

# Annual Report 2020

CANCER SOCIETY OF NEW ZEALAND

**Central Districts Division** 



# President's Report

It is my honour to present my 19th Annual Report as Central Districts Division President.

During this year I am pleased to report we made progress in achieving our strategic plan. We have transitioned from Centre to service led



management, and we have made very significant progress in our moves towards improving cultural awareness and competence.

This year, however, has seen significant change. Over 2018 and 2019 the Cancer Society of New Zealand developed and introduced a new national strategic plan, underpinned by the need to achieve equity of outcomes for all those with cancer; and defines the priorities of the Cancer Society in informing and influencing public policy; providing core services and support; reducing risks both to the Society and our communities, and building capacity. The strategic plan was based on nationwide consultation with our staff, volunteers, and stakeholders.

A key message received was we are not optimally positioned to produce the necessary outcomes. Di-

rection and decision making are thought to be slow, convoluted, poorly understood, inflexible, and unable to respond rapidly to our changing needs.

In March, CSNZ welcomed a new National Chief Executive, Lucy Elwood, who took up her position essentially as the country went into Covid-19 Level 4 lockdown. I wish to acknowledge the invaluable work of the previous national Chief Executive, Mike Kernaghan.

This Division, along with all of the Cancer Society, rose magnificently to the challenges posed by Covid-19, and managed to maintain services and staff. However, in the future months and years there is no doubt that Covid-19, while currently contained in New Zealand, will have ongoing major impacts. Considerable financial uncertainty and increased unemployment is likely; resulting in increased need for our services and support, coupled with a likely downturn in our fundraising abilities.

The rapidity of the evolving Covid-19 pandemic highlighted the flaws in our decision-making abilities, and capacity to move resources to areas of greatest need inherent within our federated structure.

As part of the strategic planning process the National Board had determined that consideration of the Society's governance and structure was a high priority,

and the arrival of the Covid-19 pandemic re-enforced this need. My thanks to Lucy for her unstinting and inspiring leadership through this unprecedented situation.

As the Division is a federation within a federation, it is timely that we review the fitness for purpose of our own governance and organisational structures, for all the reasons above.

National Office has released a second iteration of the national cancer statistics (CanStats) including 2019 incidence and 2016 mortality. These figures pose significant challenges for our division. The 2016 cancer mortality for the division is the highest in New Zealand, 8.6% higher than Waikato-Bay of Plenty, and 20% higher than Canterbury-West Coast.

The Division does have a number of inherent challenges. We have: the greatest proportion of population aged over 65, the highest proportion population in deprivation Levels 4 and 5 (50.3%) only just ahead of Waikato, and are just second to Waikato in the proportion of patients who are Maori and Polynesian. In addition, we have the most smokers, the lowest intake of fruit and vegetables, and the lowest levels of physical activity. These statistics show we will need to increase our support for cancer patients, increase our health promotion efforts and to continue to work with our health service partners and ad-

vocate for improved cancer screening services and more equitable provision of cancer treatments to our communities.

My grateful thanks go to Debra Elgar our Chief Executive for the major and ongoing progress she has achieved in leading improvement in delivery of our services and steering us safely through the pandemic. My thanks also go to all our dedicated staff working across the Division, and the huge number of volunteers who so generously support our work. My thanks also go to my fellow members of the Central Districts Dvision Executive Committee as we all continue to work to reduce the impact of cancer and improve outcomes for all with cancer in our community.

Dr Garry Forgeson President Central Districts Executive.

The Supportive Care team recorded a 9.7% increase in new client referrals.

# **Chief Executive's Report**

What a year we've had throughout the Central Districts Division.

There have been all sorts of challenges, that as a division, we have tackled and made plenty of progress.

Our restructuring to focus more resources on Service Delivery has been well progressed and staff from all Centres have welcomed the move. We are poised to leap ahead with our increased service delivery model in the coming years.

There's no denying the end of the last financial year was one never to be forgotten with the Covid-19 global pandemic unleashing chaos throughout Aotearoa.

The lockdown and pandemic have had, and continue to have, a significant impact on the Cancer Society fiscally and we've reacted as quickly as we can, reducing spend where ever possible. But there is no denying the financial pressure is on for the year ahead of us.

The announcement of the Cancer Control Agency has been a highlight of the past financial year.

The Cancer Control Agency is a departmental agency that will provide strong national leadership for, and oversight of, cancer control in NZ and is led by Professor Diana Sarfati. The agency will drive the implementation of the Cancer Action Plan, which focuses on equity and delivering nationally consistent services for all New Zealanders, no matter who they are or where they live.

Key priorities for the Agency include providing strong accountability, coordination of various agencies involved in cancer, and working to implement the Cancer Action Plan.

While cancer data for Maori still clearly illustrates inequity the division itself has been working in this area to help overcome this. Collaboration and development of relationships has been undertaken to ensure the Cancer Society is not a stand-alone cancer entity and we can all work together to meet the needs of our diverse community.

## ADDRESSING EQUITY

The initiative developed for the Division to build a



foundation of equity has been successful this year in fostering a positive transition for the public health service we provide to all people in our Division.

Our work is in keeping with the Society's national commitment to lead the way in this aspect of health delivery which continues to be a blight throughout the health system. The confidence our staff have gained and the positive change within the Division is noticeable.

The investment of time with a goal in mind enables our staff to achieve satisfaction in knowing their ability to reach all people challenged by cancer is growing.

During the year four Māori Cancer Deep Dive Hui were held in our Division facilitated by the Central Cancer Network. The Cancer Society as a stakeholder, was a key partner and it gave us a unique opportunity to interface with Māori communities on a scale never experienced by the Society from which strong relationships developed. A wide range of stakeholders also attended.

CCN now aims to put the voice of whānau into action and next year will begin this by working together with providers to deliver a series of Rongoā Māori Days for whanau, Māori Cancer Clinical Training Days for Primary and Community Care and a Māori Cancer E-Learning Tool.

Kia Ora E Te Iwi is a signature programme offered by the Society to support and share information about cancer with whānau. During the year we have started a process of building toward a collective approach to confidently deliver this programme throughout our Division next year.

In January we hosted the national hui in Manawatū, attended by most of the Māori staff from the Society and we appreciate the leadership of Shayne Nahu from National Office who made it happen.

We were able to hear from some thougth provoking speakers and share with each other. Tena koutou e ngā iwi o te motu i tae mai ki tēnei hui whakahirahira.

Finally, to cap off the year, each Centre now have



their own bilingual banners so keep an eye out for them as there are more to come.

#### **FUNDRAISING**

2019-2020 has been challenging in the fundraising sector.

The Australian bushfires have had an effect on available funds, on both sides of the Tasman. Then this was compounded at the end of the end of the financial year when Covid-19 hit. Unfortunately this will have an impact on income for a few years to come, however the team are getting creative with ways to generate income in our new sense of normal.

Significantly the Taranaki Relay For Life was postponed until March 2021 while the Manawatu RFL just snuck in and was incredibly successful, being held the same weekend Government announced the country was likely to head into lockdown.

With the introduction to our staff of a dedicated grant administrator we have seen an increase in grant applications and income. Grant applications are now being processed centrally for all Central Districts Centres and this has resulted in a very focused approach and a remarkable success rate.

The regular giving campaign has been paused for now. Initially this produced some fantastic results, with an increase of more than 1,400 regular monthly donors. The effects of Covid-19 and lockdown was nearly instant with many regular givers cancelling their ongoing donations. However, we will still see a large increase in income from these donations and we also expect to resume this campaign in future years.

A few new fundraising events have been introduced around the country. Auckland Division introduced the 'Longest Golf Day' which consists of playing four rounds of golf on one day in January. Although this started in Auckland, the joys of social media saw this event go slightly viral across the country. 2021 will see this become a national event.

Many supporters also hit the pavement with Marathon in a Month taking place in many of our Centres. Running or walking a marathon is a daunting pros-



pect, until you break it down over a month. Some chose to up to ante, with completing more than one marathon.

#### **VOLUNTEERING**

The introduction of Better Impact, the volunteer management system, has seen a significant change in volunteering across the Cancer Society nationally. This programme gives volunteers the autonomy to book their own shifts and log their own hours, along with keeping them informed of upcoming events and opportunities. It has been a large and positive step into the online world.

Central District volunteers donated more than 18,500 hours, covering driving, baking, support services, gardening, cleaning, reception and many more roles, and continue to be the backbone of our work.

#### SUPPORTIVE CARE

The Supportive Care team of nine, across the division, assisted 1,538 new referrals. This is an increase of 9.7% from lasts years' total of 1,402. We also saw a 5.1% increase in financial assistance providing a total of \$61,343 divisionally.

People are living longer after a cancer diagnosis but it has been identified that one of the greatest struggles, is getting to grips with what is the "new normal" for someone after treatment. It has been rewarding to be able to offer our "Living Well With and Beyond Cancer" workshops which are well attended, where clients are able to have access to a range of information and support, complimentary therapies, counselling, mindfulness and exercise to be able to get on with their life after cancer. This is a significant step forward and is a measure of the success of early diagnosis and treatment, that people now see that there is life after cancer.

#### **HEALTH PROMOTION**

Our Health Promotion team this year have continued to engage and mobilise communities to work towards our strategic goals of New Zealanders having fewer cancers, achieving Smokefree Aotearoa 2025, reduce the incidence and impact of avoidable skin cancer caused by UVR, encourage and support healthy living.

We have engaged with local councils to raise awareness of the commitment to be smokefree and provide shade policies for the benefit of their communities. Together with supporting our school's to have SunSmart processes and policies in place and become

part of the SunSmart School Accreditation programme.

Another area that has been raised in the New Zealand Cancer Action Plan is maintaining a healthy weight, healthy eating, physical activity and limiting alcohol. Obesity is the second biggest preventable cause of cancer after smoking, leading to approximately 3.4 million deaths worldwide and is associated with an increased risk of 13 types of cancer.

It will be this, that becomes our greatest challenge in the years ahead for the Society, and for our many colleague organisations with whom we work in partnership

#### **STAFF**

In the divisional office, we have a team of very dedicated and enthusiastic staff who support the work of the service delivery staff in the Centres. Without the behind the scenes work of this team we would be hard pressed to be able to support the service delivery team across the division.

All of our staff are a tremendous asset and I am very grateful for the work they do and their

ability to go above and beyond what is expected of them for our clients, for our colleagues, and for the Cancer Society.

Finally, but by no means least, we owe a debt of gratitude to ANZ who continue to be the Cancer Society's major sponsor. We appreciate their loyal support of the work we do. Our teams enjoy great relationships with their local ANZ branches and we very much look forward to those continuing.

Debra Elgar Chief Executive Central Districts Division.

18,500 volunteer hours were donated throughout the Central Districts Division.

# Finance Report

## **Division Only:**

Looking at the financial year, overall income has increased by \$556,000, with expenses increasing by \$313,000, leading to a surplus of \$628,000, or an increase of \$243,000 on last year's surplus.

This is a good result, but it is important to note that the Research Fund has been the main driver of the surplus, with this fund achieving a \$632,000 surplus.

On an operational level, our income and expenses saw us with a \$5,000 deficit. This is good to see as we aim for a break-even budget for the operational side of the Society.

#### **Central Districts Division:**

It is pleasing to have all Centres represented on the Central Division Finance Committee, and I thank all members for their contributions to the Division.

Even though a surplus is pleasing to see, the Division continues to rely heavily on bequest income (31%) and fundraising (40%) to cover the costs of the organisation.

The regions continue to invest significantly in all core service areas of Research, Supportive Care, Health Promotion and Volunteering, with 60% of all spending focused to these areas. Administration costs accounted for 14% of spending so we are pleased with this level of costs. This can only be attributed to the reporting and analysis we see at our meetings. I wish to thank Debra Elgar and Chris Franklyn for all of their work on this, but also my thanks to both Sheree Brannigan and Elaine Ireland who all work diligently for the Division in the finance department.

The Division is still investing in income opportunities and initiatives on funding and revenue generation and we await the results to flow through.

The Finance Committee wishes to thank and acknowledge the relationship with the ANZ Bank as principle sponsor.

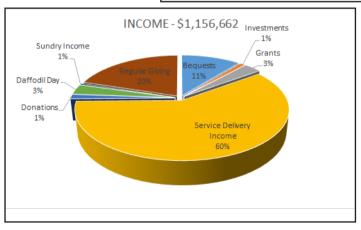
Graeme Baker Chairman CD Finance Committee

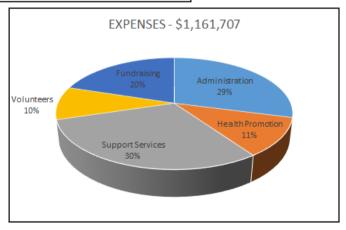
# **Operational Income**

# **Operational Expenses**

Bequests	\$124,521	Administration	\$267,452
Investments	\$ 11,684	Health Promotion	\$102,839
Grants	\$ 36,557	Support Services	\$276,101
Service Delivery Income	\$691,766	Volunteers	\$ 88,208
Donations	\$ 16,434	Fundraising	\$184,853
Daffodil Day	\$ 37,385	Regular Giving Costs	\$242,255
Sundry Income	\$ 6,141	TOTAL EXPENSES	\$1,161,707
Regular Giving	\$232,174	Divisionional Operational Deficit -\$5,045	
TOTAL INCOME	\$1,156,662		

Please note: Research income and expenses have been removed.



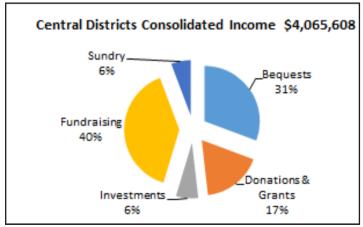


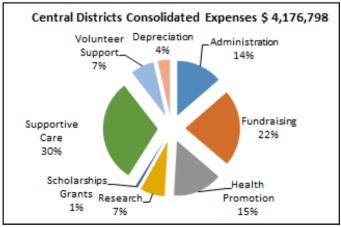
# **Consolidated Report**

(includes all Centres, research and scholarship)

income			Expenses
Bequests Donations & grants Investments Fundraising	\$1,246,201 \$ 712,923 \$ 263,718 \$1,609,029	Adminstration Fundraising Health Promotion Research Scholarship grants	\$ 569,719 \$ 944,046 \$ 611,637 \$ 305,586 \$ 32,350
Sundry TOTAL INCOME	\$ 233,737 <b>\$4,065,608</b>	Supportive care Volunteer support Depreciation	\$1,274,187 \$ 287,937 \$ 151,336
Consolidated Deficit -\$111,190		TOTAL EXPENSES	\$4,176,798

## Consolidated Deficit -\$111,190





# **Bequests**

Est N Attwood

Est FQ Davies

Est JL Dillon

Est RR Hayward

Est AM Osgood

Est FS Pollard

Est LD Rolston

Est DP Scandrett

Est RA Simpson

Est MG Smith

Est MG Watson

**TOTAL** 

\$124,521.00

## **Grants received**

Lottery Community
(TAC Team & Travel cost for Oncology Social Work Conference)
NZ Community Trust
(Operational costs)
The Southern Trust

(Professional Supervision cost)

## **Executive**

President: Garry Forgeson **Vice Presidents** Graeme Baker Stuart Hylton Gisborne Centre Pam Murphy David Hall Hawke's Bay Centre Janice Klinkhamer Paul Davies Manawatu Centre John Waldon Penny O'Leary Taranaki Centre Monique Bastin Ian Smiley Whanganui Centre Jenny Vickers

Marie Baker



# Staff

**Chief Executive:** 

Debra Elgar **Business Services:** Chris Franklyn Supportive Services Pauline Farguhar **Fundraising** Sandy Carter **Volunteers** Sandy Carter DL Accounts/Payroll Sheree Brannigan Account services Elaine Ireland Comms coordinator Natalie Campbell **Grants** coordinator Sushmita Chakravarty **CD** secretary Liz Munro **Bequest coordinator** Steph Strahan (until April 2019) TAC team Lynne Kitchen Lois Grocutt (until Sept' 2019)

> Pauline Waite Rose Fitchett

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Office Hours: Monday - Friday: 8.30am- 5.00pm Saturday - Sunday: Closed

