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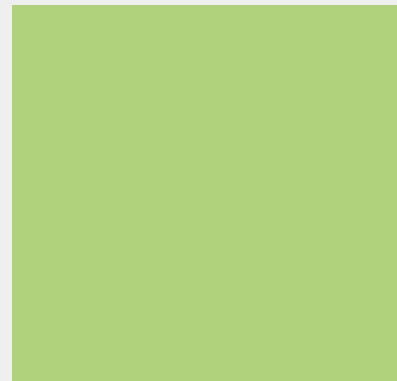
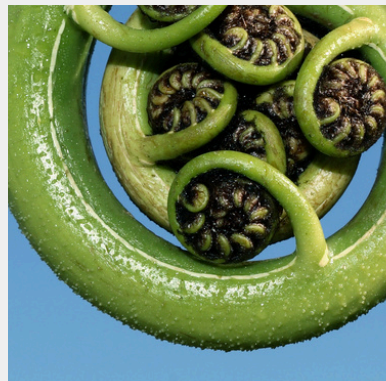
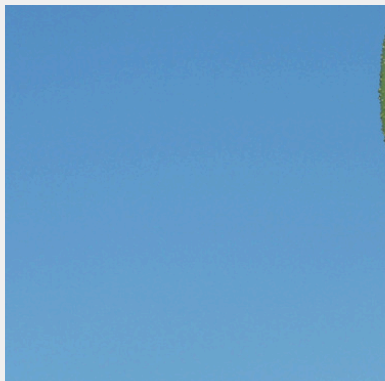
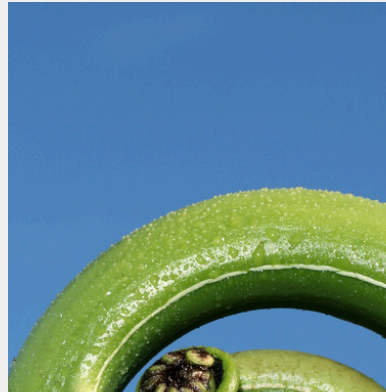
innovate

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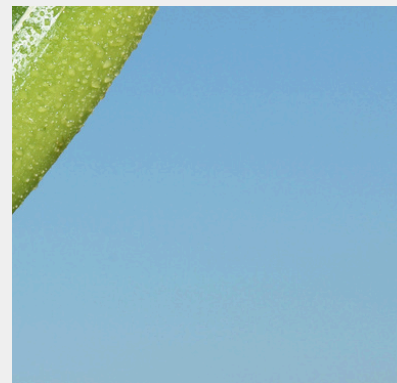


ANNUAL REPORT

2023 / 2024



Leading in quality and
equitable health



Chair Report

Tēnā koutou katoa

Tukua te wairua hei whakarei ake iā mātou hapori.

Hei arataki i ngā mahi me tō mātou whāinga matua,

kia ora ake ai ngā Iwi katoa.

Release the spirit to uplift our community

To guide our work and our purpose to ensure they are well.

On behalf of the Auckland PHO Board, it is an honour to present the 2023/2024 Annual Report.

As we move into an established post-pandemic phase, there are new and constant challenges facing primary care. The Auckland PHO team has been a steadying force, providing reliable and tailored support to our practices. Workforce challenges, practice pressures, low vaccination rates, and a changing health system intensify the workload.

Auckland PHO continues to provide services that our practices need, with the flexibility to pivot and respond quickly. Our extremely competent PHO team, under the steadfast leadership of Barbara (Barb), have stayed the course. Leading in quality equitable primary health care is realised in the work we do every day. We build bridges to connect the disconnected; we embed measurement and achieve targets. The funding we receive to enhance care is deployed based on evidence and data. Epitomising our values and remaining resolute in the commitment to uphold the value of equity & quality, to our practices and our patients, particularly to whānau Māori and Pacific peoples.

The Board has the utmost gratitude for the way our general practice network continues to provide quality, safe and compassionate care, and in doing so, improve equity. To every member of our general practice network and to everyone involved in enabling health services, your mahi (work); your mana (stature); and your aroha (passion) for patients is very much valued and respected by the Board, the Auckland PHO team and your communities.

I would like to acknowledge and thank my fellow Board members for their ongoing commitment to Auckland PHO. Last year we bid “ka kite” (farewell) to Lisa Eskildsen and Judy Davis, and we welcomed Jayme Kitiona and Vikas Sethi. We are immensely proud that our Board has four mana whenua directors along with two general practitioners, whose expertise is guided by care and diligence, and the commitment to act in good faith and in the best interests of Auckland PHO. We remain immensely grateful to East Health Trust (and in particular, Stan Yan) for financial stewardship, support and governance throughout the year.

The success of Auckland PHO reflects the hard work of all over the past year. The drive and determination contributing to as strong sense of purpose and pride. On behalf of the Board, ngā mihi aroha ki a koutou (much love to you all). You make the lives of the communities you serve better every day.

Ka Pū Te Ruha, Ka Hao Te Rangatahi is a traditional whakataukī – The new net goes fishing, when the old net is retired. This proverb is often quoted to denote an intergenerational transition or shift in leadership. This report signals the end of my time on the Board of Auckland PHO. I have served three terms (nine years) and it is time to retire. I leave feeling very proud of all that has been achieved. The Board and the Team are in great shape and safe hands.

Finally, I want to acknowledge our stylish and fearless leader, Barbara Stevens. 2024 marks the 20th year of Auckland PHO and through all 20 of those years, Barb has been at the helm. This is a momentous milestone that must be celebrated.

Kaiurungī - is an individual who is responsible for steering a waka. One who has a firm grip on the steering paddle, is guided by the Kaihautū (Captain/Board), and who has an innate ability to navigate through changing conditions, such as winds, tides and currents. Barb, your ability to anticipate and to respond to the turbulent currents of the health sector is awe-inspiring and I am honoured to have served alongside you.

Ko te Kaiurungī, ko te Rangatira.

Tihei mauri ora.



Donna

Donna Tamaariki

Chair, Auckland PHO

CEO Report

Tēnā tatau e te whānau

I am delighted to present this Annual Report for the 2023/24 year.

2024 marked Auckland PHO's 20th anniversary. The establishment of the PHO in 2004 began with seven general practices and 25,000 enrolled patients. 20 years on, patient numbers have grown to over 80,000 enrolled in 28 general practices who provide first level health care to a distinct and varied population across Tamaki Makaurau. Our enrolled patients have varied and complex situations- some are homeless, live in high deprivation communities, aged care and rurally. As such, we take our role as facilitators and solution finders for our member practices seriously and acknowledge that each practice requires different levels of engagement and support, while maintaining our focus on enhancing equitable health outcomes.

It has been both a challenging and fast paced year for Auckland PHO on the back of a change of government, ongoing health reforms, health budget uncertainty and the ongoing consequences of COVID-19 and the management of respiratory infections. Nonetheless, this past year has shown further evidence that the Primary Care sector is resilient and adaptable.

We continually review our form and function in the context of Pae Ora, by creating a platform for delivery that supports and demonstrates equity and better health and wellbeing for patients, whānau and communities, while supporting our workforce to grow and deliver what is needed.

Primary Care is facing an unprecedented increase in mental health needs, a trend we anticipate will continue. To address this, we have prioritised placements for our Health Improvement Practitioners and Health Coaches, and in addition have opened up patient eligibility for our primary mental health programme (M2M).

Many of our practices have been severely disadvantaged by workforce shortages and have found it difficult to recruit staff. The Auckland PHO team has stepped in to assist and support these practices with immunisation, practice management and administration and hands on practice nursing as an interim measure.

Looking ahead, we are confident in our capability to meet the evolving needs of the communities we serve. Our commitment to quality improvement, service accessibility and innovation drives our high level of performance in the primary health sector.

With a focus on digital transformation, workforce resilience, and community engagement, we are well-positioned to achieve sustainable growth and deliver high-value care.

The primary sector is more vital than ever. Our team's dedication, the trust of our practice network and investments in innovative care delivery will continue to strengthen our impact.

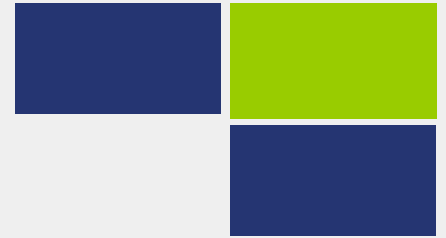
I would like to acknowledge the Auckland PHO team. I am immensely proud of them all and continue to be humbled by the extent they 'go the extra mile' to ensure our practice teams are supported in every possible way.

I would also like to take this opportunity to thank Board Members for their dedication and enthusiasm and acknowledge Donna Tamariki, whose consistent leadership and support has guided Auckland PHO to achieve its strategic objectives.

Lastly and most importantly, to the Auckland PHO General Practice and Primary Care Network, thank you for all that you do in caring for your patients and to our Funders, who respect and support the work of Auckland PHO. We are grateful for your membership and ongoing support. I look forward to working with you all next year and continuing to advocate for primary care.

Thank you all for your ongoing commitment as we strive to build a healthier future for all.

He toka tū moana, arā he toa rongonui
(Your strength is like a rock that stands in raging waters)



Barbara Stevens

CEO, Auckland PHO

Strategic Plan

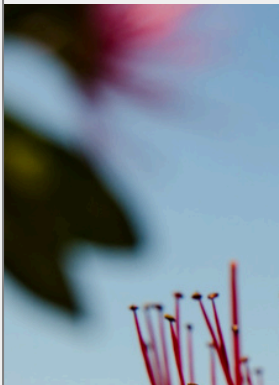
2023 - 2024

The Strategic Plan, along with our Clinical Quality Framework, Clinical Quality Improvement Plan and Annual Business Plan, is underpinned by our Inequalities Framework and has a strong mix of programmes and services. These showcase how Auckland PHO can continue to make substantive and enduring contributions to the health and wellbeing of our enrolled patients and their whānau, while supporting our dedicated and talented health teams.

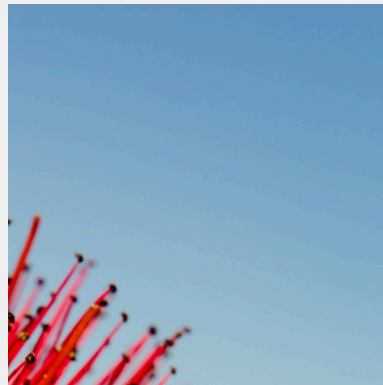
Our Vision is: Leading quality equitable primary health care.

We are motivated by a single-minded purpose to: Improve the lives of those we serve by providing inclusive, innovative and compassionate primary health care.

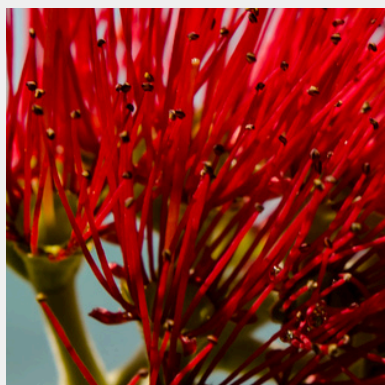
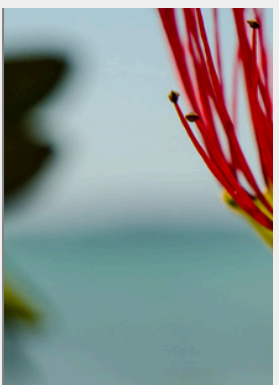
Values:



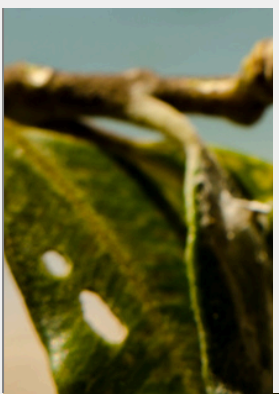
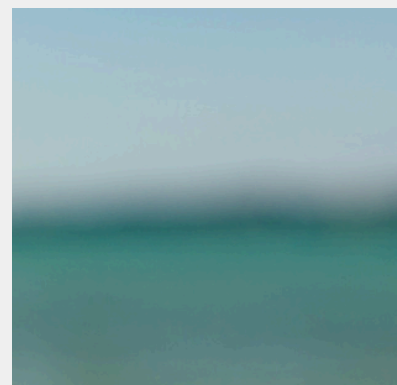
Integrity



Aroha



Enquiring



Thriving



Connectiveness

Strategic Priorities:

GOAL	KEY ACTIONS
<p>Advocate for a pro-equity approach to enable equity of Primary Care access, outcomes and participation for Māori, high needs and aging populations</p>	<p>Build and maintain strong relationships with iwi, IMPBs, and health and social agencies to address unmet need and inequities, in order to better serve our communities.</p> <p>Identify opportunities to provide additional social needs support alongside healthcare to identified populations.</p>
<p>Provide leadership, support and direction on the future of PHOs, representing the interests of Primary Care through a period of change</p>	<p>Work collaboratively with the Northern and other Auckland Primary Health Organisations with a focus on ensuring PHO and practice sustainability.</p> <p>Revise the Auckland PHO Constitution to better reflect current landscape.</p>
<p>Advocate for and support sustainability of general practice in an integrated primary and community care sector</p>	<p>Provide clear and solutions-focussed Primary Care representation to funders and government advocates on the need for increased investment in general practice services and workforce.</p> <p>Constructively contribute to the capitation re-weighting programme and subsequent implementation using information and evidence.</p> <p>Maintain a strong provider representative voice for Auckland PHO and assigned contracted providers at PSAAP with a contractual focus on patient equity.</p>
<p>Provide high quality support, education and value to our network</p>	<p>Determine priorities for the Board including skill sets, service gaps and levels of satisfaction with PHO membership.</p> <p>Review the Auckland PHO staffing structure to reflect new roles, priorities and responsibilities required for place-based development and commissioning.</p> <p>Investigate back-office functionality to enable better business management, purchasing and HR systems for the network.</p> <p>Convene six monthly (or more regularly as required) network practice hui (either in person or online).</p> <p>Undertake a network benefit mapping exercise to analyse each practice's individual needs.</p>
<p>Invest in a high functioning data and digital solution for clinical and business improvement connecting health systems</p>	<p>Ensure PHO and practice platforms and tools provide reliable data extraction, are straightforward and fit for purpose, and meet certified provider standards.</p> <p>Ensure there is ongoing, adequate support and user-friendly information available on demand and ongoing, responsive training for end users.</p>
<p>Identify enablers, solutions and opportunities that eases workforce pressures</p>	<p>Identify and promote additional workforce roles to support the Primary Care network and the needs of all of our communities, such as care co-ordinators, paramedics, social workers, health coaches, health care assistants and other opportunities to relieve workforce pressures.</p>

Governance & Leadership

Board Members



Donna Tamaariki
Ngāti Whātua Ōrākei me Waiohua

Chair
Lead Consultant – Maurea Consulting



Aroha Hudson
Ngati Whatua/Nga Puti

Iwi Director - Appointed
Deputy Chair - Appointed
Chair - Finance, Audit and Risk
Committee
CEO - Health West Limited



Jayme Kitona
Kaitohu/Director & Mātanga
Tapuhi/ Nurse Practitioner

Non-GP Director - Elected
Director, Piritahi Hauora Trust
Director, Waiheke Medical Centre
Nurse Practitioner, Piritahi Hauora
Trust
Nurse Practitioner, Waiheke Medical
Centre



Te Haula Taua
Waikato-Tainui, Ngāpuhi

Community Director – Appointed
Member - Finance, Audit and Risk
Committee



Dr Libby McLeay

GP Provider Director- Elected
GP Owner - Avondale Health Centre



Dr Vikas Sethi

GP Provider Director- Elected
GP Owner - Prana Family Health

Clinical Director Report

As 2024 draws to a close, I have reflected on the past year's achievements, challenges, and the ongoing transformation in our healthcare landscape.

As we all tried to navigate and reset ourselves after the WHO declared the end of the global pandemic, (noting however, that Covid-19 is still a reality amongst our communities), the new Coalition Government was appointed nearly a year ago and our health system continues to undergo significant changes, influenced by recent shifts in policy and the current fiscal environment.

The Government produced a new Health NZ Plan (2024-2027) and set out five priority areas for the health system:

- Access – ensuring all New Zealanders have equitable access to the health care services they need, no matter where they live.
- Timeliness – making sure all New Zealanders can access these services in a prompt and efficient way.
- Quality – ensuring New Zealand's health care and services are safe, easy to navigate, understandable and welcoming to users, and are continuously improving.
- Workforce – having a skilled and culturally capable workforce who are accessible, responsive, and supported to deliver safe and effective health care.
- Infrastructure – ensuring that the health system is resilient and has the digital and physical infrastructure it needs to meet people's needs now and the future.

The first Minister for Mental Health set priorities for mental health, addiction and suicide prevention, which align strongly with the overall health system priorities.

Auckland PHO's Strategic Plan aligns with these objectives, however Primary and Community Care face numerous challenges, including workforce shortages, funding constraints, and the need to maintain service delivery amid rising demand. There has been a great deal of instability across our Te Whatu Ora Commissioning and hospital colleagues, with multiple restructures and "re-sets.", all set against a backdrop of multiple changes at National Executive leadership level.

The COVID-19 pandemic also fundamentally changed the landscape of healthcare delivery. We have learned valuable lessons, including the importance of adaptability, collegiality and the significance of a strong respiratory protection plan. This year has also seen an increase in pertussis, measles and Mpox cases, underscoring the importance of vaccination and public awareness. The waiting room as we knew it has had to change to support our tamariki and vulnerable patients, triaging/screening for undifferentiated respiratory illness.

Auckland PHO worked with Air Ventilation Experts, supporting and resourcing Hepa Filtration Systems, CO2 monitoring and free P2/N95 respirator fit testing for all our practice network. Aaron Piano, our Clinical Nurse Advisor and IPC Champion has been pivotal in the success of putting IPC at the forefront of what we do. Thank you, Aaron.

The adoption and expansion of telehealth allows for more flexible and accessible care options. Auckland PHO commissioned Practice Plus™ for support with after hours and capacity and capability support to all of our practice network and this has proven essential in providing additional access options to primary care and their enrolled population.



Dr Charlotte Harris

Clinical Director, Auckland PHO



Addressing immunisation rates remains a fundamental key focus area with the rise in measles and pertussis cases. Our network still champions one of the highest rates of childhood immunisation in the Northern Region, demonstrating the unique trusting relationships our practices have with their communities. Thanks must go to Shanaz Khan, our Immunisation Coordinator, who is committed to supporting our network and particularly resolving AIR (Immunisation Register) issues that have affected data accuracy and reporting. Shanaz, Aaron and our Senior Management Team are working closely with our national colleagues to resolve these issues and improve the integrity of our immunisation data. This is critical for monitoring progress and ensuring that we meet National Immunisation System Level Measure targets.

One of the significant advancements this year has been the rollout of the HPV self-test screening programme. This programme now aligns with international best practice and aims to empower our wāhine to take charge of their health and improve screening rates, particularly among those who may feel uncomfortable accessing traditional cervical screening methods. Practice feedback indicates a positive reception and that we are well on the way to reaching our cervical screening health target. Our Clinical Quality Manager, Siobhan Matich joined Auckland PHO two weeks before the rollout in Sept 2023, rolled up her sleeves, and made sure the new screening codes, reporting and implementation of the HPV programme was successfully rolled out. Thank you, Siobhan.

In response to the growing prevalence of Diabetes, another highlight has been the introduction of funded Continuous Glucose Monitoring (CGM) devices for Type 1 Diabetes. These advancements will enhance our ability to manage diabetes more effectively, allowing for personalized treatment plans that improve patient outcomes.

Our Practice Engagement team have championed the Cardiovascular and Diabetes-focused clinical indicators and initiatives and proudly Auckland PHO was the only PHO across Aotearoa in July 2024 to reach the 90% target for Cardiovascular risk assessments. Auckland PHO also remains steadfast in its commitment to smoking cessation, aligning our approach with Te Tiriti o Waitangi principles and the Smoking and Vaping position statement of the Royal New Zealand College of General Practitioners (RNZCGP.) Thanks go to our Clinical Nurse Advisor, Alison Brown and Practice Improvement Assistant, Alexa Cunningham and PHO/Primary Care Support lead Erin Thompson, for supporting our practices with this important mahi.

Auckland PHO, since its inception, has been at the forefront of advocating for our rangatahi and enabling primary care to better help people on their gender-affirming journeys. In the 'Counting Ourselves' trans and non-binary health survey, almost one in ten people who had accessed gender-affirming care had moved to another part of Aotearoa because this service was not available where they had been living.

Working alongside Te Manatū Hauora, Te Whatu Ora and the Hauora Tāhine – Pathways to Transgender Healthcare Services colleagues, Auckland PHO on behalf of the other Tamaki Makaurau PHOs collaborative, proudly received an opportunity to deliver a community driven model of care, inclusive of supporting initiation of gender affirming hormone therapy in primary care, for those over eighteen, reducing barriers to access and bringing care closer to home. We are fortunate to have both dedicated clinicians in our PHO network, who have trained to deliver gender-affirming healthcare and the wonderful skills of Emma Pickles, our Project Manager, who has made this programme the success it is today.

Auckland PHO acknowledges the ongoing workforce challenges that continue to impact the primary healthcare sector, particularly in the context of increasing demand for services and the evolving needs of our population. These challenges, including recruitment and retention issues, are compounded by the wider healthcare workforce shortages seen across Aotearoa. In response, we have been focused on enhancing our workforce models.

Our inclusion of Health Improvement Practitioners (HIPs) and Health Coaches into the workforce is a significant step in enhancing the accessibility and effectiveness of our mental health and wellbeing services. HIPs and Health Coaches play a pivotal role in taking a holistic, patient centred approach, promoting mental health, well-being, and chronic disease management. Helping individuals to manage their health and navigate complex health systems, ensuring that patients receive the right support at the right time.

Additionally, Auckland PHO is proud to be part of the Comprehensive Primary Care Teams (CPCTs) initiative, a collaborative approach to expanding the scope of practice within primary care. This initiative brings together roles such as clinical pharmacists, extended care paramedics and care coordinators, alongside traditional primary healthcare teams, to offer a more integrated and versatile service to our communities.

These initiatives are not only improving patient care but also helping to build a more resilient and sustainable workforce. By broadening the roles and capabilities of different health professionals, we are creating a more flexible,

collaborative environment where all team members can contribute their skills and expertise to the benefit of the community.

Thus, the past year has presented both challenges and opportunities. As we navigate the evolving healthcare landscape, our commitment to equitable, accessible, and integrated primary and community care remains steadfast. I am proud of the progress we have made and future collaborations and initiatives we have planned. Proud of our Clinical Directorate, Practice Support and Administration Team and thanks to Komal Rana, our Population Health Co-ordinator who glues our mahi together.

Thank you to our wonderful network of 28 General Practice Teams, for your ongoing dedication and hard work, ensuring that all our initiatives are delivered and tailored to meet the needs of our diverse communities. Together, we will continue this mahi into 2025 and beyond.

Ngā mihi nui,



Dr Charlotte Harris

Clinical Director, Auckland PHO

Immunisation clinic during O-week at AUT Student Medical Centre.



Mental Health Report

Auckland PHO now has a total of eight Health Improvement Practitioners (HIPs) and 12 Health Coaches across 16 practices. The HIPs have a combined FTE of 4.7 and the Health Coaches a combined FTE of 6.8. Over the course of the financial year of July 2023 through to June 2024 our HIPs and Health Coaches have engaged with 8557 patients through our Te Tumu Waiora/Integrated Primary Mental Health and Addictions contract.

We now employ both HIPs and Health Coaches who work remotely and in practices to cover clinics requiring support but are not included in the Te Whatu Ora eligible practice cohort.

We have a psychologist and a youth health support worker, supporting rangitahi who are vulnerably housed through our new connection with The Front Door youth hub on Karangahape Road. We are navigating this new space to bring health awareness and some relief from trauma and addictions to rangitahi living in the CBD.

Referrals for our mild to moderate mental health service have seen over 407 packages of care delivered by our 12 contracted mental health providers and two inhouse therapists, who have been seamless in their care of patients. 360 brief interventions have also been performed.

Mental health staff have continued to deliver positive outcomes in a prompt and professional way under greater and greater demand for their services. Our GPs and Nurse Practitioners have conducted over 1500 extended consultations contributing to the mental health and care of those patients who seek help.

I would like to thank our HIPs and Health Coaches and those practices who welcome them into their team environment to share in the care of patients. I would also like to thank those contracted providers who support both the Auckland PHO and the patients of those practices who work with us, patient outcomes clearly reflect the care and support you offer.

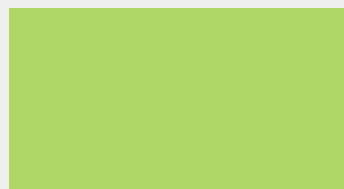
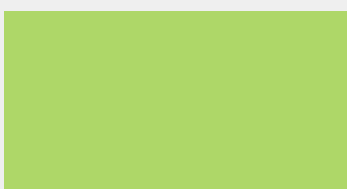
Thank you also to the practices who spend time with patients listening to their concerns and referring them for packages of care. Your dedication to those in your care is commendable.



A handwritten signature in black ink, appearing to read 'T Clark'.

Tanya Clark

Manager of Mental Health & Wellbeing,
Auckland PHO



Sub-committees

Finance, Audit and Risk Committee (FARC)

The Finance, Audit and Risk Committee (FARC) is accountable to the Board of Auckland PHO and is established by its Governance Policy and Constitution. It is a standing committee of the Board with ongoing responsibilities and will make non-binding recommendations to the Board and/or be delegated specific decision-making authority.

Aroha Hudson (Chair)	Deputy Chair, Auckland PHO Board
Donna Tamaariki	Chair, Auckland PHO Board
Te Haua Taua	Community Director, Auckland PHO Board
Barbara Stevens	Chief Executive Officer, Auckland PHO
Ashley Hulme	Chief Operations Officer, Auckland PHO
Stan Yan	Chief Financial Officer, East Health Trust PHO
Dewi Sun	Accounts Assistant, East Health Trust PHO



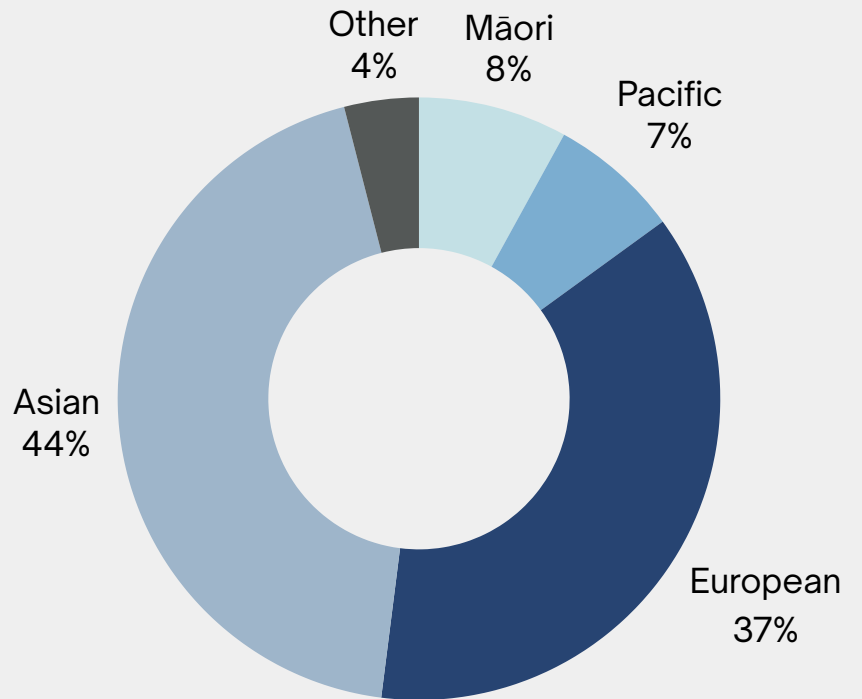
Immunisation clinic during O-week at AUT Student Medical Centre.

Population Profile

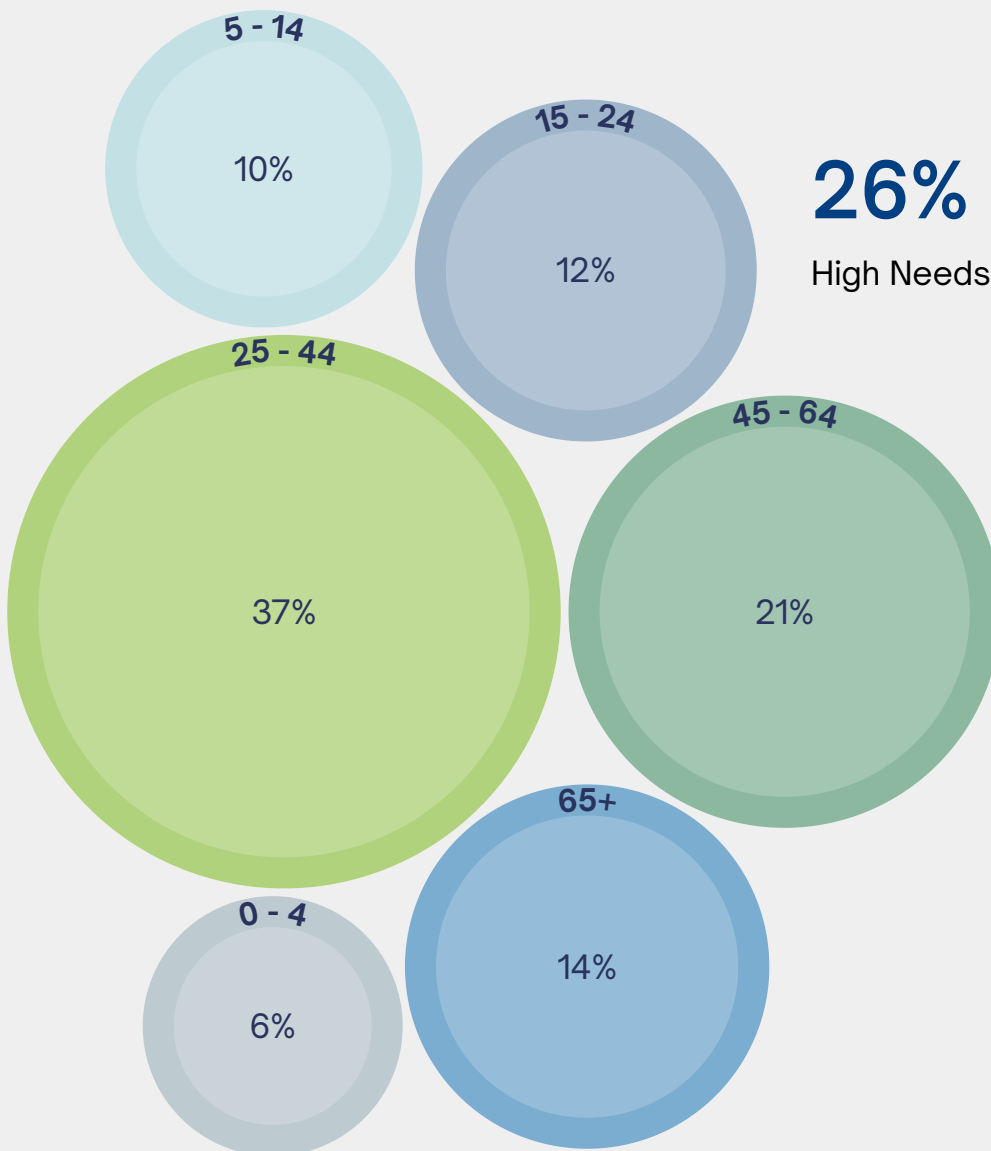
75,586

Enrolled Patients

Ethnicity Breakdown



Age Breakdown



26%

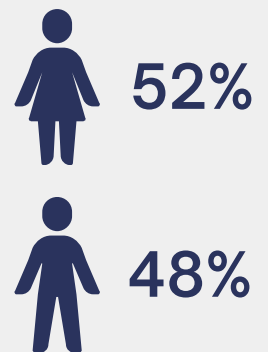
High Needs

22%

Quintile 4

16%

Quintile 5



Auckland PHO General Practices

Aotea Health Aotea Road, Claris, Great Barrier Island

Auckland Central Medical and Health Centre 326/28 College Hill, Freemans Bay

AUT Student Medical Centre 55 Wellesley Street, Auckland Central

Avondale Family Doctor 63 Rosebank Road, Avondale

Avondale Health Centre 39 Layard Street, Avondale

Avondale Health Residential Care Medical Services 39 Layard Street, Avondale

Cairnhill Health Centre 95 Mountain Road, Epsom

Dominion Medical Centre 349 Mount Albert Road, Mount Roskill

Dr Jonathan McPherson Medical Services 20 Clare Place, Mount Wellington

Elstree Ave Family Doctors 17 Elstree Avenue, Glen Innes

Epsom Medical Care 272 Manukau Road, Epsom

Glenavon Doctors Surgery 271B Blockhouse Bay Road, Avondale

Knox Medical Practice 10 Ranfurly Road, Epsom

Mount Albert Medical Centre 986 New North Road, Mount Albert

Oceania Healthcare - Auckland 80 Queen Street, Auckland Central

Piritahi Hau Ora 54 Tahatai Road, Blackpool, Oneroa, Waiheke Island

Prana Family Health - Mt Roskill 1492 Dominion Road Ext, Mount Roskill

Prana Family Health - Takanini 27/108 Great South Road, Takanini

Auckland PHO General Practices

Raphael Medical Therapy Centre 11 Woodford Road, Mount Eden

Tend Health Kingsland 317 New North Road, Kingsland

Tend Health Symonds Street 57 Symonds Street, Auckland Central

The Good Medicine Clinic 510 Richmond Road, Grey Lynn

The Salvation Army Hauora Service, 691A Mt Albert Road, Royal Oak

Three Kings Family Medical Centre 535 Mount Albert Road, Mount Albert

Viaduct Medical Centre 125 Customs Street West, Auckland Central

Villa Medical Centre, Aged Care Facility

Waiheke Medical Centre 132 Ocean View Rd, Oneroa, Waiheke Island



Farewell to Roger and Gertrud Leitch
Dr Roger Leitch was in the first cohort at the University of Auckland Medical School to graduate with a medical degree and he was one of the first GPs to join Auckland PHO.

Auckland PHO wish Roger and Gertrud Leitch the best in their (semi) retirement.

Please visit <https://www.aucklandpho.co.nz/practices-fees>
for a list of Auckland PHO Practices & Fees

Regional and National Connections

Auckland PHO participates both at a regional and national level to advocate for the reduction of health inequities and improved health outcomes for all New Zealanders. Our staff participate in the following fora:

Regional Planning

- Northern Region Operational Meeting
- Comprehensive Primary Care Team Working Group
- System Level Measures Working Group
- GPNZ Primary Care Leaders Forum

Child and Youth Health

- Maternal & Child Health Services Alliance
- Northern Region Regional Immunisation Governance Group

Governance and Finance

- APLG (Auckland Primary Care Leaders Group)
- GPNZ Member (General Practice New Zealand)
- GPNZ Nurse Leads Forum
- GPNZ Clinical Directors Forum

Information Technology

- GPNZ Data and Digital Leadership Group
- Northern Region Data Custodians Group
- Northern Region Data Stewardship Group
- Your Health Summary Clinical Governance Group
- Auckland Regional HealthPathways (Operational and Steering Group)
- Aotearoa Immunisation Register Operations

Clinical & Long Term Conditions

- Northern Region Retinal Screening Group
- National Tobacco Hui
- Metro Auckland LTC Working Group

Other Clinical

- Metro Auckland Cervical Screening Operations Group (MACSOP)
- Regional Rural Alliance
- Primary Option Acute Care Clinical Governance Group
- Patient Access for Urgent and After-Hours Services (PAUA)
- Foot protection Service Standards Working Group
- Metro Auckland Standing Order Steering Group
- Metro Auckland PHC Nursing Reference Group

Mental Health

- YSALT (Youth Service Alliance Leadership Team)
- IPMHAS (Integrated Primary Mental Health Agreement Services)
- Collaborative Mental Health and Addictions Credentialing Programme Governance Group

Auckland PHO Clinical Quality Improvement

The Auckland PHO Quality Improvement Plan focuses on both equity and quality improvement delivered across five workstreams.

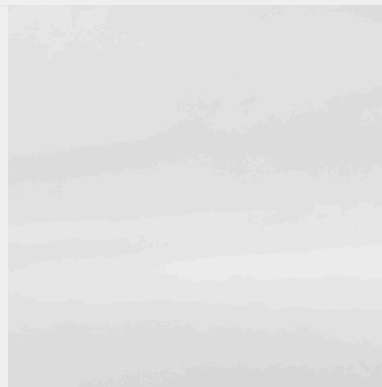
These workstreams are both directed and enabled by:

- Relevant health targets and government policies
- Northern Region Clinical Governance Forum Indicators
- Public Health measures
- Te Whatu Ora and Auckland PHO priorities
- Auckland Regional HealthPathways

Workstreams:



Starting
Well



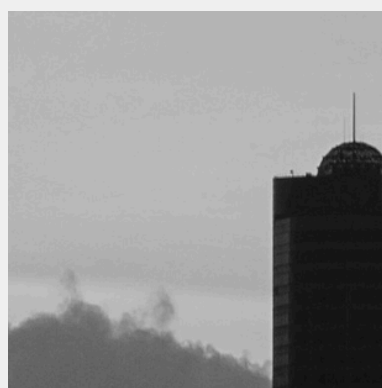
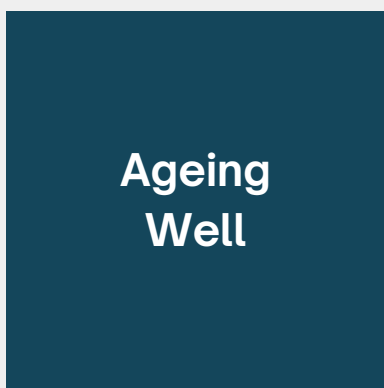
Living
Well



Mentally
Well



Ageing
Well



Primary Care
Enablement &
Sustainability



Auckland PHO Clinical Quality Improvement

Starting Well

- All tamariki/children get a healthy start, where whānau/families are empowered to maximise their tamariki/pēpē health and potential.
- We will support women who have recently given birth to receive care and get their babies enrolled.
- We will support young people/rangatahi to have full access to appropriate health services.

Living Well

- We will contribute to methods of reducing premature deaths that could potentially be avoided by enabling effective and timely Primary Care.
- We will make it easy for our patients to receive appropriate screening, preventive care and appropriate package of care tools.

Mentally Well

- We will provide support and access to people requiring mental health and wellness services.

Ageing Well

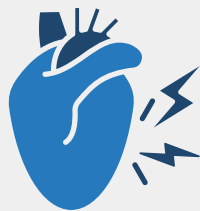
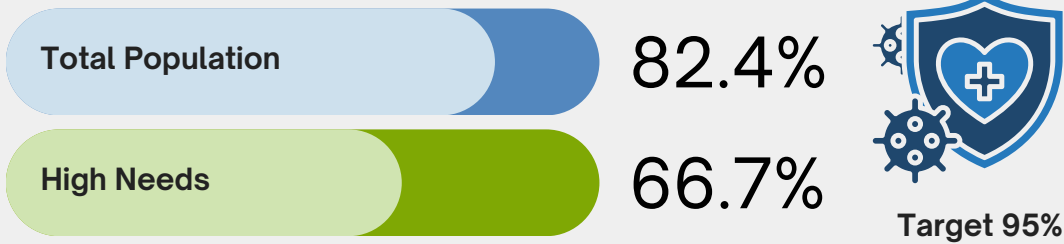
- We will provide support and access to people requiring palliative care.

Primary Care Enablement & Sustainability

- Patient Experience of Care: We will contribute to a system that ensures our patients have positive experiences when they engage in Primary Care.
- Data and Digital Technology Advancement and Enablement: We will ensure there are patient safeguarding systems in place with Auckland PHO and general practice IT systems that function effectively as an enabler of quality improvement activity.
- Sustainable and Viable Primary Care: We will support our practice network to develop systems to ensure they are viable and able to provide the best care for their patients.
- Provider Education: We will support our PHO and Practice network staff to work at the top of their scope, taking advantage of professional development opportunities to enhance their competency and capability in managing the patient population through an equity lens.
- Disaster/Pandemic Planning: We will ensure the PHO and practice network are supported to operate in times of significant pressure from external forces.

Health Target Performance Summary for Year End 2023-2024

Increased Immunisation - 8 months old

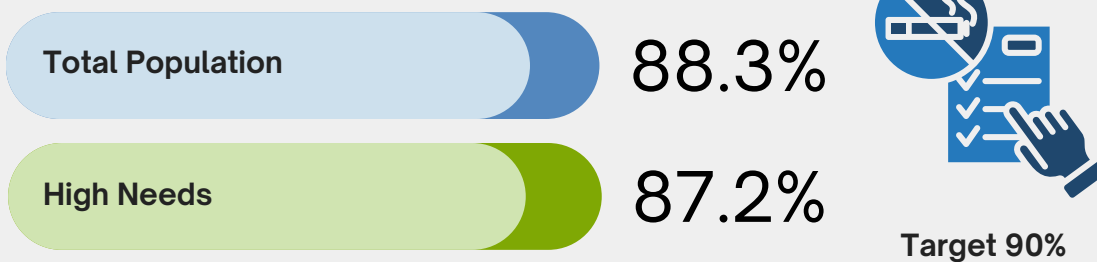


Target 90%

More Heart Checks



Better Help for Smokers to Quit



Target 80%

Access to HPV Self-Swabbing & Cervical Screen



A Snapshot of General Practice

Auckland PHO has a responsibility for ensuring that current challenges in community healthcare are being met. These challenges include child and adolescent health, mental health and long-term conditions such as diabetes and heart disease.

Auckland PHO, through the Flexible Funding Pool and Te Whatu Ora contracts, funds targeted services and programmes to our enrolled population, which aim to improve and maintain optimum health of our population.

Below is a snapshot of activity for 2023-2024:



Cardiovascular Health - Risk Assessment & Management

8395

CVD risk assessments completed

296

CVD management consultations completed



Cold Chain

89

Cold chain accreditations / Cold chain compliance reviews

111

Clinical vaccinator assessments



Diabetes Annual Review

2695

Year of care completed



Diabetes Self-Management Education (DSME)

18

DSME courses were completed



Discretionary Funding

1773

Procedures / support services for high needs populations



HPV / Cervical Screening

474

HPV self-swab or cervical screen for women or people with a cervix (or has had a cervix)



Integrated Primary Mental Health & Addiction Services

8557

Health Improvement Practitioner (HIP) & Health Coach (HC) consultations

A Snapshot of General Practice



Palliative Care

939

Consultations at home and in practice



Post Natal Screening

493

New mothers received a post-natal check



Podiatry

408

New referrals to podiatry services



Transport Subsidy

388

Patients received subsidised transportation to and from their general practice



Primary Mental Health (Mild to Moderate Mental Health)

407

M2M Packages of Care

1432

M2M extended GP consults and follow ups



Sexual Health

1027

Sexual health consults were funded



Sore Throat Clinics

Rheumatic Fever

270

Sore throat management consults were funded



Refugee & Asylum Seeker Wraparound Services

1140

Consultations supporting former refugees and current asylum seekers

Hours we have engaged in hands-on support for our practices

1,324

Practice staff supported to complete CPR training

76



Practice System Level Measure Achievements

Our practice teams put a great deal of effort and work into supporting and achieving System Level Measures. Below are the practice achievements and prizes presented at our 2023 Annual Awards evening.

First Place

Runner Up

Influenza Vaccinations 65+

Avondale Health Centre
Dominion Medical Centre

Cairnhill Health Centre
Glenavon Doctors
Surgery

Childhood Immunisation 8 Months

Prana Family Health

Avondale Health Centre
Cairnhill Health Centre
Elstree Ave Family
Doctors

Childhood Immunisation 24 Months

Prana Family Health

Glenavon Doctors Surgery
Tend Health
Three Kings Family Medical
Centre

Diabetes Year of Care

Avondale Family Doctor
Dominion Medical Centre

Glenavon Doctors Surgery
Mt Albert Medical Centre
Raphael Medical Therapy
Centre
Three Kings Family Medical
Centre

CVD Risk Assessments

Aotea Health
Dominion Medical Centre
Knox Medical Centre

Epsom Medical Care
Glenavon Doctors Surgery
Mt Albert Medical Centre
Prana Family Health

Total Population Achievement Awards

Have achieved 4 of 5 or 5 of 5 System Level Measures.

Total Population - Silver

Aotea Health
Auckland Central Medical and Health Centre
Avondale Family Doctor
Avondale Health Centre
Glenavon Doctors Surgery
Prana Family Health

Total Population - Gold

Mt Albert Medical Centre
Three Kings Family Medical Centre



Equity Awards

Have achieved 4 of 5 or 5 of 5 System Level Measures for their high needs population.

Equity Award - Silver

Aotea Health
Dominion Medical Centre
Epsom Medical Care
Glenavon Doctors Surgery
Three Kings Family Medical Centre

Equity Award - Gold

Mt Albert Medical Centre



Auckland PHO Excellence in Quality Performance for 2023

Small Practice
Mt Albert Medical Centre

Medium Practice
Three Kings Family Medical Centre

Large Practice
Dominion Medical Centre

Our Team



Senior Management



Barbara Stevens
Chief Executive Officer



Dr Charlotte Harris
Clinical Director



Julia Burgess Shaw
Manager - Planning & Performance



Ashley Hulme
Chief Operations Officer



Tanya Clark
Manager of Mental Health & Wellbeing

Our Team

Practice Engagement



Aaron Piano
Clinical Advisor: IPC,
Vaccinator and Cold
Chain Competency
Assessor



Alexa Cunningham
Practice Support &
Improvement Assistant



Alison Brown
Clinical Advisor



Carol Ennis
Quality Improvement
and Support
(contractor)



Charley Peace
Self Management
Services Coordinator



Emma Pickles
Project Manager



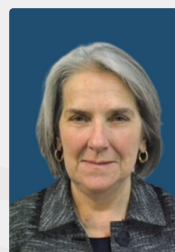
Erin Thompson
PHO Primary Care
Support



Komal Rana
Population Health
Coordinator



Shanaz Khan
Child Health and
Immunisation Services
Coordinator



Siobhan Matich
Manager - Clinical and
Quality Improvement

Our Team

Operations

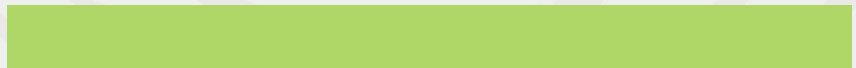


Siddharth Raj Saravanan
Data Analyst



Suzanne Le Lievre
Accounts Assistant
Community Podiatry
Service Coordinator

Team Building Day
April 2024





AUCKLANDPHO

FINANCIAL REPORT

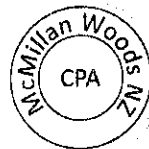
FOR THE YEAR ENDED 30 JUNE 2024

AUCKLAND PHO LIMITED

FINANCIAL REPORT
FOR THE YEAR ENDED 30 JUNE 2024

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Auckland PHO Limited

**Company Directory
As at 30 June 2024**

Company Number 1306365

Charities Registration CC37184

Registered Office 210 Khyber Pass Road
Grafton
Auckland

Directors Donna Tamaariki - Chair
Aroha Hudson - Deputy Chair
Jayme Mawhiti Kitiona
Vikas Sethi
Elizabeth McLeay
Te Haua Howard Taua

Bank ASB Bank Limited
Auckland

Business Activity Auckland PHO is engaged in the business of Healthcare Services. Auckland PHO is domiciled in New Zealand and is registered with the Charities Commission (Charity Registration CC337184).

Auditor McMillan Wood NZ
Auckland

Solicitors Hesketh Henry
Auckland



Auckland PHO Limited
Directors' Declaration
For the Year Ended 30 June 2024

In the opinion of the directors the financial statements and notes:

- comply with New Zealand generally accepted accounting practice and present fairly the financial position of the Company as at 30 June 2024 and the results of its operations and cash flows for the year ended on that date.


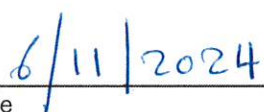
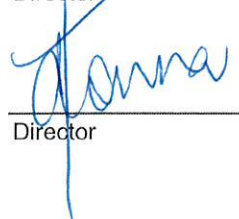
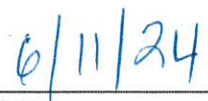
- have been prepared using appropriate accounting policies which have been consistently applied and supported by reasonable judgements and estimates.

The directors believe that proper accounting records have been kept which enable, with reasonable accuracy, the determination of the financial position of the company and facilitate compliance of the financial statements with the Financial Reporting Act 2013.

The directors consider that they have taken steps to safeguard the assets of the Company, and to prevent and detect fraud and other irregularities, Internal control procedures are also considered to be sufficient to provide reasonable assurance as to the integrity and reliability of the financial statements.

The directors are pleased to present the annual reports including the financial statements of Auckland PHO Limited for the year ended 30 June 2024.

For and on behalf of the Board

	
Director	Date
	
Director	Date

Legal Entity:	Auckland PHO Limited
Type of Entity:	Not for profit organisation

Registered Number:	9429035971955 (CC37184)
Date of Establishment:	01 April 2003

Introduction

Supported by our financial statements, this report communicates Auckland PHO’s strategy, objectives, and achievements for the 2023/24 Financial Year. As a registered charity of Tier 2 status, the information in this report has been provided in accordance with External Reporting Board requirements (PBE FRS 48, 2022). This report was prepared and reviewed by:



Ashley Hulme
COO, Auckland PHO



Barbara Stevens
CEO, Auckland PHO

Background

Primary Health Organisations (PHOs) are the local structures for delivering and co-coordinating primary health care services. PHOs bring together GPs, nurses, and other health professionals (such as Māori health workers, health promotion workers, dietitians, pharmacists, physiotherapists, psychologists, and midwives) in the community to serve the needs of their enrolled populations.

Our Purpose

Improve the lives of those we serve by providing inclusive, innovative, and compassionate primary health care. Auckland PHO is motivated by a single-minded purpose: to improve the lives of those we serve by providing, inclusive, innovative, and compassionate primary health care. This purpose is expressed through our company values:

Integrity Aroha Curiosity Thriving Connectedness

Mission Statement and Strategy

Auckland PHOs six strategic priorities are underpinned by our mission statement- **Leading quality equitable health care**

Equity and Quality Infrastructure Partnerships
People, Performance and Culture Growth Business Intelligence

Operational Objectives

Auckland PHO aims to deliver on this strategy through seven operational areas:

Improve equity through person centred health outcomes for Māori and other high needs populations such as Pacific, Asian, Refugees and new migrant peoples

- Create knowledge and support innovation in ourselves and our practice network.
- Value and develop a workforce that is aligned to the needs of the people we serve.
- Lead transformation by continuously improving the performance, capacity, and capability of Primary Care (based on evidence and data) to deliver quality services to the people we serve.
- Work with Partners
- Operate a sustainable, accountable, and financially viable organisation.
- Anticipate and manage change and build agility in ourselves and our practice network.
-

Funding Received

	First Contact Funding	Flexible Funding Pool	Contract Funding	Management Fee
2022/23	\$13,857,195	\$2,139,161	\$3,225,177	\$522,367
2023/24	\$16,166,699	\$2,486,119	\$4,478,825	\$594,852

Data source: MYOB

PHO Management Fees

Funding received to enable core activities of the PHO. Calculated based on the number of enrolled patients.

First Contact Funding

Funding calculated by Manatū Hauora using a population and demographic-based funding formula. Capitation, Very Low-Cost Access (VLCA) Subsidy, Community Services Card (CSC) Subsidy, and Zero fees for under 14yrs are the primary funding mechanisms for primary health care services. **Practices receive their full entitlement for all First Contact Funding.**

Contract Based Funding

Funding received from Te Whatu Ora focused on prevention and health promotion. Funded in bulk amounts, the contracts require regular reporting back to Te Whatu Ora on activity and outcomes. Refer to the consolidated statement for further details. **Some flexible funding is added to contract funds, as practices claim for services provided.**

Flexible Funding

Funding for services to improve access for high needs patients. Health Promotion (HP), Services to Increase Access (SIA), CarePlus (Carextra), and System Level Measures (SLM) are the funding mechanisms which comprise the Flexible Funding Pool and form the base for quality improvement activity. **For the 2023/24 Financial Year, practices received their full entitlement for SLM and Carextra. HP and SIA Funds were consolidated into the Flexible Funding Pool.**

Measures and Activities

Auckland PHO has a responsibility for ensuring that current challenges in community healthcare are being met. Auckland PHO, through the Flexible Funding Pool and Te Whatu Ora contracts, target services and programmes to meet the needs of the enrolled population, with an aim to improve and maintain optimum health of our population. The Auckland PHO Senior Management Team is providing this report on the following key activities because they best reflect our mission statement and operational objectives:

- Practice engagement and support for service delivery
- Contract based quality improvement activities

Disclosure of judgements

- Contract based quality improvement activities will exclude contracts that are “one-off” payments and any contracts not directly coordinated or delivered by Auckland PHO staff.
- These service performance measures are easily quantifiable. Some qualitative activities that assessed outcomes/impact of our activity are not easily available or have not been actively measured as they are not a primary focus.

Data Sources

Auckland PHO has the following data sources:

- **MYOB** - Auckland PHO uses MYOB for all banking reconciliations and transaction record keeping. Please refer to the Financial Statements for further details
- **KARO Data Management** (Link: <https://karo.co.nz/register-management/>)- Karo's register management software, Monitor, meets all the MoH register management requirements and uses Monitor to complete the register processing and submission on behalf of Auckland PHO.
- **Mōhio Data Management** (Link: [Mōhio- One Simple Solution \(New Zealand\) \(mohio.nz\)](https://mohio.nz))- Mōhio is a complete end-to-end electronic system for a PHO covering claims, referrals, budget holding, patient management, reporting, data collection and performance.
- **Internal Data Sources**- Auckland PHO utilises two sources of internal recording and reporting:
 1. Report Templates provided by Te Whatu Ora; and
 2. The Auckland PHO Practice Engagement Report Form developed using Microsoft Forms.



Results for 2023/24

Auckland PHO Summary

	Enrolled Patients	Consultations Delivered	Hours of Practice Engagement and Support
2022/23	67,554 Patients	278,001 Consultations	1,276 Hours
2023/24	75,586 Patients	305,285 Consultations	1,324 Hours

Data source: KARO Register Management, Auckland PHO Annual Report, Auckland PHO Practice Engagement Report

Outcomes from Activity

Measure	2022/23	2023/24	Funding Source	Data Source	Comments
Practice Engagement (#hours)	1,276	1,324	PHO Management	Internal	<p>Auckland PHO has a Practice Engagement team, who schedule regular sessions with each practice to provide ongoing support and coordination of services.</p> <p>Engagement with practices is self-reported and reported engagement is reviewed monthly.</p>
Podiatry Services (# Packages of Care)	380	408	Te Whatu Ora	Mōhio	<p>Auckland PHO contracts Podiatrists in the community to provide foot care to people with diabetes who have moderate or high-risk diabetes foot disease.</p> <p>Referrals to the programme are derived from the Auckland PHO clinicians/nurses and are managed using Mōhio referrals and claims. Packages of care consumption is tracked using a Te Whatu Ora Template.</p> <p>Report produced for Te Whatu Ora quarterly and annually.</p>
DSME Courses (Diabetes Self-Management Education) (# Courses)	20	18	Te Whatu Ora	Internal	<p>Auckland PHO has a dedicated DSME coordinator and DSME facilitators who provide DSME and support programmes for people with diabetes.</p> <p>Referrals to the programme are derived from the general practice network (across Auckland) and direct from the community.</p> <p>Attendance is reported on using a Te Whatu Ora Template and is reported quarterly and annually.</p>
Primary Mental Health (# Packages of Care)	400	407	Te Whatu Ora	Mōhio	<p>Auckland PHO has engaged a group of mental health providers including clinical psychologists, health psychologists and counsellors who are skilled at providing brief, individualised, focused treatment in collaboration with general practice.</p> <p>GPs can claim for an extended consult for all patients and those eligible are referred to the programme and are managed using Mōhio.</p> <p>Packages of care consumption is tracked using a Te Whatu Ora Template. Report is produced for Te Whatu Ora quarterly.</p>



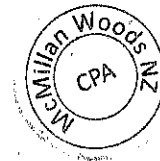
Integrated Primary Mental Health & Addiction Services (# HIP and HC Consultations)	6,500	8,557	Te Whatu Ora	Mōhio	<p>Auckland PHO has six Health Improvement Practitioners (HIPs) and nine Health Coaches. The HIPs have a combined FTE of 3.7 and the Health Coaches a combined FTE of 4.8.</p> <p>Patient engagement is managed using Mōhio and reported back using a Te Whatu Ora Template</p> <p>Report produced for Te Whatu Ora quarterly.</p>
Immunisation Services Cold Chain Assessments (# Assessments)	53	89	Te Whatu Ora	Internal	<p>Auckland PHO has a dedicated Cold Chain Manager who conducts vaccine fridge compliance and provides support and advice in the event a vaccine fridge failure or breach occurs.</p> <p>The programme is managed reported on using a Te Whatu Ora Template.</p> <p>Report produced for Te Whatu Ora quarterly.</p>
Immunisation Services Clinical Assessments (# Assessments)	125	111	Te Whatu Ora	Internal	<p>Auckland PHO has a dedicated Vaccination Clinical Assessor who assesses competency for newly trained vaccinators.</p> <p>The programme is managed and reported on using a Te Whatu Ora Template.</p> <p>Report produced for Te Whatu Ora quarterly.</p>



Auckland PHO Limited

**Statement of Comprehensive Revenue and Expenses
For the Year Ended 30 June 2024**

	<u>Notes</u>	<u>2024</u> \$	<u>2023</u> \$
REVENUE			
First Contact funding		18,652,818	15,996,356
Te Whatu Ora Contract Funding		4,478,825	3,225,177
Management Fees		594,852	522,367
Other Income	4a	3,448	3,539
TOTAL REVENUE		23,729,943	19,747,439
DIRECT COST OF SERVICES			
First Contact Services		16,168,130	13,859,009
PHO Programmes		4,655,291	3,380,604
TOTAL DIRECT COST OF SERVICE		20,823,421	17,239,613
GROSS SURPLUS		2,906,522	2,507,826
EXPENSES			
	4b	2,603,989	2,324,851
OPERATING SURPLUS		302,533	\$182,975
Interest received	5	95,870	42,417
NET FINANCE REVENUE		95,870	42,417
NET SURPLUS for the year		398,403	\$225,392
TOTAL COMPREHENSIVE INCOME for the year		398,403	\$225,392



Auckland PHO Limited

**Statement of Financial Position
As at 30 June 2024**

	<u>Notes</u>	<u>2024</u> \$	<u>2023</u> \$
<u>ASSETS</u>			
Current Assets			
Cash and Cash Equivalents	7	2,180,429	1,762,815
Trade and Other Receivables	9	846,353	471,246
Total Current Assets		3,026,782	2,234,061
Non Current Assets			
Property, Plant & Equipment	6	34,657	40,734
		34,657	40,734
TOTAL ASSETS		3,061,439	2,274,795
<u>Liabilities</u>			
Current Liabilities			
Accounts Payable and Accruals	8	907,118	518,877
		907,118	518,877
TOTAL LIABILITIES		907,118	518,877
NET ASSETS		2,154,321	1,755,918
<u>EQUITY</u>			
Share Capital		1	1
Retained Earnings		2,154,320	1,755,917
TOTAL EQUITY		2,154,321	1,755,918



Approved on behalf of the Board by:

[Handwritten Signature]

Director

6/11/2024

Date

[Handwritten Signature]

Director

6/11/24

Date

The accompanying notes form part of and should be read in conjunction with the Financial Statements and Audit Report.

Auckland PHO Limited

**Statement of Changes in Equity
For the Year Ended 30 June 2023**

Notes	Share Capital	Retained Earnings	Total Equity
	\$	\$	\$
<u>As at 1 July 2022</u>	1	1,530,525	1,530,526
Net profit for the year	-	\$225,392	\$225,392
Total comprehensive income for the year	-	\$225,392	\$225,392
Equity at 30 June 2023	1	1,755,917	1,755,918



The accompanying notes form part of and should be read in conjunction with the Financial Statements and Audit Report.

Auckland PHO Limited

**Statement of Changes in Equity
For the Year Ended 30 June 2024**

Attributable to Shareholders of the co

Notes	Share Capital	Retained Earnings	Total Equity
	\$	\$	\$
As at 1 July 2023	1	1,755,917	1,755,918
Net surplus for the year	-	398,403	398,403
Total comprehensive income for the year	-	398,403	398,403
Equity at 30 June 2024	1	2,154,320	2,154,321



The accompanying notes form part of and should be read in conjunction with the Financial Statements and Audit Report.

Auckland PHO Limited

**Statement of Cash Flows
For the Year Ended 30 June 2024**

	<u>Notes</u>	<u>2024</u>	<u>2023</u>
		\$	\$
<u>CASH FLOWS FROM OPERATING ACTIVITIES</u>			
<u>Cash was received from:</u>			
Auckland District Health Board funding		23,369,750	19,906,340
Interest received		85,554	37,248
Goods & Services Tax		-	-
		23,455,304	19,943,588
<u>Cash was applied to:</u>			
Primary health care services, suppliers and employees		23,063,850	19,360,763
Goods & Services Tax	-	39,014	3,021
		23,024,836	19,357,742
Net cash received (paid) from operating activities		430,468	585,846
<u>CASH FLOWS FROM INVESTING ACTIVITIES</u>			
<u>Cash was paid to</u>			
Purchase of Property Plant and Equipment		(12,854)	(23,168)
		(12,854)	(23,168)
Net cash applied for investing activities		(12,854)	(23,168)
Net cash received (paid) for the year		417,614	562,678
Cash and cash equivalent balance at 1 July		1,762,815	1,200,137
Cash and cash equivalent balance at 30 June	7	2,180,429	1,762,815



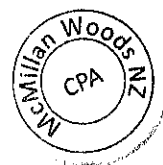
The accompanying notes form part of and should be read in conjunction with the Financial Statements and Audit Report.

Auckland PHO Limited

**Statement of Cash Flows
For the Year Ended 30 June 2024**

RECONCILIATION OF NET SURPLUS AFTER TAX TO CASH FLOWS FROM OPERATING ACTIVITIES

	<u>2024</u>	<u>2023</u>
	\$	\$
Reported Net Surplus for the year	398,403	225,392
Non-cash items: - Depreciation & loss on sale	18,933	21,271
	<hr/> 417,336	<hr/> 246,663
Movements in working capital items:		
Accounts Receivable	(370,509)	153,732
Accounts Payable	344,627	182,430
Net GST	39,014	3,021
	<hr/> 13,132	<hr/> 339,183
Net cash received (paid) from operating activities	<hr/> 430,468	<hr/> 585,846



The accompanying notes form part of and should be read in conjunction with the Financial Statements and Audit Report.

Auckland PHO Limited

Notes to the Financial Statements For the Year Ended 30 June 2024

1.0 Statement of Accounting Policies

Reporting Entity

The reporting entity is Auckland PHO Limited. Auckland PHO Limited was incorporated on 27 May 2003. It is a limited liability company registered under the Charities Act 2005 (Charity Registration CC337184). Auckland PHO is domiciled in New Zealand and the Entity's company registration number is 1306365, and registered office is 210 Khyber Pass Road, Newmarket, Auckland, New Zealand.

2.0 Statement of Compliance and Basis of Preparation

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

The Board has elected to report in accordance with Tier 2 PBE accounting standards and in doing so has taken advantages of all applicable Reduced Disclosure Regime ("RDR") disclosure concessions.

Changes in Accounting Policy

There have been no changes to policies adopted from the previous year.

Critical Accounting Estimates and Judgements

Estimates and judgements are continually evaluated and are based on historical experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

The company makes estimates and assumptions concerning the future. The resulting accounting estimates will, by definition, seldom equal the related actual results. The estimates and assumptions that have significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year are addressed below.

Carrying Value of Other Financial Assets

The company assesses the carrying value in an equity investment shown in Other Financial Assets to ensure it does not exceed its fair value. This determination requires significant judgement. In making this judgement the company evaluates relevant factors such as cashflow, business outlook, financial health and any other relevant information available to the company.

3.0 Summary of Significant Accounting Policies

The principal accounting policies applied in the preparation of these financial statements are set out below. These policies have been consistently applied to all years presented, unless otherwise stated.

3.1 (a) Basis of Measurement

The financial statements have been prepared on the basis of historical cost, as modified by the fair value measurement of non-derivative financial instruments.

(b) Functional and Presentational Currency

The financial statements are prepared in New Zealand dollars (\$). All numbers presented have been rounded to the nearest dollar.



Auckland PHO Limited

Notes to the Financial Statements For the Year Ended 30 June 2024

3.2 Financial Assets

The company classifies its investments in the following categories:

Financial assets at fair value through the profit and loss, loans and receivables, held to maturity investments and available for sale financial assets. The classification depends on the purpose for which the investments were acquired. The board determines the classification of its investments at initial recognition and re-valuates this designation at every reporting date.

Financial assets at fair value through profit and loss

This category has two sub categories: financial asset held for trading, and those designated at fair value through profit and loss at inception. A financial asset is classified in this category if acquired principally for the purpose of selling in the short term or if so designated by management. Derivatives are also categorised as held for trading unless they are designated as hedges. Assets in this category are classified as current assets if they are either held for trading or are expected to be realised within 12 months of balance date.

The company does not have any financial assets classified as fair value through profit and loss.

Loans and Receivables

Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active market. They arise when the company provides money, goods or services directly to a debtor with no intention of selling the receivable. They are included in current assets, except for those maturities greater than 12 months after balance date, which are classified as non-current assets.

The company's loans and receivables comprise trade and other receivables and cash and cash equivalents.

Held to maturity investments

Held to maturity investments are non-derivatives financial assets with fixed or determinable payments and fixed maturities that the company's management has the positive intention and ability to hold to maturity.

The company does not have any financial assets classified as held to maturity.

Available for sale financial assets

Available for sale financial assets are non-derivatives, principally equity securities, that are either designated in this category or not classified in any of the other categories. They are included in non-current assets unless management intends to dispose of the investment within 12 months of balance date.

The company does not have any financial assets classified as held to maturity.

Purchases and sales of investments are recognised on trade date - the date on which the company commits to purchase or sell the asset. Investments are initially recognised at fair value plus transaction costs for all financial assets not carried at fair value through profit and loss. Financial assets carried at fair value through profit and loss are initially recognised at fair value and transaction costs are expensed in profit and loss. Investments in equity instruments that do not have a quoted market price in an active market and whose fair values cannot be reliably measured are recognised and subsequently carried at cost.

Investments are derecognised when the rights to receive cash flows from the investments have expired or have been transferred and the company has transferred substantially all the risks and rewards of ownership.

Available for sale financial assets and financial asset at fair value through profit and loss are subsequently carried at fair value. Loan receivables and held to maturity investments are carried at amortised cost using the effective interest method. Realised and unrealised gains and losses arising from changes in the fair value of financial assets at fair value of financial assets at fair value through profit and loss are included in profit and loss in the period in which they arise. Unrealised gains and losses arising from changes in the fair value of securities classified as available for sale are recognised in other comprehensive income, except for foreign exchange movements on monetary assets, which are recognised in profit and loss. When securities classified as available for sale are sold or impaired, the accumulated fair value adjustments are included in profit and loss as gains and losses from investment securities.



Auckland PHO Limited

Notes to the Financial Statements For the Year Ended 30 June 2024

3.3 Financial Assets (continued)

The company assesses at each balance date whether there is objective evidence that a financial asset or a group of financial assets is impaired. In the case of equity securities classified as available for sale, a significant or prolonged decline in the fair value of the security below its cost is considered in determining whether the securities are impaired. If any such evidence exists for available for sale financial assets, the cumulative loss - measured as the difference between the acquisition cost and the current fair value, less any impairment loss on that financial asset previously recognised in profit and loss - is removed from equity and recognised in profit and loss. Impairment losses recognised in profit and loss on equity instruments are not reversed through profit and loss.

3.4 Cash and cash equivalents

Cash and cash equivalents includes cash in hand and deposits held at call with banks.

3.5 Trade and other receivables

Trade and other receivables are recognised initially at fair value and subsequently measured at amortised cost using the effective interest method, less provision for impairment.

Collectability of receivables is reviewed on an ongoing basis. Individual debts which are known to be uncollectible are written off. A provision for impairment of receivables is established when there is objective evidence that the company will not be able to collect all amounts due according to the original terms of the receivables. Significant financial difficulties of the debtor, probability that the debtor will enter bankruptcy or financial reorganisation, and default or delinquency in payments (more than 30 days overdue) are considered objective evidence of impairment.

The amount of provision is the difference between the asset's carrying amount and the present value of estimated future cash flows, discounted at the original effective interest rate. The amount of the provision is recognised in profit and loss statement.

If, in a subsequent period, the amount of impairment loss decreases and the decrease can be related objectively to an event occurring after the impairment was recognised (such as an improvement in the debtor's credit rating), the previously recognised impairment loss is reversed and the reversal is recognised in profit and loss.

Subsequent recoveries of amounts written off are recognised in profit and loss.

3.6 Financial Liabilities

(a) Trade and other payables

These amounts represent unsecured liabilities for goods and services provided to the company prior to the end of the financial year which are unpaid. Trade and other payables are recognised initially at fair value and subsequently measured at amortised cost using the effective interest method. As trade and other payables as usually paid within 30 days, they are carried at face value.

3.7 Revenue recognition

Revenue comprises the fair value of the consideration received or receivable for the provision of services in the ordinary course of the company's activities. Revenue is shown net of Goods and Services Tax, returns, rebates and discounts and after eliminating sales within the company.



Auckland PHO Limited

Notes to the Financial Statements For the Year Ended 30 June 2024

3.8 Revenue recognition (Continued)

The company recognises revenue when the amount of revenue can be reliably measured, it is probable that future economic benefits will flow to the company and when specific criteria have been met for each of the company's activities. Revenue from exchange transactions First Contact Capitation and Contract revenue Auckland PHO receives annual funding from Te Whatu Ora, which is based on enrolled patients within APHO network of providers. This is based on the quarterly uploads of the register to Te Whatu Ora and recognised monthly on the funding entitlement for the quarter.

Sale of services

Sales of services are recognised in the accounting period in which the services are rendered, by reference to completion of the specific transaction assessed on the basis of the actual service provided as a proportion of the total services to be provided. When the contract outcome cannot be estimated reliably, revenue is recognised only to the extent of the expenses recognised that are recoverable. The revenue recognition approach for APHO contract revenue depends on the contract terms. Those contracts where the amount of revenue is substantively linked to the provision of quantifiable units of service are treated as exchange contracts and revenue is recognised as the APHO provides the services. For example, where funding varies based on the quantity of services delivered, such as number of screening tests or heart checks. Other contracts are treated as non-exchange and the total funding receivable under the contract is recognised as revenue immediately, unless there are substantive conditions in the contract. If there are substantive conditions, revenue is recognised when the conditions are satisfied. A condition could include the requirement to provide services to the satisfaction of the funder to receive or retain funding. Revenue for future periods is not recognised where the contract contains substantive termination provisions for failure to comply with the service requirements of the contract. Conditions and termination provisions need to be substantive, which is assessed by considering factors such as the past practice of the funder. Judgement is often required in determining the timing of revenue recognition for contracts that span a balance date and multi-year funding arrangements.

Interest income

Interest income is recognised on a time-proportion basis using the effective interest method. This is a method of calculating the amortised cost of a financial asset and allocating the interest income over the relevant period using the effective interest rate, which is the rate that exactly discounts estimated future cash receipts through the expected life of financial assets to be the net carrying amount of the financial asset.

Dividend income

Dividend income is recognised when the right to receive payment is established.

3.9 Goods and services tax

All amounts are shown exclusive of Goods and Services Tax ("GST"), except for receivables and payables, which are stated inclusive of GST.

The net amount of GST recoverable from, or payable to, Inland Revenue, is included as part of receivables or payables in the statement of financial position.

3.10 Short term employee benefits

Short-term employee benefit liabilities are recognised when the Company has a legal or constructive obligation to remunerate employees for services provided with 12 months of reporting date and is measured on an undiscounted basis and expensed in the period in which employment services are provided.

3.11 Going Concern

Auckland PHO Limited is reliant on continued funding from Te Whatu Ora. Funding contracts have been successfully renegotiated and are in place for the 2023/24 year and the company has adequate cash resources for the next 12 months after signing these financial statements. The Board therefore consider the going concern assumption to be valid for 30 June 2024.



Auckland PHO Limited

**Notes to the Financial Statements
For the Year Ended 30 June 2024**

4. Income and Expenses

a) <u>Other Income</u>	<u>2024</u>	<u>2023</u>
	\$	\$
Miscellaneous Income	3,448	3,539
	<u>3,448</u>	<u>3,539</u>
b) <u>Expenses</u>		
Administration	454,088	437,983
Audit Fees	7,634	11,787
Depreciation	18,933	21,271
Directors remuneration	40,800	34,200
Provider professional development	30,140	30,214
Te Whatu Ora Contract & PHO staff salaries	1,915,162	1,652,999
Rent & Rates	137,232	136,397
Total Administrative Costs	<u>2,603,989</u>	<u>2,324,851</u>

5. Interest received

	<u>2024</u>	<u>2023</u>
	\$	\$
Interest income on Bank Deposits	95,870	42,417
Total Interest Income	<u>95,870</u>	<u>42,417</u>
Net interest income recognised in profit or loss	<u>95,870</u>	<u>42,417</u>

6. Property, Plant & Equipment

Name	Cost	Current Depreciation Charge	Accumulated Depreciation	Carrying Value
	\$	\$	\$	\$
<u>2024</u>				
Motor Vehicles	51,794	630	50,323	1,471
Office Furniture	29,366	1,526	24,874	4,492
Computer Equipment	175,795	16,329	152,248	23,547
Leasehold improvements	11,134	448	5,987	5,147
	<u>268,089</u>	<u>18,933</u>	<u>233,432</u>	<u>34,657</u>
<u>2023</u>				
Motor Vehicles	51,794	901	49,693	2,101
Office Furniture	27,974	1,019	23,348	4,626
Computer Equipment	164,331	18,864	135,919	28,412
Leasehold improvements	11,134	487	5,539	5,595
	<u>255,233</u>	<u>21,271</u>	<u>214,499</u>	<u>40,734</u>

7. Cash and Cash Equivalents

	<u>2024</u>	<u>2023</u>
Bank Balances	886,740	821,673
Petty Cash	1,500	1,500
Term Deposits	1,294,894	942,052
Visa card	(2,705)	(2,410)
	<u>2,180,429</u>	<u>1,762,815</u>

8. Accounts Payable and Accruals

Trade Payables	403,174	311,949
Accrued audit fees	12,168	11,124
Employee Entitlements	196,481	174,880
Goods and Services Tax	59,937	20,924
Pre-call & Recall Fund	100,741	-
CPCT Fund	134,617	-
	<u>907,118</u>	<u>618,877</u>



Auckland PHO Limited

Notes to the Financial Statements For the Year Ended 30 June 2024

9 Trade & Other Receivables

	<u>2024</u>	<u>2023</u>
	\$	\$
Trade Debtors	787,260	427,067
Deposits paid	23,466	23,466
Prepayments	19,254	14,656
Interest Accrued	16,373	6,057
	846,353	471,246

10 Commitments for Expenditure

Commitments under non cancellable operating leases:		
Current		137,232
Term	Lease ends 31 August 2026	160,104
		297,336
		160,104

Capital commitments

There is no committed capital expenditure at reporting date (2023: \$Nil).

11 Contingent Liabilities

There are no known contingencies at reporting date. (2023: \$Nil).

12 Related Party Transactions

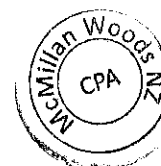
- a) Auckland PHO Limited and board members, Dr Andy Watt from Dominion Medical Centre and Dr Elizabeth McLeay from Avondale Health Centre are considered to be related parties. Their owner operated medical centres are paid fees and all transactions are entered into on an arms length basis.
- b) Auckland PHO Limited and Board members, Dr Lisa Eskildsen from Avondale health Centre and Judy Davis from Waiheke Medical Centre are considered to be related parties. They are all employees of medical practices that are members of the PHO. All transactions are entered into on an arms length basis.
- c) Some directors are also shareholders of the company.

The following transactions were carried out with related parties:

d) Purchases of goods and services		
Dominion Medical Centre	1,983,457	1,889,873
Avondale Health Centre	1,345,981	1,198,519
Waiheke Medical Centre	1,101,144	934,737
	4,430,582	4,023,129
e) Payables to related parties		
Dominion Medical Centre	2,312	10,813
Avondale Health Centre	4,765	9,497
Waiheke Medical Centre	10,572	16,332
	17,649	36,642
f) Directors' Remuneration		
Total Directors' fees paid during the year	40,800	34,200
	\$ 40,800	\$ 34,200

13 Events after the reporting period

There are no events subsequent to balance date that require disclosure.





INDEPENDENT AUDITOR'S REPORT

TO THE SHAREHOLDER OF AUCKLAND PHO LIMITED

Opinion

We have audited the financial report of Auckland PHO Limited on page 1 and pages 3 to 18, which comprise the entity information, the statement of service performance, statement of financial position as at 30 June 2024, and the statement of comprehensive revenue and expenses, statement of changes in equity and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion:

- a) the reported outcomes and outputs, and quantification of the outputs to the extent practicable, in the statement of service performance are suitable;
- b) the performance report on page 1 and pages 3 to 18 presents fairly, in all material respects:

- the entity information for the year ended 30 June 2024,
- the service performance for the year then ended; and
- the financial position of Auckland PHO Limited as at 30 June 2024, and its financial performance, and cash flows for the year then ended in accordance with Public Benefit Entity Standards Reduced Disclosure Regime issued by the New Zealand Accounting Standards Board.

Basis for Opinion

We conducted our audit of the statement of comprehensive revenue and expenses, statement of financial position, statement of cash flows, statement of accounting policies and notes to the financial statements in accordance with International Standards on Auditing (New Zealand) (ISAs (NZ)), and the audit of the entity information and statement of service performance in accordance with New Zealand Auditing Standard (NZ AS1) 'The Audit of Service Performance Information (NZ)'. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Performance Report section of our report. We are independent of Auckland PHO Limited in accordance with Professional and Ethical Standard 1 'International Code of Ethics for Assurance Practitioners (including International Independence Standards) (New Zealand) issued by the New Zealand Auditing and Assurance Standards Board, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Other than in our capacity as auditor we have no relationship with, or interests in, Auckland PHO Limited.

Other Matter

The financial report of Auckland PHO Limited for the year ended 30 June 2023 were audited by another auditor who expressed an unmodified opinion on those reports on 29th November 2023.

Restriction on Responsibility

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

Director's Responsibility for the Financial Report

The directors are responsible on behalf of the entity for the preparation and fair presentation of the financial report in accordance with Tier 2 PBE, and for such internal control as the directors determine is necessary to enable the preparation of financial report that are free from material misstatement, whether due to fraud or error.

In preparing the financial report, the directors are responsible on behalf of the entity for assessing the entity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the entity or to cease operations, or have no realistic alternative but to do so.

Auditor's Responsibilities for the Audit of the Financial Report

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

A further description of the auditor's responsibilities for the audit of the financial report is located at the XRB's website at:

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

This description forms part of our independent auditor's report.

The engagement partner on the audit resulting in this independent auditor's report is Yee Ken Chong.



McMillan Woods NZ

Auckland

7th November 2024


include

improve

innovate

imagine



 (09) 379 4022

 Level 4, 210 Khyber Pass Road, Grafton 1023

 www.aucklandpho.co.nz