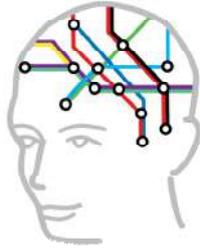
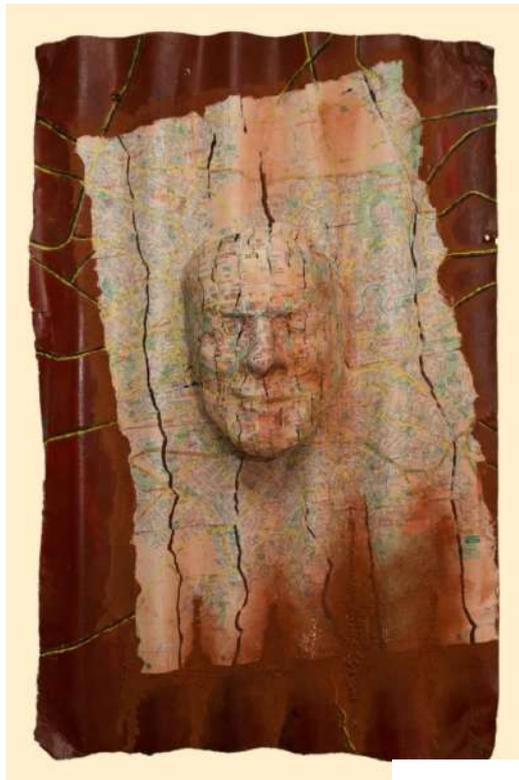

MHAPS
Mental Health
Advocacy and Peer Support
Together on the road to wellbeing



Annual Report | 2015-2016



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Message from the MHAPS' Chairperson

Hello and welcome to the 5th Annual Report of Mental Health Advocacy and Peer Support (MHAPS).

We have had a really interesting and productive year. However, one very sad event was the sudden passing of our kaumatua, Rev. George Ehau, who had been such an important part of MHAPS' evolution over the past 5 years.

At the last AGM, we regrettably farewelled Vanessa and Suzy and thanked them for their valuable contribution to the development and governance of the organisation. We then welcomed Michael and Vaea, who bring wonderful energy and experience to the Board.

More recently we had to say goodbye to Fiona, a long standing Board member, but happily because she left to head up the role of managing peer services here at MHAPS.

Kirsty and Sal have also joined the Board during the year, and bring their expertise and experience to us, and we were delighted that Don joined us again after his overseas adventures during the year.

We have achieved some notable successes this year, not least of which was relocating the former Latnam House drop in peer-support service to our office premises. This service, which has been running for 20 years, had been running at a considerable financial loss to the overall organisation so after a thorough investigation of our financial outgoings and income, we relocated it to our head office. The interior space is smaller than before but overall feedback from our clients has been good.

The peer support work for young people funded by the ANZ Foundation, Todd Foundation and the CDHB work is going really well and we thank these funders for their support.

There are however increasing and worrying numbers of people needing our other peer support services and we are really struggling to meet everyone's needs at the moment. This is something that will be high on the list of our priorities over the next few months.

We continue to work collaboratively with our partner service providers to meet need across the sector. An example of this is the development of plans for a peer run crisis support service with Awareness, Purapura Whetu Trust and Stepping Stone Trust.

Outside our geographical area but within the parameters of peer support we are working alongside ADG101 in Timaru in sharing our management and governance experience to help in their development.

We have an amazing organisation, doing fantastic work, and our staff team headed by Sue are consistently wonderful, so thanks to them for everything they do to ensure we deliver a quality service.

Andrew Cook On behalf of the MHAPS Trust Board

Why does MHAPS exist?

All of us who work at MHAPS, together with over half our Board of Trustees, have had lived experience of mental illness and/or substance addiction together with the distress which comes with this. More importantly we have found ways to live a meaningful and positive life, with or without our symptoms, and we use this experience, together with ongoing training and information gathering, to the benefit of others who are still at the beginning of their Journey.

This journey can often seem a hopeless and lonely struggle, where direction is absent and steps offered by other feel too huge. By having someone walking alongside during this journey who can identify with the challenges and provide encouragement in a safe way, a person can make real progress towards the life of their choosing. This is the purpose of MHAPS' existence. As expressed in our vision statement, "Together on the road to wellbeing".

How do we achieve this?

Finding help for mental illness and/or addiction recovery can feel an enormous hurdle. The energy it takes, the perceived stigma of the experience and the fear of dashed expectation can mean that a person delays first contact for weeks and sometimes months. But at some point, the day arrives, courage is found and contact is made with MHAPs either by phone, email or in person.

The genuine welcome, provided by our "First Step" process, discussion of clear options and ongoing support offered by our 29 staff provides a positive start for the recovery journey for the person, who may use one or more of MHAPS many services for as long as they choose.

Our services are underpinned by the principles of empowerment, hope, respect, honesty, transparency, accountability, personal responsibility and best practice. Over the 5 years of our existence, MHAPS has combined the strengths and experience of its founding bodies – Anxiety Support Canterbury, Bipolar Support Canterbury and Psychiatric Consumers Trust – to provide a multi-access, step by step mosaic of resources to assist anyone towards wellbeing. Over the past year, we have achieved this in the following ways:

Peer Support

Our staff work from a model of peer support called Intentional Peer Support (IPS) which offers a different way from other roles in mental health and addictions

Through the development of a peer relationship, both peers learn about each other and themselves, they explore their mutual world views to find out "*What happened to each of us to bring us here?*". There is a focus on the relationship founded on hope and shared experience. It is a place where, instead of the "helper" managing risk and taking responsibility, both parties negotiate power, conflict and safety. IPS can produce creative outcomes and possibilities through shared responsibility

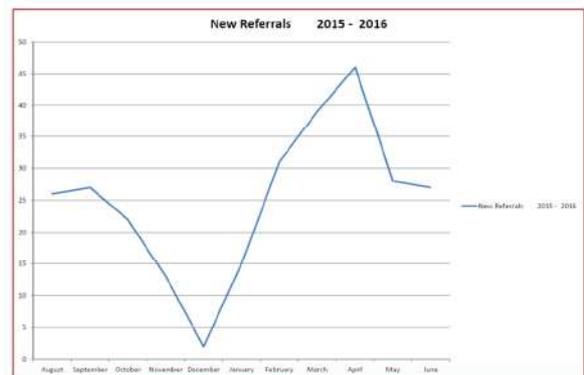
During this year, our team of seven mental health peer support workers and two addiction peer support workers/advocates worked with 462 people directly whose lives had been impacted by mental illness, mental distress and/or substance addiction. They were led by Vito Nonumalo who

Together on the road to wellbeing

introduced the concept of Te Whare Tapa Wha (TWTW) into the team's mahi. The input of such a talented team of staff has seen MHAPS support a good many people, many of whom have been able to move on from the service successfully some into paid work and others into a course of study. A frequent comment we hear in regard to the peer support experience is reflected in this service evaluation. *"Providing a service where staff have experienced mental health issues themselves is very valuable in helping clients who use the service of MHAPS. The understanding and empathy imparted provides a "bridge" for the client to cross on the journey of recovery."*

Thanks to funding from the ANZ Staff Foundation, the Ministry of Youth Affairs and from the Todd Foundation, we were able to start the year with a pilot youth peer support project to work individually alongside 13 young people from mid teens to mid-twenties. Two of our peer support workers were young people who had previously worked at Latnam House and our third staff member began as a volunteer from the Eating Disorders Service. In June this year, we received a year's contract from the Canterbury District Health Board as part of the Government's Earthquake Recovery package for youth peer support. Future work will cover social media development and an anxiety management group.

Numbers of participants in our support groups reduced slightly with the winding up of the Social Anxiety Support Group. However, this has now reformed as the Anxiety Recovery Support Group facilitated by Hannah and Debbie, and is attracting significant interest and support from people with anxiety who are unable to access daytime support. The Depression and Bipolar Recovery Support groups also revised the way they work, in order to be available to as many people as possible. Support recovery groups require a commitment from participants for ongoing attendance and where this does not eventuate (excepting illness or personal circumstances), the space in the group can be taken up by another person on the wait list.



In terms of wait listing for the Peer Support Service in particular, this had to be suspended in May this year due to the enormous number of new referrals experienced during the autumn (as evidenced by the chart). It was a decision not taken lightly, but crucial to reduce work load on staff. Information on alternative peer support services in Canterbury, together with other MHAPS services, were provided to enquirers and the team worked through the numbers waiting for peer support. Since Vito left MHAPS to work for Emerge Aotearoa in June, we have been fortunate to welcome Fiona Clapham Howard who has very ably stepped into the team manager's shoes.

Consumer and Advocacy Services

It is pleasing to report that the stability of the advocacy team has meant that we are working in very complex situations and getting very positive feedback all over Canterbury for the valuable work we do. In the last year we have worked with 441 people through face to face contact, over the phone, text and email. Beth Nobes, Service Delivery Manager, reports that "while some accommodation challenges have eased, in that there are shorter waiting lists and rents are coming

Together on the road to wellbeing

down, the pressure of high rents on family budget is very evident. Work & Income requirements for budget advisor reports and to register on the internet access system have greatly stressed our clients. Child Youth & Family case conferences and mental health supports remain troubled areas. Our clients are feeling the tension around changes in CYFS, and the CDHB Crisis Resolution service is greatly oversubscribed. In addition many people face multiple crises with continuing earthquake-related anxiety compounding deteriorating mental health, relationships and employment. The loss of Te Awa O Te Ora last year has meant an increase in some of our work with Maori but also a worrying loss of a regular referrer so how will that community know they could be getting support?

Addictions Advocacy also maintained their excellent reputation in the sector. There is a significant reduction in work with people on the methadone programme now that the new Canterbury Opioid Recovery Service (CORS) has been running this year. MHAPS continues to provide active involvement in the Friday Group alongside Odyssey House, City Mission and Mind & Body where people seeking addiction recovery can plan for a safe weekend. The advocacy work load has shifted toward Corrections and Courts. The advocates support many people at Probation meetings and following discharge from prison. There has also been an increase in work from Family Court following the recent changes. A parent may not need a lawyer anymore but they greatly benefit from a support person who can guide them through what will happen and what will be expected of them in such a formal setting.

Our community continues to be challenged by Work and Income's reduction of the acceptance of GPs' recommendations for benefit assistance. In addition, their continued pressure to force all beneficiaries to communicate with caseworkers through the computer has added much advocacy work. A number of our clients lack computer skills, a computer or even a smart phone. Taking also into consideration the difficulties that some people experience with basic literacy, our advocates have to attend many extra meetings with the clients to ensure their rights to be helped are given in a respectful way.

We continually hear from our clients that we are the only ones who listen and who get what it is really like to be continually fighting systems when overwhelmed by challenges and mental distress.

One inspiring story involves an advocate whose client had a great challenge with a family court situation. Their partner frequently cited mental health issues as a reason to deny custody or even access to the children. Through consistent support and regular debriefs the advocate ensured the client was not so frustrated that they lost self-control. The client was eventually able to arrange weekend visitation and is on a plan for partial custody. This success then positively impacts mental health.

I feel the service I received was far over and above my expectations and my overall quality of life has improved. I am grateful to you all and frequently recommend your services. Keep up the awesome work you do!

Quiet Minds Radio Show

Quiet Minds has had a very good year. The small but committed team of Debbie and Brett, ably headed by Beth, CAS Team manager, have produced another year of excellent weekly interviews



for Quiet Minds on Plains FM. As well as interviews with service providers and consumers, there have been recurring music shows, and a new feature is Books with Jenny. This enables the MHAPS librarian to share what she has learned by reading her way through our library. A theme this year has been Mental Health and the Family. One of our interviewees has become a father this year and a few shows have explored the effects of pregnancy and a new baby on both the mother and the father's mental health. With other topics ranging from body image and mental health to the personal experience of anxiety, this weekly half hour show has an increasing listenership, with over 2,000 podcasts being downloaded at the end of June this year, the most of any Plains shows. This vibrant Canterbury resource owes its success to the energy and commitment of enthusiastic people who volunteer their time and skills in making these weekly informative shows.

Other volunteers would be welcomed on to this team and offered support and training to extend their skills and experience.

Awareness Consumer Network

Awareness Consumer Network on Mental Health has enjoyed another busy and productive year. Membership increased to 159 people by the end of the year and between 8 and 20 people attended the monthly members meetings.

Three major pieces of work were undertaken during the year.

The child custody research project is a collaborative research project between Awareness members, researchers and other professionals which looks at the question "how are decisions made around child custody and family reunification where a parent has a mental illness or addiction issue?" This project comprises interviews with key, managerial level staff in the care and protection, mental health and legal fields together with focus groups and meetings with parents held throughout the year. A sub-group of the project also met at regular "Journal Club" gatherings to help with the literature review aspect of the project. The Schizophrenia Research Group, who have funded this phase of the project, have invited a presentation at their conference at the end of November. Two group members presented the findings so far at the annual Service User Academia Symposium in Wellington.

Our regular **Mad Poets Society Open Mic Night poetry events** continued past their finite funding from the Think Differently fund thanks to crowd funding and a grant from the Creative Communities Fund of the Christchurch City Council. This was helped by a free venue being provided by Beat Street Café in Barbadoes St. Awareness also continued to run writers workshops

facilitated by Joanna Preston and by Annie Southern, which included writing mindful poems and on editing and re-drafting. An anthology of poems created through the Mad Poets writing workshops was produced during the year and is still available to purchase.

A Peer Crisis Care Service, a new project for Awareness, got off the ground earlier this year. Following a presentation by two Awareness members at the February meeting on the development of “crisis cafes” overseas, a group of Awareness members, MHAPS staff, and representation from Purapura Whetu Trust and Stepping Stone Trust met over the year to develop a concept plan to be presented to the Canterbury District Health Board in October.

Quarterly Forums were well attended this year with 75 people attending the March event on Work and Income which covered entitlements and how to access these, advocacy support for people struggling with the benefit system, and the new MyMSD website which allows people to complete much of the reporting and updating required by WINZ online in their own time. The attendance at this forum, which included mostly people who haven’t been involved in Awareness previously, stressed the need for good information about Work and Income’s systems, and that many people are struggling with this currently. Other forum topics included Technology, Mental Health and Addictions Recovery, Choices – Topping up your Toolkit, and the Mental Health Act.

Awareness members also attended the sector consultation meeting around the Commissioning Framework and made a written submission to the document.

Membership is open to anyone who has used or is using mental health and/or addiction services and who would like to contribute to ideas for improving systems in the sector.

RecoveryWorks

RecoveryWorks, the unique peer- led change management process for people with anxiety, continues to assist most participants to make significant and meaningful changes to their lives.

We have come to appreciate how much RecoveryWorks is most suitable for people whose anxiety is moderate to high rather than those with mild to moderate, the positioning the programme started from over 5 years ago. People with high anxiety have a compelling need to change and providing they have the motivation, commitment and capacity to do the programme, the results are usually amongst the most spectacular.

During the 12 months covered by this report, programmes 22 to 25 were completed through to their fourth and final coaching sessions and programme 26 completed its workshops and first two coaching sessions, which is the core of the programme. This report is however for the four completed programmes only.

Participation (*figures in brackets show the levels of activity that occurred in the 2014 -15 year*)

- 41 people started the programmes (41)¹

¹ People who begin the programme but who do not complete at least 85% of the workshop series and the two initial coaching sessions do not get counted into the statistics as there are no subsequent or useful measures of their progress on the programme.

- 35 completing the workshops series and at least the first two coaching sessions (33)
- 26 completed the entire programme through to the fourth and final coaching (27).

An 18% fall off in participation between the workshops end and the fourth and final coaching session is explained by people coming off the programme and in various ways getting on with their lives. This has recently led us to offer the final two coaching sessions as optional.

Wellbeing, Anxiety and Key Question

Data is taken from responses to the ongoing Wellbeing questionnaires at the beginning and end of each programme.

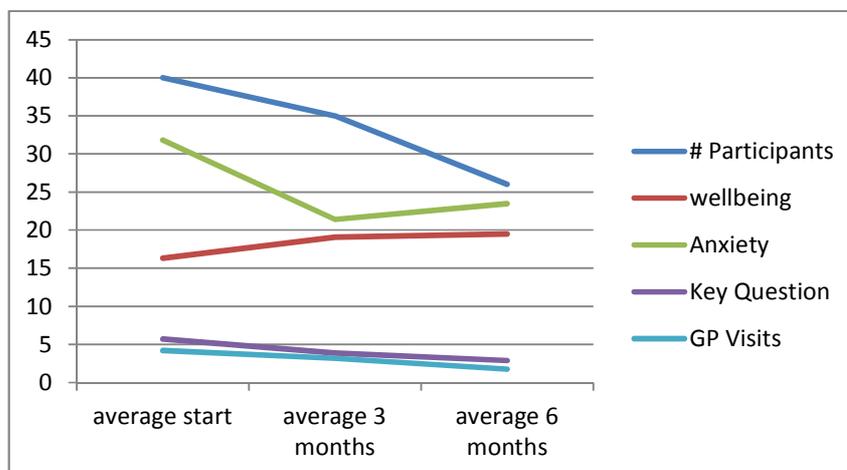
At conclusion of the workshops element of the programme average wellbeing was up by 17% (25%). By the fourth and final coaching sessions at the conclusion of these programmes the average improvement had increased slightly to 20% (23%). A 20% or greater lift in a person's reported feelings of wellbeing represents a considerable lightening of the burden they feel from anxiety related impacts such as low self-esteem, lack of confidence, ability to participate and feelings of isolation.

At conclusion of the workshops element of the programme - average levels of anxiety being experienced had dropped by 33% (21%). By the fourth and final coaching sessions at the conclusion of these programmes the average improvement had regressed to 26% (17%).

Responding to the key question: - *'I feel tense and anxious inside'*, immediately post-workshop series the average drop in anxiety was 32% (26%). By the fourth and final coaching sessions at the conclusion of these programmes average anxiety had fallen further to register a 49% (21%) average drop.

Doctor's Visits

Immediately post-workshops the average number of GP visits had dropped by 25% (26%). By the fourth and final coaching sessions at the conclusion of these programmes the average number of visits had dropped still further to register 59% (56%) fewer than at the programme's beginning. The significant fall off in GP visits suggests that the majority of people have become better at self-managing their anxiety.



[RecoveryWork Reports\Programme Statistics\RW Activity and Outcomes July 2015 -June 2016.xlsx](#)

Together on the road to wellbeing

Comparisons between this year and the previous year

What has characterised these 12 months and that distinguishes it from the previous period is: -

- People on average had *significantly higher* levels of anxiety and slightly higher levels of wellbeing when coming onto the programme. Partly this is a natural change in the client cohort but it is also about our conscious intention to position the programme towards people with higher levels of anxiety. What goes along with this higher anxiety is a greater component of low mood or depression, which may or may not have shifted by a programme's end.
- **WorksforMe** was a unique programme in the RecoveryWorks story and significant elements of it were different to a standard programme.
- The establishment of a workshop based revision programme.
- The last two programmes in this period were the first two undertaken by Hannah as our new Facilitator.

WorksforMe

This programme was developed out of a need to reconfigure our 2015 RecoveryWorks schedule of programmes to enable the then Facilitator to take extended leave. We decided to deal with this creatively and developed a programme that was dedicated to people with anxiety and for whom that anxiety made both job search, and the realities of subsequent working life, very difficult to sustain.

The programme used standard RecoveryWorks workshop materials and delivery methodologies however there were significant differences in the overall programme framework. Whilst the standard health and wellbeing outcomes remained at the core objectives the nature of this unique programme enabled us to also develop specific job search and employment objectives. The duration of the workshops series was reduced from ten weeks to five, with the number of workshop each week being doubled to two.

Part of the agreement for people coming onto the programme was that they would engage with a supported employment service once the workshop portion of the programme had concluded. We chose Jobconnect as the default provider and developed a special workshop that they co-facilitated in order to introduce the concepts of supported employment. Most participants registered for the Jobconnect service, although one person remained with the service they were already using. Individual coaching sessions also provided opportunities for participants to work through anxiety and employment issues.

We also involved Work and Income's Regional Health Advisor and her Employment Advisor colleagues into the concept of this programme from the outset. They took a lively interest in it, referred clients to it and the department agreed that for the duration of the programme they would stand down Job Seeker clients from any expectations of job search activities.

WorksforMe was successful in meeting the standard RecoveryWorks objectives of improved health and wellbeing and lowered anxiety. It was variably successful with the enhanced employment related outcomes, at least in the short to medium term, with some people rapidly engaging with job search and securing employment and others not seeming to make much progress. To this day however we continue to hear from people off this programme who have recently secured employment.

Longitudinal Study

During this period we undertook our first ever longitudinal study with assistance from Monika Sargayoos, a post graduate student at the University of Canterbury. The outcomes of this were very favourable. However as the study was concerned only with the long-term impacts of the programme none of the programmes reported here fell within the terms of the study.

Conclusion

At the beginning of 2016, we began providing a revision workshop series at the conclusion of each 10 session course to assist with the consolidation of programme learning and experience. We have also offered places to participants from earlier programme and to date a number of people have taken this up.

We continue to explore ways of continuing to strengthen the effective transfer of learning from group settings out into the desired changes in the lives of individual participants. Principally this is through the revision group, revision materials and the coaching series. In this respect the client run recovery support group continues to have an important role.

We remain open to new ways in which the programme's core materials can be shaped to meet the needs of specific cohorts, for example youth.

We have recently begun work on a greater role for social media and online technologies to support and augment delivery of the programme content, including how and when revision material is made available to people. Michael Moody has begun doing this under direction from Hannah.

In last year's report we signalled that we would like to bring more structure to how we identify the range of issues that impact on a person's anxiety and their sense of wellbeing. Hannah has recently begun to formalise this by charting the individual issues that each programme participant identifies as being significant. This produces both a series of individual profiles as well as a collective profile based on all participants on each programme. This information informs both the coaching process and the identification of other services or organisations that can help with those issues that are most pressing.

The Learning Exchange

Participation in our various courses and classes was variable throughout the year. However, it was a great benefit to be able to offer these when the Peer Support service waitlist was suspended. 116 people attended the evening breathing and relaxation and mindfulness courses and daytime workshops for wellbeing, tutored to a very high standard by Rosemary Mannering, Kathy Hughes, Fiona Young, Rosemary Guy and Ngaire Ginders. The Mood Swingers has provided a melodious

backdrop to Thursday mornings, led by Rachel Bayliiss, and the WRAP courses have assisted 18 people to plan their wellbeing and maintenance of recovery. Monthly Themes evenings have gone from strength to strength, with 15 to 28 people attending talks ranging from Stress and Trauma to Panic Attacks. We thank clinicians from the Anxiety Disorders Service and other speakers for their input and support of these information exchange sessions.

Also part of the Learning Exchange, the quarterly newsletters have been very well received by the 500 plus subscribers, some of whom report that this is the best newsletter of this kind which they receive. Our website has also had an update and this new look has also been praised by users.

MHAPS Library

We have been fortunate enough to have the services of Jenny as our volunteer librarian this year who has covered and catalogued many of our 600 book and DVD resources. Library lending is increasing with over 150 library users over the past year including family members and support staff from other organisations.

After the tragic death of one of our clients, we were very grateful to his family for donations from his funeral which enabled us to purchase 5 books for the MHAPS library on coping with grief with suitable inscriptions for his remembrance.

Latnam 826 Drop-In Centre

The past 12 months has been challenging for Latnam staff and members since its location change. It became apparent last year that maintaining the rent and overheads for two buildings was threatening the financial sustainability of the organisation. After consultation with the staff and members, it was decided to relocate the service into the group space at 826 Colombo Street and to reduce days and staff numbers. This latter decision was made with regret as the Latnam staff were a strong whanau but as many of the staff as possible were redeployed, and since January 2016, Latnam has continued to support its 168 active members from Friday to Sunday at 826 and on a Monday from Mabel Howard Lounge in Wainoni .

Latnam now has 208 active members who enjoy the relaxed camaraderie and staff support at the Centre. Pool continues to be a main attraction, but conversations over a hot drink, board games and watching DVDs are available to help reduce the isolation which many of our tangata whai ora experience. The success of this centre owes much to the whakawhanaunatanga (family centeredness) nurtured by Wendy, Nigel and Ngaire where members feel cared about and included in the day to day activity of Latnam 826.



We thank our volunteers Barbara, Lindsay, Katrina, Grace, Raj and Polly, and students Tim and Anya for their time and work this past year.

What difference has MHAPS made to the lives of people in Canterbury?

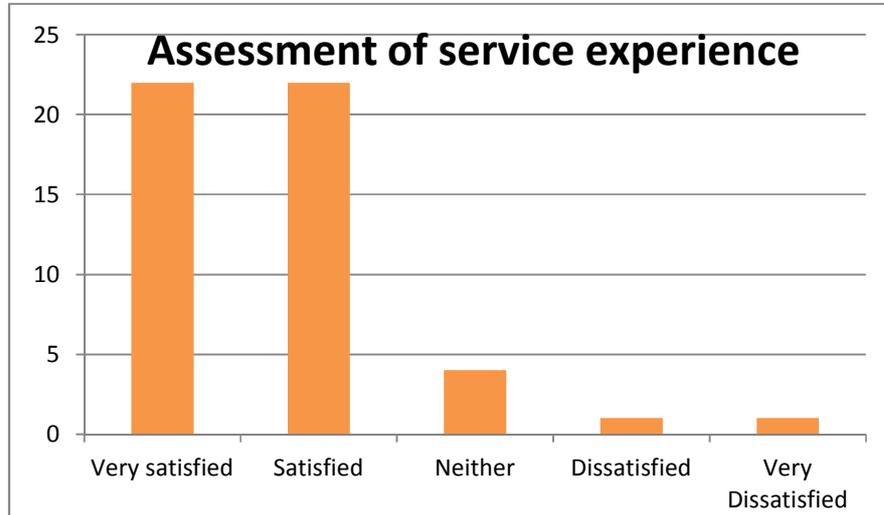
Our 2015/16 client survey was sent to 400 clients of whom 50 responded. Questions fell into two distinct assessments – one of the quality of MHAPS’ services and the other the benefits (if any)

The table below represents the responses regarding the quality of service received:

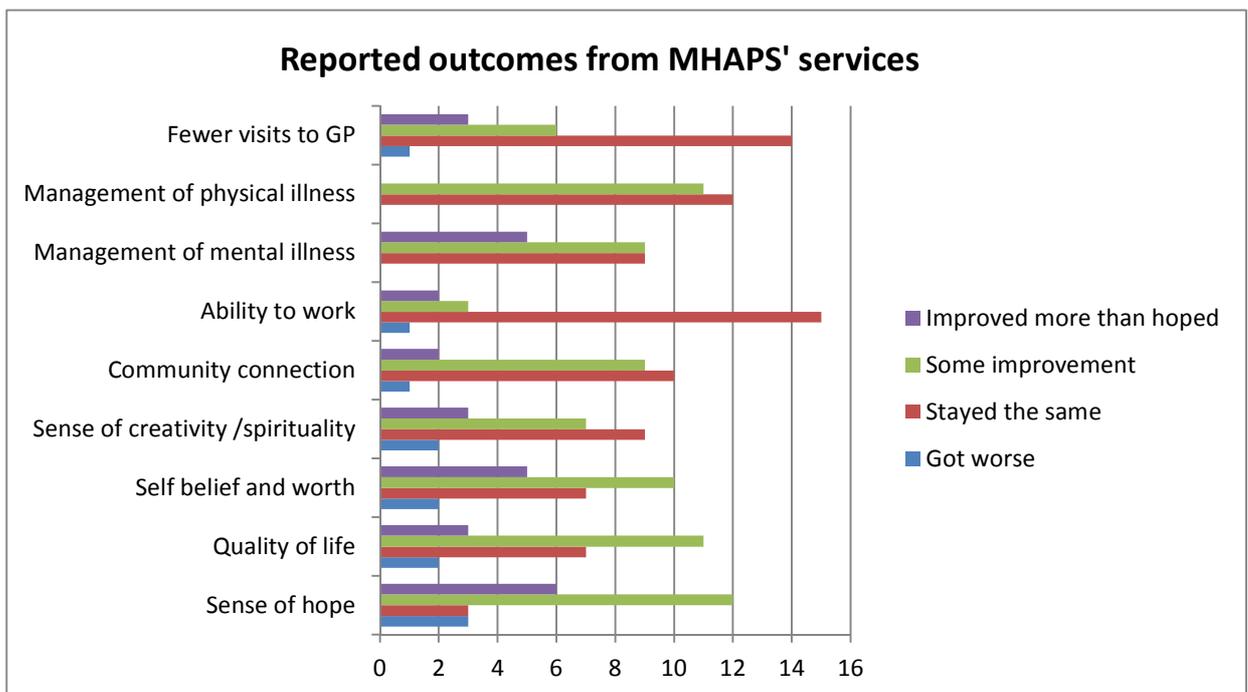
A regular comment from visitors to MHAPS is how comfortable and welcome people feel as soon as they walk in the door.

For many people, it takes a deal of courage and effort to make a first visit to our building, and we are committed to making this a positive experience both in terms of

environment and of an accepting and respectful attitude to everyone.



The table below indicates some of the ways that engaging with MHAPS’ services has added value to people’s lives. From these wellbeing parameters, it can be seen that a stronger feeling of empowerment and sense of hope are positive outcomes experienced by a significant number of MHAPS’ clients.



Some comments from the evaluation process:

Personally for myself being involved with MHAPS has made a real difference with my depression. It has been the best service i have had the pleasure of being able to get the much needed help i so desperately needed. Thank you

Thank God for MHAPS as the organisation and its lovely people have made a big difference to my life. There's nowhere else that provides services that cover all aspects of mental health. Thank-you to all involved!

I had Beth advocate for me at a psychiatry meeting and she also provided some peer support which has been extremely valuable. Thank you. I also feel like I've found my place at mad poets and I'm no longer alone.

Evening talks really helpful.

Fantastic service that has made a true difference in my life. I have only ever felt welcomed and there is no judgement. Thank you so much to any of the staff I've worked with for their help and assistance.



I think MHAPS is a very useful service to have. I've found connecting with MHAPS to be a great support and help for me. Especially the programs I've been able to attend-the WRAP course and Recovery Works. Also, the library has some great resources too!

The services I have experienced at Latnam have been friendly and useful because I find it difficult to relate to people out side of mental health.

I don't really have anything extra to add but I truly believe the above statement and am genuinely grateful to be given the option to be heard. Which is a theme of my experiences at MHAPS, people genuinely want to know what I think and feel which has been a huge contributing factor to my recovery. Thank you.

Resources and Financial Management

The relocation of our Latnam House programme and consequent savings in rental and other costs has seen a welcome turnaround in MHAPS financial position this year.

We continue to appreciate the financial support of the ANZ Staff Foundation, Canterbury District Health Board, CERT, Christchurch City Council, Christine Taylor Foundation, David Ellison Trust, Lion Foundation, Lotteries Grants Board, MSD, Pub Charity, the Southern Trust, the Rata Foundation and Todd Foundation. MHAPS has also been fortunate to receive regular donations from a number of individuals which we very much appreciate.

It is a sign of the times that the number of funding opportunities is shrinking whilst at the same time the number of worthy applications for financial help is increasing. MHAPS is aware of this dynamic, together with the changes in government requirements for self-reliance in the not-for-profit (NFP) sector. The next few years will see a sea change in the way that mid-size NFPs such as MHAPS fund and report on services.

Extracts from our audited financial report follow. Please contact us if you would like a full copy.

STATEMENT OF FINANCIAL PERFORMANCE as at 30 June 2016			
	Note*	2016	2015
		\$	\$
Revenue			
Donations, fundraising and other similar revenue	1	179,754	136,827
Revenue from providing goods and services	1	862,247	856,046
Interest		2,680	3,731
Other Revenue	1	4,617	5,250
Total Revenue		1,049,298	1,001,854
Expenses			
Expenses related to public fundraising	2	-	58
Volunteer and employee related costs	2	785,782	729,474
Costs related to providing goods or services	2	246,211	299,634
Grants and donations made		368	4
Other expenses	2	15,841	129
Total Expenses		1,048,202	1,029,299
Surplus/(Deficit) for the year		1,096	(27,445)

STATEMENT OF FINANCIAL POSITION for the year ended 30th June 2016

Assets		2016	2015
Current Assets			
Bank accounts and cash		95,925	100,288
Debtors and prepayments		92,838	88,187
Total Current Assets		188,763	188,475
Non-Current Assets			
Investments – cash at bank	3	50,000	73,087
Plant and equipment	4	66,633	68,235
Total Non-Current Assets		116,633	141,322
Total Assets		305,396	329,797
Liabilities			
Current Liabilities			
Creditors and accrued expenses	3	15,913	23,833
Employee costs payable	3	77,677	66,641
Unused donations and grants with conditions	3	42,878	71,491
Total Current Liabilities		136,468	161,965
Total Liabilities		136,468	161,965
Total Assets less Total Liabilities (Net Assets)		168,928	167,832
Accumulated Funds			
Accumulated surpluses or (deficits)	5	168,928	167,832
Total Accumulated Funds		168,928	167,832

NOTES ON STATEMENT OF FINANCIAL PERFORMANCE for year ended 30th June 2016**NOTE 1: Analysis of Revenue**

	2016	2015
	\$	\$
Fundraising Revenue		
Fundraising	61	58
Donations and Similar Revenue		
Donations	9,447	3075
Bequests	6,366	-
Grants Received		
ANZ Staff Foundation	5,000	-
Casino Charitable Trust	3,000	-
Christine Taylor Foundation	3,000	3,000
Christchurch City Council	2,300	4,640
Christchurch Earthquake Recovery Trust	13,970	-
Community Organisations Grant Scheme	-	3,978
David Ellison Charitable Trust	7,500	-
Lion Foundation	10,000	10,000
Mainland Foundation	-	5,800
Ministry of Social Development	5,520	27,750
NZ Lotteries Grant Board	15,000	15,000
Pub Charity	9,977	14,761
Rata Foundation	-	35,000
Riccarton Rotary Club	-	1,000
The Southern Trust	10,000	-
Todd Foundation	50,000	-
Unused Grants and Donations (net)	28,613	12,765
Total	179,693	136,769
Revenue from Providing Goods and Services		
Canterbury District Health Board	855,973	844,800
Meeting Room Hire	1,716	5,633
Workshop/Course Income	4,218	4,337
Other Income	340	1,276
Total	862,247	856,046
Other Revenue		
Wages Subsidies	4,617	-
Contribution to merger costs	-	5,250
Total	4,617	5,250

<i>NOTE 2: Analysis of Expenses</i>	2016	2015
	\$	\$
Expenses related to public fundraising	-	58
Volunteer and employee related costs		
Salaries and wages	740,914	686,577
KiwiSaver Contributions	20,839	17,818
ACC Levies	2,397	1,208
Training and Supervision	20,032	23,440
Volunteer Expenses	1,600	431
Total	785,782	729,474
Costs related to providing goods or services		
Direct costs relating to service delivery		
Awareness	8,560	8,240
Catering/Meeting expenses	2,107	2,164
Membership and subscriptions	1,185	1,298
Office supplies	8,219	13,821
Outreach	4,328	9,713
Printing, stationery and postage	6,862	7,206
Quiet Minds	1,449	1,653
Sundry	1,979	986
Travel	9,745	7,849
Workshop expenses	16,788	16,792
Total	61,222	69,722
Direct costs relating to service delivery		
Administration and overhead expenses		
Audit and accounting fees	3,945	4,452
Cleaning	3,965	4,776
Computer expenses	4,155	9,434
Depreciation	10,668	15,737
Electricity	10,954	12,180
Insurance	2,198	12,792
Rent	131,782	152,794
Repairs and maintenance	2,230	1,318
Sundry	2,452	4,036
Telecommunications	12,640	12,393
Total	184,989	229,912
Total	246,211	299,634
Other expenses		
Loss on sale or disposal of fixed assets	1,049	129
Latnam moving costs	14,792	-
Total	15,841	129

Looking Forward

Having now achieved a fully streamlined and vibrant set of services, MHAPS is now well positioned to provide high level peer support and advocacy services to complement clinical and residential services supporting Cantabrians towards mental health recovery and sustained wellbeing.

Finance: Significant expenditure savings have been made this year with the reduction in rental and other overhead expenses. With other prudent measures, MHAPS has started building up our reserves again during the coming year to enhance our sustainability.

Programmes: Following wide consultation and input from young adults and services working with young people, MHAPS is excited about the new programmes underway for young people 16ish – 24ish both to assist in the transitioning into adulthood and in developing management skills for anxiety and depression.

The wider climate of change in the mental health and addictions sector: Senior leaders of Canterbury mental health and addiction NGOs, including MHAPS, meet regularly to keep abreast of and contribute to regional and national developments in provider requirements and government policy. Locally, the increasing demand on Canterbury's mental health sector is necessitating new thinking on how we care for people in their crisis and complex needs. Working with other NGOs, MHAPS and Awareness are spearheading a new form of peer run crisis care service which we hope will take shape sometime next year.

Conclusion

To sum up the 2015-2016 year, it has been one of challenge, change and consolidation resulting in great improvements in service delivery and staff structure.

Sincere thanks go to all staff whose honesty, wisdom and compassion touch the lives of everyone who approaches MHAPS. They embody MHAPS principles of hope, transparency, respect, self responsibility and empowerment, and they are the heart and soul of this organization.

Similarly, MHAPS is very fortunate to have the highest calibre of Trustees all of whom give their time, knowledge and advice on a regular basis to the interests of MHAPS.

And finally, no organization can exist without income and all of us at MHAPS thank particularly our individual donors, grant funding bodies and the Canterbury District Health Board* for the ongoing financial support which enables us to provide these valued and vital services.

Sue Ricketts

General Manager

* See page 15 for details

This Valuable Work Needs Your Help

Any contribution big or small helps us to meet the needs of the people of Canterbury who experience mental illness, mental distress and/or substance addictions. To ensure that our assistance is timely and accessible, we offer a self referral system and make no charge for services.

With your help we can do so much more and make even more of a positive difference in people's lives.

A receipt will be sent for all donations over \$5 which are eligible for a tax rebate.

Name:

Address:or

Email address:

Donation Information

I/We'd like to donate \$ to MHAPS to be paid Now Monthly Quarterly
 Yearly

I/We plan to make this contribution in the form of:

Cash

Cheque (payable to MHAPS,
 Postal address; P.O. Box 33332, Christchurch 8244))

Direct credit
 (Bank account: MHAPS 03-1592-0112552-00)

Credit card (through Give a Little)
<https://givealittle.co.nz/org/mhaps>

Bequest in my will (please contact Sue at generalmanager@mhaps.org.nz)

I/We would like an acknowledgement in the next annual report Yes No

"The support I have received is priceless!! Professional, caring, respectful, but perhaps most of all the sincerity and understanding has lifted me and helped me to push on in a really trying situation and time in my life"

Our sincere appreciation for your consideration.