



1944-2023

SEVENTYNINTH ANNUAL REPORT AND

STATEMENT OF

ACCOUNTS FOR YEAR ENDED 31 MARCH 2023

CHAIRMAN: Jennifer Paynter

DEPUTY CHAIRMAN: Alice Ma

SECRETARY / TREASURER: Bette Swan

CHARTERED ACCOUNTANT: Jocelyn Dutton

BANKERS: Bank of New Zealand

LIFE MEMBER: Anthony Segedin

REGISTERED OFFICE: c/Respiratory Services, Auckland City Hospital,
Grafton

P O Box 60606, Titirangi, email: info@lunghealth.org.nz

TELEPHONE: 630 0051

AFTER HOURS: Secretary, Bette Swan, ph 021 894582

REGISTERED CHARITY CC26862

Lung Health Auckland Chairman's report 2023

Welcome to the 79th AGM for Lung Health Auckland.

2023 has been a tough year for many, with the recession following COVID and severe flooding during summer and this has brought financial hardship for many. If one is also coping with a significant respiratory illness, the hardships must be even greater.

To know we can offer help, even in small ways lifts my spirits.

I am so grateful to the small group of people 79 years ago who cared enough to raise the funds and set up the Tuberculosis Association Trust solely to help patients diagnosed with Tuberculosis. As Tuberculosis was being cured the numbers of cases declined and other respiratory illnesses were included in the mandate of the Association. It became known as the Tuberculosis and Chest Diseases Association and now Lung Health Auckland. Lung Health Auckland is there for anyone who is in need and has a significant respiratory illness. Over the years I have watched how Lung Health is slowly reaching out to help those with other respiratory illnesses; asthma, lung cancer, COPD, pulmonary hypertension, bronchiectasis. Patients with other illnesses do not generally receive the same levels of practical support that we offer. We are often told what a difference this can make.

We have to be careful not to take this for granted. At the time the Auckland Tuberculosis Association was formed there were many other Associations set up around the country. However, over time these have ceased to exist, and for respiratory patients outside greater Auckland, our area of operation, there is no similar assistance available.

Both Bette and I have thought about this, and although neither of us are ready to retire within the next year or two, there will be a time where we will be stepping aside, and it is so important that the ongoing functions of the Association continue.

So how have we helped respiratory patients this year? Again, the main need is getting patients to and from their appointments, usually by means of taxis, and although we debate if this is the best use of funds for patients, we always agree yes, it is.

I look at other larger charitable trusts and ask where is their help for the patients. Yes, research is important, but not more important than actually providing the means so the patients can benefit for this research, by receiving their treatment. Recently I saw a poster on a bus from the Cancer Society stating "cancer is big and so is our support". This triggered a response from me, as we are hearing from cancer nurses how hard it is to get help to get their patients to chemotherapy and radiotherapy. Lung Health have stepped in to support these patients. I have written to the Chairman of the Cancer Society and asked him where their support is for patients needing to get to treatment as in their statement.

We continue to pay for power during the winter months and if heaters are required will purchase these and have them delivered to them. There is also a large demand for food vouchers and petrol vouchers. We are very mindful of how little you can purchase with these. We have helped with rent payments for patients who have been hospitalised, and a car payment. The car had been immobilised by the finance company and his wife had a young child and no means of transport. Hospital parking is exorbitant but we do not feel Lung Health has the resources needed to cover this. The only exception is when I bring a patient to Auckland City Hospital for drug levels. This is a 4-hour appointment. The asthma nurses are now able to provide blankets for patients and we supply dust mite covers where needed. Lung cancer patient's taxis are often used to ensure they receive their treatment. So many of our patients have complex medical issues and live in complex situations and one size just does not fit all – our ability to be versatile in what we do can be a real game changer.

This response from a patient demonstrates this: " Im so humbled, this helps immensely, I can rest and not worry about food for the next 2 weeks, and I can focus on healing and getting my energy back, as best I can. Please know how grateful I am to your establishment for this very kind service"

Other activities we helped the Respiratory Ward and Public Health recognise World TB Day. And provided goodies at Easter and Christmas.

Food vouchers were also given to patients in need at Christmas.

I am pleased to report that the Asser Trust called for submissions. Our submission was successful and we have received \$60,000.00

Lung Health is still holding a \$10,000 seeding grand available for the next TB Conference in New Zealand.

This year the financials have been prepared by Jocelyn Dutton and reviewed by Chris Lynch & Associates

There have been changes introduced to the Incorporated Societies legislation. The Incorporated Societies Act 1908 has been replaced by the Incorporated Societies Act 2022 which came into effect 5 April 2022. Under this new Act all existing societies have a period of three and a half years to re register with the Registrar of Incorporated Societies. We are required to accompany our re registration with the filing of a constitution that is compliant with the requirements of the new Act. Our plan is to undertake this re registration in the coming year.

Martin Edwards and Mandy Pettit from Forsyth Barr continue to manage the Lung Health investment portfolio. I thank you for the excellent advice you have given.

I want to thank everyone who has cared enough to ask for help for a patient in need, and especially for the Public Health Nurses who bring the patients to the clinic.

I especially want to thank Bette Swan and Alice Ma for their commitment to meet monthly to discuss the finances and complex requests.

Bette, I know this has been a hard year for you and I especially want to thank you for always being available, and for your commitment to meet with services to explain how Lung Health can help their patients. I want to acknowledge you have not had a pay increase in over a decade now.

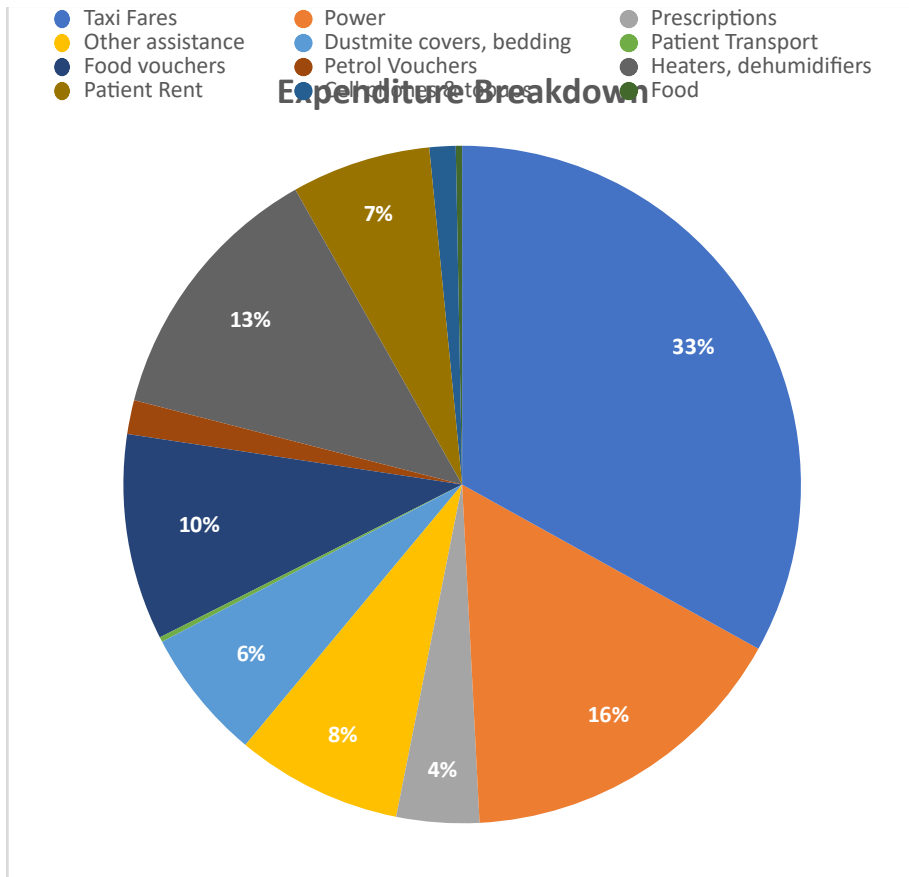
And thank you for attending the AGM today as without a quorum we would be able to meet the Charitable Trust requirements to hold this meeting.

Jenny Paynter

Chairperson

Assistance Given:

0	2022-23	2021-22
Taxi Fares	16470.93	10864
Power	8034.12	8525
Prescriptions	1965.05	1188
Other Assistance	3949.51	2093
Dustmite Covers, Bedding	3123.98	Included in other amenities
Patient Transport	115.85	323
Food Vouchers	4900.00	5600
Petrol Vouchers	807.91	2300
Heaters, dehumidifiers	6378.33	Included in other amenities
Patient Rent	3310.00	-
Cell phones, top ups	623.00	585
Food	150.00	-
Other Amenities	-	10373
Totals:	\$49828.68	\$42569.44

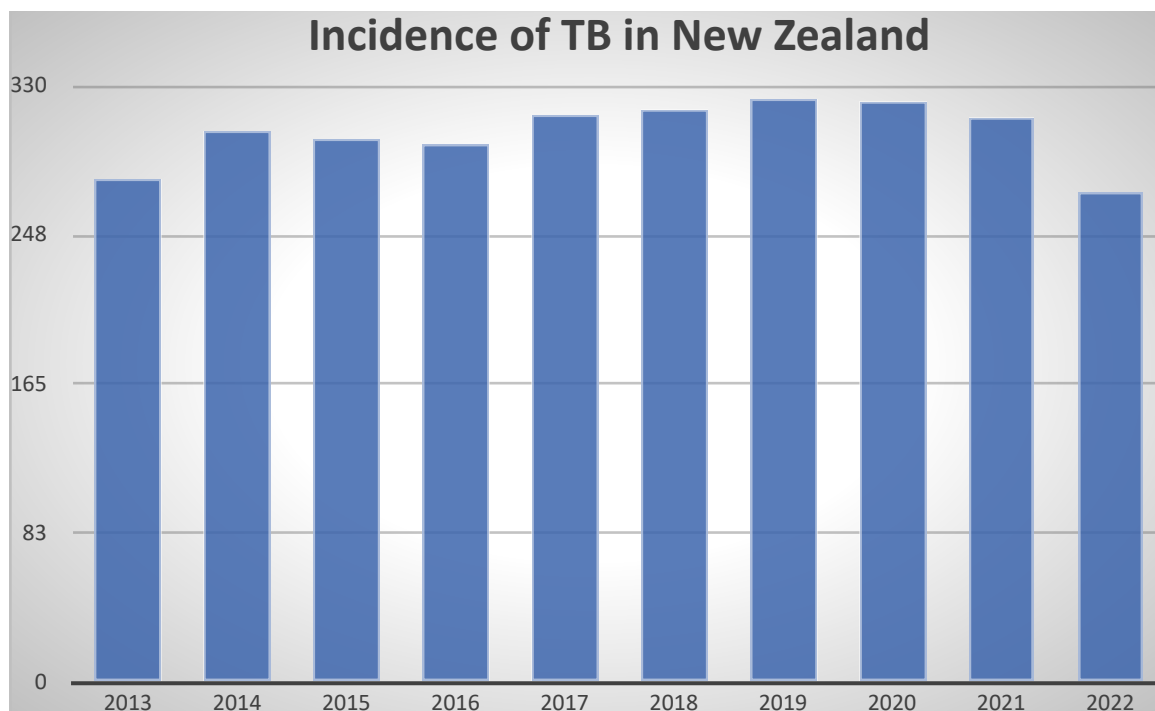


INCIDENCE OF TUBERCULOSIS THROUGHOUT NEW ZEALAND 2022

Figures supplied by Surveillance Query Team, Institute of Environmental Science & Research Ltd

TB cases notified in the year ending 31.12.22 = **271**

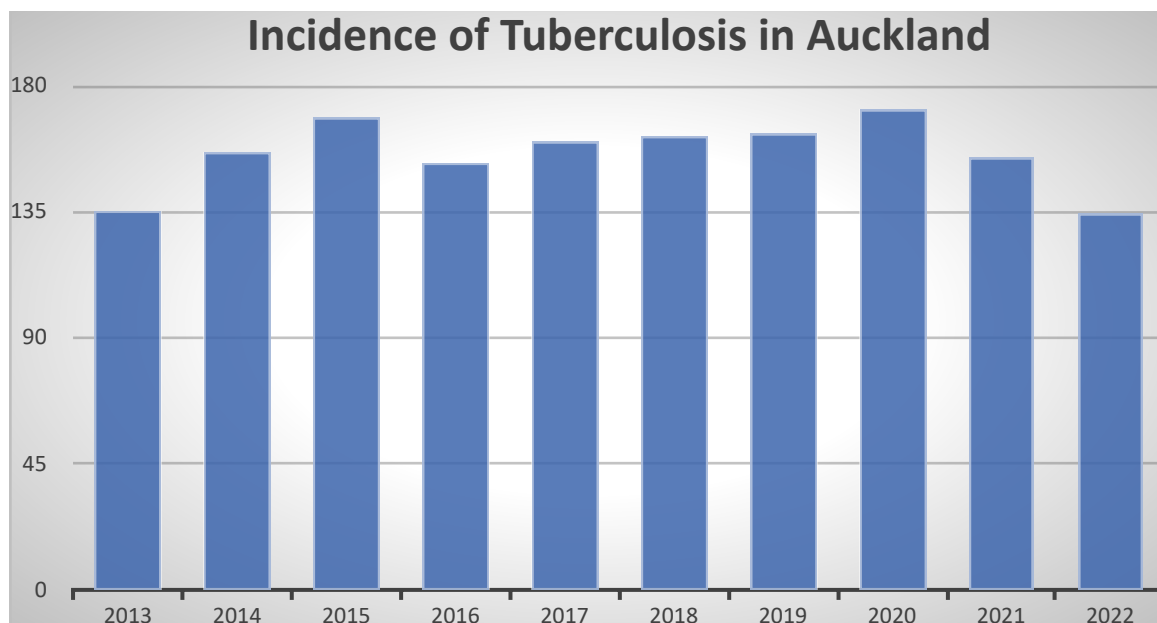
2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
278	305	300	297	314	317	323	321	313	271



Incidence of Tuberculosis in Auckland 2022 (2021) = 134 (154)

Auckland notifications, previous years:

2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
135	156	169	152	160	162	163	171	154	134



FROM AUCKLAND CHILDREN'S TB CLINIC REPORT 2022 (2021)

Number of new patients seen: 61 (91)

Total new cases: Latent TB Infection **16** (24), TB Disease **5** (7)

Ethnicity: Samoan/Tongan 1; African 1; Tuvaluan 1; Malay 1; Filipino 1

Age: < 1 y: 0 1-5 yrs: 4 6-15 yrs: 1