



Champions Trophy Case Competition

THE UNIVERSITY OF AUCKLAND BUSINESS SCHOOL CHAMPIONS TROPHY CASE COMPETITION 2009

ST JOHN NEW ZEALAND

30 January 2009



From: Jaimes Wood¹
Sent: Friday, 30 January 2008 8:52
To: Project Cactus Team
CC: Board of Directors
Subject: St John Strategic options presentation

Team,

St John is a charitable organisation supported by a hybrid workforce with paid staff and volunteers - approximately 80 per cent of St John's 9,500+ adult members are volunteers. It operates independently of Government and businesses. St John's mission is to prevent and relieve sickness and injury, and to act to enhance the health and well-being of people of all races and creeds anywhere in New Zealand. Everything St John does is motivated and shaped by the vision to enhance the well-being of New Zealanders.

St John delivers an extensive range of health-related services and products. The organisation is most well known for being the largest provider of ambulance services in New Zealand, serving more than 85 per cent of the population and more than 95 per cent of the country's geography. We recognise that as the population ages and pressure on the wider health sector continues to increase, our services will continue to grow in importance.

Volunteers have always been an important part of St John and always will be. It is fair to say that if all volunteers in New Zealand went on strike, the health system would be severely compromised. Many people say that volunteering in New Zealand is dead. We believe that St John is a vibrant, living testimony that this is not the case. However, we still need to address the on-going recruitment need of volunteers, in particular in the rural areas.

Some of my other concerns are:

- How can St John continue to serve New Zealanders in the face of the increasing demand of its services
- Developing a 'one team, one dream' approach between the national office, the regional offices and area committees
- Reliance on funding from the crown agencies

Please prepare a presentation to the management team of no more than ten minutes to talk about your analysis and strategic recommendations. Also, be prepared for a question and answer session. Information gathered by our research team is attached to this e-mail.

We look forward to seeing your team presentation which will enable St John to continue to foster and develop our hybrid workforce in the year ahead, as we move towards celebrating the 125th anniversary of St John in New Zealand in 2010.

Regards,
Jaimes Wood
Chief Executive, St John

¹ This cover letter is a work of fiction and is solely prepared for the purpose of CTCC 2009. It does not necessarily reflect the views of St John Management.



ST JOHN NEW ZEALAND - CORPORATE STRATEGY

30 January 2009





Time horizon

Aspirational

Long term

Next 10 Years

Enduring

Vision

Enhanced health and well-being for all New Zealanders.

Goals

Deliver effective emergency care, help and support.
Create a caring community culture.

Objectives

1. Raise awareness and community commitment to emergency care
2. Develop the provision of out-of-hospital emergency services to meet agreed standards
3. Advance training and knowledge in the prevention and relief of sickness and injury
4. Provide emergency care for New Zealanders at public events
5. Ensure appropriate people resource levels for ambulance and emergency care operations and services
6. Integrate emergency care and community care activities with the health sector through collaboration
7. Utilise the brand's core strengths to develop and grow activities that provide sustainable funding streams
8. Improve the public policy and funding framework for ambulance and emergency care
9. Promote leadership in emergency care
10. Ensure the integrity of the Chivalrous Order is protected and maintained

Our Core Values

Integrity
Teamwork
Professionalism
Empathy

Principles

Membership
Ambulance is cornerstone activity
Collective action
Clinical effectiveness
Community and commercial funding
Youth and community self-help
Cultural appropriateness
Anticipate and respond to change
Recognition and reward

Footnote:

The Grand Council, the governing body of the Order, has recently approved a suite of documents outlining the strategic intent of the Organisation internationally. These are not yet published in their final form. It is intended that this New Zealand Strategy support these international intentions. Where this is not appropriately captured, the next strategic review in 2007 will ensure full and appropriate links to the international Strategy.



St John's strategies are based on underlying principles that the Organisation sees as fundamental. These are a broad set of statements that will serve to guide and inform St John's activities in the next 10 years.

Membership: We are a member-based organisation that is strengthened by our people who come from different backgrounds and cultures. We will achieve mutual respect between volunteer and paid members and ensure that we focus on the needs of the communities we serve.

Ambulance is cornerstone activity: St John is committed to being the leading provider of ambulance services for New Zealand communities. Some communities are serviced by other providers (land and air), and we will work with those providers to the benefit of New Zealanders.

Collective action: We will work with Government, community groups, businesses, the health sector and New Zealanders to deliver ambulance and emergency care services to agreed standards.

Clinical capability: Emergency care initiatives will focus on identifying and implementing clinical interventions that are effective and make the best use of resources.

Community and commercial funding: In addition to Government funding, the delivery of ambulance and emergency care services will require a level of support and funding to enable the achievement of agreed delivery standards. St John accepts a responsibility to foster and generate community and commercial support for its activities, services and products.

Youth and community self-help: St John will improve outcomes for people by fostering youth development and encouraging community self-help through training, citizenship development and other initiatives.

Cultural appropriateness: St John values New Zealand as a multicultural nation and acknowledges our society is made up of many ethnic groups. St John acknowledges the special place of Maori and will recognise and respond to the differing needs of Maori, Pacific peoples and other ethnic groups.

Anticipate and respond to change: Ambulance and emergency care activities will anticipate and respond to changes in illness and accident patterns, population trends, and clinical treatments and interventions.

Recognition and reward: St John will ensure that its members have the opportunity to make a difference and that members are recognised and rewarded for their contribution.



The vision for St John is:

Enhanced health and well-being for all New Zealanders.

This vision is founded on the mission of St John. It is challenging and motivating, and describes a desirable outcome that will arise from the contribution and work of St John and its people.

As we work towards this vision we will achieve:

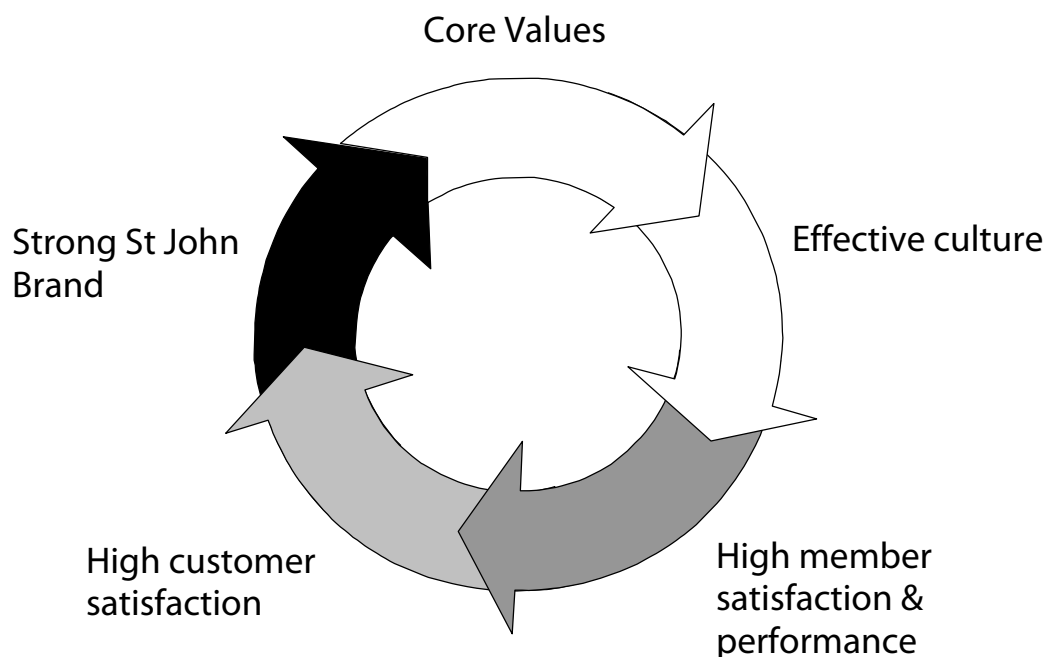
- Improved response to medical emergencies and accidents
- Fewer and appropriate patient transports as a proportion of population
- Better clinical outcomes for patients
- People trained and equipped to deliver CPR and first aid in all social, work and recreational environments
- The integration of first response services into the fabric of communities
- Increased community awareness of illness and injury prevention strategies
- The ease and comfort of the sick and the injured
- High levels of patient and customer satisfaction



Our Core Values

The vision, goals and objectives, that together comprise the strategy, will be achieved by an organisation whose culture will change and grow as we achieve greater unity. We will foster an achievement-focused St John culture, which is continually striving for improvement, is innovative, cooperative, and founded in care and respect of all members. A set of four core organisational values will support our targeted culture and guide the collective and individual attitudes and behaviour of St John members.

Core value	Definition
Integrity	Acting in a trustworthy and honest manner, always upholding ethical standards
Teamwork	Working together as one organisation to help each other and the community
Professionalism	Achieving outcomes and standards, and continuously developing
Empathy	Acting in a way that is sensitive to the needs of others, and is compassionate and kind





To achieve the vision of 'enhanced health and well-being for all New Zealanders' we need to:

- Deliver effective emergency care, help and support; and
- Create a caring community culture

Emergency care

Emergency care is the delivery of a rapid response to medical emergencies and accidents and includes a range of services founded on ambulance. The range of services is defined by the speed of response and the level of care required, and includes:

- Emergency ambulance services
- Non-emergency ambulance services, including patient transports
- First response services including community first responder, co-responder, PRIME, first aid and similar initiatives
- Contingent response services where members of the public are at risk of injury or in need of care, typically at public events

The delivery of effective emergency care, through the provision of appropriate rapid response services and access to treatment and advice, will enhance the health and well-being of New Zealanders.

A caring community culture

New Zealand communities can contribute to the achievement of positive outcomes for people in many ways. A caring community culture describes an environment where there is shared responsibility and widespread participation by the community in the delivery of care. A caring community culture describes participation in both the prevention and treatment of illness and injury.

We will engage with individuals and communities - who are appropriately trained, supported and coordinated by St John - to promote and deliver emergency care and community care services that will enhance the health and well-being of New Zealanders.



Organisation Structure

The Organisation is committed to unity, and the recognition that national interests have precedence as we work to achieve the vision, goals and objectives that we have set for ourselves. The current governance and management structure is illustrated below.

Chapter

Chapter is the governing body of St John in New Zealand and comprises senior members of the chivalrous Order of St John.

Chapter is chaired by the Governor-General, as Prior of the Order in New Zealand, or by the Chancellor.

Chapter is responsible for all of the work of St John but delegates authority to the Priory Trust Board to act as its executive board in carrying out most of that work.

Priory Trust Board

Chaired by the Chancellor, this Trust Board operates under a comprehensive suite of delegations from Chapter and oversees all of the activities of St John, including the activities of the five Regional Trust Boards.

Regional Trust Boards

Five Regional Trust Boards operating under a delegation from the Priory Trust Board are responsible for delivering the services and products, as developed and managed by the Functional Directors, in their geographic area of responsibility.

Chief Executive

The Chief Executive has overall responsibility to the Priory Trust Board for the operations of St John in New Zealand. St John's strategic and operating goals are achieved through a management structure reporting to the Chief Executive, including those responsible for managing and developing the services and products that are delivered by the five regions.

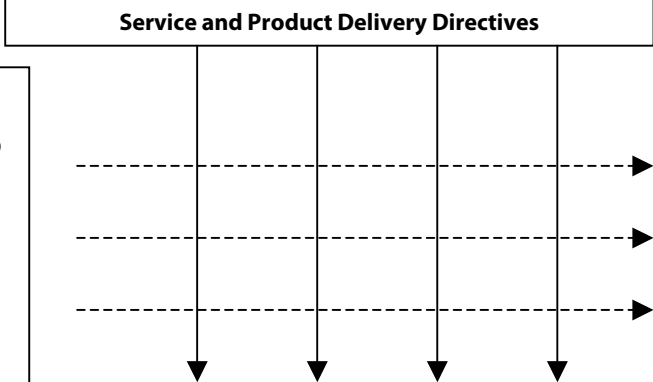
Functional Directors

Eleven functions manage all of the services and products that are delivered by St John throughout New Zealand. The Functional Directors provide the strategic, process and procedural guidance that drives service and product development.

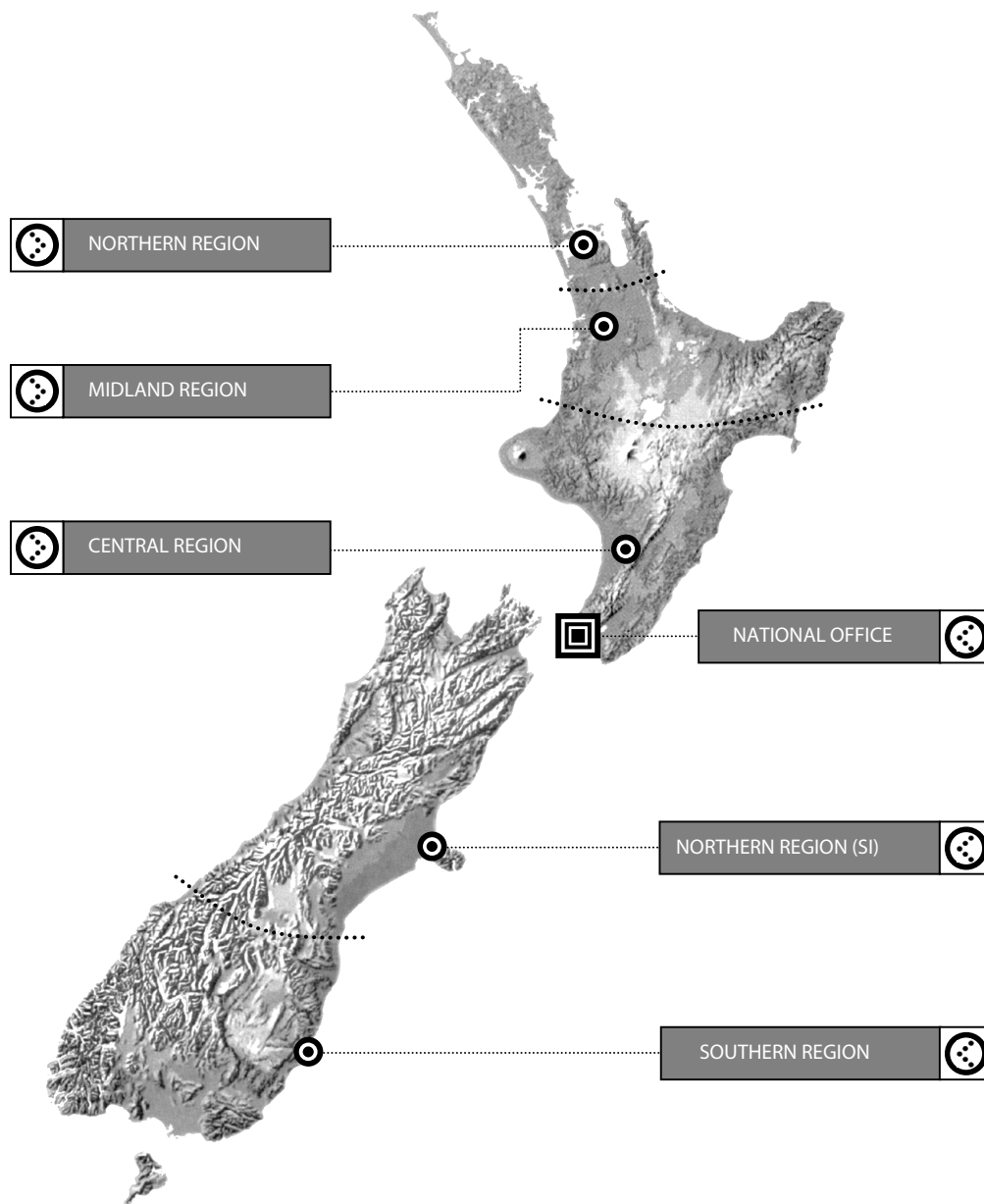
Regional Executive

Each Regional Trust Board employs a principal officer. The principal officers are responsible for the day-to-day running of St John service and product delivery activities within their region. Each Region utilises the resources of their regional management teams, staff and volunteers, together with Area Committees, which play a vital role in representing St John in their local communities.

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❖ For more information please contact your corresponding St John Region or the St John National Office for further details. (please see below)



www.stjohn.org.nz

NATIONAL OFFICE	REGIONAL OFFICES				
	NORTHERN	MIDLAND	CENTRAL	NORTHERN (SI)	SOUTHERN
St John House 114 The Terrace PO Box 10043 Wellington 6143 Tel: 04 472 3600 Fax: 04 499 2320 Email: enquiries.nhq@stjohn.org.nz	2 Harrison Road Mt Wellington Private Bag 14902 Panmure Auckland 1741 Tel: 09 579 1015 Fax: 09 579 3281	63-65 Seddon Road Private Bag 3215 Hamilton 3240 Tel: 07 847 2849 Fax: 07 847 2850	Cook Street PO Box 681 Palmerston North 4440 Tel: 06 355 5051 Fax: 06 355 0771	174 Durham Street PO Box 1443 Christchurch 8140 Tel: 03 366 4776 Fax: 03 353 7112	17 York Place PO Box 5055 Dunedin 9058 Tel: 03 477 7111 Fax: 03 477 7994



THE UNIVERSITY OF AUCKLAND BUSINESS SCHOOL
CHAMPIONS TROPHY CASE COMPETITION 2009

ST JOHN NEW ZEALAND - PRODUCTS & SERVICES

30 January 2009



A vital connection

AMBULANCE COMMUNICATIONS PROJECT

A giant leap forward in Emergency Ambulance Communications

The national project to transform the country's Emergency Ambulance Communications Centres into best practice, high-performing centres of excellence has achieved significant milestones this year.

The nine Communications Centres, previously located all over New Zealand, have been replaced by three modern, substantially upgraded Centres.

The three upgraded Centres, in Auckland, Wellington and Christchurch, now operate as one virtual Emergency Ambulance Communications Centre. For the first time ever, the three Centres are operating with standardised procedures

and equipment nationwide. All processes, systems and new technology have been designed to meet international best practice.

The \$16 million Ambulance Communications Project is now entering the final phase, with completion targeted for the end of 2007. This major project would not have been possible without the collaboration of the whole Ambulance Sector, significant investment by St John and Wellington Free Ambulance, (our joint venture partner in the Wellington Centre), and the support of our funders – the Ministry of Health and ACC.

The overall objective of this project is to provide New Zealanders with an efficient and effective emergency call handling and dispatching service, co-ordinating clinically effective and appropriate responses to all patient emergencies. The benefits to patients from fast and appropriate emergency responses are well documented.

New technology brings brighter Ambulance Communications future

Additional new technologies have been introduced into the Centres' environment, all linked together and operating within a disaster resilient network. These technologies include:

- systems for prioritising patient needs
- Caller Line Identification to confirm callers' address details
- high technology equipment installed in 570 ambulances to show the real-time location of every ambulance and improve communication to and from the Centres
- extensive on-screen mapping giving dispatchers more geographical information than ever before.

The project is already bringing substantial benefits that will continue to flow. For the first time ever, the Centres are capturing national data (from 1 July 2007) which will enable more strategic, long-term decision-making about Ambulance Services. The benefits for patients, Ambulance Officers,

Ambulance Service providers and funders will ultimately include better coordination of multi-modal ambulance responses, faster response times, and improved outcomes for patients.

This project is delivering to the people of New Zealand an Emergency Ambulance Communications service that meets their needs and paves the way for future delivery of products and services to reinforce our commitment to improve people's health and wellbeing.

The final phase of the Ambulance Communications Project will bring to a close a major undertaking that was developed, agreed to and implemented over a seven-year period.



NEW COMMUNICATIONS CENTRES AT A GLANCE

Nationwide, the Emergency Ambulance Communications Centres receive more than 300,000 emergency and 800,000 non-emergency calls each year. They dispatch the country's fleet of 600 ambulances, 250 rural doctors and nurses (PRIME), more than 40 emergency helicopters, Coast Guard and other modes of response. They also coordinate Patient Transfer Services for 21 District Health Boards.

Emergency Ambulance Communications Centre: People

- 140 Emergency Medical Dispatchers (includes call takers and dispatchers)
- 13 Team Managers
- 10 Quality Auditors, Business Analysts, Information and Communications Technology Officers
- 5 Communications Centre and National Managers.

Best practice features of the new Communications Centres

The best practice features of the new Centres, flowing from well-established international practices and contextualised for New Zealand are:

- effective governance and leadership
- integrated healthcare delivery
- clinical effectiveness
- resilient service continuity arrangements
- integrated information and communications technology support systems
- highly trained staff for management, operational and specialist roles
- robust operational and quality processes, based on sound data.

St John Communications Centre, Auckland (NorthComm):

- owned by St John
- covers the upper half of the North Island, from the Franklin district in the South to the Far North (population 1.9 million)
- ambulance and response services: St John Northern Region, St John Midland Region, air providers, PRIME
- receives 550,000 calls per annum
- dispatches to 170,000 emergencies and 50,000 planned patient transfers per annum.

Central Communications Centre, Wellington (CentralComm):

- owned by St John and Wellington Free Ambulance in a 50/50 joint venture arrangement
- covers the lower half of the North Island (population 0.9 million)
- ambulance and response services: St John Central Region, Wellington Free Ambulance, Taranaki District Health Board and Wairarapa District Health Board Ambulance Services, air providers, PRIME
- receives 270,000 calls per annum
- dispatches to 80,000 emergencies and 20,000 planned patient transfers per annum.

St John Communications Centre, Christchurch (SouthComm):

- owned by St John
- covers the whole South Island (population 1.1 million)
- ambulance and response services: St John Northern Region (SI), St John Southern Region, air providers, PRIME
- receives 280,000 calls per annum
- dispatches to 80,000 emergencies and 20,000 planned patient transfers per annum.



A vital response

AMBULANCE

> Ambulance Service committed to excellence

This has been a successful year in which our Ambulance Services have continued to progress and improve. We have provided the best possible level of service available from our various funding sources.

We believe we are delivering services to a high standard and that is supported by the high numbers of letters of appreciation from the public that we receive. Further testimony to the quality of the service and care provided by our Ambulance Officers is the low incidence of complaints received – less than two per 1,000 calls – a very low incidence by any standards.

Our ability to successfully deliver services to the community is wholly dependent on the skills and contribution of our people, both paid and volunteer. We and the community appreciate the high level of dedication of our Ambulance Officers, Team Leaders and Managers.

The two key developments in our Ambulance Operations this year are our restructuring programme and the commissioning of the new Emergency Ambulance Communications Centres – two success stories, and two of the most progressive changes in our recent history.

In restructuring we have developed a number of specialised roles, particularly in the area of Rural Support Officers, Clinical Standards Managers and Clinical Support staff, to ensure the ongoing delivery of quality patient care.

Significant consultation with staff throughout the year has ensured as smooth a transition as possible to the new structures. The restructuring has been aimed at raising clinical

and operational excellence, and delivering to the public the best possible levels of care that can be provided with the resources and funding available.

Another component of our reorganisation is the establishment of the new national Planning and Development Centre. The Centre is responsible for developing ambulance plans and programmes on a consistent basis, and implementing those through our regional delivery structure. Staffing of the Centre is well under way.

We received some additional funding from the Ministry of Health this year to increase ambulance staffing levels in a modest way, and we are seeing the benefits of having those additional people on board.

New programmes responsive to trends

Medical emergency call volumes continue to increase – typically at double the population growth, which is an international trend. There are a number of reasons for this, including an ageing population and increases in chronic health conditions.

Ensuring the safety of ambulance crews in situations where they may face abuse or possible assault, is also a concern for us. We have developed a programme of training which we began in Auckland and rolled out nationally this year. Run by former Police Officers, this concentrates on issues such as teaching staff how to be alert to possible danger, how to spot warning signs of threatening behaviour, and techniques on defusing or backing off from such situations safely. This is a great example of tapping into the specialist skills of related professions.

Protecting ambulance staff from back injuries caused by lifting is also a major focus. An innovative programme was developed and trialled by our Midland Region, assisted by external consultants and ACC. The pilot resulted in an encouraging reduction in incidences of back injuries. This programme is being rolled out nationally.

Committed to increasing funding and fully crewed responses

There have been further calls this year for all emergency ambulance responses in New Zealand to be double crewed. Our position is that all emergency ambulance responses in New Zealand should be fully crewed.

It is, however, not widely understood that we are not currently funded to provide full crewing totally from paid resources and are not contracted to do so.

St John is committed to achieving 100 per cent full crewing for all emergency ambulances, and we continue to work within communities and with funding agencies to ensure full crewing is achieved wherever possible.

We currently provide double crewing on more than 80 per cent of all our emergency responses across New Zealand relying to a considerable degree on volunteer resources. The actual level varies considerably between locations. In many single crewed responses, where possible and required, back-up is dispatched as soon as possible.

Increased funding would enable us to increase staff numbers, improve response times and invest further in training and development.

However, there will always be a need for the valuable contribution of volunteers, particularly in rural areas and isolated communities across the country, where caseloads are small and don't support the full time availability of paid officers. The contribution of volunteers is vital to the provision of Ambulance Services, and without them, our services would not be able to be provided to the levels that we presently offer in many rural areas.

Building our volunteer Ambulance Officer numbers remains an ongoing focus and we have had successes this year with a series of local recruitment campaigns around the country.

Building resilience in communities

We have a number of programmes in place designed to provide rapid responses to medical emergencies and accidents in rural or isolated communities until ambulances arrive, or in lieu of an ambulance where this is clinically appropriate. These programmes continue to prove their worth.

We coordinate, train and dispatch Community First Response Teams to local emergencies to complement ambulance responses. These teams are made up of volunteers drawn from local communities, and trained to provide initial medical aid to patients. These life-savers are available 24-hours a day and are responded by our Emergency Ambulance Communications Centres. These teams continue to add value to their local communities, and are a highly valued and supported resource.

We also run the Primary Response in Medical Emergencies (PRIME) programme, with funding from the Ministry of Health and ACC. We train more than 250 PRIME doctors and nurses in rural areas in emergency medicine to provide a response to seriously ill or injured people in support of Ambulance Service people.

Our Emergency Ambulance Communications Centres respond these specially trained doctors and nurses where an ambulance response time would be significant or where additional medical skills would assist with the patient's condition. The programme is improving outcomes for emergency patients in rural districts, and providing higher level medical skills than may otherwise be available from the Ambulance Service in rural communities. We are liaising with the Ministry of Health and ACC on their current review of aspects of the programme.

Emergency planning strengthened

We have given further emphasis to strengthening our plans for responding adequately to major or national emergencies, such as earthquakes or a pandemic.

Protective equipment is available, and our Ambulance Officers and Managers have undertaken overview training in how to react in such situations; with further training programmes planned for the coming year.

We have also developed comprehensive plans to keep our operation running in the event of a national emergency, in liaison with other emergency services and government.



St John Special Emergency Response Team training.

Events Service continues to grow

Demand for our services at public events has continued to grow, with our clinically trained Events volunteers and paid staff attending more than 8,000 events in the past year.

The growth in demand for these services has been driven by the increasing numbers of events held nationwide, organisers' growing awareness of the importance of health and safety and, we believe, our reputation for providing a quality service.

Our members provide first aid and pre-hospital emergency care at a wide range of events, supported by best practice equipment and technology. In some parts of the country, we use innovative methods of transport to move our people quickly through crowds – including motorcycles, bicycles, Segway 'people movers', golf carts and even horses.

Events that we cover include sports and cultural events, parades, concerts and swimming events, saving many people a trip to hospital and easing pressure on other health services.

Many events involve a significant number of young people. The largest – 'The Big Day Out' music festival in Auckland – this year required a total of 120 St John staff, mostly volunteers. Our onsite service included a Mobile Accident and Medical Clinic, staffed by doctors and nurses.

While seven patients at this year's 'Big Day Out' required transport to hospital for further treatment or assessment, a further 30 casualties were spared the need for transport to hospital, as they were assessed and treated onsite by our people.

Motor racing has thrived in New Zealand in the last two to three years, and the need for our services at these events has increased, and is highly regarded. Having ambulances and trained people on the scene means participants and spectators can relax and enjoy the events.

As in our Ambulance operations we are focused on attracting more volunteers to support our Events activities, to help staff the increasing number of events we are attending.

The year ahead

We look forward to continuing our work in the year ahead, in partnership with our members, funders, communities, partners, suppliers and other emergency services. We will continue to make a positive difference for New Zealanders, providing a high level of care and compassion to patients and their families.

With your kind help and care, there was no loss of life. I believe that the proactive attitude and exemplary service provided by St John Ambulance has made a true contribution to the strengthening of the relationship between our two countries."

JOON-HYUNG KANG | CONSUL-GENERAL OF THE REPUBLIC OF KOREA

From a letter to St John, following a February 2007 bus crash involving Korean passengers.

A vital contribution

COMMUNITY PROGRAMMES

> A vital part of communities throughout New Zealand

Building on the work and the contribution we make in Ambulance and Emergency Care Services, is our expanding range of caring and giving activities.

Our community programmes cover a wide range of activities and all ages. They are free to the public, provided largely by volunteers and are, we believe, targeted to people who benefit.

The programmes make a contribution to communities, thanks to the commitment, energy and goodwill of our people. The programmes are enjoying growth across the board, with positive feedback reaffirming their value to the public.

Our programmes are purposefully designed to contribute to community objectives, to support government policy and to deliver on our vision of enhanced health and wellbeing for all New Zealanders.

Developing young people

Our programmes are all grounded in the present, while also having a future focus. An example is the vibrant and growing St John Youth programme, which brings together a great mix of volunteer leaders and young people.

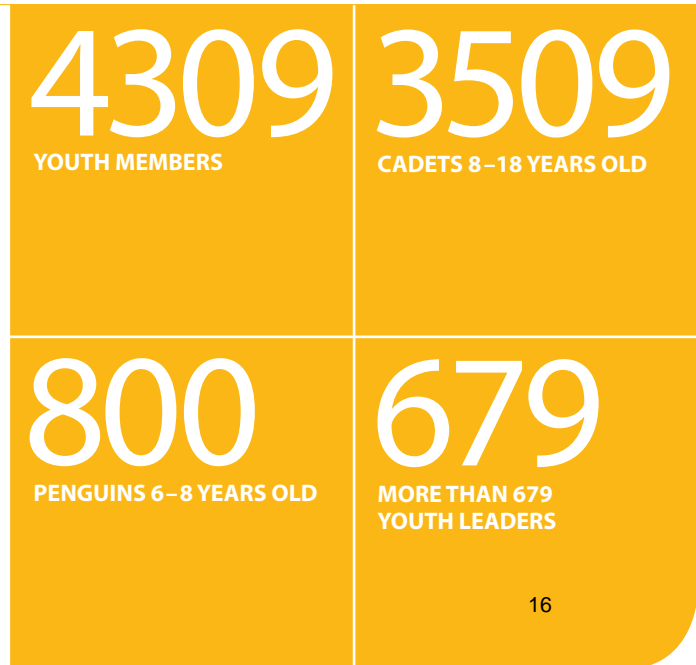
The programme is designed to give young people aged six to 18 – our Penguins and Cadets – skills and activities to learn from and enjoy today. It also helps develop young people into responsible adults with an understanding of wider community needs, compassion, citizenship and self-reliance.

As one of New Zealand's fastest growing youth programmes, St John Youth now has more than 4,000 Youth members countrywide, up from 3,759 the previous financial year.

We are moving steadily towards our target of 10,000 members in 2010. The programme is linked to the approach taken in New Zealand's education curriculum to ensure we don't repeat programmes taught in schools.

In the past year we have introduced a range of changes designed to ensure the programme remains modern and appeals to the young people of today. We have launched a new lively and engaging website, introduced new divisions and recruited many new leaders.

In February we launched a totally new curriculum for the Grand Prior's Award – the highest award our Youth members can earn other than bravery awards. New badges include an information technology and web-building badge. Older Youth members run a 'virtual flat' for six weeks, with challenges to resolve such as dealing with a water leak and a flatmate leaving without paying their bond.



Friends of the Emergency Department

- We launched our Friends of the Emergency Department programme six and a half years ago in Auckland with seven volunteers.
- We now have more than 600 volunteers in 18 hospital Emergency Departments throughout the country.
- Our volunteers play a unique role, providing support and comfort to patients, families and other support people in hospital Emergency Departments.
- They provide the non-clinical forms of assistance doctors, nurses and nurse aides may not have time for.
- They hold hands, make phone calls on behalf of patients and look after patients' children.
- These volunteers help thousands of people a year, and are highly regarded by the hospitals and hospital staff.
- Being a Friend of the Emergency Department provides a wide range of benefits to the volunteers including an increased sense of confidence and self-worth.
- Our research shows that complaints from patients reduce significantly in Emergency Departments with Friends of the Emergency Department.
- Doctors and nurses report an improved work environment from calmer patients.
- Economic benefits from the programme are reflected in the greater productivity from the ability of clinical staff to devote more time to their clinical duties.

Community Care volunteers

- Our Community Care programmes contribute significantly to communities, thanks to the commitment, energy and goodwill of our volunteers.
- The programmes are enjoying growth across the board, with positive feedback and research reaffirming their value to the public.
- They are purposefully designed to contribute to community objectives, to support government policy and to deliver on our vision of enhanced health and well-being for all New Zealanders.

Health Shuttles

- An example is our St John Health Shuttle services, which provide free transport for people with mobility or health problems who would struggle to attend appointments with doctors, specialists or hospitals.
- Our drivers are all volunteers trained in first aid.
- Clients include young mothers with children, the elderly and disabled people.

Caring Caller

- Caring Caller was established 12 years ago to provide a friendship and health check service by telephone for people in need, who may be elderly, housebound, disabled or socially isolated.
- Our volunteer callers make a daily phone call to check how their clients are, have a chat and share experiences.
- The programme has continued to expand, with volunteer numbers increasing and Callers taking a more active healthcare role in clients' lives.
- We now have more than 900 clients, as healthcare workers make increasing use of our service.
- Our Caring Callers, where required, check that their clients remember to take their medication, particularly elderly clients.
- The service plays an active role in helping many clients remain independent in their own homes rather than going into residential care, supporting the government's Ageing in Place strategy.
- There are cost reductions from reduced hospital admissions as a result of daily checks on well-being and supervision of medication; and reduced health expenditure in general by helping to maintain the mental, social and physical well-being of the elderly and isolated.

4. First Aid Supplies

St John supplies an extensive range of First Aid Kits that have been expertly compiled to suit different work and leisure needs. What's more, replacing depleted items in your kit is as simple as getting a refill pack.

All St John First Aid Kits have been constructed from quality materials, from the sturdy kit bags and containers to the hospital-grade medical supplies you'll find inside. All St John First Aid Kits meet New Zealand legislative requirements for workplace First Aid kits.

First Aid Courses

St John provides a comprehensive range of highly recommended First Aid courses. St John's training helps organisations to meet the requirements of the Health and Safety in Employment Act. Our Workplace First Aid course is the only first aid course in New Zealand that includes a "take home" CPR manikin and DVD. We are the only first aid training organisation in New Zealand with a formal Clinical Management Group comprising senior emergency medicine specialists and paramedics. This group prescribes the first aid skills provided in our courses based on science and experience worldwide. Funds from our first aid courses are used to help support the provision of our ambulance service and our other charitable activities throughout New Zealand



A vital commitment

VOLUNTEERING

> Volunteers vital and valued at St John

Volunteers make an amazing contribution to the people of New Zealand each and every day of the year. We salute and celebrate their incredible dedication, commitment and passion.

Without volunteers we would not be able to provide the high level of support and services in our communities we do today. We have more than 7,000 adult volunteers working across all the services we provide.

Our volunteers successfully balance volunteer duties with their daily lives. For many this includes holding down a full-time job and meeting family, recreational and social commitments. Without volunteer Ambulance Officers in

many parts of the country, there would be limited or no Ambulance Service available in some locations, given the available funding – particularly in rural and isolated areas.

Volunteers contribute to our full range of services, including Ambulance, Archives, Area Committees, Caring Callers, Events Services, Fellowship Groups and our Friends of the Emergency Department. We also rely on volunteers for our Health Shuttles, Hospitaller Clubs and the St John Youth programme. We also have a range of volunteers providing services in other areas, such as administration and support.

About our volunteers

Look at any sector of New Zealand society, any socio-economic group, age, gender or culture, and you will find a St John volunteer among them. Our volunteers are diverse, ranging in age from young people who devote time on weekends and after school, to the elderly who love giving to their communities in their retirement.

Our volunteers come from wide-ranging working backgrounds, including doctors, lawyers, homemakers, accountants, farmers, orchardists, teachers, hospitality staff, plumbers and electricians – the list is virtually endless. We believe we are fortunate that our people reflect the diversity of our society.

Common to all our volunteers is the care they have for our communities, the commitment to our organisation and a recognition that together we improve quality of life for people around us.

Volunteering brings many benefits on top of giving to the community and helping people. Volunteering for St John opens doors to new skills and experiences, personal growth and development. Individuals can train in a wide variety of disciplines, increase their confidence and gain wider work experience.

All our volunteer Ambulance Officers, for instance, receive the same training as our paid Ambulance Officers. For many, volunteering leads to a new career – many of our paid staff came to St John as volunteer Ambulance Officers.

Being part of St John is also a social experience. There is a wonderful support network, and a sense of belonging to a large national and international family.

While the volunteer contribution to St John is estimated to be worth more than \$50 million a year, the contribution goes beyond economic benefits. Volunteers contribute substantially to their communities and reflect the caring ethos of St John.



FINDING FULFILMENT AND FRIENDSHIP IN FEILDING

A tragedy led to Jo Tolhopf becoming a St John volunteer, but years of satisfaction and a huge contribution to the community has followed.

In 1992 Jo's best friend, a St John Ambulance Officer, lost her two children in a car accident. Jo saw the support offered to her friend by colleagues and felt she too wanted to be part of such a caring organisation.

Today, Jo combines her full-time job with volunteering as an Ambulance Officer, Feilding's Youth Divisional Manager and as an Events Volunteer.

At events Jo provides treatment for anything from broken limbs, fireworks injuries, heart attacks or choking, to cuts, sprains and sunburn. In Youth, Jo is proud to see children progress through Penguins and Cadets, obtain their Grand Prior's Award and, in many cases, go on to join our Adult Division.

Jo's contribution was recognised this year when she was invested as a Serving Sister in the Order of St John.

"All I can say for anyone considering becoming a St John volunteer is – go for it," Jo says. "You get to learn, travel, meet and help people. It's a go-ahead organisation with a great management team."

I just love the challenge of ambulance work, the different people you meet, the stories they tell, especially elderly people. You get fantastic training and put those skills into practice.'

Our volunteers reflect our communities

We recognise the importance of ensuring that our services accommodate the changing demographics of society and the changing profile of volunteer availability. Many families have two working parents these days so fewer volunteers are available during the day and at weekends. Increasing societal pressures are transforming New Zealand and placing competing demands on people's time – from longer working hours to longer shopping hours.

The good news is that we need people to contribute at all hours – people can volunteer during the day or night, after work or at weekends. We also have a more diverse range of services than we were traditionally known for. Options are available for people to choose the type of role and time commitment that suits. Many of our Friends of the Emergency Department volunteers, for instance, are parents who volunteer while their children are at school.

Volunteers provide a strong connection between St John and the community. Area Committee members are a great example. They know their local communities well, and want to contribute to improving them.

Volunteers have always been an important part of St John and always will be. Our managers are committed to ensuring volunteers feel valued, supported, part of the team, and that they achieve satisfaction and benefits from their work.

We also recognise the contribution of families and employers, who do so much to support volunteers' work. It is only with the support offered by many of the families and employers of volunteers that we can continue to offer our current levels of services.

Family contribution is valued in a number of ways. In Culverden, North Canterbury, for example, Amuri Area Committee raised funds for a three-bedroom house adjoining the Ambulance Station. Volunteer Ambulance Officers on duty from outlying rural areas can bring family and spend quality time together when they're not on callouts.

i. Volunteering in NZ – The Macro Picture

According to Statistics New Zealand's latest *Non-profit Institutions Satellite Account*, non-profit institutions contributed 2.6 per cent to New Zealand's Gross Domestic Product in 2004.

- When volunteer labour is included, this contribution increases to 4.9 per cent of GDP.
- More than one million New Zealanders are actively involved in volunteer work, representing 31% of the population aged 12 and over.
- Together New Zealanders contribute more than 270 million hours of formal, unpaid work for non-profit organisations annually. The time given is valued at more than \$3.3 billion.
- Volunteers contribute these millions of unpaid hours to health, emergency services, community support and development, sports & recreation, education and a range of other activities.
- Research by Volunteering New Zealand indicates that people increasingly prefer to undertake short term volunteer projects rather than long term commitments.

ii. Volunteering in St John

A major challenge that has always faced New Zealand is the need to provide a comprehensive range of health services to the community with finite resources. This has motivated non-government organisations to step up and to provide many essential services. St John is a prime example of this. We are ideally positioned to provide essential services and to add value to the health sector due to:

- our long history in New Zealand
- our strong community links
- our broad-ranging expertise in emergency healthcare and community services
- our long tradition of rapidly responding and adapting to new needs and demands, and
- our broad appeal to the volunteer workforce.

Position Overview

Volunteer Ambulance Officer

Ambulance work may look exciting or scary; but it's not all 'lights and sirens' screaming around the countryside. On most occasions we transport people in non-life threatening situations and activities are as varied as transporting patients from one hospital to another, dealing with cardiac arrests or major trauma incidents at motor accidents. In some situations volunteers work alongside paid staff, and in other areas the station may be made up entirely of volunteers.

You will undergo a standard process when joining St John, which includes filling in an application form, an interview, a police clearance, and a physical test. In return for the time you invest in us, we offer you NZQA recognised training and you will become part of the St John team – gaining all the skills, support, friendship and sense of community that come with that.

On average Ambulance Volunteers give approximately 6 hours a week for duty. It is also expected you will attend at least twelve training nights a year and pass all of the standard training.

Events Volunteer

Becoming an Events Volunteer is an active way to contribute to your local community while enjoying yourself at the same time. We will provide you with the training and skills necessary to provide first aid at events, and you can of course extend these skills to your everyday life!

With ongoing healthcare and management training to continue to build your skills, confidence and enthusiasm, you will work right in the heart of community events ranging from local street festivals and parades through to large sporting and cultural events and concerts.

There is a considerable amount of training and skill development involved. You work with like-minded people with energy and drive, constantly providing a professional service to all members of the community. There are aspects of the work that are challenging, deeply fulfilling and sometimes simply fun.

Typically you will be required to attend one 1.5 hour meeting per week and be on duty for at least one event per month.

For both positions...

St John will provide you with free initial and ongoing training, a uniform, reimbursement of expenses, and comprehensive support systems.

Key requirements are:

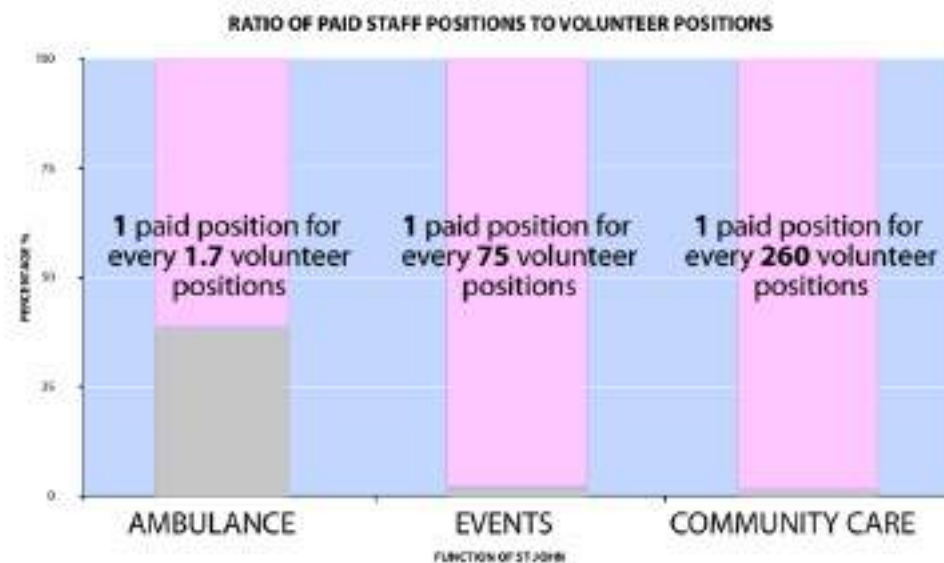
- Can display and actively promote our St John core values
- Good communication. Interpersonal and problem solving skills
- Physically able
- A compassionate and caring nature
- A motivated approach to learning and training
- Availability for regular duty and training

Key statistics

St John has 1,560 paid **Ambulance staff positions** including casuals; this gives a Full Time Equivalent headcount of 800 paid ambulance officers. In addition, there are 2,631 volunteer positions in Ambulance.

In our **Events service**, we have 1560 volunteer positions and 20 paid staff positions. Our fully trained Events officers provide first aid and pre-hospital emergency care services at more than 8000 public events every year. By treating people immediately on the scene, they improve patient outcomes and often saving the health sector the cost of ambulance transport to hospital and the costs associated with hospital treatment and even hospital admission.

Our **Community Care activities** are largely run by volunteers. We have volunteer positions across our range of Community programmes including St John Youth, and 24 paid staff. Many of these volunteers are also volunteer ambulance officers.



	Jun-06	Jun-07	Jun-08
Total Volunteers	6364	6860	7330
Volunteer Turnover	17.95%	14.28%	12.38%

Membership turnover

St John staff turnover is higher for volunteers than for paid staff - but turnover rates for both are declining due to a range of initiatives we have in place in recent years.



Volunteers vital in Ambulance

Our volunteer ambulance officers contribute more than 1.8 million hours a year of volunteer work – working with paid ambulance officers to treat and transport more than 320,000 patients a year. These patient numbers are growing every year as demand for emergency ambulance services continues to increase at approximately 6 per cent a year.

In metropolitan areas both paid and volunteer staff provide our Ambulance service. In rural locations, volunteers are the primary source of labour for our Ambulance services. Without volunteer ambulance officers in many parts of the country, there would be limited or no Ambulance service available at all within the available funding and given our country's geography – with large tracts of rural and isolated areas. In many areas, our Ambulance service is the only health service available after 5pm – with the reduction in rural health services.

We work closely with rural doctors and nurses the PRIME programme we administer on behalf of the Ministry of Health and ACC, in which we train rural doctors and nurses in emergency medicine to respond in advance of or in support of the local Ambulance service. We also train, equip and support Community First Response Teams – volunteers who respond to emergencies while ambulances are on the way.

iii. Managing Potential Conflicts

Paid positions introduced

A relatively small number of paid positions were gradually introduced to St John, covering Ambulance services, management and administration as demand grew to levels where an entirely volunteer workforce was no longer sustainable. Our paid staff work - then and now - side by side with our volunteer members.

Thanks to the professionalism, hard work and dedication of our paid and volunteer staff, we have developed to become the modern and vital organisation we are today – a core part of both the health and emergency services sectors. The use of the word “professionalism” in this context is deliberate. We do not distinguish between our members as being professional or not professional - our expectations are that all of our paid staff and volunteers act professionally. Indeed, professionalism is one of our core values. Equity among and for our members is very important and I will touch on this later.

St John is committed to proactively manage the range of potential conflicts in a paid and volunteer workforce. In the vast majority of the country, our paid and volunteer ambulance officers work together very harmoniously. But in some isolated pockets, there are tensions between paid staff and volunteers. This is partly due to the amalgamation into St John of ambulance services previously provided by District Health Boards.

Some of the tensions between paid and volunteer ambulance officers appear to have been driven by some members, who hold a view that all ambulance officers in New Zealand should be paid officers. The St John position is that we believe volunteers will always be an integral part of St John and of the Ambulance sector in New Zealand.

Given the size of our country - a large piece of real estate with vast tracts of rural and isolated areas, and given the size of the population - it is a reality that we will always rely on volunteers in the ambulance service, particularly in rural and isolated areas. We only have to look to the United Kingdom - a country of similar geographical size with a population of 65 million. Even *they* use volunteers in their ambulance service.

A small number of paid ambulance officers may consider themselves more ‘elite’ than volunteer ambulance officers, as they have more contact time with patients. St John has an active work programme to address the tensions, including supporting our managers with strong leadership and communication skills.

We encourage a team approach. Paid and volunteer ambulance officers have the same induction programmes. Our managers are committed to ensuring volunteers feel valued and, supported

iv. Recruit, Train, Retain

Key issues facing any organisation with a hybrid workforce include those facing any workforce - recruitment, training and retention. We have no problem recruiting volunteers for our Community Care programmes as there is so much flexibility in the hours and type of work available to volunteers. We even have waiting lists of volunteers in some areas.

The key recruitment challenge for us lies in recruiting volunteer ambulance officers, in light of:

- the current tight labour market
- longer working hours generally
- high ambulance service demands on volunteer ambulance officers in some rural and isolated areas
- the increasingly fast pace of modern life, and
- societal changes including the increase in households with two working parents, and the increase in single parent households.

Key tools to address challenges

Our key tools to address these challenges include:

- being continually responsive to change
- recognising and rewarding outstanding contributions
- robust HR policies
- targeted Volunteer Recruitment Campaigns flexible training programmes
- thinking laterally to tap into new pools of potential recruits.

Rewarding employer and family contribution

- To ensure we continue to attract volunteers, we have a strong commitment to valuing the contribution of our volunteers, their families and their employers. It is only with the support offered by many of the families and employers of volunteers that we can continue to offer our current levels of services.
- We recognise employers under our Employers Who Care programme, thanking them for their contribution in enabling their staff to take time off work to attend emergency callouts.
- Volunteer ambulance officers in some isolated areas, for instance, may find themselves taking up to 8 hours off work to treat and transport one patient, if the hospital is four hours drive away.
- Family contribution is valued in a number of ways.
- In Culverden, North Canterbury, for example, our Amuri Area Committee raised funds for a three-bedroom house adjoining the ambulance station.
- Volunteer ambulance officers on duty from outlying rural areas can bring family and spend quality time together when they're not on callouts.

Rewarding individual contribution

Acknowledgement of contribution is extremely important to St John management and members. We hold two Investiture ceremonies each year, at which the head or Prior of St John in New Zealand - the Governor-General - presents Honours to particularly high-performing St John members on behalf of the Queen. Priory Votes of Thanks are given to individuals and organisations for their conspicuous service to St John in New Zealand, and Service Medals are awarded for efficient long service.

Volunteer recruitment campaigns

- To attract and ensure an ongoing pool of volunteer ambulance officers, and to ensure adequate training periods before new recruits begin operational duties, we undertake a range of recruitment campaigns throughout the year.
- Our campaigns are targeted – as we achieve much higher response rates if they are specific to local requirements.
- We are also developing new programmes to encourage specific groups of people to volunteer to meet identified needs, and ensure good support for our volunteers.
- For example, in Auckland we have a Chinese division assisting us meet the needs of this significant demographic group. We have a Maori Senior Adviser, working at a national level to ensure St John effectively meets the needs of Maori, including the needs of our Maori volunteers.
- In our volunteer recruitment campaigns, we outline the many benefits volunteering brings.

ASB partnership

- Recently, St John announced a new partnership with **ASB Bank** designed to build caring communities together and to expand their volunteer recruitment pool.
- As part of the relationship, St John hope to increase community support and fundraising, as well as providing opportunities for ASB's 4,300 staff to volunteer for St John, giving them a broader range of life and learning experiences and a new way to contribute to local communities.



ST JOHN NEW ZEALAND

2007 ANNUAL REPORT: FINANCIAL RESULTS



➤ National Performance Statistics 1 July 2006 – 30 June 2007

	Northern Region	Midland Region	Central Region	Northern Region (SI)	Southern Region	National Office	Total
Patients treated and transported by Ambulance Officers	144,068	62,113	40,028	50,072	26,363	–	322,644
Kilometres travelled by ambulances	5,925,040	3,029,720	1,957,744	2,152,058	1,520,036	–	14,584,598
Total ambulance and operational vehicles	159	124	62	124	82	–	551
Ambulance Stations	41	42	21	52	29	–	185
Emergency incidents attended	105,412	46,001	30,761	43,876	23,614	–	249,664
Vehicles attending emergency incidents	123,429	56,025	37,583	51,930	24,002	–	292,969
Events attended	2,380	1,522	1,488	2,415	500	–	8,305
Event Volunteers	466	62	192	500	80	–	1,300
Students trained	15,222	10,792	9,578	10,485	8,493	–	54,570
Children participated in the St John Safe Kids Programme	34,202	508	–	8,444	8,934	–	52,088
Caring Caller Clients	507	203	37	138	–	–	885
Caring Caller Volunteers	448	219	46	151	–	–	864
Friends of the Emergency Department Volunteers	202	192	–	102	53	–	549
Area Committee Volunteers	217	201	167	242	187	–	1,014
Volunteers (Head Count)	2,369	1,159	939	1,816	776	11	7,070
Paid Staff (Head Count including Casuals)	815	362	205	407	312	47	2,148
Youth Membership (Penguins and Cadets)	1,727	616	572	1,068	326	–	4,309
Total Membership (Head Count)	4,911	2,137	1,716	3,291	1,414	58	13,527

St John products and services are delivered throughout New Zealand by five regions. More than 140 Area Committees provide the vital community interface and local presence to support the regions in this delivery.

NATIONAL OFFICE St John House 114 The Terrace PO Box 10043 Wellington Chief Executive: Jaimes Wood Tel: 04 472 3600 Fax: 04 499 2320 E-mail: enquiries@stjohn.org.nz	NORTHERN REGION 2 Harrison Road Mt Wellington Private Bag 14902 Panmure, Auckland General Manager: Stephen Franklin Tel: 09 579 1015 Fax: 09 579 3281 E-mail: enquiriesnth@stjohn.org.nz
MIDLAND REGION 63-65 Seddon Road Private Bag 3215 Hamilton Regional Chief Executive Officer: Eddie Jackson Tel: 07 847 2849 Fax: 07 847 2850 E-mail: enquiriesmid@stjohn.org.nz	CENTRAL REGION Cook Street PO Box 681 Palmerston North Regional Executive Officer: Jim Datson Tel: 06 355 5051 Fax: 06 355 0771 E-mail: enquiriescent@stjohn.org.nz
NORTHERN REGION (SI) 174 Durham Street PO Box 1443 Christchurch Regional Chief Executive Officer: Tony Blaber Tel: 03 366 4776 Fax: 03 353 7112 E-mail: enquiriesnrsi@stjohn.org.nz	SOUTHERN REGION 17 York Place PO Box 5055 Dunedin General Manager: Gary Williams Tel: 03 477 7111 Fax: 03 477 7994 E-mail: enquiriessth@stjohn.org.nz



St John New Zealand Aggregated Special Purpose Summary financial statements

➤ Summary statement of financial position

As at 30 June 2007

	2007 (\$000)	2006 (\$000)
Current assets	47,493	43,730
Property, plant and equipment	98,509	60,833
Other non-current assets	4,966	3,948
Total assets	150,968	108,511
Current liabilities	20,504	17,421
Non-current liabilities	4,029	4,256
Total liabilities	24,533	21,677
NET ASSETS	126,435	86,834
TRUST AND SPECIAL PURPOSE FUNDS	126,435	86,834

➤ Summary statement of financial performance

For the year ended 30 June 2007


	2007 (\$000)	2006 (\$000)
Operating revenue		
Revenue from operations	133,002	121,273
Interest revenue	2,068	1,922
Revenue from donations, bequests and grants	12,582	7,150
TOTAL REVENUE	147,652	130,345
OPERATING EXPENSES	144,346	124,515
NET SURPLUS	3,306	5,830

➤ Summary statement of movements in trust and special purpose funds

For the year ended 30 June 2007

	2007 (\$000)	2006 (\$000)
Opening trust and special purpose funds	86,834	80,948
Total recognised revenue and expenses	3,306	5,830
Assets revalued during the year	36,255	0
Net increase in trust and special purpose funds	40	56
CLOSING TRUST AND SPECIAL PURPOSE FUNDS	126,435	86,834

On behalf of the Priory Chapter and/or Priory Trust board, who authorised the issue of this summary financial report on: 27 November 2007.


Rob Fenwick
 Chairman


Jaimes Wood
 Chief Executive

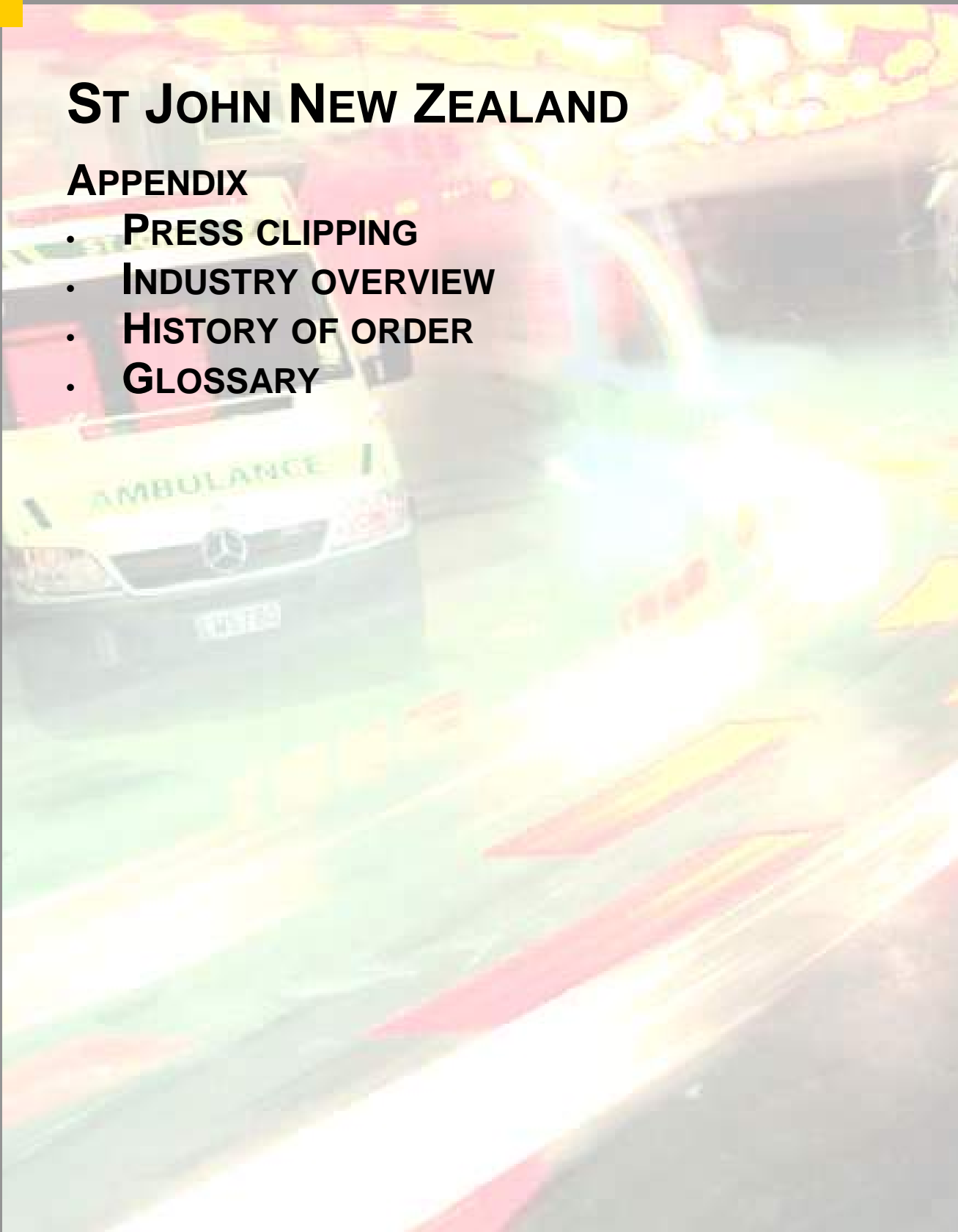
These statements should be read in conjunction with the notes to the summary special purpose financial statements.



ST JOHN NEW ZEALAND

APPENDIX

- PRESS CLIPPING
- INDUSTRY OVERVIEW
- HISTORY OF ORDER
- GLOSSARY



Press Clipping

Thursday, 31 July, 2008 - 15:03

St John's intention to employ a full-time paid Team Manager / ambulance officer in Te Anau has led to a small number of volunteer ambulance officers resigning from our service, St John Chief Executive Jaimes Wood said today.

"This, in our experience, is unique," Mr Wood said. "We operate 185 ambulance stations throughout New Zealand, and the majority enjoy the services of volunteers."

"Having one full-time paid Team Manager anchoring an otherwise volunteer ambulance station is common throughout the country in stations with a similar workload level, and is very successful. We believe this approach is the right thing to do for the community."

St John will ensure services continue without disruption in Te Anau and to the people of Southland. We will ensure that support to communities continues by mobilising resources from elsewhere if needed to ensure service is maintained. The average annual ambulance workload in Te Anau is less than one call per day.

The current situation has followed protracted discussions and consultation between St John management, our volunteer team in Te Anau and the Ministry of Health and ACC (the Crown agencies which provide base funding for ambulance operations). We concluded that the best way forward for the people of Southland is the employment of a full-time paid ambulance officer as Team Manager based in Te Anau.

The benefits of having a full-time paid Team Manager are far-reaching, including management and oversight, co-ordination of volunteer training and work to build future resilience. The Team Manager will also be an operational ambulance officer providing patient care.

Funding for this was agreed with the Crown agencies, and ongoing dialogue with the volunteers of Te Anau plus other community representatives led to a concluding meeting facilitated by Southland District Health Board Chairman Dennis Cairns on 16 July 2008.

Having reached what we believed was sound support for our position, we advertised the position. Following this, we have now received the resignation of three volunteers and a number of requests for short term leave of absence.

We do not fully understand this negative reaction from some of our volunteers, as the full-time appointee will relieve both time commitments and pressure on the volunteers and assist with their skill development.

We highly value the contribution of our volunteers to St John services and local communities. Reflecting this, we will be reimbursing our Te Anau volunteers for lost wages while on callouts. This is a modification of our national policy and recognises the unique geographical circumstances of the area. A return ambulance journey from Te Anau to the local hospital, the Southland Base Hospital in Invercargill, can take more than five hours.

Some of our Te Anau volunteers have said they would rather the funding for the full-time paid Team Manager be used to pay them an hourly rate for their on-road hours. We pay for training, development and uniforms for all our volunteer ambulance officers nationwide. Any move to also pay an hourly rate for on-road hours would have nationwide implications, which we cannot afford from current ambulance operations funding. The St John volunteer contribution is currently estimated at \$50 million a year.

We currently fund a national shortfall of some \$10 million a year in ambulance operations, once Crown funding has been taken into account.

Source: <http://www.voxy.co.nz/national/st-john-guarantees-continued-te-anau-ambulance-service/5/1687>

12 Must Knows about Health Care in New Zealand

How do I pay for my healthcare in New Zealand?

New Zealand's healthcare system is funded mainly through general taxation. Treatments are usually free or subsidised. Medical treatment is generally very good. Private healthcare is also available.

Will I be eligible for publicly funded healthcare?

Yes, provided you are a New Zealand Citizen or you are ordinarily resident in New Zealand. In order to become an ordinarily resident, you need to be a permanent resident or a work-permit holder. The work-permit must be for a minimum of two years at time of issue. If you meet the criteria, your partner and children aged 19 years or under will also be eligible for publicly funded healthcare.

When is publicly funded healthcare free?

Public healthcare is free for:

- hospital treatment including 24-hour accident and emergency (A&E) clinics
- children's immunisations.
- prescription medicine for children under six.
- people who need more than 20 prescriptions per year. Prescriptions are free starting from the 21st prescribed item.
- prescription medicines for all public hospital patients.
- most laboratory tests and x-rays, except at privately operated clinics.
- healthcare during pregnancy and childbirth. This covers everything from the diagnosis of pregnancy to pre- and post-natal care for mother and baby. There is no charge for hospital stays.
- general practitioner (GP) referrals to a public hospital for treatment.
- check-ups and basic dental treatment for schoolchildren.
- breast-screening for women aged 50 to 64.
- acute or chronic medical conditions (In some circumstances a financial contribution may be needed.)

What healthcare is subsidised but not free?

- Prescription items.
- Visits to general practitioners.
- Visits to physiotherapists, chiropractors and osteopaths when referred by a GP.
- Ambulance services.

How big a financial contribution towards medical costs will I have to make?

- A visit to your GP costs \$45 to \$55 between around 8:00am - 6:00pm. Visits at weekends or nights cost \$10 to \$15 more.
- Visits to your GP are subsidised by \$15 for children aged 6-17 years and by \$35 for children under six. Adults who visit the doctor frequently, or who receive social benefits, receive a \$15 subsidy.
- If your GP prescribes medicines for you – pay \$15 per item for up to 20 items a year
- Community Services Card holders (people on low incomes) and High Use Health Card holders pay \$3 per item for their first 20 items of medicine. A manufacturer's premium is added in all cases, even when the prescription is free or subsidised.
- Ambulance services may cost \$45 - \$65

What if I need specialist care?

You need your GP to refer you to a specialist for free treatment. Waiting times vary according to region, urgency and type of treatment involved. If you prefer not to wait and opt for a private specialist, you, or your medical insurance, will be required to cover all fees.

What role does private healthcare play in New Zealand?

Many New Zealanders have private health insurance because it allows them to bypass the waiting times in the public health system for treatment of non-urgent conditions. People who have private health insurance are also entitled to free public health services.

Who can I sue if I am injured?

You cannot sue anyone for compensation. The Accident Compensation Corporation (ACC) helps to pay for the cost of your care. Injuries from work, home and sports or other leisure activities are covered. ACC claims may also be made for personal injury caused by a medical mistake or error, sexual assault or abuse, and some work-related conditions.

What is the ACC's role in New Zealand?

The ACC subsidises treatment of accident-related injuries. The patient usually pays a part-charge for the treatment. If your injury stops you from working, ACC pays compensation, usually based on 80% of your weekly income before tax. It can also help with residential nursing care, home help and childcare, as well as subsidising transport and training costs while you recover. In some cases involving permanent physical impairment, compensation, or 'lump sum', financial payments are also made.

Source: <http://www.emigratenz.org/healthcare-migrants-newzealand.html> (New Zealand Immigration)

Industry Statistics

	1998	1999	2000	2001	2002	2003	2004	2005	2006
Expenditure on Health									
Total (% gross domestic product)	7.8	7.6	7.7	7.8	8.2	8.0	-	-	-
Total (per capita, US\$ purchasing power parity)	1,451	1,522	1,604	1,707	1,846	1,856	-	-	-
Public (% total expenditure on health, TEH)	77.0	77.5	78.0	76.4	77.9	78.3	-	-	-
Density of medical staff per 1,000 population									
Practising physicians (head counts)	2.2	2.2	2.2	2.2	2.1	2.2	2.2	2.1	2.3
Practising nurses (head counts)	9.6	9.6	9.6	9.6	9.4	9.1	9.5	10.2	10.0
Life Expectancy									
Total population at birth (Years)	-	-	-	78.7	79.0	79.2	79.6	79.9	80.2
Females at age 65 (Years)	19.5	19.6	19.8	20.0	20.0	20.1	20.4	20.5	20.7
Life expectancy (Years)	16.0	16.3	16.5	16.7	16.9	17.1	17.5	17.8	18.1

Source: http://www.oecd.org/document/16/0,3343,en_2649_34631_2085200_1_1_1_37407,00.html<http://www.oecd.org>

History of Order

The beginnings of The Order of St John lie back beyond the First Crusade to the Holy Land in 1095. When they captured Jerusalem, the Crusaders founded a hospice, the Hospital of St John of Jerusalem, run by a group of monks led by Blessed Gerard.

The Crusaders gave the hospital land and money and in 1113 the Pope recognised it as an independent religious order of monks and nuns, The Order of St John, whose special task was to care for the sick. In the next 800 years, a number of "branches" of the original Order of St John rose and faded throughout Europe. The Order in England, from which the Priory in New Zealand is descended, finally re-established itself in 1831 after centuries of persecution and decline. It was incorporated by Royal Charter of Queen Victoria in 1888, with the Queen as Sovereign Head of the Order. This Royal Charter also established St John as a royal order of chivalry.

The St John Ambulance Association was founded in England in 1877 to provide ambulance transport and instruction on first aid to the public at home and at work. The first ambulance textbook was published in 1878 and soon afterwards ambulance equipment, such as first aid hampers and wheeled litters, was available from the Chancery at St John's Gate in London.

The St John Ambulance Brigade formed in England in 1887 as an organisation of trained volunteers, providing a service in first aid and ambulance transport at public events. Groups of "first aiders" holding the Association's certificate began to group together as "corps" - now known as divisions.

The International Headquarters of The Order of St John are at St John's Gate, Clerkenwell, and London. There are Priors in Scotland, Wales, South Africa, Canada, Australia, New Zealand, England and the United States of America and Commanderies in Northern Ireland and Western Australia. Foundations of the Order operate in 40 other countries, mostly members of the Commonwealth.

Glossary

ACC: The Accident Compensation Corporation (ACC) administers New Zealand's accident compensation scheme, which provides personal injury cover for all New Zealand citizens, residents and temporary visitors to New Zealand. In return people do not have the right to sue for personal injury, other than for exemplary damages.

Health Board: District Health Boards (DHBs) are responsible for providing, or funding the provision of, health and disability services in their district. There are 21 DHBs in New Zealand and they have existed since 1 January 2001. The statutory objectives of DHBs include: improving, promoting and protecting the health of communities; promoting the integration of health services, especially primary and secondary care services; promoting effective care or support of those in need of personal health services or disability support.

PRIME: Primary Responsible in Medical Programmes