

ANNUAL REPORT 2022



STROKE
FOUNDATION • NZ



TOTAL RAISED

\$113,000



CONTENTS

Chair's Foreword	4
Chief Executive's Statement	5
About Us	6
Our Leadership	7
Our Mission, Vision and Values	8
Highlights for 2021–2022	10
Preventing Stroke in Aotearoa	12
Eric Knapp's story	16
Our community-based support for people affected by stroke	18
Bracing for a Stroke Tsunami	21
Service Delivery Review: A Good Life After Stroke	22
National Stroke Network	23
Financial Statements	24
Statement of Comprehensive Revenue and Expense	24
Statement of Financial Position	25
Our Partners and Supporters	26

CHAIR'S FOREWORD

Stroke continues to have an incredibly profound impact on the lives of thousands of people across the motu. Vigorous leadership is required to correct the inequities in stroke incidence and outcomes, and there is a need for courageous organisations to address the growing societal issues that are driving these health inequities. When it comes to stroke, I am confident that this role can be filled by the Stroke Foundation of New Zealand. Our work must reflect our mission - to prevent stroke, improve outcomes and save lives.

The Board of the Stroke Foundation has benefitted from the expertise of two new members who joined us this past financial year. They both bring a personal connection to stroke and strengthen our position as a national organisation for people affected by stroke. Mark Ford is a chartered accountant and an executive at Fulton Hogan in Christchurch, and was only in his early 40s when he experienced a life-changing stroke. Fuimaono Tuiasau is a qualified lawyer and operations consultant in Auckland who specialises in policy projects and is a facilitator of culture change. He comes from a Samoan family that was profoundly impacted when Fuimaono's father passed away after a stroke.

A key component of our work is preventing strokes before they can impact families. The advocacy work of the Foundation is building, through our policy statement – Bracing for the Stroke Tsunami – which highlights the uncomfortable truths about the fast-increasing economic and social costs of stroke in Aotearoa. Given that salt is a leading cause of high blood pressure, which in turn is a leading contributor to stroke, we are calling on the



government to introduce salt reduction targets for the food industry, which will require them to reformulate their sodium-rich products.

Adapting our services is imperative for the Foundation and a priority for the Board, so that we can better meet the changing needs of the people and whanau/families that our community-based teams of Community Stroke Advisors and Return to Work Advisors serve. This year we completed a Service Delivery Review that will chart our way forward over the coming years, identifying where the Foundation can improve, and the opportunities ahead for us.

I want to acknowledge the team at the Stroke Foundation for all of this incredible mahi and their commitment to the kaupapa of this organisation. They truly are the kaitiaki (guardians) of the stroke-affected community of Aotearoa New Zealand.

Ehara taku toa i te toa takitahi, engari he toa takitini.

Success is not the work of an individual, but the work of many.

Dr John Gommans
Chairperson of the Stroke Foundation's Board

CHIEF EXECUTIVE'S STATEMENT

As we reflect on the last year and my first full year as CEO, I would like to acknowledge our people delivering our life before and life after stroke services. Despite the disruptions of COVID, our community teams continued to deliver services under difficult circumstances, ensuring that those affected by stroke remained supported in the critical early weeks and months following their return to the community. Likewise, even though our blood pressure check vans were off the road for months and other health promotion activities couldn't take place, our people supported COVID response teams, as well as developing new health promotion programmes which we launched this year. So, while COVID may have made our work challenging, we relentlessly stayed true to our mission to prevent stroke, improve outcomes and save lives.

I also wish to acknowledge all our support staff, working behind the scenes to keep the Foundation moving forward; those in administration and corporate services, marketing and fundraising. Like all charities, we find ourselves in difficult times, as everyone feels the economic pressure of post-COVID inflation and rising interest rates. Despite this environment, our teams go about their work with amazing positivity and dedication to ensure our front-line teams have the resources they need to make a difference, every day.

The number of strokes continues to climb each year. We are facing a stroke tsunami, and this means one thing - the demand for the Stroke Foundation's free services is growing and this is unlikely to change.

Over the last 12 months, we have been considering the role of the Foundation in future years, and how



we can do more for more people, and keep up with demand. We completed some major projects, including a review of all front-line services, the implementation of a new fundraising database, and the design of new stroke prevention tools and services. These significant pieces of work now form the foundations of our two-year business plan - Māhi Tōtika (doing the right things well) – to become as efficient and more importantly, as effective, as possible.

Advocacy for stroke and our clients has been a strong focus this year, in preparation for the health and disability system shifts which came into effect on 1 July 2022. This focus acknowledges that, as stroke is New Zealand's leading cause of adult disability, we require significant investment if we are to curb the coming tsunamis. Increasingly we will look to collaborate with iwi, NGOs and community health providers, to give effect to the improved and more accessible services needed to reduce the harm caused by stroke.

The coming year is full of opportunities. We are indebted to the thousands of people across Aotearoa that donate to our cause, as well as all other funders who recognise the importance of our work. Together we make a significant difference to our society, and for this, we are forever grateful.

Nā tō rourou, nā taku rourou ka ora ai te iwi.

With your food basket and my food basket, the people will thrive.

Jo Lambert
CEO

ABOUT US

First established over 40 years ago, the Stroke Foundation of New Zealand is the only national organisation dedicated to stroke prevention and recovery.

Our work involves:

Providing information and personalised, community-based services to people who have experienced a stroke, their whānau (families), and carers.

Raising public awareness of the risks of stroke and creating tools that help everyone across the motu reduce these lifestyle risks.

Advocating for changes to public policy that reduce health inequity across Aotearoa.



1 IN FOUR OF US

WILL BE IMPACTED BY A STROKE IN OUR LIFETIME

9,500 STROKES HAPPEN EVERY YEAR

64,500

PEOPLE LIVING WITH THE EFFECTS OF STROKE

350,000

PEOPLE AND WHĀNAU AFFECTED IN AOTEAROA

\$1,100,000,000

ANNUAL ECONOMIC COST OF STROKE

OUR LEADERSHIP

Our organisation is run by a Board of Directors and a National Leadership Team, comprising experts in the fields of medicine, business, health and NGO management. They are responsible for setting the strategic direction of the organisation and for overseeing service delivery and day-to-day operations.

The Board



Dr John Gommans
(Chair)



Derek McCormack



Dr Elizabeth
Spellacy



Stewart Germann



Bill Hardie



Ruth Payne



Catherine Epps



Fuimaono Tuiasau



Mark Ford

NATIONAL LEADERSHIP TEAM



Chief Executive Officer,
Jo Lambert



General Manager –
Health Promotion
and Advocacy,
Julia Rout



General Manager –
Hauora Māori,
Nita Brown



General Manager –
Marketing and
Fundraising,
Chris Green



General Manager –
Corporate Services,
Donna McMahon



General Manager –
Northern Region
Don Scandrett



General Manager –
Midland Region
Nicky Mayne



General Manager –
Southern Region,
Chris Davis



General Manager –
Southern Region (retired),
Paul Rout

OUR MISSION, VISION AND VALUES

MISSION:

Our mission is to prevent stroke, improve outcomes, and save lives.

VISION:

We are committed to creating a nation where: stroke rates have significantly reduced, everyone across Aotearoa understands the risks and symptoms of stroke, and anyone affected by stroke is supported and empowered.

VALUES:

Our organisation is guided by four core values that help us to protect the communities that we serve in Aotearoa. These values support our vision, shape the culture of our organisation, and guide our team towards achieving better health outcomes for everyone. They promote a sense of collective responsibility, reinforce the importance of leadership and meaningful relationships, and herald the benefits of sustainable development in health and wellbeing. These four korus represent the four core values of the Stroke Foundation.



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.*



These values support our vision, shape the culture of our organisation, and guide our team towards achieving better health outcomes for everyone.

2021/22 AT A GLANCE

OUR LIFE AFTER STROKE RECOVERY SERVICES



28 COMMUNITY STROKE ADVISORS:

Reached **4,264** people affected by stroke across the country and are helping them live their best lives after stroke.

60% entered the service on an ongoing basis.

35,415 hours of community support.

76% of clients achieved their goals.



4 RETURN TO WORK ADVISORS:

Helped people return to their work safely and advocated for their rights.

203 clients were referred to the Return to Work service.

4,339 hours of community support.

30% of clients returned to work.



INTRODUCED TAKING CHARGE AFTER STROKE

Self-funding an **innovative, evidence-based person-centred** self-rehabilitation programme to improve long-term outcomes for people who have experienced stroke.

OUR STROKE PREVENTION WORK



FREE BLOOD PRESSURE AND PULSE CHECKS

4,290 free blood pressure checks taken across **120** sites.

84% of people tested had high blood pressure, significantly higher than previous years.

422 free atrial fibrillation checks were given. **6%** of people tested were suspected of having an irregular heartbeat.



LAUNCHED HE TAONGA

A free six-week online programme for managing high blood pressure. **155** people have signed up.



CONTINUED F.A.S.T. MESSAGING

1.7 million people have been reached through a social media campaign about F.A.S.T.

205 people have signed up for a free online course about the F.A.S.T. signs of a stroke.

Designed and built a **F.A.S.T. workplace toolkit** for business.

OUR ADVOCACY WORK



BRACING FOR THE STROKE TSUNAMI

In May 2021, we published a Policy Statement that **calls for action from the government and health sector to help us brace for the coming stroke tsunami.** The document discusses some uncomfortable truths about the burden of stroke in Aotearoa.



HIGHLIGHTING HOW SALT IS TROUBLESOME

Excessive sodium levels in processed foods is affecting the health of people across Aotearoa, causing them to have high blood pressure, which is a leading cause of stroke.

3 research papers commissioned with the National Institute of Health Innovation (NIHI).

Our research found chippies, sausages and pre-packaged sauces to be **extremely salty.**

Established a trans-Tasman salt expert advisory group.





PREVENTING STROKE IN AOTEAROA

The Stroke Foundation's stroke prevention work plays a critical role in reducing the burden of stroke across the motu. Compared to a baseline of stroke incidence in 2015, a 40% rise in stroke cases is anticipated by 2028. With Aotearoa having a growing and ageing population, stroke is costing our economy over \$1.1 billion every year.

We are raising awareness of the risks of stroke and promoting healthier lifestyles to reduce these risks, educating people on lifestyle changes and reaching out to at-risk communities with free testing of stroke risks. Our key priorities with such initiatives are to reduce health inequities and target communities at higher risk of stroke.

FREE BLOOD PRESSURE AND ATRIAL FIBRILLATION CHECKS

High blood pressure is a leading cause of stroke and is called the 'silent killer' as it often has no symptoms. A vital component in our prevention initiatives is our mobile screening service that offers free BP tests in communities around the country and identifies people with potentially high blood pressure, raising awareness of its connection with stroke risk. Our specially modified vans also screen for an irregular heartbeat or atrial fibrillation. Atrial fibrillation is a major risk factor for stroke which Māori and Pacific communities

experience at a younger age and higher rate than other New Zealanders.

Over the past decade, we have tested the blood pressure of over 100,000 people for free, with an estimated 80% of surveyed people going on to take action and to better manage their blood pressure through lifestyle changes or follow-ups with their health provider. During that time, approximately 3% of the people we tested were in hypertensive crisis, where their blood pressure was so high, they were at critical risk of experiencing a stroke. Quite simply, these vans save lives. This service is supported by Ryman Healthcare, The Estate of Ernest Hyam Davis & The Ted and Mollie Carr Endowment Trust, the Raymond Forbes Wilson Estate and Foodstuffs NZ.

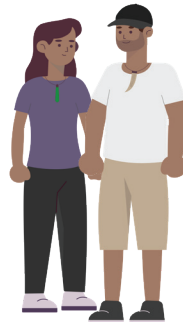
This year, we visited 120 sites throughout New Zealand, providing a total of 4,290 blood pressure checks. Over the past financial year, the blood pressure vans were affected by COVID restrictions which significantly reduced the time we could work in communities. Almost 84% of people checked recorded a high blood pressure reading, which was significantly higher than previous years in which only 30% of people tested had an elevated reading. 149 people were identified as being in hypertensive crisis, which is characterised by extremely high blood pressure, and at immediate risk of stroke.

37% of the people we tested had not had a blood pressure check in over a year or couldn't recall their last check.

We completed 422 atrial fibrillation (AF) checks over the financial year, with 6% referred to their doctor for a follow-up. An additional 10% of people tested were either tachycardic (fast heart rate) or bradycardic (slow heart rate) and were referred to their doctor for a follow-up.

HE TAONGA A FREE BLOOD PRESSURE MANAGEMENT TOOL

Visitors to our mobile services told us that they would like more support to manage their blood pressure and hauora (wellbeing). In May 2022, we launched an online tool that specifically targets lifestyle factors that lead to high blood pressure. He taonga (A Treasure) is a free six-week online programme to support communities towards a healthier lifestyle for themselves and their whānau. It is delivered through weekly emails that contain advice, support and links to videos and resources. Māori communities are the priority demographic for this programme, given they are more likely to be affected by stroke at a younger age and experience poorer health outcomes post-stroke than other New Zealanders. So far, 155 people have signed up for the free programme. You can check out the tool here:



www.stroke.org.nz/he-taonga

F.A.S.T. AWARENESS CAMPAIGN

An important part of minimising the impact of stroke is to recognise the signs that someone is having a stroke and get them medical attention as quickly as possible. Our campaign promoting the internationally recognised F.A.S.T. signs (Face drooping, Arm weakness, Speech difficulties and Take action - call 111) for early identification of strokes has proven to be highly effective at both raising awareness of stroke and its symptoms, as well as encouraging people to act quickly when they suspect someone is having a stroke. The campaign, which is developed in partnership with Te Whatu Ora (previously the Ministry of Health) and Te Hiringa Hauora, has a focus on six priority regions – Northland, South Auckland, Waikato, Lakes district, Te Tairāwhiti and



4,290

FREE BLOOD PRESSURE CHECKS

120 SITES VISITED ACROSS AOTEAROA

84%

OF PEOPLE TESTED HAD **HIGH BLOOD PRESSURE, WHICH IS SIGNIFICANTLY HIGHER THAN THE TYPICAL AVERAGE** IN PREVIOUS YEARS OF 30% HAVING AN ELEVATED READING

120 PEOPLE TESTED WERE IN **HYPERTENSIVE CRISIS**

422 FREE ATRIAL FIBRILLATION CHECKS

6%

OF PEOPLE TESTED SUSPECTED OF HAVING AN IRREGULAR HEARTBEAT

10%

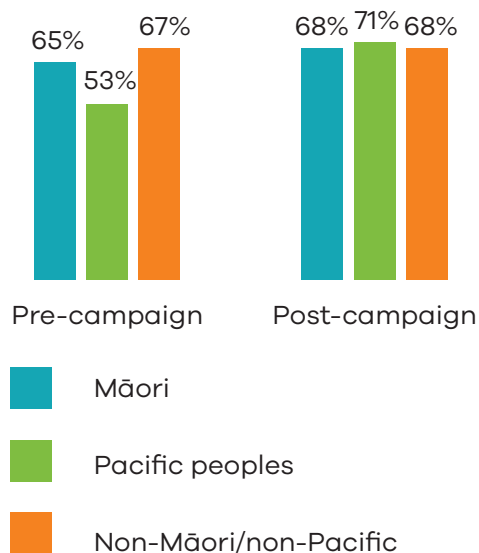
OF PEOPLE TESTED HAD **ABNORMALLY FAST OR SLOW HEART RATES**

Whanganui. Over the past financial year, we have supported community-led initiatives to promote the signs across these regions. We have also jointly developed 11 videos for promotion on the Stroke Foundation’s social media channels - primarily Facebook and Instagram. These videos have been promoted widely, reaching 1,703,774 people, and generating 287,211 engagements (likes, comments, and shares).

The campaign focuses on Māori and Pacific peoples, as they have a 1.5 to 3 times higher risk of stroke, compared to NZ Europeans. After successive campaigns over the past five years, the awareness of signs of stroke promoted in the F.A.S.T. message is now similar for Māori, Pacific peoples, and non-Māori/non-Pacific respondents. St John Ambulance Service data from 111 calls also demonstrates the long-term impact of creating F.A.S.T. awareness, with an increase in the number of 111 calls for suspected stroke over the period of the campaign.

Additionally, we have developed some innovative new tools for promoting the F.A.S.T. message, including a training course (both online and face-

Knowledge of ‘sudden numbness or weakness of the face, arms or leg’ as signs of a stroke



to-face) for community workers as well as a self-guided workplace toolkit for NZ workplaces to add to their existing Health and Safety programmes. There has been a particular focus on promoting the workplace toolkit and training programmes to large employers and community-centric organisations that actively engage with and support Māori and Pacific communities. So far, 205 people have signed up for the free online F.A.S.T. course. These toolkits and online courses can be accessed for free here: www.stroke.org.nz/fast

ADVOCACY FOR SALT REDUCTION

Salt consumption in New Zealand is almost double the recommended amount, which puts adults in New Zealand at significantly higher risk of stroke. Many people are unaware of the amount of salt they are consuming because three-quarters of salt intake comes from processed (packaged) foods and takeaways.

High blood pressure rates in New Zealand are directly related to the quality of our food supply and in particular the salt (sodium) content of processed foods. In 2013, the World Health Organisation (WHO) listed salt reduction as one of the nine most important measures for improving health and recommended that all member states (which includes New Zealand) reduce their



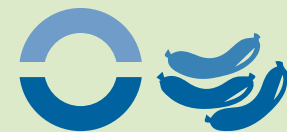
population's intake of salt by 30% by 2025. So far, New Zealand has made little progress towards achieving this goal.

Over the past 18 months, we have published three research reports on the sodium content of processed foods. We are using this research to call on policymakers to establish government-led salt targets for food reformulation. This would see food manufacturers required to comply with maximum levels of salt in processed foods, which in turn would reduce blood pressure risks across the population. You can access these reports here:

www.stroke.org.nz/salt-advocacy

FOCUS ON WORKPLACE HEALTH

We have partnered with the construction industry to develop a free onsite health and wellbeing service called Health15. The service brings advice, tests, and experts directly to worksites making it easier for construction workers to prioritise their hauora (wellbeing). Employers cover the costs associated with people who need clinical follow-up. We will be working with sites to implement basic initiatives that support healthy lifestyles as part of our on-site engagement processes. The partnership with The Building Intelligence Group and Naylor Love will be piloted in the last quarter of 2022.



SOME SAUSAGES CONTAIN **HALF OF THE MAXIMUM DAILY** RECOMMENDED INTAKE IN A SINGLE SAUSAGE



50% OF THE CHIPS AND SAVOURY SNACKS SOLD IN NEW ZEALAND **DON'T MEET VOLUNTARY SALT TARGETS**



6/10 SAUCES SOLD IN NEW ZEALAND **DON'T MEET VOLUNTARY SALT TARGETS**



ERIC KNAPP'S STORY

"9 years ago, on the day before my 33rd birthday, my life changed dramatically."

An extremely fit firefighter, Eric Knapp had been aching from a blistering migraine all day and wanted to see if it would get better after working out.

Upon leaving his fire station's gym, Eric found himself profusely sweating, despite making many attempts to cool down.

"I went to my quarters at the station to lay down. I even started pouring cold water down the back of my neck in desperation. Fifteen minutes later, the pain in my head got so bad that I blacked out", remembers Eric.

Eric's firefighting colleagues thought he just needed some glucose because of his intense workout, never realising that he was experiencing multiple strokes at work.

Eric woke up in the ICU from an induced coma 24 hours later to find his girlfriend by his bedside, along with his extended family from Hamilton.

Incredibly, Eric had survived a whopping 13 strokes, occurring back-to-back, of which three were major strokes.

Unbeknownst to anyone, Eric had a condition called Polycythaemia, where excess red blood cells cause the blood to thicken, creating blood clots. His strokes were induced by a blood clot that travelled up to his brain.

Two weeks later, Eric was wheeled into the Stroke Rehabilitation Unit at Christchurch's Burwood Hospital after being told that he might never be able to talk, swallow or move his left side again.

Ten weeks later, Eric walked out of Burwood Hospital, albeit with the assistance of a tall walker, and was talking and eating with ease.

Back home, however, it began sinking in for Eric that he will never be able to be a firefighter again, the only job he had been trained for and done since the age of 20.

Losing his identity and income stream in one blow caused Eric to be extremely depressed, which he said affected his relationship with his partner at the time, leading to them breaking up.

Eric moved back to Hamilton for three years, to be closer to his family and come to terms with the losses he had suffered.

The understanding and support of his family were highly appreciated, but Eric calls his journey back from depression a “deeply personal journey” that led to a “spiritual awakening”.

Eric, who had worked part-time as a personal trainer, set up a home gym at his parent’s home and began his physical rehabilitation to combat the negativity in his thoughts.

“I was lucky that I had my family to fall back on, and that I did not have children or a partner that depended on me. I could devote myself completely to recovering, and getting better,” says Eric.

BACK HOME, HOWEVER, IT BEGAN SINKING IN FOR ERIC THAT HE WILL NEVER BE ABLE TO BE A FIREFIGHTER AGAIN, THE ONLY JOB HE HAD BEEN TRAINED FOR AND DONE SINCE THE AGE OF 20.

Nine years later, and despite the miraculous progress he has made, Eric still won’t rest on his laurels.

“I rarely reflect on the improvements I’ve made so far. People who knew me from then tell me it’s astounding seeing me today – working, talking, and walking”.

“But after a stroke, recovering is a 24/7 job, with no days off. Every morning I wake up and cajole myself to exercise, get to work, and add purpose to all my actions. I still have a long way to go, recovery-wise, and I need to maintain the gains I’ve made,” says Eric with determination.

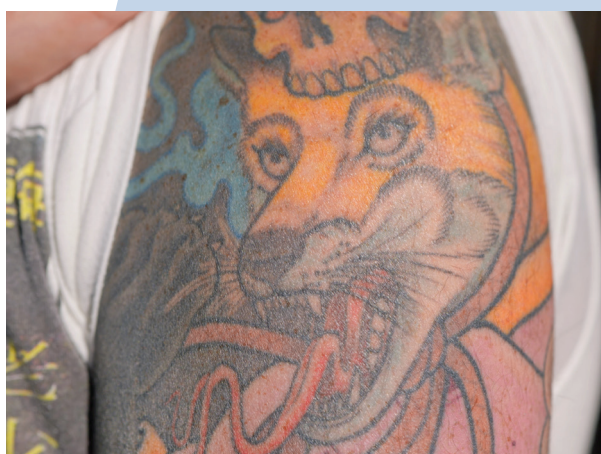
Today, Eric Knapp works for the Stroke Foundation as a Community Stroke Advisor in Christchurch.

“This is my dream job, I’m able to pass on really solid knowledge that could help other survivors,” he says.

“I tell clients that recovery is a marathon, not a sprint!”

On Eric’s left arm sleeve, he has a beautiful fox tattooed, which holds special meaning to him.

“The fox reminds me that I outfoxed this condition – that I’m still standing,” says Eric triumphantly.





OUR COMMUNITY-BASED SUPPORT FOR PEOPLE AFFECTED BY STROKE

The depth and quality of our community-based recovery services, through the work of our Community Stroke Advisors (CSAs) and Return to Work Advisors (RTWAs), is extensive. CSAs and RTWAs are our front-line, free service for people affected by stroke, their whānau and carers. CSAs and RTWAs visit people in their homes to discuss and develop plans to meet their needs and help them achieve individual goals related to their recovery.

CSAs provide support, information and advice to build knowledge and skills, liaise with stroke clubs and connect people affected by a stroke, their whānau and carers to the services they need to aid their recovery. RTWAs support people recovering from a stroke in navigating the job market, and re-evaluating career options in some cases.

“I FEEL GRATEFUL FOR THE CARE I EXPERIENCED AND THE ASSISTANCE FROM THE STROKE FOUNDATION THAT HELPED ME TO BE ABLE TO GO HOME.” *JANNY H, CSA CLIENT*

HEAR FROM OUR COMMUNITY SUPPORT TEAM



Brenda Rainsbury (Community Stroke Advisor)

Brenda believes in the power of good information for her clients, often travelling with a host of brochures and books related to stroke, including what she describes as her “Bible”, the Life after Stroke book published by the Stroke Foundation. Brenda is acutely aware that people who have recently experienced a stroke are at higher risk of experiencing a repeat stroke. Brenda often works with clients to address a common issue faced by people affected by a stroke in the first year of their recovery – fatigue. She advises them not to test their limits too much and to listen to their brain and body when fatigued, as this is a natural response to repairing damage after a stroke. “Think about it as roadworks, and fatigue is the detour to facilitate that neurological recovery. If you feel like taking a rest, don’t fight it,” she tells clients. Recreational activities such as social and exercise groups are also presented as options for clients who may be feeling isolated after their

"I THINK THE STROKE FOUNDATION IS A WONDERFUL SERVICE. I NO LONGER FELT I HAD BEEN FORGOTTEN. I NOW HAVE MONTHLY SUPPORT AND HAVE BEEN CONNECTED TO OUR LOCAL STROKE GROUP WHERE I CAN SOCIALISE WITH OTHER SURVIVORS. THANK YOU SO MUCH." *LORRAINE K, CSA CLIENT*

stroke. Brenda is keen to introduce clients to emotional and behavioural changes that they may experience after their stroke and to be wary of depression and anxiety taking a toll on their mental health.



Emily May (Community Stroke Advisor)

"When I first contact my clients, most are in a challenging place – as it dawns on them that they still have a long way to go in their recovery. As CSAs, when we visit people in their homes it is so vital to simply listen to their stories."

"My job as a CSA involves putting things into perspective for my clients. Usually, this means reminding them of the incredible progress they have made - from the early challenging months to where they are now. That perspective works both ways though, as we also acknowledge the struggles that people affected by a stroke and their families go through. Every person has days when they feel sorry for themselves, and those emotions are a valid part of the recovery journey. It is important to remind them that they don't have to stay strong all the time and to ask for support when they need it. Many of my clients inspire me, and they often just need a dash of courage or support to take the next plunge – that's what CSAs from the Stroke Foundation are here to do."



"THANK YOU FOR BEING SO CARING AND EASY TO CHAT WITH."

JOHN L, CSA CLIENT

STROKE RECOVERY WITH THE SUPPORT OF OUR DONORS AND SUPPORTERS LAST YEAR...

28 COMMUNITY STROKE ADVISORS REACHED THOUSANDS ACROSS THE COUNTRY AND ARE HELPING THEM LIVE THEIR BEST LIVES AFTER A STROKE.

4,264

PEOPLE AFFECTED BY STROKE REACHED. **60%** ENTERED THE SERVICE ON AN ONGOING BASIS

35,415

HOURS OF COMMUNITY SUPPORT

76%

OF CLIENTS ACHIEVED THEIR GOALS



“WE ARE GRATEFUL FOR THE SUPPORT, KINDNESS AND FRIENDLINESS SHOWED TO US. THANK YOU.” *RICHARD W, CSA CLIENT*

WITH THE SUPPORT OF OUR DONORS AND SUPPORTERS LAST YEAR...



Amy Church (Return to Work Advisor)

Amy offers a pathway back to work for people who have survived a stroke and helps them get back to their careers safely. Driving licenses and assessments are commonly discussed, as a lot of people affected by stroke are unsure of the process of reapplying for their license. Amy expertly decodes Work and Income forms for clients, giving them a good idea of the kind of financial support they can apply for and how to attain permissions from treatment teams for certain requests. For clients who have recently had a stroke and cannot return to their jobs, such expertise is very welcome. As one of her clients said during a visit, “No one has said what I can claim for, and what I cannot claim for, I’ve worked all my life and never had to do this before.” Amy facilitates opportunities for clients to meet other people affected by a stroke with symptoms that are like theirs, such as vision problems or speech difficulties, to learn more about how they have re-entered the job market while dealing with their recovery. In addition to updating their résumés and exploring future career options, Amy introduces people to the idea of volunteering, to build up their résumés, gain additional references as well as reinforce their confidence, while they search for a paid job.

4 RETURN TO WORK ADVISORS HELPED PEOPLE TO RETURN TO THEIR WORK SAFELY AND ADVOCATED FOR THEIR RIGHTS

203

CLIENTS REFERRED TO THE RETURN TO WORK SERVICE

53%

ENTERED THE SERVICE ON AN ONGOING BASIS

4,339

HOURS OF COMMUNITY SUPPORT

30%

OF CLIENTS RETURNED TO WORK



BRACING FOR A STROKE TSUNAMI

THE STROKE FOUNDATION'S POLICY STATEMENT

Stroke is an issue that is not going away, and the sooner it is addressed, the sooner Aotearoa can ensure healthier communities are built throughout the motu. In May 2022, the Stroke Foundation published a policy statement that will guide our ongoing advocacy work. The document discusses some uncomfortable truths about the burden of stroke in New Zealand:

- Too many people from Māori and Pacific communities experience stroke, at too young an age.
- Too much salt in our processed food is disproportionately impacting lower socio-economic communities.
- Where you live, your economic situation and access to support services significantly affect your likely stroke outcome.
- Government funding for the essential services provided by NGOs like the Stroke Foundation is low, and risks people in need “falling through the cracks”.

Bracing for the Stroke Tsunami goes on to make five key “asks” to policymakers:

- Support to introduce the New Zealand-designed and evidence-based *Taking Charge After Stroke* intervention.
- Support to keep people well in their communities, with a focus on six priority regions, particularly for blood pressure monitoring.
- Establishing government-led salt reduction targets for a wide range of processed food categories.
- Help to stop the “postcode lottery” by ensuring our Community Stroke Advisor service is part of a nationally integrated stroke pathway.
- Assistance to ensure the sustainability of the Stroke Foundation’s service through improved funding.

You can read all about the *Bracing for the Stroke Tsunami* document here:

www.stroke.org.nz/policy-statements



SERVICE DELIVERY REVIEW

A GOOD LIFE AFTER STROKE

Over the past financial year, the Stroke Foundation completed a service delivery review to ensure our services are sustainable, evidence-based, and adaptable for the health system reforms happening in Aotearoa.

The review assessed the Foundation's recovery services delivered by our team of Community Stroke Advisors (CSAs) and Return to Work Advisors (RTWAs). The assessment identified opportunities for improvement to these services based on the latest research and changing health system environment.

Delivering equitable services for all communities requires the Stroke Foundation to have the resources, knowledge, and flexibility to customise specific services to populations of greatest need.

Based on these insights, the Service Delivery Review advises on how the current model of service delivery can be redesigned to deliver more services to more people, to best meet the needs of those affected by stroke.



NATIONAL STROKE NETWORK

The National Stroke Network (NSN) provides national clinical leadership to ensure high-quality, sustainable, and comprehensive stroke services to all people living in Aotearoa.

The Stroke Foundation provides both secretariat and project management support to the NSN, through a contract funded by Te Whatu Ora (previously the Ministry of Health). Over the past financial year, the Stroke Foundation also became a member of the NSN, adding a valuable consumer and NGO perspective to the network.

The NSN provides guidance to Te Whatu Ora on national indicators regarding stroke in the clinical setting, through its working groups and regional stroke networks.

The NSN monitors the timely admission of people affected by stroke to a Stroke Unit, the treatment rates for acute stroke, the time it takes to transfer patients to rehabilitation facilities that aid their ongoing recovery and finally, the return of these patients to their community.

Through this approach, the NSN looks to provide a strategic direction to Te Whatu Ora for guidelines regarding stroke prevention and early-risk identification, acute care for stroke patients in hospitals, as well as rehabilitation guidelines for people who are recovering.

STATEMENT OF COMPREHENSIVE REVENUE AND EXPENSE

For the year ended 30 June 2022

	JUNE 2022	JUNE 2021
Income		
Bequests	795,913	435,608
Contracts	905,606	715,405
Donations	1,942,541	2,221,159
Depreciation Recovered	-	1,478
Grants	1,328,340	1,167,566
Rental Income	49,840	49,840
Sales	161,408	245,671
Subscriptions	439	560
Investment Income	30,192	13,181
Wage & Resurgence Subsidy	207,132	-
Total Income	5,421,410	4,850,468
Operating Expenses		
Audit fees	17,948	16,900
Bequest – Research	-	100,000
CRM Database Implementation Costs	132,121	-
Depreciation	97,573	123,909
Loss on Disposal of Fixed Assets	244	1,454
FAST Campaign	16,619	22,244
Finance & Accounting	30,433	29,533
Fundraising Expenses	674,502	782,551
Governance	6,523	11,316
Information Services	146,822	217,543
Investment Expenses	10,152	1,503
Operations	584,740	474,618
Property Expenses	220,109	257,322
Staff Remuneration	3,371,179	3,091,078
Sundry Expenses	870	174
Total Operating Expenses	5,309,835	5,130,144
Surplus/(Deficit) for the year before grants	111,575	(279,676)
Allocations made		
Northland Bequest Fund	17,898	20,129
JGS Reid Fund	3,619	2,620
Young Stroke Thrivers Trust Expenses	-	1,321
Total Allocations made	21,517	24,069
Total Surplus/(Deficit) for the year	90,058	(303,745)
Other Comprehensive Revenue and Expenses		
Movement in Value of Investments	(135,695)	14,560
Realised Gain/(Loss) on Sale of Investments	(4,267)	-
Total Other Comprehensive Revenue and Expenses	(139,963)	14,560
Total Comprehensive Revenue and Expenses for the year	(49,905)	(289,185)
Net Trustees Income for the year	(49,905)	(289,185)

STATEMENT OF FINANCIAL POSITION

For the year ended 30 June 2022

JUNE 2022 JUNE 2021

Assets

Current Assets

Cash and Cash Equivalents	1,344,429	911,929
GST Receivable	-	6,933
Receivables (from exchange transactions)	149,327	118,815
Prepayments	-	109,781
Total Current Assets	1,493,756	1,147,458

Non-Current Assets

Fixed Assets	2,123,354	1,118,631
Investments	1,393,507	1,514,132
Total Non-Current Assets	3,516,861	2,632,763

Total Assets	5,010,617	3,780,221
---------------------	------------------	------------------

Liabilities

Current Liabilities

BNZ Credit Cards	15,022	12,545
Payables (from exchange transactions)	318,623	212,582
GST Payable	19,030	-
Accrued Holiday Pay	195,638	178,848
MSD Wage Subsidy Accrual	77,118	-
PAYE Payable and employee benefit liabilities	65,019	66,738
Total Current Liabilities	690,450	470,713

Total Liabilities	690,450	470,713
--------------------------	----------------	----------------

Net Assets	4,320,167	3,309,509
-------------------	------------------	------------------

Equity

Accumulated Funds	1,791,169	1,847,575
Revaluation Reserve	1,060,563	-
JGS Reid Fund	80,832	82,908
Northland Bequest Reserve	1,387,604	1,379,027
Total Equity	4,320,167	3,309,509

OUR PARTNERS & SUPPORTERS

As a charity, our primary source of funding is from donations and fundraising. We are incredibly grateful for the support we receive and would like to thank all our partners and supporters for their contributions.

MAJOR PARTNERS:

Estate of Ernest Hyam Davis
& The Ted and Mollie Carr
Endowment Trust



lane neave.

MAJOR FUNDERS:

The AH Somerville
Foundation



REGIONAL FUNDERS:



JM Thompson
Charitable Trust



OTHER FUNDERS:

AORAKI FOUNDATION
BENDIGO VALLEY SPORT AND CHARITY FOUNDATION
BURROWS BROTHERS CHARITABLE TRUST
CENTRAL LAKES TRUST
COMMUNITY TRUST SOUTH
DAVID ELLISON CHARITABLE TRUST
DRAGON COMMUNITY TRUST
EASTERN & CENTRAL COMMUNITY TRUST
E M PHARAZYN TRUST
F H MUTER TRUST
GEYSER COMMUNITY FOUNDATION
GUY ANSON WADDEL CHARITABLE TRUST
HUGO CHARITABLE TRUST
ILT FOUNDATION
KIWI GAMING FOUNDATION
LW NELSON CHARITABLE TRUST
MILESTONE FOUNDATION
NZ COMMUNITY TRUST
PELORUS TRUST
REDWOOD TRUST
ROTORUA ENERGY CHARITABLE TRUST
SAM MILLWARD FUND
SHACKLOCK CHARITABLE TRUST

SOUTH CANTERBURY TRUSTS
STEWART FAMILY CHARITABLE TRUST
TG MACARTHY TRUST
THE PHILLIP VERRY CHARITABLE TRUST
W. DUNCAN BICKLEY TRUST FUND
WEST COAST COMMUNITY TRUST
WESTERN BAY OF PLENTY DISABILITY SUPPORT TRUST
WHANGANUI COMMUNITY FOUNDATION

SUPPORTERS:

BDO WELLINGTON
BW MILLER DEAN LTD
FOODSTUFFS
JA DAVEY
JBWERE
NZIER
NZ POST
ORANGEBOX





Level 1, Thorndon Rise Building
95-99 Molesworth Street, Wellington 6011 PO Box 12482, Wellington 6144
stroke.org.nz 0800 STROKE (0800 78 76 53)