

### Ava's story



"The hardest thing in the world is watching your pavents cry; I remember how sad they were and I remember thinking,"I never want anyone to go through what my mum and dad and I went through!"

My brother Jeremiah passed away from brain cancer when he was 8 years old and I was 10. The hardest thing in the world is watching your parents cry; I remember how sad they were and I remember thinking, "I never want anyone to go through what my mum and dad and I went through".

My family, friends and I have been fundraising like crazy to try and find a cure for cancer. We became involved with Cancer Council because they are the biggest non-government funder of brain cancer research in Australia.

The first year, I shaved off my hair during Cancer Council's Brain Cancer Action Week and raised over \$20,000. In 2012, my friends and I did a 24-hour read-a-thon and we raised \$5,000.

When I'm older, I hope to be a paediatric neurosurgeon. Maybe one day I'll be able to operate on kids like Jeremiah, knowing that after this operation that child will be able to go home and be a kid again.

Jeremiah was always my best friend. He never let me down. I'm so lucky to have a brother like Jeremiah.

Ava Del Tufo, aged 14, is Jeremiah's sister, Cancer Council NSW Fundraiser and aspiring paediatric neurosurgeon.

Cover: Ava Del Tufo



Use your QR reader to view Ava's story or visit our 'What will you do today to help beat cancer?' section at: youtube.com/CancerCouncilNSW1

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### **Our vision**

#### **Cancer defeated**

Our vision will be realised when lives are not cut short nor the quality of life diminished by cancer.

### Our mission

#### To defeat cancer through engaging the community

Cancer Council NSW connects people and organisations to the cancer cause. Together we can build insights into the significance of cancer in our lives and contribute our talents towards the vision of cancer defeated. We work across all cancers.

The impact from our work together will be visible in changing:

- The lives of cancer patients and carers
- Scientific knowledge
- Community understanding and behaviour
- Society, policy and practice to advance cancer control.

Increasingly, people will work in organisations and live in families and social settings which advance the control of cancer and where resources (people, ideas, services and funds) are developed globally and locally to meet the challenges of cancer.

### **Our values**

**Courage** We will do what it takes to beat cancer. We value the determination and drive of our volunteers and staff to make a difference.

**Collaboration** Through fundraising, partnerships and volunteering, we will focus and amplify the efforts of the wider community.

**Independence** We are accountable only to the cancer cause and the community.

**Forward thinking** We are contemporary in outlook, innovative in approach and solution focused.

# Our role and purpose

We are an independent and forward-thinking community of people, where ideas and charity come together to make a difference in the fight against all cancers.

### About us

Every year in NSW alone, more than 36,600 new cases of cancer are expected to be diagnosed – about 100 each and every day in NSW. On average, 36 people will die of the disease every day in this state, and the impacts on families, carers and communities are considerable.

All of us at Cancer Council NSW – our staff, volunteers, supporters and stakeholders – are committed to diminishing the toll wrought by every cancer diagnosis and death. We do this through world-ranking research, prevention, advocacy and support programs, so that we can make a difference in the fight against all cancers.

Cancer Council NSW is a member of Cancer Council Australia, along with our other state and territory Cancer Council counterparts.



# Message from the Chair and CEO

At Cancer Council NSW, we are working with the community to help beat cancer. This year, we asked the question: **What will you do today to help beat cancer?** We asked this of ourselves, our supporters, our volunteers and of the community – because we know that every single day, there is something that each of us can do to help beat cancer. From wearing a hat and sunscreen, participating in a research study, supporting a family member, sharing a petition, attending an event or making a donation – to working or volunteering at Cancer Council NSW: there is always a way to get involved.

In 2012/13, Cancer Council NSW, with the support of the community, provided almost \$34 million dollars directly towards cancer research, advocacy, prevention and support programs and services across the state. We are proud to be a part of the complete cancer journey.

#### **Advances in cancer control**

This year, our research discovered that nearly 30% more Australians are alive who would have otherwise died from cancer over 20 years ago, due to improvements in cancer prevention, screening and treatments. Our *State of Cancer Control* report showed that although more people are alive who would have otherwise been lost to bowel, breast and lung cancers, there remain areas with much more work to do, as prevention, detection programs and treatments have not yet reached their full potential. These figures give us great confidence that we are making inroads towards beating cancer, but we also realise that the journey will be long and that no single approach will see our vision realised.

#### Significant growth in our investments

Our investment strategy takes a long-term perspective, to ensure our financial stability. This year was a strong year for our investments, delivering a 17% return, making up for last year's disappointing 0% return. We are pleased that our 10-year return of 9.5% continues to outperform the ASX200's 6.1% over the same period.

#### **Changes in senior management**

This year was one of transition in senior leadership. In October 2013, we farewelled long-term CEO Dr Andrew Penman AM after 14 years in the role, and welcomed Ms Regina Sutton to the position. Sadly, in June this year, Regina had to make the difficult decision to leave Cancer Council NSW for personal reasons, and at the end of June, Mr Jim L'Estrange was appointed to the role on an interim basis. This appointment was designed to support the review of our strategy and produce the next-generation strategic plan for the organisation, to begin in 2014. Final decisions about the permanent CEO appointment will be made later in 2013.

During this transition time, we have remained strong under the leadership of the Executive team, a group of passionate and long-standing Cancer Council NSW leaders. The Chair would particularly like to acknowledge Ms Kathy Chapman, Director of Health Strategies, who took on the role of Acting CEO on a few occasions through the year.

#### Investment returns over ten years



Our investment portfolio consistently outperforms the market, with returns exceeding the ASX200 returns.

#### Strategic planning - 2014 and beyond

As our existing Strategic Directions 2010-2014 are nearing maturity, this year Cancer Council NSW began laying the groundwork for developing a refreshed strategic intent, to be finalised for 2014. Significant work has already been undertaken to review where we sit within the charity and cancer space. In the second half of 2013, we will begin the process of refreshing our strategic priorities, consulting with key stakeholder groups to create our next-generation rolling five-year strategy. So much of what happens at Cancer Council NSW is already making a significant impact, yet we recognise that there are existing opportunities that we can better leverage, and ways we can work smarter and more effectively.

Cancer Council NSW is incredibly privileged to be 96% community funded, and we know that we have a great responsibility in ensuring that these funds are used effectively and to maximise the best possible outcomes for the NSW community for the future. Our strategic refresh will ensure this.

#### Thank you

Everything that is reflected in the following pages of this report is the result of a passionate community of supporters who believe in what we do and who are dedicated to the cancer cause. Thank you to each of our donors, fundraisers, volunteers, supporters, partners, advocates and staff for helping us to achieve all that we do, and sharing our vision of cancer defeated.

Bruce Hodgkinson SC Chair

Jim L'Estrange Chief Executive Officer



#### Find out more

Visit cancercouncil.com.au to view a full copy of our five-year strategic plan, Strategic Directions 2010-2014



Use your QR reader to view our campaign or visit our 'What will you do today to help beat cancer?' section at:

youtube.com/CancerCouncilNSW1

Where our funds came from and where they were spent

Net revenue

after deducting fundraising and retail costs

**Expenditure and surplus** 

33.6% \$14.8m Research expenditure

85.7% \$37.7m Net fundraising proceeds (includes bequests, event income, donations and regular giving)

15.9% \$7.0m Cancer information and support services

> 16.4% \$7.2m Statewide program delivery

10.2% \$4.5m Health advocacy and prevention

7.5%

\$3.3m Media, communications and marketing

2.8% – \$1.1m Surplus invested

5.7% \$2.5m Investment income (excluding capital movement)

5.0% \$2.2m Grant income

13.6%

and investment costs

# **Our highlights**

HOW WE INVEST IN BEATING CANCER

#### \$44m revenue delivers:



\$7m Information and support



\$4.5m Prevention programs and advocacy

#### ADVOCACY

Our advocacy supporters including 10,600 CanAct Community members led to some big wins:

Update of sun protection guidelines to reduce children's risk of skin cancer

New State Government smoke-free legislation in NSW

Health Star Rating System to be introduced on food labels Future ban on commercial solariums

#### **PREVENTION**

66%
SunSmart
primary
schools

83% SunSmart childcare centres

3,500+ parents attended Eat It To Beat It sessions

We are dedicated to our vision of a society where lives are not cut short nor the quality of life diminished by cancer.

#### **INFORMATION AND SUPPORT**

2,000+

18,000+

Families supported through our Pro Bono Programs

Calls were made to Helpline

800

Professional firms nationally offered pro bono services

200

Cancer-specific telephone support groups

#### RESEARCH

#### Our researchers have global collaboration and reach



**Nearly 30% more Australians** are alive who would have otherwise died from cancer over 20 years ago.

#### Our top-funded cancer research areas were:

- Research benefiting all cancers
- Endocrine (including pancreatic)
- Colorectal (including bowel)
- Brain
- Breast

#### **OUR COMMUNICATIONS**

We are the leading cancer voice in NSW.

We were recognised with the not-for-profit sector special communication award at the Australasian Reporting Awards.

We were pleased to be recognised as one of 10 finalists in the revenue greater than \$30 million category in the PwC Transparency Awards.

#### **OUR COMMUNITIES**

Community offices across NSW

and other projects

Volunteers working

11,000

Australia's Biggest **Morning Tea hosts** 

4,400

Daffodil Day

# Big Kev's story

"VOLUNTEERING SAVES A WAGE, AND THAT'S
MORE MONEY TO FIGHT THIS AWFUL DISEASE.

ONE DAY WHEN I LEAVE THIS WORLD,
I WANT TO FEEL SATISFIED THAT I'VE
BEEN A PART OF CANCER COUNCIL,
TRYING TO FIND A CURE FOR CANCER."

My name is Kevin York; I'm 73 years old and I work as a volunteer at Cancer Council NSW.

I was on a holiday in Canada with my wife, Carol, when she would get a little bit puffed out when she was walking, which was unusual for her. When they investigated, we found out that she had a tumour in her oesophagus.

The first thing she said was: "Who's going to look after you?" Because that's the sort of woman she was. One day while she was in hospital, I asked: "How do we stop this insidious disease?" Someone suggested I volunteer at Cancer Council NSW, so that I could be a part of beating this disease.

The friendship of the Cancer Council staff is unbelievable, and when I was going through my bereavement that was really good for me. Maybe I'm a bit selfish because I believe that in helping somebody else, I'm forgetting my own problems.

Volunteering saves a wage, and that's more money to fight this awful disease. One day when I leave this world, I want to feel satisfied that I've been a part of Cancer Council, trying to find a cure for cancer.

**Big Kev, Cancer Council NSW volunteer** 



Use your QR reader to view Big Kev's story or visit our 'What will you do today to help beat cancer?' section at:

youtube.com/CancerCouncilNSW1



### **Strategic Priority 1**

#### To drive major advances in research, ensuring no cancer is ignored.

Cancer Council NSW is committed to funding research to help beat cancer, and remains the largest funder of cancer research in the not-for-profit sector in our state. Through our research, we seek out opportunities to improve the collective knowledge about cancer, and use these insights to inform our cancer prevention, support, information and advocacy programs.

This year, our research investment remained steady, at \$14.8 million. The following highlights represent just a snapshot of Cancer Council NSW's more than 140 research studies.

#### Increasing the number of lives saved

This year, we revealed that nearly 30% more Australians are alive who would have otherwise died from cancer over 20 years ago. This is due to continuing investment into research, which has resulted in improvements in cancer prevention, screening and treatments.

Our State of Cancer Control report showed that more people are alive who would have otherwise been lost to bowel, breast and lung cancers; however, we also found that some cancer types - particularly cancers of the brain, pancreas and oesophagus - have had much smaller improvements over the last two decades. These cancers are the forgotten cancers – they are globally the most underfunded and for this reason, Cancer Council NSW has determined these to be three of our priority areas for cancer research.

While our State of Cancer Control report clearly indicates that we now lose fewer people to cancer, there is still a lot more that can be done in all cancer types, as prevention, detection programs and treatments have not yet reached their full potential.

#### Prostate cancer: how much treatment is too much?

Prostate cancer is the **most common cancer** recorded in Australia. Our research indicates that the number of men living with prostate cancer will more than double in the next decade, potentially increasing the burden on the healthcare system, and leaving many men wondering whether the treatment is worth the adverse side effects.

Deciding on a course of treatment for prostate cancer is often difficult, as patients naturally want the best survival outcomes, yet the treatments can leave them with a diminished quality of life, with side effects such as incontinence, bowel problems and erectile dysfunction. As most prostate cancers advance relatively slowly, for some men the side effects of treatment can outweigh the benefits.

Cancer Council NSW seeks to address this dilemma, and with further research, this knowledge will inform shared decision-making for doctors and their patients to assess the impact of treatment on both the quality and duration of their survival.

#### Advancing treatment options for children's leukaemia

Cancer Council NSW supported the team led by researcher Professor Murray Norris of the Children's Cancer Institute Australia, who is undertaking a comprehensive research program to introduce new treatment options for children with childhood acute lymphoblastic leukaemia (ALL). Focusing on the detection of residual leukaemia in children who achieve remission, Professor Norris will use the latest approaches to improving survival rates and minimising side effects in children with this disease.

In 2012/13, his team showed that more children can be cured of ALL through early identification of patients at highest risk of relapse, followed by delivering a more intense form of therapy to these patients. These results have changed international understanding of 'best practice' treatment of children suffering from ALL.

#### **Understanding Aboriginal cancer journeys**

Cancer Council NSW is leading the way in Aboriginal cancer research through its Aboriginal Patterns of Cancer Care (APOCC) Project investigating the cancer journey for NSW Aboriginal people. This is the largest project to date focusing on cancer care for Australian Aboriginal people.

NSW Aboriginal people are 60% more likely to die from cancer than non-Aboriginal people. Our research has shown that Aboriginal people with cancer tend to be diagnosed at a more advanced stage for some cancers, and are less likely to have surgery for lung, breast and prostate cancer than non-Aboriginal people.

The findings from this project will be used to heighten awareness that cancer is a key Aboriginal health issue. Our findings will also inform future policies and practices, and ultimately will reduce the impact of a cancer diagnosis for Aboriginal people.

#### Forging enduring partnerships

In 2013, we announced three Strategic Research Partnership (STREP) grants, each funded at \$400,000 per year over five years. These partnership grants facilitate the collaboration of key stakeholders, including Cancer Council NSW, with research teams to address high-priority research questions with the potential to significantly impact cancer control policy and/or practice.

Our partnership with Associate Professor Gail Garvey at the Menzies School of Health Research is investigating how to make our health system work better to meet the needs of Aboriginal cancer patients. Associate Professor Garvey's team includes key members of Cancer Council NSW's APOCC team, and as part of this partnership, a national study will expand on the work already undertaken at a state level by the APOCC Project. Our contribution towards this partnership sees 12% of our new externally funded research directly benefiting Aboriginal people.

We have also partnered with Professor Andrew Grulich at the Kirby Institute, University of New South Wales, to investigate anal cancer, a human papillomavirus (HPV)-related cancer that is increasing among homosexual men, women with previous HPV-related cervical/genital disease, and people with immune deficiency. While universal HPV vaccinations should help protect future generations against anal cancer, this research will identify whether screening of high-risk populations, coupled with effective treatment, will lead to less illness and death in the decades before the effects of HPV vaccination are seen.

With continuing advances in the understanding of the many genetic mutations that can lead to cancer, Dr Gillian Mitchell at the Peter MacCallum Cancer Centre is undertaking a number of projects to support individuals who know that they have an increased risk, and who require access to high-quality and up-to-date information about how they can best manage this risk.

#### **Biobanking for cancer research**

Our biobank processes, stores, retrieves and despatches biological samples from Cancer Council NSW study participants for use in cancer research. In June 2013, Cancer Council NSW was successful in achieving ISO9001:2008 accreditation for our biobank in recognition that we meet international 'best practice' for the quality management systems we have in place. We are the first population health biobank in NSW to achieve accreditation. The biobank is planning to provide a commercial processing and storage service for external researchers in the near future.

The Office for Health and Medical Research (NSW Department of Health) is developing a statewide biobanking strategy to ensure maximisation of high-quality biological samples for research. Cancer Council NSW is actively participating in this process with a view to developing a public resource to adequately address our future biobanking needs.

#### **CLEAR Study begins first international collaboration**

Our Cancer Lifestyle and Evaluation of Risk (CLEAR) Study now holds lifestyle and genetic information from people with all types of cancer and, where possible, their partners. There are now over 9,000 CLEAR participants, making it one of the largest studies into the causes of cancer in NSW.

This year, we began our first CLEAR international collaboration, with a worldwide consortium of breast cancer investigators led by Professor Dame Valerie Beral at Oxford University. Our data will contribute to a better understanding of the risk factors that lead to breast cancer, such as hormone replacement therapy and contraception.

#### Looking ahead

Further collaborations will soon be possible, as the data from the CLEAR Study will be made available to the wider research community in 2014, and will become an open-access resource for cancer researchers in Australia as well as across the world.

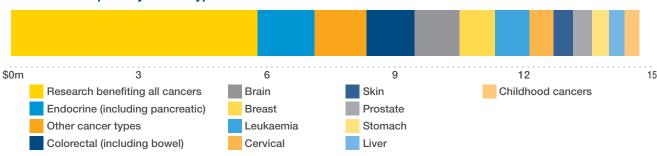


#### Find out more

Visit cancercouncil.com.au to view:

- Our State of Cancer Control report
- The full extent of our research program in the Research Activity Report 2012

#### Our research spend by cancer type



# **Strategic Priority 2**

### To ensure the NSW community acts to prevent cancer and/or detect it at a curable stage

By making cancer-smart choices, individuals and communities can all do something every day to help prevent more than a third of cancers. At Cancer Council NSW, we focus on the three keys areas of cancer prevention that are known to be the largest preventable contributors to the cancer burden: tobacco control, skin cancer prevention and healthy weight/healthy eating.

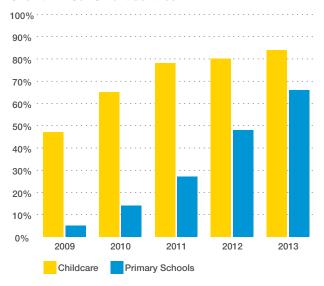
#### **Ensuring our schools are SunSmart**

We know that nearly two in every three Australians will develop some form of skin cancer, and that exposure to ultraviolet (UV) radiation during the first 15 years of life greatly increases the risk of developing skin cancer later in life. It is therefore vital that we protect children from the harmful effects of the sun.

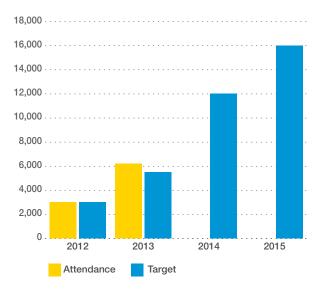
Cancer Council's internationally recognised **SunSmart Program** supports childcare services and primary schools to ensure 'best practice' sun safety. This goes well beyond 'no hat, no play', and includes avoiding outdoor activities during peak UV times, using shaded areas whenever possible, wearing sun-safe clothing, applying SPF 30+ sunscreen, and ensuring that staff and teachers also role-model this behaviour.

With 83% of NSW childcare services now SunSmart (exceeding our target of 80%), this year we focused on increasing the number of SunSmart primary schools. Cancer Council NSW staff and volunteers worked together to visit schools across the state, meeting with principals to discuss how we could support schools to improve their sun protection practices. As a result of this personalised approach, 66% of primary schools are now members of the SunSmart Program (up from 48% in 2011/12).

#### **Growth in SunSmart centres**



#### Total number of parents who have attended **Eat It To Beat It sessions**



#### Preventing cancer through healthy eating

Evidence suggests that there is a link between cancer and lifestyle factors such as poor diet and being overweight. With 63% of the Australian adult population and 23% of children in NSW currently either overweight or obese, Cancer Council NSW aims to help prevent cancer and other lifestyle diseases by promoting healthy eating, in particular increasing the consumption of fresh fruit and vegetables.

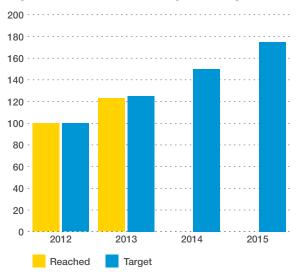
Following a successful five-year pilot in the Hunter region, this year Cancer Council NSW expanded our full Eat It To Beat It fruit and vegetable promotion program to other areas across the state. The program, which this year reached 3,508 parents across the state, encourages them to include more fruit and vegetables in their own as well as their children's diets, in an effort to improve their family's health and nutrition.

Cancer Council NSW recommends eating two serves of fruit and five serves of vegetables every day, yet 90% of adults in NSW don't eat enough vegetables and 50% don't eat enough fruit. Eat It To Beat It gives parents practical strategies and recipes to make fruit and vegetables an easy part of their family's everyday routine.

In Greater Western Sydney, the program is being supported by a grant from the Western Sydney and Nepean Blue Mountains Local Heath Districts, partnering with their Live Life Well @ School program, which focuses on nutrition for primary school students. The NSW Ministry of Health has provided funding to allow Cancer Council NSW to evaluate this partnership, to help determine whether this should be further expanded across the state.

The Commonwealth Government has provided funding for Cancer Council NSW to adapt our Fruit & Veg Sense sessions (a part of our Eat It To Beat It program) to target disadvantaged groups and welfare organisations, and this will be developed in the upcoming year.

#### Total number of social and community service organisations reached through Tackling Tobacco



#### **Achieving smoke-free apartment living**

While smoke-free policies and regulations relating to indoor workplaces and public areas are widespread in Australia, there are few restrictions on smoking in apartment buildings and other multi-unit residences.

Most people want to live in a smoke-free environment; in fact, we know that over 90% of people have made their own residences smoke-free. With the NSW Department of Fair Trading currently reviewing strata laws, and an increasing number of concerned enquiries to our Helpline, Cancer Council NSW developed Achieving Smoke-free Apartment Living, a resource for people living in apartments.

This apartment kit offers strategies for addressing smoke drift, case studies and sample 'smoke-free' strata by-laws, and will empower residents living in apartment buildings to achieve smoke-free living, and cleaner and healthier air.

#### Smoking and disadvantage on the national agenda

Cancer Council NSW was considered a pioneer in tobacco control when, in 2006, we first began tackling the high rates of smoking in disadvantaged groups. Over this time, our commitment to addressing smoking and disadvantage has highlighted the disparities in smoking rates, and demonstrated that partnering with the community sector is a feasible and acceptable approach. This has resulted in smoking and disadvantage being on the tobacco control agenda with 'Strengthen efforts to reduce smoking among populations with a high

prevalence of smoking' included as one of nine priority areas in the National Tobacco Strategy 2012–2018. In September 2012, the Australian National Preventative Health Agency convened the National Smoking and Disadvantage Network, bringing together the state and territory Cancer Councils, Federal and State Government agencies, as well as our New Zealand counterparts, to contribute to reductions in smoking among population groups with high smoking rates.

Cancer Council NSW reported to the Network that smoking is a leading cause of mortality amongst homeless people. Homeless smokers also face barriers to guitting. including high rates of smoking amongst their social networks, lack of support, and misinformed beliefs. With Cancer Council NSW research showing that in Sydney, 79% of homeless people are regular smokers (compared to 14.7% of the general population), the Australian National Preventative Health Agency has made building capacity to address smoking in homeless services a priority.

#### **Cancer Prevention Survey**

Knowing the community's beliefs, intentions and attitudes about cancer-smart lifestyle choices is vital to understanding how Cancer Council NSW can support individuals, communities and decision-makers to make better choices.

This year, we researched 3,345 people across the state for our inaugural Cancer Prevention Survey. The survey uncovered a range of information about community views on sun protection and tanning; tobacco control; nutrition and healthy weight; food policy; and alcohol.

We found that UV exposure and sunburn were the most widely recognised risk factors for cancer, but there was a poor awareness of the link between cancer and other lifestyle behaviours, particularly lack of physical activity. The detailed findings from the survey have revealed the community's current understanding and attitudes towards cancer prevention, and will be used to inform our future cancer prevention strategies and campaigns, and to help improve and monitor attitudes and behaviours around healthy lifestyles.

#### Looking ahead

The results from our **Cancer Prevention Survey** now provide us with a baseline upon which to measure changes in the NSW community's perceptions and attitudes. We will measure against this in two to three years time, to monitor change.

# **Strategic Priority 3**

### To give the NSW community a voice on issues and entitlements around cancer

Cancer Council NSW believes that everyone should have a voice on issues and entitlements around cancer, and that community members can drive change.

Together with the community, we play a vital role in influencing legislation, public policy and public funding through advocacy, to help reduce people's chances of developing cancer and to obtain better care for cancer patients.

This year, our **CanAct Community** increased by 24% to 10,600 participants. The CanAct Community is made up of people from all walks of life, united by their desire to speak out about issues and influence decision-makers to help beat cancer. Together, we campaign for policies for healthier environments that reduce cancer risk factors, and for improved cancer care and services.

We also connect directly with State Government representatives to ensure that the community's voice is heard. Our **MP Liaison Program**, which links a trained Cancer Council volunteer with their local Member of Parliament, has more than doubled this year. We now have 33 MP Liaison volunteers working with one-third of all State Members of Parliament.

#### Helping people make better food choices

Cancer Council NSW believes that food packaging needs easy-to-understand nutritional information, to help people make informed and healthy choices while shopping. Along with other Cancer Councils around the country, we are working to convince governments and the food industry to make it simpler for consumers to make healthier food choices, in order to reduce the risks associated with being overweight or obese.

In 2009, our research showed that food industry labels were confusing to consumers and that there are better alternatives. Since then, we have been advocating for better food labelling, along with other public health and consumer groups, and with the assistance of our CanAct Community.

In June 2013, the Commonwealth, State and Territory Food and Health Ministers announced that a **Health Star Rating System** will be introduced on food labels, to help shoppers make healthier choices. The new system will consist of a star rating scale ranging from half a star to five stars, and will apply to packaged, manufactured or processed foods presented ready for sale.

The Federal Government invited Cancer Council NSW to join and advise the government working group developing this new scheme, to represent the interests of public health and the community. The scheme is expected to be introduced on packaged foods within the next two years.

Cancer Council also believes that we should have access to nutritional information when eating out. Australians spend almost a third of their household food budgets on fast food and eating out, and worryingly, we know that eating fast foods regularly can lead to weight gain due to their high energy and fat content.

This year, Cancer Council NSW investigated the fast food industry and released *Fast Food: Exposing the Truth*. This report highlights major inconsistencies in the availability of nutrition information in fast food stores across Australia, with only some states, including NSW, introducing legislation that requires kilojoule labelling in fast food chains. We are now calling on the Federal Government and the fast food industry to introduce targets to make fast food healthier and implement kilojoule labelling in all states.



#### Find out more

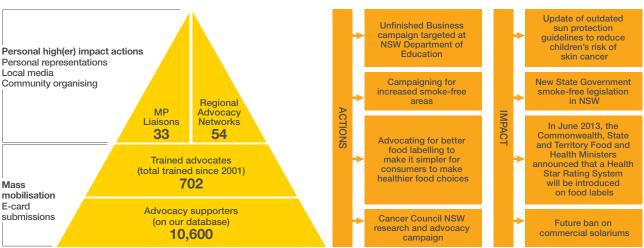
Visit cancercouncil.com.au to view our Fast Food: Exposing the Truth report

#### Sun protection in primary schools

Throughout 2012/13, Cancer Council NSW's **Unfinished Business** campaign has been urging the NSW Department of Education and Communities to update outdated sun protection guidelines and implement comprehensive sun protection measures, in order to reduce children's risk of skin cancer.

Following a year of campaigning, in June 2013 the Department announced updated guidelines and a comprehensive suite of resources to support the development and implementation of **sun protection in primary schools**. The new guidelines and supporting materials meet and promote Cancer Council NSW's 'best practice' SunSmart Program recommendations.

Our campaign demonstrated to Members of Parliament and the Minister for Education that this was an issue of concern to the local community – their constituents. Members of the CanAct Community made over 73 representations to NSW Members of Parliament about the issue. Relay For Life participants across NSW took part in a blackboard photo petition, Chalk Your Support, featuring over 2,200 people, which was presented to the Minister for Education, providing tangible evidence of the community's demand for action.



#### CanAct – our advocacy supporter structure – led to big wins in 2012/13

#### Clearing the air for smoke-free areas

This year, our continued campaigning for **increased smoke-free areas** achieved another major goal, with the introduction of new legislation that will help 'clear the air' in a number of public spaces. Children's playgrounds, public transport stops and stations, sporting fields, public swimming pool complexes and entrances from public buildings all became smoke-free zones this year, helping to protect people from harmful second-hand tobacco smoke.

This legislation resulted from sustained campaigning from our CanAct Community over the past few years, involving a petition to State Parliament, and many meetings between community members and local Members of Parliament. When the legislation came into effect in early 2013, CanAct Community members thanked their local Members of Parliament by email and with 'Thanks for clearing the air' photos.

This year we also began investigating the easy availability of cigarettes for sale in NSW. We decided to evaluate the integrity of the **NSW Government's Tobacco Retailer Notification Scheme**, which was designed to provide a snapshot of tobacco retailers in the state and to help to monitor compliance with the *Public Health (Tobacco) Act 2008* (NSW).

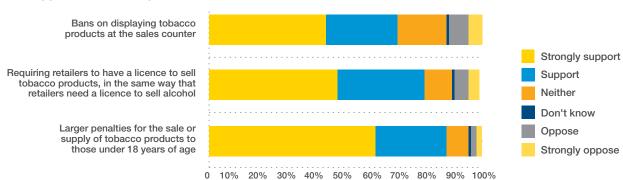
We recruited 140 volunteers, many from the CanAct Community, to audit over 1,700 of the nearly 13,000 tobacco retail outlets listed with the scheme. So far, our audit has uncovered a number of concerning trends. More than one in four audited tobacco retailers (26.6%) did not comply with the requirements of the Act, either because they had not notified under the Tobacco Retailer Notification Scheme, or because they failed to comply with in-store signage or display requirements – or both.

We also found that cigarettes are cheaper in areas where there is a high proportion of young people, in areas of disadvantage, in regional and remote areas, and in outlets that were found to be breaking the law.

#### Looking ahead

Further findings of the Tobacco Retailers Audit, as well as a complete report, will be released later in 2013, and Cancer Council NSW will be calling on the NSW Government to establish a taskforce for tobacco retail reform and to strengthen compliance with existing tobacco retail laws.

#### Public support for tobacco policies



## **Strategic Priority 4**

#### To ensure no one faces a cancer diagnosis alone

Cancer Council NSW provides information and support for people who have questions about cancer, who have been diagnosed with cancer, or who are undergoing treatment.

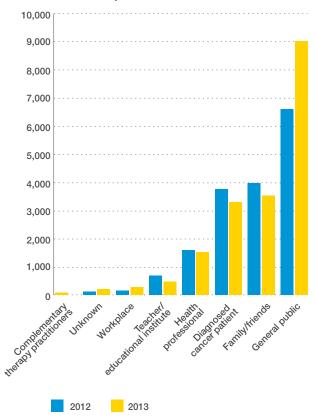
We offer practical and emotional support for people affected by cancer, and for their partners, family and friends at each stage of the cancer journey, through a comprehensive range of services, information and programs.

#### Helpline

Our Helpline offers cancer patients, carers, families and the community the support of speaking to a specialist cancer professional about anything to do with cancer.

This year, we received a slight increase in calls and emails to our Helpline, up 9% to 18,339. This increase largely reflects our move towards promoting our 13 11 20 number more broadly, as a result of the What will you do today to help beat cancer? campaign. In 2012/13, 37% of calls to the Helpline were from patients and carers, with the most common reasons for calling being practical issues (29%), physiological and emotional support (26%), and treatment and management (25%).

#### Who called our Helpline?



In 2012/13, 21% of patient, carers and family members who called Helpline requested to be contacted by our Call Back Service, nearly twice the number as in 2011/12. Our team of specially trained volunteers provides a follow-up call to give ongoing support.

In July 2012, Helpline transitioned to our new Constituent Relationship Management (CRM) system, which now facilitates the case management of calls. With 26% of Helpline calls coming from previous callers, this new system ensures that our staff are quickly able to understand a caller's circumstances and offer them advice, information and service referrals as appropriate. With the implementation of this new system, and improved follow-up procedures, we have now increased our referrals from Helpline to other Cancer Council NSW services, such as counselling, our extensive support programs and our Pro Bono Programs, by 34%.

#### **Expanding our Pro Bono Programs**

Our Pro Bono Programs began in 2010, offering legal and financial planning assistance to cancer patients and their families in NSW. These programs have now expanded in partnership with our state and territory Cancer Council counterparts to support patients and families across Australia.

In response to an increasing number of cases needing specialised advice, we have developed two new programs. Our new Workplace Advisory Service assists employees experiencing workplace issues or difficulty returning to the workforce following treatment. With self-employed people often the hardest hit financially by a cancer diagnosis, our new Small Business Advisory Service helps small business owners affected by cancer with issues such as business health checks, continuity planning, succession planning and tax.

With almost 800 professional firms nationally offering pro bono support, we have assisted more than 2,137 families this year, an increase of 36% on 2011/12. This year, 45% of referrals originated from calls to Cancer Council Helplines across Australia, and 55% were from social workers in hospitals and community settings.

#### Addressing the unmet needs of patients with liver cancer

Liver cancer is now one of the top 10 causes of cancer death in Australia, and most cases are due to viral hepatitis. Nearly half of all cases in Australia occur in people born in hepatitis B-endemic countries, including Vietnam, Hong Kong, Macau, Korea, Indonesia and China. Cancer Council NSW's 'B Positive' Program works with affected communities and general practitioners to address these rising rates through a number of targeted initiatives.

In 2012/13, our chronic hepatitis B Registry has increased to support 800 patients (12% of the target population), by providing regular follow-up and in-language information about managing their disease and its link to cancer. This will ensure people with hepatitis B access appropriate treatment as recommended, to minimise the risk of liver disease.

This year, we embarked upon a two-year project to develop a multimedia support program, with resources in English, Vietnamese and Chinese languages. Still in its development phase, this project has investigated the information and support needs of people affected by hepatitis B-related liver cancer. The findings will inform the development of a number of language-specific resources to support these communities.

#### Support for cancer patients and carers

For people with cancer, talking to someone who has been through a similar experience can be helpful, reassuring and encouraging. Cancer Council NSW's Supportalk program offers a range of ways for people affected by cancer to connect.

In 2012/13, our online community, Cancer Connections, saw a 15% increase in members, with 58,000 visits from across Australia. It offers a free, moderated peer-support community for people affected by cancer.

Cancer Connect provided one-to-one telephone peer support for 480 people recently diagnosed with cancer. This support is provided by our 120 specially trained volunteers. These volunteers are people who have recovered from a similar cancer experience, and are supported by Cancer Council NSW's health professionals.

Our **Telephone Support Groups** offer support and information to adults across Australia who are affected by cancer, including patients, their families and carers. This year, we offered over 200 cancer-specific groups, such as advanced cancer; breast, brain or pancreatic cancer; carer; and bereavement groups.

#### **Living Well After Cancer**

Cancer and its treatment can bring a host of practical challenges, from changes in appearance and body function to managing the emotional and social impacts. We support cancer survivors, carers, families and/or friends during this time with one of our survivorship programs, Living Well After Cancer.

The program is delivered by fully trained volunteer facilitators who are cancer survivors or who have experienced cancer firsthand as a carer. In 2012/13, these facilitators delivered 31 face-to-face sessions.

#### Supporting young adults with cancer

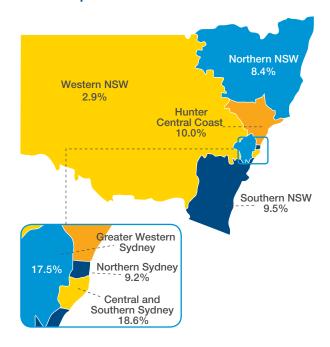
The challenges and fears of people with cancer can vary depending on their stage of life, and for people with

cancer between the ages of 18 and 45, their social and physical development can be severely impacted. With more young adults facing a cancer diagnosis each year, Cancer Council NSW is addressing the need for age-appropriate resources and support for young cancer survivors. A number of pilot programs have been delivered, including a face-to-face psychosocial program, ENRICH (exercise and healthy lifestyle), Resilience Workshops and Creative Art Therapy; and we are introducing more online support through Cancer Connections. In the coming year, we will begin expanding this program to support young people with cancer, and to help them with their particular issues at work and while studying.

#### Looking ahead

Recognising that more than 40% of cancer survivors experience sexual difficulties after treatment – one of the most distressing concerns for cancer survivors – Cancer Council NSW and the University of Sydney have partnered to address this need with **Rekindle - Sexuality After** Cancer. This three-year project, supported by the Australian Research Council (ARC) to develop a new web-based psycho-educational resource, aims to address the sexual concerns of both survivors and their partners, across all cancer types, tailored to the unique concerns of each user.

#### Calls to Helpline from across NSW



Note: 18% of calls had no postcode recorded; 6% of calls were from other states

## Strategic Priority 5

#### To expand the opportunities available for people to contribute to our work by giving money or fundraising

We are grateful to the community of NSW who raise funds for Cancer Council NSW to help beat cancer. This support is vital to the delivery of our prevention, research, information and support programs. Cancer Council NSW is 96% community funded, with 250,175 community supporters generously donating to our cause in 2012/13.

Our **fundraising income** saw a moderate increase this year, up 2% from \$58.5 million in 2011/12 to \$59.6 million. This year, we made the decision to invest in our regular giving and donor acquisition programs, as well as into the expansion of our Constituent Relationship Management (CRM) system, which is anticipated to take two years to realise. While this additional commitment saw our net fundraising income decrease on last year, this is a necessary investment in ensuring the future growth of our fundraising and has now resulted in the highest number of supporters since 2006/07.

Our cost of fundraising this year was 37%. It is important to acknowledge that these costs also reflect our community engagement and support the delivery of our programs and health campaigns, thereby increasing understanding of our work and awareness about cancer. We acknowledge that fundraising is not a zero-cost exercise, and, in fact, it is becoming more expensive to raise money in a highly competitive market. We invest in our events because it is through these that we give everyone the chance to help beat cancer. We invest in the acquiring of new donors and supporters, and in the infrastructure that supports the way we work. Most significantly, we invest in managing the more than 28,000 volunteers and community supporters who get behind our cause and connect with our mission.

This year, we undertook a **fundraising review** to look at how we work, how our programs work and what we can do better. The review found that we are the fifth largest of all fundraising charities in Australia, despite being state-based, clearly demonstrating our expertise in working and connecting with the community. We have identified opportunities for growth in the areas of digital fundraising and bequest giving, and the potential to innovate and optimise our program of events in order to maintain our strong position to support our mission.

#### Our individual supporters

Our direct marketing programs enabled individual supporters to contribute \$34.9 million to Cancer Council NSW this year.

We recruited 9,000 new regular donors via our face-to-face fundraising program, **Breakthrough**, and now have 45,000 regular donors generating \$15.2 million in 2012/13, which is 33% of all fundraising income (excluding bequests). Since it first began in 2003, Breakthrough has generated \$114 million dollars, and remains our biggest fundraising program.

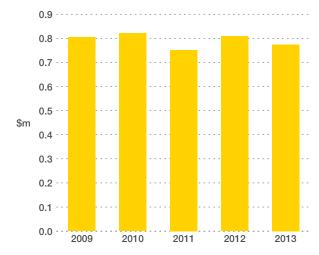
This year, we invested in the redevelopment of our direct mail appeals, after three years of decline in donor numbers, focusing on the acquisition of new donors and the retention of existing ones. We are pleased to finish this financial year with the highest number of donors supporting our cause in six years.

While our **bequest** program is not a predictable income stream, donations in 2012/13 were similar to last year, with \$13.7 million in bequests. Thank you to the generosity and vision of those who leave a gift to Cancer Council NSW in their Will.

#### Connecting with the community through events

We have the largest event fundraising portfolio in the Southern Hemisphere, raising a total of \$24.7 million this year. Our events allow individuals and communities to connect with the cancer cause and raise funds for the work of Cancer Council NSW. We engage over 150,000 people in our events each year, including over 28,000 event hosts, volunteers and supporters who took part in 2012/13.

#### Fundraising \$ per fundraising FTE\* (includes bequests)



\*FTE = Full-time equivalent staff member

Relay For Life events were held in 58 local communities across NSW and connected 45,362 participants, 4,000 teams and 2,043 cancer survivors. Each event is run for and by the local community, involving 767 committee members throughout the state. More than just volunteers, these dedicated committee members work year-round rallying their community around the event and, more importantly, the cancer cause. This year we saw increased growth of Relay For Life, raising \$8.2 million, a 6% increase on 2011/12. We are investing in a digital fundraising platform to support Relay For Life, making it easier for our supporters to participate and harness the power of their social media networks.

Now in its 27th year, **Daffodil Day** is our longest-running event, and connects our community with our cause and our brand. Daffodil Day is held each August, and this year 4,400 volunteers took part at 656 locations in communities across NSW. We raised \$2.9 million, which is a 20% decrease on 2011/12. We are working to innovate the event strategies for 2013/14.

Australia's Biggest Morning Tea celebrated 20 years this year, with 11,000 people hosting events in their homes, offices, businesses and communities. We raised \$4.5 million - a 1% decrease on last year.

This year was a transition year for Pink Ribbon Day, Pink Ribbon events and Girls Night In, as we brought these events together under the **Pink Portfolio**. In 2012/13, we asked people to 'Stop & Pink' to raise money and awareness for breast and gynaecological cancer, with \$3.4 million raised, a 19% decrease on last year.

Our **Do Your Thing** program supports individuals, teams and organisations to register and fundraise online, gain support and inspire others to participate. In 2012/13, more than 1,195 events were held across NSW, raising \$3.5 million - a 32% increase on 2011/12.

Sh\*tbox Rally is our largest beneficiary fundraiser, with 378 participants raising \$1.2 million by driving their clapped-out cars from Adelaide to Fremantle via Uluru. Since James Freeman began this event in honour of his parents in 2010, Sh\*tbox Rally has raised \$2.95 million, due to the passion and commitment of its participants to cancer research.

Working with the Pedestrian Council of NSW, Seven Bridges Walk is another of our high-profile beneficiary events that unites the community while raising vital funds. This year, 11,000 people took to the course, walking up to 26.2 kilometres across 7 bridges, including the Sydney Harbour Bridge, ANZAC Bridge and Gladesville Bridge, in one day - raising a fantastic \$377,000.

#### **Our retail stores**

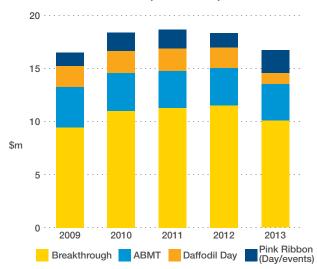
The profits we make from our retail sales contribute to our melanoma and skin cancer programs. Over the last 10 years, we have raised a net \$11.3 million, and sold and distributed more than 6 million sun protection products to assist our mission delivery.

With stores located in eight major shopping centres generating \$7.6 million, our retail income remained steady this year, yielding steady results in a troubled sector.

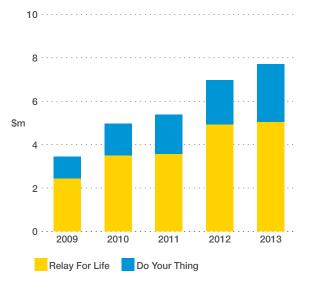
#### Looking ahead

With the findings of the fundraising review, and as we move towards a new strategic plan in 2014, Cancer Council NSW is in the position to make decisions about how to grow our fundraising and streamline our processes to reduce expenditure. As our digital fundraising increased this year to \$411,000, we recognise that this and social media are areas to continue to strategically invest in to maximise the potential for future growth.

#### Mature income streams (net income)



#### **Growth income streams (net income)**



### Our communities

Cancer Council NSW works in and with communities across the state. With a network of 19 offices across metropolitan, regional, rural and remote NSW, our people work within the community for on-the-ground engagement.

Our staff work alongside committed volunteers and local supporters, ensuring that Cancer Council NSW is able to connect with and understand the distinct needs of each community. Our collaborative relationships through vast regional networks across the state enable us to offer our services, programs, events and fundraising initiatives at a truly local level.

#### Working with regional, rural and remote communities

Our four regional networks reach out to communities across regional, rural and remote NSW, covering more than 111 communities across approximately 800,000 square kilometres.

We recognise the unique needs of these communities, and know that our approaches to engagement and participation must be tailored in these areas. This year, our regional focus was on growing the provision of **practical support services such as in-home support and transport services**, which many patients and carers in non-metropolitan communities have greater difficulty accessing. We now offer 14 transport services for patients undergoing cancer treatment, providing transport to approximately 6,000 people, and 8 in-home support services, assisting over 800 patients and families.

We achieved this by:

- Increasing our support to South Coast patients through the extension of our South Coast transport service to not only transport patients from Nowra to Wollongong, but also from Eurobodalla, to the new comprehensive Cancer Centre in Shoalhaven
- Establishing a new, highly responsive patient transport service in Coffs Harbour, enabling immediate access to treatment for patients in local and surrounding areas through a partnership with the Newcastle Permanent Building Society
- Continuing to grow our support in Grafton through the in-home support and patient transport services in partnership with CRANES community support program
- Establishing a patient transport service in Tamworth by extending our partnership with Inala House Accommodation Centre.

This was all made possible by the 224 volunteers who donated their time to provide these services.

#### **Engaging across Sydney's diverse communities**

Our three metropolitan networks engage with compatible and like-minded organisations and networks, to ensure that we are able to achieve sustainable success for programs and events across the city.

While geographically small, the Greater Sydney Metropolitan area encompasses the largest, most complex and diverse population within NSW. Sydney is home to approximately 58% of the population of NSW, as well as the majority of the state's major teaching hospitals, cancer treatment centres and associated support centres. These facilities serve not only the population of Sydney, but also a significant number of people travelling from regional, rural and remote NSW for treatment.

For these reasons, our work is focused in key settings such as hospitals and treatment centres. One of the ways that we do this is through our **Cancer Council Information Centres**, which offer a comfortable, friendly environment for people to access cancer information and support. We have 15 centres across the state, including six in Greater Sydney, where visitor numbers have more than doubled to 4,837 in the last year. Each centre is located at the very point where care and treatment are provided, and is supported by trained volunteers, who are always on hand to assist with cancer-related information, guide people through our websites, and connect them directly to our Helpline for information and referral to available support services.

Additionally, we facilitate the development of collaborative relationships with health professionals within the treatment centres, to ensure that patients are referred directly to the services and support programs that Cancer Council NSW provides. In some centres, this collaboration has also resulted in an expansion of our services, including management of a wig library, and a volunteer service reaching out to cancer patients on the wards.

With 30% of the NSW population speaking a language other than English at home, people from **culturally and linguistically diverse (CALD)** backgrounds are one of our key communities.

In November 2012, we established the Multicultural Access Advisory Committee, to extend our reach into multicultural communities. Made up of community leaders and experts from a variety of cultural backgrounds, the committee provides vital input to increase our understanding of CALD communities. The group provides advice on removing barriers, increasing CALD community engagement and facilitating participation in our cause.

We also work at the local level. Our community-based outreach program, 'B Positive', is raising awareness about the **link between hepatitis B and liver cancer**. We work with communities from countries with a higher prevalence of hepatitis B, including Vietnam and China. This year, we engaged with CALD youth, working with Fairfield City Council, local high schools

and youth organisations to develop a Vietnamese language 'soapie' featuring young people living in the area. Due to be released in the second half of 2013, the film addresses the myths, misconceptions and stigma surrounding hepatitis B.

We have partnered with the Association of Bhanin El-Minieh in Auburn, the Western Sydney Local Health District, Medicare Local Western Sydney and Auburn Diversity Services to deliver the Promoting Smoke-free Arabic-speaking Community in Western Sydney project, offering free nicotine replacement therapy to support people who are quitting smoking.

#### Partnering with like-minded organisations

Cancer Council NSW believes that by partnering with like-minded organisations, we are creating a community of people to collectively work on issues for the common good. We work with hundreds of organisations in our communities.

For example, we are a founding member of the Sydney Alliance, a coalition of 52 diverse community, union and faith-based organisations working together to create a citizens' movement. An illustration of the effectiveness of the Alliance is the way the Liverpool group successfully persuaded their local council to establish 'drop-off zones' outside medical centres, after community meetings revealed the lack of patient parking in the area.

Our partnership also continues with Cancer Voices NSW, a group that provides an independent voice to improve the cancer experience of people affected by cancer. We collaborate with Cancer Voices to provide advocacy and research funding training for consumers, as well as on projects of mutual interest, and we provide in-kind support for their member newsletter.

Cancer Council NSW values our connections with these and all the organisations with which we partner – we are all working together to help beat cancer and support the broader community.

#### **Engaging with Aboriginal communities**

This year, Cancer Council NSW developed our first Reconciliation Action Plan (RAP), endorsed by Reconciliation Australia. There is a 17-year life expectancy gap between Aboriginal and non-Aboriginal Australians, and for some cancers, the death rate for Aboriginal Australians is more than three times higher than for non-Aboriginal Australians.

Our RAP focuses on building mutually respectful relationships with Aboriginal communities to allow us to work together to solve problems and 'close the gap'. Focused on the key themes of relationships, respect and opportunities, our plan provides a step-by-step approach to improving the way we work and advancing our vision of reconciliation.

We have made some important steps on our journey towards reconciliation this year, renewing a Memorandum of Understanding (MOU) with the Aboriginal Health and Medical Research Council (AH&MRC), the peak body and voice of Aboriginal communities on health in NSW. The three-year MOU confirms our commitment to working together on cancer prevention, and to improving care, treatment and support for Aboriginal people affected by cancer.

In 2012/13. Cancer Council NSW entered into a historic partnership to improve health outcomes for the local Aboriginal community at La Perouse, Guriwal Aboriginal Corporation, the La Perouse Aboriginal and United Men's Association, Eastern Sydney Medicare Local and Cancer Council NSW formally came together to reduce cancer risks and improve access to health services. The four-way partnership delivered a barefoot bowls day for the local community; a series of cancer awareness and prevention forums; and practical support and guidance on the development of a local fruit and vegetable cooperative.

It also enhanced access to culturally appropriate information about cancer, and is exploring the potential for a new Aboriginal cancer support group for the local community.

Cancer Council NSW also worked with the Wallaga Lake Koori Village, the Moruya Community Health Cancer Care Team and the AH&MRC, to develop five cancer Yarn Up presentations for Aboriginal communities. The presentations are tailored and culturally appropriate for Aboriginal people, and address cancer more broadly, as well as including specialised presentations covering men's and women's business, and one to specifically support Aboriginal health workers. These resources will help build the capacity of Aboriginal communities to make an impact in the fight against cancer.

These are just some examples of the work that is happening across the state to fulfil our commitment to working together with Aboriginal communities.

As our first RAP nears its 2012/13 conclusion in October 2013, we are pleased to report that we had met 75% of our initial commitments by June 2013. Later in 2013, we will develop our second RAP for 2013/14, to continue to expand on this work.



#### Find out more

Visit cancercouncil.com.au to view our Reconciliation Action Plan 2012/13

### **Our communications**

As an organisation whose funding and connections are founded in the community, our ability to communicate effectively is crucial to our success. None of our fundraising events, campaigns or programs could achieve their objectives without being promoted through traditional media, social media, online or other organisational communication channels.

#### Helping people connect to our cause

This year, we launched our campaign **What will you do today to help beat cancer?** Designed to ask this question of ourselves and of our community, we highlight the ways that individuals and communities can help beat cancer.

The integrated campaign doesn't use actors – it features 70 people who are connected to Cancer Council NSW and share their stories.

The campaign resulted in raising our unprompted brand awareness to **fourth position** amongst charities in June 2013 – up from fifth position in June 2012, as tracked through the Millward Brown Brand Health Survey.



Use your QR reader to view our campaign or visit our 'What will you do today to help beat cancer?' section at:

youtube.com/CancerCouncilNSW1

#### **Engaging with men**

In November 2012, we launched **Sh\*t mates don't say**, an online campaign designed to encourage men to start having conversations about their health.

Working with our Men's Health Committee – comprising male researchers, social commentators and cancer survivors – we identified that men are 84% more likely than women to die from cancers that are common to both men and women, and that men often perceive health to be a women's issue.

This was a big issue to tackle, and we set out to start with one simple objective: to encourage men to start a conversation about their health with mates. To spark this conversation, we launched a major communication campaign to reach men focusing on a stand-alone men's website featuring the **Sh\*t mates don't say** video campaign and men's cancer fact sheets.

The website received 26,000 unique visitors. The video was highly engaging, being watched 32,688 times on YouTube, and resulted in 43 million media impressions, reached 510,928 Twitter followers, and was shared 5,600 times on Facebook.



Use your QR reader to view Sh\*t mates don't say or visit stuffmatesdontsay.com

#### Being the leading media voice

Cancer Council NSW remains the **leading cancer voice** in NSW, increasing our share of voice from 13% to 17.6% this year. Our spokespeople remain leaders in the media, ensuring our events, campaigns and health messages are placed prominently on the public agenda.

Analysis through Mediascape media analytics showed that our media voice reached 1.5 billion people, remaining steady on 2011/12, with the value of all coverage increasing from \$34 million in 2011/12 to \$36.9 million in 2012/13.

#### Connecting with people online

This year, we prioritised the development of our online communities, focusing on social media as a means of engaging with people in real time.

Our Cancer Council NSW **Facebook** page grew by 198%, increasing to 8,793 fans this year, while our **Twitter** presence increased by 86% to 10,240 followers.

As well as supporting our programs, events and campaigns, our social media platforms enable us to triage enquiries from the public seven days a week.

Our website (cancercouncil.com.au) remains one of the community's central points of contact with Cancer Council NSW, with 1,130,102 visits to the site this year. This 69% increase on 2011/12 is largely due to improved search engine optimisation and marketing, and our campaign What will you do today to help beat cancer?

This year, we launched the *Breakthrough* e-newsletter which goes to an ever-growing list of recipients, including many of our existing supporters and those who sign up via our website. This keeps our supporters up to date with our work, and highlights new opportunities for the community to get involved.

#### **Quality of our reporting**



This year, we were recognised with the not-for-profit sector special communications award at the **Australasian Reporting Awards**, for excellence in communication with stakeholders.





Top 10 Finalist 2012

Cancer Council NSW was also pleased to be recognised as one of 10 finalists in the revenue greater than \$30 million category in the **PwC Transparency Awards** for the quality and transparency of our reporting.

# Our infrastructure and systems

#### Implementing new technologies

An accelerated and ambitious implementation of a new **financial management system**, Technology One Business Solutions, was undertaken during the year. The project was a great success, delivered on time and within budget, ensuring Cancer Council NSW is using 'best practice' technology to drive operations into the future. The new system consolidated multiple software programs into one integrated system, bringing many benefits, including greater audit and internal controls; ease of integration with payroll and income database systems; and productivity gains, with all staff working in a largely paperless environment and using a centralised and shared system to store all accounting records.

The implementation was used as an opportunity to critique existing ways of working, and to review and streamline many key business processes to enable us to work smarter and to reduce duplication and double handling. We also ensured alignment with the National Standard Chart of Accounts for reporting by not-for-profit organisations, and designed processes to ensure ease of reporting to grant-funding bodies and the new Australian Charities and Not-for-profits Commission (ACNC). The new system also enables greater compliance with Cancer Council NSW's Purchasing Policy, to ensure procurement decisions are continually tested against market to deliver best possible value.

#### Measuring our carbon footprint

Whilst Cancer Council NSW has no mandatory environmental reporting requirements, we recognise our role in managing and minimising environmental impact while carrying out our work. We engaged specialist consultants Pangolin this year to undertake a comprehensive review of **our environmental impact** to capture key data, and, for the first time, to measure our carbon footprint – which was 4,627 tonnes of carbon dioxide in a year. This report informed management on the source of greenhouse gas emissions within our control, in areas such as electricity, printing, clothing and merchandise, advertising, transport, fuels, business flights and accommodation, and will serve as a baseline for setting future targets and areas of focus to reduce emissions, without compromising the delivery of our mission.

#### Protecting our supporters from fraud

We achieved full compliance with the **Payment Card Industry (PCI) Data Security Standards** this year. This is a significant achievement, protecting both Cancer Council NSW and our supporters from credit card fraud. Criminal activity in this area is a moving target, with standards being revised to respond to changes in the fraud environment. Updated standards have recently

been issued by the PCI Security Standards Council, and Cancer Council NSW has commenced planning to ensure we keep abreast of required changes to ensure full compliance.

**Fraud policy training** continued to be an area of focus, with our position of zero tolerance for fraudulent and dishonest behaviour communicated clearly to new staff via orientation training during the year. We filed two separate reports with the NSW Police during the year, relating to community fundraisers who had not banked funds collected for Cancer Council NSW. These cases are still under investigation, and reflect our tough stance on fraudulent behaviour.

An independent survey of staff and a review of our Fraud Control Plan and key fraud risks will be undertaken in 2013/14 by our internal auditors, to highlight areas for future focus.

#### Better understanding our constituents

Our **Constituent Relationship Management (CRM)** project continued this year, and became operational for a number of our support services, including Helpline and Telephone Support Groups. This has assisted in taking a case-management approach to supporting cancer patients and carers, and allowed us to gain better insight into the needs of those who use our services.

The project has experienced a number of challenges this year, including loss of key staff and a review of customisation requirements and governance, which slowed the rollout of the system to other areas of the organisation. Although a project of this size is a significant investment, it will increase our operational efficiencies and enable us to identify and execute strategies for sustainable growth.

We are currently reviewing and reassessing our system requirements to ensure diligence and optimisation for the continuing system implementation.

#### Ensuring compliance with fundraising law

A review of our compliance with the *Charitable Fundraising Act 1991* (NSW) was undertaken during the year, with some opportunities highlighted for improvement in administration processes and communications with event supporters. A working party with representatives from our finance, legal and fundraising teams was formed to deliver improvements and to ensure ongoing and effective communication with the regulators of the Act, the NSW Office of Liquor, Gaming and Racing. Improvements to staff training in the area of compliance are planned for 2013/14.

### Our people

Our staff and volunteers are passionate about our vision of cancer defeated, and embody our values of courage, collaboration, independence and forward thinking.

Cancer Council NSW is made up of 358 permanent staff and 38,156 community members who generously donate their time for events, research and other projects, including 2,744 registered volunteers who work alongside our staff performing specific roles.

#### Being a place where people want to work

Recognising the importance of maintaining an engaged workforce, in October 2012 we undertook an **Employee Engagement Survey**.

The overall results showed that 76.8% of our staff are engaged, with employee commitment, empowerment and connection to organisational strategy rating most highly. These results illustrate that we have a strongly engaged workforce, who are committed to the mission of defeating cancer.

The survey also identified three areas that could be improved to foster greater engagement: reward and recognition, cross-functional collaboration and organisational change. We have already begun laying the foundations to better support these areas, rolling out a **Recognition Toolkit** for managers and developing a comprehensive **Change Management Framework**, which is currently available for staff. Accompanying Change Management Training has been introduced for the Executive team, and will be extended to staff responsible for managing projects and change in 2013/14.

These results are now a benchmark to measure ourselves against over the coming years. We were unable to compare the results of this year's Employee Engagement Survey to the results from the last one undertaken in 2010, as a new surveying system was implemented. The next survey will be undertaken in early 2014.

#### **Performance planning**

This year, we implemented a new **Performance Planning and Development System** to ensure that individuals and teams are aligned and working towards our strategic plan. Still in its initial phase, the system is supporting the development of a performance culture for Cancer Council NSW managers and staff by linking pay to performance. Managers are now able to track their team's performance and map out development requirements against their objectives.

#### **Developing our staff**

In order to do the best work we can, we recognise that our staff require ongoing development to maintain and learn new skills, and to discover better ways of working.

This year, we created the role of **Organisational Development Consultant** to support the development needs of the organisation. This role focuses on employee engagement, development and talent management. Our development philosophy has evolved to focus 70% of the program content around 'on the job' training, recognising that this is the most effective way to develop new skills and behaviour. Coaching and mentoring opportunities make up 20% of our development programs, while the remaining 10% comprises formal training. This year, 71% of our employees had development plans in place by 30 June 2013. Over the coming year, we will further support this learning model by offering **Development Planning Training** to assist staff to write robust plans that assist in both personal growth and development that is aligned with organisational strategy.

#### Work health and safety

This year, an audit was performed to evaluate Cancer Council NSW's existing work health and safety systems and processes against legislative requirements; and to benchmark current practices against AS/NZS 4801:2001 Occupational Health and Safety Management Systems – Specifications with guidance for use. While there were components of the audit that identified sound compliance to legislation and 'best practice' in some areas, there were also opportunities for improvement. A range of corrective measures will be implemented to address the issues raised in the audit report in the coming year.

#### Gender equality in our workplace

This year, the new *Workplace Gender Equality Act 2012* (Cwlth) came into effect, replacing the *Equal Opportunity for Women in the Workplace Act 1999* (Cwlth). This new Act now takes a fresh focus on promoting and improving **gender equality and outcomes** for both women and men in the workplace, and in the future, will require reporting against a set of standardised gender equality indicators. As the Workplace Gender Equality Agency transitions towards this new focus, reporting requirements have changed for the 2012/13 reporting period, and are expected to alter again for the upcoming year.

Some of our key highlights for the 2012/13 reporting period were:

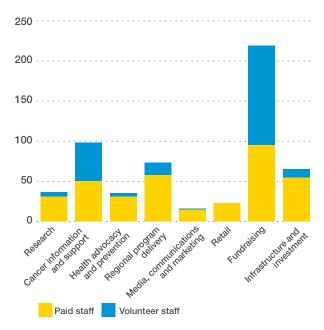
- 80% of total overall employees are female
- 29% are employed on a part-time basis
- The Executive leadership team comprises of a 20:80 male-to-female ratio. Other management groups include Divisional Heads (25:75 ratio), Senior Managers (20:80 ratio) and Managers (38:62 ratio).

#### **Changes to the Executive team**

We saw changes within the Executive team in 2012/13. In October 2012, Dr Andrew Penman AM left Cancer Council NSW after 14 years as Chief Executive Officer (CEO), and the Board appointed Regina Sutton as CEO. She held this role until June 2013, when she made the difficult decision to leave Australia and her role at Cancer Council NSW for family reasons. The Board appointed Jim L'Estrange in June 2013 to the position of CEO for an interim period until December 2013.

Sally Chatterjee, Chief Operating Officer (COO), also departed Cancer Council NSW in April 2013. The Heads of the operational areas that had previously reported to the COO were elevated to the Executive level to facilitate a flatter reporting structure. The new structure is reflected on page 28.

#### Our people's contribution paid staff and volunteer staff (FTEs\*)



#### Recognising the value of our volunteers

Cancer Council NSW thanks each and every one of our 2,744 registered volunteers. Without them, we would not be able to achieve all that we do.

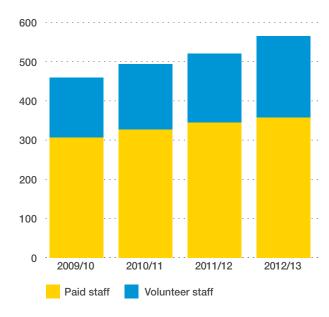
Working across every area of the organisation, including the Chair and members of the Board who oversee the

governance of Cancer Council NSW, our volunteers bring significant value to our organisation and form a key part of our workforce.

Since developing our Volunteer Strategic Plan in 2011, we have implemented a number of initiatives to continually enhance our management and engagement of Cancer Council NSW volunteers. We have implemented Volunteer Management Training for staff, and created a Volunteer Coordinators Network to support our offices with volunteer management and recruitment, to streamline processes and to ensure consistency. With these new systems in place, we are currently reviewing the Volunteer Strategic Plan for the coming year.

This year, we also implemented the **Cancer Council** NSW Star Awards to recognise the commitment and value of our volunteers. Staff, volunteers or members of the public can nominate candidates for these awards, with the winner being announced each month on our website, in our internal newsletter and in the Volunteer Voice newsletter.

#### Staff totals at 30 June (FTEs\*)



We also recognise that we need to support and develop our volunteers. New volunteers are encouraged to attend our orientation program and training courses as appropriate for their role. For some of our volunteers in program-delivery roles, additional support is needed. In March 2013, 207 volunteers involved with our information and support programs attended Cancer Council NSW's inaugural Leaders in Supportive Care: Linking us together conference. This three-day conference covered topics to develop both the knowledge and skills of our volunteers across a range of areas. A survey of participants found that 93% reported an increase in their knowledge through attending the conference, whilst 77% had learned new skills.

The volunteer contribution graph above reflects the results of an organisational-wide survey of staff who worked with volunteers during 2012/13. The survey sought insights into the nature of volunteering activity, the hours contributed and the estimated dollar value of the contribution made (including one-off volunteering for fundraising events). We have converted estimated volunteer hours into full-time equivalent staff (based on a 35-hour working week).

<sup>\*</sup>FTE = Full-time equivalent staff member

# Our organisation



### Our Board



Dr Stephen Ackland MBBS, FRACP, GAICD

**Member of the Cancer Research Committee** 

First elected to the Board in August 2006, re-elected December 2008 and December 2011

Conjoint Professor, Faculty of Health, University of Newcastle Staff Specialist, Medical Oncology, Calvary Mater Newcastle Hospital Director, Hunter Cancer Research Alliance (HCRA)

Dr Ackland is also former President of the Clinical Oncological Society of Australia (COSA) and former Chair and secretary of the Medical Oncology Group of Australia. He has been a member of various other state, national and international oncology committees and working groups.

Dr Ackland has had extensive involvement in cancer clinical trials, clinical pharmacokinetics of anticancer drugs, and preclinical pharmacology of anticancer drugs and combinations. He has been principal investigator on two Australian multi-institutional randomised controlled trials and a number of phase I and II trials.



Associate Professor Michael Back

Member of the Governance Committee
First appointed to the Board in December 2011
Director, Northern Sydney Cancer Centre

Associate Professor Back is a radiation oncologist, and also has postgraduate qualifications in Psycho-oncology, as well as in Business Management with an MBA. He is Director of Cancer Services for Northern Sydney Local Health District, as well as Director of Radiation Oncology at the Northern Sydney Cancer Centre and the Central Coast Cancer Centre. His past involvement with Cancer Council NSW has included cancer awareness workshops, fundraising activities and events such as Relay For Life.



Ms Jill Boehm OAM, RN, DC, MMgt

**Deputy Chair of the Board, Member of the Audit and Finance Committee, Member of the Governance Committee** 

First elected to the Board in August 2006, re-elected December 2008 and December 2011

Ms Boehm is a registered nurse and midwife, and a past representative of the NSW Nurses and Midwives Board on professional and tribunal matters. She was appointed an inaugural board member of the Illawarra Shoalhaven Local Health District (ISLHD) in 2011 and was formerly Chief Executive Officer of CanAssist (2001–2005). In addition, Ms Boehm was a founding member of the Board of the Cancer Institute NSW until March 2010. Ms Boehm was also a member of the Gene Technology Ethics and Community Consultation Committee for the Federal Government from 2008 to 2011. Ms Boehm co-chairs the Quality Committee for the ISLHD and is the board representative on the Medical and Dental Appointments Advisory Committee.

She was awarded the Medal of the Order of Australia in 2007 for service to the community through advocacy and support for people with cancer, their families and their carers; was nominated for NSW Women's Honour Role in 2005; and is also a member of Women On Boards (WOB).



#### **Ms Mary Chiew**

First appointed to the Board in April 2007, reappointed in April 2010 and April 2013 Chief Executive Officer, Giorgio Armani Australia Pty Ltd

Ms Chiew's expertise includes marketing, communications, administration and management. Her experience also includes four years as Trustee of the National Breast Cancer Foundation, and she currently serves on the Board of the Salvation Army Employment Plus. As a cancer survivor, Ms Chiew brings her personal experience to Cancer Council NSW and helps to maintain a focus on the interests of cancer patients in Board discussions.



Mr Bruce Hodgkinson SC

Chair of the Board, Chair of the Governance Committee, Member of the **Remuneration Committee** 

First elected to the Board in July 2007, re-elected October 2009 and December 2012

#### **Barrister, Denman Chambers**

Mr Hodgkinson has been a practising barrister at the Sydney Bar since the early 1980s. He was appointed Senior Counsel in 2001 and continues to practise extensively in the occupational health and safety field. Through his practise as a barrister, he has provided advice to corporations and their boards in many legal and governance fields, including corporations law, trade practices law, statutory compliance and employment law. Mr Hodgkinson has been a member of the POSH Committee for a number of years, through which he has actively engaged in raising money for Cancer Council NSW. He has also been a member of the Board of Cancer Council Australia since 2008.



Mr Paul Lahiff BSc(Agr), FAIM

**Chair of the Investment Committee, Chair of the Remuneration Committee** First appointed to the Board in February 2007, reappointed February 2010 and February 2013

Mr Lahiff has over 30 years' experience in the financial services industry. This has included roles as Managing Director of Permanent Trustee, Heritage Building Society, Mortgage Choice and WDScott, as well as senior executive roles with Westpac Banking Corporation (in Sydney and London) and the credit union sector. Mr Lahiff currently runs his own consulting advisory business, and serves on a number of boards.



Mr Mark Phillips FAICD **Member of the Audit and Finance Committee** First appointed to the Board in April 2013

Mark Phillips has over 30 years of business experience. In a 20-year career with the Commonwealth Bank of Australia, Mark was instrumental in the development of five new business divisions, spanning securities and trading markets, infrastructure finance, property lending and government finance. More recently, Mark has spent 10 years as the Chief Executive Officer of listed financial services companies. In the case of one of these companies, the firm's value grew substantially during Mark's tenure as Chief Executive Officer, and this firm was regarded during this time as one of the top-performing companies on the Australian Stock Exchange. Today, Mark is an adviser to business, social and charitable organisations.



Mr Stephen Roberts BBus(Acc&Fin), MBA, GAICD

**Chair of the Audit and Finance Committee** 

First elected to the Board in October 2007, re-elected November 2009 and December 2012

#### Company director

Mr Roberts is a member of the boards of Cancer Council Australia, Cancer Council Australia Executive Committee and Social Ventures Australia Capital Fund. Professionally, he is an independent company director and was Senior Partner and Regional Business Leader of Asia Pacific for Mercer Investments. He brings extensive business and management experience to the Board. Mr Roberts is trained as a chartered accountant, and is also Chair of the POSH Committee, which engages in fundraising activities for Cancer Council NSW.



#### Mr Bob Sendt BA(Econ), GDipEnvStud, FCPA, FIPA, FAICD

**Chair of the Audit and Finance Committee. Member of the Remuneration Committee** 

First appointed to the Board in February 2007, reappointed February 2010, resigned February 2013

#### **Consultant and former NSW Auditor-General**

Mr Sendt is a company director and runs his own management consultancy practice. He serves on a number of boards, including as Chairman of Job Futures Ltd, Chairman of National Health Call Centre Network Ltd and a Director of the Accounting Professional and Ethical Standards Board. He was Auditor-General of NSW from 1999 to 2006, and has a strong interest in governance, accountability and strategic management.



#### Mr John Stubbs

#### First appointed to the Board in September 2012

#### **Chief Executive Officer, CanSpeak**

Fourteen years ago, John was diagnosed with chronic myeloid leukaemia. Since that time, he has been a committed and passionate advocate for people affected by cancer. He holds degrees in Accounting and Arts, and is a regular speaker at medical conferences and seminars on cancer policy, advocacy, clinical trials and related issues. He is currently Chief Executive Officer of CanSpeak, a national cancer consumer advocacy group. He was awarded an Honorary Associate of the University of Sydney's School of Medicine for his work in the promotion of clinical trials in this country. As a board member for the Cancer Institute NSW, Mr Stubbs is their nominee on the Board of Cancer Council NSW. His other current board memberships in Australia are with the Faculty of Radiation Oncology, Royal Australian and New Zealand College of Radiologists, and the Arrow Foundation.



Ms Melanie Trethowan MB(Mktg)

#### Elected to the Board in December 2008, re-elected December 2011

Ms Trethowan has been actively involved in cancer issues since 2004. To date, her roles with Cancer Council NSW include Regional Advocacy Network Facilitator, member of the Mudgee Relay For Life Committee, acting Chair of the Western Regional Advisory Committee, member of the Medical and Scientific Advisory Committee and Daffodil Day Town Manager. Her previous board experience includes the Central West Community College, Kanandah Retirement Ltd and the Foundation for Australian Agricultural Women. She is currently Chair of the annual Mudgee Readers' Festival event. She has completed the Australian Rural Leadership Program and is a Vincent Fairfax Fellow. Since 1996, she has operated a marketing and project consultancy business based in Mudgee.

Company Secretary The Company Secretary is Ms Angela Aston, JP, CSA (Cert).

Directors' benefit No Director of CCNSW has received or has become entitled to receive a benefit in respect of their role as Directors.

#### **Meetings of Directors/ Committees:**

	Full meetings of Directors		Audit and Finance Committee		Investment Committee		Governance Committee		Remuneration Committee	
	А	В	А	В	А	В	А	В	А	В
S Ackland	5	6	*	*	*	*	*	*	*	*
M Back	6	6	*	*	*	*	3	4	*	*
J Boehm	4	6	4	4	*	*	4	4	*	*
M Chiew	5	6	*	*	*	*	*	*	*	*
B Hodgkinson	6	6	*	*	*	*	4	4	1	1
P Lahiff	4	6	*	*	4	4	*	*	1	1
M Phillips	1	1	*	*	*	*	*	*	*	*
S Roberts	6	6	2	2	*	*	*	*	*	*
R Sendt	4	4	3	3	*	*	*	*	1	1
J Stubbs	6	6	*	*	*	*	*	*	*	*
M Trethowan	5	6	*	*	*	*	*	*	*	*

A = Number of meetings attended

B = Number of meetings held during the time the Director held office or was a member of the Committee during the year \* = Not a member of the relevant Committee

## **Dur management**



#### Jim L'Estrange Chief Executive Officer

Jim L'Estrange holds a Bachelor of Arts, Diploma of Education and a Masters of Arts (History). Over the last 25 years, Jim has held a number of executive leadership roles across a diverse range of industries, including finance, entertainment and sports.

After spending more than 15 years in senior management roles in banking, including as General Manager of Private Bank at Westpac, Jim moved to Star City as Managing Director, where he focused on creating a customer service culture and fostering employee engagement and performance. His most recent role was as Chief Executive Officer at NSW Rugby Union and the NSW Waratahs, where he drove an increase in community engagement and participation, and developed strong partnerships and sponsorships.

Jim has also been a leadership consultant, and previously held a number of board positions for financial businesses, as well as for McGrath Limited and NSW Rugby Union. He has also held membership on a number of charity committees, including Juvenile Diabetes and the Matthew Talbot Special Appeal.



#### Gillian Batt Director, Cancer Information and Support Services

Gillian Batt graduated from University College, London, with a Bachelor of Arts (Honours) degree and has a background in performance management and health policy and planning, including 20 years spent working in the National Health Service (NHS) and the Department of Health in England.

As the Director of Cancer Information and Support Services, Gillian is responsible for ensuring that cancer patients, families and carers are able to access appropriate information and support at the right time. Gillian has had a particular interest in developing research into the financial impact of cancer, and the supportive and practical needs of patients, carers and families.

Gillian chairs the Supportive Care Committee of Cancer Council Australia, is a member of the Board of the International Cancer Information Services Group and is a director of LifeCircle.



#### Kathy Chapman Director, Health Strategies

Kathy Chapman has a Bachelor of Science degree and Masters degree in Nutrition and Dietetics from the University of Sydney. She is currently a PhD candidate at the University of Sydney. Kathy is an Accredited Practising Dietitian and has 20 years' experience working in public health and clinical settings.

Kathy has more than 50 peer-reviewed journal publications, and has significant expertise in public health nutrition issues.

As the Director of the Health Strategies Division, Kathy is responsible for developing strategies in relation to cancer control as well as for specific programs related to prevention, policy, advocacy and research strategy. This includes strategic research to underpin both advocacy and community-based programs; and the development and evaluation of health programs to reduce cancer risk factors.

Kathy is the Chair of Cancer Council Australia's Nutrition and Physical Activity Committee.



#### **Trudi Mitchell Director, Marketing and Communications**

Trudi Mitchell holds a postgraduate degree in Marketing from the University of New South Wales. She has spent 20 years in the not-for-profit sector in fundraising and marketing, including roles at Australian Red Cross and The Shepherd Centre.

As the Director of Marketing and Communications, Trudi is responsible for fundraising income and developing opportunities for people to connect with and support the work of Cancer Council NSW. She oversees brand, marketing, communications, events fundraising, direct marketing, data analytics, major gifts and retail stores.

Trudi also leads Cancer Council NSW's Data Warehouse Project, and is responsible for the development of the national Relay For Life website project for Cancer Council Australia and our state and territory counterparts.



#### **Freddy Sitas Director, Cancer Research**

Freddy Sitas holds a Bachelor of Science and a Master of Science (Medicine) from the University of the Witwatersrand (South Africa), a Master of Science in Epidemiology from the London School of Hygiene and Tropical Medicine, and a Doctor of Philosophy in Epidemiology from the University of Oxford.

Freddy has headed the National Cancer Registry in South Africa, and in 1999 was awarded a Readership in Epidemiology by the University of the Witwatersrand.

As Director of the Cancer Research Division, Freddy's program looks at how lives can be saved by understanding the causes, diagnoses and treatments of cancer.

An Associate Professor in the Schools of Public Health at the University of Sydney and the University of New South Wales, Freddy has published 107 papers in peer-reviewed journals, 3 theses, 15 books/reports, 11 chapters in books and 14 other publications.



#### Ted Starc Chief Financial Officer and Head, Corporate Services

Ted Starc has a Bachelor of Economics from the University of Sydney, a Graduate Diploma in Business Computing from the University of Western Sydney, and a Graduate Diploma in Applied Finance and Investment from the Financial Services Institute of Australia. He is a member of the Institute of Chartered Accountants, a registered tax agent and a Fellow of the Financial Services Institute of Australia. Ted has auditing experience gained across primary, secondary and tertiary industries – ranging from small family-operated businesses to multinationals – in the technical areas of audit, taxation and accounting services.

Ted joined Cancer Council NSW in 1998 as Chief Financial Officer (CFO) and the additional appointment to Head, Corporate Services, was made in 2008.



#### Sandra Rouco Head, People Learning and Culture

Sandra is a registered Business Psychologist with an honours degree and postgraduate qualifications in Psychology. She is a member of the Australian Psychological Society and an Honorary Associate of Macquarie University.

With more than 20 years' experience internationally, Sandra previously held director-level roles at Westpac Banking Corporation and human resources management roles at Pharmacia Corporation. She has worked within a variety of industry sectors, both public and private, including financial services, IT, professional services, pharmaceutical and manufacturing.

Sandra is responsible for the strategic direction and leadership of the People Learning and Culture function. She leads development of people structures, systems and processes to improve organisational effectiveness. She has responsibility for ensuring Cancer Council NSW is compliant with legislation relating to volunteer and human resources.



#### Merewyn Partland Head, Regional and Rural Networks and Services

Merewyn Partland holds a Bachelor of Arts (Communication) from the University of Technology Sydney, and postgraduate qualifications in the areas of Public Health, Health Service Management and Business. She has 15 years' experience working across a range of healthcare organisations, including the National Health and Medical Research Council, the Australian Indigenous Doctors' Association and the World Health Organization.

Merewyn has worked at Cancer Council NSW for more than seven years and was Regional Manager for Southern NSW from 2005 to 2012 prior to being appointed Head of Regional and Rural Networks and Services in 2012. In this role, Merewyn oversees four networks across regional, rural and remote NSW, and is responsible for on-the-ground engagement with communities across the state. Merewyn is currently a member of the National Rural Health Alliance and a member of the Australian Health Promotion Association.



#### Julie Callaghan Head, Metropolitan Network and Services

Julie Callaghan holds a postgraduate Masters degree in Community Management from the University of Technology Sydney. She has spent the past 20 years working in the not-for-profit health sector, primarily in the areas of HIV prevention and support, and cancer services.

Julie joined Cancer Council NSW in 2005 and has held a number of positions within Statewide Services in the areas of community engagement and program delivery, and systems and operations management, and was most recently Regional Manager for Central and Southern Sydney until her appointment to Head of Metropolitan Networks and Services in 2012. In this role, Julie oversees the community engagement strategy for the three regional teams servicing the Metropolitan communities, together with the culturally and linguistically diverse (CALD) strategy.

### Our structure

#### **Board of Directors**

Mr Bruce Hodgkinson SC (Chair) Barrister, Denman Chambers

Dr Stephen Ackland Senior Staff Specialist, Medical Oncology, Calvary Mater Newcastle Hospital Director, Hunter Cancer Research Alliance

Assoc Professor Michael Back Director, Northern Sydney Cancer Centre

Ms Jill Boehm OAM (Deputy Chair)

Ms Mary Chiew CEO, Giorgio Armani Australia

Mr Paul Lahiff Consultant

Mr Mark Phillips (from April 2013) Adviser to business, social and charitable organisations

Mr Stephen Roberts Independent company director and former Senior Partner, Asia Pacific for Mercer Investments

Mr Bob Sendt (to February 2013) Consultant and former NSW Auditor-General

Mr John Stubbs (from September 2012) CEO CanSpeak

Ms Melanie Trethowan Consultant

#### In attendance:

Ms Regina Sutton (from October 2012) CEO, Cancer Council NSW (CCNSW)

Dr Andrew Penman AM (to October 2012) CEO, CCNSW

Ms Sally Chatterjee (to April 2013) COO, CCNSW

Mr Ted Starc Director, Corporate Services and CFO, CCNSW

Ms Angela Aston Company Secretary, CCNSW

#### **Audit and Finance Committee**

Mr Bob Sendt (Chair to February 2013) CCNSW Board Member

Mr Stephen Roberts (Chair from April 2013) CCNSW Board Member

Mr Mark Phillips (from June 2013) CCNSW Board Member

Ms Jill Boehm OAM CCNSW Board Deputy Chair Mr Mark Abood Former Director of Financial Audit, Audit Office NSW

#### In attendance:

Mr Paul Marsh Oakton

Mr Todd Dewey Oakton

Mr Ben Owens Oakton

Mr Charles Micallef Oakton

Mr Paul Bull PKF

Mr Greg Bell

Ms Regina Sutton (from October 2012) CEO. CCNSW

Dr Andrew Penman AM (to October 2012) CEO, CCNSW

Ms Sally Chatterjee (to April 2013) COO, CCNSW

Mr Ted Starc Director, Corporate Services and CFO, CCNSW

Ms Kylie Williams (to June 2013) Minute Secretary, CCNSW

#### **Investment Committee**

Mr Paul Lahiff (Chair) CCNSW Board Member

Mr Bruce Tomlinson Sunsuper Pty Ltd

Ms Jacoline Bekker Grant Samuel & Associates

#### In attendance:

Ms Regina Sutton (from October 2012) CEO, CCNSW

Dr Andrew Penman AM (to October 2012) CEO, CCNSW

Ms Sally Chatterjee (to April 2013) COO, CCNSW

Mr Ted Starc Director, Corporate Services and CFO. CCNSW

Ms Kylie Williams (to June 2013) Minute Secretary, CCNSW

Mr Craig Hughes Mercer Investments

Mr Mark Wall Mercer Investments

Ms Jodie Hampshire Mercer Investments

#### **Ethics Committee**

Ms Meghan Carruthers (Chair) Lawyer, Ebsworth & Ebsworth

Mr Felix Ratcliff Allied Health Professional Counsellor, CCNSW

Ms Lani Attwood (from April 2013) Allied Health Professional Radiation Therapist, Royal Prince Alfred Hospital

Professor Bill McCarthy AM Experienced Researcher Emeritus Professor of Surgery (Melanoma and Skin Oncology), University of Sydney

Ms Joanne Muller (to April 2013) Lawyer

Mr James Emmerig (from February 2013) Lawyer, Allen & Overy

Rev John Neasy Religious Representative Anglicare Chaplain

Dr Megan Brock (from December 2012) Religious Representative CatholicCare

Dr Monica Robotin Experienced Researcher Medical Director, CCNSW

Assoc Professor David Smith (from June 2013) Experienced Researcher Research Fellow, CCNSW

Dr John Sanders Layman

Mr Tim Read (from June 2013) Layman

Ms Frances Taylor Laywoman

Ms Alanna Linn (from April 2013) Laywoman

#### In attendance:

Dr Libby Topp Manager, Research Strategy Unit, CCNSW

Dr John Williams Research Governance Officer, Research Strategy Unit, CCNSW

#### **Cancer Research Committee**

Professor Michelle Haber (Chair) Executive Director, Children's Cancer Institute Australia

Dr Stephen Ackland (from April 2013) CCNSW Board Member Senior Staff Specialist, Medical Oncology, Calvary Mater Newcastle Hospital Ms Jane Bennett Consumer Representative

Professor Andrew Biankin Garvan Institute of Medical Research

Dr Monica Robotin Medical Director, CCNSW

Professor Kate White Director, Research Development and Support Unit, University of Sydney

Professor Mark Baker Professor of Proteomics, Macquarie University

Professor Anna deFazio
Head of the Gynaecological
Oncology Research Group,
Westmead Millennium Institute
Senior Clinical Lecturer,
Department of
Obstetrics Gynaecology,
University of Sydney

Assoc Professor Reg Lord AM (to April 2013) Program Head, Gastroesophageal Cancer Research, St Vincent's Centre for Applied Medical Research

Mr John Moroney Consumer Representative

Assoc Professor Natalka Suchowerska Head, Research and Education, Department of Radiation Oncology, Royal Prince Alfred Hospital

Dr Andrew Penman AM (to October 2012) CEO, CCNSW

Professor Sandra Jones Director, Centre for Health Initiatives, University of Wollongong

Dr Melanie Price (to January 2013) Executive Director, Psycho-Oncology Co-operative Research Group, University of Sydney

#### In attendance:

Ms Regina Sutton (from October 2012) CEO, CCNSW

Ms Kathy Chapman Director, Health Strategies Division, CCNSW

Dr Libby Topp Manager, Research Strategies Unit, CCNSW

Dr John Williams Research Governance Officer, Research Strategies Unit, CCNSW

#### **Governance Committee**

Mr Bruce Hodgkinson SC (Chair) CCNSW Board Chair

Assoc Professor Michael Back CCNSW Board Member

Ms Jill Boehm OAM CCNSW Board Deputy Chair

Mr Chris Dawson Turner Freeman Lawyers (retired)

#### In attendance:

Ms Regina Sutton (from October 2012) CEO, CCNSW

Dr Andrew Penman AM (to October 2012) CEO, CCNSW

Ms Angela Aston Company Secretary, CCNSW

#### **Remuneration Committee**

Mr Paul Lahiff (Chair)
CCNSW Board Member

Mr Bruce Hodgkinson SC CCNSW Board Chair

Mr Bob Sendt (to February 2013) CCNSW Board Member

#### Research Review Committee

Professor Louisa Jorm (Chair) Foundation Professor of Population Health, University of Western Sydney

Dr Monica Robotin Medical Director, CCNSW

Ms Gill Batt Director, Cancer Information and Support Services, CCNSW

Assoc Professor Freddy Sitas Director, Cancer Research Division, CCNSW Mr Jim Grainda Consumer Representative

Ms Angela Aston Executive Officer Manager, Office of the CEO, CCNSW

Dr Andrew Penman AM Ex Officio Former CEO, CCNSW

#### The Board of Directors

The Board directs the affairs of The Cancer Council NSW (the Company), as conferred by the Constitution. In carrying out its responsibilities and exercising its powers, the Board recognises its overriding responsibility to act honestly, fairly and diligently, and in accordance with the law in serving the interests of The Cancer Council NSW, including its employees, customers and the community.

#### **Governance Committee**

The Governance Committee meets at least three times a year and is responsible for advising the Board on the composition of the Board and its Committees; reviewing the performance of the Board, its Committees and individual Directors; and advising the Board on appropriate corporate governance standards and policies. There are three members on this Committee, all appointed by the Board, including an external independent person with relevant expertise. Other members are co-opted with relevant skills as required. A main focus for the Governance Committee this year has been the role of membership at Cancer Council NSW, and a review of Governance Benchmarking.

#### **Audit and Finance Committee**

The Audit and Finance Committee is responsible for the adequacy and effectiveness of accounting and financial controls to assess, monitor and manage business risk; annual reporting; legal and ethical compliance programs; and internal and external audit functions.

#### **Investment Committee**

The Investment Committee oversees surplus funds ensuring they are invested wisely to maintain the long-term viability of Cancer Council NSW.

#### **Ethics Committee**

Cancer Council NSW's Ethics Committee has operated since 1989, reviewing the ethical acceptability of research proposals relating to cancer and to public health.

In addition to the provision of ethical review of research proposals, the Committee provides education and advice to research staff and researchers navigating the challenges of preparing applications for ethics review research protocols. The Committee operates within the parameters provided by the National Health and Medical Research Council's (NHMRC) National Statement on Ethical Conduct in Human

Research Guidelines and Cancer Council NSW's Privacy Management Plan. Committee members are encouraged to attend training sessions offered by the NSW Ministry of Health and the NHMRC, to ensure that they are adequately equipped for reviewing proposals.

In order to ensure Cancer Council NSW's Ethics Committee remains constituted in accordance with the requirements of the NHMRC and that a quorum is reached at all Committee meetings, efforts were directed during 2012/13 towards recruiting new members across the range of essential membership categories. Membership changes included the appointment of a new lawyer, with Mr James Emmerig replacing Ms Joanne Muller, whose term of membership expired during the year. Ms Alanna Linn was appointed as a second laywoman and Mr Tim Read was appointed as a second religious representative, Ms Lani Attwood was appointed as a second allied health professional, and Associate Professor David Smith was appointed as a third experienced researcher.

#### **Cancer Research Committee**

Cancer Council NSW's Cancer Research Committee reports to the Board of Cancer Council NSW. The Committee's responsibilities include the provision of guidance to the Board of Cancer Council NSW on cancer research policy and programs; the commissioning of procedures in accordance with policy for funding of research by Cancer Council NSW, and ensuring the integrity of those procedures; and the formulation of recommendations for research grant funding for the consideration of the Board.

#### **Remuneration Committee**

The Remuneration Committee is responsible for assessing CEO remuneration and performance against agreed criteria.

#### **Research Review Committee**

The Research Review Committee, reporting to the Cancer Research Committee and chaired by Professor Louisa Jorm, Foundation Professor of Population Health at the University of Western Sydney and Research Director (part-time) at the Sax Institute, provides a research review service for internal researchers and for researchers applying for ethics approval who have not obtained a scientific peer review of their study.

## Our governance

#### **Governance principles**

#### **Principle 1:**

#### Lay solid foundations for management and oversight

The role of The Cancer Council NSW Board is defined by our Board Charter, which is available on Cancer Council NSW's website (cancercouncil.com.au).

The role of the Chief Executive Officer (CEO) and Senior Management is defined by contract and through a schedule of delegations. Under the schedule of delegations, the Board is responsible for evaluating the performance of the CEO, and the CEO is responsible for appointing senior executives and evaluating their performance.

In October 2012, a new CEO, Ms Regina Sutton, was appointed to fill the vacancy created by Dr Andrew Penman's departure; however, in June 2013, Ms Sutton sadly announced that due to family reasons, she would be leaving Cancer Council NSW and Australia. She has been replaced by an interim CEO, Mr Jim L'Estrange. During her time at Cancer Council NSW, Ms Sutton commenced work on revising the organisation's strategic plan, which has been significantly advanced by Mr L'Estrange.

The Chief Operating Officer (COO) role, introduced in March 2012, was abolished in April 2013, in favour of expanding representation from across the organisation on the Executive team. This strategy enhanced our communication processes and brought greater commitment to the development of objectives aimed at cost-effective and efficient service delivery to our customers and stakeholders, without compromising the sensitivity and support we offer to the cancer community.

#### **Principle 2:**

#### Structure the Board to add value

The process for electing members to the Board is outlined in the Constitution, which is available on Cancer Council NSW's website (**cancercouncil.com.au**). In 2012/13, the majority (9 of 10) of the Board members were independent Directors. One Director, Dr Stephen Ackland, is involved as an investigator on a research grant funded by Cancer Council NSW. The Chair of the Board is an independent Director and the CEO is not a member of the Board.

Two Core Directors, Mr Bruce Hodgkinson and Mr Stephen Roberts, concluded their second terms of office on the Board in December 2012, and stood for election for a third term. No additional nominations were received for the positions. After following the established Board election process, both Mr Hodgkinson and Mr Roberts were confirmed elected for a third term to the Board of Cancer Council NSW, effective from the December 2012 Annual General Meeting.

Mr Mark Phillips was co-opted to the Board in April 2013 following the resignation of Mr Bob Sendt at the end of his second term of office. The Board welcomed Mr Phillips' extensive experience in building and growing businesses, principally in the finance sector.

Also, Mr John Stubbs was introduced as the Cancer Institute NSW nominee to the Board, replacing Dr Patrick Cregan, who resigned in June 2012. Mr Stubbs brings with him a wealth of consumer advocacy—related experience and a passionate interest in clinical trials in Australia.

The Board has the power to, and does when appropriate, seek independent professional advice. In 2012/13, the Governance Committee commenced a health check of the Board to measure its performance, to ensure it continues to add value to the organisation. An external consultant, Heidrick & Struggles, facilitated a workshop in February 2013 as a first step in measuring Board performance.

#### **Principle 3:**

#### Promote ethical and responsible decision-making

The organisational Code of Conduct provides an ethical framework for all decisions and actions, and ensures that Cancer Council NSW demonstrates fairness, integrity, and sound professional and ethical practice at all times. The policy is available on Cancer Council NSW's website (cancercouncil.com.au).

Cancer Council NSW Directors are not paid for their services on the Board; however, they may be reimbursed for expenses incurred (such as for travelling and accommodation) as a result of attending meetings of the Directors or otherwise in the execution of their duties. Cancer Council NSW acknowledges that it may be possible for Directors to be paid a fee for services performed or requested by Cancer Council NSW, but this would be for specific work for Cancer Council NSW beyond or outside the Directors' ordinary duties. A Conflict of Interest Policy provides clear guidelines to the Board in relation to dealing with matters that involve, or are perceived to involve, personal conflicts of interest for Board members.

#### Principle 4:

#### Safeguard integrity in financial reporting

The Board has a properly constituted Audit and Finance Committee, which reports regularly to the Board. The Audit and Finance Committee Charter outlines the Committee's guiding principles and is available on Cancer Council NSW's website (cancercouncil.com.au).

In 2010, the Board appointed an internal auditor, Oakton, for a three-year period, following an open tender process. Refer to Principle 7 for information about the internal reviews undertaken this year.

#### **Principle 5:**

#### Make timely and balanced disclosure

Cancer Council NSW is not a listed company; however, it reports to its members and to regulators through the medium of an annual report issued in compliance with the *Corporations Act 2001* (Cwlth), and through the Annual General Meeting.

Cancer Council NSW also registered as a Not-for-profit Charity in accordance with the Australian Charities and

Not-for-profits Commission (ACNC) in February 2013, and the Governance Committee has been reviewing the Board's charters and policies to ensure all areas of the organisation are aware of and compliant with the ACNC regulations.

Cancer Council NSW aims for maximum and timely disclosure both online at cancercouncil.com.au and in hard copy annual reports, demonstrating our commitment to continually ensuring our donors are kept informed on how their funds are utilised.

#### **Principle 6:**

#### Respect the rights of "stakeholders"

As of June 2013, Cancer Council NSW had 38 (36 Ordinary, 2 Organisational) formal members. Cancer Council NSW communicates with its membership via the annual report, which is mailed to them, and the Annual General Meeting. Other stakeholders include event volunteers and community supporters, various Committee members (such as the Cancer Research Committee, the Ethics Committee and Regional Advisory Committees across NSW), as well as donors and consumers. Cancer Council NSW communicates with its stakeholders via the website. social media, various quarterly newsletters such as Volunteer Voice and Members Update, and face-to-face meetings throughout the year.

In 2012/13, the Governance Committee commenced a review of Cancer Council NSW's approach to membership in order to identify the role played by our members at Cancer Council NSW.

#### **Principle 7:**

#### Recognise and manage risk

On behalf of the Board, the Audit and Finance Committee is authorised to oversee the adequacy and effectiveness of the accounting and financial controls and procedures, and the Governance Committee oversees the Legislative Compliance and Policy Register. Both committees assess, monitor and manage business risk. Cancer Council NSW has a three-year Internal Audit Plan to review and address relevant risks. Internal audits conducted in 2012/13 are summarised below.

In 2012/13, the Investment Committee continued to review the optimum level of the investment portfolio, taking into account both current and future spending expectations.

#### **Principle 8:**

#### Remunerate fairly and responsibly

The Board utilises a company-wide process for determining remuneration. While the responsibility for the remuneration of the CEO lies with the Board, and the responsibility for the remuneration for the rest of the staff is with the CEO, a similar process for benchmarking and evaluation is used by both. The services of an external remuneration consultant are used to conduct benchmarking.

#### **The Cancer Council NSW**

On 30 September 2005, The Cancer Council NSW began operating as a public company limited by guarantee under the provisions of the Corporations Act 2001 (Cwlth). The Cancer Council NSW is registered with the Australian Taxation Office as a Health Promotion Charity.

Cancer Council NSW is also registered as a Not-for-profit Charity with the Australian Charities and Not-for-profits Commission.

#### **Privacy at Cancer Council NSW**

Cancer Council NSW's commitment to security and confidentiality includes complying with the Privacy Act 1988 (Cwlth), specifically in relation to the amendments made by the *Privacy Amendment* (Private Sector) *Act 2000* (Cwlth) (Privacy Act), and, where applicable, the Health Records and Information Privacy Act 2002 (NSW). Cancer Council NSW's Privacy Steering Committee oversees the review/revision of privacy documentation as needed; receives information about changes to privacy legislation; discusses privacy issues arising; and endeavours to ensure members of staff are properly informed on relevant privacy matters for their units.

During 2012/13, no applications were received for internal review under Division 1, section 36 of the Privacy Act 1988 (Cwlth) or Part 6 of the Health Records and Information Privacy Act 2002 (NSW).

#### Internal audits conducted in 2013/14

Review	Number of recommendations made	Percentage (%) of recommendations implemented to date
Nutrition Unit Program	1	100%
Specific event review – Australia's Biggest Morning Tea Strategy is currently being revised to align with complete event portfolio and other state Cancer Councils, with the goal to identify strategies to stabilise/improve cost:income outcomes.	5	80%
Change management	4	100%
Finance – procurement, expenditure to accounts payable	6	100%
Major events – detailed review of Girls Night In and Pink Ribbon Day	4	100%
Research governance review	6	#
Retail stocktake review	1	100%
Review of Regional Offices and Statewide Services strategy	8	#
Work health and safety  All high-priority recommendations have been addressed; remaining action items are low-risk but significant improvements which will be implemented in 2013/14.	20	50%

# Our performance

# **Our Strategic Priorities**

## **Our performance**

What and how (some examples from 2012/13)	Outputs/measurables	2009	2010	2011		
SP1 – To drive major advances in re	search, ensuring no cancer is ign	ored				
We forge new discoveries in cancer causes,	New research grants awarded	28	10	30		
biology, trends and consequences, through funding grants.	Total research grants funded					
	Epidemiological studies in progress	58	52	60		
In partnership with government and collaborators, we fund a large population	Number of specimens in biobank	#	95,004	175,802		
biobank of specimens as our leading capital campaign.	Number of research grants received	9	9	8		
	Percentage of successful research grants applied for	*	*	32%		
We're developing CLEAR and 45 and Up as world-class platforms and engaging cancer researchers in their use.	Number of new CLEAR Study recruits	2,046	1,167	1,902		
We trial and deploy novel funding strategies and partnerships to unite the best ideas and researchers for the benefit of cancer control.	Total research expenditure (\$m)	14.4	14.3	16.1		
SP2 - To ensure the NSW communi	ty acts to prevent cancer and/or o	detect it a	at a cura	ble stage		
We work with organisations to create cancer-preventing environments, including disadvantaged and culturally and linguistically diverse communities, parents and children.	Community Grants awarded	123	117	101		
We facilitate cancer-smart policies and practices in organisations and settings.	Newly accredited SunSmart centres	1,015	850	931		
We support individuals to adopt cancer- preventative behaviours, including increased fruit and vegetable consumption.	Number of parents participating in the Fruit and Veg Sense program	127	482	1,285		
Our community engagement framework connects people and organisations to the cancer cause, providing opportunities to contribute directly to cancer control.	Community Cancer Networks and formal partnerships	*	*	83		
We help at-risk populations to change their behaviour, including partnering with social and community service organisations to address tobacco issues and support clients to quit.	Introduction of smoking care into community organisations' practice through the Tackling Tobacco Program			achieved		

<sup>\*</sup> Accurate data not available for this year

<sup>#</sup> Program/initiative did not exist in this year

2012	2013	Some outcomes from 2012/13 – our impact, contribution, insight or connection
20	21	Highlight: With a five-year, \$1.25 million Strategic Research Partnership grant awarded
79	71	in 2008, Professor Jacob George of the Westmead Millenium Institute and his team
65	70	transformed the prevention and management of liver cancer in NSW. Establishing a huge repository of knowledge about hepatitis B as the key risk factor for liver cancer, they developed innovative prevention programs targeting at-risk migrant communities, and clinical guidelines for the screening and treatment of liver cancer. Their work continues with the considerable funding they have leveraged against Cancer Council NSW's original investment in the 'B Positive' Program.
281,473	312,521	Highlight: Our biobank has been awarded ISO9001:2008 accreditation, an international standard which confirms our biobank follows world-class practices.
2	9	
29%	50%	Highlight: Significant increase in the success rate of research grants, with 9 grants received, valued at \$5,774,279.
1,440	1,599	Highlight: Researchers internally and externally are now using the data from CLEAR and 45 and Up Studies to gain insights into the lifestyle and genetic factors that influence cancer.
15.0	14.8	Highlight: Our investment in research makes Cancer Council NSW the largest financial supporter of cancer research outside of government funding agencies in NSW.
96	35	Highlight/Lowlight: We decided to reduce the number of Community Grants in 2012/13 however, greater focus was placed on delivering community projects aligned with our strategic plan, particularly cancer prevention, support and information services.
671	868	Highlight: More than two-thirds of NSW primary schools are now SunSmart, with many thousands more NSW children protected from overexposure to ultraviolet radiation.
1,573	3,508	Highlight: The rollout of the Eat It To Beat It program beyond the Hunter region engaged more than 3,500 parents through our Healthy Lunch Box and Fruit & Veg Sense sessions influencing an increased consumption of cancer-preventing fruits and vegetables for thousands of families.
117	106	Highlight: Our extensive collaborative relationships through vast networks across NSW provided connections or insights about the most important issues for local focus.
achieved	achieved	Highlight: The Tackling Tobacco Program is extending its impact on smoking among disadvantaged populations by engaging 23 new social and community service organisations to support their clients to quit smoking.

# **Our Strategic Priorities**

# Our performance

What and how (some examples from 2012/13)	Outputs/measurables	2009	2010	2011
SP3 – To give the NSW community a	a voice on issues and entitlement	s around	cancer	
We develop and deploy ways to engage, equip and mobilise people in achieving social	New Cancer Council advocates trained in NSW	78	72	68
change aligned to our mission.	Cancer Council advocacy supporters in NSW	*	2,133	3,672
We work to change legislation and policies to create cancer-preventing communities, including an increase in smoking bans in outdoor areas and restrictions in tobacco retailing.	Percentage of local governments that have adopted a smoke-free outdoor area policy	38%	50%	58%
We enhance understanding and support among policymakers for changes required to reduce the incidence and impact of cancer.				
SP4 - To ensure no one faces a can	cer diagnosis alone			
We increase the number and reach of	Calls and emails to Helpline	19,004	16,536	16,812
information and support services for people with cancer and their families.	Patients and carers using Helpline	9,308	8,131	8,092
	Understanding Cancer publications distributed	218,454	232,914	244,000
	Understanding Cancer publications viewed online – unique page views	436,849	431,411	426,981
	Telephone Support Group (TSG) sessions held	249	229	223
	Cancer Council Connect – number of referrals matched	626	640	516
We provide increasing help with the high cost of cancer.	Financial assistance grants to cancer patients and carers	1,893	1,774	1,573
	Financial assistance grants \$	472,000	490,102	381,909
We broker and elicit pro bono contributions from organisations and businesses with	Number of patients/carers assisted by our pro bono legal service	#	126	698
expertise and capacity to lend support to cancer patients and carers.	Number of patients/carers assisted by our pro bono Financial Planning Referral Service	#	46	309
We improve access to treatment via the provision or support of patient transport services.	Patient transport kilometres funded	834,464	706,221	740,753
We improve access to treatment via the provision or support of patient accommodation services.	Patient accommodation nights supported by Cancer Council	20,185	20,440	19,674

<sup>\*</sup> Accurate data not available for this year # Program/initiative did not exist in this year

2012	2013	Some outcomes from 2012/13 – our impact, contribution, insight or connection
50	85	Highlight: We have trained a total of 702 advocates, of whom 615 remain active, and we have 10,600 members in our CanAct community. See pages 14–15 for significant impact
8,000	10,600	from leveraging their support.
65%	100%	Highlight: Cancer Council NSW's advocacy, in collaboration with other health organisations and the local government sector, contributed to the introduction of state-wide smoke-free legislation covering a range of public outdoor areas.
		Highlight: Our advocacy and policies contributed to a ban on commercial solariums.
16,846	18,339	
7,728	6,830	
276,947	239,961	Highlight/Lowlight: Fewer patients and carers are accessing our Helpline and hardcopies
394,187	788,612	of our publications, yet access to our information online has doubled, highlighting a trend towards sourcing information online. Online information and support remain one of our focus areas.
196	203	locus areas.
445	480	
1,904	1,937	Highlight: More than 1,900 cancer patients received emergency financial assistance last year. Partnerships with utility providers contributed an additional \$40,000 towards the
418,463	444,551	program, meaning that 9% of applicants received more than \$500 in assistance at no additional cost to Cancer Council NSW.
1,003	1,227	Highlight: Our pro bono legal and financial planning programs connected patients and
565	1,315	carers with professionals for help with 2,542 issues in 2012/13. Innovative new workplace and small business programs helped another 130 people affected by cancer.
709,284	710,739	
12,401	16,633	Highlight: More than 4,500 people were provided transport to treatment across NSW when no other options were available.

# **Our Strategic Priorities**

# Our performance

What and how (some examples from 2012/13)	Outputs/measurables	2009	2010	2011				
SP5 – To expand the opportunities by giving money or fundraising	available for people to contribute	to our w	ork					
For efficiency, we monitor our event and	Cost:income ratio	33%	29%	32%				
appeal portfolio to ensure profitability and continuous improvements in an	Fundraising income/fundraising staff FTE	\$804,000	\$813,000	\$751,000				
ever-increasing competitive market.	Average \$ per Relay For Life event	\$72,464	\$90,970	\$100,789				
We facilitate mass participation events	Number of event hosts and supporters	*	*	24,200				
and appeals across NSW that engage the community in our mission to defeat cancer.	Number of Relay For Life events	69	67	67				
We build a robust, diverse fundraising	Total fundraising income (\$m)	48.3	53.8	52.9				
portfolio to ensure the ongoing funding of our programs and to underpin the independence of our operations.	Bequests – number of new estates notified during the year	83	104	94				
	Percentage of funds received from the community	95%	94%	96%				
Our people								
We engage volunteers in a wide variety of roles, extending our mission and reach in the community.	Volunteer contributions (hours captured)	*	258,246	279,843				
We ensure volunteers have opportunities to use their diverse skills and capabilities.	Number of volunteers contributing during the year	*	32,933	37,150				
We have an engaged and highly skilled paid workforce.	Number of staff, headcount (excluding casuals)	317	320	352				
We provide learning opportunities to increase and extend the capabilities of our people, so that they are equipped to deliver our mission.	Learning and development spend as percentage of staff costs	1.20%	0.90%	1%				
Our organisation								
We strive to work more effectively: better harnessing people, funds, technology and other resources to minimise our infrastructure and investment costs.	Infrastructure and investment costs as a percentage of total expenditure	8%	8%	7%				
We maintain our investments at levels equivalent to between 9 and 12 months of operational expenditure, in order to	Investment return per annum	-13%	14%	9%				
secure us against revenue fluctuations, to underwrite our forward commitments, and to provide capital funding flexibility.	Months of operational expenditure covered by investments	8.5	10.9	10.9				
We maintain best-in-class financial and business reporting within the framework of corporations and related law.		achieved	achieved	achieve				

<sup>\*</sup> Accurate data not available for this year # Program/initiative did not exist in this year

2012	2013	Some outcomes from 2012/13 – our impact, contribution, insight or connection
31%	37%	Lowlight: Our cost:income ratio increased in 2012/13, due to our community-based
\$809,000	\$774,000	fundraising events, a maturing Breakthrough program, and a more competitive market.  Reviewing this key area is an organisational focus for 2013/14.
\$132,845	\$140,776	Troviewing this key area is an organisational roots for 2010/14.
28,300	28,000	Highlight: Our events raised \$24.7 million, thanks to our 28,000 event supporters and
58	58	volunteers. Hundreds of thousands more people were engaged in our prevention or support messages through these events.
58.5	59.6	
97	99	Highlight: Maintaining a 96% community-funded model ensures a unique position of independence in addressing cancer issues in NSW.
96%	96%	
294,109	348,298	Highlight: Increasing numbers of community members contribute to our organisation,
36,312	38,156	including in areas where their particular skills have a significant impact on the community and people with cancer.
374	358	Highlight: Our Employee Engagement survey showed that 76.8% of our staff are engaged with employee commitment, empowerment and connection to organisational strategy rating most highly.
1%	0.78%	Highlight: A new learning and development framework has reconnected staff and volunteers with the programs offered and opportunities to learn and grow.
8%	8%	
0%	17%	Highlight: The return for our investment portfolio was 17% this year, our best result in 6 years. Our 10-year return of 9.5% continues to outperform the ASX200's 6.1% over the same period.
10.9	10.0	затте репои.
achieved	achieved	Highlight: Shortlisted in the PwC Transparency Awards in 2012 and recognised with the not-for-profit sector special communication award at the Australasian Reporting Awards, recognising continual improvements in reporting.

#### **Publications and submissions**

The following pages document the extensive research undertaken by Cancer Council NSW staff and published in peer-reviewed publications in 2012/13. This reflects the breadth of our research into cancer causes, health services and prevention, and the influence of our work locally and internationally. Also included are a number of reports and submissions made by Cancer Council NSW to decision-makers regarding public health policy and recommendations.

#### **Publications**

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Yu XQ, Baade PD, O'Connell DL. Conditional survival of cancer patients: an Australian perspective. BMC Cancer. 2012;12:460.

#### **Submissions**

- Submission to the Social Policy Committee, Legislative Assembly, Parliament of New South Wales re: Provision of Alcohol to Minors (Inquiry) - July 2012
- Submission to the Parliament of the Commonwealth of Australia re: Exposure Draft - Homelessness Bill 2012 - July 2012
- Submission (on behalf of Cancer Council Australia) to the Australian Government re: National Food Plan Green Paper - September 2012
- Submission to the Independent Local Government Review Panel re: Response to Strengthening Your Community Consultation Paper – September 2012
- Submission (on behalf of Cancer Council Australia) to the National Health and Medical Research Council re: Response to draft Appendix to the Australian Dietary Guidelines: Dietary guidelines through an environmental lens - November 2012
- Submission to the NSW Government re: Review of Strata and Community Title Laws - November 2012
- Submission to Ministry of Health re: Response to Healthy Eating and Active Living Strategy: Preventing overweight and obesity in NSW 2013-2018 - December 2012
- Submission to NSW Office of Health and Medical Research (OHMR) re: Consultation Paper: Proposed Framework for NSW Biobanking – January 2013
- Submission to the Standing Committee on Social Issues, Parliament of New South Wales re: Strategies to Reduce Alcohol Abuse among Young People in NSW (Inquiry) - February 2013
- Submission to Department of Health and Ageing re: Response to Options to Introduce New Tobacco Product Content Controls and New Disclosure Requirements for Tobacco Products Discussion Paper - February 2013
- Submission to the Australian National Preventive Health Agency re: Response to Alcohol Advertising: The effectiveness of current regulatory codes in addressing community concerns Discussion Paper - February 2013
- Submission to NSW Legislative Council re: Use of Cannabis for Medical Purposes (Inquiry) - February 2013
- Submission (on behalf of Cancer Council Australia) to the Australian Preventive Health Agency re: Comments on Frameworks for Monitoring Children's Exposure to Food Marketing on Television Issues Paper - June 2013
- Submission to National Mental Health Commission Expert Reference Group re: Mental Health Reform - June 2013
- Submission to Commonwealth Government re: Comments on whether Australia should sign and ratify the World Health Organization Framework Convention on Tobacco Control Protocol to Eliminate Illicit Trade in Tobacco Products - June 2013.

# **Registrations and legislation**

The Australian Business Number (ABN) is 51 116 463 846.

The Australian Company Number (ACN) is 116 463 846.

The Cancer Council NSW is a public company limited by guarantee trading under the name of Cancer Council NSW.

Cancer Council NSW's charitable fundraising number is CFN 18521. This certifies Cancer Council NSW holds a charitable fundraising authority under Section 16 of the *Charitable Fundraising Act 1991* (NSW), subject to compliance with the Act, and the Charitable Fundraising Regulation 2003 and conditions of authority.

Cancer Council NSW is a Health Promotion Charity.

Cancer Council NSW is endorsed as a deductible gift recipient under Subdivision 30-BA of the *Income Tax Assessment Act 1997* (Cwlth).

Cancer Council NSW operates in a complex legislative environment, including the following state and federal laws:

#### State

Annual Holidays Act 1944 (NSW)

Anti-Discrimination Act 1977 (NSW)

Charitable Fundraising Act 1991 (NSW)

Charitable Trusts Act 1993 (NSW)

Crimes Act 1900 (NSW)

Fair Trading Act 1987 (NSW)

Health Records and Information Privacy Act 2002 (NSW)

Long Service Leave Act 1955 (NSW)

Public Holidays Act 2010 (NSW)

Retail Leases Act 1994 (NSW)

Retail Trading Act 2008 (NSW)

Work Health and Safety Act 2011 (NSW)

Workers Compensation Act 1987 (NSW)

Workplace Injury Management and Workers

Compensation Act 1998 (NSW)

Workplace Surveillance Act 2005 (NSW)

#### **Federal**

A New Tax System (Goods and Services) Act 1999 (Cwlth)

Age Discrimination Act 2004 (Cwlth)

Australian Charities and Not-for-profit Commission Act 2012 (Cwlth)

Charities Act 2013 (Cwlth)

Criminal Code Act 1995 (Cwlth)

Competition and Consumer Act 2010 (Cwlth)

Corporations Act 2001 (Cwlth)

Defamation Act 2005 (Cwlth)

Disability Discrimination Act 1992 (Cwlth)

Fair Work Act 2009 (Cwlth)

Fringe Benefits Tax Assessment Act 1986 (Cwlth)

Income Tax Assessment Act 1997 (Cwlth)

Privacy Act 1988 (Cwlth)

Racial Discrimination Act 1975 (Cwlth)

Sex Discrimination Act 1984 (Cwlth)

Workplace Gender Equality Act 2012 (Cwlth).

# **Government funding**

Our **Cancer Research Division** received government funding in the form of competitive, peer-reviewed grants. Grant expenditure is reported annually to the funding bodies. During 2012/13, the Division received:

- Funding totalling \$825,000 from the National Health and Medical Research Council (NHMRC)
- Funding totalling \$166,000 from the Cancer Institute NSW.

In 2012/13, our **Health Strategies Division** received the following government grants:

- Funding of \$30,000 from the NSW Health Administration Corporation for Eat It To Beat It
- Funding of \$118,000 from Western Sydney and Nepean Blue Mountains Local Health Districts for Eat It To Beat It
- Funding of \$90,000 from the Commonwealth
   Department of Health and Ageing for Eat It To Beat It
- Funding of \$15,000 from the NSW Health Administration Corporation for food policy.

In 2012/13, our **Cancer Information and Support Services Division** received the following government grants:

- Funding of \$25,000 from Cancer Australia for supporting people with cancer
- Funding of \$20,000 from the Cancer Institute for the hepatitis B Let's talk about it project
- Funding of \$57,000 from Ageing, Disability and Home Care, Department of Family and Community Services for our Online Support Skills to Cancer Carers
- Funding of \$20,000 from the NSW Department of Health for hepatitis B resource development.

# **Our summarised** financial report

The financial statements and charts in this summarised financial report have been derived from Cancer Council NSW's Full Financial Report 2012/2013.

A commentary is also provided in the full financial report to assist readers in understanding the year's results, compared with last year and budget.



#### Find out more

For a full understanding of the financial performance, financial position, and financing and investing activities of Cancer Council NSW (CCNSW), please see the full financial report and auditor's report on our website:

cancercouncil.com.au/annualreport2013

#### Statement of profit or loss and other comprehensive income

For the year ended 30 June 2013

	2013 \$'000	2012 \$'000
Revenue		
Fundraising income	59,588	58,513
Retail income	7,609	7,130
Interest and investment income	2,495	2,726
Grant income	2,220	2,340
Other revenue	914	811
Total revenue	72,826	71,520
Increase in fair value of investment property	_	30
Total income	72,826	71,550
Expenses		
Fundraising expenditure	21,948	18,235
Retail expenditure	6,905	6,295
Research expenditure	14,782	14,962
Regional program delivery	7,227	6,438
Cancer information and support services	7,010	8,126
Health advocacy and prevention	4,501	4,695
Media, communication and marketing expenditure	3,317	2,853
Infrastructure and investment	6,043	5,516
Total expenses	71,733	67,120
Surplus before income tax expense	1,093	4,430
Income tax expense	-	_
Surplus for the year	1,093	4,430
Other comprehensive income		
Items that will not be reclassified subsequently to surplus or deficit:		
Gain/loss on disposal of available-for-sale financial assets	67	_
Increase/(decrease) in fair value of available-for-sale financial assets	6,283	(2,461)
Revaluation of land and buildings	-	(2,401)
Total comprehensive income for the year	7,443	2,620

# **Statement of financial position**

#### For the year ended 30 June 2013

	2013 \$'000	2012 \$'000
Assets		
Current assets		
Cash and cash equivalents	4,552	8,323
Trade and other receivables	3,946	2,160
Inventories	1,982	1,348
Financial assets	_	305
Total current assets	10,480	12,136
Non-current assets		
Investment properties	1,210	330
Financial assets	59,942	52,392
Intangible assets	723	424
Property, plant and equipment	17,947	17,963
Total non-current assets	79,822	71,109
TOTAL ASSETS	90,302	83,245
Liabilities		
Current liabilities		
Trade and other payables	3,248	3,543
Provisions – employee benefits	2,000	1,964
Total current liabilities	5,248	5,507
Non-current liabilities		
Provisions – employee benefits	601	728
Total non-current liabilities	601	728
TOTAL LIABILITIES	5,849	6,235
NET ASSETS	84,453	77,010
Funds		
	70.004	70.506
General funds	72,004	70,506
Restricted funds reserve	6,036	6,538
Available-for-sale financial assets reserve	1,636	(4,647)
Grant income reserve	1,202	1,038
Asset revaluation reserve	3,575	3,575
TOTAL FUNDS	84,453	77,010

#### **Statement of changes in funds**

#### For the year ended 30 June 2013

	General funds	Restricted funds reserve	Available- for-sale financial assets reserve	Grant income reserve	Asset revaluation reserve	Total funds
	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000
Opening balance as at 1 July 2011	63,998	8,421	(2,186)	1,233	2,924	74,390
Transfer to/(from) reserves	2,078	(1,883)	-	(195)	-	-
Surplus for the year	4,430	_	_	_	_	4,430
Other comprehensive income for the year	_	_	(2,461)	_	651	(1,810)
Total comprehensive income for the year	4,430	_	(2,461)	_	651	2,620
Closing balance as at 30 June 2012	70,506	6,538	(4,647)	1,038	3,575	77,010
Opening balance as at 1 July 2012	70,506	6,538	(4,647)	1,038	3,575	77,010
Transfer to/(from) reserves	338	(502)	-	164	_	_
Surplus for the year	1,093	_	_	_	_	1,093
Other comprehensive income for the year	67	_	6,283	_	_	6,350
Total comprehensive income for the year	1,160	-	6,283	_	_	7,443
Closing balance as at 30 June 2013	72,004	6,036	1,636	1,202	3,575	84,453

# **Nature and purpose of reserves**

#### Restricted funds reserve

The restricted funds reserve relates to bequests and donations received by CCNSW with a purpose specified in the bequest or by the donors. These funds are held in the restricted funds reserve until spent appropriately.

#### Available-for-sale financial assets reserve

The available-for-sale financial assets reserve is used to record changes in the fair value of financial assets classified as available-for-sale. Amounts are reclassified to surplus or deficit when the associated assets are sold or impaired.

#### Grant income reserve

The grant income reserve relates to grant monies received but not yet spent. These funds are held in reserve until spent appropriately in line with the conditions of the funding agreement.

#### Asset revaluation reserve

The asset revaluation reserve is used to record increments and decrements on the revaluation of CCNSW land and buildings.

## **Statement of cash flows**

#### For the year ended 30 June 2013

	2013 \$'000	2012 \$'000
Cash flows from operating activities		
Receipts		
Receipts from supporters and funding sources (inclusive of GST)	65,891	65,886
Receipts from grant funding	2,220	2,340
Dividends, franking credits and interest received	436	673
	68,547	68,899
Payments		
Payments to suppliers and employees (inclusive of GST)	(71,706)	(63,989)
	(71,706)	(63,989)
Net cash inflow/(outflow) from operating activities	(3,159)	4,910
0.15 6		
Cash flows from investing activities		
Proceeds from sale of property, plant and equipment	271	834
Proceeds from sale of available-for-sale financial assets	1,000	_
Proceeds from sale of held-to-maturity investments	305	2,057
Payments for purchase of held-to-maturity investments	_	(305)
Payments for purchase of intangible assets	(386)	(434)
Payments for purchase of property, plant and equipment	(1,802)	(1,881)
Net cash inflow from investing activities	(612)	271
Net increase/(decrease) in cash and cash equivalents	(3,771)	5,181
Cash and cash equivalents at beginning of year	8,323	3,142



#### REPORT OF THE INDEPENDENT AUDITOR ON THE SUMMARY FINANCIAL STATEMENTS

To the members of The Cancer Council NSW

#### Report on the Summary Financial Statements

The accompanying summary financial statements of The Cancer Council NSW, which comprises the statement of financial position as at 30 June 2013, the summary statement of profit or loss and other comprehensive income, summary statement of changes in equity and summary statement of cash flows for the year then ended, related notes, are derived from the audited financial report for the year ended 30 June 2013. We expressed a qualified audit opinion on that financial report in our report dated 30 October 2013.

The summary financial statements do not contain all the disclosures required by Australian Accounting Standards and Interpretations. Reading the summary financial statements, therefore, is not a substitute for reading the audited financial report of The Cancer Council NSW.

#### Directors' Responsibility for the Financial Report

The directors of the company are responsible for the preparation of the summary of the audited financial report on the basis described in Note 1.

#### **Auditor's Responsibility**

Our responsibility is to express an opinion on the summary financial statements based on our procedures, which were conducted in accordance with Auditing Standard ASA 810 Engagements to Report on Summary Financial Statements.

#### **Basis for Qualified Opinion**

Cash from donations and other fundraising activities are a significant source of revenue for the company. The company has determined that it is impractical to establish control over the collection of revenue from these sources prior to entry into its financial records. Accordingly, as the evidence available to us regarding revenue from these sources were limited, our audit procedures with respect to donations and other fundraising activities had to be restricted to the amounts recorded in the financial records. We therefore are unable to express an opinion whether donations and other fundraising activities received are complete.

#### **Oualified Opinion**

In our opinion, except for the possible effects of the matter described in the Basis for Qualified Opinion paragraph, the information reported in the summarised financial report, is consistent, in all material respects, with the financial report from which it was derived. For a better understanding of the scope of the audit, this auditor's report should be read in conjunction with our audit report on the financial report.

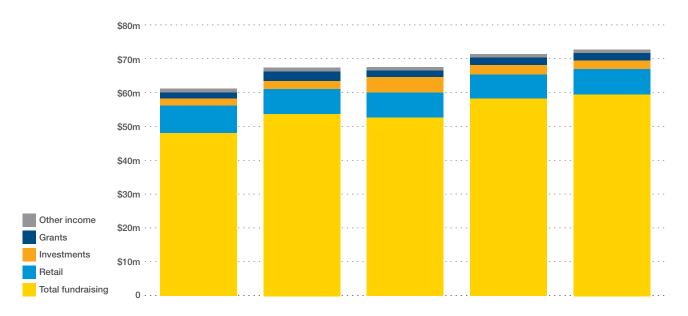
#### **BDO East Coast Partnership**

Paul Bull Partner

Sydney, 30 October 2013

BDO East Coast Partnership ABN 83 236 985 726 is a member of a national association of independent entities which are all members of BDO (Australia) Ltd ABN 77 050 110 275, an Australian company limited by guarantee. BDO East Coast Partnership and BDO (Australia) Ltd are members of BDO International Ltd, a UK company limited by guarantee, and form part of the international BDO network of independent member firms. Liability limited by a scheme approved under Professional Standards Legislation (other than for the acts or omissions of financial services licensees) in each State or Territory other than Tasmania.

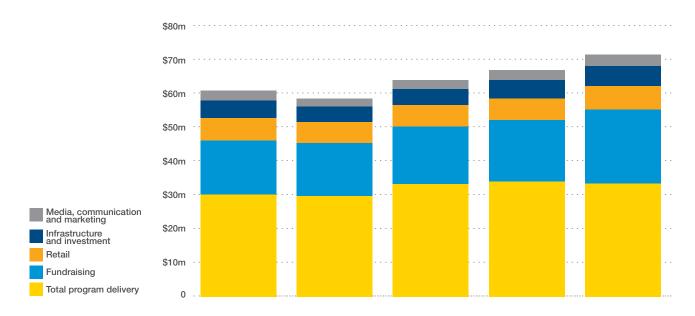
# Where the money comes from ...



	2009 \$m	%	2010 \$m	%	2011 \$m	%	2012 \$m	%	2013 \$m	%
Events	12.6		15.2		16.6		18.3		17.6	
Appeals	25.7		26.2		26.3		26.2		28.3	
Bequests	10.0		12.4		10.0		14.0		13.7	
Total fundraising	48.3	78%	53.8	80%	52.9	78%	58.5	82%	59.6	82%
Retail	8.0	13%	7.5	11%	7.3	11%	7.1	10%	7.6	11%
Investments	2.2	4%	2.3	3%	4.6	7%	2.7	4%	2.5	3%
Grants	1.8	3%	2.8	4%	1.9	3%	2.3	3%	2.2	3%
Other income	1.1	2%	1.1	2%	0.9	1%	0.9	1%	0.9	1%
Total income*	61.4		67.5		67.6		71.5		72.8	

<sup>\*</sup>Excludes capital gains on investments

# Where the money goes ...



	2009 \$m	%	2010 \$m	%	2011 \$m	%	2012 \$m	%	2013 \$m	%
Program delivery expenditure										
Research	14.4		14.4		16.1		15.0		14.8	
Regional program delivery	5.1		5.0		5.6		6.4		7.2	
Health advocacy and prevention	4.1		3.7		4.8		4.7		4.5	
Information and support	6.8		6.7		7.0		8.1		7.0	
Total program delivery	30.4	50%	29.8	51%	33.5	53%	34.2	51%	33.5	47%
Other expenditure										
Fundraising	15.9	26%	15.8	27%	16.9	26%	18.2	27%	22.0	30%
Retail	6.6	11%	6.1	10%	6.4	10%	6.3	10%	6.9	10%
Infrastructure and investment	5.2	8%	4.7	8%	4.7	7%	5.5	8%	6.0	8%
Media, communication and marketing	2.9	5%	2.3	4%	2.6	4%	2.9	4%	3.3	5%
Total expenditure*	61.0		58.7		64.1		67.1		71.7	

<sup>\*</sup>Excludes capital losses on investments

# Thank you

We thank the following generous individuals and organisations who have supported us in 2012/13. They have had a significant impact on our mission through the financial or in-kind support they have provided to Cancer Council NSW. There are others who elected not to have their names published, and to whom we also say thank you.

Alle is Shaving Her Hair for Cancer ATHRA's Ride with Pride hosted by the Horsepitality Trail Riders Club Agua Dining and Ripples Group of Restaurants Australian Medical Association (NSW) Avoca Beach **GNI Committee** Bartier Perry Boehringer Ingelheim Pty Ltd Cliff Burk

Mirella Carbone

Angela Cho Count Charitable Foundation CRAB (Cancer Research Advocate Bikers) Families of the Bangladeshi Community James Freeman, Founder/ Director of Sh\*tbox Rally Julie Giovenco Catherine Giunta Jessica Hore In Memory of David Barbera In Memory of David Dand Maximum Adventure

Michelle Brooks Pedestrian Council of Australia Ltd Rixs Creek Charity Golf Day Keith and Alison Ross Rotary Club of Campsie Maxwell Schroder Nancy Sherry Kay Sidman SOS Print + Media Group Sydney Markets Foundation Sydney Water

Andrew Michael and

James Tate and Julie McGrath Telstra The Denton Family Trust The Patronax Foundation The Profield Foundation The Wales Family Foundation Tour de Cure Tremendous Walk Vincent Chiodo Charitable Foundation Kristen Webster Westpac Group WhereScape Roseanne Zaccagnini

# Thank you for bequests

We acknowledge the extraordinary generosity of the following people who left a bequest to Cancer Council NSW in their Will. Their kindness enables us to fund life-saving research and provide cancer support services now and in the future. There can be no greater legacy than a gift that keeps on giving. There are some significant benefactors who wish to remain anonymous, and to whom we also say thank you.

Carmel Catherine Alderman Peggy May Auld Ursula Baldry Helene Alice Barton Lorraine Mavis Blackett Joyce Annie Brophey Doris Brown **Jeffrey Carter** Veronica C Casey Baukje Choufour Marie Patricia Coady Joyce Irene Coonan Anne Lawrence Davev Anne Isobel Davies Rita Dent Rosemary Anna Eastburn Kondelea Elliott Elsie May Friend **Donald Bruce Gill** Barbara Josepha Glasson Joyce Milba Graham John Morrison Grant Colin James Guppy Jean Aileen Gwyther

Anne McFadden Haines

Marie Josephine Hallam

Mary Hilda Hennessy Amy Lillian Hestelow Lily Hume John Huxley Herta Lucy Jarvis Helen Anice Furner Jordan John Alfred Kluver Helena Kozianski Allan Louis Kremer **Donald James Livingstone** Mary Patrice MacDermott Gerald James McNamara Shirley Pamela Miners Doreen Phyllis Monks Ann Maree Munro Richard Grenfield O'Brien John Sherratt Pleydell Gwenyth Pryor Betty Joan Reid Betty Doreen Richards Fiona Ross-Smith Clement Saxton Edith Schwartz George Alfred Smith

Kathleen Mary Harris

Thomas Evan Henley

Graham Warren Smith Edna Ma Strike Denise Suplina Audrey Gwenneth Thomson Girvan Frederick Todd

Lionel Francis Tuck Edmund Laird Waddell Ada Wadsworth Timothy David Youldon

## **Professional services**

Cancer Council NSW acknowledges the professional services of the following organisations:

**Bankers** NAB **Auditors** 

Internal Auditors – Oakton External Auditors - BDO

**Investment advisors** Mercer

We also thank the following firms for providing Cancer Council NSW with pro bono legal advice this year.

Baker & McKenzie Clayton Utz Lander & Rogers **DLA Piper** Maddocks Clifford Chance Corrs Chambers Westgarth



#### For more information

You too can help us beat cancer by including a gift to Cancer Council NSW in your Will. It is a simple process that will make a real difference to the lives of people affected by cancer and to the health of

Email bequests@nswcc.org.au for more information.

# How you can help beat cancer

# Call us on 13 11 20

### Volunteer with us

Our volunteers are normal, everyday people who generously give their time, skills and hope. There are so many ways to volunteer your time and energy. For example, you may have specialist skills, be able to provide peer support for patients and carers, or perhaps you'd like to help with administration.

Find out more about opportunities for you or your organisation to volunteer with us by emailing: **volunteervacancies@nswcc.org.au** or calling: **(02) 9334 1813** 

# Join a Relay For Life

Relay For Life is a unique fundraising event that brings communities together in the fight against cancer. Whether you are a cancer survivor, a carer, someone supporting friends or loved ones, or simply wanting to make a difference, Relay For Life empowers everyone who participates.

Register a team or join an existing event at: **relay.cancercouncil.com.au** 

# Join a research study

From time to time, we conduct research studies on people drawn from the Australian population. Studies range in type from questionnaire-based surveys, focus groups and interviews to other types of research.

Please note that not all study participants need to be cancer patients. Register at:

cancercouncil.com.au/joinastudy

# Call our Helpline

For information about any aspect of cancer, our Cancer Council Helpline is an excellent starting point. Helpline is a free and confidential telephone information and support service (local call cost applies). It is staffed by oncology-experienced health professionals, who provide an exceptional level of cancer information and support to the people of NSW. Call us now on: **13 11 20** 

# Join a fundraising event

Hosting or joining a fundraising event is a fantastic way to raise funds to help defeat cancer and have a great time with your friends, family or work colleagues. More than 28,000 people hosted or organised a fundraising event or activity for us last year. Our events are some of the most popular and well recognised in Australia – Daffodil Day, Australia's Biggest Morning Tea and Pink Ribbon Day to name a few.

To find out when and how you can get involved, visit: cancercouncil.com.au/get-involved

# Give regularly

Through our Breakthrough regular giving program, you can give an amount each month or each quarter, which can be deducted from your bank account or credit card. Your regular gift will help to fund support services and current research studies into defeating cancer, as well as future projects. To sign up as a regular giver, visit: cancercouncil.com.au/donate

## Visit us online

To get informed, get support, get involved or make a change, visit: **cancercouncil.com.au** 

# Campaign with us

Simple actions by individuals can lead to big wins in our communities. Learn more about our current advocacy campaigns and opportunities to get involved – you CanAct and make a difference by visiting: **CanAct.com.au** 

# Remember us in your Will

You can help us beat cancer by including a gift in your Will to Cancer Council NSW. It is a simple process, which will make a real difference to the lives of people affected by cancer and to the health of future generations. If you do decide to include a gift in your Will, please use the following wording:

'I bequeath to The Cancer Council NSW (ABN 51 116 463 846) for (its general purposes) or (its research purposes) (the residue of my estate) or (a specified sum) or (specified items) free of all duties, and the receipt of the Secretary or other authorised officer for the time being shall be a complete and sufficient discharge for the executor(s).'

For more information, contact us by emailing:

bequests@nswcc.org.au

## **Online communities**

Join us on social media – Facebook, Twitter, YouTube and more. Ask us a question, share your story, see what we are up to and the difference we are making. From healthy eating tips to finding out how you can take part in our events; from seeing the difference your donation makes, to locating cancer screening centres in your area – our online communities cover it all. Visit:

cancercouncil.com.au/social



#### For more information

To find out how you can contribute to our mission to defeat cancer, visit:

cancercouncil.com.au

# Contact us

# Cancer Council NSW Head Office

153 Dowling Street Woolloomooloo Sydney NSW 2011 Australia

(PO Box 572 Kings Cross NSW 1340) Ph (02) 9334 1900 feedback@nswcc.org.au cancercouncil.com.au

# Metropolitan networks and services

#### **Central and Southern Sydney**

# cancercouncil.com.au/local-services/central-southern-sydney-region

153 Dowling Street
Woolloomooloo NSW 2011
(PO Box 572 Kings Cross NSW 1340)
Ph (02) 9334 1754
Fax (02) 8302 3570
info.cssr@nswcc.org.au

#### **Northern Sydney**

#### cancercouncil.com.au/local-services/ northern-sydney-region

Level 1/117 Willoughby Road Crows Nest NSW 2065 Ph (02) 9334 1600 Fax (02) 9436 0108 northernsydney@nswcc.org.au

#### **Greater Western Sydney**

#### cancercouncil.com.au/local-services/ greater-western-sydney-region

Rotary House 43 Hunter Street (PO Box 3426) Parramatta NSW 2150 Ph (02) 9354 2000 Fax (02) 9687 1118

reception.parramatta@nswcc.org.au

39 Ingham Drive (PO Box 287) Casula NSW 2170 Ph (02) 9354 2050 Fax (02) 9734 0917

reception.parramatta@nswcc.org.au

Suite 105, 114–116 Henry Street (PO Box 4379) Penrith NSW 2750 Ph (02) 9354 2060

Fax (02) 4732 5932 reception.parramatta@nswcc.org.au

2/29 Main Street (PO Box 6112) Rouse Hill NSW 2155 Ph (02) 9354 2070 Fax (02) 9672 6915 reception.parramatta@nswcc.org.au

# Regional and rural networks and services

#### **Hunter Central Coast**

#### cancercouncil.com.au/local-services/ hunter-central-coast-region

Unit C1.2 Level 1/215 Pacific Highway Charlestown NSW 2290 Ph (02) 4923 0700 Fax (02) 4920 7997 info.hunter@nswcc.org.au

The Hive (PO Box 5102) Erina Fair Shopping Centre Erina NSW 2250 Ph (02) 4336 4500 Fax (02) 4367 5895 info.centralcoast@nswcc.org.au

69 John Street (PO Box 570) Singleton NSW 2330 Ph (02) 6571 2899 Fax (02) 6571 4101 info.hunter@nswcc.org.au

#### **Southern NSW**

# cancercouncil.com.au/local-services/southern-region

Suite 7, Ground Floor Enterprise 1, Innovation Campus Squires Way North Wollongong 2500 (PO Box 21 Fairy Meadow 2519) Ph (02) 4223 0200 Fax (02) 4285 0268 info.southern@nswcc.org.au Shop 8, Auckland Plaza

(PO Box 772) 81–83 Auckland Street Bega NSW 2550 Ph (02) 6492 1805 Fax (02) 6492 3834 Info.southern@nswcc.org.au

Queanbeyan GP Super Clinic (PO Box 1506) Queanbeyan NSW 2620 Ph (02) 4223 0200 Fax (02) 4285 0268 Info.southern@nswcc.org.au

#### Northern NSW

#### cancercouncil.com.au/local-services/ northern-region 8/130 Jonson Street

(PO Box 2620) Byron Bay NSW 2481 Ph (02) 6639 1300 Fax (02) 6685 6492

info.farnorthcoast@nswcc.org.au

Shop 1, 218 Peel St (PO Box 1616) Tamworth NSW 2340 Ph (02) 6763 0900 Fax (02) 6766 7053 info.northwest@nswcc.org.au

121 High Street Coffs Harbour NSW 2450 Ph (02) 6659 8400 Fax (02) 6652 1530 info.midnorthcoast@nswcc.org.au

Laurel Cottage 145 Laurel Avenue Lismore NSW 2480 Ph (02) 6629 4396

#### **Western NSW**

# cancercouncil.com.au/local-services/western-region

1/37 Tompson Street (PO Box 1164) Wagga Wagga NSW 2650 Ph (02) 6937 2600 Fax (02) 6921 3680 info.southwest@nswcc.org.au

4A, 122-124 Kite Street (PO Box 1977) Orange NSW 2800 Ph (02) 6392 0800 Fax (02) 6361 7425 info.western@nswcc.org.au

Suite 8, Millard Centre Boorowa Street Young NSW 2594 Ph (02) 6382 3426 Fax (02) 6382 5129 info.southwest@nswcc.org.au

# Cancer Council NSW shops

#### Penrith

Shop 116, Westfield Penrith Henry Street Penrith NSW 2750 Ph (02) 4722 6560 Fax (02) 4722 6530

#### Kotara

Shop 106, Westfield Cnr Park Avenue and Northcott Drive Kotara NSW 2289 Ph (02) 4965 5171 Fax (02) 4952 2604

#### **Warringah Mall**

Shop 349, Warringah Mall Cnr Condamine Street and Old Pittwater Road Brookvale NSW 2100 Ph (02) 9939 2668 Fax (02) 9939 2208

#### Hornsby

Shop 3010, Westfield Hornsby Pacific Highway Hornsby NSW 2077 Ph (02) 9987 0662 Fax (02) 9987 1778



#### Chatswood

Shop 442, Westfield Chatswood Victoria Avenue Chatswood NSW 2067 Ph (02) 9413 2046 Fax (02) 9410 2804

#### Bondi

Shop 5042, Westfield Bondi Junction 500 Oxford Street Bondi Junction NSW 2022 Ph (02) 9369 4199 Fax (02) 9369 3199

#### Miranda

Shop 3076, Westfield Miranda The Kingsway Miranda NSW 2228 Ph (02) 9525 9209 Fax (02) 9525 9593

#### Rouse Hill

Shop GR102, Rouse Hill Town Centre Windsor Road Rouse Hill NSW 2155 Ph (02) 8814 7031 Fax (02) 8883 2734



153 Dowling Street Woolloomooloo NSW 2011

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