



ANNUAL REPORT
2024



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ROKKE
FOUNDATION NZ

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FOUNDATION NZ

CONTENTS

Our Leadership	4
The Board	4
National Leadership Team	4
In Memorium	5
Our Mission & Vision	5
Chair's Foreword	6
Chief Executive's Statement	7
Life Before Stroke	8
Raising Awareness of Stroke Risks	8
Health15	8
Helping People to Get Help F.A.S.T.	10
Life After Stroke	11
Supporting Stroke Survivors	11
Support for Tamariki and Rangatahi	11
Affiliated Stroke Groups	11
Advocacy	14
Equity	14
Lived Experience Advisory Panel	14
Reducing Stroke Risk by Focusing on Salt	14
Reaching into our Communities	15
Staying Connected to our Supporters	15
Key Achievements 2023/2024	16
Financial Statements	18
Statement of Comprehensive Revenue and Expense	18
Statement of Financial Position	19
Our Partners and Supporters	20

OUR LEADERSHIP

Our organisation is governed by a Board of Directors and a National Leadership Team with medical and allied health, business, lived-experience, and NGO management experience. They are responsible for setting the strategic direction of the organisation, and for the effective management of the Foundation.

THE BOARD



Dr John Gommans
(Chair)



Catherine Epps
(Deputy Chair)



Mark Ford



Derek McCormack



Tereki Stewart



Prof. Anna Ranta



Ruth Payne



Leeanne Yeoman



Fuimaono Taulani
Tuiasau



William Hardie



Robin Boldarin
(supernumerary member)

NATIONAL LEADERSHIP TEAM



Jo Lambert,
Chief Executive
Officer



Marg Jenner,
General Manager –
Compliance and Risk



Jess Winchester,
General Manager –
Marketing and
Fundraising



Meena Vallabh,
General Manager –
Services
Development



Nicky Mayne,
General Manager –
Community
Services

OUTGOING NATIONAL LEADERSHIP TEAM (left the organisation before the end of this financial year)



Chris Green,
General Manager –
Marketing and
Fundraising



Chris Davis,
General Manager –
Southern Region



David Halford,
General Manager –
Central Region



Don Scandrett,
General Manager –
Northern Region



Julia Rout,
General Manager –
Health Promotion
and Advocacy

IN MEMORIUM

This year the Foundation sadly lost two key individuals to cancer, Fuimaono Tuiasau and Nita Brown.

Fuimaono had a long association with the Foundation and became a Board member in 2021, shining an important light on the needs of our Pacific communities as well as all people affected by stroke.

Nita was a member of the Foundation's leadership team for more than a decade and was instrumental in building the organisation's cultural capability, and our shift in focus to equitable outcomes for all. She was highly respected in communities throughout Aotearoa and created a legacy on which we now build community partnerships to raise awareness of stroke, particularly for whānau Māori. Nita was also a much loved and respected member of our whānau at the Foundation, and she will be fondly remembered by all who worked with her.



OUR MISSION:

To prevent strokes, improve outcomes and save lives.

OUR VISION:

A New Zealand where significant steps are taken to reduce the number of strokes, everyone understands and responds to key risk factors, and anyone affected by stroke is supported and empowered.



OUR VALUES:

Kaitiakitanga *Guard and protect people affected by stroke and help people to detect and manage stroke risks early.*

Manaakitanga *Care for others and be inclusive to everyone. Act with integrity and treat people with respect.*

Rangatiratanga *Enable people to be decision-makers over their health and wellbeing and achieve their best health outcomes.*

Whanaungatanga *Connect as a whānau and work together in everything that we do to make a significant difference.*

CHAIR'S FOREWORD

This is the last time I will have the honour of sharing my thoughts as the Chair of the Stroke Foundation, as I am stepping down from this role at the 2024 AGM. It has been an incredible privilege to help steer our waka for the past 11 years and it has been quite a journey. Despite recent turbulent waters, I am confident the Foundation is now stronger, more resilient, and better equipped to tackle the stroke tsunami that confronts Aotearoa.

From the beginnings of our 'modern' organisation, bringing together most of the regional bodies and National Office in 2013, a decade later we are now a single, national, Stroke Foundation following the amalgamation with Stroke Central and Stroke Tairāwhiti. I would particularly like to thank Robin Boldarin, former President of Stroke Central, who joined the Board as a supernumerary member for 18 months to help guide us through the process.

Our work has raised awareness of stroke and its causes; advocated for improved access to acute stroke care; and given stroke survivors quality, evidence-based support to help them live their best life after stroke.

We have elevated the importance of lived experience in the development of policy, amplified the voices of survivors, and advocated for the Government to do more to create equitable access to healthcare for some of our most vulnerable communities.

But even the most steadfast of waka can be challenged by inclement weather. 2023-24 saw the continuing cost-of-living crisis impact on our donors and a reduction in our funding. Coupled with rising and unsustainable costs of delivering our services, and increasing demand for these services, it was evident our current course needed to change. The resultant restructuring saw the Stroke Foundation halve in size with the intent to triple our impact. The new operating model is focused on stroke education, training, and support for healthcare workers, community groups, iwi, and stroke survivors and their whānau. This is a bold move away from our traditional model of one-to-one support of individuals, to a one-to-many way of

working, partnering with the health and community workforce to extend our reach. It is the only way we can reasonably address the growing number of strokes each year. I acknowledge the considerable impact these changes have had on our staff and thank them for their continuing commitment to the Foundation.

This year, the Board also had change following the retirement of Bill Hardie after completing his term. I, and my fellow directors, acknowledge Bill's many years of service and his unfailing support for the Foundation, having served not once but twice on our Board. Tragically, we also lost Fuimaono Tuiasau from the Board. Fuimaono was a born advocate and campaigned tirelessly for the rights of Pacific communities. He sadly passed away in March 2024.

We welcomed Leeanne Yeoman to the Board this year. Leeanne is the Associate Director of Allied Health for Older Persons Health and Rehabilitation, Te Whatu Ora Waitahi Canterbury. I know her experience of working alongside stroke survivors within acute care, hospital rehabilitation, and community settings will be invaluable.

Finally, I would like to thank all our staff, including the National Leadership Team and my fellow Directors for their mahi, passion, and dedication over the past 12 months. We enter the new financial year fired up with the flames of hope, optimism, and the knowledge that we are now in a better position to deliver on our mission.

*Ehara ko te ia o te wai
Ehara hoki ko te pupuhi o te hau
Engari ko te whakatika kē o ngā rā
Ka tae or ate waka ki uta*

*It is not the direction in which the current flows
Nor is it in the direction which the wind blows
Rather it is the setting of the sails
That enables a canoe to reach its destination*

Dr John Gommans
Chairperson of the Stroke Foundation's Board



CHIEF EXECUTIVE'S STATEMENT

The 2024 financial year was challenging for the Stroke Foundation, as it was for many charities in New Zealand. The increased cost of living, the challenges of fundraising in the current fiscal climate, and our increased operating costs following the merger with Stroke Central New Zealand, all meant that what was expected to be a breakeven year quickly became one of significant potential loss by the end of the first quarter. I thank the Board for their support while the management team considered how a different way of working and a new operating model could secure our future. We were able to take advantage of the new reporting measures implemented the year prior, to make well informed recommendations to the Board and enter a consultation process with all our staff. During this time, we worked hard to minimise our losses, and this is reflected in the financial statements, with a year-end loss of a little over \$700,000, 30% less than anticipated.

As we enter FY2025, our organisation is almost half the size it was twelve months ago. Change of this magnitude has been incredibly painful and an emotional journey for the much-loved people who have left the organisation, and for those who have remained with us through this transformation process. FY2025 will be a year of consolidation as we embed our new operating structure and rebuild, working in new and different ways, collaborating closely with health and community providers to maintain prevention and support programmes in partnership together.

Despite the challenging market with so many New Zealanders experiencing economic hardship, our Marketing and Fundraising team has worked incredibly hard to keep our funding flowing. We continue to receive less than 20% of our funding from government agencies and owe enormous thanks to all our supporters who give so generously to our cause. Thank you also to the many stroke survivors and whānau who share their experiences as part of our advocacy work, bringing to life their challenges following stroke. So often we hear about stroke survivors feeling they have fallen off the

edge of a cliff once discharged from acute care and rehabilitation, and so we must do all we can to raise awareness of stroke and invest in stroke prevention. It is only through supporter donations that we can continue this important work.

A significant milestone we reached in FY2024 was full operational amalgamation with Stroke Central

and Stroke Tairāwhiti, which has amplified our position as the only organisation in New Zealand fully focused on our mission to prevent strokes, improve outcomes, and save lives. Our national role has strengthened our advocacy position, and we continue to engage with politicians, government officials, and policy makers to raise the voice of

stroke, advocating to increase stroke awareness and prevention, enhance equitable access to acute services, and improve services to help people live their best life after stroke.

In farewelling John Gommans from his role as Chair, I acknowledge the immense contribution he has made to the Foundation for more than a decade. We are enormously indebted to him for his governance skills and his support to me personally (and to our previous Chief Executive, Mark Vivian) with his wise counsel.

Lastly, an enormous thank you to my Leadership team for their incredible work and support during the last year, and to all the team at the Foundation for their dedication to our cause. It is an honour to serve in my role and I look forward to a brighter future for the Foundation and for all people affected by stroke in Aotearoa.

Jo Lambert
CEO



LIFE BEFORE STROKE



RAISING AWARENESS OF STROKE RISKS

High blood pressure is a leading cause of stroke. However, many New Zealanders don't check their blood pressure regularly. Our outreach services provide free blood pressure checks, with a focus on high need communities. If people have high readings, they are referred to their health provider for further support. Our mobile outreach service also screens for an irregular heartbeat; atrial fibrillation (AF). AF is a major risk factor for stroke, and Māori and Pacific communities experience AF at a younger age and higher rate than other New Zealanders. If an irregular pulse is detected, we support that person to ensure they follow up with their health provider.

This year, we visited 218 sites across Aotearoa and provided 11,475 free blood pressure checks.

How Janet discovered her high risk of stroke before it was too late

Janet had her blood pressure checked by the Stroke Foundation's community team on a whim and was surprised to find her blood pressure was higher than expected. This prompted a visit to her doctor, an adjustment in medication, and strict monitoring over the next few weeks. During this time, Janet also discovered she had developed atrial fibrillation.

"I certainly didn't know I had it and certainly didn't have any symptoms of it," Janet says.

Janet is now awaiting surgery to correct her atrial fibrillation and feels lucky that she caught it before it was too late.

HEALTH15

Health15 is a joint initiative between the Stroke Foundation and construction project managers, The Building Intelligence Group. Designed by the construction industry, for the industry, the service supports this busy, high-pressure sector by offering workers free blood pressure checks that take no more than 15 minutes of their working day. As well as a blood pressure check, it includes personalised advice on how workers can lower their risk of stroke and other health conditions, including heart disease, cancer, diabetes, and gout. Employers cover the costs associated with people who need clinical follow up, including time off work, ensuring that workers can easily prioritise their hauora.



This year, Health15 reached over 1400 workers across 38 construction sites.

How Health15 saved Daniel's life

32-year-old Daniel Foster thought he was in perfect health. But when the site Daniel was working on had a visit from Health15, it led to a diagnosis that changed his life.

Daniel had his blood pressure checked by the Health15 team and, to his surprise, he had a worryingly high reading. The Health15 team recommended that Daniel see his GP to get a follow up assessment. When Daniel saw his GP a week later, his blood pressure came back even higher. His GP referred him for a blood test, which



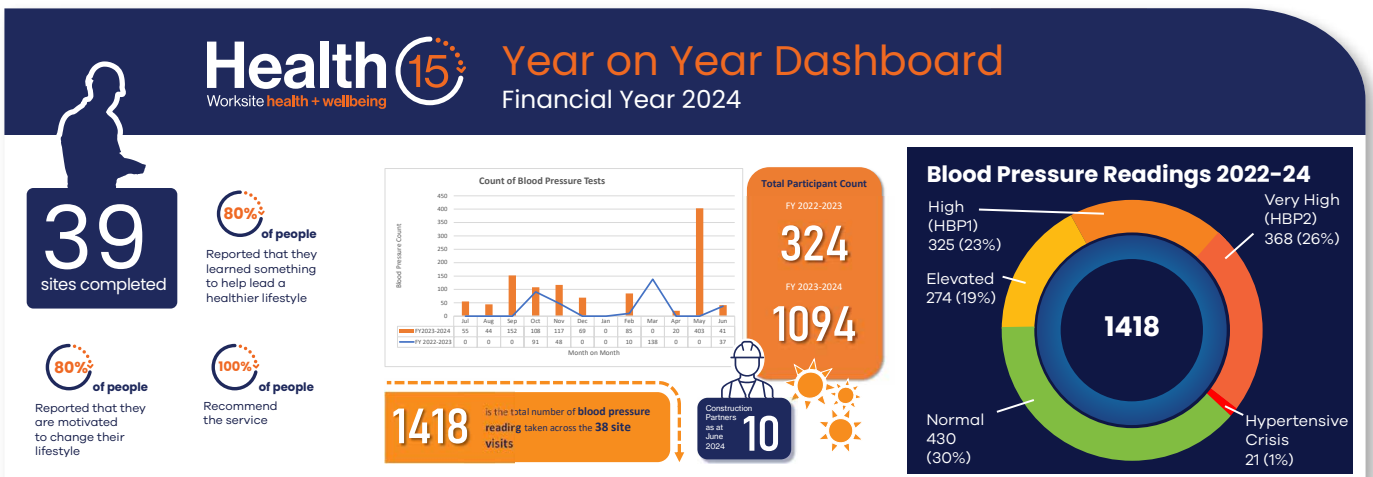
showed issues with his liver function and high cholesterol levels.

Daniel was diagnosed with "fatty liver", a kind of liver disease where there is a buildup of fat around the liver. If caught early, fatty liver can be slowed and even reversed. However, people with early stages of fatty liver often have no symptoms until cirrhosis – permanent damage to the liver – develops.

"The scary part is that when I got that first high blood pressure reading, my first thought was 'it's stress,'" Daniel says. "It would've been really easy to stop there and say 'I'm just stressed out'. It could've gone on for a hell of a long time without noticing and it would have been a far bigger problem than it is."

Daniel wants everybody, especially those in the construction industry, to get a checkup, even if they feel fine or like they're too busy. "People need to put away their pride and deal with these things: go get checked up and go to these Health15 checks," he says. "You wouldn't drive a car with a flat tyre. You wouldn't drive a car with the engine warning light on for five thousand ks. Unfortunately, our bodies don't come with a dashboard to tell us what's wrong."

Does Daniel think he would have found out about his liver disease without Health15? "No, not a chance without it. I'll be infinitely grateful for the rest of my life, that's for sure."



HELPING PEOPLE TO GET HELP F.A.S.T.

F.A.S.T. helps everyone to learn the key signs of stroke. It is vital to recognise stroke signs quickly so that treatment can start as soon as possible: the sooner medical treatment begins, the more likely brain damage can be reduced and a better outcome achieved.

As well as general awareness campaigns, we also train communities and workplaces on how to recognise the signs of stroke using the F.A.S.T. message: Face drooping, Arm weakness, Speech difficulties, and Take action - call 111. We also have an online F.A.S.T. toolkit for businesses and offer free F.A.S.T. training online.

This year, we continued to support 13 community organisations to develop community led solutions to promote F.A.S.T, with a priority on Māori and Pacific communities.



How thinking F.A.S.T. saved Maile Fameitau's life

Maile Fameitau has experienced several strokes, but fortunately, her family quickly learned the importance of getting help F.A.S.T.

When asked about one of her strokes, Maile recalls how she knew something was wrong and asked for help, so her husband rushed her to the hospital. "The doctor said to my husband, 'Your wife is very, very

lucky. If you would be late by two or three minutes, she would be dead in your house,'" she says. "If I had acted slower, I would be [dead]."

"As soon as you feel the signs and your speech is starting to get slurred, call 111 straight away," Maile stresses.

The fact Maile has not just survived but continues to live a normal family life is thanks both to her own strength and relentless positivity, and the love and vigilance of her loved ones. Her wellbeing is now very much a multi-generational affair. Every single family member has learned to recognise and to act quickly at the very first signs of stroke.

"You see the signs, you react as fast as you can," says Maile's son, Meliano Fameitau. "It can be a matter of minutes, worst case scenario a matter of seconds. So the faster you grab the phone, the faster you ring 111. That can make the difference."

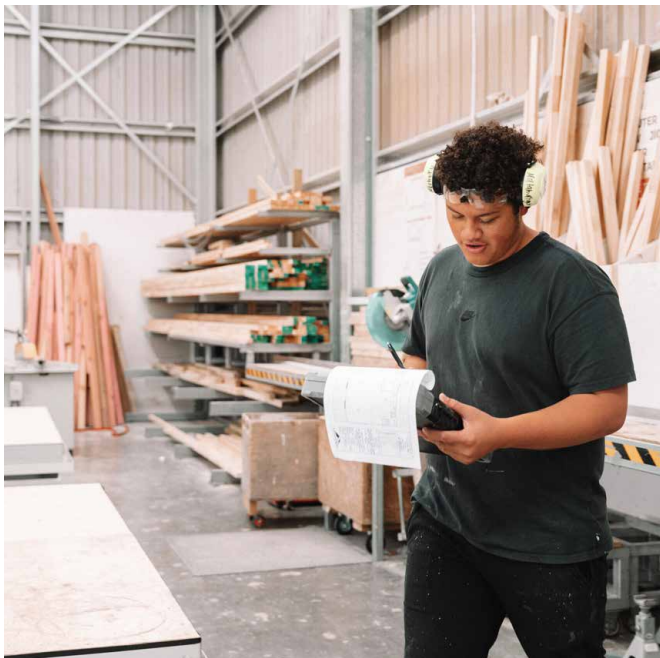
LIFE AFTER STROKE

SUPPORTING STROKE SURVIVORS

Community Stroke Advisors

Community Stroke Advisors support people who have experienced a stroke, including carers and whānau, to navigate life after stroke and connect to support services.

This year, our Community Stroke Advisor service received 5571 referrals and 4019 people engaged with our services.



Return to Work Service

Our Return to Work Advisors assist stroke survivors with employment and work-related advice and support. Since establishing the service in 2007, our Return to Work Advisors have supported hundreds of people to achieve their work goals and confidently re-enter the workforce. The service is free and can be used by stroke survivors who meet the eligibility criteria set by the Ministry of Social Development.

This year, our Return to Work Advisors helped 65 people to return to work after a stroke.

Take Charge After Stroke

Take Charge After Stroke (TaCAS) is an intrinsic motivation programme for stroke survivors. It involves at-home sessions with one of our Community Stroke Advisors and encourages stroke survivors to take control of their recovery, leading the process in a way that promotes autonomy, self-motivation, and connection. It is also highly cost-effective – if TaCAS was implemented widely in New Zealand, there would be \$9m of savings to the health system every year.

This year, our Community Stroke Advisors delivered over 600 TaCAS sessions, made up of 332 initial sessions and 284 follow-up sessions.



How the Stroke Foundation helped Heath regain his independence

After unexpectedly experiencing a stroke at age 54, Heath Hutton was left with significant hemiplegia: paralysis that affects only one side of the body. But he was determined to get better, and once he was discharged from the hospital, he was heartened to find he had a group of people supporting him.

"I call them my wolf pack," Heath says. "They're all trying to help me get better. It's great."

Heath's "wolf pack" includes Emily, the Stroke Foundation Community Stroke Advisor who supported his recovery. As well as connecting him to vital rehabilitation services, Emily helped Heath to access special funding for private neurophysiotherapy sessions, which helped him regain strength and balance. Emily also applied to get an occupational therapist driving assessment funded so Heath could return to driving - and to independence. "Through his recovery, he has had the most incredible attitude and determination," Emily says. "He and his partner Olivia have been so proactive towards his rehab, enabling him to make significant gains."

This support from his "wolf pack" has certainly contributed to Heath's strong recovery and he has made enormous progress in the year since his stroke.



As well as returning to work, Heath keeps busy with weekly activities like swimming and horse riding.

Heath's advice for other stroke survivors is to learn to live with their new normal and to keep on moving. "I may not ever be 100%," he says. "But I'm getting there, and I will keep on trying."



SUPPORT FOR TAMARIKI AND RANGATAHI

Stroke can affect everyone, and our tamariki and rangatahi are no exception. They may be curious, scared, or simply confused about why things have changed. We have partnered with youth ambassador Edna Swart to create videos and online resources, answering young people's questions about life after stroke. These can be accessed at familyandstroke.org.nz. Young people can also use Barnardos' 0800 What's Up service to talk with trained counsellors about the grief and loss they may be feeling when someone they love experiences a stroke.

How learning more about stroke helped young Ruby after her mum's stroke

Ruby was only 10 years old when she witnessed her mum, Paula, having a stroke. While stroke is often associated with older age groups, up to 30 percent of strokes happen to people under 65. This means that many stroke survivors still have children living at home and grappling with the aftermath.

"I wasn't there emotionally [for Ruby] like I would've been before my stroke," Paula reflects. "It wasn't until after that I could even comprehend the impact it must have had on Ruby. We've tried to explain to her as much as we could why I can't do some things now or why some things are difficult."

This open discussion has led to Ruby using her experience to educate herself and others about stroke. Three years on from Paula's stroke, she selected stroke as her topic for the science fair, carrying out extensive research and drawing on her own experience. Her project covered different kinds of stroke, neuroplasticity, rehabilitation, and the impact of stroke. It was selected for the regional Marlborough Science and Technology Fair, where it received a highly commended award.

Ruby has found that learning more about stroke helped her understand what her own family went through. "It helped me comprehend everything that's happened," Ruby says.

As well as learning more about stroke, Ruby's advice for other young people in her position is to understand that, while recovery is tough for the survivor, remember that "they still love you the same".



AFFILIATED STROKE GROUPS

There are many stroke groups supported by volunteers throughout Aotearoa, where stroke survivors and their carers can connect with others in the community affected by stroke. They may involve exercise programmes, morning teas, and other social activities, and we provide support to help them meet stroke needs in their communities.

In April 2024, we launched a newsletter for stroke group volunteers. This newsletter provides information about stroke prevention and rehabilitation, shares stories from stroke survivors, and has links to educational sessions that stroke groups can attend. It also includes a list of public outings we arrange each month, making it easy for people to connect in the community and learn how they can reduce their risk of secondary stroke.

ADVOCACY

Advocacy is one of the essential tools we use to raise our profile with the public and with key decision makers to increase understanding and to effect positive change. We do this in a number of different ways.

EQUITY

If you suffer a head injury in an accident, like on the rugby field, you will automatically be covered by ACC. Often, this entitles you to 80 per cent income support, treatment costs, equipment to assist in your rehabilitation, and vocational support to help your return to work. If your head injury results in a disability, ACC can also cover a range of other supports, such as housing, car modifications, and in-home carer support.

But if you experience a similar brain injury due to a stroke, you cannot access those same supports. Most strokes are not covered by ACC, leaving stroke survivors without the same level of support, often feeling alone within a complex system.

We think stroke survivors deserve better, and we are putting pressure on decision makers to make change. In October 2023, we called for a cross-political party overhaul of New Zealand's health and disability system in order to address the inequities faced by stroke survivors.

LIVED EXPERIENCE ADVISORY PANEL

Our Lived Experience Advisory Panel (LEAP) was formed in 2023 to bring their expert knowledge to the centre of our work, extending across the stroke continuum. LEAP's role is to provide voice, leadership, and representation of the needs of the stroke affected community in the work of the Stroke Foundation of New Zealand. They also serve to support the Foundation's commitment to Te Tiriti o Waitangi and address the inequitable health outcomes experienced by tangata whenua, leading to improved health outcomes for Māori.

LEAP is made up of stroke survivors, carers, and family members. Membership aims to reflect the diversity of stroke survivors, ensuring representation of gender,

culture, age, and location. They are responsible for representing the interests and viewpoints of stroke survivors, carers, and whānau across Aotearoa and providing leadership to the Foundation to influence debate, and advance policy and evidence-based, best practice, service delivery.



REDUCING STROKE RISK BY FOCUSING ON SALT

Consuming too much salt (sodium) can contribute to high blood pressure, which is the leading modifiable risk factor for stroke. But it is difficult for consumers to make healthy choices when many everyday foods, like processed meat and fish, canned foods, frozen foods, and meat alternatives, have hidden salt. In 2024, we measured 6884 packaged supermarket products against World Health Organization (WHO) sodium benchmarks and found that two thirds of the products exceeded these.

We continue to convene the Trans-Tasman Salt Reduction Forum, a group of researchers and advocates using evidence to inform our advocacy. Together, we are seeking decisive action by our government to reduce salt levels in processed foods. Most New Zealanders eat double the recommended daily salt intake amount with over 75% of it coming from processed foods. This collaboration with our Australian counterparts aims to improve public health by combating excessive salt consumption, ultimately reducing stroke risk.

During Salt Awareness Week this year (13-19 May 2024), we called for urgent government action to tackle the "hidden killer" of salt in our food. We have called for the introduction of mandatory WHO sodium benchmarks and a mandatory Health Star Rating on food packaging.

REACHING INTO OUR COMMUNITIES



Not everyone has the same risk of stroke and not all stroke survivors have the same outcomes. Stroke occurs more often, with more severity, and around 15 years earlier in our Māori, Pacific, and Asian communities. These communities also experience the highest recurrent stroke rates. We know that we cannot improve outcomes by working in isolation from each other and have designed a specific programme to engage high risk communities in the redesign of our services, to meet their needs.

This year, we have been developing this programme, working directly in four areas: Te Tai Tokerau, Western Bay of Plenty, Ngāi Tūāhuriri, and Franklin. Starting with relationship building with community leaders, we have hosted and facilitated hui with local providers and whānau with lived experience, to capture their voices and identify people's experience of stroke. This engagement programme is now primed for the redevelopment of our services so that our work reflects community need and can achieve its greatest impact.

Staying Connected to Our Supporters

In January 2024, we launched a new newsletter to connect our supporters to our work and thank them for the generous donations they make so that we can continue to fulfil our mission to prevent stroke, improve outcomes, and save lives. The newsletter has a different theme every month, and we share stories from people affected by stroke that show our supporters the difference they make to the lives of others. We also challenge people to make small changes in their life to reduce their stroke risk and learn more about stroke so that we can stay healthier, together. Editions so far have focused on Transient Ischaemic Attacks (TIAs), recognising the F.A.S.T. signs of stroke and why getting to hospital quickly is so important, the connection between salt and stroke, and explaining what "having a stroke" actually means.



LIFE BEFORE STROKE SERVICES

OVER **200** HOURS OF COMMUNITY OUTREACH SERVICES PER WEEK INCLUDING **FREE BLOOD PRESURE TESTS** AND **SUPPORT TO PEOPLE AT HIGH RISK OF STROKE**

CONTINUED TO SUPPORT **13** COMMUNITY ORGANISATIONS TO DEVELOP **COMMUNITY LED SOLUTIONS** TO PROMOTE **F.A.S.T.**

115 SIGNUPS FOR HE TAONGA **OUR ONLINE BLOOD PRESSURE MANAGEMENT & HEALTHY LIFESTYLES TOOL**



KEY ACHIEVEMENTS 2023/2024

ADVOCACY & INFLUENCE

MET WITH **FIVE MINISTERS** AND MULTIPLE OFFICERS OF THE CROWN TO DISCUSS **STROKE FUNDING** AND POLICY SETTINGS, AND SUBMISSIONS ON PROPOSED **LEGISLATIVE CHANGES**

RESEARCH COMPLETED COMPARING SODIUM CONTENT IN NZ SUPERMARKET PRODUCTS AGAINST **WHO SODIUM BENCHMARKS**



CONTINUED TO GROW THE WORK OF **THE TRANS-TASMAN SALT REDUCTION ADVOCACY FORUM**

STATEMENT OF SERVICE PROVISION

ESTABLISHED OUR **LIVED EXPERIENCE ADVISORY PANEL**

OUR **SALT AWARENESS WEEK** CAMPAIGN RESULTED IN ELEVEN TV AND RADIO INTERVIEWS – **SPREADING THE WORD** ABOUT THE CONNECTION BETWEEN **SALT & STROKE**



EQUITY

ESTABLISHED **FOUR PROTOTYPES** IN PRIORITY COMMUNITIES TO GATHER **WHĀNAU VOICE** AND CO-DESIGN COLLABORATIVE PARTNERSHIPS

LIFE AFTER STROKE SERVICES

4019 PEOPLE ENGAGED WITH OUR SERVICES



A **39%** INCREASE

5571 REFERRALS RECEIVED FOR OUR SERVICES

ROLLED OUT THE **TAKE CHARGE AFTER STROKE** PROGRAMME, DELIVERING

616 SESSIONS

SUPPORTED

65

STROKE SURVIVORS TO RETURN TO WORK



10 CONSTRUCTION COMPANIES SIGNED UP FOR HEALTH15



1481 WORKERS REACHED ACROSS 38 CONSTRUCTION SITES

Health 15
Worksite health + wellbeing



STATEMENT OF COMPREHENSIVE REVENUE AND EXPENSE

For the year ended 30 June 2024

	JUNE 2024	JUNE 2023
Income		
Revenue from Exchange Transactions		
Rental Income	108,291	37,528
Sales	38,078	96,533
Total Revenue from Exchange Transactions	146,368	134,061
Revenue from Non-Exchange Transactions		
Bequests	1,178,446	761,970
Contracts	1,027,742	1,036,778
Donations	1,991,691	2,242,946
Grants	1,070,570	1,533,897
Depreciation Recovered	14,512	859
MSD Income	77,118	-
Investment Income	88,838	121,539
Total Revenue from Non-Exchange Transactions	5,448,917	5,697,989
Total Income	5,595,286	5,832,050
Operating Expenses		
Audit fees	30,441	20,344
CRM Database Implementation Costs	-	1,829
Depreciation	109,537	103,467
Loss on Disposal of Fixed Assets	92	-
FAST Campaign	3,836	3,040
Finance & Accounting	52,693	37,077
Fundraising Expenses	526,693	550,133
Governance	18,223	19,301
Information Services	59,424	65,029
Investment Expenses	8,154	7,666
Operations	968,055	858,172
Property Expenses	247,499	248,587
Staff Remuneration	4,266,187	4,194,514
Sundry Expenses	-	62,413
Total Operating Expenses	6,290,733	6,171,572
Surplus/(Deficit) for the year before grants	(695,448)	(339,522)
Allocations made		
Northland Bequest Fund	21,839	21,901
JGS Reid Fund	3,747	4,959
Total Allocations made	25,587	26,860
Total Surplus/(Deficit) for the year	(721,034)	(366,382)
Total Comprehensive Revenue and Expenses for the year	(721,034)	(366,382)
Net Trustees Income for the year	(721,034)	(366,382)

BALANCE SHEET

As at 30 June 2024

JUNE 2024 JUNE 2023

Assets

Current Assets

Cash and Cash Equivalents	437,834	656,882
GST Receivable	-	14,140
Receivables (from exchange transactions)	256,068	139,268
Prepayments	21,395	12,656
Total Current Assets	715,297	822,946

Non-Current Assets

Fixed Assets	2,078,241	2,077,310
Investments	614,277	1,400,512
Investment Property	757,440	768,000
Total Non-Current Assets	3,449,957	4,245,822
Total Assets	4,165,255	5,068,768

Liabilities

Current Liabilities

BNZ Credit Cards	12,407	12,997
Payables (from exchange transactions)	248,615	250,529
GST Payable	9,058	-
Accrued Holiday Pay	140,542	231,720
MSD Wage Subsidy Accrual	-	77,118
PAYE Payable and employee benefit liabilities	40,681	85,785
BNZ Loan - Current Portion	6,502	31,797
Total Current Liabilities	457,805	689,946

Non-Current Liabilities

Loans	444,109	425,037
Income Recieved in Advance	30,591	-
Total Non-Current Liabilities	474,700	425,037
Total Liabilities	932,505	1,114,984

Net Assets

3,232,750 3,953,784

Equity

Accumulated Funds	1,629,502	1,409,881
Revaluation Reserve	1,060,563	1,060,563
JGS Reid Fund	77,089	78,155
Northland Bequest Reserve	465,596	1,405,186
Total Equity	3,232,750	3,953,784

THANK YOU TO OUR WONDERFUL PARTNERS & SUPPORTERS

MAJOR PARTNERS:



lane neave.



MAJOR FUNDERS:



OTHER FUNDERS:

A D HALLY ESTATE
AORAKI FOUNDATION
BAYTRUST
BLUESKY COMMUNITY TRUST
CENTRAL LAKES TRUST
COMMUNITY TRUST OF MID AND SOUTH CANTERBURY
COMMUNITY TRUST SOUTH
CE LAWFORD TRUST
DAVID ELLISON CHARITABLE TRUST (PUBLIC TRUST)
DRAGON COMMUNITY TRUST
EASTERN & CENTRAL COMMUNITY TRUST
ESTATE OF ERNEST HYAM DAVIS & THE TED
AND MOLLIE CARR ENDOWMENT TRUST
(PERPETUAL GUARDIAN)
E M PHARAZYN CHARITABLE TRUST
EVA AND HAROLD WILSON CHARITABLE TRUST
FOUR WINDS FOUNDATION
F H MUTER CHARITABLE TRUST
GEYSER COMMUNITY FOUNDATION
G A WADDEL CHARITABLE TRUST
(PERPETUAL GUARDIAN)
GOOD IN THE HOOD – Z ENERGY
HEALTHCARE OTAGO CHARITABLE TRUST
HIGGINS BEQUEST TRUST
JM THOMPSON CHARITABLE TRUST
KIWI GAMING FOUNDATION
LOIS MCFARLANE CHARITABLE TRUST
LW NELSON CHARITABLE TRUST
MAINLAND FOUNDATION
MILESTONE FOUNDATION
NZ COMMUNITY TRUST
ONE FOUNDATION
OTAGO COMMUNITY TRUST
OXFORD SPORTS TRUST
P A BLACKMORE TRUST (PERPETUAL GUARDIAN)
PELORUS TRUST
RANO COMMUNITY TRUST
RATA FOUNDATION
REDWOOD TRUST
ROTORUA TRUST
SOUTH CANTERBURY TRUST
(PERPETUAL GUARDIAN)
STEWART FAMILY TRUST
(PERPETUAL GUARDIAN)
SUNRISE FOUNDATION
TAURANGA ENERGY CONSUMER TRUST
TG MACARTHY TRUST
THE PHILLIP VERRY CHARITABLE TRUST
THE TRUSTS COMMUNITY FOUNDATION
TRILLIAN TRUST
TRUST HOUSE FOUNDATION
TRUST TAIRAWHITI
TRUST WAIKATO
WE CARE COMMUNITY TRUST
WEST COAST COMMUNITY TRUST
WHANGANUI COMMUNITY CHARITABLE TRUST
WHANGANUI COMMUNITY FOUNDATION
WN PHARAZYN TRUST



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