



St John
Here for Life

Annual Report 2016

Pūrongo-ā-tau o Hato Hone





Health and wellbeing

St John is on a journey towards becoming a truly integral part of New Zealand's community health care solution of the future. Our vision is enhanced health and wellbeing for all New Zealanders.

Our five Values guide how we do things together as One St John.



We have Open Minds – Whakahangahanga

Listen openly. Encourage ideas.
Welcome feedback.

We Make it Better – Whakawerohia

Find solutions – step up. Own it. Do it.

We do the Right Thing – Whakaaro Tika

Take responsibility. Make the tough calls.
Think of others.

We stand Side by Side – Whakakoha

Respect, value and support what others contribute.

We are Straight Up – Whakapono

Act with honesty, courage and kindness.

EXECUTIVE SUMMARY

St John is a charitable organisation that provides emergency ambulance services to nearly 90% of New Zealanders in 97% of New Zealand's geographic locations.

The St John ambulance service is the emergency arm of the health sector, responding to more than 482,000 111 calls for an ambulance each year. Our 2,083 paid staff, 9,288 volunteers and 7,481 Youth members have contact with more than 1 million people each year. We are on call around the clock, every day, caring for others.

St John is playing an increasing role in meeting the broader health needs of New Zealanders. We deliver a portfolio of complementary health services designed to build resilient communities. We work in partnership to develop strong communities. We are capable, reliable and trusted.

St John is three years into our 2013-2018 Integrated Business Plan (IBP) – the One St John Plan – and achieved significant milestones this year, including the implementation of our electronic Patient Report Form (ePRF). The IBP describes how we will improve what we do for our patients, clients, customers, donors and our people, achieving five key ambitions in five years.



Right care, right time

We're changing the way we respond. From delivering patients to a place of care, to delivering the right care to our patients, first time.



Local pathways

We're becoming a hub for community health.



Quality care

We're embedding a clinical focus in everything we do.



Partner of choice

We're becoming a preferred partner for anyone who wants to deliver care to the community.



People prepared for change

We're strengthening our people's capability and capacity, and making St John a great place to work.



The Bigger Picture

The Integrated Business Plan and our five ambitions are illustrated visually in The Bigger Picture, on pages 20 and 21.



Dr Steve Evans, Chancellor

Here for the community

It has been a privilege to serve as Chancellor in what has been one of the most important and challenging years in the history of St John New Zealand.

St John is enriched by the diverse range of services we provide and the people who provide them; our paid staff, volunteers, Youth members, and Order members. This Annual Report outlines the achievements of the past year, and tracks our progress against the key measures of the St John Integrated Business Plan (IBP), which sets five ambitions in five years.

For me this year's stand-out highlight is the successful implementation of our world-leading electronic Patient Report Form (ePRF). Moving from paper to electronic records is a first for the New Zealand health sector. It is not only a significant achievement, and the realisation of many years of research and planning, but provides a foundation for St John to continue to serve our patients and their communities well into the future.

I congratulate and thank all those involved in the ePRF roll out. The project involved many areas of our organisation working side-by-side, and demonstrates what we can achieve as One St John.

The impact St John has in the community is often the result of collaboration across different areas of St John. I was delighted this year to see Clinical Operations and Community Health Services jointly launch the 3 Steps for Life programme. This initiative aims to improve cardiac arrest survival rates through greater grassroots community access to training in CPR and automated external defibrillator (AED) use.

This year also involved challenges, as we took steps to help return St John to a financially sustainable

position. Like much of the health sector, St John faces the impacts of increasing demand, rising costs and an aging population, as we strive to deliver quality care to our patients in a changing environment.

Over the past year, we made preparations to increase the ambulance part charge, launched our first regular giving fundraising programme, and made significant internal cost savings. We contributed to an independent review of funding arrangements for the ambulance sector, commissioned by our Government partners, the Ministry of Health and the Accident Compensation Corporation (ACC), and look forward to the release of this important report.

I am very proud of the way our people have responded to the year's challenges. Our strong clinical focus and patient-centric approach resulted in the best ever ambulance response times, and a significant increase in survival rates for out-of-hospital cardiac arrest patients.

We saw considerable success in our programmes that build community resilience, from our 7,481 Youth members, to the medical alarms team and the Caring Callers who support New Zealanders to live independently for longer. With the support of ACC, our St John in Schools programme grew by 125%, with a record 110,560 children participating this year. We also saw health shuttle client trips increase to 71,780 this year with 12% more people with health or mobility problems driven to their medical appointments.



The Prior of St John in New Zealand and Governor-General, His Excellency, Lt Gen The Rt Hon Sir Jerry Mateparae presided at the Investiture in Auckland this year. This was the last formal duty of Sir Jerry's five-year term as Prior and St John acknowledges the mana he has brought to the organisation. Sir Jerry said it had been a privilege to serve St John, an organisation whose members demonstrate every day their commitment to caring for their fellow New Zealanders.

I am also humbled by how New Zealanders have rallied to support us. St John was voted Most Trusted Charity for the third consecutive year in the 2016 Reader's Digest Trusted Brands survey, and



Congratulations to Georgia Raynel, National Cadet of the Year

a priority. Over the past year we made excellent progress towards safe crewing, successfully completed the second year of our Volunteer Sustainability Strategy, and continued to embed the St John Values.

At this year's Auckland Investiture, the Prior of the Order of St John and Governor-General His Excellency Lieutenant General The Rt Hon Sir Jerry Mateparae performed his last formal duty. His work with St John was significant and notable. He will also be remembered for his engagement with individuals and the organisation in general, which was outstanding. We wish him and Lady Janine all the very best for their futures. Thank you for your significant contribution to St John in New Zealand.

New Zealanders donated a record amount in the 2016 Annual Appeal, allowing us to purchase new ambulances and lifesaving equipment.

St John would not be what it is today without a deep connection with our local communities. This year we recognise the achievements specific to the Northern Region, Central Region and South Island Region by including highlights from each region within the National Annual Report. I particularly want to thank the 1,280 volunteers who serve on our 150 area committees for the essential contribution they make throughout New Zealand. Their focus and energy in our communities is essential to our work and their contribution is greatly valued.

I want to thank and acknowledge the guidance and wisdom of the Prior and Chapter, the Priory Trust Board, and Peter Bradley and the Executive.

I also want to thank the wider St John team, and our many volunteers, partners and supporters for their energetic contributions to the Order.

Dr Steve Evans, Chancellor and Chair of Priory Trust Board

The health, safety and wellbeing of our people remains



Priory Trust Board (as at November 2016). From left to right: Geoff Ridley, Joanne Conroy, David Aro, John Whitehead, Dr Steve Evans (Chairman), Dr Vanessa Thornton, Jeremy Stubbs, Souella Cumming, Ken Williamson and Peter Young. Absent: Jenni Norton, Lesley McTurk, and Lee Short



Peter Bradley, Chief Executive Officer

Here for our patients, people, customers and donors

We have enjoyed another very successful year at St John, as is clearly evident in the pages of this 2015/16 Annual Report. Despite the financial challenges we faced and the difficult decisions we have had to make this year, St John has continued to make a difference every day to the communities we serve.

St John touched the lives of hundreds of thousands of New Zealanders this year; from the 437,978 patients who were treated and transported by ambulance officers, to our 40,797 medical alarm customers and the 76,844 people trained in first aid, to our 1,306 Caring Caller clients.

We are there for New Zealanders in their time of need, and continue to have real impact in building community resilience through our community health programmes and commercial activities such as medical alarms and first aid training.

Participation in the St John in Schools programme more than doubled with 110,560 children taught life-saving skills. We reported our best ever emergency ambulance response times this year, and improved the survival to discharge rate of patients who suffer a cardiac arrest outside of hospital from 15% in 2014/15 to 16% this year. This remarkable achievement is the result of a concerted effort across St John, better community awareness and education and our partnerships with organisations such as the NZ Fire Service.

Behind all the impressive statistics and achievements are the day-to-day experiences of our patients, our people, our customers and donors. I am very fortunate in my role to see and hear of many examples of outstanding service and support across St John – we should never take this for granted, it's what makes us who we are.

We make it better

Annual reports are usually about looking back, and while this is important, it's also important to look to the future, and in this regard we have much to be positive about.

This year, we continued our focus on improving and modernising our ambulance service for the benefit of the community. The successful rollout of our electronic Patient Report Form (ePRF) is an historic achievement, and the result of an outstanding whole-of-organisation effort.

We saw similar success in increasing the coverage of our 111 Clinical Hub, improving access to the right care at the right time for patients in the Waikato, Northland and Hauraki/Coromandel areas. We invested in the infrastructure of our 111 Centres, completing preparation for a much-needed upgrade to the computer aided dispatch system which was successfully executed in August.

Significant progress was also made towards achieving the ambition of double-crewing all St John emergency ambulances. This is a key goal for St John, and an important part of our five-year Integrated Business Plan (IBP).

“We are there for New Zealanders in their time of need, and continue to have real impact in building community resilience”

Our work towards double crewing and what we believe will be a positive result from the ambulance funding review, will, in the coming years, let us focus on many other important activities from our Youth programme to our community health initiatives. This strategic focus will be a key feature of our next five-year Integrated Business Plan to be launched in 2017.

To everyone, who works, volunteers and supports our great organisation, thank you for all that you have done over the last year to support our patients, our people, customers and our wider services – whether in a high profile role, or behind the scenes providing support, I appreciate it and it is part of what makes St John so well respected across New Zealand. ■

A handwritten signature in black ink, appearing to read 'P Bradley'.

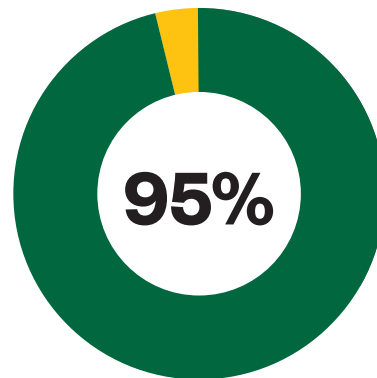
Peter Bradley, Chief Executive Officer /
Tumu Whakarae

Highlights of the 2015/16 year include:

- the successful nationwide rollout of our electronic Patient Report Form (ePRF) technology, providing better information sharing between St John and major health service providers and improving patient care
- the launch of 3 Steps for Life, a free education programme for community aimed at reducing the out-of-hospital cardiac arrest toll
- the expansion of nurse/paramedic telephone advice (the 111 Clinical Hub) to Northland, the Waikato and Hauraki/Coromandel
- an improvement in the survival to discharge rate of patients who suffer a cardiac arrest outside of hospital from 15% in 2014/15 to 16% in 2015/16
- the best ambulance response times in St John NZ history, despite increased demand
- a new partnership between ACC and St John in Schools that will reach 480,000 children over four years
- significant progress towards achieving full double crewing, and year two of our Volunteer Sustainability Strategy, Te Ara Hato Hone (the St John Māori Strategy), and our new Values programme.

437,978

Patients treated and/or transported by ambulance officers



95%

of patients said they had trust and confidence in St John Ambulance staff



Executive Management Team (as at November 2016). From left to right: Gary Connolly (Chief Financial Officer), Norma Lane (Director of Clinical Operations), David Thomas (General Manager South Island Region), Darrin Goulding (Director of Strategy and Governance), Peter Loveridge (Director of Commercial Services), Tom Dodd (HR and Order Matters Director), Sarah Manley (Director of Community Health Services), Peter Bradley (Chief Executive Officer). **Inset top to bottom:** Andrew Boyd (General Manager Central Region), Gwen Green (General Manager Northern Region), Cameron Brill (Chief Information Officer).

The following statistics and facts give a snapshot of our work 1 July 2015-30 June 2016

	Total 2015/16	Total 2014/15	Increase/ decrease	Variance
111 emergency calls for an ambulance ¹	482,002	454,990	27,012	5.9%
Emergency incidents attended	382,325	366,375	15,950	4.4%
Other incidents attended ²	78,525	78,770	-245	-0.3%
Events serviced	6,133	7,174	-1,041	-14.5%
Patients treated and/or transported by ambulance officers	437,978	428,319	9,659	2.3%
Ambulances and operational vehicles	696	662	34	5.1%
People trained in first aid	76,844	73,118	3,726	5.1%
Medical alarm customers	40,797	39,339	1,458	3.7%
Children who participated in the St John in Schools programme	110,560	49,101	61,459	125.2%
Caring Caller clients	1,306	1,200	106	8.8%
Health Shuttle client trips	71,780	63,996	7,784	12.2%
Youth members	6,312	6,500	-188	-2.9%
Youth leaders ³	1,169	1,097	72	6.6%
Order members ³	1,710	1,690	20	1.2%
Area Committee volunteers	1,280	1,277	3	0.2%
Health Shuttle volunteers	615	630	-15	-2.4%
Caring Caller volunteers	976	1,078	-102	-9.5%
Community Care in Hospitals volunteers ⁴	791	831	-40	-4.8%
Events volunteers	1,452	1,523	-71	-4.7%
Clinical volunteers (headcount) ³	3,684	4,380	-696	-15.9%
Clinical paid personnel (FTE) ^{3,5,6}	1,161	1,146	15	1.3%
Total paid personnel (FTE) ^{3,5,6}	2,083	2,082	1	0.0%
Total paid personnel (headcount) ^{3,6}	3,139	3,060	79	2.6%
Total volunteers (headcount) ³	9,288	9,447	-159	-1.7%
Total personnel (headcount) ^{3,6}	17,635	17,858	-223	-1.2%

1 National total of 111 calls answered in the three Clinical Control Centres, excludes reoffers

2 Non-emergency incidents

3 Includes national headquarters

4 Friends of the Emergency Department and Hospital Friends

5 Full time equivalent

6 Does not include vacant roles

Volunteer and paid personnel as at 30 June 2016. Some personnel have multiple roles.

Some 2014-15 comparatives have been restated to align with 2015-16 personnel categorisation.

AMBITION 1

Highlights of the past year include:

Best ever emergency response times

By working smarter, St John continues to exceed its contracted emergency response times even though demand continues to rise for our services. This year we responded to 9,783 more immediately life-threatening incidents in eight minutes than the previous year. Over the same period our Clinical Control Centres have significantly reduced the dispatch times for "Red" incidents which are immediately life-threatening or time critical. For these incidents St John is 18% faster in urban areas and more than 10% faster in rural areas.

St John has nine contracted ambulance response time targets agreed with the Ministry of Health and ACC, that are in line with New Zealand ambulance standards. We consistently strive to deliver the right care to our patients at the right time, improving our response time to life-threatening and time-critical cases and finding better ways to treat the non-emergency cases.

St John has performance targets for three types of incidents:

- Immediately life-threatening (cardiac/respiratory arrest) ("Purple")
- immediately life-threatening or time critical ('Red')
- urgent or potentially serious but not immediately life-threatening ('Orange').

Significant performance improvements were achieved over the past year. Key contributing factors were the flow-on impact of last year's additional 158 frontline staff, the impact of the further deployment of the 111 Clinical Hub (working with Homecare Medical), our

Right care, right time

What we're doing

We're changing the way we respond. From delivering patients to a place of care, to delivering the right care to our patients, first time.

How we do it

Our new service delivery model lets us choose the best way to help from a wider pool of non-emergency community healthcare facilities, and enable ambulance to focus on the emergency acute calls.

The Top 10 reasons New Zealanders called 111 for an ambulance

Chief complaint	% of 111 calls
GP Referral	19.1%
Sick Person – specific diagnosis	9.4%
Breathing Problems	8.7%
Falls/back injuries	8.6%
Chest Pain	7.9%
Unconscious/Fainting	7.1%
Unknown Problem (third party calling)	5.3%
Traffic Accident	4.2%
Abdominal Pain/problem	3.7%
Traumatic Injuries	3.4%

partnership with the NZ Fire Service, and technological improvements such as patient-centred deployment and real-time reporting.

Our partnership with the Fire Service

St John and the New Zealand Fire Service (NZFS) work together as co-responders to optimise our response to the most time critical 'Purple' medical emergencies. In these cases, which make up 1% of medical emergencies, Fire Service crews, trained by St John

in CPR and other lifesaving techniques, are dispatched at the same time as an ambulance. NZFS co-responders' training can keep a patient who is in cardiac or respiratory arrest alive until our paramedics arrive, improving their chances of survival. NZFS also provide emergency support to remote and isolated communities. First responders are local volunteer fire brigades trained by St John to provide a higher level of clinical care. They can be dispatched by our 111 Clinical Control Centres

Performance targets - how quickly we responded to purple and red incidents

Purple incidents	60% Target		96% Target	
	Urban	Rural	Urban	Rural
Performance targets	60% in 8 minutes	60% in 12 minutes	96% in 20 minutes	96% in 30 minutes
What we achieved	77.6%	67.9%	98.8%	97.5%

Red incidents	50% Target		95% Target	
	Urban	Rural	Urban	Rural
Performance targets	50% in 8 minutes	50% in 12 minutes	95% in 20 minutes	95% in 30 minutes
What we achieved	58.2%	52.6%	96.2%	93.3%

Orange incidents	80% target		
	Urban	Rural	Remote
Performance targets	80% in 20 minutes	80% in 30 minutes	80% in 60 minutes
What we achieved	76.2%	84.1%	91.9%

Our response times around New Zealand

District	Percentage of urban purple incidents responded to within 8 min			Percentage of urban red incidents responded to within 8 minutes		
	2014/15	2015/16	Improvement	2014/15	2015/16	Improvement
Auckland	71.8%	78.8%	7.0%	52.7%	54.6%	1.9%
Canterbury	69.3%	76.5%	7.2%	51.9%	55.8%	3.9%
Central East	68.5%	72.6%	4.1%	57.4%	59.2%	1.8%
Central South	77.7%	78.8%	1.1%	65.6%	67.6%	2.0%
Central West	78.5%	75.2%	-3.3%	57.8%	58.2%	0.4%
Northland	63.4%	61.8%	-1.6%	49.8%	52.5%	2.7%
Southland/Otago	83.5%	86.4%	2.9%	70.2%	71.3%	1.1%
Tasman	77.4%	82.6%	5.2%	65.2%	68.0%	2.8%
National	72.8%	77.6%	4.8%	56.1%	58.2%	2.1%

District	Percentage of rural purple incidents responded to within 12 minutes			Percentage of rural red incidents responded to within 12 minutes		
	2014/15	2015/16	Improvement	2014/15	2015/16	Improvement
Auckland	63.6%	59.4%	-4.2%	51.9%	49.9%	-2.0%
Canterbury	57.8%	64.4%	6.6%	37.8%	42.1%	4.3%
Central East	63.7%	53.4%	-10.3%	49.6%	51.0%	1.4%
Central South	74.1%	79.4%	5.3%	59.4%	59.3%	-0.1%
Central West	69.5%	65.0%	-4.5%	54.6%	54.9%	0.3%
Northland	44.8%	62.5%	17.7%	43.2%	45.5%	2.3%
Southland/Otago	71.1%	81.9%	10.8%	60.7%	59.6%	-1.1%
Tasman	72.0%	81.5%	9.5%	56.5%	59.1%	2.6%
National	63.4%	67.9%	4.5%	52.0%	52.6%	0.6%

to be the first responder to a medical emergency. They are always backed up by the nearest available ambulance.

Over the past financial year, the co-responding Fire crew was first on scene in 704 (17% of Purple cases). These represented a small percentage of our 382,325 emergency callouts, but are the cases where every second counts.

- 189,421 Purple and Red calls in 2015/2016 and of these 183,739 had a vehicle arriving at scene
- NZFS attended 6,492 (3.5% of Red and Purple attended)
- NZFS arrived first for 2,861 (1.6% of Red and Purple attended)

Investment in business resilience and disaster recovery

As a major emergency service St John continually updates business continuity planning to ensure our operations can be maintained in the face of events and incidents that would have a major public impact and test the resilience of our operations and ability to respond.

St John staff have also reviewed the National Ambulance Major Incident Plan with Ambulance New Zealand, the organisation representing ambulance and air ambulance services.

Our business resilience and emergency management plans were subsequently tested in two major exercises; multi-agency Exercise Tangaroa in August 2016, and St John exercise Kia Mananui in September 2016.

St John fleet upgraded

St John put 47 new ambulances on the road over the past year, which allowed us to reduce the age of our ambulance fleet. A new ambulance design will be introduced in the next financial year, following a successful trial of the new van conversion ambulance design. The new ambulance design will be fitted with the latest Stryker Power-Load self-loading stretchers which will help improve the health and safety of our staff.



The Stryker Power-Load stretcher

We upgraded 35 of our 12-lead monitors with new Lifepak 15 monitors and were gifted 80 of the latest model MRx monitors to replace our older MRx 12-lead monitors.

CAD upgrade

Preparations were completed for an important upgrade to the Computer Aided Dispatch (CAD) system used in our 111 Centres this year. The benefits include a more resilient infrastructure, automated alerts, and better maps to enhance the dispatch of ambulances and call taking. The new CAD was successfully implemented in August 2016 and the smooth transition showed the value of detailed planning and strong collaboration between the project team, centre staff, the vendors and with Wellington Free Ambulance.

National Air Desk trial

St John has worked with key partners to plan the trial of a national Air Desk that will centralise the dispatch of New Zealand's emergency air ambulance call-outs. At present air ambulance and helicopter responses are dispatched locally, with on average 120 air ambulances dispatched each week. A specialist Air Desk will mean better coordination nationally and enable the building of specific expertise to guide air ambulance call-outs. St John has worked with the Air Rescue Group, the Wellington Free Ambulance and the Ministry of Health on this initiative that will improve the outcome and the quality and experience of patient care. ■

St John got to
9,783
more Purple and Red incidents in 8 minutes than the previous year

+18%

St John was up to 18% faster at dispatching ambulances to Red incidents

We answered
93.6%
of calls within 15 seconds



Local pathways

What we're doing

We're becoming a hub for community health.

How we do it

We work closely with communities at a grass roots level to create local pathways to patients' care.

We deliver targeted local health solutions by supporting community-driven initiatives.

Community programmes

Through our connections with community organisations and primary healthcare providers, St John builds resilient communities and supports the health, wellbeing and independence of New Zealanders.

- **Friends of the Emergency Department** – FED volunteers provide comfort and companionship to patients in hospital and emergency departments.
- **Caring Callers** – Our volunteers offer a telephone friendship service to support lonely or isolated people, calling regularly to check everything is okay.
- **Health Shuttles** – Free Health Shuttles transported 71,780 people with health or mobility problems to medical appointments.
- **Community Carers** – Volunteers provide non-clinical care and support to rest home residents and their visiting friends and family in a new Northland initiative that builds on local Friends of the Emergency Department programmes.
- **Therapy Pets** – A joint initiative between St John and the Auckland SPCA. Volunteers and their pets visit rest homes, hospitals and other health services to reduce the stress and fear associated with illness.
- **St John Youth** – Our programmes for young New Zealanders develop first aid, health care, leadership and life skills in a positive fun environment. Penguins are aged 6-8 years, and Cadets are aged 8-18 years.

Total Youth members

7,481

Total Youth leaders **1,169**

Total Cadets
and Penguins **6,312**

➤ **St John in Schools** – a popular education programme for pre-school and school-aged children.

Area committees

In 150 communities, St John Area Committees work with local stakeholders to plan and provide St John programmes, support station management and volunteers and promote St John services. They raise essential funds needed for the day-to-day running costs of the station, the purchase of life-saving equipment such as defibrillators and stretchers, and play an important role in the St John Annual Appeal. Our Area Committees, and the 1280 volunteers are an integral part of the St John team, connecting us with communities throughout New Zealand.

Highlights of the past year include:

St John in Schools

St John in Schools, our programme that teaches children the skills and confidence to take action in an emergency, has enjoyed a significant boost this year. A new partnership with ACC was launched in March 2016 by the Hon. Nikki Kaye, Minister for ACC, and St John CEO Peter Bradley. Each year ACC receives approximately 349,000 injury claims involving children younger than 14, and the St John in Schools programme is a major investment in injury prevention and life-saving initiatives.

Our shared goal is to reach 480,000 children in the four years 2015-2019. In the year to June 2016, the programme was delivered to 110,560 preschool and primary school students. There have been numerous examples of children who have been through a St John in Schools programme making a real difference in an emergency. In July 2015, ASB

became corporate partner for the programme, which is now known as ASB St John in Schools.



The Hon. Nikki Kaye, Minister for ACC, and St John CEO Peter Bradley launch the St John in Schools programme at Clendon Park School in Manurewa, in March 2016.

3 Steps for Life aims to reduce cardiac arrest toll

As part of an effort to improve cardiac arrest survival rates in New Zealand and raise awareness of the silent killer, St John ambulance officers and tutors are volunteering their time to deliver a 3 Steps for Life community education programme to the public for free. The programme aims to not only build community resilience and responsiveness, but also to raise awareness of a medical issue that results in more than 1,200 deaths a year, a figure that is about four times the national road toll.

3 Steps for Life is designed to give all New Zealanders the confidence and awareness to take action when somebody suffers a cardiac arrest by:

- 1 calling 111
- 2 starting CPR
- 3 using an AED (automated external defibrillator).

AED in marae

Māori are 1.8 times more likely to be diagnosed with heart disease than other communities and this also increases their chance of suffering a cardiac arrest. As a result St John has developed a Marae Cardiac Arrest programme using the 3 Steps

for Life programme. St John Pou Takawaenga (Māori liaison officers) are working with 33 marae around New Zealand to support training in CPR and access to defibrillators. The initiative reflects St John's commitment to enhancing Māori health outcomes though the Te Ara Hato Hone strategy to address inequities in health outcomes for Māori.

Youth team win third world championship

For the third competition in a row, the St John New Zealand Youth team was named world clinical champions at the International Cadet Camp and Competitions. The championships were held in Hong Kong in January. The four-person winning team were among a contingent of 75 New Zealanders. They competed against young people from 11 St John Pories representing their countries. ■



World champions: Aaron van der Klip, Michaela Judson, Ella McLaren, Frances Rankin, Selena Gordon, Kate Eggletonn.



Highlights of the past year include:

The 111 Clinical Hub

After a successful pilot of the 111 Clinical Hub in the three DHB areas of Auckland, we expanded the coverage to the DHB areas of Northland, Hauraki/Coromandel and Waikato, as well as the three Wellington DHBs this year. The 111 Clinical Hub now covers about 53% of the country's population for low acuity calls, compared with 31% in the pilot year.

The Clinical Hub is a secondary triage process designed to safely and effectively help patients who do not need to be transported to an emergency department – providing these patients with the right care at the right time, and freeing up emergency ambulance and hospital resources to treat more urgent cases. The Clinical Hub is staffed by registered nurses and paramedics based in our 111 Clinical Control Centres who carry out in-depth clinical telephone assessments on selected callers to identify alternative care pathways. These could include helping arrange a visit to the patient's GP or an Accident and Medical centre, or self-care. An ambulance might also be dispatched.

The roll out of the Clinical Hub has continued to have a significant impact on the number of ambulance presentations to Emergency Departments in the five DHB areas, reducing them by 8,766 incidents. Over the year the Clinical Hub team responded to 33,621 incidents, an increase of 7,989 incidents from last year.

Key to the success of the Hub is St John's partnership with Homecare Medical, whose registered nurses work in our 111 Clinical Control Centres. This initiative has also strengthened links between St John, DHBs, PHOs and the Ministry of Health.

Quality care

What we do

We're embedding a clinical focus in everything we do.

How we do it

We're creating a clinical hub to support dispatch and ambulance staff with specialist advice when it's needed. We're developing a set of key clinical performance measures to keep us on track.

Implementation of the Spinal Cord Injury Policy

In July 2015, St John implemented a Spinal Cord Injury (SCI) Destination Policy. Patients identified with signs of quadriplegia or paraplegia following trauma are transported to a dedicated spinal cord impairment centre where feasible. Spinal cord impairment centres include Middlemore Hospital, Starship Children's Hospital and Christchurch Hospital. Transporting patients directly to a spinal cord impairment centre and bypassing other hospitals will significantly improve outcomes for these patients by allowing direct access to urgent decompressive surgery. The new approach is one of the key objectives under the New Zealand Spinal Cord Impairment Action Plan, a joint initiative between the Ministry of Health and ACC.



Emergency Medical Dispatchers are responsible for dispatching the appropriate road or air ambulance crew to incidents

STEMI pilots

Successful pilots to respond to ST-elevation myocardial infarction (STEMI), a complete blockage of a coronary artery, have continued to operate in Northland and Nelson Marlborough. In the pilots St John paramedics take an active role in directing patients to a specific hospital for treatment and can administer clot-busting medication when necessary.

Since launch in February 2016, 18 patients have been through the STEMI pathway and patients now reach a dedicated heart attack centre within 100 -110 minutes of the arrival of the St John ambulance. This represents a reduction in time of between 180 and 240 minutes.

The Out-of-Hospital Cardiac Arrest (OHCA) report



NZ Fire Service co-responders work alongside St John paramedics on a cardiac arrest patient

This year St John has published its third OHCA (Out-of-Hospital Cardiac Arrest) annual report, which analyses the survival to discharge of patients who are treated for a cardiac arrest in their home, work or public place.

The number of people treated for a cardiac arrest by ambulance officers, transported to hospital and subsequently discharged alive is one of the key measures of clinical quality for an emergency ambulance service.

Our survival rate of 16% of patients discharged alive from hospital compared well with the London Ambulance Service, 9%, Ambulance Victoria in Australia, 10% and Wellington Free Ambulance, 14% .

The data presented in the annual OHCA report provides a strong evidence base for reviewing our practices and considering clinical improvements to patient care.

Combined with our community programmes, this helps to reduce the death toll due to cardiac arrest.

Valuing patient feedback

Every month St John seeks feedback via a survey from a random selection of its patients in each region. For this year our key measures continued to show a positive trend.

- 95% of patients said they had trust and confidence in St John Ambulance staff
- 97% of patients said they were treated with kindness and respect
- 95% of patients said they were satisfied with their overall experience

Examples of what patients said include:

"Ambulance staff were always helpful and cheery, giving relaxing support." – Northern

"I greatly admire the St John Ambulance staff as they patiently and lovingly do their work anytime, day or night." – Central

"During the whole incident my wife and myself have had 100% trust in these guys. They were marvellous and I knew I was as safe as was possible. Thank you." – South Island



Building clinical expertise

St John's Clinical Practice and Planning team's responsibilities include ensuring staff in the field have access to clinical support and advice through two of the

Clinical Control Centres. They also ensure St John staff with a clinical practice level receive continuing clinical education.

This year the team provided 6,017 instances of clinical advice and support to staff in the field. This is a 34% increase on the previous financial year.

Continuing Clinical Education:

The targets for continuing clinical education for first responders and staff with an Authority to Practise (ATP) were largely exceeded this year.



Clinical audit and research

The Clinical Audit and Research Team aims to improve patient care through a systematic review process. The introduction of the ePRF (electronic Patient Referral Form) has helped to streamline the audit process. This year St John has audited 5.02% of all ePRFs, achieving our target of auditing 5% of patient records by 2018, two years early. As well as our regular audits,

St John has undertaken multiple focused audits of areas of clinical significance to improve clinical practice.

St John conducts research to gather accurate data to improve the outcomes for our patients. Key examples include the OHCA (Out of Hospital Cardiac Arrest) report, (see above) and our participation in clinical trials. This year St John is participating in two significant clinical trials. The first investigates the use of oxygen in heart attack patients. The second is the use of a clot-prolonging drug Tranexamic acid (TXA) in patients with severe bleeding.

Telarc audit notes “good culture”

St John successfully gained the certification requirements for the key audit into the performance and service of its ambulance operations. The ISO9001 and NZS8156 standards ensure St John meets the appropriate New Zealand and international standards of service for an ambulance and paramedical service. The latest audit was conducted in November 2015 and scrutinised the clinical safety, reliability, efficiency and effectiveness of St John operations, from its contact centres to its ambulance fleet and staff. In summary the auditors said they were pleased to see the high professionalism and

consistency of processes in place. Their report noted that St John had turned a corner in its quality improvement journey and highlighted the “good culture” demonstrated by staff.

Station manager forums

Eleven forums were held around the country – from Kerikeri to Gore – to encourage station managers to explore the way their role fits in operations. They explored issues from human resources to leadership, with territory managers facilitating the workshops. Feedback from these inaugural forums has been positive. Station managers have said they were better equipped to lead teams and to build positive and productive work environments. They welcomed the support they gained from the network of station managers.



Meeting targets for continuing clinical education	First Responders	Emergency Medical Technicians	Paramedics	Intensive Care Paramedics
CCE period one: May to December 31, 2015	59.96%	87.53%	95.54%	95.52%
CCE period two: January to June 30, 2016	52.91%	79.85%	89.44%	92.05%

Targets for completion of Continuing Clinical Education: 50% for First Responders and 80% for staff with an authority to practise (ATP)

Single-Point-Of-Entry (SPOE) pathway builds on electronic patient records

Good progress has been made in developing a Single-Point-of-Entry (SPoE) patient pathway that integrates St John's 111 service with district health boards and primary care services.

About 81% of patients attended to by St John Ambulance have an issue that can be classified as minor or moderate. Without formal referral pathways, many are transported to emergency departments, when other health and medical care would be more appropriate for the patient. When visiting patients, ambulance officers can gain insight into their medical and social situation that can help inform more targeted care. During the year St John in Nelson has piloted a SPOE pathway that enables ambulance officers to refer patients who are safe to stay at home but require follow-up to be referred to the Nelson Marlborough DHB/Nelson Bays Primary Health Community Care Coordination Centre (CCCC).

In the year to June 2016, the pilot SPOE pathway had 390 referrals, making up between 2% and 3% of referrals to the CCCC. Feedback from the health partners, the DHB and Nelson Bays Primary Health has been positive with staff noting that St John ambulance staff in Nelson Bays were playing a lead role in preventative health care and that the system was picking up vulnerable patients who may have formerly been missed. In September 2015, the St John SPOE pathway won the People's Choice Award at the Nelson Marlborough DHB Health Quality & Innovation Awards. ■



Successful rollout of e-Patient Report Forms

St John has successfully introduced its new electronic Patient Report Form (ePRF) to its ambulance service, which means patients in the 97% of the country St John serves will benefit from better and more accessible information sharing between St John and major health service providers at DHBs and primary care providers.

The world-leading technology replaces handwritten, paper-based ambulance patient record forms with an electronic version on Samsung tablets. The electronic record integrates with district health board systems, so hospital services, in particular emergency departments and maternity services, can access real-time information from incoming ambulances to improve the quality and safety of patient care. The ePRF can

also be sent to a patient's GP, and there are opportunities for future integration with other healthcare providers.

Up until June 2016, 223,241 ePRFs were created with St John transporting and/or treating 326,523 patients, including 29,670 patients with heart problems and 14,762 patients from road accidents.

The success of the ePRF rollout would not have been possible without the strong engagement and feedback of our staff. In the pilot programmes, staff in real-life situations provided suggestions for improvement via a feedback mechanism on the tablet. Local champions for ePRF were identified and have become the go-to people for staff learning how to best use the new system. ■

Partner of choice

What we do

We're becoming a preferred partner for anyone who wants to deliver care to the community.

How we do it

We're partnering effectively with other primary care and emergency service providers as an integrated part of community healthcare.

We're the partner of choice for donors who want to see good done in the community.

People choose our products and services because of who we are.

Highlights of the last year include:

New Zealand's most trusted charity

For the third year in a row, the New Zealand public voted St John their *Most Trusted Charity*. The annual independent survey is commissioned by Reader's Digest. Upon receiving the award, St John Chief Executive Peter Bradley thanked New Zealanders for their ongoing support of St John. St John was humbled by the response from the New Zealand public. The trust of the community can never be taken for granted.



76,844 New Zealanders trained in first aid

St John's public first aid training builds capability in communities throughout the country. The high quality of our tutors was reflected in satisfaction scores of more than 90% from clients, and we have retained Category 1 training status. Our tutor certification system reinforces our focus on quality training and we now deliver on-the-job assessment training internally. This training supports other areas of St John by establishing a quality benchmark for tutor standards. St John works with a range of large organisations to deliver first aid training. This year St John and Air New Zealand have entered into a partnership where we

are providing first aid training to airline staff, both aircrew and ground crew. We are continuing to develop the partnership.



Free home safety checks with St John Medical Alarms

St John Medical Alarms help seniors and people with disabilities to continue enjoying their independence for longer. Ours are the only medical alarms monitored directly by St John and are the medical alarms recommended most often by GPs. In July 2015, we introduced new medical alarm features, including a pendant that activates automatically if the wearer experiences a fall, a smoke detector that is monitored via the medical alarm and a special 'Health Advice' function. 40,797 New Zealanders have a St John Medical Alarm installed in their home.

We have also teamed up with the Accident Compensation Corporation to help prevent accidents and falls at home. During a St John Medical Alarm service visit, we ask our clients if they want their homes checked to identify falls hazards they might not be

aware of, using the *ACC Home Safety Checklist*. Our staff can then give advice to help make our clients homes a safer environment against falls and other risks. The checks are done by St John Medical Alarm representatives and are free to our clients. Since the launch of the three-year programme in January 2016, staff have carried out 703 free home safety checks.

The generosity of New Zealanders

St John would not be able to maintain and improve on its high level of service to the public without the generous support of New Zealanders.

New Zealanders generously supported the work St John does in their communities with \$38.2 million in support from individuals, corporate partners, trusts and grants, supporter scheme members, Team Green regular givers and bequests.

For our Annual Appeal week in April, St John set a target to raise \$2.2 million in donations. This target was exceeded, with generous New Zealanders donating more than \$2.7 million, which is our best result to date.

For the 2016 appeal, Lucy Knight – the good Samaritan who almost lost her life after going to the aid of a woman being mugged in Auckland – agreed to be the new face of the St John annual appeal. In a video supporting the appeal, Lucy Knight said, "St John kept our family whole."

Funds raised in the St John Annual Appeal 2016 will be spent directly on ambulances and a variety of hi-tech clinical and medical equipment – mobile data terminals, stretchers, defibrillators, heart

rate monitors, and specialised extraction equipment – along with ambulance officer training and uniforms.



Team Green

St John thanks the reliable donors who have joined our Team Green regular giving programme. Team Green donations go directly toward providing critical backup for St John frontline services. After a successful pilot, the programme is being promoted nationwide. As of October 2016, more than 4,600 New Zealanders have signed up to support Team Green.



Supporter scheme

Our 145,000 Supporter Scheme members are taken care of by St John in a medical emergency. Members pay an annual fee, and in return receive free medical emergency attendance and free ambulance transport for accident related injuries more than 24 hours old (ACC usually covers those less than 24 hours old).

Bequests

St John was again greatly supported by a group of special individuals who made donations in their wills. Their legacies make a significant contribution to the services St John provides, now and in the future.

Grants

The Lion Foundation has supported St John since 2004. This year, a grant of \$1 million was used to fund frontline ambulances. The Lottery Grants Board granted \$300,000 to support the St John Community Programmes, volunteer reimbursement costs and the HEARTsafe programme. Additional grants from a number of trusts were received during the year, and we acknowledge these along with other donors and supporters on page 19.

Key business partners

ASB partnership

ASB has been one of St John's key corporate partners since 2008. ASB is involved with St John in many ways: from volunteering on Area Committees or as Caring Callers, to contributing to our Annual Appeal fundraising, to running for St John in the ASB

Auckland Marathon. This year, ASB launched the first ASB Toy Ambulance appeal asking the public to buy toy ambulances to fund a new ambulance for St John. Public response was outstanding with more than 23,000 toy ambulances sold, enabling the purchase of a new ambulance for Canterbury. Publicity surrounding the Toy Ambulance campaign also led to a generous donation of another fully equipped ambulance plus a rapid response vehicle from a generous ASB customer.



In July 2015, ASB became the corporate partner for St John in Schools, our programme that teaches children the skills and confidence to take action in an emergency. From next year the programme receives significant support from ASB, and will be known as ASB St John in Schools.

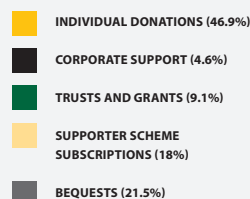
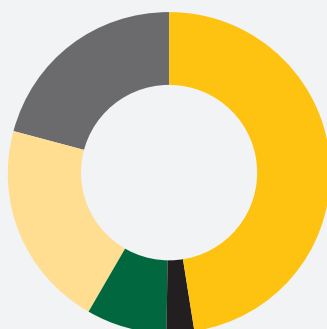


Z Energy partnership

Z Energy and St John signed a Memorandum of Understanding outlining the beginning of a new and exciting partnership with two of New Zealand's most trusted brands. One key initiative includes Z rolling out AEDs (defibrillators) across its more than 200 retail service stations, helping to create safer communities. Z will also provide support for St John's fundraising activities, particularly around the national appeal and will support St John with areas such as sustainability and fleet management.

St John thanks our other business partners including Samsung, Hyundai, Go Healthy, Foodstuffs South Island Limited, Four Square Supermarkets South Island, PowerNet Ltd and Briscoes for their ongoing support. ■

TOTAL \$ FUNDRAISING REVENUE (INCLUDING SUPPORTER SCHEME)



\$38.2 million
raised through
fundraising

DONORS AND SUPPORTERS

With your support

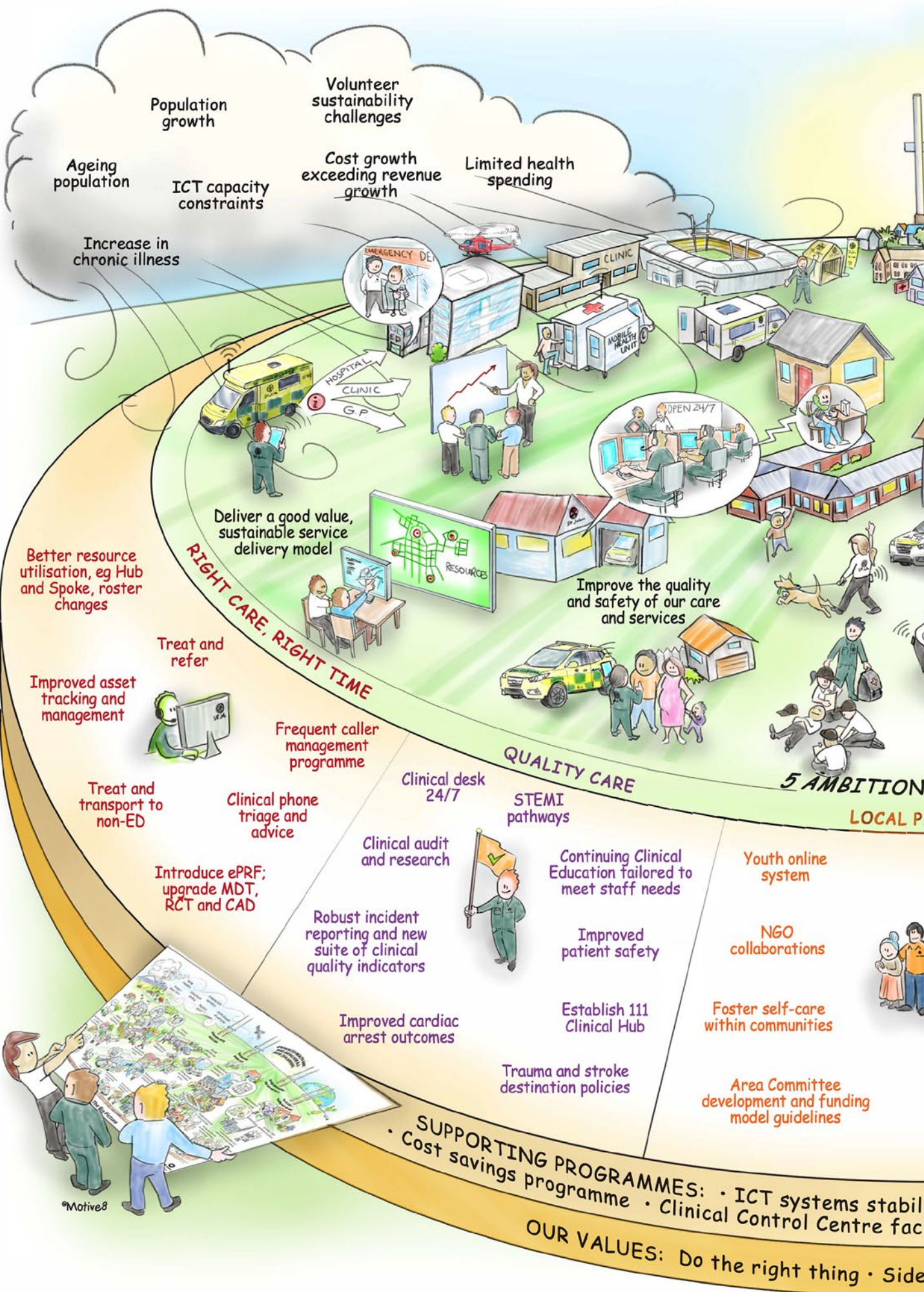
We gratefully acknowledge the contributions of the wide range of individuals and organisations for their generous support during the 2015/16 year. These include:

100% Barrells	Inner Wheel Club of Invercargill	Rotary Rotorua Charity Luncheon	Eileen Johnston
500 Ti Rakau Ltd	J N Lemon Charitable Trust	Rural Contractors New Zealand	Eileen Joyce Paterson
A Helping Hand	J West Holdings Ltd	Samsung	Eileen Thompson
Alpha Charitable Trust	J. I. Urquhart Family Trust	Selwyn District Council	Ellen Dora Dwyer
Arthur Frederick William and Jessie May Jones Foundation	John & Daphne Harden	Sir John Logan Campbell Residuary Estate	Frances Kenny
ASB Bank Ltd	Joyce Fisher Charitable Trust	Southland District Council	Freda Robertson
Blue Sky Community Trust	Kendons Chartered Accountants	St Joans Trust	Helen Paterson
Blue Waters Community Trust	Lions Club Coromandel	Stevenson Village Trust	Henk Scheffer
Bunnings Ltd	Lions Club of Otumoetai Inc	Taranaki Patriotic Trust	Ian Allister Sadler
Cardinal Logistics Ltd	Lottery Community Grants	The Acorn Foundation	Ian Johnstone
Carter Group	Lynne Russell	The Blackwell Family Trust	Ivan Wright
Central Lakes Trust	M & D Smith Charitable Trust	The Flying Moa	Jack Dollond
Chilcotin Investments Ltd	Marjorie Barclay Trust	The Lion Foundation	James Alan Johnston
Christchurch Casinos Ltd	Mataura Paper Mills Employee Social Club	The Southern Trust	Jeanette Crossley
Christchurch Chinese Lions Club	Mitchell Partnerships	The Trevor Wilson Charitable Trust	Joan Frances Morrow
Christchurch Workingmens' Club	Mr Ben Faulkner	The Trusts Community Foundation	Jocelyn Myers
Constellation Communities Trust	Mr George Chan	The William & Gwenda Sybil Dick 1990 Charitable Trust	Joyce Kerr
Community Organisation Grants Scheme (COGS)	Mr Lyall and Mrs Val McMillan	Trillian Trust	Kenneth Fickling
Community Trust Mid & South Canterbury	Mr Malcolm Fletcher	Trust Waikato	Lawrence John
Community Trust of Southland	Mr Wilson Peter Smith	Tukete Charitable Trust	Leslie Hemming
Coromandel Senior Settlement Trust	Ms Ann Webley	Un Cadeau Charitable Trust	Margaret Blackwell
Deeble Estate	Mt Wellington Foundation	Vera Isabel Craig Trust	Margaret Churchman
Disblair Charitable Trust	New Zealand Community Trust	Westmount School	Margaret Corkill
Dorothy Williams Charitable Trust	Noel Leeming Charitable Trust	Whanganui Community Foundation	Margaret Paterson
Dutch Club Invercargill Inc	North & South Trust	Youthtown Funding	Mary Catherine Vette O'Brien
Elsie Steele Trust Board	Northland Regional Council	Z Energy	Mervyn Ronald Thomson
Four Square Supermarkets South Island	NZ Community Trust		Michael Pettifar
Four Winds Foundation	New Zealand Lottery Grants Board		Miriam May Leathem
Frank & Margaret Whiteley Charitable Trust	Olive Stoddard Charitable Trust		Murray Kelvin Fraser
Gallagher Charitable Trust Board	Online Republic Ltd		Nellie Isobel Bouterway
Glenice & John Gallagher Foundation	Oxford Sports Trust		Noelene McIlroy
Go Healthy	Pamela Joan Bisman		Noelene Wevell
Grassroots Trust	Pelorus Trust		Noeline Cooper
Greenlea Foundation Trust	Perpetual Guardian		Pamela Bisman
Hades Trust	Perpetual Medical Services Trust		Patricia Keogh
Harcourts - Four Seasons	PowerNet Ltd		Peter Garnett
Hughes Developments Ltd	Pub Charity		Reginald Burrow
Hyundai Motors New Zealand	Quality Hotel Parnell Ltd		Robert Snowden
Infinity Foundation	Rata Foundation		Rodney Dale Newman
	Reginald McCabe		Rosemary Romayne
	Riversdale Waimea Lions Club		Ruth Dagg
	Robert Allan Bell Trust		S Shirley
	Rolleston Residents Assoc		Selina Margaret Boyd
	Rotary Club of Christchurch		Shirley Nicol
	Rotary Club Of Pukekohe		Stanley Victor Ratley
			Stewart Thomas Hill
			Tony Grbic
			Tutai Stewart
			Valerie Ivy Davies
			Vinka Marinovich
			William Brown
			William Room
			William Smith
			Z J Hutter ■

Legacy gifts from the following Estates

Agnes Baldwin
 Alan Hope
 Alexander Ewen Muir
 Alfred John Keech
 Audrey Valmai Batchelor
 Audrey Robinson
 Bertha Leather
 Brian Hodges
 Christina Toonen
 Danae Rallison
 Deborah Moore
 Doris Elizabeth Millar
 E L & B M Robinson
 Edith Neale
 Edith Watts
 Edna Lilian Ellis
 Edwin Miller

We respect the privacy of our donors. We have included the names of those who we know are happy to be acknowledged and thanked in this report. We would also like to extend our sincere gratitude to those who wish to remain anonymous or we were unable to make contact with to seek permission.



Population growth

Ageing population

Increase in chronic illness

ICT capacity constraints

Volunteer sustainability challenges

Cost growth exceeding revenue growth

Limited health spending

Deliver a good value, sustainable service delivery model

Better resource utilisation, eg Hub and Spoke, roster changes

Treat and refer

Improved asset tracking and management

Treat and transport to non-ED

Frequent caller management programme

Clinical phone triage and advice

Introduce ePRF; upgrade MDT, RCT and CAD

Clinical desk 24/7

STEMI pathways

Clinical audit and research

Robust incident reporting and new suite of clinical quality indicators

Improved cardiac arrest outcomes

Improve the quality and safety of our care and services

5 AMBITION LOCAL PA...

Youth online system

NGO collaborations

Foster self-care within communities

Area Committee development and funding model guidelines

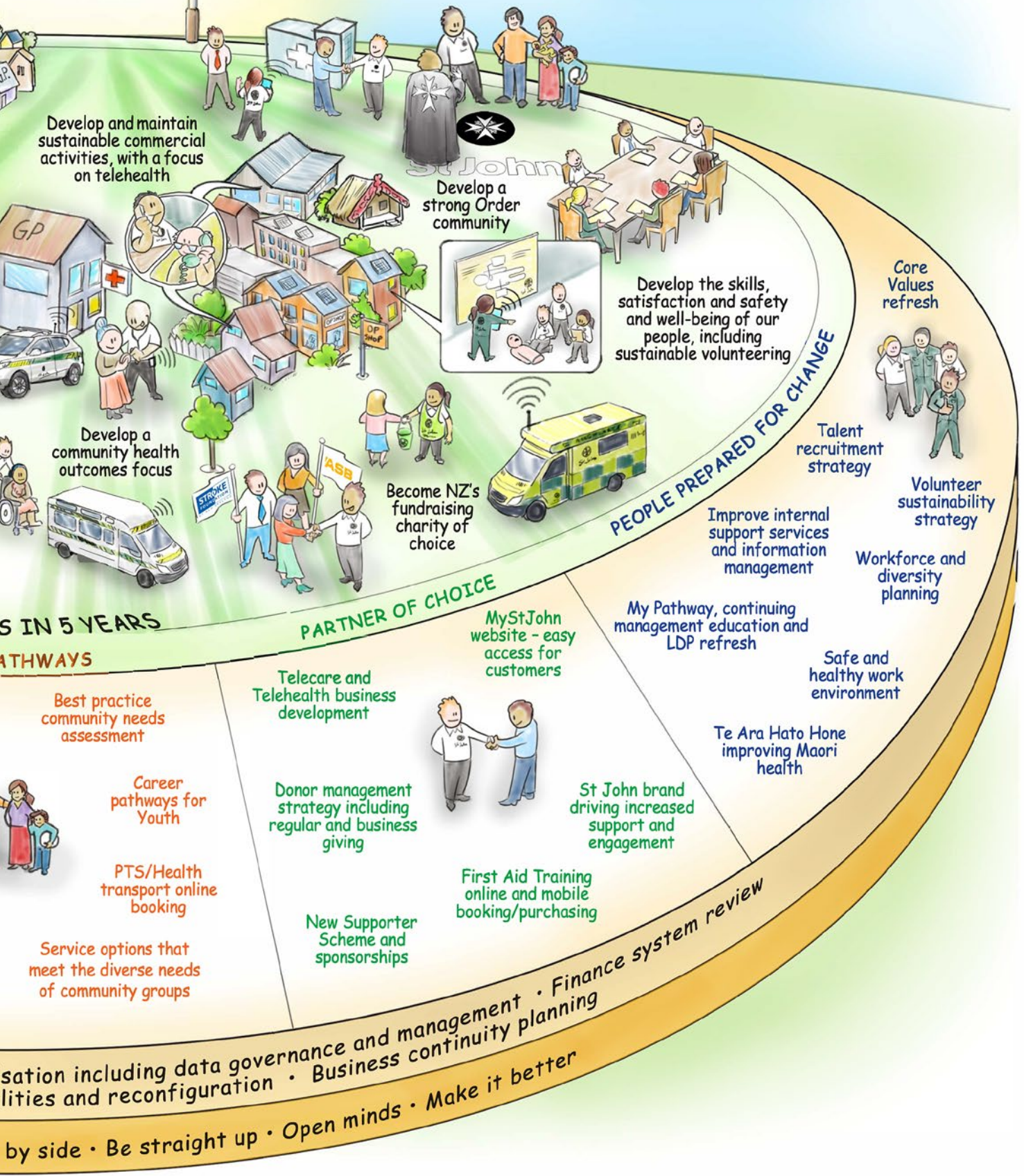
SUPPORTING PROGRAMMES: Cost savings programme • ICT systems stabilisation • Clinical Control Centre facilities

OUR VALUES: Do the right thing • Side...

The Bigger Picture

The Bigger Picture represents St John's five year Integrated Business Plan. It outlines our five key ambitions and how we plan to achieve them in the New Zealand context.

Integrated Business Plan Goals 2013-2018





People prepared for change

What we're doing

We're strengthening our people's capability and capacity, and making St John a great place to work.

How we do it

We're investing in knowledge and skills, providing career pathways and professional development, growing our volunteer numbers and increasing the support they get.

Highlights of the last year include:

Embedding St John Values

We continued to engage our staff with our Values programme designed to help shape St John's culture and support our vision of enhanced health and wellbeing for all New Zealanders. In response to feedback from staff for guidance on how to live the values in their daily work, we:

- produced a range of interactive resource materials about the St John Values
- introduced a course to enable staff to learn and model constructive behaviour in daily interactions
- established a network of trained staff who provide support for their colleagues on bullying and harassment prevention.

Our five Values were developed in consultation with St John people from all across the organisation as part of a two-year programme. They guide us on how we do things together as One St John.

Commitment to double crewing

St John is the only ambulance service in the developed world sending single crewed emergency ambulances to 111 calls. This year we commissioned a major independent review into the workplace safety implications of single crewing of emergency ambulances. It concluded that sending one crew member creates unacceptable and significant health and safety risks for ambulance officers and should be eliminated as soon as practicable. We have taken steps to mitigate the most serious risk for our people and more initiatives are underway. We have been able to reduce the number of single-crewed responses and work is underway to achieve full

crewing (two people) in the near future.

To further support our staff, St John introduced a resilience and wellbeing course to help staff develop strategies to maintain their health and wellbeing.

Diversity at St John

St John is an increasingly diverse workplace and we need to actively promote diversity as a strength for our organisation. The St John Women's Network is developing ways to lift the percentage of women in leadership roles and their work is already having some success. We have also introduced a foundation course for all staff on cultural competency.



The Governor-General and Prior of St John, Lt Gen The Rt Hon Sir Jerry Mateparae greets postulant Carlton Irving MStJ at the investiture service at St Patrick's Cathedral, Auckland.

Investing in our leaders and staff

We continue to improve our leadership development training. This year we have:

- Extended the use of a 360-degree feedback tool where staff and peers can comment on how managers approach their role.
- Added new modules to our Continuing Management Education, where managers are required to complete at least 16 hours of development training annually

We continue to update *Foundations for Success*, our range

of non-clinical courses available for all staff.

St John Māori Strategy – Te Ara Hato Hone 2015 – 2020

Te Ara Hato Hone 2015-2020, the St John Māori Strategy contributes to St John's overarching strategic framework for enhanced health and wellbeing for all New Zealanders and addresses our specific obligations to the Crown for Māori health outcomes. At its heart is Te Tiriti o Waitangi, the Treaty of Waitangi.

Tāhuhu, the Māori advisory group to the Executive Management Team, alongside dedicated Māori liaison roles (Pou Takawenga) in each of our three regions, advise and guide our work in the strategy's three key focus areas: Māori health initiatives; community engagement and organisational leadership.

The National Marae OHCA project (see page 11) has supported community engagement and training in CPR and access to defibrillators at marae around the country. We have worked to improve the uptake of the Mauri Ora cultural competence course among our staff with a focus on the Executive Management Team to lead the way. We have introduced elements of tikanga into our key meetings and have increased the use and visibility of te reo on our communication channels. We have worked with Te Taura Whiri i Te Reo, the Māori Language Commission on potential joint activities and to increase our resources available in te reo.

Volunteer Sustainability Strategy

We have increased the number of resources focused on the Volunteer Sustainability programme. Volunteer Talent Advisors in each region now take a

key role with the implementation plan. A local pilot to create a volunteer support network in Tasman district is being evaluated to see if it can be rolled out nationally. We have introduced new ways to reward and recognise our volunteers. They include:

- *Side by Side*, a new bimonthly e-newsletter for volunteers to share news and events
- The Volunteer of the Month award recognises the strong contribution of an individual. Every monthly winner is entered into the draw for an annual grand prize
- A new resource kit, *Recognising and Rewarding Our Volunteers* gives guidance and ideas on how to acknowledge the contribution of our volunteers



Side by Side volunteer newsletters

As an organisation known nationally for its volunteers, St John continues to work on ways to improve the reach of efforts to acknowledge and engage with volunteers for National Volunteer Week and International Volunteers Day.

Good progress has been made analysing the results of a national survey of volunteers. The insights will guide how we can better nurture our mixed workforce of paid staff and volunteers. Plans are underway for better training and development opportunities and we are exploring flexible episodic volunteering opportunities. ■



Northern Region

The 6,176 paid and volunteer members of St John Northern Region deliver ambulance services and community programmes from Cape Reinga in the north to Coromandel and Hauraki in the south. The Northern Region operates 47 ambulance stations and enjoys the support of 34 Area Committees run by volunteers.



Supporting communities

With 2,306 Youth cadets and more than 200 Friends of the Emergency Department, St John volunteers continue to give hundreds of hours of time and the impact of that time, effort and

kindness has a strong positive impact on many communities. A highlight this year has been the growth of the St John in Schools programme; basic first aid skills and education were delivered to 35,713 pre-school and primary school students this year. We have also seen an increase in the number of people volunteering to serve on our Area Committees.

Our people

Northern Region hosted the St John National Youth Festival in Auckland in April 2016. The Festival is an annual event that brings St John Youth together from across New Zealand for a weekend. The event aims to develop leadership in St John Youth. Delegates had the chance to test their skills in key areas: first aid, healthcare, leadership, communications and drill.

519

111 calls a day

173,523

patients treated and/or transported by ambulance officers

25,736

people taught first aid

11,692
medical alarm customers

444
Order members

240
ambulances and
operational vehicles

Northern Region also hosted the first St John Opportunity Shop Managers National Conference. Attendees took part in sessions covering the St John Values, and health and safety requirements. The conference gave managers the opportunity to share best practice, and network with colleagues. Area committees will have the support of a national retail manager and a community fundraiser to help them make the most of fundraising opportunities in their area.

We acknowledged the important contribution of our Northern Region volunteers with a high tea at Auckland Museum that

was attended by more than 600 volunteers and their partners.

Fundraising

Northern Region played a key role in making this year’s St John Annual Appeal the most successful to date. Other fundraising highlights included 15 runners fundraising for St John in the ASB Auckland Marathon, and being chosen as the charity of choice for Stadium Stomp at Eden Park. Northern Region was also the grateful recipient of donations from 29 special individuals and organisations who between them added 30 vehicles to our fleet.



Top to Bottom. Successful St John Northern Region fundraising initiatives: Stadium Stomp 2015, St John Annual Appeal 2016, ASB Auckland Marathon 2015



Faster responses to the most life-threatening emergencies

Northern Region’s emergency ambulance service recorded significant improvements in our response times to immediately life-threatening ‘Purple’ incidents (cardiac and respiratory arrest). Auckland district improved its response times in urban areas by 11.6%. In Northland, the urban response times improved by 7.1% and rural response times by 22.1%. ■



Gordonton Primary get behind the 2016 St John Annual Appeal

Central Region

The 5,155 volunteers and paid staff members of the St John Central Region provide ambulance services and community programmes to a region that extends from Mercer in the north to Wairarapa in the south and encompasses the East and West Coast of the central North Island, the Waikato and the Bay of Plenty.



Supporting communities

The St John in Schools initiative has flourished, reaching 35,082 students thanks to the dedication of our tutors and commitment of local communities. In rural

communities, the knowledge of what to do in an emergency is particularly critical. Isolation is an issue in many of our smaller communities, and St John Central Region is working with primary health partners to pilot programmes that make the best use of the resources of multiple agencies for our patients.

Another important link to communities throughout the region are St John Opportunity Shops. They are becoming a hub for activity and continue to raise funds for St John services, community programmes, building projects and other local initiatives. In late 2015 a new shop opened in Te Awamutu, with more shops scheduled to open in late 2016 and 2017.

131,681

emergency incidents attended

150,047

patients treated and/or transported by ambulance officers

48,369

health shuttle trips

35,082children participated
in St John in Schools**465**

area committee volunteers

16,695medical alarm
customers

Our people

Congratulations go to Ngaruawahia Cadet Georgia Raynel who was named both St John Central Region and National Cadet of the year.

We welcomed new St John Central Region general manager Andrew Boyd and thank Dr Sharon Kletchko for her contribution as general manager and wish her well as she moves to a new role in health.

Future-proofing facilities

Our major focus has been on future-proofing our buildings. Thanks to the work and support of Area Committees and local communities and businesses St John opened new facilities in Mokau and Opunake. A new station at Katikati is near

completion and work is due to start on a new facility in Tauranga.

A new model for Central Region area committees

This was an important year for Central Region area committees. A new model was developed to create one structure/system across the region, from Wellington to North Waikato and coast to coast. Implemented on 1 July 2016, the new model is proving effective and an important milestone in our journey to 'One' St John Central Region.

Waikato District first to roll out the 111 Clinical Hub and ePRF

The Waikato District had a busy October 2015 with the roll out of two significant clinical



St John at the annual Fieldays in Hamilton

initiatives. The Waikato's mix of urban and rural areas made it (alongside Hauraki/Coromandel) the ideal location for the first implementation of the 111 Clinical Hub and St John's world-leading electronic Patient Report Form (ePRF). The Clinical Hub (see p12) provides improved care to 111 callers who do not need to be transported to an emergency department – ensuring these patients receive the right care at the right time, and freeing up emergency ambulance resources to treat more urgent cases. ePRF (see p15) replaces handwritten, paper-based ambulance patient record forms with an electronic version written on Samsung tablets, significantly improving information sharing between St John and the wider health sector for the benefit of our Central Region patients. ■



Blood pressure checks at The REV cycle race



South Island Region

Photo: Chris Marr

The 5,792 paid and volunteer members of St John's South Island region cover an area of more than 150,000 sq. km. In a typical year, St John crews travel more than 4.5 million kilometres across the region.

The South Island region's network of 83 stations deliver a prompt and high quality ambulance service to South Islanders, alongside a range of community programmes.



Our people

Congratulations to Maggie Houston, station manager at Hari Hari in Westland for winning the national 2015 Pride of New Zealand award for emergency services. Maggie has been with St John for more than 40 years and for her work in the community, her nominator dubbed her the "angel" of Hari Hari.

Our volunteers in the Friends of the Emergency Department service providing support to patients at hospitals in Dunedin and Timaru marked 10 years of service to the community this year. For the fourth year in a row, the Tasman team were the champions in the National St John Youth competition.

Supporting communities

The St John in Schools team has delivered the programme to more than 39,765 school students across the whole region. The first aid training and awareness of what to do in an emergency builds resilience in communities throughout the South Island.

As a major provider of health shuttle services, we thank business partner Four Square for their support which has enabled the launch of a shuttle service for patients from the West Coast.

The South Island Region hosted a national symposium on health

262

111 calls a day

114,408

patients treated and transported by ambulance officers

2,005

events serviced

27

Grand Prior's awards

74

Super Penguin awards

13,800

hours of
community service

shuttle services to encourage networks and sharing knowledge and experience.

Our partners

St John South Island Region acknowledges the ongoing support of ASB, PowerNet and Foodstuffs South Island.

New patient care pathways

The Single-Point-of-Entry (SPoE) initiative was successfully trialled in Nelson Bays, averaging more than one patient referral per day in its 12 months of operations. This has also expanded into Marlborough Territory with plans to extend further into the rest of Tasman District (see page 15).

Nelson Bays and Marlborough were also two of the initial districts to trial the ST-elevation myocardial infarction (STEMI) pathway for patients who

experience a complete blockage of a coronary artery (see page 13).

Strong community support for new stations

St John opened two new ambulance stations this year to replace buildings damaged by the Canterbury earthquakes. In September 2015, five years after the first earthquake, St John's Darfield station opened for service. This was followed by the opening of a new ambulance station in Temuka in February 2016. St John thanks each community for their strong support. St John South Island Region's new headquarters, the centre of a 'hub and spoke' model for ambulance services, will be part of the Justice and Emergency Services precinct in central Christchurch with construction due to be complete in 2017.



The scene of the Otira bus crash on 31 December 2015. Sixteen people were injured in the accident. Photos: Fairfax Media NZ / The Press.



Members of St John in Malvern celebrate the opening of the new Darfield ambulance station in September 2015. The station opened five years after the September 2010 earthquakes which severely damaged the former station

Otira Gorge bus crash

South Island ambulance crews attend many thousands of incidents annually, however the bus crash on New Year's Eve 2015 in the Otira Gorge was one of the most memorable in the past year. Ambulance staff and volunteers from districts on both sides of the South Island, clinical control staff, management, bystanders, police, fire and rescue helicopter teams all worked together to help treat patients and save lives. ■

These summary consolidated financial statements incorporate the financial statements of more than 150 St John NZ entities.

Year-end overview

St John NZ's underlying deficit was \$8.8 million for the financial year July 2015 - June 2016 (2015/16) representing continued utilisation of surplus reserves generated in previous years for improved service delivery and to maintain service delivery in light of growing demand on services. This compares to the \$5.1 million underlying deficit for July 2014 - June 2015 (2014/15).

Underlying performance

The trustees and management of St John understand the importance of reported performance meeting accounting standards, particularly the ability of external parties to make comparisons to other similar public benefit entities, and assurance that there is integrity in our reporting approach. However, we also believe that an underlying financial performance measurement can significantly assist public stakeholders and donors to better understand what is happening in the organisation; where income granted for capital purposes, or one-off transactions such as the impacts in recent years of impairments to buildings or previously in respect of the Christchurch Earthquake, can make it difficult to compare performance between years, or understand the underlying financial status of St John.

In referring to underlying performance we acknowledge our obligation to show how we have derived this result (at right).

This year's deficit performance was particularly improved by the accounting recognition under IPSAS 23 of a large bequest received in August 2016 of \$2.3 million as an adjusting post balance sheet event, along with a significant donation of replacement defibrillators.

Even after including investment income, the underlying performance would have been a deficit of \$8.8 million (last year the underlying deficit was \$5.1m), highlighting the volatility and dependency of St John's financial performance as a charity based on the outstanding and humbling support and generosity of the New Zealand public.

Key performance summary

Revenue increased by 4.5% to \$268.2 million when compared against the previous financial year. Operating revenue excluding property-related fundraising, property capital grants and one-offs was \$262.9 million, up \$6.3 million (2.4%) on the previous year, primarily due to performance of commercial activities up \$4.8 million on the previous year, fundraising up \$1.4 million excluding one-offs, and increased income of \$1.8 million from our network of Opportunity Shops.

Expenditure increased by 3.7% to \$271.7 million when compared against the previous financial year. Operating expenditure excluding revaluations, depreciation, amortisation and interest was \$246.8 million, up \$7.7 million (3.2%) on the previous year. Employee benefits showed a \$7.9 million (4.8%) increase resulting from salary increases (approximately 1.5% - 2.0% representing \$2.6 million); \$3.7 million additional in personnel costs for front line emergency and transportation services delivery, and \$1.1 million in additional ICT costs to support significant project works including stabilisation, with the balance mainly reflecting increases in other income generating functions.

Emergency and other transportation

St John NZ ambulance services include emergency ambulance services, Clinical Control Centres, inter-hospital transfers and non-emergency ambulance transports. In the 2015/16 financial year the financial result for this group of activities was a deficit of \$29.8 million, up from \$24.5 million in the prior year. St John expenditure on this group of activities increased \$6.4 million (3.6%), particularly driven by the full year effect of our investment in staffing to support increased activity and increased safe crewing standards, and expenditure on effective clinical pathways to improve the efficiency of our service.

In comparison the income in this group of activities grew by \$1.4 million, up 0.8% on the prior year. This gap between the expenditure required to service increased demand versus income growth pegged to Consumer Price Index (CPI)/Labour Cost Index (LCI) cost indexes remains a major challenge to the sustainability of current performance achievements.

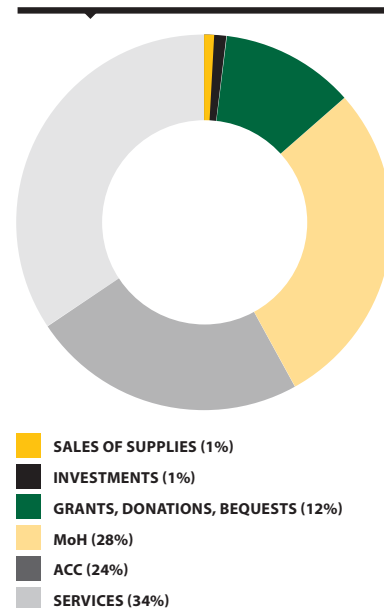
The number of incidents attended over 2015/16 increased by 4.4% to 382,325, and incidents attended by single crewed vehicles reduced to 9.8% in

2015/16, down from 10.3% in 2014/15. We continue with the support of our key funders to develop additional pathways for the management of 111 calls and dispatch (such as the Clinical Hub, p12), reducing the cost to serve the total number of emergency calls to 111 handled by St John, which increased over the previous year by 7.3% to 380,914.

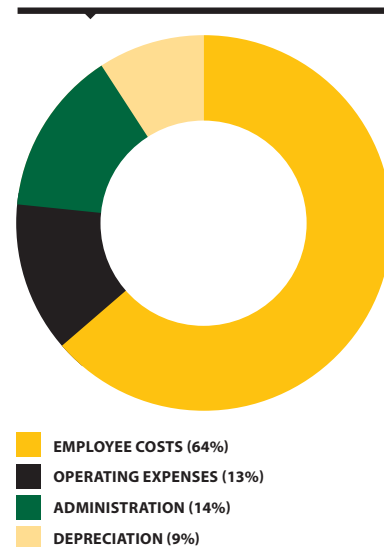
Following the 2012/13 financial year the key funders of emergency road ambulance services and the 111 clinical control centre service, ACC and the Ministry of Health (the Crown), undertook a baseline adjustment to funding which resulted in 72.5% of the Ambulance Services expenditure being funded by the Crown. Since then total incident activity has increased by 13.3%, while expenditure increased by 14.3% including investment to improve safe crewing standards, while over the same period Crown funding increased by 8.1%, resulting in a reduction in the share of expenditure funded by the Crown reducing to 68%.

Considering these factors St John, together with Wellington Free Ambulance requested and had agreement the Crown undertake a funding review to address the sustainability of the current funding process. The other major

REVENUE 2015-16



EXPENDITURE 2015-16



	2015/16	2014/15	2013/14	2012/13	2011/12
Reported (deficit)/surplus	(2,461)	(9,427)	3,804	7,578	74
Less: PPE gain/(impairment)	1,114	(4,429)	-	-	(2,800)
Less: Impact of Earthquake Net income/(expenditure)	-	-	(130)	6,441	(1,531)
Less: Property related fundraising and Grants	854	81	168	-	-
Less: income in respect of donated defibrillators	2,120	-	-	-	-
Less: income from bequest recognised under IPSAS 23	2,300	-	-	-	-
Underlying (deficit)/surplus (incl investment income but excl significant items)	(8,849)	(5,079)	3,766	1,137	4,405
Less: Investment revenue	2,130	3,022	2,876	2,949	3,148
Underlying (deficit)/surplus (excl investment income and significant items)	(10,979)	(8,101)	890	(1,812)	1,257

factor under consideration in the funding review is the issue of safe crewing standards. At present 9.8% of incidents are attended by single-crewed vehicles. St John considers single crewing to be inappropriate given potential impacts on outcomes for patients and on the safety and effectiveness of our ambulance officers.

Community services

The results for St John NZ community services this year includes Events and Op Shops, as well as the traditional community based programmes Friends of the Emergency Department, Hospital Friends, Caring Caller, Health Shuttles, St John in Schools, Outreach Therapy Pets, Community Carers, and Youth programmes. In the 2015/16 year, the St John deficit from the delivery of these programmes across New Zealand was \$8.8 million (\$9.7 million in the previous year).

In 2015/16 we have seen increased expenditure to expand the St John in Schools first aid programme and we recently announced the launch of this programme as ASB St John in Schools with ASB joining existing partners ACC, Samsung and Powernet. This programme

has already provided practical training and education to over 160,000 pre-school, primary and intermediate-aged students since its launch in 2015.

As part of its community activities St John has continued to grow the number of Op Shops within communities across New Zealand to 29 with revenues increasing from \$2.9 million in 2014/15 to \$4.7 million in 2015/16.

Commercial activities

St John NZ has a range of services and products marketed on a commercial basis. These services deliver value to customers and provide a contribution that can be applied to funding ambulance services and community programmes.

The contribution from these activities was \$6.5 million in the 2015/16 year (\$5.8 million in the previous year). This increase is principally associated with increased demand, reflecting the strong brand quality associated with St John services.

Charitable gifting

The work of St John NZ, including the delivery of its community services is very reliant on the generosity of individuals, businesses and community funders who provide financial

support through donations, bequests, sponsorship and grants. As an organisation we remain astounded and humbled by the continuing generosity of the public of New Zealand in their support of St John both financially and through the provision of their time and expertise as volunteers.

By fundraising in local communities throughout New Zealand, St John's 150 area committees and six trusts contribute to funding ongoing community activities as well as supporting mainly local capital projects (e.g. buying a new ambulance, paying for ambulance equipment such as stretchers or defibrillators, or contributing towards the maintenance or replacement of buildings).

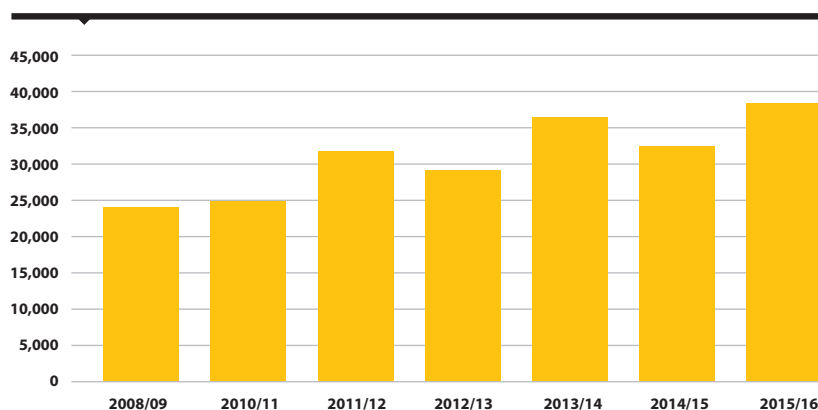
Reflecting its status as Most Trusted Charity in New Zealand, St John – including its area committees – received donations of \$31.3 million during the year (an increase of \$5.8 million over the previous year). This included a record Annual Appeal which generated \$2.7 million in income and also included two significant donations which were accounted for in the results for 2015/16, a \$2.3 million bequest and \$2.1 million of income in relation to donated defibrillators.

Balance sheet

Consolidated net assets for St John NZ stand at \$265.5 million, \$2.4 million below the position at 30 June 2015.

Working capital (excluding assets held for sale) decreased from \$32.5 million at 30 June 2015 to \$26.2 million at 30 June 2016, with reductions in cash and investments held as current assets of \$10.0 million.

TOTAL \$ MILLION FUNDRAISING REVENUE (INCLUDING SUPPORTER SCHEME)



\$271.7

million

total operating costs
for 2015/16**\$4.7**

million

opportunity shop
revenue for 2015/16**\$158**

million

investment in
capital infrastructure
over 5 years

Property, plant and equipment, investment property and intangible assets represents \$234.1 million (88%) of total net assets, reflecting the capital-intensive nature of the emergency ambulance service and community programmes operated by St John. This capital base has predominantly been funded by the fundraising efforts of communities throughout New Zealand, along with the bequests of individuals and families and with businesses supporting the work of St John. St John has land and buildings accounted at \$159.6 million as at 30 June 2016.

At the end of the 2015/16 financial year St John held a total of \$26.4 million in cash (a reduction of \$2.4m on prior year) of which \$17.8 million is held within community-based area committees. In addition, St John has financial investments made up of short-term and long-term investments of \$27.7 million (a decrease of \$11.9 million on prior year), including \$22.6 million of term deposits and \$5.1 million of other investments.

The balance sheet position is vital to ensure St John can continue to meet its operational obligations and maintains some certainty in its ability to deliver longer term capital requirements, for which it faces a number of demands on its cash reserves.

Future calls on reserves

St John NZ must remain committed to a programme of investment to ensure it has appropriate facilities and equipment to service the ongoing and increasing health needs of New Zealand communities. There is increasing demand on St John's reserves which have reduced by \$11.8 million in the last two years as we have invested in improvements to our core infrastructure (e.g. ambulances, defibrillators and our Computer Aided Dispatch System (CAD)), in technological innovation through projects like the electronic Patient Report Form (ePRF, p15) as well as funding additional operational expenditure resulting from the introduction of additional frontline staff not fully funded by the Crown. Future reserves will be required to fund additional investment. For example, a programme of work is required to ensure all of St John's buildings meet earthquake strengthening standards, along with improvements in our fleet to improve service to transported patients. In addition we are currently reviewing our property strategy to ensure that our buildings are fit for purpose not only in their design but also their location.

On-going capital requirements

As an emergency service provider, St John needs to ensure it is both operationally and financially capable of responding to a civil emergency, such as the Canterbury earthquakes, and this preparedness includes holding sufficient working capital. It is also worth noting that a proportion of the funds held have been earmarked for particular projects or may be part of tagged grants or bequests where the funds cannot be diverted to meet other needs. At 30 June 2016 \$3.2 million of reserves are restricted by granting bodies or specific bequests. In addition there are a number of regional and national projects, including significant technology projects, that need to be undertaken. The budget for these and operational capital commitments over next three years is over \$80 million. Over the last five years \$158.1 million has been spent improving St John's core infrastructure. ■

Investment and support from Government and the community in 2015/16

Investment and support from Government and community contracts with the Ministry of Health (to respond to medical emergencies), ACC (to respond to personal injuries) and District Health Boards (for patient transfer services) fund just under 70% of our ambulance service operating costs.

Government contribution to the St John emergency ambulance services

- A fixed payment of around \$61 million from the Ministry of Health to respond to patients who need emergency medical treatment (not caused by trauma).
- A fixed payment of around \$57 million from ACC for emergency transport and treatment for a claimant's personal injuries.
- Funding of \$10.8 million from the Ministry of Health and \$6.2 million from ACC to operate the St John Clinical Control Centres in Auckland and Christchurch, where 111 ambulance calls are answered, and land, water and air ambulance services are dispatched. The Ministry of Health and ACC also fund the Wellington Centre, operated as a joint venture between St John and Wellington Free Ambulance.
- Fixed funding of \$1.8 million from the Ministry of Health for PRIME (Primary Response in Medical Emergencies) services, a network of GPs who provide a co-response to medical emergencies in rural areas, enhancing emergency care in those communities.
- Fixed funding of \$1.3 million for the Clinical Hub.
- No funding is provided by the Government for St John capital expenditure, including purchasing and equipping ambulances and other vehicles, and building and maintaining ambulance stations.

Contributions from the community

- Fundraising income from community donations, bequests, grants, commercial partnerships and the St John Supporter Scheme
- Revenue from our commercial activities, including first aid training, medical alarm customers, and sales of first aid kits and defibrillators

- Income from emergency ambulance part charges and other transportation services.
- St John charges a part charge to patients who are treated by an ambulance officer or are transported in an ambulance because of a medical emergency. This is similar to the GP co-payment. In this financial year the part charge was \$88, and on 1 August 2016 it increased to \$98 (incl GST). The cost to St John of a typical emergency ambulance call out is \$615 (incl GST).*

*Based on attending 366,375 emergency incidents a year (2014/15 data).

The cost of operating St John's ambulance services in the 2015/16 financial year

- The operating costs of the ambulance service group were \$212 million
- After Government funding and net part charge income, the emergency ambulance service group of activities had a financial deficit of \$30.3 million.
- The total operating costs for St John, including all services and programmes were \$272 million after removing the financial impact of asset impairments and exceptional items.

St John is a charity

St John is a charity because in addition to the emergency ambulance services we are contracted by the Government to provide, we also provide a range of charitable programmes that benefit New Zealanders:

- a range of Youth programmes, including St John in Schools
- programmes that support people in hospital, including Friends of the Emergency Department (FEDs) and Hospital Friends
- programmes that support our communities, including Health Shuttles, Caring Callers, Community Carers and Outreach Therapy Pets.

These programmes are funded by community donations, including the St John Supporter Scheme, bequests, grants and commercial partnerships, plus revenue from our commercial activities, including first aid kits, first aid training, medical alarms and defibrillators.

The Priory in New Zealand of the Most Venerable Order of the Hospital of St John of Jerusalem

Summary consolidated financial statements

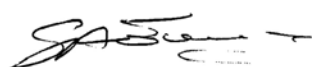
Summary consolidated statement of financial position			
As at 30 June		2016	2015
		(\$000)	(\$000)
Current assets		64,451	88,452
Property, plant and equipment		215,690	193,101
Other non-current assets		26,139	28,991
Total non-current assets		241,829	222,092
Total assets		306,280	310,544
Current liabilities		37,422	39,791
Non-current liabilities		3,396	2,865
Total liabilities		40,818	42,656
Net assets		265,462	267,888
Equity		265,462	267,888

Summary consolidated statement of comprehensive income			
For the year ended 30 June		2016	2015
		(\$000)	(\$000)
Revenue			
Revenue from exchange transactions			
Revenue from providing services		226,815	223,065
Revenue from providing goods		3,145	2,135
Revenue from opportunity shops		4,734	2,930
Interest revenue		2,130	3,022
Revenue from non exchange transactions			
Bequests, donations and grants - operational		26,431	23,035
Bequests, donations and grants - capital		4,900	2,509
Total revenue		268,155	256,696
Share in surplus/(deficit) of joint venture, accounted for using the equity method		71	257
Other gains/ (losses)			
Gain/(loss) on sale of property, plant and equipment		62	80
(Loss) on financial assets		(137)	(6)
Reversal of impairment of financial assets classified as loans and receivables		-	122
Reversal of impairment / (impairment) of property, plant and equipment	7	1,114	(4,429)
Costs related to providing goods		1,730	1,321
Personnel expenditure		168,611	161,166
Defined contribution plan expense		3,762	3,341
Vehicle costs		9,241	9,656
Operating supplies		5,638	5,896
Depreciation		21,452	20,072
Amortisation of intangibles		3,440	2,972
Administration expense		38,691	38,746
Other operating expense		19,097	18,971
Finance costs		64	6
Net (deficit)		(2,461)	(9,427)
Other comprehensive surplus/(deficit) for the year		35	74
Total comprehensive (deficit)/surplus for the year		(2,426)	(9,353)

Summary consolidated statement of changes in equity For the year ended 30 June	Accumulated	Revaluation	Revaluation	Other	Total
	Surpluses or (Deficits) \$ 000	Reserve – Available for sale assets \$ 000	Reserve – rare assets \$ 000	Reserves (\$ 000)	(\$ 000)
Opening balance 2015	272,650	415	109	4,067	277,241
(Deficit)/surplus for the year	(9,427)	74	–	–	(9,353)
Transfer to/(from) reserves	(60)	–	–	60	–
Balance 30 June 2015	263,163	489	109	4,127	267,888
(Deficit)/surplus for the year attributable to owners	(2,461)	35	–	–	(2,426)
Transfer to/(from) reserves	(10)	–	–	10	–
Closing balance 2016	260,692	524	109	4,137	265,462

Summary consolidated statement of cash flows For the year ended 30 June	2016	2015
	(\$ 000)	(\$ 000)
Net cash flows from operating activities	15,445	24,171
Net cash flows used in investing activities	(17,894)	(23,540)
Net increase/(decrease) in cash	(2,449)	631
Cash and cash equivalents at the beginning of the year	28,859	28,228
Cash and cash equivalents at the end of the year	26,410	28,859

Net cash flows used in investing activities include movements from cash and cash equivalents to other financial assets.
On behalf of the Priory Trust Board, which authorised the issue of the summary consolidated financial statements on 26 September 2016.



Dr Steve Evans, Chancellor



Peter Bradley Chief Executive Officer

These statements should be read in conjunction with the notes to the summary financial statements

Notes to the summary financial statements

1 Summary of accounting policies

Statement of compliance and reporting group

These summary consolidated financial statements have been extracted from the audited full consolidated financial statements of The Priory in New Zealand of the Most Venerable Order of the Hospital of St John of Jerusalem ('Parent'), and its subsidiaries and controlled entities also referred to as 'St John NZ'.

St John NZ's financial statements incorporate the financial statements of National Office and all entities controlled by the National Office (its subsidiaries and controlled entities) being The Order of St John Northern Region Trust Board, The Order of St John Central Regional Trust Board, The Order of St John South Island Region Trust Board, six trusts and St John Emergency Communications Limited (and its joint venture, Central Emergency Communications Limited).

The consolidated financial statements of the Group have been prepared in accordance with New Zealand Generally Accepted Accounting Practice ("NZGAAP") and comply with Tier 1 Public Benefit Entity Accounting Standards ("PBE") as appropriate for Tier 1 not-for-profit public benefit entities. St John is a charitable trust governed by the Charitable Trusts Act 1957 and registered under the Charities Act 2005.

The audit report on the full consolidated financial statements was unmodified.

These summary consolidated financial statements have been prepared in accordance with PBE FRS-43 'Summary Financial Statements' and have been extracted from the audited full consolidated financial statements for the year ended 30 June 2016 which were approved by the Priory Trust Board on 26 September 2016. The summary consolidated financial statements can not be expected to provide as complete an understanding as provided by the full consolidated financial statements. For a full understanding of St John NZ's financial position and performance these summary consolidated financial statements should be read in conjunction with the audited full consolidated financial statements.

The audited full consolidated financial statements are available on application to the following address:

Accountant
St John National Headquarters
Private Bag 14902
Auckland 1741

The reporting currency is New Zealand Dollars rounded to the nearest thousand.

2 Effect of first-time adoption of PBE standards on accounting policies and disclosures

This is the first set of financial statements of the Group that is presented in accordance with PBE IPSAS standards. The Group have previously reported in accordance with NZ IFRS (PBE). The accounting policies adopted in these financial statements are consistent with those of the previous financial year, except for instances when the accounting or reporting requirements of a PBE IPSAS standard are different to requirements under NZ IFRS (PBE) as set out in the audited full consolidated financial statements.

3 Commitments for expenditure

	2016 (\$ 000)	2015 (\$ 000)
Capital commitments - property, plant and equipment	4,604	4,685
Total	4,604	4,685

4 Leases

	2015 (\$ 000)	2014 (\$ 000)
Non-cancellable operating lease payments		
Less than 1 year	2,838	2,532
Later than 1 year less than 5 years	7,081	5,416
Later than 5 years	3,547	4,186
Total	13,466	12,134

Operating leases are leases that do not transfer substantially all the risks and benefits incidental to ownership of the leased item to the Group. Operating lease payments are recognised as an operating expense in surplus or deficit on a straight-line basis over the lease term. St John has operating lease agreements related to properties rented by St John for administrative and operational purposes.

St John has operating leases for photocopiers with an average length of lease of three years.

5 Contingent liabilities

The Group does not recognise a contingent liability, but discloses details of any contingencies in the notes to the financial statements, unless the possibility of an outflow of resources embodying economic benefits or service potential is remote.

A letter of credit is held with Westpac New Zealand Limited to guarantee payroll payments to employees to a maximum of \$475,000 (2015: \$475,000).

There are no other contingent liabilities at balance date (2015: \$nil).

6 Related party disclosures

The Group regards a related party as a person (including their immediate family members) or an entity with the ability to exert control individually or jointly, or to exercise significant influence over the Group, or vice versa. The related parties disclosures are St John and the Regional Trust Boards which are under the common control of The Priory in New Zealand of the Venerable Order of St John. Related party trading balances are payable on demand. Related party loans and advances are repayable in accordance with the contractual terms to June 2016, and are interest bearing at 3.91% (2015: 4.9%). The Group has not recorded any impairment of receivables relating to amounts owed by related parties during the year (2015: nil). This assessment is undertaken each financial year through examining the financial position of the related party and the market in which the related party operates.

7 Impairment of property, plant and equipment

In the prior financial year the property at 2 Harrison Road was stated in the statement of financial position as a Property Held for Sale with a resulting impairment cost within the statement of comprehensive revenue and expense for the year ended 30 June 2015 of \$4.4m. The land and buildings had a carrying value of \$16.178m. Subsequently, in the current financial year the St John Northern Region Trust Board further reviewed the Auckland property strategy for the organisation and after considering additional factors such as updated future organisation property requirements, market shifts and feedback, and anticipated Auckland City unitary plans, elected to remove the property for sale from the market with an intent to undertake future occupied development of the site. The property is no longer reflected as Property Held for Sale in the statement of financial position as at 30 June 2016 and the carrying value of the property has been reviewed in the current financial period resulting in an impairment reversal of \$1.767m in the statement of comprehensive revenue and expense for the year ended 30 June 2016.

At balance date, an impairment review was undertaken on the ambulance station owned by Tauranga Area Committee located at 17th Ave, Tauranga. The building will be demolished and replaced with a new build in the next financial year. The building has been fully impaired by its book value of \$652.9k.

8 Subsequent events

There were no material subsequent events to these accounts which would affect the interpretation of the accounts.

9 Business Unit Reporting

Business unit summary statement of financial performance is presented along with the statement of financial performance (deficit)/surplus represented by the organisation's geographic structure. Generally revenues and expenses are apportioned to each unit on a direct basis plus an allocation of nonspecific and overhead costs proportional from organisational support functions and shared service functions based on activity drivers most applicable to the underlying support or service.

Besides the apportionment of shared and support service costs the other major apportionment between the business units

relates to \$7.0m (2015: \$7.1m) in internal recovery by Emergency and Other Transportation from Commercial and Fundraising related to the part charge for utilisation of 111 medical ambulance responses to Medical Alarm customers or St John Supporter Scheme members.

	Emergency and Other Transportation (000's)	Commercial and Fundraising (000's)	Community Services (000's)	Property and Infrastructure (000's)	Shared and Support Services (000's)	Investments (000's)	2016 (000's)
2016 Business unit – operating channel							
Income	175,477	74,530	11,554	1,261	2,482	2,130	267,434
Expenditure	(183,162)	(24,223)	(14,454)	(20,522)	(29,502)	–	(271,863)
Ambulance Part Charge	6,995	(6,995)	–	–	–	–	–
Internal Shared and Support Services	(29,110)	(13,427)	(5,864)	19,261	29,140	–	–
Business unit (deficit)/surplus for the year	(29,800)	29,885	(8,764)	–	2,120	2,130	(4,429)
Property related Fundraising and Grants	–	–	–	854	–	–	854
Net Property Impairments	–	–	–	1,114	–	–	1,114
Total (deficit)/surplus for the year	(29,800)	29,885	(8,764)	1,968	2,120	2,130	(2,461)
2016 Business unit – (deficit)/surplus by operating channel by region							
Northern	(11,235)	11,675	(2,102)	1,859	947	389	1,533
Central	(7,791)	7,694	(3,485)	(538)	963	300	(2,857)
South Island	(9,709)	9,652	(3,018)	647	1,455	1,039	66
National office incl. SJEL	(1,065)	864	(159)	–	(1,245)	402	(1,203)
Total (deficit)/surplus for the year	(29,800)	29,885	(8,764)	1,968	2,120	2,130	(2,461)
2015 Business unit – operating channel							
Income	173,977	68,330	9,583	1,932	230	3,022	257,074
Expenditure	(176,715)	(22,808)	(13,853)	(19,536)	(29,241)	–	(262,153)
Ambulance Part Charge	7,062	(7,062)	–	–	–	–	–
Internal Shared and Support Services	(28,562)	(12,587)	(5,466)	17,604	29,011	–	–
Business unit (deficit)/surplus for the year	(24,238)	25,873	(9,736)	–	–	3,022	(5,079)
Property related Fundraising and Grants	–	–	–	81	–	–	81
Net Property Impairments	(333)	–	–	(4,096)	–	–	(4,429)
Total (deficit)/surplus for the year	(24,571)	25,873	(9,736)	(4,015)	–	3,022	(9,427)
2015 Business unit – (deficit)/surplus by operating channel by region							
Northern	(7,130)	7,244	(2,593)	(4,080)	695	583	(5,281)
Central	(7,588)	7,372	(3,418)	–	616	549	(2,469)
South Island	(7,800)	11,768	(3,299)	65	(793)	1,568	1,509
National office incl. SJEL	(2,053)	(511)	(426)	–	(518)	322	(3,186)
Total (deficit)/surplus for the year	(24,571)	25,873	(9,736)	(4,015)	–	3,022	(9,427)

Business Units

Emergency and Other Transportation Services represents the provision of ambulance services including 111 response ambulance services and associated clinical control centres, along with inter-hospital transfers and non-emergency ambulance transportations. In addition the expenditure of this business unit includes the delivery of clinical continuing training to support front line ambulance staff paid and volunteer in the provision of emergency first response services to the New Zealand public.

Commercial and Fundraising represents the provision of services on a commercial basis but which are still in alignment with the St John ethos of supporting the well being of New Zealanders including Medical Alarms to provide security and assistance, and training services that support health and safety outcomes within New Zealand work places as well as enhancing first aid resiliency within communities of New Zealand. Fundraising represents the outstanding and humbling charitable gifting provided by New Zealanders to support the services of St John.

Community Services represents services provided principally within communities significantly through the support of volunteers and smaller degree of direct income dependency, including services such as Community Events Services, St John in Schools, free community health services, and a national Youth programme.

Property and Infrastructure reflects the significant reliance and associated expenditure with the provision of critical support services both for Emergency and Other Transportation Services and to a lesser extent Commercial Services within a National Organisation.

Shared and Support Services represent the common services utilised across all of the business units including significantly the ICT and property infrastructure as well as human resources support to paid staff and volunteers.

Investments represents income and expenditure from non-core activities such interest on investments including funds held as reserves under trust.



**REPORT OF THE INDEPENDENT AUDITOR ON THE SUMMARY FINANCIAL STATEMENTS
TO THE TRUSTEES OF THE PRIORY IN NEW ZEALAND OF THE MOST VENERABLE ORDER OF
THE HOSPITAL OF ST JOHN JERUSALEM**

The accompanying summary financial statements of The Priory in New Zealand of the Most Venerable Order of the Hospital of St John of Jerusalem ('The Priory Trust Board') and its controlled entities ('the Group' or 'St John NZ (Consolidated)') on pages 35 to 38, which comprise the summary consolidated statement of financial position as at 30 June 2016, and the summary consolidated statement of comprehensive revenue and expense, summary consolidated statement of changes in equity and summary consolidated statement of cash flows for the year then ended, and related notes, are derived from the audited consolidated financial statements of the Group for the year ended 30 June 2016. We expressed an unmodified audit opinion on those consolidated financial statements in our report dated 26 September 2016.

The summary financial statements do not contain all the disclosures required for full consolidated financial statements under Public Benefit Standards. Reading the summary financial statements, therefore, is not a substitute for reading the audited consolidated financial statements of the Group.

This report is made solely to the Trustees of The Priory Trust Board, as a body, for the purpose of expressing an opinion on the summary financial statements for the year ended 30 June 2016. Our audit has been undertaken so that we might state to the Trustees those matters we are required to state to them in an auditor's report on summary financial statements and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the Trustees as a body, for our audit work, for this report, or for the opinions we have formed.

Trustees' Responsibility for the Summary Financial Statements

The Trustees are responsible on behalf of the Group for the preparation of a summary of the audited consolidated financial statements, in accordance with PBE FRS-43: *Summary Financial Statements*.

Auditor's Responsibility

Our responsibility is to express an opinion on the summary financial statements based on our procedures, which were conducted in accordance with International Standards on Auditing (New Zealand) (ISA (NZ)) 810: *Engagements to Report on Summary Financial Statements*.

Other than in our capacity as auditor, the provision of information services and indirect tax advice, we have no relationship with or interests in The Priory in New Zealand of the Most Venerable Order of the Hospital of St John of Jerusalem and its controlled entities. These services have not impaired our independence as auditor of the Priory in New Zealand of the Most Venerable Order of the Hospital of St John of Jerusalem and its controlled entities.

Opinion

In our opinion, the summary financial statements derived from the audited consolidated financial statements of The Priory in New Zealand of the Most Venerable Order of the Hospital of St John of Jerusalem and its controlled entities for the year ended 30 June 2016 are consistent, in all material respects, with those financial statements, in accordance with PBE FRS-43: *Summary Financial Statements*.

Chartered Accountants
26 September 2016
Auckland, New Zealand

GOVERNANCE

The International Order

Sovereign Head
Her Majesty The Queen

Grand Prior
His Royal Highness The Duke of Gloucester KG GCVO GCStJ

Lord Prior
Sir Malcolm Ross GCVO OBE GCStJ

Prelate
The Right Reverend T Stevens CBE GCStJ

Sub Prior
Mr S J Shilson LVO GCStJ

The Priory in New Zealand

Priory Chapter

Prior
His Excellency Lt Gen The Rt Hon Sir J Mateparae GNZM QSO KStJ

Chancellor
Dr S A Evans KStJ

Deputy Chancellor
Mrs S M Cumming CStJ

Bailiffs and Dames

Grand Cross
Mr N B Darrow GCStJ
Mrs J A Hoban GCStJ
Mr J A Strachan GCStJ

Priory Secretary
Mr P R Bradley CBE OStJ

Elected and Appointed Members

Mr J W Bain MNZM KStJ JP
Mrs M P A Corkindale CStJ
Mr I L Dunn KStJ JP
Mrs T H Gibbens OStJ
Ms B A Greenaway CStJ
Mr J A Hall KStJ
Mr I M Lauder CStJ
(until 18 September 2015)
Mr M Crosbie OStJ
(from 19 September 2015)
Mr P G Macauley CStJ
Mrs S G MacLean DStJ
Mr B M Nielsen CStJ
Mr R B Wheeler KStJ
Mr G M Wilson KStJ
Maj B P Wood CStJ DSD

Priory Officers

Priory Dean
The Ven M J Black CStJ

Hospitaller
Mrs J A Hoban GCStJ

Medical Advisor
Mr I D S Civil CNZM MBE KStJ ED

Director of Ceremonies
Mr I J Rae KStJ

Volunteer Advisor
Mr P D Rankin OStJ

Registrar
Mr J D Wills CStJ

Priory Chapter Committees

Priory Honours Committee

Chair
Dr S A Evans KStJ

Committee Members
Mr J A Strachan GCStJ
Mr N B Darrow GCStJ
Mrs J A Hoban GCStJ
Mr R D Blundell KStJ
Mr J G O Stubbs CStJ
Mr M T McEvedy QSO KStJ JP
Mr G M Wilson KStJ
Mr M Smith CNZM
Mr J D Wills CStJ

Priory Nominations Committee

Chair
Dr S A Evans KStJ

Committee Members
The Ven M J Black CStJ
Ms J M Norton
Mr I D S Civil CNZM MBE KStJ ED
Mr B M Nielsen CStJ
Mr G T Ridley KStJ
Mrs T H Gibbens OStJ
Maj B P Wood CStJ DSD

Order Affairs Committee

Chair
Mr J A Strachan GCStJ

Committee Members
Mrs J A Hoban GCStJ
Mrs S G MacLean DStJ
Mr J D Wills CStJ
Mr J A Hall KStJ
Mr J A Orchard MStJ
Mr G P Wood CStJ
Mr A G Hide CStJ
Mr P D Wood KStJ

Secretary
Mr I J Rae KStJ

Rules Committee

Chair
Mr D J Swallow KStJ

Committee Members
Mr P G Macauley CStJ
Mr W Olphert CStJ
(deceased 12 April 2016)
Mr M P Young CStJ

Volunteer Support Group

Chair
Mr P D Rankin OStJ

Committee Members
Mrs L C Govenlock MStJ
Mr C A Jones MStJ
Mr C G Laufale MStJ
Mr D E Ohs MStJ
Mrs S K Wilson
Ms P A Scott MStJ

Priory Trust Board

Chancellor
Dr S A Evans KStJ

Regional Members
Mr D Aro
Mrs J M Conroy OStJ
Mr G T Ridley KStJ
Mr L W Short CStJ
Mr J G O Stubbs CStJ
Mr K I Williamson CStJ QSM JP
Mr P W Young CStJ

Appointed Members
Mr I D S Civil CNZM MBE KStJ
ED (resigned 31 May 2016)
Dr V J Thornton
(from 11 April 2016)
Ms S M Cumming CStJ
Dr L McTurk
Ms J M Norton
Mr J H Whitehead CNZM
(advisory member from 11 April 2016)

Priory Trust Board Subcommittees

Clinical Governance Committee

Chair
Mr I D S Civil CNZM MBE KStJ ED

Committee Members
Dr S A Evans KStJ
Mr G T Ridley KStJ
Dr R A Smith OStJ
Maj B P Wood CStJ DSD

Remuneration and Appointments Committee

Chair
Ms J M Norton

Committee Members
Dr S A Evans KStJ
Mr J A Gallagher CNZM KStJ JP
Mr P Brown

Secretary
Mr T Dodd MStJ

Risk and Audit Committee

Chair
Ms S M Cumming CStJ

Committee Members
Dr S A Evans KStJ
Dr L McTurk
Mr L W Short CStJ
Mr P W Young CStJ

Subsidiary Boards

St John Emergency Communications Ltd

Chair
Mr G T Ridley KStJ

Directors
Mr P R Bradley CBE OStJ
Mr G M Wilson KStJ

Secretary
Mr S M Will MStJ

Central Emergency Communications Ltd

Chair
Mr G T Ridley KStJ

Directors
Mr S Ward
Mr R Martin
Mr G M Wilson KStJ

Secretary
Mr S M Will MStJ

Regional Trust Boards

Northern Region

Chair
Mr D Aro

Elected Members
Mr J W Bain MNZM KStJ JP
Mr M R Crosbie OStJ
Mr I L Dunn KStJ JP
Mr S J Franklin OStJ
Mr C I Fraser MStJ

Appointed Members
Mr R D Blundell KStJ (Patron)
Mr L W Short CStJ
Dr V J Thornton
(until 2 May 2016)

Central Region

Chair
Mr J G O Stubbs CStJ

Appointed Member and Deputy Chairperson
Mr K I Williamson CStJ QSM JP

Elected Members
Mr D J Ashby OStJ
Mr R E Burns MStJ
Mrs B A Durbin MStJ QSM JP
Mrs H L Price CStJ
Mr R P Sinclair CStJ
Mr P R Stuthridge OStJ
Mr R B Wheeler KStJ

Appointed Members
Mr G J Crowley MStJ

South Island Region

Chair
Mrs J M Conroy OStJ

Elected Members
Mr K R Adams CStJ
Mr G J Alexander OStJ
Mr G S R Eames KStJ
Mr G J Gillespie CStJ
Mr A G Hide CStJ
Mr R E Horwell MStJ

Appointed Members
Mr R Millar MStJ
Mr G T Ridley KStJ
Mrs P M Rose QSO
Mrs H R Smith
Assoc. Prof. Lt Col Dr D C Tong
Mr P W Young CStJ

As at 30 June 2016. ■

**Donate.
Learn.
Volunteer.**





St John

Here for Life

**ST JOHN NATIONAL
HEADQUARTERS**

2 Harrison Road
Mt Wellington
Private Bag 14902
Panmure
Auckland 1741
Tel: 09 579 1015

**ST JOHN NORTHERN
REGION HEADQUARTERS**

10 Harrison Road
Private Bag 14902
Panmure
Auckland 1741
Tel: 09 579 1015

**ST JOHN CENTRAL
REGION HEADQUARTERS**

63 Seddon Road
Private Bag 3215
Hamilton 3240
Tel: 07 847 2849

ST JOHN IN WELLINGTON

55 Waterloo Quay
PO Box 10043
Wellington 6143
Tel: 04 472 3600

**ST JOHN SOUTH
ISLAND REGION
HEADQUARTERS**

100D Orchard Road
PO Box 1443
Christchurch 8140
Tel: 03 353 7110

www.stjohn.org.nz
0800 STJOHN (0800 785 646)
enquiries@stjohn.org.nz

Follow St John:



www.facebook.com/StJohnNewZealand



twitter.com/StJohnNZ



www.linkedin.com/company/St-John-New-Zealand