

The Wilson Home Trust Statement of Intent

July 2017



The Wilson Home Trust
for Children with Disabilities



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1. Foreword from the Chair of the Committee of Management, Adina Halpern

- 1.1. I am delighted to be able to present the first Statement of Intent of the Committee of Management (**COM**), which is the formal response to a Letter of Expectations from Waitemata District Health Board (**WDHB**) as Trustee. In this document we describe the work plan and KPIs for 2017/18, which will be monitored by the Trustee, as well as our vision for the future direction of the Wilson Home Trust (**WHT**).
- 1.2. The members of the COM and Trust Manager are almost all newly appointed. We are focused on achieving the overall purpose of the Trust, which, to quote the Trust Deed, is: “to apply its assets and funds generally to provide care and rehabilitation to Children with Disabilities living in the Qualifying Area and to provide respite and assistance to their Families and to work within the community living in the Qualifying Area to further such objectives.”
- 1.3. There are a number of significant challenges to be overcome in the next few years, and we hope to do this in partnership with our beneficiaries and stakeholders, which include the local residential community who enjoy the amenity value of the Lake Road site. We describe the challenges under the heading Strategic Context below, but in summary:
 - (a) In financial terms the high value of the Lake Road site is currently under-utilised and it is not therefore providing maximum value to beneficiaries.
 - (b) Relationships with stakeholders and beneficiaries need to be improved.
 - (c) Significant capital works are likely to be required on issues in some buildings to address problems currently being investigated.
 - (d) There will be a need to raise funds so that grants to beneficiaries are not restricted.
 - (e) Prioritisation of expenditure may be necessary to ensure that beneficiaries across the qualifying area are treated equitably.
- 1.4. We look forward to continuing to actively engage with a wide range of beneficiaries and stakeholders in 2017/18 as we develop our strategic plan, which will include a master plan for the Lake Road site to explore its potential under the new planning regulations.

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2. Strategic Context

2.1. **Governance:** The WHT was set up as a charitable trust in 1937 (registration number CC21396) to provide a home for crippled children. In 1999, the Court varied the original trust deed in light of changed medical treatments, social conditions, and treatment approaches. The day to day running of the WHT is managed by a Trust Manager and the COM, subject to the control of the Trustee, which is WDHB. Of the five members of the COM, two are appointed by CCS Disability Action (Auckland), and three are appointed by WDHB.

2.2. **Beneficiaries:** Beneficiaries are defined in the Trust Deed as:

- (a) children aged under 22 years of age and their families;
- (b) who have a primarily physical disability; and
- (c) and live in the qualifying area, which is the “old” Auckland Province, roughly the upper North Island (see map below).



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2.3. What WHT provides:

2.3.1. WHT provides grants:

- (a) for equipment and activities;
- (b) for **services** such as swimming in the hydrotherapy pool and playgroup sessions for pre-schoolers and their parents;
- (c) to subsidise the provision of **respite care and rehabilitation services** at the Wilson Centre;
- (d) to provide **assistance to other service providers**, such as Touch Compass, Art Adventure and the Wilson School, by the provision of premises at no charge or at a reduced rate; and
- (e) for the local community and Takapuna Grammar, beautiful gardens and a chapel for weddings, other events, and school activities (such as drumming).

2.3.2. How WHT supports the quality of life of beneficiaries across the qualifying area will be the subject of further work during 2017, in consultation with beneficiaries and other stakeholders, following feedback from consultation. The grants process has been significantly overhauled this year.

2.4. **Revenue:** The main source of income is from rental payments by the WDHB, which runs the Wilson Centre. The future planning of WDHB Child Services, ACC, which funds rehabilitation services, and the Ministry of Health (**MOH**), which funds respite care, therefore has a major impact on the WHT and is crucial to our future planning. In addition, there is income from weddings and other events, donations, and investment income.

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2.5. Financial Overview

2.5.1. The following summary of financials supports the work plan for the Wilson Home Trust.

Wilson Home Trust Operating Budget for year ending 30 June 2018

Previous Year Actuals Draft		2017/18 Budget
	Income	
83,083	Bequests and Donations	520,000
15,217	Events	20,000
913,198	Property Rentals	915,000
6,469	Interest	10,000
1,017,967	Revenue	1,465,000
	Expenditure	
164,345	Family/Children Grants	300,000
18,763	Accounting	19,500
15,000	Audit	15,000
42,536	Administration	43,725
11,174	Legal	5,000
20,593	Events	35,000
22,334	Committee Fees	68,000
14,240	Consultancy	14,500
94,854	Contractors	38,000
150,510	Salaries and Wages	352,400
33,820	Investment fees	40,000
56,787	Building Maintenance	61,000
27,782	Grounds Maintenance	43,500
	Property Projects	400,000
672,738	Expenditure	1,435,625
345,229	Net Operating Cash Surplus	29,375
	Non-cash items	
225,673	Interest income reinvested	168,085
261,375	Dividend income reinvested	68,400
(121,569)	Depreciation	(125,000)
710,708	Net profit for the year	140,860

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3. Challenges

3.1. **Property and Buildings**

- 3.1.1. **Building condition:** The Lake Road site contains a number of buildings of various ages and conditions, some of which may be coming towards the end of their useful life. A building condition report has been commissioned which will enable the WHT to assess the state of the current buildings.
- 3.1.2. **Seismic:** A seismic survey of all buildings owned by the WHT has indicated remedial work will be necessary on some buildings. Further, over the course of 2017, detailed seismic assessments and estimates of the cost implications of recommended upgrades will be completed to enable the WHT to scope the magnitude and indicative cost of work necessary to bring buildings up to the appropriate new building standard (**NBS**). Any decision to proceed with seismic upgrades of specific buildings could be influenced by the opportunity for future leasing commitments.
- 3.1.3. **Asbestos:** In addition, asbestos was used in the construction of some of the buildings. The WHT is obliged to manage any asbestos risk which exists, initially by way of a specialist survey, the compilation of an asbestos register, and an asbestos management plan. A detailed site wide survey is currently being undertaken which will enable us to manage this situation going forward.
- 3.1.4. **Lease term:** The current lease for the Wilson Centre terminates in June 2019, and it is a condition of the WDH that certain seismic work is done to buildings it occupies. Whether buildings have reached 'end of life' will depend on usage, so having a long term lease arrangement will be important as strategic decisions are made by the WHT.
- 3.1.5. **Future development potential:** The WHT is obliged to maintain the main Wilson Home building (**Homestead**), and/or where continuing repair becomes uneconomic, to replace the Homestead with a replacement in like character. There is also an obligation to maintain the grounds and Homestead building in a character and state "*which is restful, attractive and assisting of convalescence and in the spirit and to the standard which the original Settlor would have wished to have seen upheld,*" (Trust Deed). Other parts of the 5.1 hectare property could be subdivided, sold, leased or developed in some other way, provided that the proceeds of any development are kept in a separate capital account and applied for investments of a capital nature. Whether any such development should be considered will be part of the strategic plan. No development will take place without extensive consultation with the local community and beneficiaries.

3.2. **Support to beneficiaries**

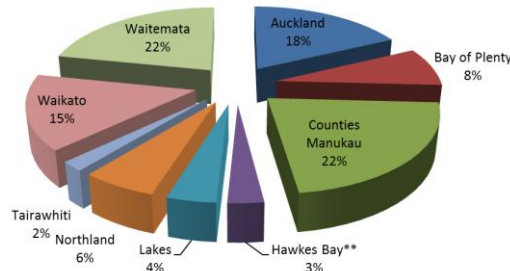
- 3.2.1. The Trust beneficiaries are resident across a large qualifying area covering the districts of the following DHBs: Northland, Auckland, Waitemata, Counties Manukau, Waikato, Lakes, Bay of Plenty, Tairāwhiti, and the northern half of Hawkes Bay DHB.
- 3.2.2. The population of children in this area is uneven, but it appears from an analysis of census data that 62% of eligible children and young people live in the metro Auckland area, with 22% at both Counties Manukau and Waitemata DHBs, and 18% in the Auckland DHB area. When deprivation is considered, the majority of children in the total area who live in quintile 4 or 5 of deprivation reside in the Northland, Tairāwhiti, and Counties Manukau areas, though this

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statistic represents a small number of the total number of physically disabled children in the qualifying area.¹

Estimated Eligible Population by DHB Area



3.2.3. The fact that people with physically disabled children are choosing to live in metro Auckland because of specialist services (including those provided on the Wilson Home site) was born out by the workshops which the COM undertook during May and June 2017 (see below). The deprivation in Northland was underlined by participants at a workshop in Whangarei, and the strategic direction of the WHT must take into account that deprivation and, therefore, need is different across the qualifying area.

3.2.4. While some services provided at the Lake Road site will not be relevant to beneficiaries who reside outside metro Auckland (e.g. swimming or preschool/parent groups), beneficiaries who usually reside outside metro Auckland may reside at the Wilson Centre for a period. It was clear from the recent workshops that support from the WHT in the form of information and networks is clearly of interest across the region and there may be activities which can be replicated (e.g. school holiday family activity).

3.3. Poor engagement with beneficiaries and stakeholders

3.3.1. There was significant criticism of WHT during 2016 and there were a number of key staff who left the Trust. The new COM sees engagement with beneficiaries and stakeholders (including the local residential community, WDHB and other DHBs across the qualifying area, ACC, and the MOH) as critical to the WHT achieving its potential and meeting its overall purpose.

3.3.2. **Survey:** Engagement with beneficiaries in 2017 has included commissioning of a confidential electronic survey run by Buzz Channel, an independent research and engagement company. Feedback was received from almost 400 respondents.

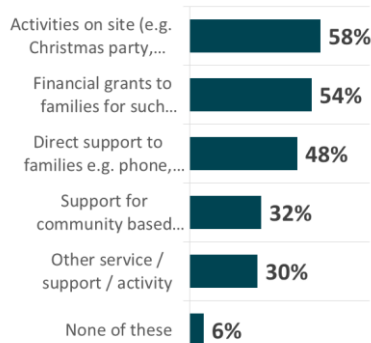
3.3.3. Many of the respondents reported a connection with the WHT for more than 5 years, with 33% reporting the connection as being more than 10 years. The following table illustrates the connection with the WHT.

¹ From 2013 census data, for the ages 0-14 the rate of physical disability in New Zealand is 11%, and for the ages of 15-22 the rate is 16%. Rates of physical impairment have been used to determine estimated numbers of eligible children living in each DHB region.

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Which of Wilson Home Trusts' activities and support services have you or your family used?



3.3.4. The main objectives of this engagement survey were to identify what is important to beneficiaries and families, explore what the Trust should offer in the future, discover best methods of communication, identify opportunities for activities and supports that are not currently offered, and enable the WHT to make informed decisions around its future supports and the way these are provided.

3.3.5. **Survey themes:** The three main themes of the survey responses were:

- (a) The consequences for beneficiaries and professionals of the loss of the Family Support Coordinators (raised by 75% of families with children with a disability);
- (b) The need to improve communications (raised by 53% of families with children with a disability); and
- (c) A desire for up to date information about the, disability activities and services, and newsletters (raised by 50%).

3.3.6. **Workshops:** The results of the feedback from the survey was presented at ten workshops held across the WHT qualifying area (Whangarei, Auckland (6 meetings), Hamilton, Tauranga, and Rotorua). At these meetings, attended by 60 participants, further discussion was held on the current support provided and future developments of the WHT. This feedback will be used by the COM to develop its strategic plan for 2017/18, in consultation with beneficiaries and stakeholders.

3.3.7. **Workshop feedback - strengths:**

- (a) When talking about what they valued about the WHT, many referred to the **physical site on Lake Road**. Those who have visited the site on Lake Road praised it as a special place marked by a sense of belonging. In particular, those who used the rehabilitation facilities and respite care at the Lake Road site emphasised how this warm and welcoming atmosphere was key to ensuring the children (and the entire family) have a great experience.
- (b) Others mentioned the **grants and funding** offered by the WHT. Those who have applied to get funding for equipment, activities, and events, described how 'life-changing' it was for their children and the entire family.

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- (c) Many praised the WHT's goal of helping **children with physical disabilities and their families**. A unique point of difference for the WHT was their mission to help the wider families of children with physical disabilities. Workshop attendees commented on the lack of support available elsewhere for parents of children with special needs as something that is not commonly offered in the disability sector.
- (d) Another key strength identified by workshop attendees was the **specialised respite care** (provided by the Wilson Centre), which is not widely available across Auckland and other parts of New Zealand.

3.3.8. Workshop feedback - issues:

- (a) The **loss of family support coordinators** was regarded as a key issue. Families regarded the family support coordinators as an important lifeline for parents, especially those with a newly-diagnosed child, providing all kinds of help and support, and connecting them with key services. The coordinators provided holistic care to families as an information provider, connector, navigator, adviser, mentor, and counsellor. Their loss has been keenly felt. Professionals also noted that the loss of the coordinators has impacted the service they could provide their clients, as they had used the coordinators as a source of information/network, and as a sounding board.
- (b) Many highlighted the **lack of communication** as a key issue.
- (c) Others commented on the **difficulty of accessing information**. With the loss of the family support coordinators, who used to point families in the right direction, families were finding it difficult to search for, access, and make sense of all the information available on their child's disability and the services available to them.

3.3.9. Workshop feedback - top priorities:

- (a) Reinstate the family support coordinators, or a similar role, with people with personal experience, who are able to empathise and provide families with the information and support they used to rely on;
- (b) Improve the WHT's communication strategy and use multiple communication channels to ensure the WHT engages with all stakeholders;
- (c) Help families navigate the plethora of information in the disability sector as well as connect with other parents, agencies, and organisations;
- (d) Reintroduce popular activities and support for children with physical disabilities and their families e.g. school holiday activities;
- (e) Continue to provide grants and financial support, and consider offering other types of funding such as crisis grants for areas where there is serious deprivation;
- (f) Re-affirm alliances, partnerships, and opportunities for collaboration with other organisations across the region to maximise the benefits for local communities;
- (g) Advocate on behalf of the disability community and become a strong voice for families with children with physical disabilities;
- (h) Look for opportunities to fundraise and seek sponsorships to increase the revenue base and help fund programmes and support; and

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- (i) Become an inspirational model for other organisations and communities to replicate or partner with across the region.

3.3.10. Differences between North Shore participants and others:

The survey indicated that overall, the loss of the family coordinators and all of the various types of support they offered (largely on-site) was felt most keenly among beneficiaries from the North Shore. For those living in other areas, while they referred to the value of the Family Support Coordinators, in particular as fonts of knowledge and networks within the sector, they tended to focus more on financial support and communication/newsletters. From participants at workshops it was clear that the support and networks of the family coordinators had been appreciated across the WHT qualifying area.

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4. Work plan

4.1. The following table details the key initiatives which the WHT will deliver in 2017/18. This will begin to provide a base for the planning of key activities, and provide a framework for future strategic planning.

Key projects and initiatives	Description	2017/2018
<i>Future planning</i>	Development of strategic plan	<ul style="list-style-type: none"> • A 3-5 year strategic plan will be developed in consultation with stakeholders, beneficiaries, and the Trustee. • A master plan, identifying the site potential for future development within the Trust Deed, will be created.
<i>Financial stewardship</i>	Financial position	<ul style="list-style-type: none"> • A 3 year investment strategy will be completed. • A 3 year facilities capital plan will be completed.
<i>Support to beneficiaries</i>	Services to beneficiaries	<ul style="list-style-type: none"> • Identify how support to beneficiaries will be provided in consultation with beneficiaries and stakeholders. • Beneficiary data will be collected on all grant applications, including geographical and ethnic information.
<i>Building compliance to standards</i>	Maintenance and upgrading of WHT buildings/sites	<ul style="list-style-type: none"> • A detailed seismic survey will be completed on all buildings owned by the WHT. • An asbestos register will be developed and maintained on all buildings owned by the WHT. • Building condition reports will be completed.
<i>Engagement</i>	Engagement with stakeholders and beneficiaries	<ul style="list-style-type: none"> • Regular and on-going engagement with beneficiaries will occur, including by way of social media, focus group meetings, and engagement of interested groups including the Family Action Group. • 80th anniversary celebrations will be held in December to coincide with Disability awareness week, and will include the annual Children's Christmas party. • The COM will report, in writing, to each Trustee Board meeting, and bi-annually the Chair of the COM and Trust Manager will meet with the Trustee. • MOH, ACC, tenants/licensees, and the local community will be consulted as part of the strategic planning process
<i>Public communication</i>	Communication	<ul style="list-style-type: none"> • A communication plan will be developed which will include: <ul style="list-style-type: none"> ○ The production of a regular newsletter;

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<i>and awareness</i>		<ul style="list-style-type: none">○ The website will be updated regularly to highlight key information and messages;○ A Facebook page will be developed and maintained to establish communication with families and stakeholders; and○ Exploration of media opportunities for promotion and raising awareness of the WHT and its services.
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5. Key Performance Measures

- 5.1. The following key performance measures (**KPI**) and targets form the basis for the COM's accountability. These measures will provide a base line for the development of targets for the 2018/19 year and will be reported to the Trustee monthly.

Deliverable	Complete
Expenditure matches budget.	
All grant applications received are acknowledged in writing within 5 days.	
All grant applications received are presented to COM within 30 working days of receipt.	
All grant applicants receive decision of COM in writing within 5 working days of COM meeting.	
All grants approved meet Trust Deed criteria.	
All grants approved have been processed according to WHT policy.	
Data on age, ethnicity, residential area, and type of disability is maintained on all written applications received, accepted, and declined.	
Production of monthly reporting on grant funds committed and distributed.	
Health & Safety site meetings occur monthly.	
Health & Safety Risk register is maintained and signed off monthly by COM.	
Asbestos register is monitored monthly by COM.	
Planning report covering the Lake Road site, incorporating all unitary plan implications, to provide a sound basis for determining the brief for any future development of the site by September 2017.	
Asbestos register is established by November 2017.	
Building condition report is completed by November 2017.	
Communication plan is implemented by December 2017.	
Review of Investment Strategy by December 2017.	
Draft master plan and strategic plan developed for consultation with beneficiaries and stakeholders including how support to beneficiaries meets the Trust Deed, by March 2018.	