



**TOGETHER
WE WILL
BEAT CANCER**

**ANNUAL
REPORT
2013/14**



\$130m

**Invested in research
over the last 10 years**

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ABOUT US

Cancer Council NSW believes that we can and will beat cancer. There are things that we can all do every day to help make this happen.

Every year in NSW alone, more than 37,500 new cases of cancer are expected to be diagnosed, and the impact on families, carers and communities is significant.

Together with our volunteers, supporters, stakeholders and staff, we are committed to reducing the impact of cancer on individuals and the community, and to

lessening the burden for people affected by cancer.

We are there not only for those touched by cancer today, but to prevent and manage cancer for future generations.

We are a member of Cancer Council Australia, together with Cancer Councils from every state

and territory across Australia.

Cancer Council NSW is an independent charity and is 97% community funded. Our unique combination of local program delivery, community engagement and national influence enables everyone who cares about cancer to make the biggest possible difference.

We are the only organisation in Australia that works across every area of every cancer:

- conducting and funding world-class research that underpins our work across the cancer journey
- preventing cancer
- supporting people as they navigate the cancer journey
- advocating to ensure that governments take action on cancer.

Our Aspirational Goal

**“Our goal is to
reduce deaths
from cancer by
50% over the
next 20 years”**

Our Vision

Together we will beat cancer

Our Mission

To lead, empower and mobilise
the community to beat cancer

Our Values

Our values influence the work that we do, and the way
we work with our colleagues and with our community



INNOVATION

Seek and embrace the best



RESPONSIBILITY

Be accountable for our results and resources



COURAGE

Speak out and step up



COLLABORATION

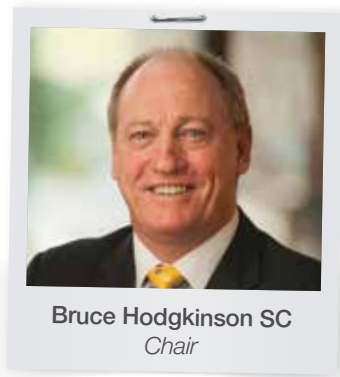
Work together to achieve our goals

MESSAGE FROM THE CHAIR AND CEO

At Cancer Council NSW, everything that we do is with and for our community. We are 97% community funded, with a committed staff and volunteer workforce, and a network of community supporters who ensure that we are able to have a significant impact across the cancer journey. We would like to recognise everyone who supports the cancer cause: no matter how you contribute, you are making improvements across the cancer landscape. Thank you.



Jim L'Estrange
CEO



Bruce Hodgkinson SC
Chair

This intent now becomes the basis for the development of a strategic plan. This is well underway, with the plan to be implemented from 2014/15. The key focus will be on organisational alignment across each of our five priority areas, as well as objectives relating to people, finance, leadership and mission relevance. Vital to this plan is the development of improved measures to demonstrate our reach and the effectiveness of our research and programs.

MANAGING RISK

As a primarily community-funded organisation responsible for research and programs across the cancer journey, it is essential that we monitor risks both internal and external to Cancer Council NSW, to ensure that we are responsible and accountable for our resources.

In September 2013, we undertook a **High-Level Risk Overview** to identify key risks. The identified risks will now be incorporated into a three-year internal audit plan with our internal auditors, and our organisational strategic plan will also seek to ensure that effective controls are in place.

Key areas of risk identified include:

▾ Revenue and program capacity

With more people living with and being diagnosed with cancer, we anticipate increased demand for our services in the future. We are addressing this risk by undertaking reviews of our existing programs, ensuring that our research, prevention, information and support, and advocacy programs address areas of need, and that we continue to improve our impact.

PLANNING FOR THE FUTURE

This year, one of our key objectives was to revise our strategic intent, as our *Strategic Directions 2010–2014* was maturing. This was a great opportunity for us to celebrate everything that we have achieved over this five-year period, and also to look forward to where we want to be in the future – building on past successes, leveraging existing opportunities, and finding ways to work smarter and more effectively.

We consulted broadly in the development of our refreshed strategic intent – with our volunteers and supporters, our stakeholders, our staff, the Executive team and the Board – to reinvigorate our vision, mission, values and strategic priorities. Consistent with all areas of our work, and pivotal to our achievements, was the involvement of the NSW community. Our new vision, 'Together we will beat cancer', reflects this.

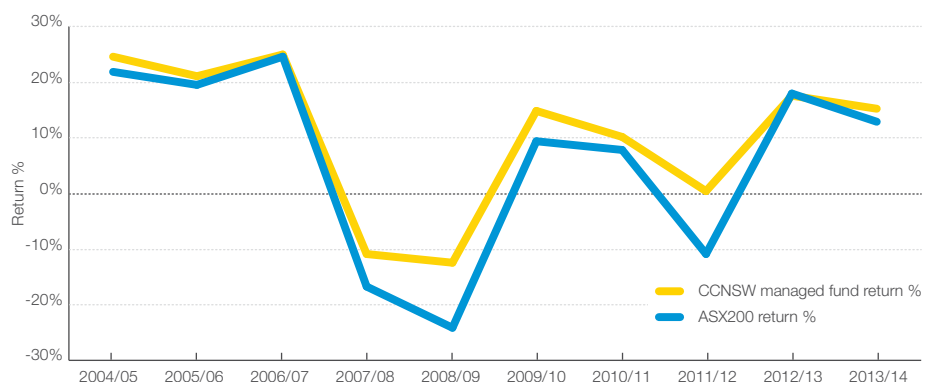
Our new **Strategic Intent 2014–2018** outlines the key areas that will help achieve our mission: 'To lead, empower and mobilise the community to beat cancer'. Building on our past successes, our strategic intent outlines the impact we will have in our five strategic priorities of research, prevention, information and support, advocacy, and fundraising.

CONTINUING STRONG INVESTMENT RETURNS

Our investment strategy takes a long-term perspective, to support financial stability. This year was another strong year for our investments, delivering a 14.5% return. We are pleased to see our 10-year return of 9.9% continues to outperform the ASX200's 5.7% over the same period.

We maintain our investments at appropriate levels, having regard to operational expenditure, in order to secure against revenue fluctuations, underwrite forward commitments, and provide capital funding flexibility. Reserves have reached the upper end of our benchmark range.

Investment returns over ten years



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

As we operate in a competitive charity market with a high reliance on community funding, we recognise the need to maintain our strong position in the charity landscape in order to continue our work. Ongoing review, innovation and diversification of our income streams remain a focus for the Board and Executive team, so that we can continue to deliver world-class research and effective programs across NSW.

Information Technology (IT)

We rely on our IT systems to run our offices, support our programs and fundraising, and connect with the community. As an organisation with a geographic footprint across the state and a large number of diverse programs and fundraising streams, we recognise the need to invest in our systems to ensure that we are cost effective and efficient in our business practices, and that we are able to have the greatest reach and impact for the community. A new Chief Information Officer commences in July 2014 as a member of the Executive team. This will ensure that business solutions become aligned with the whole organisation – reducing duplication, simplifying systems, more effectively measuring our impact, and identifying community need and opportunities.

Governance of research activities

With more than \$14 million each year being invested in conducting and funding research, we recognise that governance of these activities is critical. This year, we introduced an Advisory Committee for Internal Research (ACIR), a governance committee reporting to the Cancer Research Committee, which in turn reports to the Board of Cancer Council NSW. ACIR is responsible for providing guidance to the Cancer Research Committee on the performance and outcomes of cancer research programs conducted at Cancer Council NSW.

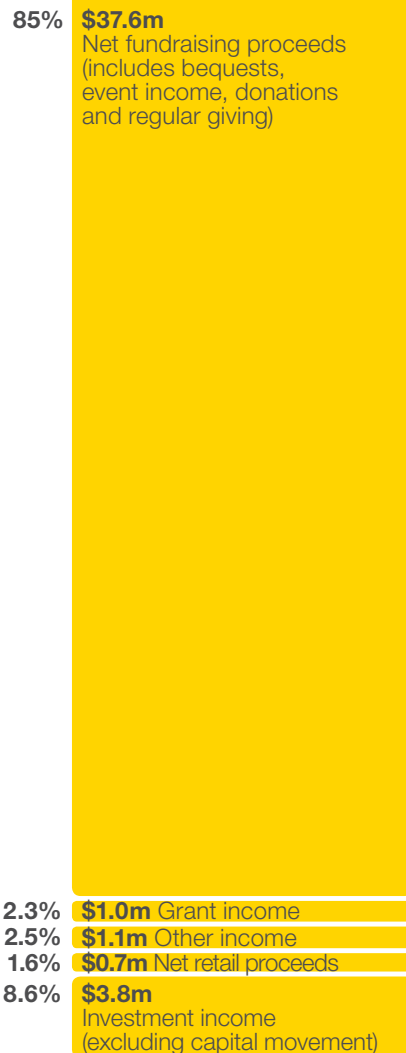
WORKING WITH CANCER COUNCILS

Cancer Council NSW is a member of Cancer Council Australia, along with Cancer Councils from each state and territory across Australia. This federated model allows Cancer Councils to focus on opportunities, needs and initiatives within each state, yet collaborate nationally on those issues that impact at the national level, and leverage our assets and resources. We work on initiatives together through a number of national working groups, such

Where our funds came from and where they were spent

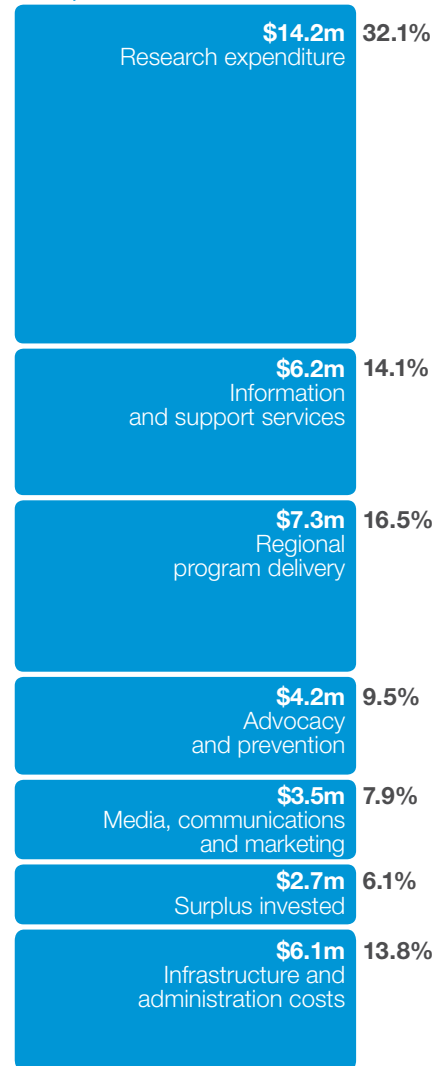
Net revenue after deducting fundraising and retail costs

\$44.2m



Expenditure and surplus

\$44.2m



as those for CEOs, CFOs, public health, supportive care, marketing and events, and business development. In some cases, Cancer Councils have a lead-state model, with one state taking responsibility for national programs or projects.

Cancer Council NSW is the lead state for a number of key initiatives, including a biennial national financial benchmarking project for all Cancer Councils. The 2013 benchmarking identified 57 opportunities (many of which are currently being explored) to learn from each other to improve outcomes and performance; to find smarter and better ways to work together to achieve our shared vision; to remove duplication of effort; to identify opportunities for cost savings using combined national purchasing power; and to achieve greater alignment of state strategic plans, reporting structures and policies.

This annual report is a snapshot of our achievements for 2013/14.

In the pages that follow, we are able to share just some of the stories and the successes from the past year. These are not just Cancer Council NSW's stories: they are reflective of a community that shares our vision that together we will beat cancer.

Bruce Hodgkinson SC
Chair

Jim L'Estrange
Chief Executive Officer

OUR HIGHLIGHTS

RESEARCH

\$14.2m invested in 2013/14

\$130m+ invested in the last 10 years

WHAT WE FUNDED



RECENT RESEARCH SUCCESSES

✔ Our findings around Aboriginal breast cancer outcomes will guide future policymaking to help close the gap between Aboriginal and non-Aboriginal cancer outcomes.

✔ Improved early detection of the deadly liver cancer in high-risk communities.

✔ Our research into prostate cancer will help close the gap in survival rates between rural and city patients.

INFORMATION AND SUPPORT

5,541

patients and their carers were assisted to attend treatment through our 16 Transport to Treatment services across NSW.

1100+

families have received **\$1.3m+** of pro bono legal, financial, small business accounting and workplace advice, supporting people affected by cancer.

 **15,700+**

people called our 13 11 20 Information and Support service which offers cancer patients, carers, family and community members the support of speaking to a specialist cancer professional to find out more about cancer and available support services.

**Together
we will
beat
cancer**

240,000+

publications were distributed enabling people affected by cancer to access reliable and easy-to-understand cancer information.



COMMUNITY

24,500+

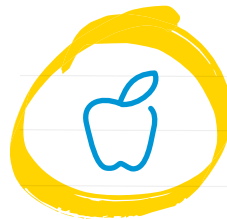
community supporters get behind our cause and connect with our mission to beat cancer and 2,500+ volunteers generously donate their time.

With a network of 17 offices across metropolitan, regional, rural and remote NSW, we can ensure that our services and programs are tailored to the distinct needs of each community.



PREVENTION

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



8,912 more parents are helping protect their children from cancer by getting them to eat enough fruit and veg thanks to our Eat It To Beat It program.



Almost **700,000** NSW children are protected from the harmful effects of the sun whilst at school, thanks to our SunSmart Program in primary schools and childcare services.



131 social and community service organisations are reached through our Tackling Tobacco Program.

ADVOCACY

RECENT WINS

- NSW Government established taskforce to review tobacco retail regulations.
- Introduction of Health Star Rating food labelling scheme.
- CanAct Community identified five issues for our 2015 State election campaign.

➤ Our continued campaigning and our network of

13,700+

CanAct Community supporters have led to some amazing recent wins!

PROFESSOR JACOB GEORGE

Professor of Gastroenterology, Westmead Millennium Institute and Cancer Council NSW supported researcher



“You have to work with patient communities to prevent and treat the underlying risk factors that lead to cancer.”

Most people don't realise that liver cancer is a largely preventable cancer, as you can treat the viral hepatitis that causes it. For me, that makes it much more rewarding to work in the liver cancer space. It means my work is more than just treating cancer – we could actually eliminate this cancer to a large extent.

One of the most important insights from my work has been that if you want to deliver 'best practice' care

for patients, it's not just treating the ones that turn up to hospital. You have to work with their communities to prevent and treat the underlying risk factors that lead to the cancer.

Our Cancer Council NSW funding was pivotal to capacity-building liver cancer research in NSW, and I believe it is already translating into better outcomes for patients.

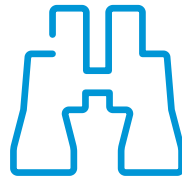
HOW WE FUND RESEARCH

As the largest non-government funder of cancer research in Australia, Cancer Council NSW funds world-class research that reduces the impact of cancer. Our funding is highly sought after, with around 150 applications for Project Grants submitted each year, from which we must select approximately 15 successful proposals. In order to decide which research we will fund, we assess both the scientific merit of a project and its potential impact on the community.

SO HOW DOES THIS PROCESS WORK?



1. Researchers send their research proposals to Cancer Council NSW.



2. These proposals are assessed by panels of scientists. The panels give each proposal a score, based on the quality of the science.



3. Cancer Council NSW considers only the top-ranked proposals, which ensures that all the research we fund is scientifically rigorous.



4. These top-ranked proposals are assessed by our Consumer Review Panel. This is a group of specially trained cancer survivors, carers and family members, who judge each proposal according to its value to the community. This panel gives each proposal a score, based on its likely benefits and impact.



5. The scores assigned to each proposal by the scientific and consumer panels are combined to create a final ranking of proposals.



6. Funding is awarded based on the final rankings, thus making sure the cancer community has a strong voice in all our funding decisions. The Cancer Research Committee, a committee of international cancer research leaders, oversees this process to ensure good governance and the best use of community donations.

WHY INCLUDE THE COMMUNITY?

Community members work hard all year to raise the money we use to support research. That gives them the right to a voice in deciding where it goes. Survivors and carers understand the lived experience of cancer in a way that other people may not. That's why the World Health Organisation promotes community involvement in research – and also why, for close to a decade, and in collaboration with Cancer Voices NSW, we have been committed to seeking community input into our funding decisions.

OUR 2013 CONSUMER PANEL

In 2013, our Consumer Review Panel consisted of six men and six women from across metropolitan and regional NSW, including survivors and carers of cancer patients representing a range of cancer experiences. In 2013, we were delighted to benefit from the participation of the first Aboriginal Consumer Review Panel member, a fitting reflection of Cancer Council NSW's commitment to closing the gap in cancer outcomes between Aboriginal and other Australians.

We are indebted to the members of our 2013 Consumer Review Panel:

Mr James Butler (Chair), Mr Dez Maule, Ms Mary Potter, Mr Tony Maxwell, Ms Gillian Begbie, Mr Philip Burge, Mr Peter Coupland, Ms Priscilla Johnson, Ms Ros Pesman, Ms Joyce Yong, Ms Kathryn Leaney and Mr James Falk.



RESEARCH PRIORITY

To conduct and fund world-class research that reduces the impact of cancer.

Cancer Council NSW is committed to conducting and funding world-class research that is of value to the cancer community. Research is fundamental to unlocking the answers that will help us beat cancer, and as an evidence-based organisation, we focus on identifying policy and clinical solutions to reduce the impact of cancer. Research underpins Cancer Council's prevention, information and support, and advocacy programs, and helps us prioritise the areas where we can have the greatest impact, enhancing outcomes across the entire cancer journey.

FUNDING WORLD-CLASS RESEARCH

Cancer Council NSW continues to be the largest non-government funder of cancer research in Australia.

We have funded cancer research since we were first established 60 years ago, and we have invested more than \$130 million into cancer research in the last 10 years. In 2013/14, we invested \$14.2 million to conduct and fund 149 research studies. Out of this, we committed \$5.4 million to supporting 16 new external research projects over the next three years. Some of these new projects include research on how to stop liver cancer resisting treatment; developing a new treatment option for asbestos-related cancers; developing a new blood test for a wide range of cancers, including childhood and poor-prognosis cancers; and creating new treatments for breast cancer.

The following research highlights provide a snapshot of how our research has a genuine impact on the community, and of the importance of translating research outcomes into real-life impact and public benefit.

EXAMINING DIFFERENCES IN PROSTATE CANCER OUTCOMES

A team of researchers from Cancer Council NSW revealed this year that men living in rural NSW are 32% more likely to die from prostate cancer than men from cities. The data showed that if survival in regional and rural areas was the same as that of major cities, 700 fewer deaths would have occurred over the 10 years of the study.

Prostate cancer survival in NSW has improved from 57% to 84% over the last 20 years, but the gap between rural and city patients remains, with survival differing significantly based on an individual's Local Government Area.

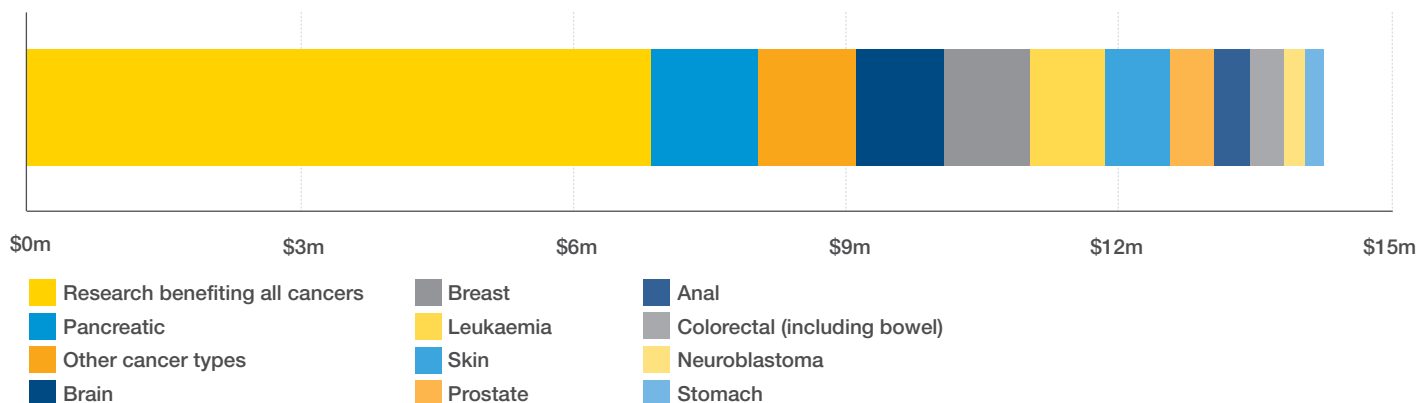
The research has shown that the risk of dying from prostate cancer was also higher for men living in socio-economically disadvantaged areas, where patients are 40% more likely to die from prostate cancer compared with those in the least disadvantaged areas.

Data so far suggest that men living in major cities are diagnosed earlier and can therefore be treated more effectively, and

also have better access to follow-up services. Our results highlight the importance for men who are aged over 50 and living in rural and regional areas of discussing risk factors for prostate cancer with their general practitioners, and the significance of regular follow-ups for those previously diagnosed. However, further research is required to investigate geographic inequalities in the patterns of management of men diagnosed with prostate cancer and their use of health services, which will ensure that appropriate evidence guides future interventions and policy changes.

PROSTATE CANCER SURVIVAL IN NSW HAS IMPROVED FROM 57% TO 84% OVER THE LAST 20 YEARS, BUT THE GAP BETWEEN RURAL AND CITY PATIENTS REMAINS.

Our research spend by cancer type



PREVENTING LIVER CANCER AND SUPPORTING LIVER CANCER PATIENTS

Approximately 80% of liver cancer cases are caused by chronic viral hepatitis B and C infection. As viral hepatitis is both preventable and treatable, liver cancer is a largely preventable cancer. Yet over the last three decades, the number of people diagnosed with liver cancer has increased rapidly, making a relatively rare cancer become the ninth most common cause of cancer deaths in Australia. Liver cancer is also commonly diagnosed late, has a poor response to therapy, and affects people born in hepatitis B–endemic countries, including Vietnam, Hong Kong, Macau, Korea, Indonesia and China, disproportionately.

Cancer Council NSW supported a team led by Professor Jacob George of the Westmead Millennium Institute, whose research has resulted in the development of a **highly successful screening and treatment program** among 600 high-risk individuals, allowing better management of liver cancer. The program involved the collection of blood samples, which could help develop a better blood test for the early detection of liver cancer. This is crucial, as currently, liver cancer detection uses liver ultrasound, by which stage the tumours are already of significant size.

In addition to funding liver cancer research, Cancer Council NSW runs the **‘B Positive’ Program**, which aims to raise community awareness about chronic hepatitis B, and connects community members with evidence-based chronic hepatitis B care.

↘ **As viral hepatitis is both preventable and treatable, liver cancer is a largely preventable cancer.**

The program works with affected communities and their general practitioners to reduce the number of hepatitis B–related liver cancers, and uses a disease Registry to ensure regular patient follow-ups. In 2013/14, Registry enrolments increased by almost 50%, providing assistance to more than 1,300 patients. While it is

estimated that approximately 15–20% of people with chronic hepatitis B require antiviral treatment to prevent liver cancer, treatment uptake at a national level averages just 3.5%. However, thanks to Cancer Council NSW’s Registry, 21% of patients enrolled are receiving antiviral treatment.

The ‘B Positive’ Program also investigates whether preventing liver cancer using antiviral medications is cost effective; educates high-risk communities about the link between hepatitis and liver cancer through a range of in-language resources and community campaigns; and advocates for broadening treatment access, to accommodate the large numbers of people requiring care.

UNDERSTANDING BREAST CANCER SURVIVAL IN ABORIGINAL WOMEN

Aboriginal people are 60% more likely to die from cancer than non-Aboriginal people. Cancer Council NSW’s **Aboriginal Patterns of Cancer Care (APOCC) Project** is leading the way in exploring the reasons for this increased mortality rate, and investigating the cancer journeys of Aboriginal people across NSW.

New research from our APOCC Project revealed this year that Aboriginal women are 30% more likely to die from their breast cancer than non-Aboriginal women, and tend to be younger and at a more advanced stage when diagnosed. The research also highlighted that Aboriginal women with breast cancer received less surgical treatment, and that the existence of chronic conditions such as diabetes or heart disease could further contribute to lower survival rates. This result suggests that by increasing breast cancer surgery rates and preventing chronic diseases, we could close this mortality gap for Aboriginal women.

In addition, our qualitative research has revealed a number of barriers that can hinder appropriate cancer care for Aboriginal people, including the perception that cancer is a ‘death sentence’. Practical barriers, such as lack of transport and accommodation, are also problems; and mainstream health services still need to find ways to address cultural differences in cancer care.

The findings provide further evidence on Aboriginal cancer outcomes that will guide future policymaking for government, health and community services across the country. The research outcomes from the APOCC Project are already informing Cancer Council NSW’s work across prevention, information, support and advocacy.

↘ **This result suggests that by increasing breast cancer surgery rates and preventing chronic diseases, we could help close this mortality gap for Aboriginal women.**

LOOKING AHEAD →

Expanding on the work and outcomes of the APOCC Project, key members of Cancer Council NSW’s APOCC team will be collaborating with researchers across Australia on a national project focused on improving cancer outcomes for Aboriginal and Torres Strait Islander people. The research will involve a national patterns of care study for selected cancers among Indigenous Australians, and the investigation of the effects of co-existing chronic conditions on cancer treatment and survival.



Find out more about our research activities in our *Research Highlights 2013/14*.

Visit **cancercouncil.com.au/research-highlights-annual-report-2013-14/**



PREVENTION PRIORITY

To reduce cancer in the NSW community by encouraging people to lead healthy, cancer-smart lifestyles.

Preventing cancer is one of the most effective ways of beating cancer. We can prevent cancer by helping people make healthier choices every day, and by creating environments that promote cancer-smart behaviours and reduce exposure to known cancer risks. As more than a third of cancers are related to obesity, poor nutrition, alcohol consumption, lack of physical activity, overexposure to the sun and smoking, Cancer Council NSW focuses our prevention programs on three key areas: nutrition/healthy weight, skin cancer prevention and tobacco control.

UNDERSTANDING COMMUNITY ATTITUDES AND BEHAVIOURS

To better understand the NSW community's behaviours, attitudes, intentions and beliefs towards lifestyle choices that influence cancer risk, Cancer Council NSW conducted its inaugural **NSW Community Survey on Cancer Prevention** in 2013. The survey was completed by more than 3,000 NSW adults and measured the community's knowledge of and attitudes towards cancer risk factors, sun protection, smoking and tobacco control, fruit and vegetable intake, food policy and alcohol consumption.

The survey identified that while community members had a good understanding of the importance of smoking and sunburn to a person's risk of getting cancer, they under-reported the significance of other lifestyle factors such as physical inactivity, overweight, insufficient fruit and vegetable intake, and alcohol consumption. These results are now being used to inform our prevention and advocacy programs.

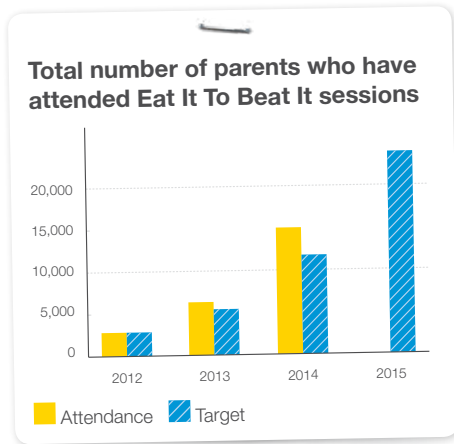
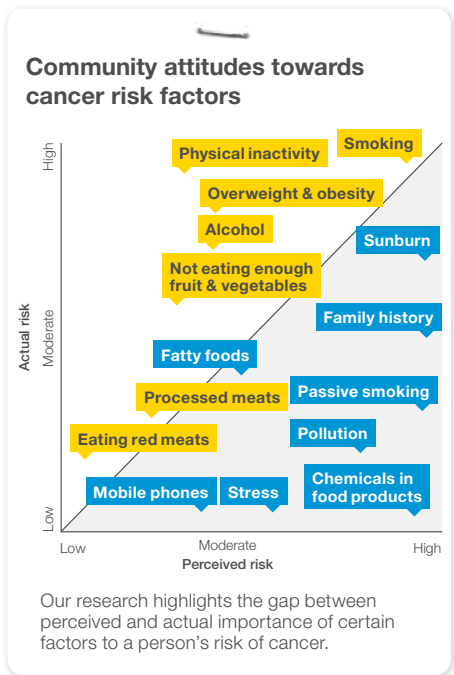
PREVENTING CANCER THROUGH A HEALTHY DIET

Currently, 63% of Australia's adult population and 26% of children are either overweight or obese. Whilst obesity is a risk factor for a number of cancers, the results of our NSW Community Survey on Cancer Prevention indicated that only 39% of the NSW community recognised that being overweight was a possible cause of cancer. Cancer Council NSW aims to help prevent cancer by promoting healthy eating and by urging the government to introduce more effective policies to support healthy food choices.

It is estimated that 5–12% of all cancers could be prevented by eating the right amount of fruit and vegetables. Cancer Council NSW recommends eating five serves of vegetables and two serves of fruit every day, yet 90% of adults don't eat enough vegetables and 50% don't eat enough fruit. Community awareness of the importance of healthy nutrition is also relatively low, with only 44% of respondents in our NSW Community Survey on Cancer Prevention recognising that consuming insufficient fruit or vegetables is a possible cause of cancer.

Cancer Council NSW's **Eat It To Beat It** program aims to increase awareness of the health benefits of fruits and vegetables, and improve community attitudes and the skills of parents to provide adequate amounts of fruit and vegetables to their children. The program increased by 154% in 2013/14, reaching 8,912 parents and carers, who received practical advice on how to improve their families' vegetable and fruit intake. Due to the large size of the Arabic-speaking community in Greater Western Sydney, we will roll out some elements of our Eat It To Beat It Program in Arabic-speaking communities in this region over the coming year.

We know that food marketing influences children's food preferences and food choices, and that overweight children are more likely to become overweight adults. With our NSW Community Survey on Cancer Prevention showing that 73% of NSW residents support a ban on unhealthy food advertising that targets children, we published our **Children's Health or Corporate Wealth?** report in 2014. The report highlighted the level of promotion and channels that the food industry is using to market unhealthy foods to children. With the release of this report, Cancer Council NSW is addressing the concerns of the NSW community and urging the Federal and State Governments to introduce tougher regulations on food marketing to children, in order to curb obesity-related illnesses, including cancer.



Find out more – visit cancerCouncil.com.au and view our *Children's Health or Corporate Wealth: Food marketing to children in Australia* report

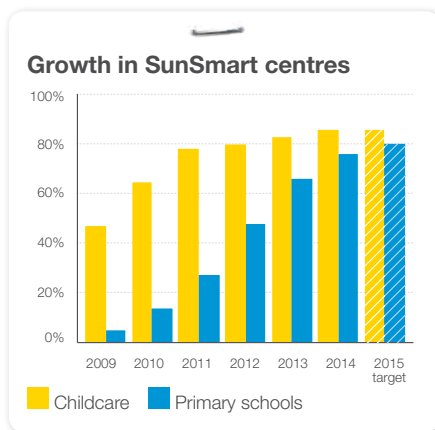
We also know that drinking alcohol increases the risk of developing some cancers, particularly cancers of the mouth, throat, oesophagus, bowel, liver and breast; however, according to the NSW Community Survey on Cancer Prevention, over half (53%) of the NSW community is unaware of the **link between alcohol consumption and cancer**. In 2013/14, Cancer Council NSW led a qualitative national research project to determine a strategy for improving community awareness around alcohol, and to support general practitioners to discuss alcohol consumption and cancer risk with their patients.

PREVENTING SKIN CANCER IN NSW

Skin cancer prevention is important for Cancer Council NSW, as two out of three Australians will develop some form of skin cancer in their lifetime. We develop and implement skin cancer prevention programs to reduce the incidence and mortality of skin cancer in priority populations.

Protecting children from overexposure to ultraviolet radiation significantly reduces their risk of developing skin cancer later in life. Cancer Council NSW's **SunSmart Program** supports childcare services and primary schools to develop and implement a comprehensive sun protection policy to minimise children's overexposure to ultraviolet radiation. As 86% of childcare services across NSW are now SunSmart (up from 83% last year), in 2013/14 we focused primarily on increasing the number of participating primary schools. This year, we increased participation from 66% to 76% of primary schools, which means that there are now 1,920 SunSmart schools in NSW.

Young people (aged 12–18 years) spend more time in the sun, get sunburnt more frequently and use less sun protection compared to the rest of the community – and are therefore a high-priority group for skin cancer prevention. Our **Sun Sound** campaign aims to promote sun-safe behaviour by playing the Sun Sound jingle at targeted beaches and pools to remind young people to protect their skin. In 2013/14, Sun Sound was implemented at 48 pools and 13 beaches across the state. We also held awareness-raising events at seven popular NSW beaches to remind beach-goers about sun protection, provide free sunscreen and engage young people through social media.



We continued targeting men, particularly those over the age of 50, who are twice as likely to be diagnosed with melanoma and three times as likely to die from it, compared with women. Partnering with the Cancer Institute NSW, Cancer Council NSW implemented a skin cancer prevention and early detection communication **campaign targeting men over 50 years**. The campaign, which ran across NSW through our partnership with radio stations 2GB and 2CH, reminded men of the importance of practising sun protection, being familiar with their own skin, and seeking medical advice promptly regarding any new or changing skin lesions.

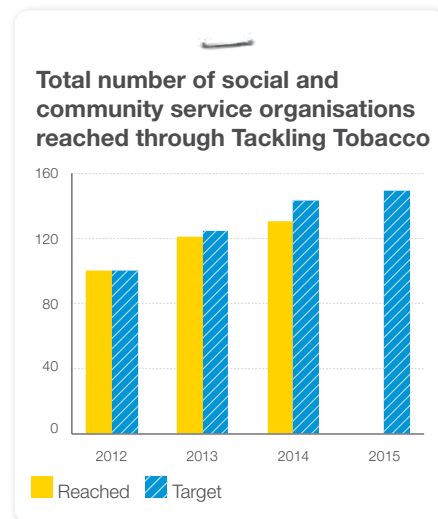
TACKLING TOBACCO IN THE COMMUNITY

Smoking rates have been declining in Australia over the last four decades, and are currently down to 16.4% of all adults in NSW. Yet smoking rates continue to be significantly higher among disadvantaged groups. This makes smoking an important social justice issue, as it damages people's health, increases their financial stress, erodes their quality of life, and potentially contributes to further inequalities.

Cancer Council NSW's **Tackling Tobacco** Program aims to reduce health and social inequalities through addressing smoking in disadvantaged communities. It assists social and community service organisations to create a supportive environment for their clients to quit. The program offers a wide range of tailor-made services, such as advice, support and resources to implement changes in policies, systems and practices; and training and resources for workers to assist their clients in quitting.

Highlighting the success of Tackling Tobacco over the past seven years, Cancer Council NSW has supported nearly every state and territory Cancer Council to introduce similar programs.

Up to 95% of people entering drug and alcohol treatment are smokers – more than five times the percentage of smokers in the general adult population. To address this, we have partnered with the University of Newcastle for the **Tackling Nicotine Together** project to measure the effectiveness of a new approach, based on our Tackling Tobacco Program, to offer quit support as part of routine care. The trial will be run in 30 drug and alcohol centres nationally. As well as providing evaluation and evidence for the Tackling Tobacco program's approach in social and community service organisations, this trial will also help us reach new organisations in the drug and alcohol sector.



LOOKING AHEAD →

Our existing cancer prevention programs will continue to evolve into new areas as we expand our sun protection initiatives into additional settings, such as outdoor workplaces and sports and recreation environments; address healthy eating in disadvantaged communities; and increase awareness about the link between alcohol and cancer.



INFORMATION AND SUPPORT PRIORITY

To empower and support people affected by cancer, so that no one need face cancer alone.

Cancer Council NSW provides up-to-date, evidence-based information for people who have questions about any aspect of cancer, including diagnosis, treatment and where to turn for help.

We offer practical and emotional support services, providing financial, legal and treatment support and advice, as well as offering opportunities for those affected by cancer to talk to cancer professionals or connect with people who have had similar experiences. Finding innovative ways for people to easily access relevant information and support, and offering support that meets the needs of the NSW community, are central to our work.

CALLING CANCER COUNCIL NSW FOR INFORMATION AND SUPPORT

When cancer patients, their families and friends, or members of the NSW community call 13 11 20, they are able to speak to one of Cancer Council NSW's experienced oncology health professionals, who can provide evidence-based information or access to a range of emotional or practical support.

In 2013/14, there was a 14% decrease in calls to 13 11 20, with 15,763 calls, as over 35% more people accessed our information online this year. Over the 12-month period, 25% of calls were from people diagnosed with cancer and 31% were from carers, family members and friends – with callers most often seeking information about treatment and management, looking for psychological and emotional support, or requiring practical support.

CANCER COUNCIL INFORMATION CENTRES

This year, we opened two new Cancer Council Information Centres – in Shoalhaven and Armidale – taking the number of centres across NSW to 17. Located at the point where cancer care and treatment are provided – in hospitals and treatment centres – we offer **information and support for cancer patients and their families.**

Our 246 specially trained Cancer Council Information Centre volunteers assisted in more than 7,500 visits to the centres in 2013/14, providing social support; cancer-related information; referrals to appropriate cancer services; and face-to-face emotional support to carers, patients, health professionals, relatives and friends.

PROVIDING SUPPORT THROUGH WEBINARS

In April 2014, Cancer Council NSW commenced a series of webinars, seeking to **engage, educate and provide strategies for 18–45-year-olds affected by cancer**, as well as their carers, families and friends.

We ran three webinars in 2013/14, addressing the psychological and practical issues regarding returning to work after a cancer diagnosis; legal and human resources issues; and perspectives around the fear of cancer recurrence. Providing a platform that fosters online participation and offers a solution to the difficulties of delivering face-to-face programs, especially in regional and remote communities, enhances the effectiveness of the information and support Cancer Council NSW can provide to the community. With the three sessions resulting in a total of 748 people taking part, webinars are a practical, innovative and cost-effective way to deliver information and support.

Five more webinars are currently scheduled for 2014/15, when we are planning to engage 250 people per webinar, addressing topics such as financial management, work-life balance and personal relationships.

INFORMATION RESOURCES FOR CANCER PATIENTS

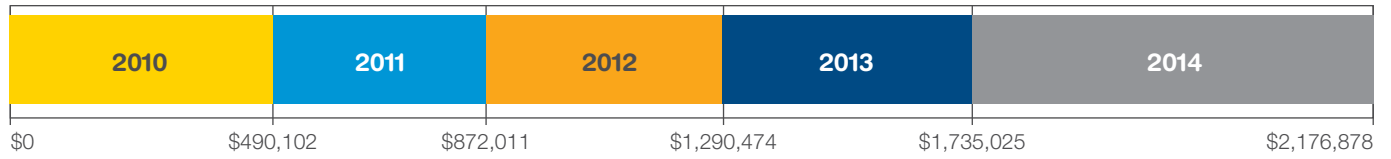
Our *Understanding Cancer* series enables people affected by cancer to access a wealth of information that is both easy to understand and reliable. All of our **information resources** are reviewed by clinical experts and consumers to ensure the accuracy and accessibility of the

information. The resources are available in a range of formats, including printed booklets and fact sheets, CDs and DVDs, as well as online via Cancer Council NSW's website. This enables people of all ages, socio-economic backgrounds and geographic locations, and at all stages of illness, to access and engage with the information in a way that suits their particular circumstances and preferences.

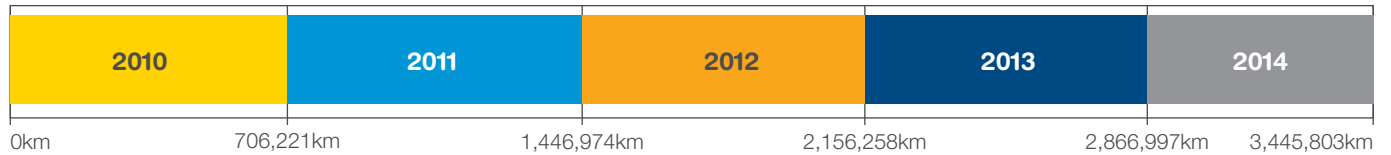
We currently have 69 printed resources, including 51 booklets in the *Understanding Cancer* series, with four new titles added in 2013/14: *Understanding Surgery*, *Facing End of Life*, *Understanding Grief* and *Fertility and Cancer*. In addition to the booklets, this year we developed five online fact sheets for Aboriginal communities, in collaboration with the Menzies School of Health Research, as well as three new printed and online fact sheets in seven community languages (Arabic, Chinese, Greek, Italian, Macedonian, Spanish and Vietnamese).

These information resources have a wide reach, assisting the largest possible number of people affected by cancer in NSW. In 2013/14, we distributed 241,825 resources, of which 67% were disseminated through hospitals and cancer treatment centres. In addition, there were 1,175,492 page views of booklet content on Cancer Council NSW's website and more than 11,700 downloads. We understand the changing ways that many people access cancer information, and have therefore started making our publications available in an eBook format to make downloading them to iPads, Kindles and other e-readers even easier, and to provide people with an additional way to access crucial cancer information.

Financial assistance grants awarded over five years



Patient transport kilometres funded over five years



Pro bono legal and financial services provided over five years



Cancer Council publications distributed over five years



13 11 20 Information and Support calls answered over five years



PROVIDING LEGAL AND FINANCIAL ASSISTANCE

Our **Pro Bono Programs** provide people affected by cancer access to a range of professional services about issues arising from a cancer diagnosis. Comprising four different services, offering legal assistance, financial planning assistance, a workplace advisory service and a small business advisory service, the programs help relieve clients of financial burden and provide respite, contributing to their overall well-being by reducing stress during what can be an overwhelming period for patients and their families.

In 2013/14, the main areas where we organised assistance were helping

with financial hardship matters (55%) and providing legal advice (36%).

The Pro Bono Programs have provided more than \$1.3 million worth of assistance this year in NSW, primarily supporting people who have advanced or metastatic cancer, are of working age, have high-mortality cancers or live in a low socio-economic area.

Cancer Council NSW manages the operation and delivery of the Pro Bono Programs nationally, across seven states and territories, through a partnership between Cancer Council NSW and the relevant state or territory Cancer Council. In 2013/14, there were 2,488 clients referred to the Pro Bono Programs nationally, more than a 16% increase on

2012/13, with almost half (48%) of the referrals originating from people calling 13 11 20 and asking for assistance.

LOOKING AHEAD →

In the next year, we will expand the reach of our programs and make information and support services increasingly available in the digital space, with specific focus on expanding our webinars and cancer information available online. This will ensure that cancer information and support can be accessed by a wider range of people affected by cancer with different needs, and of all ages, geographic locations and socio-economic groups.



ADVOCACY PRIORITY

To ensure that governments take action to reduce cancer risk and improve access to care and treatment.

We know that, at times, government policies don't reflect what available evidence tells us about cancer prevention and access to care and treatment. Mobilising the community to advocate for change can result in significant improvements in legislation, public policy and funding to reduce cancer risk and improve cancer care for the NSW community.

MOBILISING AND EMPOWERING THE NSW COMMUNITY

Our **CanAct Community** is made up of passionate supporters who believe that together we can beat cancer. Now a community of more than 13,700 supporters – an increase of 30% since last year – together we campaign for improvements in the treatment and care of people with cancer and public health initiatives that improve cancer outcomes.

Strengthening relations with Members of Parliament is essential for supporting our advocacy program. Our **MP Liaison Program** links our trained volunteers with their State Member of Parliament (MP) to ensure MPs are kept up to date with ongoing Cancer Council NSW events and campaigns, and with cancer-related issues and concerns that are of relevance to their community. This year, we have increased the number of MP Liaison volunteers by 50% to 48 – more than half of the Members of the Legislative Assembly are now regularly in contact with a local volunteer from Cancer Council NSW.

SAVING LIFE 2015: CHANGE STARTS HERE

In 2014, we launched our **Saving Life 2015: Change starts here** campaign in the lead-up to the March 2015 State election. The NSW Government knows that we face a future where more people in NSW will be getting cancer and living longer with it. It is therefore crucial that all candidates know what they can do to help beat cancer and to ensure that people with cancer and their families get quality cancer care, no matter where they live.

We have identified five opportunities for the next NSW Government to reduce the number of people who hear the words 'You have cancer', and to ensure that those who have cancer get the care they need.

The five areas we have highlighted for government attention are:

- Increased Aboriginal workforce in cancer services – ensuring that when Aboriginal people go to a cancer service, they are cared for by an Aboriginal person.
- Tobacco retail reform – addressing the selling of tobacco, in order to support people who are trying to quit and to encourage young people to live smoke free.
- No chemotherapy co-payments – ensuring that cancer patients who have their chemotherapy in a public hospital get it for free.
- Coordinated cancer care – making sure that people with cancer, and their families, are cared for in a logical, connected and timely manner.
- More palliative care services – ensuring that every person who is dying from cancer has the best quality of life and that, if needed, a specialist palliative care team is there to care for them.

The last three of these issues were selected as priorities by the CanAct Community, while the other two represent organisational commitments for Cancer Council NSW.

Our network of supporters and volunteers will be running local activities across NSW and making sure that MPs and candidates hear about the issues and take our recommendations into the next Parliament of NSW. The key message of this campaign is that **#changestartshere**, meaning that any community member can start change, as can any political candidate or MP.

SELLING TOBACCO ANYWHERE, ANYTIME: HARMFUL NOT HELPFUL

More than 5,000 people die every year in NSW from smoking-related causes. While the NSW Government has a strong

record of implementing initiatives to reduce demand for tobacco, widespread retailing can undermine these measures. In NSW, there are almost 10,000 retail outlets selling cigarettes, and currently, no licence is needed to sell tobacco; instead, NSW retailers are only required to notify the NSW Ministry of Health via the online Retailer Notification Scheme.

In August 2013, we released the findings of our tobacco retailer audit in the report **Selling Tobacco Anywhere, Anytime: Harmful not helpful**. With 1,739 tobacco retailers audited across NSW, our research found that one in four tobacco outlets did not comply with legislation, either because they were unlisted and had not notified under the Retailer Notification Scheme, or because they failed to comply with in-store requirements – or both. We also found that unlisted retailers and those in disadvantaged areas were more likely to break retailing laws, and that cigarettes were cheaper in areas with more young people and in disadvantaged areas.

Based on this evidence, Cancer Council NSW, together with CanAct supporters and the broader community, called for stricter tobacco retail regulations to reduce the availability of cigarettes, which resulted in the NSW Ministry of Health establishing a taskforce to consider the issues and the evidence. Cancer Council NSW's **Saving Life 2015: Change starts here** continues this campaign, calling on the NSW Government to introduce tobacco retail reforms, including a retail licensing scheme.

HELPING PEOPLE MAKE HEALTHIER FOOD CHOICES

Unhealthy food choices can lead to obesity, which increases the risk of bowel, breast (post-menopause), oesophageal, kidney, pancreatic and endometrial cancers. To help consumers make informed and healthy food choices,

Cancer Council NSW believes that food packaging labels should include easy-to-understand nutrition information. In 2009, our research showed that food industry labels are confusing to consumers and that there are better alternatives. Since that time, we have been advocating, together with other public health and consumer groups and with the assistance of our CanAct Community, for better food labelling: to convince governments and the food industry to make it simpler for consumers to make healthier food choices.

In June 2014, the Commonwealth, State and Territory Food and Health Ministers confirmed their commitment to the introduction of the **Health Star Rating food labelling scheme**, which will help consumers make healthier choices. Cancer Council NSW has been influential in contributing to the final outcome, as our consumer research on front-of-pack labelling has informed the development of the Health Star Rating System, and the Federal Government invited us to join and advise the government working group developing this new scheme.

MEDICAL USE OF CANNABIS

This year has seen increased media and community interest in the medical use of cannabis. This is reflected in calls to Cancer Council's 13 11 20 Information and Support, which receives an average of three calls each week from cancer patients or their carers about this issue. There is evidence that **cannabis can be of medical benefit to cancer patients** in relieving nausea, vomiting and pain, and as an appetite stimulant for cancer patients experiencing weight loss, where no other treatment has been successful. For this reason, Cancer Council NSW supports a compassionate approach to providing cannabis for medical use, including exempting cancer patients with particular conditions from criminal prosecution.

As both an evidence-based and community-based organisation, Cancer Council NSW supports the current clinical trial of the synthetic cannabis product nabiximols via oral spray for relieving uncontrolled persistent pain in patients with advanced cancer, and we support allowing controlled access

to cannabis for cancer patients under certain circumstances and with medical supervision. In 2012, we updated our evidence review on this matter and participated in the Parliamentary Inquiry on the topic; and in 2014, we wrote to Premier Baird and Health Minister Skinner urging the NSW Government to act on the issue, as well as speaking out in the media in support for medical use of cannabis.

LOOKING AHEAD →

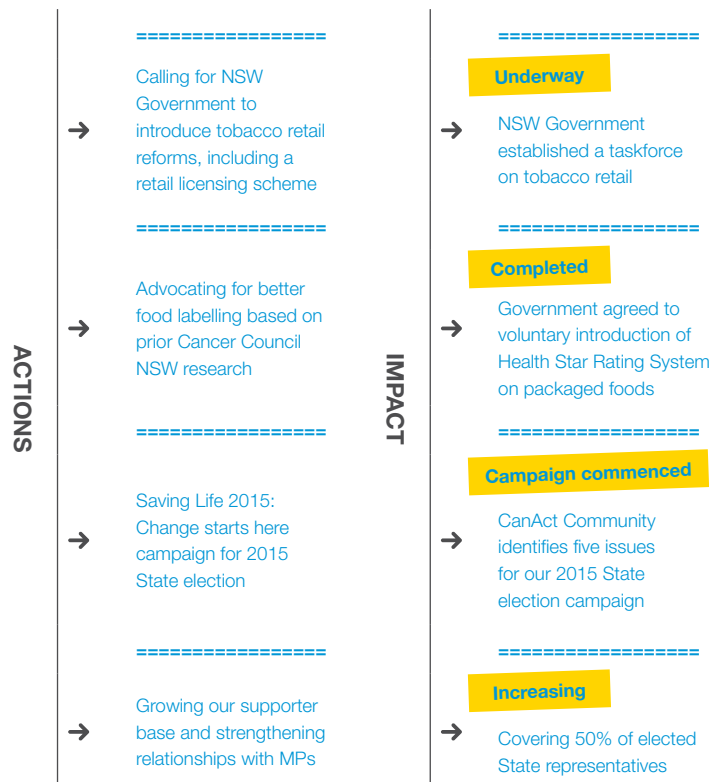
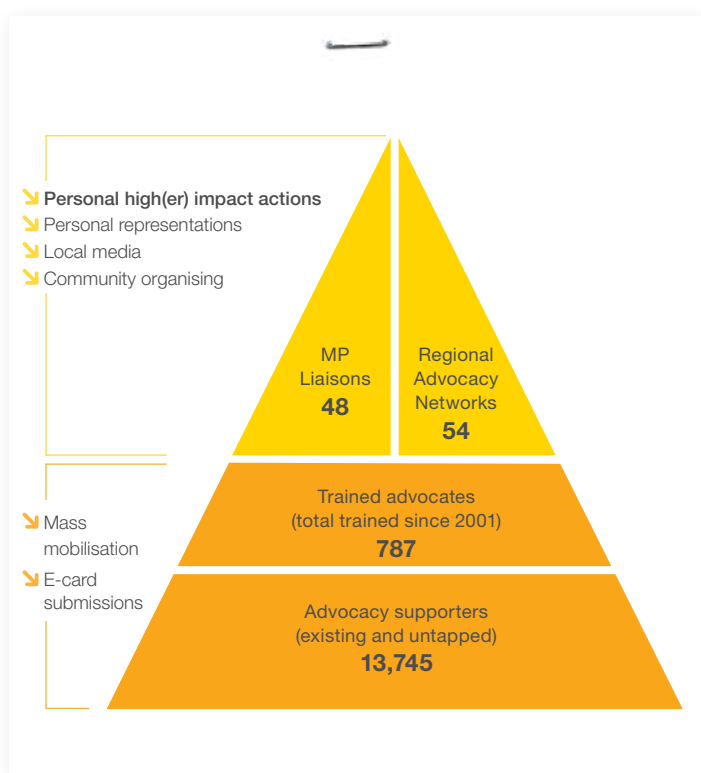
*In 2014/15, we will continue working with the community on our **Saving Life 2015: Change starts here** campaign. Ensuring that our future government takes action on five important issues will see an immediate improvement and reduce the impact of the burden of cancer.*



Find out more about the CanAct Community's and Cancer Council NSW's ongoing advocacy campaigns.

Visit **CanAct.com.au**

CanAct – our advocacy supporter structure – leading to change





FUNDRAISING PRIORITY

To enable the community to raise money to help beat cancer.

Cancer Council NSW is **97% community funded** and relies on the generosity of our supporters, who want to help beat cancer. In 2013/14, 279,088 community supporters generously donated to Cancer Council NSW to help us support vital cancer research; prevent cancer by helping people make cancer-smart lifestyle choices; empower and support people affected by cancer; and ensure that governments take action on issues such as reducing cancer risk and accessing treatment and care.

Thanks to this continuing community support and a diverse portfolio of fundraising streams and events, our **fundraising income** remained steady this year at \$59.8 million.

Our **cost of fundraising** this year was 37%, which is steady on 2012/13.

This figure reflects the cost of running a multichannel fundraising program across diverse income streams, which harnesses the collective support of more than 24,500 volunteers and community supporters who get behind our cause and connect with our mission to beat cancer. Our fundraising activities are also key strategies for driving community engagement, and supporting the delivery of our programs and health campaigns, thereby increasing understanding of our work and awareness about cancer. As the cost of raising money becomes increasingly expensive in a competitive market, we are investigating cost-reduction strategies as a part of our three-year organisation-wide strategic plan.

THANK YOU TO OUR INDIVIDUAL SUPPORTERS

Individuals may choose to support Cancer Council NSW in a number of different ways, by making a one-off gift, joining our regular giving program, contributing through workplace giving programs or leaving a gift in their will.

These giving programs enabled individual supporters to contribute \$34 million to Cancer Council NSW this year, with 9,364 new regular donors joining as Cancer Council supporters through our face-to-face fundraising program, Breakthrough. Since it first began in 2003, **Breakthrough** has generated \$130 million to support our mission to beat cancer, and remains our biggest fundraising program.

We now have 50,000 regular donors, who generated \$16.1 million in 2013/14, which is 33% of all fundraising income (excluding bequests).

This year, 158 people left Cancer Council NSW a **bequest**, with \$11.5 million of generous gifts left in wills. This is down 16% on 2012/13; however, we recognise that this is not a predictable income stream. In 2013/14, we focused on refreshing our bequest information, particularly for those who want to find out more about how to leave a gift in their will online. Cancer Council NSW is a member of Include A Charity, a group of 140 charities working together to encourage people to consider leaving a bequest.

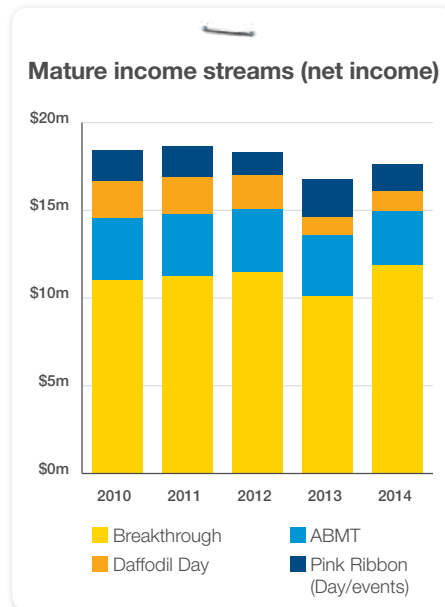
with the cancer cause and raise funds to help beat cancer. We engage more than 150,000 people in our events each year, including more than 24,500 event hosts, volunteers and supporters.

Our **Relay For Life** events were held in 56 local communities across all of NSW. Relay For Life is not just a fundraising event: it is an opportunity for local communities to come together to remember loved ones, celebrate survivors and support each other. Our Relay For Life participants are also strongly connected to our CanAct Community of supporters, with many of our grassroots advocacy campaigns harnessing the power and support of Relay For Life participants to ensure that changes are made to policy, legislation and funding.

This year, 44,900 participants connected through Relay For Life events, including 3,600 teams and 2,000 cancer survivors. Each event is run for and by the local community, involving more than 700 volunteer committee members throughout the state. These dedicated committee members work year-round, rallying their community around the event and, more importantly, the cancer cause. Income from Relay For Life remained steady this year, raising \$8.2 million.

We finalised a new online platform to support Relay For Life this year, making it easier for our supporters to participate, fundraise and harness the power of their social media networks. The website will be launched for the coming 2014/15 Relay For Life season.

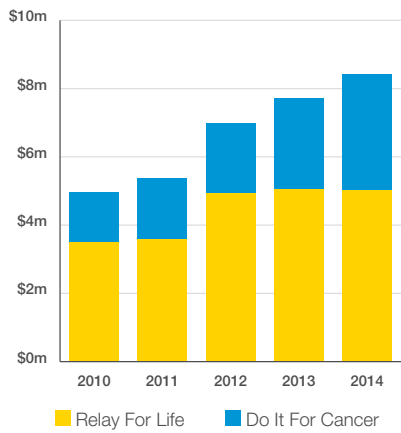
Daffodil Day is our longest-running event, held in August each year. This year marked its 28th year, with 4,400 volunteers taking part at 640 locations in communities across NSW, and raised \$3 million, a 5% increase on 2012/13.



EVENTS BRINGING THE COMMUNITY TOGETHER

With the **largest event fundraising portfolio in the Southern Hemisphere**, Cancer Council NSW raised a total of \$25.7 million this year. Our events allow individuals and communities to connect

Growth income streams (net income)



This year 7,300 people hosted **Australia's Biggest Morning Tea** events in their homes, offices, businesses and communities, raising \$4.6 million, a 2% increase on last year.

Our **Pink Portfolio** raises money and awareness for breast and gynaecological cancers through fundraising events such as the Pink Breakfast Series, and a Pink Ribbon Day merchandise event held in October. This year, our Pink Ribbon events raised \$2 million, steady on our 2012/13 results. Pink Ribbon Day saw a decrease of 8.5%, with \$1.2 million raised.

We refreshed our community fundraising portfolio this year, with a new name: **Do It For Cancer**. Our community fundraisers support us by raising money their own way. They might cook for cancer, take part in a race, shave their head or have a workplace event: they can do anything for cancer and ask their friends to donate to their cause. This year, Do It For Cancer raised \$4.3 million, a 23% increase on 2012/13.

Sh*tbox Rally is our largest beneficiary fundraiser, with 466 participants raising \$1.4 million by driving their clapped-out cars from Perth to Darwin via the Kimberley in 2013/14, a 10% increase on last year. Since James Freeman began this event in honour of his parents in 2010, Sh*tbox Rally has raised \$4.4 million, due to the passion and commitment of its participants to cancer research.

Working with the Pedestrian Council of Australia, **Seven Bridges Walk** is another of our high-profile beneficiary events that unites the community while raising vital funds. This year, 11,500 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 \$592,000, which is a 57% increase on 2012/13.

OUR RETAIL STORES

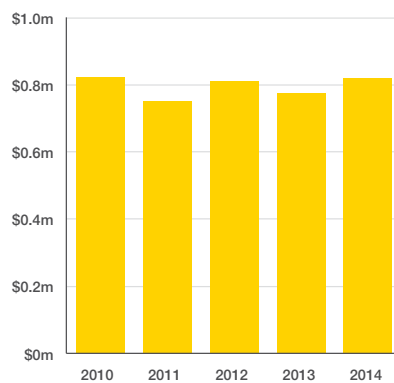
Our eight retail stores selling **sun protection products** are located in major shopping centres, with the most popular ranges being sunglasses, hats and sunscreen. With a new range of hats this year, we saw the strongest growth in this category, up 8% since 2012/13.

This year, our retail revenue was \$7.9 million, up 4% on 2012/13. The profits we make from our retail sales go towards melanoma research, and over the last 10 years, we have raised a net \$10.6 million selling and distributing sun protection products to the community.

LOOKING AHEAD →

This year, we identified digital innovation as key to improving our fundraising capabilities in the digital age. Our continuing investment into this area will invigorate our existing events, foster greater community engagement and provide more diversity in income streams. In the coming year, this will remain a focus, with initial planning underway to move to a consolidated national website and investment in improved online-giving opportunities. We will also increase our focus on connecting with supporters and the community via social media such as Facebook, Twitter, Google+ and YouTube.

Fundraising \$ per fundraising FTE* (includes bequests)



*FTE = Full-time equivalent staff member
We capture the fundraising dollar earned per fundraising full-time equivalent staff member as a key metric to monitor the efficiency and effectiveness of our fundraising programs

JAMES BUTLER

Cancer survivor, Cancer Council NSW volunteer and advocate, and Global Relay For Life Hero of Hope



“I work with and get to meet some of the most inspirational people in the world, and I hope that through my work as a Global Hero of Hope I can continue to make a difference in the lives of cancer patients and their families now and in the future.”

In early 2000, Relay For Life was beginning in NSW and I was given the opportunity to become involved. Since then, I have been involved in all kinds of ways with my local Relay in the Sydney Hills district, including being Chair of the Organising Committee for three years and part of the NSW lead advisory body for four years.

I was named as a Global Relay For Life Hero of Hope for 2014 recently, which was not only an incredible honour

for me but also a very humbling experience, and one that will allow me to spread the message of the great power of Relay. I work with and get to meet some of the most inspirational people in the world, and I hope that through my work as a Global Hero of Hope I can continue to make a difference in the lives of cancer patients and their families, now and in the future.

VOLUNTEER WITH US

Our volunteers are 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

Cancer Council NSW assists cancer research studies across Australia by encouraging the participation of 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 CANCER COUNCIL 13 11 20 INFORMATION AND SUPPORT

For information about any aspect of cancer, calling our Cancer Council 13 11 20 Information and Support service, for the cost of a local call, is an excellent starting point. The confidential service is staffed by experienced oncology health professionals, who provide evidence-based information and support to people affected by cancer. 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 beat cancer and have a great time with your friends, family or work colleagues. More than 24,500 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 just 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, prevention and advocacy programs, and current research studies into beating cancer, as well as future projects.

To sign up as a regular giver, visit:
cancercouncil.com.au/donate

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**

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 (insert name here) bequeath to The Cancer Council NSW ABN 51 116 463 846 for its general purposes (or name a specific purpose, such as research, patient and support care services, cancer prevention programs)

[Choose and insert the appropriate statement from the list below]

- 1. the whole of my estate**
- 2. (insert number) percentage of my estate**
- 3. the residue of my estate**
- 4. the amount of \$ (insert the value of your gift in cash)**
- 5. my (insert name of asset)**

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**

OUR COMMUNITIES

As a 97% community-funded and community-focused organisation, Cancer Council NSW works in and with communities across the state.

With a network of 17 offices across metropolitan, regional, rural and remote NSW, we can ensure that our services and programs are tailored to the distinct needs of each community. This is important, because our vision of beating cancer can only be realised by harnessing the support and power of our community to achieve better cancer outcomes and drive positive and lasting change at the grassroots level.

In order to beat cancer, **we need to work with individuals and communities across the state.** We need to ensure that our research uncovers the cancer causes and outcomes in different populations, and that our programs, services and campaigns recognise and include the diverse communities – with more than 30% of the nearly seven million NSW residents having been born overseas, 36% living outside metropolitan areas and over 30% of Australia's Aboriginal people living in NSW. We work with communities to understand their needs and provide tools, programs, resources and services to cover the breadth and depth of the cancer journey.

ENGAGING REGIONAL COMMUNITIES

Our **four regional networks** engage with and support local communities in regional, rural and remote NSW, covering all 152 Local Government Areas across the state. As well as providing practical support services, we support local networks of committed people and partners.

One of our biggest challenges is ensuring access to cancer information, support and care for patients living in non-metropolitan areas, who have limited access to health and community services or live in remote locations. To address these issues, we now provide 10 in-home support services and 16 transport services, meaning that in 2013/14, we were able to provide transport for 5,541 people, and assisted 1,084 cancer patients, carers and families with in-home support. We also have 23 volunteer information services across NSW in hospitals and treatment centres, where our trained volunteers provide practical and emotional support to cancer patients, families and friends.

Access to quality information is a fundamental element of a healthy community. Our **Community Speakers Program** builds the capacity of community members to deliver 30-minute presentations on a variety of subjects, including cancer prevention, early detection, support services, research

and Cancer Council NSW's involvement in the community. Our Community Speakers are specially trained volunteers, who delivered 332 talks in 2013/14 in a range of contexts, including community groups, sports clubs, support groups, multicultural groups and corporate organisations.

Working with the support of local networks and partners ensures that we can provide tailored services in local communities:

- **Four Regional Advisory Committees** support and enable Cancer Council NSW by identifying local cancer-related issues in regional areas, building further partnerships and networks, and providing advice on our regional strategic direction. For example, our Regional Advisory Committee in Southern NSW has been working on improving engagement with local Community Cancer Networks and extending the reach of Cancer Council NSW's work into under-represented communities. Thanks to this work, we now have two Aboriginal Cancer Networks in the region: the Yuin Koori Cancer Network and the Shoalhaven Koori Cancer Network.
- **Our 30 Community Cancer Networks** connect Cancer Council NSW with the local community, providing relevant insight, developing strategies, and delivering information and support services. The Border Advocacy Network in south-western NSW, for example, supported Cancer Council NSW's tobacco control advocacy campaigns in 2013/14, and campaigned for local issues, such as

the provision of psychosocial care for cancer patients and parking at the new Albury Cancer Centre.

- We have **169 formalised partnerships** with other organisations, including local councils, health services and non-governmental organisations through agreements or Memorandums of Understanding, which ensure that we can engage and support local communities more effectively.
- We work with a number of **regional universities**, including the Southern Cross University, the University of New England, Charles Sturt University and the University of Wollongong, providing student internship opportunities and forming research partnerships. In 2013/14, for example, we partnered with the University of Wollongong to research our engagement with culturally and linguistically diverse (CALD) communities through focus group discussions; to design appropriate community engagement strategies; and to develop plain English information resources.

ENGAGING WITH ABORIGINAL COMMUNITIES

Cancer is the second most common cause of death for Aboriginal people, and there is a 17-year life expectancy gap between Aboriginal and non-Aboriginal Australians. Cancer Council NSW is committed to closing this gap.

Our first Reconciliation Action Plan aimed to establish a solid foundation of respect and to begin to develop relationships across NSW. We completed 75% of our 2012/13 *Reconciliation Action Plan* action items, and are currently using the findings of Cancer Council NSW's Aboriginal Patterns of Cancer Care (APOCC) Project (see page 11) and our on-the-ground connections within local communities to inform the development of our second *Reconciliation Action Plan*, which will inform our strategy for making a greater impact on cancer in Aboriginal people.

In order to attempt to close the gap and improve cancer outcomes for Aboriginal people across the state, we are rolling out **community workshops across NSW**, together with the Aboriginal Health & Medical Research Council and Cancer Institute NSW. With 16 workshops already completed, and a further eight planned for the coming year, we will deliver a total of 24 workshops during the two-year project, which started in 2013. The workshops aim to raise awareness of cancer prevention, risk factors and treatment; identify solutions to local issues related to cancer; and promote and facilitate local partnerships between key service providers. As part of the wrap-up of the two-day workshop, participants create a **Community Cancer Action Plan** that provides ongoing direction for impacting cancer outcomes in local communities.

With the momentum that these workshops created around impacting cancer outcomes for Aboriginal people, a number of communities have set up **Aboriginal Cancer Networks**. Supported by Cancer Council NSW, the networks drive Aboriginal community engagement and cancer control in local communities.

Using the Community Cancer Action Plan from the workshops, these community networks are focusing on directly impacting cancer outcomes. Six Aboriginal Cancer Networks were established in 2013/14 across NSW, including in Orange, Newcastle and Shoalhaven.

ENGAGING WITH CULTURALLY AND LINGUISTICALLY DIVERSE COMMUNITIES

With almost 30% of the NSW population speaking a language other than English at home, and with language remaining a barrier to accessing cancer information and services, Cancer Council NSW is committed to engaging with culturally and linguistically diverse (CALD) communities across NSW.



Providing **in-language information and resources** to help people from CALD communities is central to our work. Our multilingual website, which features information and fact sheets in seven language groups (Arabic, Chinese, Greek, Italian, Spanish, Macedonian and Vietnamese) was awarded the Multicultural Health Communication Award in July 2013 by NSW Health.

By developing programs to meet community needs and raise cancer awareness, we work together with CALD communities, multicultural health workers

and other institutions to improve cancer outcomes. This year, for example, we continued our work on our **'B Positive' Program** (see page 11), working with affected communities. We also partnered with the University of Wollongong and Illawarra Shoalhaven Local Health District to address cancer and stigma in Serbian and Macedonian communities as part of our **Cancer Good News Project**, funded by a grant from the Cancer Institute NSW. We know from our research that certain migrant groups may require targeted intervention to improve uptake of cancer screenings, and our focus group interviews with community members revealed that cancer in Serbian and Macedonian communities was often greatly feared and had strong associations with death, loss and grief. To raise awareness of cancer, foster discussion within the community and highlight the importance of screening, the project included the development of culturally appropriate bilingual resources, including a multilingual website **cancer-goodnews.com.au**. We also supported Serbian and Macedonian community representatives to become Community Speakers and share their stories about how screening and early diagnosis helped them to beat the cancer stigma and impacted positively on their own cancer journeys.

OUR COMMUNICATIONS

As the community is key to funding and supporting our work, we want to ensure that our volunteers, stakeholders, partners, researchers, donors, advocates and community supporters are kept up to date with the latest cancer information and about our progress.

Effective communication through traditional media, online platforms (social media, digital media and our websites), newsletters and other organisational communication channels enables us to achieve our objectives when it comes to fundraising, events, campaigns, research and cancer programs.

CANCER COUNCIL AS THE LEADING MEDIA VOICE

Cancer Council NSW remains the **leading cancer voice in NSW**, ensuring that our events, campaigns and health messages are placed prominently on the public agenda and can influence public discourse. Our share of voice increased from 17.6% to 18.2% this year. Analysis through Mediascape media analytics showed that we reached 1.42 billion people, a slight decrease from 1.5 billion in 2013/14, with the value of coverage increasing from \$36.9 million last year to \$38.5 million in 2013/14.

COMMUNITY NEWSLETTERS


Our research newsletters help us reach our stakeholders and communicate more efficiently with our community of supporters. Our **Research Report newsletter** offers a quarterly update on the progress of our research projects and is distributed to those who have volunteered for one of our research studies, as well as to new volunteers and donors. The newsletter also highlights new opportunities for the community to get involved in our research. We also have an **Aboriginal Patterns of Cancer Care (APOCC) newsletter** which keeps our stakeholders interested in Aboriginal cancer research updated on APOCC findings and dissemination outcomes.

Our quarterly **Volunteer Voice** newsletter is produced by and for Cancer Council NSW volunteers, and offers an overview of regional and organisational news, including a regular CEO Update that directly addresses our volunteers. To ensure the widest possible access to this newsletter, our volunteers can choose to receive the newsletter as a print copy and/or as an electronic version via email.

I TOUCH MYSELF – RAISING AWARENESS OF BREAST CANCER

In April 2014, we launched the **I touch myself** campaign, designed to raise awareness of breast cancer. Cancer Council NSW partnered with agencies JWT and Soap Creative to launch the campaign nationally, marking the anniversary of the death of Chrissy Amphlett, who had wanted her famous Divinyls' hit, 'I touch myself', to be used in a breast cancer awareness campaign. The campaign was launched via a video of leading female artists singing the song, and ran across traditional, social and digital media, raising the profile of breast cancer awareness and screening to women across Australia.

The campaign video was viewed more than 300,000 times and featured 437 times across print, television, radio and online media. The campaign was recognised at the prestigious Cannes Lions Advertising Awards and was awarded one Silver and three Bronze Lions.



Find out more about this campaign by visiting itouchmyself.org

CONNECTING WITH COMMUNITIES ONLINE

Our website remains one of the community's central points of contact with Cancer Council NSW, with 1,526,958 visits to the site this year, which is a 35.1% increase on 2012/13. This is largely due to improved search engine optimisation, and to digital fundraising efforts.

This year, we focused on making our website more user-friendly and accessible.

Based on user feedback, we restructured the presentation of cancer information by improving navigation and accessibility. This resulted in a higher level of user satisfaction, with 86% of website visitors reporting that they found it easy or very easy to find the content they were looking for. As almost 40% of our web traffic is via mobile devices, this year we launched a mobile-optimised version of our website to ensure a better user experience for these visitors.

In 2013/14, we focused on connecting with our supporters via online communities. Social media helps us engage with the community, and spread the word about our programs, events and campaigns. Our Cancer Council NSW **Facebook** page grew by 168%, increasing to 21,643 fans this year, while our **Twitter** presence increased by 45% to 14,111 followers.

QUALITY OF OUR REPORTING

Cancer Council NSW was pleased to be recognised as the runner-up in the revenue greater than \$30m category in the 2013 **PwC Transparency Awards** for the quality and transparency of our reporting.

We were also recognised with two prestigious **Australasian Reporting Awards**. Our *Annual Report 2012/13* was awarded a Bronze Award, and was also recognised as a top-three finalist in the special category of not-for-profit online reporting.



SABRINA GARCIA

Pro Bono Programs volunteer



“The help is there. No one should have to feel like they have to deal with cancer on their own.”

I volunteered at Cancer Council NSW's Pro Bono Legal and Financial Planning Referral Service to complete my practical legal training. I was part of a team of brilliant young volunteers and case managers. I consider myself very lucky to have been involved in the service and to have seen its impact on cancer patients all over Australia.

When a person is dealing with cancer, the last thing on their mind should be their piling bills or telling their employer about their diagnosis and treatment. People who have never had to engage a lawyer or speak to

a financial planner before find themselves in need of professional guidance.

My role was to speak with cancer patients and their carers to gather more information about the particular assistance they needed, such as drawing up a will, accessing their superannuation or dealing with cancer in the workplace.

The Pro Bono Programs provide support in dealing with the unexpected and enormous impact of cancer. The help is there. No one should have to feel like they have to deal with cancer on their own.

OUR PEOPLE

Our staff and volunteers are our greatest assets, and we value their commitment, their passion and their contribution to the cancer cause.

Our positive workplace culture fosters innovation, recognises performance and offers development opportunities, ensuring that we attract, retain and invest in the best people.

Cancer Council NSW has a strong, committed and diverse team working together to beat cancer, with 355 permanent staff and 32,681 community members, including 2,532 registered volunteers who generously donate their time to work alongside our staff performing specific roles.

VALUING EMPLOYEE ENGAGEMENT

We regularly monitor the engagement of our staff via our **Employee Engagement Survey**, which we undertook in March 2014. With 90% of staff completing the survey, our overall results showed 76.4% of our staff are engaged, steady on our 2012 results of 76.8%. Staff empowerment, commitment, volunteer management and relationships were the areas that rated most highly for staff.

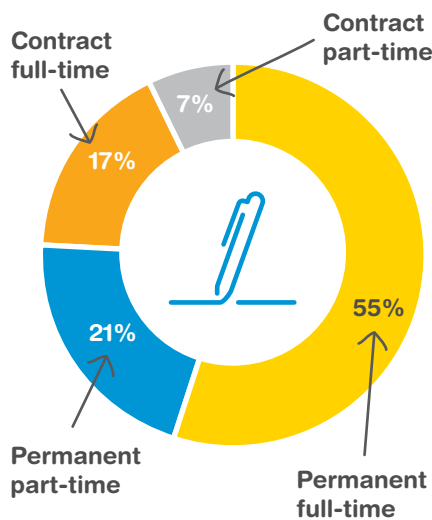
While our engagement results were high overall, the survey did identify three areas for the organisation to work on to foster greater engagement: reward, leadership and organisational change. Additional cross-divisional focus groups have given greater insight into these areas, and the Executive leadership team is finalising an action plan later in 2014 to address opportunities for improvement in these areas.

PERFORMANCE PLANNING AND DEVELOPMENT

Our **Performance Planning and Development System** ensures that we align team and individual annual objectives to our organisational priorities, and that staff are encouraged to demonstrate behaviours that are consistent with our organisational values of innovation, responsibility, courage and collaboration.

Each year, permanent staff and those on fixed-term contracts develop a performance plan with their manager, which aligns vertically and horizontally across the organisation, and connects with our strategic intent. Team members and their managers must sign off on the plan, and undertake a formal mid-year and end-of-year review. In 2013/14, plans were set for 100% of applicable staff, including all members of the Executive team.

Staff by employment type



The system allows both managers and their direct reports to track one-on-one meetings; document changes to agreed objectives or projects; and provide ongoing, constructive and transparent feedback on performance and behaviours.

The CEO's performance is reviewed by the Board's Remuneration and Nomination Committee (see page 35).

At Cancer Council NSW, we want to ensure that all our staff have the skills and knowledge they need in their current role, while also identifying areas for development in order to take on future opportunities. Our development philosophy is based on the 70:20:10 model, with 70% of development needs addressed through on-the-job training, 20% through coaching and mentoring, and 10% through formal training.

Personal development plans are also set and agreed to within the Performance Planning and Development System, with all training or development needs identified for each staff member, and

associated activities appraised during the mid-year and end-of-year review process.

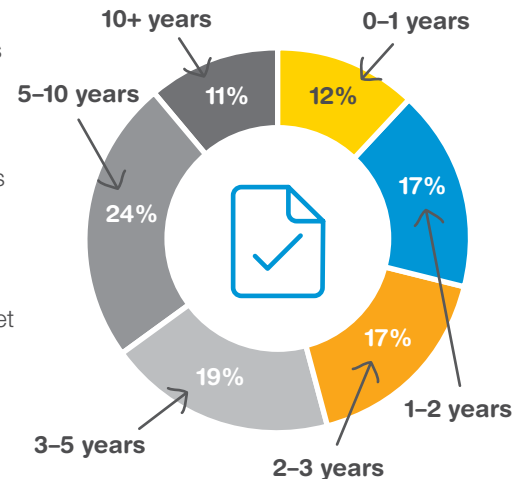
We moved to an **online learning system** this year, rolling out a series of eLearning modules, with initial emphasis on training for modules related to compliance, such as Equal Employment Opportunity, Workplace Health and Safety (WHS), and Bullying and Harassment. All current staff and new staff in the future are required to undertake this training, with additional modules being rolled out in 2014/15.

WORK HEALTH AND SAFETY

The WHS eLearning module will reinforce a **safety-minded culture and safe workplace** for our workers and the greater community.

We also implemented a **'best practice' risk assessment tool** for our Relay For Life events, addressing the highest WHS risk identified in our 2012/13 WHS Internal Audit, as it is a volunteer-driven, outdoor event with 44,900 participants across the state. We commenced risk assessments in February 2014, and in 2014/15, every one of our 56 Relay For Life events will now require a formal risk assessment.

Staff by tenure



THE VALUE OF OUR VOLUNTEERS

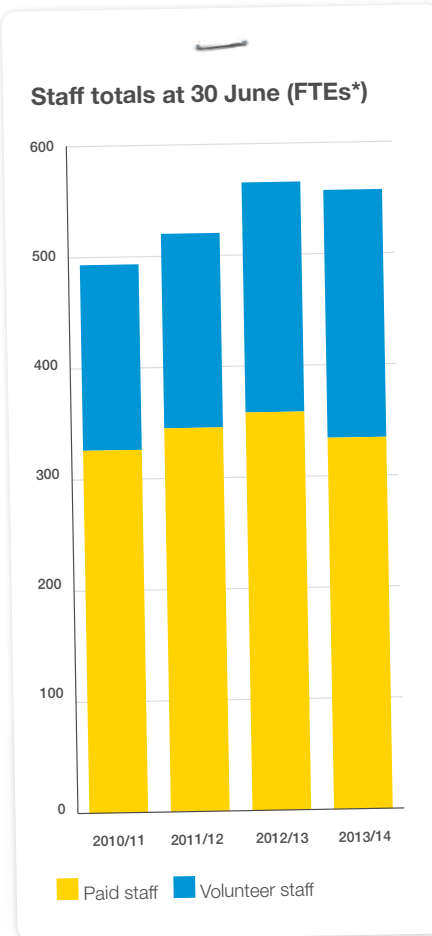
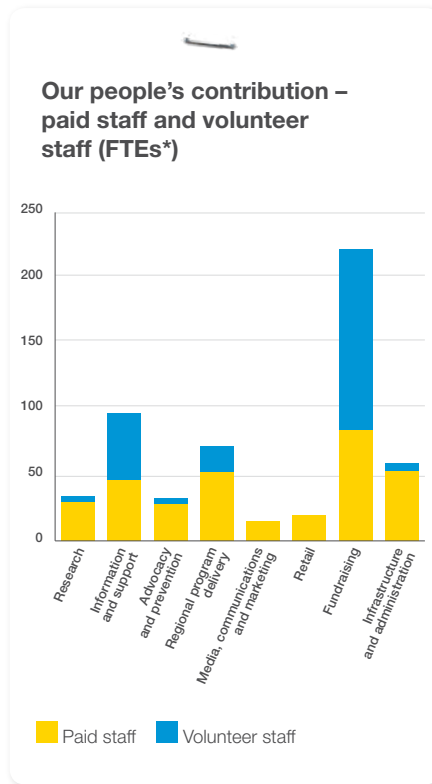
Cancer Council NSW would like to thank each and every one of the 32,681 community members who contributed the equivalent of an additional 223 full-time employees in 2013/14, increasing our workforce by 67%. Volunteers work across every area of the organisation – from operational areas, such as information technology, human resources and finance, through to our mission delivery areas of program development, program delivery and community engagement. Our Board members and Chair are also volunteers.

Our **Annual Volunteer Satisfaction Survey** had a 26% response rate, and showed that 90% of our volunteers surveyed would recommend Cancer Council NSW as a good organisation to work or volunteer for – a 3% increase since our 2012 survey.

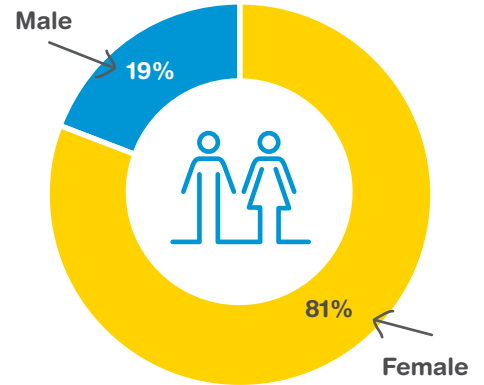
We recognise that our volunteers give their time to us because they want to support the cancer cause, but they also come to us because they have skills or knowledge that will help us in our mission to beat cancer. The survey revealed that 79% of our volunteers believe that we use their skills appropriately, a 9% increase since 2012.

In order to ensure that we attract and retain a diverse volunteer workforce, we have developed a **Community Workforce Strategy** to support the 89% of our volunteers who work in community engagement and program delivery or provide administrative and fundraising support in our regional offices. The strategy aims to provide opportunities for partnering with Cancer Council NSW to develop a sustainable community workforce made up of volunteers, community supporters, interns and work placement students, to increase the capacity and outcomes of our work.

We recognise the contributions that our volunteers make by holding thankyou morning teas to mark National Volunteer Week and International Volunteer Day; providing certificates for significant periods of service; and through the **Star Volunteer of the Month Awards**. These awards see staff, volunteers and members of the community nominating volunteers to recognise the invaluable contribution that individuals make to the organisation and to the community.



Staff by gender



GENDER EQUALITY

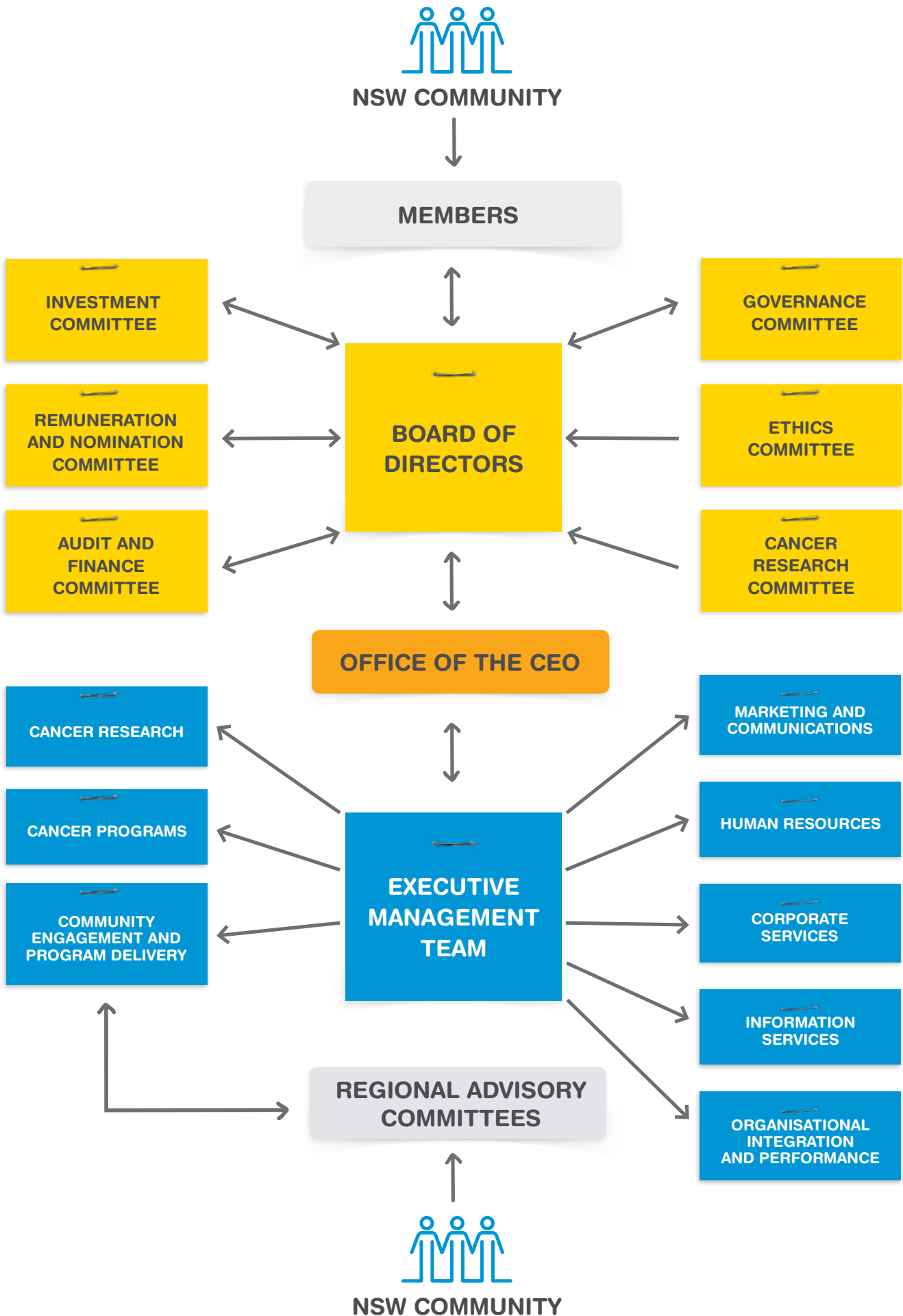
Cancer Council NSW reports each year to the Workplace Gender Equality Agency, as required under the *Workplace Gender Equality Act 2012* (Cth).

Some of our key highlights for the 2013/14 reporting period were:

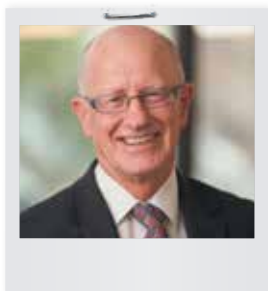
- 81% of total overall employees are female, which is significantly higher than the national average of 45.7%.
- The male-to-female ratio of the Executive leadership team is 33:67. Other management groups include Senior Managers (40:60 ratio) and other Managers (25:75 ratio).

*FTE = Full-time equivalent staff member

OUR ORGANISATION



OUR BOARD



DR STEPHEN ACKLAND MBBS, FRACP, GAICD

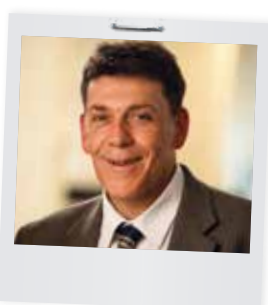
Member of the Cancer Research Committee

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 Oncology 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 FRANZCR

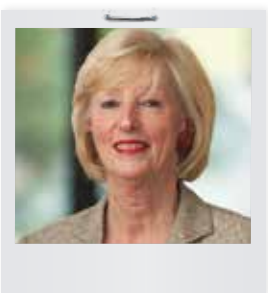
Member of the Governance Committee

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, FAICD

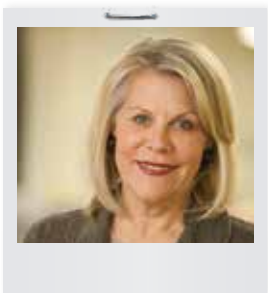
**Deputy Chair of the Board, Member of the Audit and Finance Committee,
Member of the Governance Committee**

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 Can Assist (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).



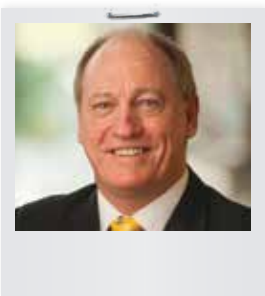
MS MARY CHIEW

Member of the Remuneration and Nomination Committee

**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 and Nomination Committee

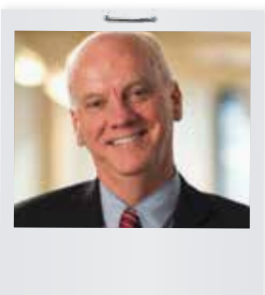
First elected to the Board in July 2007, re-elected October 2009 and December 2012

Barrister, Denman Chambers

Mr Hodgkinson is the Head of Denman Chambers and 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 health and safety field. Through his practice 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 Director of Cancer Council Australia since 2008, and is Chairman of the Rugby Union Players' Association.

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.



MR PAUL LAHIFF BSc(Agr), FAIM

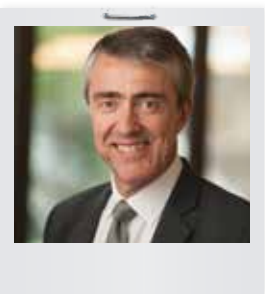
Chair of the Investment Committee, Chair of the Remuneration and Nomination Committee

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

Mr Lahiff is Chair of the New Payments Platform Steering Committee and also chairs the Retail Finance Intelligence (RFI) Advisory Board, the Australian Payments Clearing Association Stakeholder Forum, Smartline Personal Mortgage Advisors and LIXI Australia. He also runs his own consultancy business,

specialising in strategy formulation in the financial services sector.

He has more than thirty years' experience in banking and finance, having served as Managing Director of Mortgage Choice, Permanent Trustee and Heritage Bank.



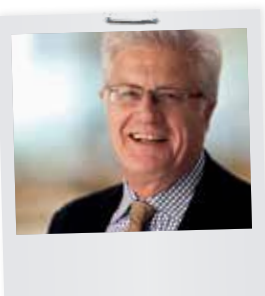
MR MARK PHILLIPS

Member of the Audit and Finance Committee

First appointed to the Board in April 2013

Mr Phillips has in excess of 30 years of business experience. In a 20-year career with the Commonwealth Bank of Australia, he was instrumental in the development of a range of new business divisions. Subsequently,

he spent more than 10 years as the Chief Executive Officer of companies listed on the Australian Stock Exchange. Today, he is a director and adviser for businesses and not-for-profit organisations.



MR STEPHEN ROBERTS BB, MBA, GAICD

Chair of the Audit and Finance Committee

First appointed 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, Managing Director of Russell Investments

Australasia and Executive Vice-President at BT Funds Management Ltd. 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.

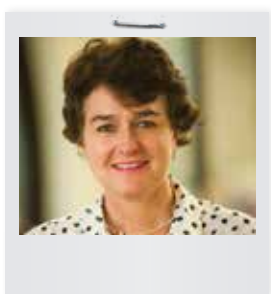


MR JOHN STUBBS

First appointed to the Board in September 2012
Chief Executive Officer, CanSpeak

Fourteen years ago, Mr Stubbs 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 and the Royal Australian and New Zealand College of Radiologists.



MS MELANIE TRETOWAN MB(Mktg)

Member of the Audit and Finance Committee
First 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

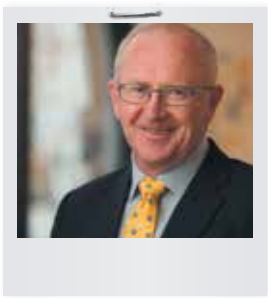
No Director of Cancer Council NSW has received or has become entitled to receive a benefit in respect of their role as Directors.

Meetings of Directors/Committees:

	Full meetings of Directors		Audit and Finance Committee		Investment Committee		Governance Committee		Remuneration and Nomination Committee	
	A	B	A	B	A	B	A	B	A	B
S Ackland	6	6	*	*	*	*	*	*	*	*
M Back	4	6	*	*	*	*	8	8	*	*
J Boehm	6	6	4	5	*	*	8	8	*	*
M Chiew	3	6	*	*	*	*	*	*	2	2
B Hodgkinson	6	6	*	*	*	*	8	8	2	2
P Lahiff	5	6	*	*	4	4	*	*	2	2
M Phillips	6	6	5	5	*	*	*	*	*	*
S Roberts	6	6	5	5	*	*	*	*	*	*
J Stubbs	4	6	*	*	*	*	*	*	*	*
M Trethowan	5	6	2	2	*	*	*	*	*	*

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

OUR 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 five years in London with Citibank and General

Manager of Private Bank at Westpac, Jim moved to Star City as Managing Director. Prior to Cancer Council NSW, he was Chief Executive Officer at the NSW Rugby Union and the NSW Waratahs.

Jim previously held a number of board positions for financial businesses and NSW Rugby Union. He has also held membership on a number of charity committees.



JULIE CALLAGHAN

Director, Organisational Integration and Performance

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, community development, and the delivery of community-based programs and services.

Julie joined Cancer Council NSW in 2005 and has held a number of positions within the Community Engagement and Program Delivery Division, including regional stakeholder engagement, operations and management, prior to being appointed Director of Organisational Integration and Performance. In this role, Julie is responsible for coordinating strategy development, organisational planning and reporting, in addition to building strategic alliances across the sector.



KATHY CHAPMAN

Director, Cancer Programs

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.

As the Director of the Cancer Programs Division, Kathy is responsible for developing strategies and programs to meet Cancer Council NSW's mission to beat cancer across our strategic priorities of research, prevention, supportive care and advocacy.

Kathy has more than 50 peer-reviewed journal publications, and has significant expertise in public health and cancer control programs.

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



FIONA FAHEY

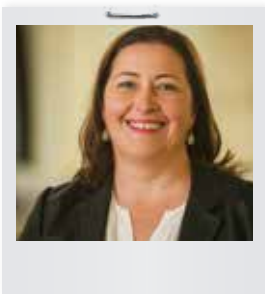
Director, Human Resources

Fiona Fahey holds a Bachelor of Social Science (Human Resources) and a Masters of Commerce (Human Resources) from the University of New South Wales.

She has more than 13 years' experience in human resources, working across a diverse range of industries, including community services, financial services, engineering and education. Fiona has held a number of senior human resources positions in the corporate, not-for-profit and public sectors, including

most recently Mission Australia and NSW Trade & Investment.

Fiona is responsible for the strategic direction and leadership of the Human Resources function, including volunteering. She leads delivery of strategic human resources and volunteering programs, services and technologies to build a talented, diverse, engaged and productive workforce in support of the organisation.

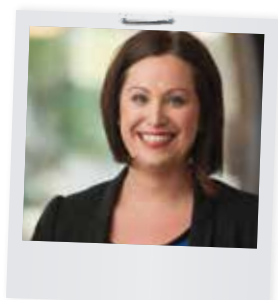


TRUDI MITCHELL

Director, Marketing and Communications

Trudi Mitchell holds a postgraduate degree in Marketing from the University of New South Wales and is currently undertaking Social Leadership Australia's leadership program. 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, digital and retail stores.

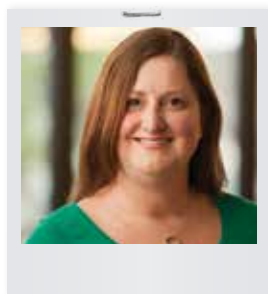


MEREWYN PARTLAND

Director, Community Engagement and Program Delivery

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 16 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 Organisation.

As Director of the Community Engagement and Program Delivery Division, Merewyn oversees the engagement of all communities across NSW, including delivery of cancer programs, community services and local fundraising initiatives. Merewyn is currently a member of the National Rural Health Alliance and a member of the Australian Health Promotion Association.



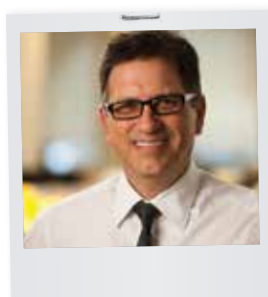
SANDRA SIMM

Chief Financial Officer

Sandra Simm has a Bachelor of Commerce from the University of Newcastle and is a member of CPA Australia.

With more than 20 years' experience, Sandra has worked in finance roles across both public and private sectors, including not-for-profit, media, local government and financial consulting areas. Since 2013, she has also been the Company Secretary and a board member for Include A Charity.

Sandra is responsible for the strategic direction and leadership of the Corporate Services Division, which includes prudent financial management and reporting of our financial resources and assets, donor administration and servicing, and shared services; and ensuring that Cancer Council NSW has appropriate risk and control measures in place.



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.

As the Director of the Cancer Research Division, Freddy oversees research into the causes and consequences of a cancer diagnosis, with the aim of enhancing outcomes across the entire cancer journey. Freddy's research interests include establishing large,

collaborative, open-source epidemiological infrastructure studies such as the Cancer Lifestyle and Evaluation of Risk (CLEAR) Study and the 45 and Up Study (administered by the Sax Institute). Freddy's research also focuses on the role of infections and tobacco on the development of cancer.

Freddy holds Associate Professor positions at the Schools of Public Health at the University of Sydney and the University of New South Wales. In September 2013, he was awarded the AG Oetlé Memorial Medal for his contribution to cancer research.

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

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
Adviser to business, social and
charitable organisations

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

Mr John Stubbs
CEO CanSpeak

Ms Melanie Trethowan
Consultant

In attendance:

Mr Jim L'Estrange
(from July 2013)
CEO, Cancer
Council NSW (CCNSW)

Mr Ted Starc
(to September 2013)
Head, Corporate
Services and CFO, CCNSW

Ms Angela Aston
Company Secretary, CCNSW

AUDIT AND FINANCE COMMITTEE

Mr Stephen Roberts (Chair)
CCNSW Board Member

Mr Mark Abood
Former Director of Financial
Audit, Audit Office NSW

Ms Jill Boehm OAM
CCNSW Board Deputy Chair

Mr Mark Phillips
CCNSW Board Member

Ms Melanie Trethowan
(from April 2014)
CCNSW Board Member

In attendance:

Mr Todd Dewey
Oakton

Mr Paul Marsh
Oakton

Mr Ben Owens
Oakton

Mr Paul Bull
BDO

Mr Jim L'Estrange
(from July 2013)
CEO, CCNSW

Mr Ted Starc
(to September 2013)
Head, Corporate
Services and CFO, CCNSW

Ms Sandra Simm
(from October 2013)
CFO, CCNSW

Ms Claire Patterson
(from September 2013)
Minute Secretary, CCNSW

INVESTMENT COMMITTEE

Mr Paul Lahiff (Chair)
CCNSW Board Member

Mr Bruce Tomlinson
Sunsuper Pty Ltd

Ms Jacoline Bekker
(to December 2013)
Grant Samuel & Associates

Mr Craig Parker
(from January 2014)
Executive Director, Debt
Capital Markets, Westpac
Institutional Bank

In attendance:

Mr Jim L'Estrange
(from July 2013)
CEO, CCNSW

Mr Ted Starc
(to September 2013)
Head, Corporate
Services and CFO, CCNSW

Mr Ryan Alexander
(from November 2013)
Senior Manager, Financial
Accounting, Compliance
and Risk, CCNSW

Ms Claire Patterson
(from September 2013)
Minute Secretary, CCNSW

Mr Paul Scouller
(from September 2013)
Mercer Investments

ETHICS COMMITTEE

Ms Meghan Carruthers (Chair)
Lawyer, Ebsworth & Ebsworth

Dr Megan Brock
(to December 2013)
Religious Representative
CatholicCare
Pastoral Carer

Mr Felix Ratcliff
Counsellor (Allied
Health Professional)
Representative, CCNSW

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

Mr James Emmerig
Legal Representative
Solicitor, King & Wood Mallesons

Rev John Neasey
Anglicare Chaplain
Pastoral Carer

Dr Monica Robotin
Experienced
Researcher Representative
Medical Director, CCNSW

Dr John Sanders
Layman

Ms Frances Taylor
Laywoman

Ms Alanna Linn
Laywoman

Ms Lani Attwood
Counsellor (Allied Health
Professional) Representative
Radiation Therapist, Royal
Prince Alfred Hospital

Mr Tim Read
Layman

Assoc Professor David Smith
Experienced
Researcher Representative
Research Fellow, Cancer
Research Division, CCNSW

Mr Stuart Davey
(from May 2014)
Minister, Glebe Uniting Church
Pastoral Carer

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
CCNSW Board Member

Ms Jane Bennett
Consumer Representative

Professor Andrew Biankin
(to July 2013)
Lab Head, Pancreatic Cancer
Research, 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, Gynaecological Oncology
Research Group, Westmead
Millennium Institute for Cancer
Research at Westmead Hospital

Mr John Moroney
Consumer Representative

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

Professor Sandra Jones
Research specialist, behavioural,
psychosocial, Director,
Research Institute, Australian
Catholic University

In attendance:

Mr Jim L'Estrange
(from July 2013)
CEO, CCNSW
Ex officio

Ms Kathy Chapman
Director, Cancer Programs
Division, CCNSW

Dr Libby Topp
Manager, Research
Strategy Unit, CCNSW

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

GOVERNANCE COMMITTEE

Mr Bruce Hodgkinson SC (Chair)
CCNSW Board Chair

Assoc Prof Michael Back
CCNSW Board Member

Ms Jill Boehm OAM
CCNSW Board Deputy Chair

Mr Chris Dawson
(to November 2013)
Turner Freeman Lawyers (retired)

In attendance:

Mr Jim L'Estrange
(from July 2013)
CEO, CCNSW
Ex officio

Ms Angela Aston
Company Secretary, CCNSW

Ms Louisa Fitz-Gerald
(from September 2013)
General Counsel, CCNSW
Ex officio

REMUNERATION AND NOMINATION COMMITTEE

Mr Paul Lahiff (Chair)
CCNSW Board Member

Ms Mary Chiew
(from April 2014)
CCNSW Board Member

Mr Bruce Hodgkinson SC
CCNSW Board Chair

Mr Peter McCauley
(from April 2014)
Consultant

ADVISORY COMMITTEE FOR INTERNAL RESEARCH

Inaugural members

Assoc Professor Claire Vajdic
(Chair)
Team Leader, Cancer Aetiology and Prevention Group, Adult Cancer Program, University of New South Wales Lowy Cancer Research Centre

Professor Alexandra Barratt
Professor in Epidemiology,
School of Public Health,
University of Sydney;
Co-director, Centre for Medical
Psychology and Evidence-based
Decision-making,
University of Sydney

Professor Alison Venn
Deputy Director and Associate
Director, Research, Menzies
Research Institute Tasmania;
Director, Tasmanian
Cancer Registry

Professor Bernard Stewart
Professor of Medicine, Faculty
of Medicine, University of
New South Wales

Professor David Whiteman
Head, Cancer Control Group;
Senior Research Fellow, QIMR
Berghofer Medical Research
Institute, Queensland

Professor Jane Young
Professor in Cancer
Epidemiology, School of Public
Health, University of Sydney

Professor John Wiggers
Professor, School of
Medicine and Public Health,
University of Newcastle

Professor Jonathon Craig
Professor, Clinical Epidemiology,
School of Public Health,
University of Sydney

Professor Louisa Jorm
Director, Centre for Health
Research; Professor of
Population Health, University
of Western Sydney

Professor Sandra Eades
Head of Indigenous Maternal
and Child Health; Associate
Head of Preventative Health
Research, Baker IDI Heart and
Diabetes Institute, Victoria

Professor Suzanne Chambers
Professor, School of
Applied Psychology, Griffith
University, Queensland;
Director of Research, Cancer
Council Queensland
Assoc Professor Patrick Cregan
Chair, Nepean Blue Mountains
Local Health District

Assoc Professor Rosemary Knight
Principal Advisor,
Population Health Division,
Australian Government
Department of Health

Ms Jane Bennett
Consumer Representative

Mr Peter Coupland
Consumer Representative

Mr Jim L'Estrange
Ex officio

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 (currently vacant). Other members are co-opted with relevant skills as required. Major areas of focus for the Governance Committee this year have been the role of membership at Cancer Council NSW, the revision and review of all Cancer Council NSW policies, and a revision of Cancer Council's Constitution.

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.

REMUNERATION AND NOMINATION COMMITTEE

This year, the Remuneration Committee amended its Charter to include the role of nominations. It has also extended its role from overseeing and advising on the consideration of remuneration, bonuses and incentives for the CEO, to providing guidance to Cancer Council NSW in our consideration of remuneration policy for the entire organisation as well as the composition and performance of the Board. The Committee has been actively involved in reviewing the skillsets required by Cancer Council for the Board and determining a process for identifying and attracting suitable Board candidates.

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.

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.

ADVISORY COMMITTEE FOR INTERNAL RESEARCH

The Advisory Committee for Internal Research is a governance committee that reports to the Cancer Research Committee, which in turn reports to the Board of Cancer Council NSW. The Advisory Committee for Internal Research is responsible for providing guidance to the Cancer Research Committee on the performance and outcomes of cancer research programs conducted at Cancer Council NSW. Among a number of functions, the Advisory Committee for Internal Research has assumed responsibility for the scientific and strategic review of research conducted at Cancer Council NSW, a role previously fulfilled by the Research Review Committee.

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/board-charter

The Board Charter has been updated this year in order to be more comprehensive, and to incorporate standard operating procedures, as well as addressing the role, membership and skill-set of Board members. This update was introduced in order to more accurately reflect and comply with the Australian Charities and Not-for-profits Commission's (ACNC) recommendations for charities.

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.

The Board was pleased to appoint Mr Jim L'Estrange as CEO of Cancer Council NSW in October 2013, after four months in the interim position. During his first 12 months, Mr L'Estrange has worked with the Executive team to develop Cancer Council NSW's strategic intent, including a refreshing of our vision, mission and strategic priorities, which will lay the groundwork for the development of a three-year strategic plan. He has also introduced biannual Leadership forums, where all senior managers and the Executive team participate in the review of organisational performance, goals and objectives.

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/constitution

In 2013/14, 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.

Throughout 2013/14, Cancer Council NSW's Governance Committee oversaw the work of reviewing and revising the Constitution to enhance the Company's membership base by building on our engagement with the community, giving the community a greater involvement in Cancer Council NSW's strategic direction. This draft Constitution will be presented to, and adopted by, the members in late 2014.

The new Remuneration and Nomination Committee is currently developing a Board succession plan, having first undertaken a review to ascertain what skills will need to be replaced when Board members depart/retire in the coming months, and allow the Committee to successfully source potential Board members who fulfil the key requirements identified.

PRINCIPLE 3:

Act ethically and responsibly

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/code-of-conduct

Cancer Council NSW Directors are not paid for their services on the Board; however, they may be reimbursed for expenses incurred (such as travelling, 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 corporate 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/audit-finance-committee-charter

In 2010, the Board appointed an internal auditor, Oakton, for a three-year period, following an open tender process. In late 2013, the Audit and Finance Committee extended Oakton's appointment to end June 2015, to allow for discussions taking place at a national Cancer Council level regarding the procurement and use of internal auditors as a national rather than state-based arrangement.

Refer to Principle 7 for information about the internal reviews undertaken this year.

THE CANCER COUNCIL NSW

On 1 October 2005, Cancer Council NSW began operating as a company limited by guarantee under the provisions of the *Corporations Act 2001* (Cth). 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.

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* (Cth), and through the Annual General Meeting.

Cancer Council NSW is also registered as a Not-for-profit Charity in accordance with the Australian Charities and Not-for-profits Commission. In 2013/14, the Governance Committee reviewed, updated and reformatted all company policies, seeking opportunities to reduce duplication and streamline associated policies, as a means of providing effective and straightforward guidance to staff and stakeholders about how Cancer Council NSW complies within the regulatory legislative framework established for charities. The Board Charter was also updated this year to incorporate standard operating procedures. Refer to Principle 1 for more information.

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 ensuring that our donors are continually kept informed on how their funds are utilised.

PRINCIPLE 6:**Respect the rights of “stakeholders”**

As of June 2014, Cancer Council NSW had 48 (44 Ordinary, 4 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, 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 (see page 24).

As mentioned at Principle 2, in 2013/14, Cancer Council NSW’s Governance Committee revised the Constitution, giving the community a greater opportunity to become more actively engaged with Cancer Council NSW by exercising their membership rights and nominating/voting for Board members.

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 Compliance and Policy Register. Both Committees assess, monitor, and manage business risk. In 2013/14, the Governance Committee Charter was amended to show that this Committee is now taking responsibility for reviewing the system for monitoring legal, regulatory and ethical compliance programs, including the Company’s Code of Conduct; and for obtaining reports from management regarding compliance, for assessing the internal processes for determining and managing key legal risk areas, such as litigation and claims, and legal and statutory compliance.

In addition, in August 2013, the role of General Counsel was created to assist Cancer Council NSW to identify and manage legal and compliance risks. The General Counsel is an ex officio member of Cancer Council NSW’s Governance Committee, along with the CEO.

Cancer Council NSW has a three-year Internal Audit Plan to review and address relevant risks. Internal audits conducted in 2013/14 are summarised on page 39.

In 2013/14, 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 Remuneration Committee was expanded this year to become the Remuneration and Nomination Committee, with new responsibilities to identify and determine the skill sets and performance of Board Directors.

The Committee, previously responsible for selecting and managing the performance and remuneration of the CEO position, was further expanded this year to review and make recommendations to the Board on the remuneration process for the entire staff of the organisation. A similar process for benchmarking and evaluation is used for both the CEO and all staff, and the services of external remuneration consultants and experts in the not-for-profit sector are used to conduct benchmarking. The updated Remuneration and Nomination Charter is on Cancer Council NSW’s website at cancercouncil.com.au/remuneration-nomination-committee-charter

The new Performance Planning and Development System, introduced in 2012/13, has been further developed and enhanced this year so that performance measures are now more specifically described and aligned to particular job roles across the organisation (see page 26 for details).

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 company limited by guarantee trading under the name of Cancer Council NSW.
- ✎ Cancer Council NSW is endorsed as a deductible gift recipient under Subdivision 30-BA of the *Income Tax Assessment Act 1997* (Cth).
- ✎ Cancer Council NSW's charitable fundraising number is CFN 18521. This certifies that Cancer Council NSW holds a charitable fundraising authority under Section 16 of the *Charitable Fundraising Act 1991* (NSW), which authority is subject to compliance with the Act, and the Charitable Fundraising Regulation 2003 and the conditions of the authority.

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)
- ✎ *Fair Trading Act 1987* (NSW)
- ✎ *Health Records and Information Privacy Act 2002* (NSW)
- ✎ *Long Service Leave Act 1955* (NSW)
- ✎ *Public Health Act 2010* (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* (Cth)
- ✎ *Age Discrimination Act 2004* (Cth)
- ✎ *Australian Charities and Not-for-profit Commission Act 2012* (Cth)
- ✎ *Charities Act 2013* (Cth)
- ✎ *Criminal Code Act 1995* (Cth)
- ✎ *Competition and Consumer Act 2010* (Cth)
- ✎ *Copyright Act 1968* (Cth)
- ✎ *Corporations Act 2001* (Cth)
- ✎ *Defamation Act 2005* (Cth)
- ✎ *Disability Discrimination Act 1992* (Cth)
- ✎ *Fair Work Act 2009* (Cth)
- ✎ *Fringe Benefits Tax Act 1986* (Cth)
- ✎ *Fringe Benefits Tax Assessment Act 1986* (Cth)
- ✎ *Income Tax Assessment Act 1997* (Cth)
- ✎ *Privacy Act 1988* (Cth)
- ✎ *Racial Discrimination Act 1975* (Cth)
- ✎ *Sex Discrimination Act 1984* (Cth)
- ✎ *Trade Marks Act 1995* (Cth)
- ✎ *Workplace Gender Equality Act 2012* (Cth)

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 2013/14, the division received:

- ✎ funding totalling \$159,517 from the National Health and Medical Research Council (NHMRC)
- ✎ funding totalling \$86,232 from the Cancer Institute NSW.
- In 2013/14, our **Cancer Programs Division** received:
 - ✎ funding of \$67,500 from the Health Administration Corporation for Eat It To Beat It
 - ✎ funding of \$59,091 from Western Sydney and Nepean Blue Mountains Local Health Districts for Eat It To Beat It
 - ✎ funding totalling \$15,000 from the Cancer Institute NSW
 - ✎ funding of \$59,625 from NSW Department of Ageing, Disability and Home Care for our Carers Project.

OUR INFRASTRUCTURE AND SYSTEMS

IMPROVING OUR SYSTEMS

In 2012/13, we successfully implemented a new financial management system, Technology One, and in 2013/14 we focused on further integrating the system to capture, track and report on performance metrics across Cancer Council NSW. This project was an opportunity to critically review existing measures and ensure **alignment across all business units**.

An online travel booking system was implemented during the year, to ensure 'best practice' travel management, and to drive savings for travel and accommodation costs. **Cost savings of 33% on our annual travel spend** were achieved by accessing the significant buying power of one of Australia's largest travel companies, changing staff buying behaviour and leveraging booking volumes to negotiate better deals, as well as reducing levels of travel through greater use of telephone conferencing.

We also reduced our **carbon footprint** with lower travel. In 2012/13, we surveyed our carbon footprint, which was benchmarked at 4,627 tonnes of carbon dioxide; and thanks to these changes to our travel spend, we look forward to seeing a reduction when we undertake a survey again in 2014/15.

REDUCING FRAUD RISK

This year, our internal auditors completed an independent survey of our staff and volunteers to gauge awareness of fraud risks and controls.

With an 88% response rate, the survey identified two key opportunities to improve risk control: **embed fraud risk within ongoing risk assessments, and expand fraud awareness training** to all staff. Fraud risk has been added to risk-assessment tools, and a review of our Fraud Control Plan and key fraud risks was completed, with controls integrated into operational plans for 2014/15.

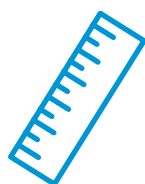
Compulsory fraud awareness training for all staff will commence later in 2014 as part of the eLearning compliance program (see page 26). This key training will be extended to volunteers during 2014/15 to increase awareness of fraud and the key roles of reporting and controls.

INTEGRATING EFFECTIVE RISK MANAGEMENT

The Board and managers from across Cancer Council NSW were surveyed by our internal auditors during the year, seeking feedback on **existing and emerging organisational risks**. The responses provided great insight, highlighted key opportunities, and were a catalyst to reviewing and refining our risk register for greater integration within business operations. Key risks and controls will be integrated into the 2014/15 strategic plan.

ENSURING COMPLIANCE WITH PRIVACY LAWS

Major changes to the *Privacy Act 1988* (Cth) took effect on 12 March 2014. To comply with the new laws, Cancer Council NSW conducted a comprehensive review of our systems and processes; drafted new policies, procedures and work instructions; and delivered staff training. Cancer Council NSW takes individuals' privacy seriously and is committed to following 'best practice' in the management of data. We have also worked with Cancer Councils around Australia to ensure a consistent national approach to privacy matters.



Internal audits conducted in 2013/14

Our internal auditors provide independent, objective assurance and consulting services designed to add value and improve Cancer Council NSW's operations.

During the year they completed the following reviews:

Review	Number of recommendations	Percentage (%) of recommendations implemented to date
Volunteer management	3	100%
Policy and advocacy program	2	68%
Fraud risk management and awareness	6	72%
Core financial controls	0*	n/a
Revenue assurance	5	79%
Community engagement and program delivery strategic review	7	83%

*Internal audit did not find areas for improvement, therefore made no recommendations

OUR PERFORMANCE

What	How	Outputs/measurables
<p>Research Priority</p> <p>To conduct and fund world-class research that reduces the impact of cancer</p>	<p>We forge new discoveries in cancer causes, biology, trends and consequences, through funding grants.</p> <hr/> <p>In partnership with government and collaborators, we fund a large population biobank of specimens.</p> <hr/> <p>We're developing CLEAR and 45 and Up as world-class platforms and engaging cancer researchers in their use.</p> <hr/> <p>We trial and deploy novel funding strategies and partnerships to unite the best ideas and researchers for the benefit of cancer control.</p>	<p>New research grants awarded</p> <hr/> <p>Total research grants funded</p> <hr/> <p>Epidemiological studies in progress</p> <hr/> <p>Number of specimens in biobank</p> <hr/> <p>Number of research grants received</p> <hr/> <p>Percentage of successful research grants applied for</p> <hr/> <p>Number of new CLEAR Study recruits</p> <hr/> <p>Total research expenditure (\$m)</p>
<p>Prevention Priority</p> <p>To reduce cancer in the NSW community by encouraging people to lead healthy, cancer-smart lifestyles</p>	<p>We facilitate cancer-smart policies and practices in organisations and settings.</p> <hr/> <p>We support individuals to adopt cancer preventative behaviours, including increased fruit and vegetable consumption.</p> <hr/> <p>Our community engagement framework connects people and organisations to the cancer cause, providing opportunities to contribute directly to cancer control.</p> <hr/> <p>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.</p>	<p>Newly accredited SunSmart centres</p> <hr/> <p>Number of parents participating in the Eat It To Beat It program</p> <hr/> <p>Community Cancer Networks and formal partnerships</p> <hr/> <p>Number of new projects with social and community service organisations reached through Tackling Tobacco</p>

*Accurate data not available for this year

2010	2011	2012	2013	2014	Some outcomes from 2013/14 – our impact, contribution, insight or connection
10	30	20	21	16	 Highlight: We committed \$5.4 million in external research grants to support 16 new projects over the next three years.
65	93	79	71	72	
52	60	65	70	77	
95,004	175,802	281,473	312,521	332,800	 Highlight: Findings from our <i>Prostate Cancer Care</i> and <i>Outcomes Study</i> informed the US Preventive Services Task Force recommendations regarding treatment of early stage or prostate specific antigen (PSA) screening-detected prostate cancer.
9	8	2	9	5	 Lowlight: Our success rate for grant applications has declined, partly due to increased competition for a reduced pool of funding.
*	32%	29%	50%	24%	
1,167	1,902	1,440	1,599	1,422	 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.
14.3	16.1	15.0	14.8	14.2	 Highlight: Our investment in research makes Cancer Council NSW the largest non-government funder of cancer research in Australia.
850	931	671	868	572	 Highlight: Over three-quarters of NSW primary schools are now SunSmart, with many thousands more NSW children protected from overexposure to ultraviolet radiation.
482	1,285	1,573	3,443	8,912	 Highlight: Our Eat It To Beat It program engaged 8,912 parents through our Healthy Lunch Box and Fruit and Veg Sense sessions, influencing an increased consumption of cancer-preventing fruits and vegetables for thousands of families.
*	83	117	106	199	 Highlight: Community Cancer Networks across NSW work closely with Cancer Council NSW, providing insights on the most important local issues, and building connections in the community to increase local focus, knowledge and access to services.
0	47	20	22	10	 Highlight: Highlighting the success of Tackling Tobacco over the past seven years, Cancer Council NSW has supported nearly every state and territory Cancer Council to introduce similar programs.

OUR PERFORMANCE

What	How	Outputs/measurables
<p>Information and Support Priority</p> <p>To empower and support people affected by cancer, so that no one need face cancer alone</p>	<p>We increase the number and reach of information and support services for people with cancer and their families.</p>	<p>Calls and emails to 13 11 20 Information and Support</p> <hr/> <p>Patients and carers using 13 11 20 Information and Support</p> <hr/> <p>Cancer Council publications distributed</p> <hr/> <p>Cancer Council publications viewed online – unique page views</p> <hr/> <p>Telephone Support Group (TSG) sessions held</p> <hr/> <p>Cancer Council Connect – number of referrals matched</p>
	<p>We provide increasing help with the high cost of cancer.</p>	<p>Financial assistance grants to cancer patients and carers</p> <hr/> <p>Financial assistance grants \$</p>
	<p>We broker and elicit pro bono contributions from organisations and businesses with expertise and capacity to lend support to cancer patients and carers.</p>	<p>Number of patients/carers assisted by our Pro Bono Programs across Australia</p>
	<p>We improve access to treatment via the provision or support of patient transport services.</p>	<p>Patient transport kilometres funded</p>
	<p>We improve access to treatment via the provision or support of patient accommodation services.</p>	<p>Patient accommodation nights supported by Cancer Council NSW</p>
<p>Advocacy Priority</p> <p>To ensure that governments take action to reduce cancer risk and improve access to care and treatment</p>	<p>We develop and deploy ways to engage, equip and mobilise people in achieving social change aligned to our mission.</p>	<p>New Cancer Council advocates trained in NSW</p> <hr/> <p>Cancer Council advocacy supporters in NSW</p>
	<p>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.</p>	<p>Percentage of local governments that have adopted a smoke-free outdoor area policy</p>
	<p>We enhance understanding and support among policymakers for changes required to reduce the incidence and impact of cancer.</p>	<p>Number of trained volunteers joining our MP Liaison Program</p>

2010	2011	2012	2013	2014
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**Some outcomes from 2013/14
- our impact, contribution, insight or connection**

16,536	16,812	16,846	18,339	15,763
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8,131	8,092	7,728	6,830	6,095
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232,914	244,000	276,947	239,961	241,825
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706,221	740,753	709,284	710,739	1,175,492
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Highlight/Lowligh: Fewer patients and carers are accessing our information and support services by telephone, yet access to our information online has doubled, highlighting a trend towards sourcing information online. Continuing focus on our digital channels is supporting this trend.

229	223	196	203	170
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640	516	445	480	378
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1,774	1,573	1,904	1,937	1,794
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Highlight: 1,794 cancer patients received emergency financial assistance in 2013/14. Partnerships with utility providers contributed an additional \$48,000 towards the program, meaning 12% of applicants received more than \$500 in assistance at no additional cost to Cancer Council NSW.

490,102	381,909	418,463	444,551	441,853
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172	1,007	1,568	2,542	2,488
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Highlight: Our Pro Bono Programs connected 2,488 patients and carers with lawyers, financial planners, HR specialists and business advisors for assistance in 2013/14, relieving them of financial burden and providing respite, during what can be an overwhelming period for patients and their families.

706,221	740,753	709,284	710,739	628,074
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Highlight: More than 5,541 people across NSW were provided transport to treatment when no other options were available.

20,440	19,674	12,401	16,633	18,700
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72	68	50	85	106
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Highlight: We have trained 787 advocates, and have 13,745 members in our CanAct Community who work with us to campaign for improvements in the treatment and care of people with cancer and public health initiatives that improve cancer outcomes.

2,133	3,672	8,000	10,600	13,745
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50%	58%	65%	100%	100%
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Highlight: Our CanAct Community helped identify five issues for our 2015 State election campaign.

10	13	15	33	48
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OUR PERFORMANCE

What	How	Outputs/measurables
Fundraising Priority To enable the community to raise money to help beat cancer	For efficiency, we monitor our event and appeal portfolio to ensure profitability and continuous improvements in an ever-increasing competitive market.	Cost:income ratio Fundraising income/fundraising staff FTE Average \$ per Relay For Life event
	We facilitate mass participation events and appeals across NSW that engage the community in our mission to beat cancer.	Number of event hosts, volunteers and supporters Number of Relay For Life events
	We build a robust, diverse fundraising portfolio to ensure the ongoing funding of our programs and to underpin the independence of our operations.	Total fundraising income (\$m) Bequests – number of new estates notified during the year Percentage of funds received from the community
Our people	We engage volunteers in a wide variety of roles, extending our mission and reach in the community.	Volunteer contributions (hours captured)
	We ensure volunteers have opportunities to use their diverse skills and capabilities.	Number of volunteers and community supporters contributing during the year
	We have an engaged and highly skilled paid workforce.	Number of staff, headcount (excluding casuals)
	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
Our organisation	We strive to work more effectively: better harnessing people, funds, technology and other resources to minimise our infrastructure and administration costs.	Infrastructure and administration costs as a percentage of total expenditure
	We maintain our investments at levels equivalent to between 9 and 12 months of operational expenditure, in order to secure us against revenue fluctuations, to underwrite our forward commitments, and to provide capital funding flexibility.	Investment return per annum Months of operational expenditure covered by investments
	We maintain best-in-class financial and business reporting within the framework of corporations and related law.	

*Accurate data not available for this year

2010	2011	2012	2013	2014	
29%	32%	31%	37%	37%	
\$813,000	\$751,000	\$809,000	\$774,000	\$818,500	
					Highlight/Lowlight: A focus on reducing our fundraising cost:income ratio paid off with many events and appeals reducing costs in 2013/14. However, our bequests – an unpredictable revenue stream – were down, which resulted in an overall stable ratio.
\$90,970	\$100,789	\$132,845	\$140,776	\$146,357	
*	24,200	28,300	28,000	24,500	Highlight: Our Relay For Life events are increasing their fundraising providing more funds for our investment in cancer programs.
67	67	58	58	56	
53.8	52.9	58.5	59.6	59.8	
104	94	97	99	86	
94%	96%	96%	96%	97%	
					Highlight: Our 97% community-funded model ensures a unique position of independence in addressing cancer issues in NSW.
258,246	279,843	294,109	348,298	374,975	
32,933	37,153	36,312	38,156	32,681	
					Highlight: Our extensive volunteer workforce contributes to our organisation, including in areas where their particular skills have a significant impact on the community and people with cancer.
320	352	374	358	355	
					Highlight: Our Employee Engagement Survey showed that 76.4% of our staff are engaged, with staff empowerment, commitment, volunteer management and relationships rating most highly.
0.9%	1%	1%	0.8%	0.8%	
					Highlight: A new learning and development framework has reconnected staff and volunteers with the programs offered and opportunities to learn and grow.
8%	7%	8%	8%	9%	
14.1%	9.4%	0.1%	16.8%	14.5%	
					Highlight: The return for our investment portfolio was 14.5% this year, another very strong result. Our 10-year return of 9.9% continues to outperform the ASX200's 5.7% over the same period.
10.9	10.9	10.9	10.0	11.9	
achieved	achieved	achieved	achieved	achieved	Highlight: Top 10 finalist and runner-up in the revenue greater than \$30 million category in the PwC Transparency Awards 2013, for the quality and transparency of our reporting.

PUBLICATIONS AND SUBMISSIONS

The following pages document the extensive research undertaken by Cancer Council NSW staff and published in peer-reviewed publications in 2013/14. This reflects the breadth of our research into cancer causes, health services, prevention and supportive care, 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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SUBMISSIONS

- Submission to the Social Policy Committee, Legislative Assembly, Parliament of New South Wales re: Provision of Alcohol to Minors Discussion Paper – July 2013.
- Submission to the NSW Office of Liquor, Gaming and Racing re: *Liquor Act. 2007* (NSW) Statutory Review – August 2013.
- Cancer Council Australia submission to Food Standards Australia New Zealand re: Qualifying Criteria for Nutrition Content Claims about Dietary Fibre – August 2013.
- Submission to the NSW Government: Easing the Burden of Cancer – November 2013.
- Cancer Council Australia submission to the Commonwealth Government re: Consultation on Health Star Rating System Style Guide – December 2013.
- Submission to NSW Ministry of Health re: *Public Health (Tobacco) Act 2008* (NSW) Statutory Review – December 2013.
- Australian Chronic Disease Prevention Alliance submission to the Food Standards Australia New Zealand Consultation re: Cost Benefit Analysis on Energy Labelling on Alcoholic Beverages – February 2014.
- Submission to the Australian National Preventive Health Agency Draft Report into the Review of the Effectiveness of Current Regulatory Codes re: Alcohol Advertising in Addressing Community Concerns about Harmful Consumption of Alcohol – March 2014.
- Submission to the ACT Government re: Options for Restricting Access to Tobacco Discussion Paper – May 2014.

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 2013/2014*.

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 the 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/annualreport2014

STATEMENT OF PROFIT OR LOSS AND OTHER COMPREHENSIVE INCOME

For the year ended 30 June 2014

	2014 \$'000	2013 \$'000
Revenue		
Fundraising income	59,754	59,588
Retail income	7,926	7,609
Interest and investment income	3,790	2,495
Grant income	980	2,220
Other revenue	1,048	914
Total revenue	73,498	72,826
Increase in fair value of investment property	110	–
Total income	73,608	72,826
Expenses		
Fundraising expenditure	22,172	21,948
Retail expenditure	7,202	6,905
Research expenditure	14,232	14,782
Regional program delivery	7,283	7,227
Information and support services	6,237	7,010
Advocacy and prevention	4,195	4,501
Media, communication and marketing expenditure	3,452	3,317
Infrastructure and administration	6,135	6,043
Total expenses	70,908	71,733
Surplus before income tax expense	2,700	1,093
Income tax expense	–	–
Surplus for the year	2,700	1,093
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 investments at fair value through other comprehensive income	5,326	6,283
Total comprehensive income for the year	8,026	7,443

STATEMENT OF FINANCIAL POSITION

As at 30 June 2014

	2014 \$'000	2013 \$'000
Assets		
Current assets		
Cash and cash equivalents	6,316	4,552
Trade and other receivables	1,996	3,946
Inventories	1,517	1,982
Total current assets	9,829	10,480
Non-current assets		
Investment properties	440	1,210
Financial assets	70,303	59,942
Intangible assets	690	723
Property, plant and equipment	17,164	17,947
Total non-current assets	88,597	79,822
TOTAL ASSETS	98,426	90,302
Liabilities		
Current liabilities		
Trade and other payables	3,296	3,248
Provisions – employee benefits	1,906	2,000
Total current liabilities	5,202	5,248
Non-current liabilities		
Provisions – employee benefits	745	601
Total non-current liabilities	745	601
TOTAL LIABILITIES	5,947	5,849
NET ASSETS	92,479	84,453
Funds		
General funds	74,976	72,004
Restricted funds reserve	6,106	6,036
Investments at fair value reserve	6,962	1,636
Grant income reserve	860	1,202
Asset revaluation reserve	3,575	3,575
TOTAL FUNDS	92,479	84,453

OUR SUMMARISED FINANCIAL REPORT

STATEMENT OF CHANGES IN FUNDS

For the year ended 30 June 2014

	General funds \$'000	Restricted funds reserve \$'000	Investments at fair value reserve \$'000	Grant income reserve \$'000	Asset revaluation reserve \$'000	Total funds \$'000
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	1,092	-	-	-	-	1,092
Other comprehensive income for the year	67	-	6,283	-	-	6,350
Total comprehensive income for the year	1,159	-	6,283	-	-	7,442
Closing balance as at 30 June 2013	72,004	6,036	1,636	1,202	3,575	84,453
Opening balance as at 1 July 2013	72,004	6,036	1,636	1,202	3,575	84,453
Transfer to/ (from) reserves	272	70	-	(342)	-	-
Surplus for the year	2,700	-	-	-	-	2,700
Other comprehensive income for the year	-	-	5,326	-	-	5,326
Total comprehensive income for the year	2,700	-	5,326	-	-	8,026
Closing balance as at 30 June 2014	74,976	6,106	6,962	860	3,575	92,479

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.

Investments at fair value reserve

The investments at fair value reserve is used to record changes in the fair value of financial assets classified as investments at fair value through other comprehensive income. 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

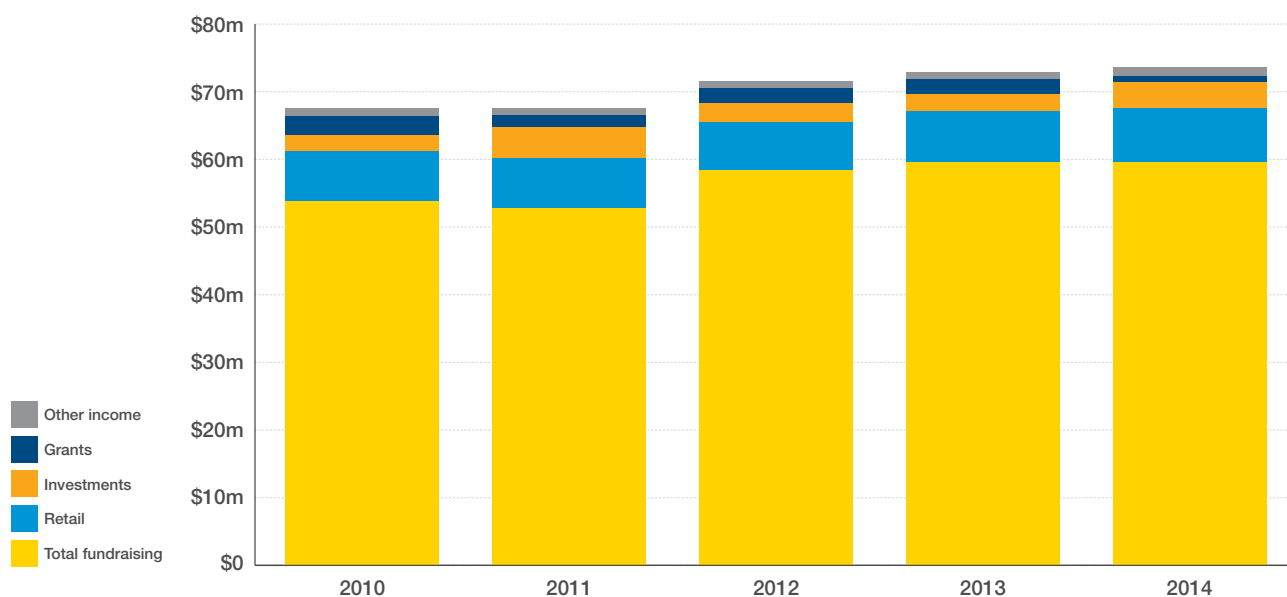
The asset revaluation reserve is used to record increments and decrements on the revaluation of CCNSW land and buildings.

STATEMENT OF CASH FLOWS

For the year ended 30 June 2014

	2014 \$'000	2013 \$'000
Cash flows from operating activities		
Receipts		
Receipts from supporters and funding sources (inclusive of GST)	71,192	65,891
Receipts from grant funding	–	2,220
Dividends, franking credits and interest received	421	436
	71,613	68,547
Payments		
Payments to suppliers and employees (inclusive of GST)	(68,423)	(71,706)
	(68,423)	(71,706)
Net cash inflow/(outflow) from operating activities	3,190	(3,159)
Cash flows from investing activities		
Proceeds from sale of property, plant and equipment	66	271
Proceeds from sale of available-for-sale financial assets	–	1,000
Proceeds from sale of held-to-maturity investments	–	305
Proceeds from sale of investment properties	880	–
Payments for purchase of investments at fair value through other comprehensive income	(1,500)	–
Payments for purchase of intangible assets	(139)	(386)
Payments for purchase of property, plant and equipment	(733)	(1,802)
Net cash inflow from investing activities	(1,426)	(612)
Net increase/(decrease) in cash and cash equivalents	1,764	(3,771)
Cash and cash equivalents at beginning of year	4,552	8,323
Cash and cash equivalents at end of year	6,316	4,552

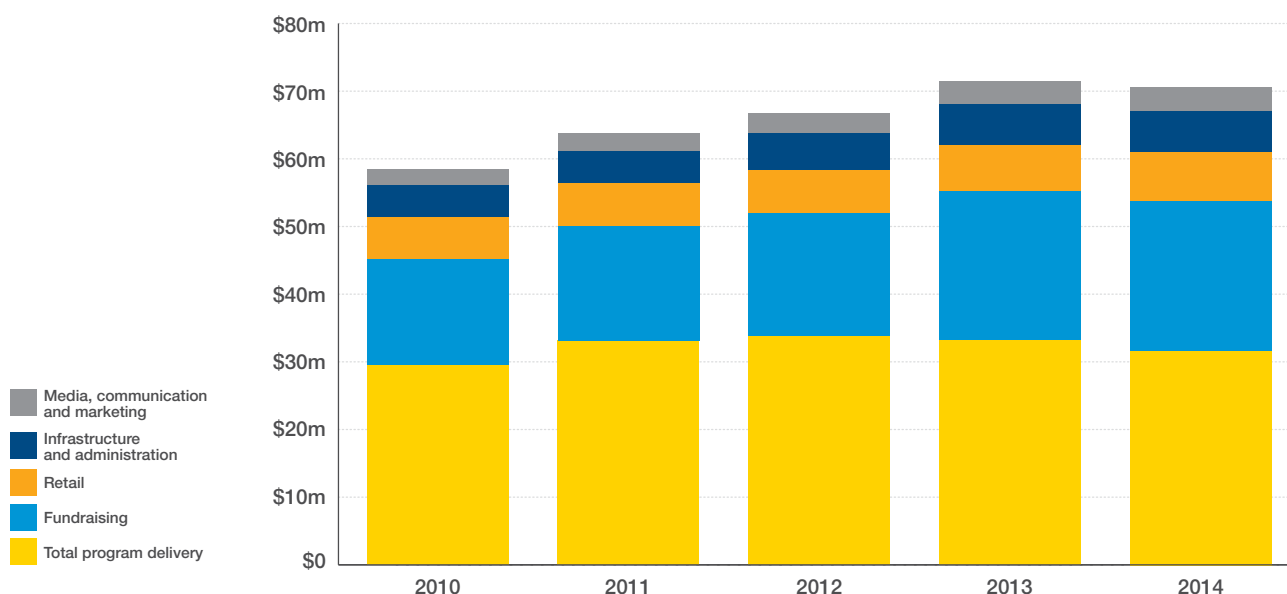
Where the money comes from



	2010 \$m	%	2011 \$m	%	2012 \$m	%	2013 \$m	%	2014 \$m	%
Events	15.2		16.6		18.3		18.0		19.8	
Appeals	26.2		26.3		26.2		27.9		28.5	
Bequests	12.4		10.0		14.0		13.7		11.5	
Total fundraising	53.8	80%	52.9	78%	58.5	82%	59.6	82%	59.8	81%
Retail	7.5	11%	7.3	11%	7.1	10%	7.6	11%	7.9	11%
Investments*	2.3	3%	4.6	7%	2.7	4%	2.5	3%	3.8	5%
Grants	2.8	4%	1.9	3%	2.3	3%	2.2	3%	1.0	1%
Other income	1.1	2%	0.9	1%	0.9	1%	0.9	1%	1.1	2%
Total income*	67.5		67.6		71.5		72.8		73.6	

*Excludes capital gains on investments

Where the money goes



	2010 \$m	%	2011 \$m	%	2012 \$m	%	2013 \$m	%	2014 \$m	%
Program delivery expenditure										
Research	14.4		16.1		15.0		14.8		14.2	
Regional program delivery	5.0		5.6		6.4		7.2		7.3	
Advocacy and prevention	3.7		4.8		4.7		4.5		4.2	
Information and support	6.7		7.0		8.1		7.0		6.2	
Total program delivery	29.8	51%	33.5	53%	34.2	51%	33.5	47%	31.9	45%
Other expenditure										
Fundraising	15.8	27%	16.9	26%	18.2	27%	22.0	30%	22.2	31%
Retail	6.1	10%	6.4	10%	6.3	10%	6.9	10%	7.2	10%
Infrastructure and administration	4.7	8%	4.7	7%	5.5	8%	6.0	8%	6.1	9%
Media, communication and marketing	2.3	4%	2.6	4%	2.9	4%	3.3	5%	3.5	5%
Total expenditure*	58.7		64.1		67.1		71.7		70.9	

*Excludes capital losses on investments



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 2014, 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 2014. We expressed a qualified audit opinion on that financial report in our report dated 28 October 2014.

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.

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 of the company. The company has determined that it is impractical to establish control over the collection of cash receipts from fundraising prior to entry into its financial records. Accordingly, as the evidence available to us regarding fundraising revenue from this source was limited, our audit procedures with respect to fundraising cash receipts had to be restricted to the amounts recorded in the financial records. We therefore are unable to express an opinion whether the cash receipt revenue of The Cancer Council NSW is complete.

Qualified 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, 28 October 2014

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THANK YOU

We thank the following generous individuals and organisations who have supported us in 2013/14. 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.

Adore Yoga	Michelle Brooks and Andrew Michael
Simon and Anna Ainsworth	Angela Cho
Nancy Aitkins	Brent Collier
In memory of Jay Natha	Fiona Davies
Debbie Amos	Sandy Davoren and Jannie Gilmour
Boehringer Ingelheim Pty Ltd	Denton Family Trust
Karl Bowen	Robin Drysdale
	Anton Eksteen

Electric Run Sydney
James Freeman,
Sh*tbox Rally
Fresenius Kabi Australia Pty Ltd
Julie Giovenco,
Mirella Carbone and Teresa Strain
Catherine Giunta and Nancy Sherry
Frank Hadley
Julie Hannaford
Bill and Allison Hayward
Rita Herceg
Jessica Hore
Kim Iori
Susan Jones
Benjamin Jonker
Saeed Kohan
Annette Kritikos,
Pink Ribbon Event host
John Luey
Caroline Lumley and the Mounties Club
Mingara

Lisa Montalto
NAB
nettleontribe
Neuroblastoma Australia
Northern Beaches Girls Night In
Lorna O'Brien aka Long Legs Lorna
Outrun Cancer
David Parker
Pedestrian Council of Australia Ltd
Josh Phegan
John Pow
Theresa Quattromani and Josephine Borg
Rixs Creek Social Golf Club
Alison and Keith Ross
John Sabo
Maxwell Schroder
Kate Seale
Kay Sidman
Rebecca Sims and family

Vince Sorrenti
SOS Print + Media Group
Staging Connections
Sterling Publishing Strategy&
Sydney Restaurant Group
The David Barbera Foundation
The Patronax Foundation
The Profield Foundation
The Skipper Jacobs Foundation
The Westin Sydney
Twin Willows Hotel
Dianne Tolley
Rebecca Vallance
Andrew and Rosie Wade
Westpac Group
Jean and Arthur Willmington
Jim Wilson
Winning Appliances
WWRD
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.

Rosemary Ellen Allsop	Ernest Edward Bradbury
Norma Alice Anderson	Barbara Rae Bridson
Valerie Anderson	John Ogden Cassim
Terrance Barlow	Thomas Castles
Olive Bell	Evelyn Ruth Clarke
Helen Mary Blair	Valda Noeline Cracknell
Vida Agnes Blomfield	Harriet David
Mavis Jean Bowie	Essem Earp

Elizabeth Louise Eichner
Roy Frank Eldridge
Margaret Lily Flucker
Leonard Charles Ford
Erik Ejvind Fox
Lester Maurice Gallagher
Ivan Grbin
Julie Ann Hacker
Raymond Frederick Harwood
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Jean Lillian Ibbotson
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Alice Munro James
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Gwynneth McGee
Ivy Elma Moncur
Hazel Morrall
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Grace Ellen Nurzey
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Lillian Margaret Parkinson
Ann Lillian Price
Ettie Gladys Richards
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Irene Tessie Ross
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Elizabeth Belle Trevor
Mary Nora Turnbull
Delma Elaine Walker
Renee Marie Wallace
Douglas Edward Walsh
Robert Alan Wilcher
Barbara Delma Nelwyn Woseen
Keith Barry Yabsley

PROFESSIONAL SERVICES

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

Bankers
NAB

Investment advisors
Mercer

Internal Auditors
Oakton

External Auditors
BDO

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

Minter Ellison
Herbert Smith Freehills
Baker & McKenzie
Clayton Utz

Lander & Rogers
DLA Piper
Maddocks
TressCox Lawyers

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

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