores were closed as per the lockdown requirements.



13. Covid 19

The Covid 19 pandemic continues to present strategic, operational and commercial uncertainties. The situation can change rapidly and there are variable uncertainties around the duration, and ongoing impact of the Covid 19 outbreak.

During this period Waipuna Hospice inc has been given assurance of financial support from Waipuna Hospice Foundation and this is ongoing for the foreseeable future during this pandemic. Waipuna Hospice Inc. has a comprehensive pandemic plan that has been approved by Waipuna Hospice Inc. Board and BOP DHB planning and funding and has systems and approaches for flexible work, working from home and isolating teams to mitigate impacts on service provision should the Waipuna Hospice Inc. clinical services team be affected with a potential infection. The Board have confidence that the Waipuna Hospice Inc. has taken all possible and necessary measures to mitigate and reduce risks to the organisation and have no going concern issues.

14. Fixed Assets

2020	Opening Cost	Additions	Disposals	Closing Cost	Opening Accum Depn	Depn on Disposals	Depn this Year	Accum Depn	Closing Book Value
Leasehold Improve	50,135	-	-	50,135	32,952	-	6,349	39,301	10,834
Motor Vehicles	227,935	-	-	227,935	122,148	-	42,538	164,686	63,249
Furniture & Fittings	198,107	5,739	-	203,846	166,504	-	9,476	175,980	27,866
Office Equip	23,770	-	-	23,770	22,527	-	471	22,998	772
Loan Equip	127,167	7,947	-	135,114	95,703-	-	15,565	111,268	23,846
Inpatient Unit	351,195	1,754	-	352,949	267,888	-	28,299	296,1488	56,761
PaCNAT	7,300	-	-	7,300	7,300	-	-	7,300	-
Day Services Extension	236,015	-	-	236,015	235,232	-	785	236,015	-
IT Assets	436,365	98,538	4,373	530,530	246,130	2,589	122,881	366,422	164,108
Shops	371,632	27,299	-	398,931	190,15	-	68,450	258,465	140,466
Family Support	4,018	-	-	4,018	2,591	-	804	3,394	624
Facilities	37,808	23,400	-	61,208	11,703	-	12,486	24,189	37,019
Total	2,071,448	164,677	4,373	2,231,751	1,400,691	2,589	308,104	1,706,206	525,544



INDEPENDENT AUDITOR'S REPORT

To the Board of Waipuna Hospice Incorporated

Report on the Audit of the Financial Statements

Qualified Opinion

We have audited the financial statements of Waipuna Hospice Incorporated ('the Society') on pages 4 to 16, which comprise the statement of financial position as at 30 June 2021, and the statement of comprehensive revenue and expense, statement of changes in equity and statement of cash flows for the year then ended, and notes to the financial statements, including significant accounting policies.

In our opinion, except for the effects of the matter described in the *Basis for Qualified Opinion* section of our report, the accompanying financial statements present fairly, in all material respects, the financial position of the Society as at 30 June 2021, and its financial performance and its cash flows for the year then ended in accordance with Public Benefit Entity Standards Reduced Disclosure Regime ('PBE Standards RDR').

Our report is made solely to the Board of the Society. Our audit work has been undertaken so that we might state to the Board of the Society those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the Board of the Society as a body, for our audit work, for our report or for the opinions we have formed.

Basis for Qualified Opinion

In common with other organisations of a similar nature, control over cash revenues (including shop income, donations and fundraising income) prior to being recorded is limited, and there are no practical audit procedures to determine the effect of this limited control. Consequently, we are unable to obtain sufficient appropriate audit evidence in this regard and were unable to determine if recognition of revenue is complete.

We conducted our audit in accordance with International Standards on Auditing (New Zealand) ('ISAs (NZ)'). Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are independent of the Society in accordance with Professional and Ethical Standard 1 (Revised) *International Code of Ethics for Assurance Practitioners (including International Independence Standards) (New Zealand)* issued by the New Zealand Auditing and Assurance Standards Board and the International Ethics Standards Board for Accountants' *Code of Ethics for Professional Accountants* ('IESBA Code'), and we have fulfilled our other ethical responsibilities in accordance with these requirements and the IESBA Code. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our qualified opinion.

Other than in our capacity as auditor we have no relationship with, or interests in, Waipuna Hospice Incorporated.

Responsibilities of the Board for the Financial Statements

The Board is responsible on behalf of the Society for the preparation and fair presentation of the financial statements in accordance with PBE Standards RDR, and for such internal control as the Board determines is necessary to enable the preparation of the financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Board is responsible on behalf of the Society for assessing the Society's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Board either intends to liquidate the Society or to cease operations, or has no realistic alternative but to do so.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (NZ) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of the auditor's responsibilities for the audit of the financial statements is located at the External Reporting Board's website at:

<https://xrb.govt.nz/standards-for-assurance-practitioners/auditors-responsibilities/audit-report-8/>

Baker Tilly Staples Rodway

BAKER TILLY STAPLES RODWAY AUDIT LIMITED

Tauranga, New Zealand

1 November 2021



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At Waipuna Hospice patients can put photos on the wall, they wear their own clothes, and their families come in. The staff spend so much more time with them. They really care for them as people, not just patients.

KIMIKO SHARPE
Waipuna Hospice House Officer in 2021

QUALITY ACCOUNT



Behind the scenes, our support teams have continued to work hard. Amidst the challenges of COVID-19, we have maintained a high quality, and continued to provide great services. Our quality commitment is evidenced through our change processes and external audit achievement.

Our team providing care to our community has continued to grow, change and evolve. The priority has been supporting our people (our teams who do the work) and we now have a workforce of nearly 160 employees.

We have also seen significant growth in our “unpaid team members”, or our volunteer team, without whose efforts we would be unable to provide such a breadth of services to our community.

The priority has been supporting our people, our teams who do the work, and we now have a workforce of nearly 160 employees.

Our team of nearly 1000 volunteers are coordinated by our small and committed volunteer team. Volunteer support is across all aspects of our business, from our admin and support teams to retail and our clinical areas.

The COVID-19 pandemic has brought about change and complexity at multiple levels. We have experienced a higher than anticipated staff turnover which has added to the workload in the last six months.



ACHIEVEMENT OF PRIORITIES



CLINICAL SERVICES

The priority for the clinical team over the last twelve months has been to implement the new service delivery model. An initial concept was proposed and developed, and an extensive project management plan was launched. Three geographically located interdisciplinary teams were operationalised by December 2020.

This approach provides:

- An interdisciplinary team (IDT) approach to care for patients in the community with each patient allocated a team according to their residential address.
- Care plans tailored to patient/family/ whānau needs. Ambulant and asymptomatic patients were historically provided with services under the umbrella of “day services”. New referrals are now allocated directly to the Community IDT Care team improving care continuity.
- Increased communication with primary care providers will evolve to incorporate an electronic interface and the opportunity for zoom meetings to discuss patients.
- An electronic platform including telemedicine to gain efficiency and reduce travel time with remote working capability.

An extensive change management process was undertaken and has now been concluded.

In May 2021 Waipuna Hospice employed a part-time Kai Whakamaru. This role was developed to enhance service delivery to Māori patients and whānau through contributions to care delivery, case management, education, cultural supervision, policy development and quality activities. The function of this role is to be a cultural resource person for staff, working towards assisting them to work more effectively in partnership with patients and their whānau. It also includes the promotion of services offered by Waipuna Hospice within Māori communities and raising the needs of Māori patients and their whānau to support quality improvements and development initiatives.

Following the disruption of COVID in March 2020, resources were committed to the development of educational resources for patients/family/whānau. The e-learning training provides up-to-date, engaging and easy-to-navigate videos for families/whānau providing practical tips, education and advice.

Further to this extensive change, progress continued to be made on the clinical equipment tracking project within PalCare (our patient management system). This project commenced in 2019, and the goal remains to implement equipment management coordinated from within PalCare to support equipment tracking and maintenance.

Projects:

- Introduced a clinical communication skills training day that includes serious illness conversations (HSQC initiative) and advance care plans for hospice clinical staff.
- Falls prevention review to improve efficiency and safety.
- Waipuna Hospice recognised the need for a contingency plan to ensure patients would continue to receive medication (most notably syringe driver medication) during COVID-19 lockdown levels three and four. A process was implemented whereby medications (prefilled syringes) were prepared and dispensed by the pharmacy. The benefits were significant including an increased patient focus in the home as our nurses had fewer medication management tasks to attend. The new process remains in place today.

HEALTH, SAFETY AND QUALITY

The year has focused on continuing compliance, staff engagement and risk/hazard management, specifically focusing on our retail teams. A project updating all the hazard and risk registers at our retail sites was commenced. While this remains ongoing, there has been great buy-in from the retail teams.

All new staff receive site-specific health and safety inductions, and this process has been successfully streamlined. Risk Manager (our electronic health and safety system) has been reviewed, with improvements made to the way we are using the system, with more streamlined notifications.

Health and safety in our retail sites has been significantly improved over the last 12

months. Environmental projects have been undertaken including airflow, lighting, and ergonomic workstation assessment. We now have approved fire plans on every site as part of the emergency management processes including fire evacuation. Our health and safety team continues to support our retail team with their COVID response, ensuring safe operations.

Projects:

- Implemented a new lone worker process and policy with increased security for staff after hours working out in the community. This extensive project included all areas of the organisation.
- Development of Safe Operating Procedures (SOPs) across retail sites, specifically at the Depot (bench and hand grinders) and for the Te Puna based maintenance team (external equipment and machinery use).
- Working at Heights training for the maintenance team has meant improved building maintenance functions, with less reliance on contractors for jobs such as gutter cleaning.
- Waipuna Hospice's kitchen passed our food safety audit with no corrective actions.
- Upgraded electrical testing in retail.

CLOSING STATEMENT



Our organisation is committed to ensuring patients and their families/whānau receive the best service and care possible. We strive to achieve this across every level of our organisation. Continuous quality improvement forms part of our organisational culture.

We are pleased to endorse this Quality Account for Waipuna Hospice as evidence of our commitment to high-quality services.

RICHARD THURLOW
Chief Executive Officer

VANESSA HAMM
Waipuna Hospice Inc Board Chairperson



LEGAL AND ADMINISTRATION



The Waipuna Hospice governing document is its board's constitution and charter.

Charities Commission Certificate
of Registration Number

CC22206

Registered Office

43 Te Puna Station Road
Te Puna, RD6
Tauranga 3176

Board Members

Vanessa Hamm (Chairperson)
Ben Van Den Borst (Deputy Chair)
Glenda Hutchinson (Treasurer)
Monique O'Connor (Secretary)
Shirley Baker
Jeremy Rossaak
David McClatchy

Chief Executive Officer

Richard Thurlow

Auditors

Baker Tilly Staples Rodway Audit Limited

Accountant

Ingham Mora Ltd

Solicitor

Keam Standem

Without you, we wouldn't be
able to provide care and
support for our community.

Thank you.



WaipunaHOSPICE
Life is Special