



christchurch **p**ho

ANNUAL REPORT

2015



Contents

| | |
|---|-------|
| About Us | 2 |
| The Christchurch PHO Focus | 2 |
| Chairman's Report | 3 |
| Executive's Report | 4 |
| Christchurch PHO Board | 5 |
| The Clinical Governance Group | 5 |
| Population | 6 |
| Christchurch PHO Service Team | 6 |
| The Canterbury Clinical Network Alliance | 7 |
| Our Achievements | 8-9 |
| PHO Programmes | 10-12 |
| Integrated Performance Incentive Management | 13-14 |
| Financial Statements | 15 |
| Statement of Financial Responsibility | 15 |
| Audit report | |

About Us

Established in 2003, Christchurch Primary Health Organisation (PHO) serves urban Christchurch. The 6 member general practices we support are a mix of youth focused centres, small centres, and larger acute centres, providing primary care services to an enrolled population of almost 34,000.

| | |
|--|---|
| Burnside Medical Centre | 368 Wairakei Rd, Burnside, Christchurch |
| Korowai Youth Wellbeing Trust | 298 Barbadoes St, Christchurch |
| Moorhouse Medical Centre | 3 Pilgrim Place, Sydenham, Christchurch |
| Riccarton Clinic | 6 Yaldhurst Rd, Church Corner, Christchurch |
| University of Canterbury Health Centre | University Campus, Ilam Rd, Christchurch |
| CPIT Health Centre | The Whareora, CPIT Campus, Christchurch |

The Christchurch PHO Focus

The mission of Christchurch PHO is to:

“lead and facilitate the provision of high quality primary healthcare services, and practice management support, to the enrolled population, through distinctive general practices and innovative networks.”

The vision for the PHO is to:

- Strive for excellence and be innovative as we work to improve the affordability and accessibility of services, and the integration and continuity of health care;
- Adopt an outcome oriented and solution focused approach to our work;
- Value and foster strong connected relationships with the health service workforce;
- Support people to be confident participants in their health care;
- Demonstrate an understanding of the health needs of our enrolled population;
- Demonstrate measured improvements in the health and well-being of our enrolled population; and
- Contribute as an active partner to the various Alliances at a local, regional and national level.

Chairman's Report

The past year has been somewhat challenging for Christchurch PHO. There has been leadership change and the year has seen a large increase in the workload of our small PHO staff.

In September our longstanding chief executive Helen Johnson resigned and Laila Cooper who had been seconded to that role has taken on that leadership position. Helen had seen the organisation through some significant events from the establishment of CHCH PHO as a stand-alone PHO through earthquakes and through pressure to amalgamate with other PHOs. Helen built up a small team of capable workers who have ably assisted her but who have also helped tremendously with the transition. On behalf of the Board I would like to thank Helen for her years of service and wish her the very best for the future.

Another departure from the PHO has been that of Angela Blackwood our clinical pharmacist. The PHO has been supporting clinical pharmacy which has been a new role in the primary health landscape in New Zealand and Angela established a service that the general practice teams value greatly and she will be missed. We welcome Melanie Gamble who has taken on Angela's role.

Another new role the PHO is supporting is the provision of a social worker based in our practices. Gythlian Loveday has joined our team and the feedback from our practices is that the role is an extremely helpful one. While social work is well established, its provision from within General Practice is not in New Zealand and the PHO believes this has the potential to make a significant difference to the health of our enrolled population.

The workload of the PHO increased substantially last year in part due to the needs of some of our member practices but also due to increased compliance required of PHOs. A major audit of the full range of PHO activity together with the support needed to assist practices achieve the new foundation standard requirement has required large inputs from the PHO staff. It is to be hoped that the levels of compliance based activity will reduce in coming years to free up staff time to allow them to focus on activities that support our practices to improve patient outcomes.

On that note I would like to thank Sandi Malcolm and Katrina Banks for their role in both keeping the PHO operating in the transition between chief executives and also in stepping up to enable the PHO to respond to the increased demands on PHO staff this year.

I would also again thank our member practices for their care of our enrolled population but also their contribution to the health system in Canterbury. Mental health has again been a significant issue this year in Christchurch and our practices, partnered with our PHO mental health service who also deserve thanks, have been at the forefront of caring for increasing numbers of more complicated patients. A statistic that we continue to be proud of is the practices consistently achieving 95% immunisation rates in our 2 year olds.

Finally I would like to thank Laila Cooper and also Rural Canterbury PHO for their support. RCPHO kindly seconded Laila to cover leave and then graciously accepted Laila's decision to take over the CE role for CHCH PHO. We have worked closely with RCPHO for some time now and expect that to continue. Laila has brought a new perspective to our organisation and a wealth of health management experience behind her. She has fitted into our organisation seamlessly and we look forward to her contribution.



Dr Angus Chambers

Executive's Report

Each year when we reflect on the many planning activities, service developments and new initiatives and programme delivery we say what a busy time it has been. 2014-15 has been no different in that regard. The year has included a continued focus on quality improvement, the evaluation and review of existing programmes to meet increased demand for services, the introduction of new services and programmes, and planning for new IT developments. There has also been the acknowledgement that years 4 & 5 post a major disaster is often a challenging time for some people. In Canterbury this has indeed been the experience post-quakes, and we, along with many other services in Canterbury, have worked hard to respond, in particular to the increased demand for mental health services.

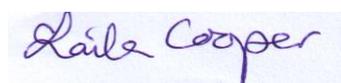
This year the PHO Board agreed a new two year PHO Strategic Plan and direction. The four strategic priorities have provided a clear focus for future activity, in the context of the strong influence of national policy and direction that PHOs operate under, and the local Canterbury health system.

Major pieces of work have included undertaking a self-assessment against the minimum standards as outlined in the PHO Services Agreement; planning for the introduction of the Vulnerable Children's Act and the implementation of the new free after-hours care for children under 13 years from 01 July 2015. The PHO team has supported practices in their preparations to meet the Foundation Standard by 01 July 2016; supported the development of a patient portal proposal for the Canterbury health system; and participated in a range of local and national consultations including the refreshed national Health Strategy and funding models. A major IT project for next year will be the implementation of a National Enrolment Service.

Christchurch PHO has continued to be an active partner in the Canterbury Clinical Network Alliance by supporting a range of governance and planning groups, work streams and service level alliances. It was heartening to have the work of the Canterbury Clinical Network Alliance formally recognised this year when it received several national awards. Christchurch PHO is also a member of the national PHO Alliance, with the PHO Chairman taking on the role of GP representative for the Alliance at PSAAP during this year.

The PHO has maintained strong links across the health system through clinical representation on the Canterbury DHB Clinical Board, and more recently clinical representation on the Pegasus Health Clinical Providers Education Committee. The PHO signed a Memorandum of Understanding with the Medical Council, and participated in the first quarterly meeting of the South Island PHO CEOs. The Chairs of the three Clinical Governance Groups in Canterbury met regularly to discuss matters of mutual interest. We look forward to continuing these opportunities to work together with our colleagues throughout the sector.

A very warm thank you to all the PHO staff and contractors; to the capable and dedicated general practice teams, primary mental health staff, practice managers and clinical leaders; to the Board and Clinical Governance Group for their leadership; and to our many supportive colleagues throughout the wider health system who have helped us to deliver and improve services to the enrolled population. It has been a busy and challenging year on many fronts, and the commitment of so many has allowed us to achieve so much.



Laila Cooper

Christchurch PHO Board

Christchurch PHO operates as a non-for-profit limited liability Company and has a Governance Board of seven members. The members bring a diversity of background, skills and expertise to the monthly Board meetings.

The Board is responsible for the provision of primary health care services, to the population enrolled with the member contracted general practices within its area. It is also responsible for setting the strategic direction and organisational policy.

During 2014-15 the following served as Board members:

| | |
|-------------------|--|
| Dr Angus Chambers | General practitioner representative & Chair |
| Dr Joan Allardyce | General practitioner representative & Deputy Chair |
| Ana Rolleston | Māori representative |
| David Jones | General practice representative |
| Sharon McFarlane | Community representative |
| Moana O Hinerangi | Māori representative |
| Gill Davidson | Practice nurse representative |

The Clinical Governance Group

The Clinical Governance Group is a Board Committee tasked with providing clinical advice to the PHO Board. The Group meets monthly and the members during 2014-15 were:

| | |
|---------------------|---|
| Dr Angus Chambers | General practitioner representative & Chair |
| Dr Joan Allardyce | General practitioner representative |
| Dr Tearlach MacLean | General practitioner representative |
| Dr Neil Beumelburg | General practitioner representative |
| Ana Rolleston | Māori representative |
| Wendy Risdon | Practice nurse representative |
| Melanie Gamble | Clinical pharmacist (from April 2015) |

The Clinical Governance Group has had a busy year monitoring progress against the national health and PHO performance targets, providing advice to the Board on clinical programmes, and providing feedback to various consultation requests. This year the membership was extended to include a pharmacist, and Melanie Gamble was appointed to the Group to fill this role.

At the end of the year Dr Allardyce stepped down as the CPHO clinical representative on the Canterbury District Health Board Clinical Board after serving for two terms. Dr MacLean took over this role, and during the year was also appointed as the CPHO clinical representative to the Pegasus Health Clinical Provider Education Committee. Dr Angus Chambers met regularly with the Chairs of the Pegasus Health and Rural Canterbury PHO Clinical Governance Groups to discuss clinical matters of mutual interest.

Population

As at 01 July 2015 the Christchurch PHO had an enrolled population of 33,934.

Analysis by Ethnicity

| NZ European | Māori | Pacific Islanders | Asian | Other |
|-------------|-------|-------------------|-------|-------|
| 20,436 | 2,644 | 1,044 | 5,353 | 4,457 |

Analysis by Age Group

| Under 5 yrs | 6-14 yrs | 15-24 yrs | 25-44 yrs | 45-64 yrs | Over 65 yrs |
|-------------|----------|-----------|-----------|-----------|-------------|
| 1,631 | 2,215 | 10,591 | 11,543 | 6,216 | 1,738 |

Christchurch PHO Service Team

The Team

| | |
|-------------------|--|
| Helen Johnson | Chief Executive (to Oct 2014) |
| Laila Cooper | Chief Executive (acting from Jun 2014; appointed Jan 2015) |
| Sandi Malcolm | Service Development Facilitator |
| Katrina Banks | Administrator & Board Secretariat |
| Dr Angus Chambers | Clinical Advisor |
| Georgina Jardine | Mental Health Liaison & Triage Co-ordinator |
| Becky Baichoo | Mental Health Brief Intervention Counsellor, & CBT Pilot |
| Jan Bensemam | Mental Health Brief Intervention Counsellor |
| Cath Finch | Mental Health Brief Intervention Counsellor |
| Joanne Parker | Youth Brief Intervention Counsellor (to Oct 2014) |
| Sharmaine Dobson | Youth Brief Intervention Counsellor (from Oct 2014) |
| Paul Wynands | Clinical Psychologist |
| Ali Maginness | Clinical Psychologist |
| Angela Blackwood | Clinical Pharmacist (to Oct 2014) |
| Melanie Gamble | Clinical Pharmacist (from Oct 2014) |
| Michelle Okeroa | Mobile Practice Nurse |
| Kirsten Carey | Mobile Practice Nurse University of Canterbury Health Centre |
| Gythlian Loveday | Mobile Social Worker (from Aug 2014) |

The Canterbury Clinical Network Alliance (CCN)

Christchurch PHO continued to take an active role in the Canterbury Clinical Network Alliance working collaboratively across Canterbury with service providers and other Canterbury PHO's on a number of different projects.

Among a wide range of activity our involvement has included membership of the:

- Alliance Leadership Team
- Alliance Support Team
- Flexible Funding Pool Service Level Alliance (including Health Promotion / Population Health and Enhanced Capitation sub-groups)
- Integrated Diabetes Services Development Group
- Canterbury Primary Response Group
- Urgent Care Work Stream
- Patient Portal Steering Group
- Canterbury Infection Prevention Control Steering Group

Other collaborative work has included:

- participating in the CCN strategic planning workshop in October 2014;
- providing support for an Asian Health Day (October 2014);
- working to improve the uptake of cervical screening by priority group women;
- implementing an Ethnicity Data Audit; and
- contributing to the development and implementation of pan Canterbury overarching Māori and Pacific Health Plans, and developing PHO plans that reflect these plans.

Our Achievements

The Christchurch PHO team and member general practices have continued to provide quality services to the enrolled population. Some key achievements this year have included:

- **Primary Mental Health Services**

The Primary Mental Health team has risen to the challenge of meeting the increased demand while endeavouring to keep the time between referrals received and people being seen to a minimum. Of note is that increasingly people are presenting more acutely unwell and with more complex symptoms. As part of the PHO response the Board funded a one year CBT Pilot for 20 people. The results were very encouraging and the programme will be continued next year.

The core components of the Services are Brief Intervention Counsellors, extended general practice consultations, and clinical psychologists. The PHO also funded Youth Mental Health Lifestyle Packages of Care. These packages are designed for youth aged 15 to 25 years who experience mild to moderate anxiety and depression and would benefit from lifestyle advice including strategies to manage stress and improve their sleep.

- **Community Social Worker**

This year the PHO funded a one year community social worker pilot project which was delivered in collaboration with Presbyterian Support Upper South Island. A social worker was employed three days per week to work with the member general practices to provide services, including referral pathways, for enrolled patients. The objectives of the pilot were to:

- Provide early intervention for people and their families that reduce the potential for conflict and distress in families, groups and communities.
- Provide strategies and referral pathways that enhance health outcomes and general wellbeing.
- Reduce social isolation loneliness and depression through targeted interventions
- Enhance the interdisciplinary relationship between social workers and the general practice team that will benefit the enrolled population.

Following a positive evaluation of the pilot the CPHO Board approved continuation of the service in the next financial year.

- **Mobile Practice Nurses**

Practices utilise the mobile practice nurses to help reach their high needs population. The nurses aim to improve access to health care by addressing barriers and providing home based and general practice clinic services. Their roles are regarded as an extension of the care provided by practice nurses and embodies the whanau ora philosophy of care.

The nurses have offered free cervical screening for priority group women, opportunistic cardiovascular disease risk assessments, and smoking brief advice and cessation services. The nurse based at the University of Canterbury Health Centre provides the service across the campus, using a focus on health promotion and providing nursing care to Māori and Pacific

people and those with high needs. These may include people with diabetes or those identified as having a high risk of developing long term health conditions. The nurse also works closely with the Pacific and Māori Development teams at the University.

- **Clinical Pharmacist**

The Clinical Pharmacist has carried out a range of tasks similar to many other Clinical Advisory Pharmacists around New Zealand. The pharmacist has been available for multidisciplinary team reviews, clinical medication reviews, continuous quality Improvement activities (clinical audits) and individual queries.

The PHO also contracts other pharmacists to work with general practice teams to undertake reconciliation of hospital discharge summaries and provide yellow medication cards. Home visits were used to reduce barriers to access for the high needs enrolled population.

The PHO continued this year to oversee the implementation of the Canterbury wide Pharmacy Quitcard Programme which was delivered at community pharmacies across Christchurch. While it has been a very successful programme over the past few years the future of the programme is currently under review by the District Health Board.

- **Clinical Co-ordination Service for people with Huntington's disease**

This collaborative project between Christchurch PHO and 'The Rehab People' provides a Canterbury wide service. The service assists people who have Huntington's disease, and their families, to access timely assessments, reassessments, linkages to support agencies and to provide experienced advice and care. This service has continued to receive excellent feedback from clinicians, people living with Huntington's and their families and other multidisciplinary service providers.

- **Korowai Youth Health**

The team based at the Youth Health Centre at 298 Barbadoes Street has provided a free health service to Canterbury youth. While the Trust receives funding from the PHO for doctor and nurse time, and some capitation funding, it relies heavily on additional philanthropic funding and grants from charitable trusts and the MSD to cover operational costs.

The Trust has worked hard this year to manage demand, and to better align the service towards the revised strategic direction of "providing a sustainable and integrated service aiming for a centre of excellence for a "youth one stop shop" in the primary care sector."

This year the team noted an increased trend for people presenting with anxiety; the impact of homelessness for many young people with no low rental housing available; and an increased demand by young people for food parcels.

PHO Programmes

The majority of PHO programmes are funded by the Ministry of Health through the PHO, and the PHO funds some additional programmes. The following is a brief summary of the main funded programmes that were offered:

| | |
|--|--|
| Alcohol Harm Reduction | A programme to support an ABC approach to alcohol harm minimisation, which was delivered by general practice teams. |
| Before School Checks | A free well child screening programme offered to all enrolled children aged 4 years. Trained practice nurses and/or public health nurses delivered the checks, which involved measuring height and weight, calculating BMI, and checking oral health, vision, hearing, behaviour, general development and health. |
| Care Plus | This programme took a proactive and coordinated approach to provide a negotiated plan of care for people identified as having high and / or complex health needs. |
| Chronic Packages of Care | These were tailored to meet the needs of people with chronic diseases or those identified with significant high risk factors of developing long term health concerns. The aim was to provide solutions that will meet an individual person's needs and ensure there is wide flexibility and choice. |
| Diabetes Care Improvement Packages (DCIP) | This programme was designed to provide equitable, consistent and high quality care to people diagnosed with diabetes. |
| Discretionary Fund | This funding allowed the purchase of health related services for people who have no means of accessing care through other mechanisms and are experiencing financial barriers. The PHO has maintained the discretionary fund since the DHB stopped funding it several years ago. |
| Language Line | This on-call translation service is designed for New Zealand residents who do not speak English as a first language. |
| Men's and Women's Wellness Checks | Wellness checks were delivered to those men and women aged over 45 years who have not visited a general practice in the past three years. The checks target those people potentially at risk of poor health. |
| More Heart and Diabetes Checks | This programme assisted general practice teams to optimise risk reduction measures for those people identified as being at high risk of cardiovascular disease. The service aimed to specifically target Māori, Pacific and Indian people and is also available to men aged 45 to 75 years and women aged 55 to 75 years. |
| New Patient Health Checks | New Patient Health Checks were designed to improve access to services by maintaining an up-to-date patient management system, and identifying people with health concerns including chronic disease and those at risk of developing a chronic disease. If required a one to one appointment with the newly enrolled person was provided, and / or a referral to other practice based services. |
| Nurse Led Asthma Clinics | These clinics were delivered at three general practices. Eligible people are offered two free nurse led asthma reviews within a 12 month period. The reviews used the GASP assessment and decision support tool which is |

| | |
|---|--|
| | based on New Zealand best practice guidelines. It was found that those people who attended all their appointments demonstrated an improvement in their asthma management. |
| Palliative Care | Palliative care funding supported general practice teams to provide care for people in the terminal phase of their lives. |
| Physiotherapy treatment for patients with osteoarthritis of the knee | The PHO funded this service to enrolled clients with osteoarthritis of the knee. It was a 10 week clinically based physical therapy intervention including home exercise. It aimed to improve mobility, pain levels, promotes greater levels of independence, improves quality of life and can result in a decreased reliance on medication. |
| Podiatry treatment for people with high risk feet & people with diabetes | The PHO funded two podiatry programmes. The first was designed to reduce pain, falls and complications associated with foot health problems. Eligible people were offered up to three free visits to a podiatrist to receive clinically based podiatry interventions. The service targeted those people with high risk feet and those at risk of developing foot complications. The second was the Canterbury wide podiatry service designed for people with diabetes who have high risk feet. This service aimed to provide an equitable and consistent approach to the management of people with diabetes who have high risk of developing foot complications. |
| Smoking Cessation Programme | This programme designed for people who want to give up smoking comprises brief intervention, cessation consultations and up to seven follow-up appointments. It has been running for over five years and there has been a steady increase in the uptake since its inception. General practices continued to work hard to identify those who smoke and provide appropriate cessation support. The CDHB Smoke Free team also provided extra support to practices by providing brief advice and cessation services to the enrolled population. |
| Youth Sexual Health | Free sexual health consultations were offered for people under 21 years of age when the main purpose of the consultation was for a sexual health or contraception matter. The aim was to reduce sexually transmitted infections, terminations and unwanted pregnancies. Patients could have a maximum of six visits within a 12 month period. |

The enrolled population is also able to access other Canterbury wide programmes such as:

| | |
|--|---|
| Acute Demand Service Co-ordination | An alternative to hospital care for people presenting in an acute state, through co-ordination of acute packages and acute nursing services. |
| Appetite for Life (AFL) | A nutritional programme led by nurses, providing practical advice to women and families with weight issues. |
| Canterbury Initiative Support Services (GP subsidised procedures) | A number of procedures delivered in general practice were subsidised. These included mirena insertion, musculoskeletal steroid injection, pipelle biopsy, skin lesion excision and newly diagnosed diabetic and insulin starts. |

| | |
|---|--|
| Community Respiratory Services | The programme has increased access to a variety of respiratory services which were previously only available in hospital. Spirometry testing and sleep studies were undertaken in some general practices, and pulmonary rehabilitation in the community. |
| Community Rehabilitation Enablement & Support Team (CREST) | CREST was launched in April 2011 to ease pressure on capacity-stretched hospitals after the earthquakes. This community-based supported discharge team facilitated earlier discharge from hospital to appropriate home-based rehabilitation services. The service was extended to accept referrals directly from general practice, providing those older people referred this way with care and support to be rehabilitated in their own homes, so as to avoid hospital admission altogether. |
| Immunisation | Available for children and adults provided by general practice teams and school based programmes. |
| Infant Feeding Service | Managed by Rural Canterbury PHO on behalf of the Canterbury PHOs the service was developed to protect, promote and support breastfeeding. It comprised a community based Lactation Consultation Support Service and the Mother4Mother Peer Support Programme. |

Continuing Education for General Practice Teams

In addition to the DHB funded education and training programmes provided Canterbury wide by the Canterbury Initiative and Pegasus Health, Christchurch PHO provides financial assistance to its member general practice teams in order to support their staff's continuing education requirements. The practices themselves decide the professional development activities best suited for their team's individual needs.

Integrated Performance Incentive Programme

The Integrated Performance Incentive Programme (IPIF) was developed by the Ministry of Health to replace the PHO Performance Programme which had operated for several years. The new programme was trialled during 2014-15 with five indicators:

1. 8 month old immunisations
2. 2 year old immunisations
3. More Heart and Diabetes Checks
4. Smoking Brief Advice and /or Cessation Services
5. Cervical Screening

Christchurch PHO achieved some pleasing results which are summarised below:

| IPIF Measures | National Target | Quarter One: Jun – Sep 2014 | | Quarter Two: Oct-Dec 2014 | |
|--|-----------------|-----------------------------|---------------------------|---------------------------|---------------------------|
| | | PHO Quarterly Target | PHO Quarterly Performance | PHO Quarterly Target | PHO Quarterly Performance |
| <i>More Heart and Diabetes Checks</i> | 90.0% | 74.0% | 74.2% | 79.3% | 80.6% |
| <i>Better Help for Smokers to Quit</i> | 90.0% | 74.6% | 94.7% | 79.8% | 96.0% |
| <i>Increased Immunisation 8 month olds</i> | 95.0% | 95.0% | 97.8% | 95.0% | 97.5% |
| <i>Increased Immunisation 2 year olds</i> | 95.0% | 95.0% | 97.5% | 95.0 % | 95.6% |
| <i>Cervical Screening</i> | 80.0% | 74.1% | 73.5% | 76.1% | 73.7% |

| IPIF Measures | National Target | Quarter Three: Jan-Mar 2015 | | Quarter Four: Apr-Jun 2015 | |
|--|-----------------|-----------------------------|---------------------------|----------------------------|---------------------------|
| | | PHO Quarterly Target | PHO Quarterly Performance | PHO Quarterly Target | PHO Quarterly Performance |
| <i>More Heart and Diabetes Checks</i> | 90.0% | 84.7% | 82.1% | 90.0% | 83.0% |
| <i>Better Help for Smokers to Quit</i> | 90.0% | 84.9% | 95.5% | 90.0% | 100.00% |
| <i>Increased Immunisation 8 month olds</i> | 95.0% | 95.0% | 98.7% | 95.0% | 96.0% |
| <i>Increased Immunisation 2 year olds</i> | 95.0% | 95.0% | 95.3% | 95.0% | 95.0% |
| <i>Cervical Screening</i> | 80.0% | 78.0% | 74.9% | 80.0% | 76.0% |

The Christchurch PHO Clinical Advisor and Service Development Facilitator assisted practices to identify practice based strategies and implementation plans to reach and exceed the IPIF targets.

Since November 2013 Canterbury PHO's have been required to provide monthly progress reports to the DHB and Ministry of Health about the percentage uptake of CVDRA and Smoking Brief Advice and/or Cessation Services. Extra funding provided by the Ministry for general practice and PHOs to target eligible populations was used to provide ongoing education for staff around cardiovascular risk assessments, improved IT support and audit tools and clinical leadership to practices.

Financial Statements

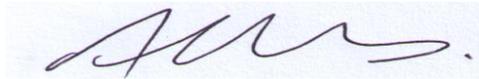
For the year ended 30 June 2015

Statement of Financial Responsibility

The PHO Directors are responsible for preparing the financial statements, ensuring they comply with the generally accepted accounting practice in New Zealand.

The Directors consider the financial statements of the company have been prepared using appropriate accounting policies, consistently applied and supported by reasonable judgements and estimates that all relevant financial reporting and accounting standards have been followed.

Signed on behalf of the Directors

A handwritten signature in black ink, appearing to read 'A. Chambers', is placed on a light blue rectangular background.

Dr Angus Chambers
Director