



Annual Report 2014/2015

celebrating 60 years

imagine

a world
without cancer

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Our vision

Together we **will**
beat cancer

Our mission

To lead, empower
and mobilise the
community to
beat cancer

Our aspirational goal

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

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



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 the only organisation 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.

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

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 a member of Cancer Council Australia, together with Cancer Councils from every state and territory across Australia. This federated structure allows Cancer Councils to address local needs, opportunities and initiatives, whilst collaborating nationally on issues that have an impact on all Australians. We work together through a number of national working groups, including CEOs, CFOs, public health, supportive care, marketing and events, human resources and business development.

Message from the Chair



This year, Cancer Council NSW proudly celebrated 60 years of growth, achievement and commitment to beating cancer.

In 1955, the NSW Parliament passed the *New South Wales State Cancer Council Act*, which established Cancer Council. The Council was made up of just seven members, who were all committed to discovering what causes cancer and what we can do to beat it.

At that time, little was known about cancer – it was not even recognised as an established disease. The relationship between lifestyle and cancer was unexplored. The incorporation of Cancer Council NSW was a very important step for all Australians in the fight against cancer.

One of the first initiatives was to establish cancer research as a priority and in 1957 we invested £24,500 in research grants. From these early steps we can confidently say, that today, Cancer Council NSW has and is funding ground-breaking cancer research, which is being undertaken by eminent and internationally recognised Australian researchers.

Today, we are proud to be one of the largest non-government funders of cancer research in Australia, investing over \$14 million each

year into conducting and funding world-class research. This knowledge is then used to grow and develop programs and services in cancer prevention, information and support, and advocacy.

Our first Board also recognised that we needed to enlist the support of the community for our work, and set about launching a public education campaign emphasising the need for early diagnosis. This connection and commitment to our community has remained paramount throughout our 60 years. This connection has enabled us to continuously expand the reach of our work.

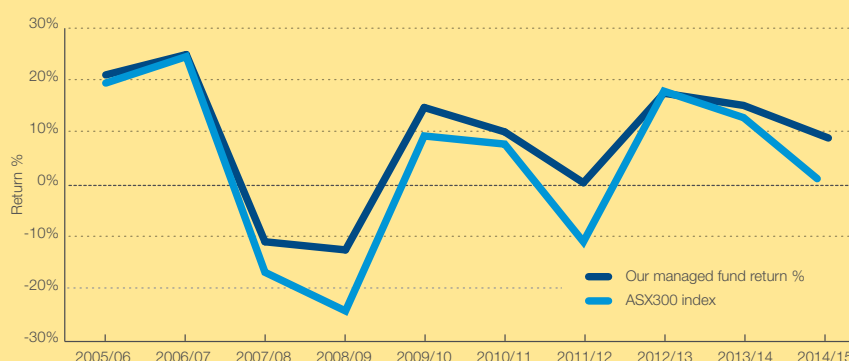
Today, we can proudly state that we are the only cancer charity that works across the entire cancer journey. We have not been able to do this on our own. We have called on the community to join us in this fight. We have brought together the community through volunteering, through our grass-roots advocacy and through our network of offices across the state. We are proud to represent a community that demonstrates its support in many ways including helping us fund our research and programs. Today we are 97% community funded.

Sixty years ago, people of foresight and courage, backed by the Government of NSW, created Cancer Council NSW to take on cancer. Since 1955, Cancer Council NSW has seen great success, and we have created great change. And we continue to believe – like our founding members did – that we can only do this with the support of the community. We believe that together we **will** beat cancer.

I am incredibly proud to have been involved with Cancer Council NSW and to have been the Chair for the past nine years. In that time we have achieved many great things, but none better than having worked with the community and with a tremendous number of great people including our staff, volunteers and our dedicated Board. I have appreciated their ongoing support, and I know that Cancer Council NSW will remain in very good hands when I end my term as Chair in December 2015. Cancer Council NSW will continue to make a significant difference in the fight against this terrible disease.

Bruce Hodgkinson SC
Chair

Maintaining strong investment returns over 10 years



This year was another strong one for our investments, delivering an average 8.3% return p.a., which is 3.8% above our performance benchmark. We are pleased to see our 10-year return of 8.4% continues to outperform the 3.6% return from the ASX300 over the same period.

Message from the CEO



This year was a very strong year for Cancer Council NSW.

We celebrated 60 years of our commitment to beating cancer.

Thanks to the dedication of our staff, volunteers and the ongoing support of the community, we have achieved so much over this time.

This was also a year of continued change for us. Following the launch in 2013/14 of our *Strategic Intent 2014–2018*, this year we focused on strategic planning to ensure we understood the needs of our community, and can deliver against our five priority areas: research, prevention, information and support, advocacy and fundraising.

Our key focus remains on organisational alignment across these priorities, as well as objectives relating to people, finance, leadership and mission relevance. We have developed improved measures to demonstrate our reach and the effectiveness of our research and programs. This ensures we spend vital funds from the community in the most effective way.

It has been a very strong year for our investment portfolio, and the Board is considering funding several projects from our reserves in the year ahead.

We have invested in the latest technology to increase our capacity and effectiveness, and build stronger connections with the community.

Our staff and volunteer engagement continues to be positive. We have focused on workforce planning to ensure we have the appropriate workforce capability and capacity to deliver our strategy.

We are committed to working with and for communities across NSW, ensuring our services and programs meet

their needs. We thank you for your continued support, so that together we will beat cancer.

Managing risk

To deliver on our ambitious objectives in research, prevention, information and support, advocacy and fundraising, it is critical that we understand the environment in which we work, both internally and externally, and remove or manage any areas of uncertainty. This year, we strengthened areas of our risk management framework, primarily through a comprehensive review of all risk areas, greater communication and consultation with staff, and through integration of our risk management practices with other business processes.

Farewell and thank you

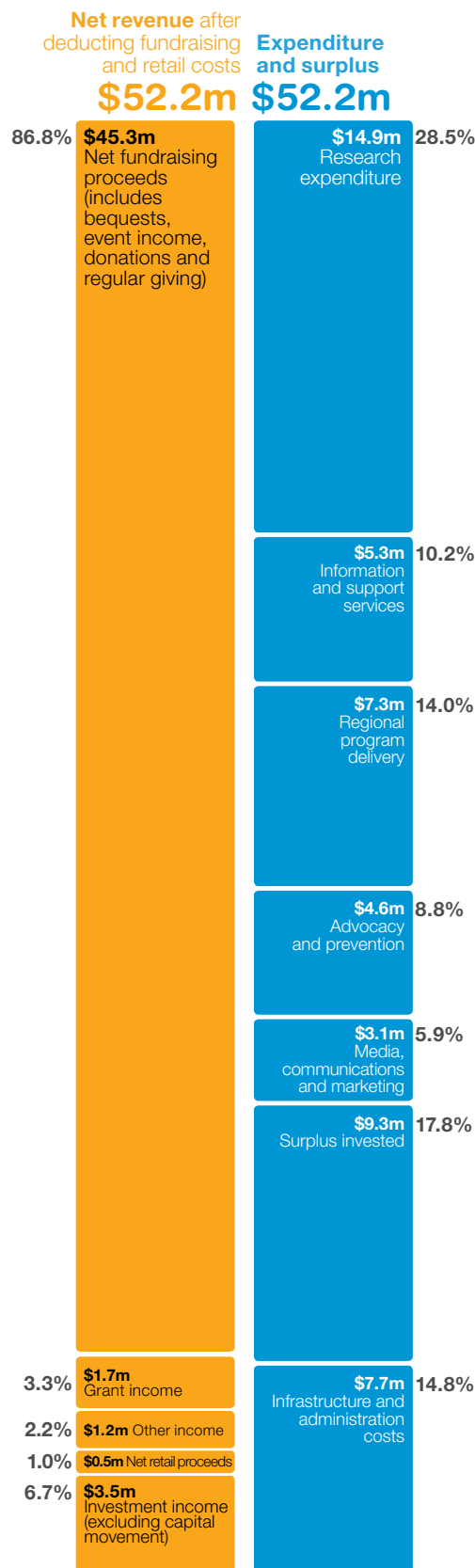
In the coming months we will farewell Mr Bruce Hodgkinson SC, who is leaving Cancer Council NSW after nine years as the Chair of our Board.

I take this opportunity on behalf of all of Cancer Council NSW – our stakeholders, volunteers and staff – to thank Bruce for his contribution. His advice has been invaluable and Cancer Council NSW has certainly benefited not only from his expertise, but also his leadership.

On behalf of the Board and the rest of the organisation, I thank Bruce for his commitment and wish him all the best for the future.

Jim L'Estrange
Chief Executive Officer

Where our funds came from and where they were spent



Our 2014/15 Annual Report is a snapshot of our achievements. In the following pages, we are able to share just some of the stories and successes from the past year. These are not just Cancer Council NSW's stories, they reflect a community who shares the vision that together we will beat cancer.

Our highlights

This year, Cancer Council NSW proudly celebrated 60 years of growth, achievement and commitment to beating cancer.



Research

\$14.9m

invested this year

\$136.5m

invested in the past 10 years

Recent research highlights

Based on our research, a new test for cervical screening is being introduced, which will reduce cervical cancer rates and the number of screening tests that women need over their lifetime.

Our research found that the number of women living with lung cancer has increased dramatically and is expected to surpass that of men by 2017, highlighting the importance of getting smoking cessation messages through to younger generations.

Our research into prostate cancer survival in Aboriginal men highlights an urgent need for health professionals to help raise awareness of prostate cancer in Aboriginal communities.



Information and support



12,200+

people called Cancer Council 13 11 20 for Information and Support from our specialist cancer professionals.



238,000+

Understanding Cancer resources were distributed, ensuring patients and carers have access to reliable and easy-to-understand cancer information.



1,000+

NSW families affected by cancer, received \$2.2 million worth of pro bono assistance for financial hardship, estate planning and workplace issues.



Community



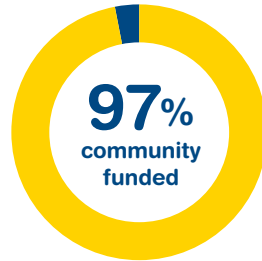
27,000+

community supporters get behind our cause and connect with our mission to beat cancer.



16

Our network of 16 offices across NSW enables us to work within every metropolitan, regional, rural and remote community and ensure that our services and programs are tailored to their needs.



2,300+

registered volunteers generously donate their time and work alongside our staff.



Advocacy

Our continued campaigning and our network of

18,600+

CanAct Community supporters have led to some amazing wins!

Recent wins

Ban on commercial solariums now in effect.

Chemotherapy co-payments to be abolished.



Prevention



142

community service organisations are participating in Tackling Tobacco and helping their clients to quit smoking.



13,227

parents participated in our Eat It To Beat It program, helping protect their children from cancer by getting them to eat more fruit and veg.



Almost

700,000

children across NSW are protected from the harmful effects of the sun while at school and childcare services, thanks to our SunSmart Program.

imagine
a world without cancer

celebrating 60 years

60 years of Cancer Council NSW

1955-2015

Thanks to the support of our community we've come a long way. We have many reasons to celebrate but we're not done imagining just yet.

More than ever, we are committed to achieving a cancer-free world. A world in which one in two people diagnosed with cancer becomes two in two people surviving cancer.

1955

1955

It starts with seven

The NSW State Cancer Council is established by an Act of Parliament and its founding seven pioneers take up office.



1957

First funds for cancer research

Cancer Council NSW funded 15 research grants, with an investment of £24,500.



1976

Our regional networks begin

Cancer Council NSW's first regional office opened in Newcastle. Our regional networks now cover all 152 local government areas across the state.



1985

Sid & Slip! Slop! Slap!

Launched by Cancer Council Victoria in 1981, the iconic *Slip! Slop! Slap!* campaign featuring Sid the Seagull screened in NSW for the first time.

Two additional sun-protection messages – *Seek!* (shade) and *Slide!* (on sunglasses) – are later added. Research shows that melanoma incidence rates are now falling in those under 45 years of age.



1984

Calling for volunteers

The call for volunteers goes out and 50 community members show interest.

Currently, more than 27,000 volunteers and community supporters work across every area of our organisation working alongside our staff and within communities.



1985

Answering the call for more support

Specialist cancer professionals begin providing people affected by cancer with free cancer information and emotional support. In its first year, the service received approximately 2,000 calls.

Today, our 13 11 20 Information and Support service supports over 12,000 callers a year.



1988

Australia gets wise to SunSmart

Cancer Council Victoria and the Victorian Health Promotion Foundation fund *SunSmart*, a program to educate Australians about sun protection.

It has since been rolled out to childcare services and primary schools across every state and territory.

1986

Daffodil Day's first bloom

Daffodil Day is introduced in NSW to raise funds for cancer research and patient services.

Today, it is the largest national fundraising event of its kind in the Southern Hemisphere, raising over \$50 million in NSW alone since it began.



1991

Cervical cancer breakthrough

Past president of Cancer Council Australia, Professor Ian Frazer, and Dr Jian Zhou created a world-first human papillomavirus (HPV) vaccine. HPV vaccines are now routinely offered to young girls and boys at school.

1993

Transport assistance to treatment

Transport assistance to treatment service is introduced. Today, Cancer Council NSW helps nearly 6,000 patients and their carers travel over 620,000 kilometres to treatment annually.

Continued...



2001

Relay For Life

Cancer Council NSW hosts its first Relay For Life in Campbelltown.

Today, the event is held across Australia in every state and territory, with more than 134,000 participants raising around \$24 million each year.



2008

(Pro Bono) power to the people

Cancer Council NSW creates the Pro Bono Program, which is rolled out nationally, providing those affected by cancer with access to lawyers, financial planners, accountants and HR professionals.

To date, 441 professionals have helped over 3,223 patients and their families in NSW.



2005

Involving the community in the research funding process

Cancer Council NSW introduced a consumer review panel, where every grant we award is assessed by patients, survivors and carers. Involving the cancer community in every funding decision ensures that we remain responsive to the priorities and needs of the community who fund us.



2006

Closing the gap in Aboriginal cancer mortality rates

Cancer Council NSW created the Aboriginal Patterns of Cancer Care (APOCC) Project, which explores why the cancer death rate for Aboriginal Australians is 60% higher than non-Aboriginal Australians. It also investigated the cancer journeys of Aboriginal people across NSW.

2007

Smoking banned in pubs and clubs

Under the lead of Cancer Council NSW, 45,000 people show their support for smoke-free pubs and clubs under the banner *Go Smoke-Free Coalition*. As a result, the NSW Government bans smoking in enclosed areas of pubs and clubs from July 2007.



2012

Putting tobacco under wraps

In a world-first, Cancer Council NSW's anti-smoking government submissions contribute to the Australian Government's decision that all tobacco products in Australia must be in plain packaging by December 2012.

2009

National bowel screening campaign

Cancer Council NSW launched the national *Get Behind Bowel Screening* campaign and three years later, the Australian Government commits to expanding the program to more age groups.

2014

Cervical cancer modelling underpinning government policy

Major changes to the National Cervical Screening Program in Australia were recommended, underpinned by the work of Professor Karen Canfell, now based at Cancer Council NSW, and her cancer screening team. Their modelling work demonstrated the proposed changes would substantially reduce both cervical cancer rates and the number of screening tests women need to undergo over their lifetime.

2015

Celebrating 60 years together

We have come a long way and we couldn't have done it without our community, so thank you.

Now more than ever, we need your continued support to help achieve a cancer-free world.



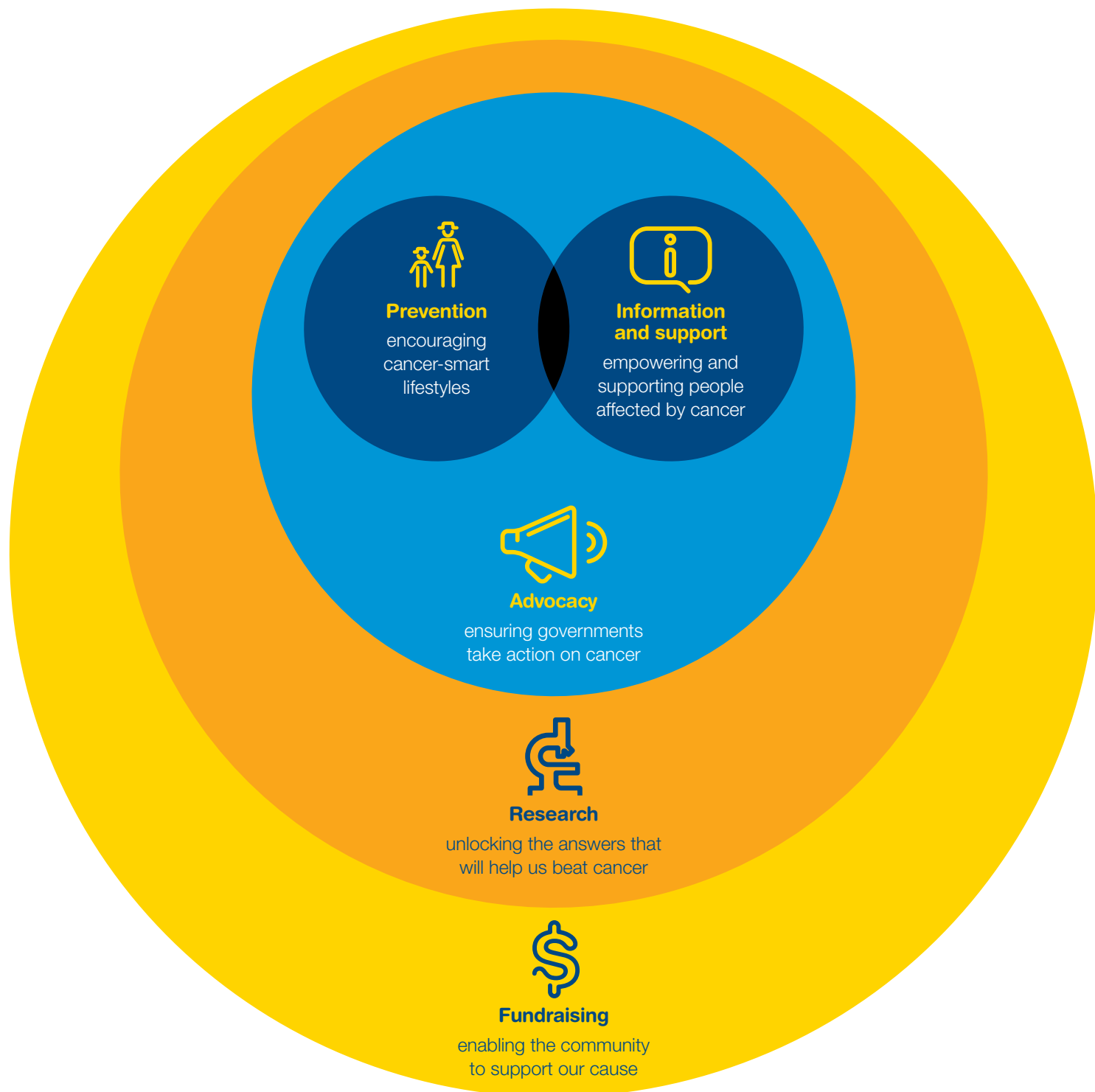
2015



60 years helping beat cancer for future generations

Our strategic priorities

Our five strategic priorities work together to help us achieve our mission of beating cancer.



Find out more about our *Strategic Intent 2014–2018* and strategic priorities online at:
cancercouncil.com.au/about-us



Research priority



**Associate
Professor
Geraldine
O'Neill**
Researcher

“I imagine a future where innovative and collaborative research has revealed successful new treatments for glioblastoma brain tumours.”

Glioblastoma is a type of brain cancer that is very invasive and this makes it very hard to treat. My research aims to improve glioblastoma treatment and make this cancer less deadly by investigating the basic mechanisms of brain cancer cell migration and invasion.

I received great support from Cancer Council NSW as a Career Development Fellow between 2003 and 2008, which helped me establish my independence as a researcher. I am very lucky to have received further funding from Cancer Council NSW, including support to research glioblastoma cell invasion.

Over the past few decades, there has been an explosion of knowledge about cancer, which means that researchers increasingly need to collaborate with each other to keep doing innovative research. For example, my collaboration with Professor Ben Fabry, who specialises in biophysics, ensures that we can look at glioblastoma in a new way, take advantage of advances in other fields and make new discoveries. Despite all the advances in technology, treatment and cross-disciplinary research, there are still so many unanswered questions and there's still so much unknown.

My motivation for doing research has always been twofold. There's the opportunity to improve survival for cancer patients and improve their quality of life. And then there's the intellectual curiosity which drives my research forward day-to-day, to seek answers and advance cancer treatment. There's so much to get excited and enthusiastic about every single day when I'm doing research.

Associate Professor Geraldine O'Neill is a Cancer Council NSW funded researcher, and received \$326,169 in funding over 2012–2014.

Research priority



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

Research is fundamental to unlocking the answers that will help us beat cancer.

Cancer Council NSW is committed to conducting and funding research that enhances outcomes across the entire cancer journey and is of value to the cancer community.

As an evidence-based organisation, research helps us prioritise the areas where we can have the greatest impact and underpins our prevention, information and support, and advocacy programs.

Investing in world-class research

Cancer Council NSW is one of the largest non-government funders of cancer research in Australia. We have funded research since we were first established 60 years ago in 1955, when our seven founding members committed to discovering what causes cancer.

In 2014/15, Cancer Council NSW invested **\$14.9 million to conduct and fund research studies** across all stages of the cancer journey including investigating the causes of cancer; preventing, detecting and treating cancer; and supporting people as they adjust to life after a cancer diagnosis. We fund research across all types of cancer, with over one third of our funding dedicated to research which benefits all cancer types and the remainder invested into investigating particular types of cancer.

In 2014/15, we invested \$14.9 million to conduct and fund research studies across all stages of the cancer journey.

Funding research that has an impact

In 2014/15, Cancer Council NSW committed \$6.8 million to support **19 new external research projects** over the next three years. These projects include diverse areas such as impaired cognitive function or 'chemo brain', why lung cancer is resistant to platinum-based treatments which work well in treating other cancers, investigating ovarian cancer sub-types to develop better, targeted treatment strategies, and drug resistance.

As research into the understanding and treatment of cancer evolves, so too does the disease, and some cancer types are becoming resistant to particular treatments.

Cancer researchers have identified drug resistance as one of today's biggest challenges facing certain cancers, including breast cancer, bowel cancer and melanoma. This year, we funded a total of 16 new and continuing cancer research studies that aim to overcome drug resistance leading to more effective and targeted therapies.

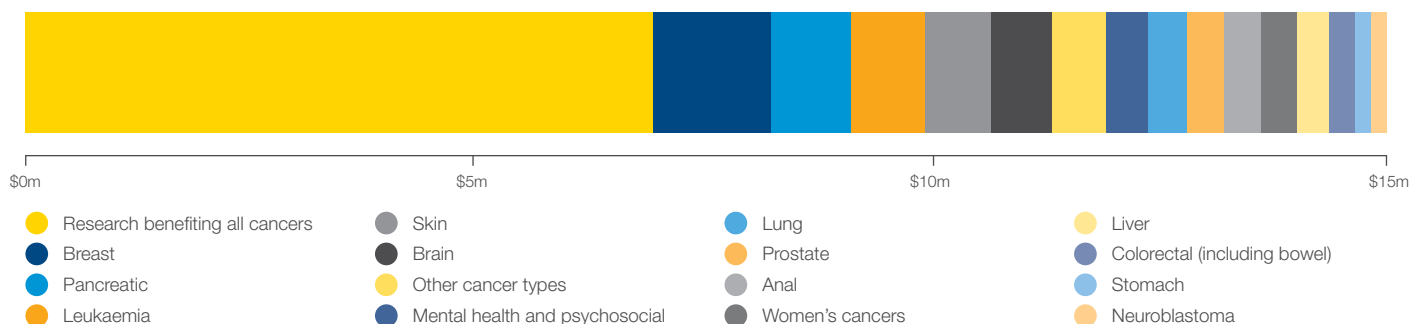
Our research underpins new government policy

Researchers from Cancer Council NSW have contributed to upcoming changes to the National Cervical Cancer Screening Program. These changes, announced by the Australian Government in 2015, include the **introduction of a new test for cervical screening** which detects the human papillomavirus (HPV) that causes cervical cancer. The recommendations for these changes were underpinned by modelling work by researchers now based at Cancer Council NSW, which demonstrated that these changes will substantially reduce both cervical cancer rates and the number of screening tests that women will undergo over their lifetime.

The research has shown that a HPV test every five years can save more lives, and women will need fewer tests than in the current two-yearly Pap test program. This new test for cervical cancer will **prevent an additional 15–22% of cervical cancer cases**, while also reducing the number of invasive checks from 26 to just 10 across a woman's life.

The changes are supported by international evidence on HPV testing for cervical screening and account for the rapid impact of the HPV vaccination program in Australia.

Our research spend by cancer type



The research has shown that a HPV test every five years can save more lives, and women will need fewer tests than in the current two-yearly Pap test program.

Lung cancer rates in women still rising

Lung cancer continues to be the leading cause of cancer death in Australia and is the fifth most commonly diagnosed cancer type. Cancer Council NSW research has revealed that **the number of women living with lung cancer in Australia is expected to surpass that of men** by 2017.

The study, published in *Cancer Epidemiology*, examined lung cancer prevalence in NSW from 1987 to 2007 and found that the number of women living with lung cancer increased significantly over this time (88%), while the number of men living with lung cancer has dropped (15%).

These results reflect smoking behaviours from decades ago, as lung cancer incidence trends closely

follow patterns of smoking, with a general 20–30 year lag between population smoking patterns and subsequent lung cancer diagnoses. Smoking rates in men were seen to drop around the mid-1950s, and as a result there has been a drop in lung cancer incidence amongst men from the early 1980s. However, it was only in the mid-1980s that we started to see a reduction in smoking rates amongst women and the most recent data indicate that the number of women diagnosed with lung cancer in Australia has not yet peaked.

As lung cancer prevalence in women continues to increase – and will soon surpass that of men – we may not see the true impact of these smoking habits for 40 years. These new figures highlight the importance of getting smoking cessation messages through to younger generations if we are to prevent further deaths from lung cancer in the next 20–30 years.

Uncovering disparities in Aboriginal cancer outcomes

Cancer is the second highest cause of death for Aboriginal people, who are also 60% more likely to die from cancer than non-Aboriginal people.



New research from Cancer Council NSW's Aboriginal Patterns of Cancer Care (APOCC) Project investigated disparities in prostate cancer survival and head and neck cancer diagnosis between Aboriginal and non-Aboriginal people.

Prostate cancer is the most commonly diagnosed cancer in NSW Aboriginal men and the third most common cause of cancer death in Australian men. New research from Cancer Council NSW suggests that survival rates after diagnosis are higher for non-Aboriginal men, with Aboriginal men almost 50% more likely to die of prostate cancer. Aboriginal men are also 13% less likely to have surgery within 12 months of being diagnosed than non-Aboriginal men. The study shows that more research is needed on the prostate cancer journeys of Aboriginal men, their access to treatment and rates of surgery to close this survival gap. The findings also highlight an urgent need for health professionals to be better informed and help raise awareness of prostate cancer in Aboriginal communities.

Another research study from the APOCC Project this year found that Aboriginal people diagnosed with

Continued...

Performance

How	Measures	2011	2012	2013	2014	2015	Some outcomes from 2014/15
We forge new discoveries in cancer causes, biology, trends and consequences, through funding world-class research.	New research grants awarded	30	20	21	16	16	Highlight:  Our research team has found that although the number of prostate cancer deaths in Australia is falling, there is still more that can be done.
	Total research grants funded	93	79	71	72	77	
	Epidemiological studies in progress	60	65	70	77	86	
In partnership with government and collaborators, we seek competitive grant funding.	Number of research grants received	8	2	9	5	8	Highlight:  Our investment in research makes Cancer Council NSW one of the largest non-government funders of cancer research in Australia.
	Percentage of successful research grants applied for	32%	29%	50%	24%	80%	
We trial and deploy novel funding strategies and partnerships to unite the best ideas and researchers for the benefit of cancer control.	Total research expenditure (\$m)	16.1	15.0	14.8	14.2	14.9	

head and neck cancers are 240% more likely to have advanced disease compared to non-Aboriginal people. The study also found that Aboriginal people are more likely to be diagnosed with advanced melanoma, breast, cervical and prostate cancers, although unlike for head and neck cancers, the differences were not statistically significant.

The gaps in diagnosis could be closed by targeted health campaigns encouraging regular health checks, routine dental examinations and improved screening rates. However, finding that there are no significant differences in the spread of disease at the time of diagnosis for some types of cancer suggests that many of the difficulties in diagnosing some cancers early applies equally to Aboriginal and non-Aboriginal people.

Investigating breast cancer outcomes for rural women

Cancer Council NSW research revealed that **women living in rural areas of NSW have a higher risk of dying from breast cancer** than women living in the city. According to the research, which examined geographic patterns in breast cancer survival in NSW from 1997 to 2007, the difference in survival rates between urban and rural areas is widening. This risk has increased by more than 30% for women living in rural and remote areas of NSW compared to women living in Sydney.

The study looked at five-year survival rates for over 60,000 women diagnosed with breast cancer, which is the most commonly diagnosed type of cancer in Australian women.

Our research revealed that women living in rural areas of NSW have a higher risk of dying from breast cancer than women living in the city.

Overall, the chance of survival from breast cancer has improved in the past 20 years from 81.5% to almost 90%. However, survival rates were consistently lower for women living in areas of socio-economic disadvantage or geographic remoteness. This inequality, which emerged in the late 1990s, could be due to factors including differences in the disease stage at diagnosis and access to and quality of care received.

One potential reason for this gap may be that rural women are more likely to have limited access to health services and must travel long distances for treatment. Cancer Council NSW has worked to address issues of access by providing transport services to assist rural patients to travel to treatment. We have also assisted with access to low cost accommodation when travelling for treatment.

Looking ahead

In the coming year, we will continue identifying areas of cancer research where Cancer Council NSW can contribute the most significant impact and outcomes for the community.



Read more about our research activities in our **Research Highlights Report 2014/2015**, visit: cancercouncil.com.au/research-highlights-2014-2015



Prevention priority



Davina Owens
SunSmart
kindergarten
administrator

“I imagine a future where damaging skin cancers are dramatically minimised, because children carried the SunSmart message into adulthood.”

I've been 'sun smart' all my life, partly because of my sensitive skin but also because of the risks associated with sun exposure. This is why I'm so keen about making sun protection a priority at our kindergarten. We have almost 30 children, aged between three and five, and as an experienced educator, I know this is the best stage to teach children about sun safety.

At the kindergarten, we follow sun protection rules by checking the UV chart and making sure children apply sunscreen and wear clothes and hats appropriate for outdoor play. We also educate parents by distributing SunSmart newsletters

and communicating regularly via email. Sometimes our approach is different. When children don't bring an appropriate brimmed or legionnaire hat as recommended, we supply the right hat but charge parents a \$1 laundry fee. This reinforces our message that wearing the right gear is important.

As educators, our example is extremely important, so we role-model by wearing SunSmart hats when outdoors and following the 'slip, slop, slap' principles. One of our educators was recently treated for cancer on her scalp and she uses her experience to positively reinforce the importance of sun protection with the children.

Our kindergarten has been with Cancer Council's SunSmart program since 2007, and usually when a routine is running for a long time people can become complacent. But with the SunSmart program, we have a process to review our policies regularly. This way, we can follow best practice, and teach children in our care, responsible ways of staying 'sun-safe'.

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. Research shows that one third of all cancers are related to smoking, overexposure to the sun, obesity, poor nutrition, alcohol consumption and lack of physical activity. By helping people make healthier choices and by creating environments that promote cancer-smart behaviours, we can reduce known cancer risks and lessen the incidence of cancer.

At Cancer Council NSW, we focus on three key areas of prevention: tobacco control, skin protection and nutrition/healthy weight. We also know that more needs to be done to ensure people think about how much alcohol they drink and the effect this may have on their health now and in the future.

Confusion about cancer risks

One third of cancers are preventable, yet our research shows that more awareness and **action is needed for people to understand cancer risk factors**. In a survey of over 3,000 people in NSW, we found respondents were able to recite well-known risk factors for cancer such as smoking, sunburn and family history, but they were still confused about what causes cancer. Respondents listed factors such as chemicals in foods (43%), pollution (32%) and stress (26%) as cancer causes, for which there is generally not a strong evidence link.

One third of cancers are preventable, yet our research shows that more awareness and action is needed for people to understand cancer risk factors.

The research highlights that if we are to reduce preventable cancers, greater awareness and action is needed to get Australians correctly identifying what is a significant risk factor over common misconceptions or myths. More awareness and education is needed to highlight the risks associated with alcohol consumption, being overweight, eating processed meats and lack of exercise. If we are to reduce cancer rates linked to these behaviours, we need the community

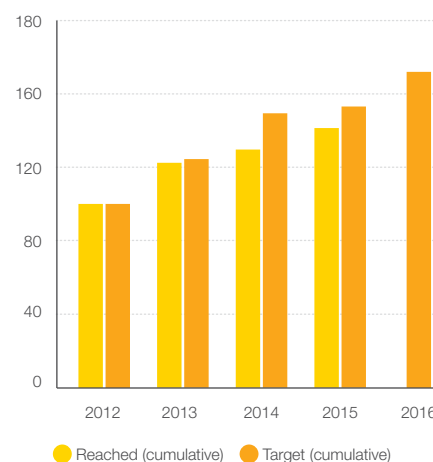
to take the harms associated with alcohol and obesity as seriously as they do with the risks around tobacco and UV exposure. We will be repeating this survey next year to see if people's knowledge of, and attitudes towards, cancer risks have changed.

Tobacco control

While smoking rates are at their lowest at 16%, down from 24% in 1997, tobacco use still remains an issue for certain disadvantaged communities including the Aboriginal community and people with a mental illness or drug and alcohol dependencies. As well as addressing this inequity, we also need to identify emerging tobacco-related issues, and address the new ways that Big Tobacco and the industry are finding to keep people hooked on nicotine and tobacco-related products – particularly those that may appeal to young people.

Our **Tackling Tobacco program seeks to reduce smoking-related harm in disadvantaged groups** by working with community service organisations and helping them to support their clients to quit smoking. This year, we have worked with 11 community services, increasing their capacity to address smoking within their organisations and make smoking care part of their 'usual care'. We have also begun implementing the **Tackling Nicotine Together** research project, which is investigating the effectiveness of an organisational change intervention for smoking cessation support at drug and alcohol treatment centres. In partnership with the University of Newcastle, this research is being conducted in 32 treatment centres nationally, including 16 services located across NSW.

Number of social and community service organisations reached through Tackling Tobacco



Smoke-free apartments

While smoke-free policies and regulations relating to indoor workplaces and public areas are widespread in Australia, there are few **restrictions on smoking in apartment buildings**. Most people want to live in a smoke-free environment, with over 90% of people in NSW having made their own residences smoke-free, yet residents of apartment buildings are more likely to be unwillingly exposed to second-hand smoke.

Adopting a smoke-free by-law is the most effective way for apartment complexes to address the growing concern about second-hand smoke exposure. Cancer Council NSW conducted an audit of 1,308 strata scheme by-laws in 2014/15 to determine the extent to which strata complexes in NSW have adopted smoke-free by-laws, and to assess whether adoption of

smoke-free by-laws is associated with demographic factors. Only 5% of the strata plans audited included a smoke-free by-law, however there appears to have been a growing trend to introduce these by-laws since 2010. These findings, along with other research we are conducting in this area, help provide evidence that more needs to be done. We continue to advocate for stronger legislation so people who choose to live in a smoke-free home can actually do so.

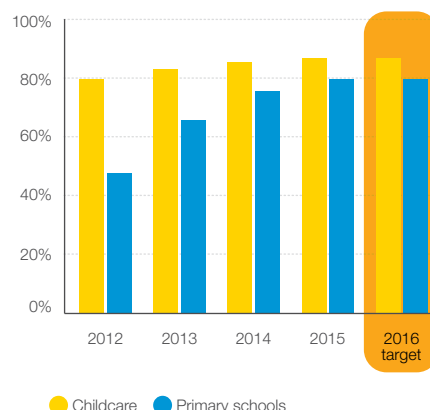
Preventing skin cancer in NSW

Skin cancer prevention remains an important priority for Cancer Council NSW, with two out of three Australians predicted to develop some form of skin cancer in their lifetime. We continue to focus on delivering skin cancer prevention programs and campaigns to **reduce the incidence and mortality of skin cancer** in priority populations such as children, young people and men aged over 40.

Our **SunSmart Program** supports childcare services and primary schools to develop, implement and review best practice sun protection policies to minimise children's overexposure to ultraviolet (UV) radiation. Reducing children's exposure to UV radiation, particularly in the first 15 years of life, significantly reduces their risk of skin

cancer later in life. We are pleased that over 86% of childcare services and 80% of primary schools in NSW are members of the SunSmart Program.

Growth in SunSmart centres



Our focus this year for childcare services was to support them in educating children about being sun-safe. We worked with key childcare stakeholders to develop a resource to teach children the importance of protecting themselves from the sun. Rolled out to almost 600 SunSmart childcare services, the Weather & UV Chart is a fun and interactive resource that facilitates children's sun-safe learning activities and is linked to the Early Years Learning Framework for Australia.

Cancer Council NSW also began an 18-month study reviewing the behaviour and practices of SunSmart primary schools. The research highlighted that for some schools the concept of perceived 'triggers' such as reminders, sports days or excursions can encourage stronger sun protection behaviours. We are evaluating this research and will be piloting a new support intervention in the coming year before rolling it out across NSW.

Over 86% of childcare services and 80% of primary schools in NSW are members of the SunSmart Program.

In 2014/15, in partnership with local councils, our **Sun Sound campaign** was implemented at almost 90 pools and beaches across NSW. It uses a five second jingle played every hour to remind younger people to protect their skin. The campaign targets young people, a high priority group who spend more time in the sun, get sunburnt more frequently and use less sun protection compared to the rest of the community. Our latest research shows the campaign is working as teenagers are more likely to protect their skin when exposed to the Sun Sound. However, it also identified that when visiting pools or beaches, 39% of teenagers did not take sunscreen with them and therefore, were unprepared when they heard the Sun Sound.

Continued...

Performance

How	Measures	2011	2012	2013	2014	2015	Some outcomes from 2014/15
We facilitate cancer-smart policies and practices in organisations and settings.	Newly accredited SunSmart centres	931	671	868	572	275	Highlight: ↑ We reached our three year goal of 80% of NSW primary schools now being SunSmart.
We support individuals to adopt cancer preventative behaviours, including increased fruit and vegetable consumption.	Number of new parents participating in the Eat It To Beat It program	1,285	1,573	3,443	8,912	13,227	Highlight: ↑ The continuing rollout of Eat It To Beat It engaged 13,227 parents, influencing an increased consumption of cancer-preventing fruits and vegetables.
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.	Number of new projects with social and community service organisations reached through Tackling Tobacco	47	20	22	10	11	Highlight: ↑ We have now implemented Tackling Tobacco in 142 community service organisations. A comparative case study of two projects highlighted the positive impact of the program.

This year our focus was on encouraging parents to 'prepare' their teenagers to be sun-safe when visiting Sun Sound pools during summer. We adopted a multi-component approach, including in-store advertising in Coles and a social media campaign.

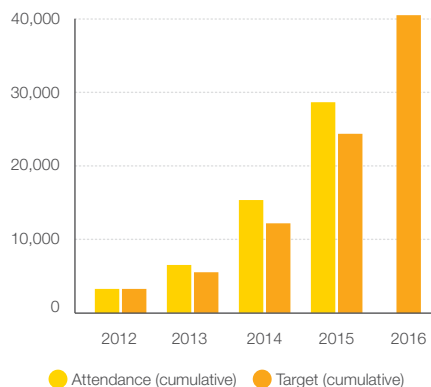
Men aged 40 and above have been identified as another priority group for skin cancer prevention due to increased melanoma incidence and mortality rates compared to women of a similar age. Research found male recreational golfers commonly spend extended periods outdoors in peak UV times, do not practice sun protection consistently and are frequently sunburnt. This year, in partnership with Cancer Institute NSW, we implemented a skin cancer prevention campaign called *Improve your long game*, which targets male golfers aged 46-64. Piloted in 12 golf clubs on the Mid-North Coast of NSW, 59% of golfers reported that exposure to the campaign made them do more to protect themselves from the sun when on the golf course.

Preventing cancer through a healthy lifestyle

Eating the right amount of fruit and vegetables is one of the most important things people can do to reduce their cancer risk. Our **Eat It To Beat It program helps parents to better understand why fruit and vegetables are so important** and equips them with practical ways to help the whole family eat more healthily. This year, we delivered 574 sessions in primary schools across NSW and reached 13,227 parents.

We partnered with The University of Sydney to undertake an **evaluation of our Healthy Lunch Box session** in 54 schools in Greater Western Sydney and the Hunter and Central Coast regions. Nearly 400 parents completed the evaluation, reporting increased confidence in their ability to pack a healthy lunch box their child would eat and a greater understanding of the benefits of fruit and vegetable consumption. We will be assessing the longer term retention of parent's understanding and behaviours early next year.

Number of parents who have attended Eat It To Beat It sessions



Food labelling, helping people make healthy choices

Cancer Council NSW was involved in the development of the Commonwealth Health Star Rating food labelling scheme introduced this year and which has since been adopted voluntarily by many large food manufacturers.

We continue to **investigate the use of health claims on food labels** to ensure that these marketing claims are not used by manufacturers to promote unhealthy foods. We are leading a collaborative process with our Cancer Council colleagues in other states to raise questionable claims on food labels with the relevant government enforcement agencies. This process has seen a number of unsubstantiated claims investigated by enforcement agencies, resulting in a sports drink product being removed from the market and a second product removing claims from its website. Our research, published in *Public Health Nutrition*, found many products making health claims related to fruit and vegetable content in fact contained high levels of sugar and/or sodium and were not considered to be healthy.

Alcohol and cancer

Our focus on the **link between alcohol and cancer** has increased this year, with research published by Cancer Council NSW in partnership with Monash University, revealing

53% of people are unaware that consuming alcohol is a risk factor for cancer. We know that drinking alcohol increases the risk of developing some cancers, particularly cancers of the mouth, throat, oesophagus, bowel, liver and breast. It is also estimated that 3% of cancer cases can be attributed to long-term drinking. This research highlights the need to raise awareness around alcohol and cancer risk and encourage people to consider the amount of alcohol they consume.

We also undertook qualitative research with GPs, investigating their approach to discussing alcohol and chronic disease with their patients. Based on this research, we have developed a strategy to raise awareness among GPs about the link between alcohol and cancer. We are leading an initiative on behalf of Cancer Council Australia and the other state Cancer Councils to support GPs to have these discussions with their patients.

Looking ahead

We have identified sporting organisations as a setting where we can promote healthy environments. Next year, we will be working with sporting clubs, starting with cricket clubs, to introduce the **Healthy Sports Club Program**.



To find out more about cancer prevention, visit:
cancercouncil.com.au/cancer-prevention



Information and support priority



Suzy Musarra
Cancer Connect
volunteer

“I imagine myself on the other side; having been through a cancer journey, I’m able to offer the kind of support that’s needed the most.”

I was diagnosed with breast cancer 13 years ago and, at 32, I didn’t have a clue about cancer. At the time I had a one year old daughter and a four year old son. The greatest challenge would be the logistics of having cancer treatment and taking care of a young family.

I was referred to Cancer Council’s Cancer Connect service through a health professional following my initial surgery. The peer support volunteer who phoned me, had recovered from a similar cancer experience and was 10 years post treatment. Her call made an immediate and significant difference.

She was able to offer plenty of practical tips, but more importantly, speaking with her provided me with much needed encouragement and a strong sense of hope.

Eighteen months following my treatment, I trained with the Cancer Connect program to become a peer support volunteer myself. I’ve now volunteered for over 10 years and have provided support to more than 140 women.

As Connect volunteers, we are closely matched to those we support by cancer and treatment types, age and family situations. However, it’s interesting that everyone has a different

story to tell. I’ve spoken with women from regional and outback areas who are isolated from the healthcare access we take for granted. I’ve also spoken with women who are still pregnant when they’re faced with a cancer diagnosis. Every person is different.

The great thing about the Cancer Connect program is that it’s so easy to help as a volunteer by just listening. Having already walked the cancer diagnosis and treatment path, we can offer unique understanding and support to others facing the journey ahead.

Information and support priority



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

Cancer can affect every area of people's lives. As cancer treatments improve, an ever-increasing number of people are living longer after a cancer diagnosis and adjusting to life after cancer. Cancer Council NSW provides information, and emotional and practical support for people affected by cancer.

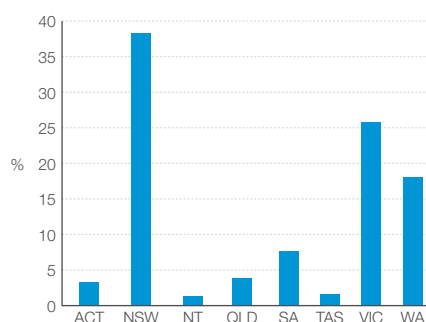
We provide up-to-date, evidence-based information for people who have questions about any aspect of cancer. Our emotional and practical support services assist with financial, legal and treatment support and advice. They also offer opportunities for people affected by cancer to talk to cancer professionals or connect with people who have had similar experiences.

Practical support for people affected by cancer

Cancer Council NSW provides a range of practical support programs to help people experiencing a cancer diagnosis. One such service, our **Pro Bono Program**, sees Cancer Council NSW engage with professionals in the community who provide free legal, financial planning, small business accounting and workplace advice to people affected by cancer. Assisting with a range of issues, such as wills, legal disputes, superannuation, budgeting or return to work strategies, the Program helps reduce stress and financial burden and provides clients with practical help and understanding of the options available to them. It assists those people who have the greatest needs, whether due to distance to treatment, cancer status, or socio-economic status.

The Pro Bono Program provided more than \$2.2 million worth of assistance this year to the 1,009 clients referred to it, with the three key areas of assistance being financial hardship matters, estate planning and workplace issues. Cancer Council NSW also manages the operation and delivery of the Program nationally, through partnerships with Cancer Councils in every state and territory. Nationally, there were 2,627 clients referred to the Program and \$5.8 million worth of assistance provided in 2014/15.

Pro Bono Program clients by state or territory



Access to reliable cancer information

To enable people affected by cancer to access **reliable and easy-to-understand cancer information**, Cancer Council NSW provides resources in a range of formats, ensuring individuals are able to access and engage with the information in a way that is most convenient for them. The availability of the resources through multiple channels ensures the widest possible access for people affected by cancer of all ages, socio-economic backgrounds, geographic locations and stages of illness. The **Understanding Cancer series** includes printed booklets and fact sheets, online information, CDs and DVDs. Eleven booklets are now also available as ebooks, enabling people to download and read them anywhere in privacy on their personal iPads, Kindles and other ereaders.

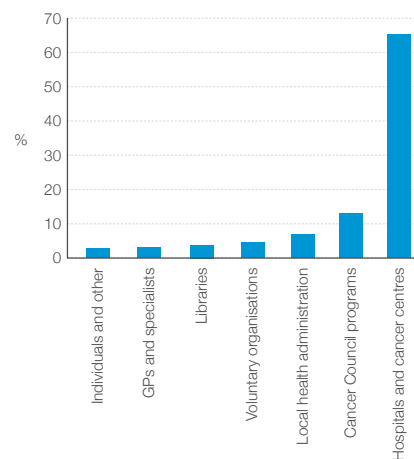
We currently provide over 70 clinically reviewed information resources, including 52 printed booklets in the *Understanding Cancer* series. The majority of these are national resources. In 2014/15, we added three titles to our information resources, the

Understanding Pleural Mesothelioma booklet and ebook, and two new online resources, *Understanding Primary Bone Cancer* and *Exercises after surgery: A guide for people who have had breast cancer surgery*.

In 2014/15, we distributed 238,014 resources, the majority of which were provided to patients and carers through hospitals and treatment centres.

Additionally our website remains a significant information portal, with all the content of our publications available on cancercouncil.com.au.

Understanding Cancer information resources distributed



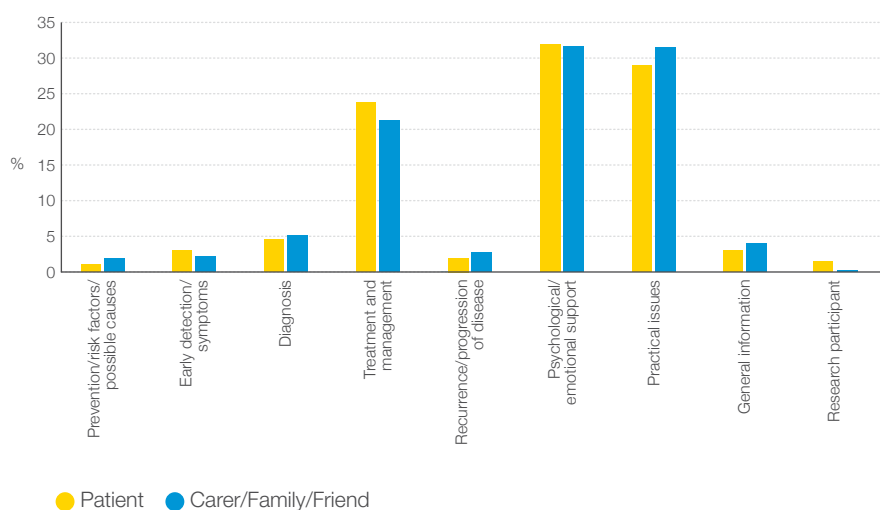
Calling Cancer Council NSW for information and support

Our specialist cancer professionals continued to provide information and support to people affected by cancer, their family and friends, and members of the NSW community through **Cancer Council's 13 11 20 Information and Support** service.

In 2014/15, we received 17,323 calls to 13 11 20, of which 12,232 were for Cancer Council Information and Support services. We also launched an online chat service in February 2015 to better meet the needs of our community and help us ensure people can access information and support when they need it.

Our 13 11 20 service is also vital in delivering specialised services and this year we partnered with radio station 2GB on a bowel cancer awareness campaign targeting people aged over 50. The campaign resulted in 1,156 calls to 13 11 20 about bowel cancer – an 18% increase on previous years. As a result, we have worked with the Cancer Institute NSW to develop a strategy to promote the importance of bowel screening in the coming year.

Why patients and carers call Cancer Council 13 11 20 Information and Support



Continued...

Performance

How	Measures	2011	2012	2013	2014	2015	Some outcomes from 2014/15
We increase the number and reach of information and support services for people with cancer and their families.	Calls and emails to 13 11 20 Information and Support	16,812	16,846	18,339	15,763	12,232	Highlight/Challenge: ↑↓ Fewer people are calling 13 11 20 for Information and Support yet the number of <i>Understanding Cancer</i> publications being downloaded from our website continues to increase, up by 27%.
	Cancer Council resources distributed	244,000	276,947	239,961	241,825	238,014	
	<i>Understanding Cancer</i> booklets and ebooks downloaded				11,731	14,942	
	Cancer Council Connect – number of referrals matched	516	445	480	378	374	
We provide increasing help with the high cost of cancer.	Financial assistance grants to cancer patients and carers	1,573	1,904	1,937	1,794	1,831	Highlight: ↑ 1,831 cancer patients and their families received emergency financial assistance this year. Partnerships with utility providers contributed an additional \$91,681 towards the program meaning more assistance could be provided at no additional cost to Cancer Council NSW.
	Financial assistance grants \$	381,909	418,463	444,551	441,853	486,083	
We broker and elicit pro bono contributions from organisations and businesses with expertise and capacity to lend support to cancer patients and carers.	Number of patients/carers assisted by our Pro Bono Programs across Australia	1,007	1,568	2,542	2,488	2,627	Highlight: ↑ Our pro bono legal and financial planning programs connected patients and carers with professionals for help with 2,627 issues in 2014/15. Cancer Council NSW is taking the lead on a National ProBono Program.
We improve access to treatment via the provision or support of patient transport services.	Number of patients/carers assisted by our patient transport programs			5,487	4,985	7,093	
We improve access to treatment via the provision or support of patient accommodation services.	Patient accommodation nights supported by Cancer Council NSW	19,674	12,401	16,633	18,700	19,246	

Cancer Connect peer support

For people affected by cancer, talking to someone who has been through a similar experience can be helpful, reassuring and encouraging. Cancer Council NSW's **Cancer Connect Program** addresses this need by providing emotional support through matched connections with a trained volunteer who has had similar experiences. The program aims to support people to navigate their cancer journey, reduce their levels of distress, increase their coping strategies, help them feel less isolated and provide them with practical advice. Cancer Connect peer support is delivered over the telephone, which makes it easier for people of all ages, physical conditions, socio-economic backgrounds and geographical locations to access emotional support.

Cancer Council NSW has been providing peer support since 1984 and for the last 10 years, the Cancer Connect program has provided peer support for all cancer types. There are currently 400 peer support volunteers throughout NSW providing one-on-one support to 374 patients and survivors. Over the next year, Cancer Council NSW aims to expand this program to carers; lesbian, gay and bisexual communities; and culturally and linguistically diverse communities.

Life after cancer – support for survivors

As cancer treatments improve and cancer survival rates increase, there is **an increasing number of people adjusting to life after cancer**.

Cancer Council NSW offers a range of programs and services to address the unmet needs of cancer survivors.

Healthy eating and physical activity can enhance quality of life for cancer survivors and protect them from cancer recurrence. Cancer Council NSW's **ENRICH Program** is an interactive and informative exercise and nutrition program for cancer

survivors and their carers, encouraging and motivating participants to move towards and maintain a healthy lifestyle. The program is presented in a group format co-facilitated by an exercise specialist and dietitian, and is open to survivors of all cancer types. It is delivered across a number of NSW locations, ensuring that it is accessible for a range of people affected by cancer. In 2014/15, ENRICH reached 260 participants through 18 programs across NSW, double the number of people reached in the previous year.

Adult cancer survivors often face common survivorship issues, such as dealing with the fear, anxiety and sadness of cancer survivorship and dealing with changes to self-identity and relationships. Our **webinar series** aims to provide the adult community of cancer survivors, carers, family and friends with information, support and strategies for dealing with life after cancer treatment. Addressing the needs of the young adult survivor community through webinars is also interactive, cost-effective and facilitates program reach in regional and remote communities.

Cancer Council NSW offers a range of programs and services to address the unmet needs of cancer survivors.

In 2014/15, we ran eight webinars engaging 1,799 participants across a range of topics such as sex and sexuality after cancer; getting back to feeling normal after cancer treatment; and issues for the lesbian, gay, bisexual, transgender and intersex community affected by cancer. Since we commenced delivering webinars in April 2014, they have been received very positively by the community, who find them informative and useful in providing practical advice. Future plans for webinars include addressing issues such as cognitive function, lifestyle changes to enhance survivorship and specific men's issues.

This year, in partnership with The University of Sydney, we launched a world-first online study – **Rekindle** – which aims to assist cancer survivors and their partners to improve their sexual wellbeing. Over 40% of all cancer survivors experience negative sexual changes after treatment, with this percentage dramatically rising to over 90% in survivors treated for certain cancer types, including prostate, ovarian and cervical cancers. This can lead to psychological and emotional distress for not only survivors, but also their partners, which impacts their long-term quality of life.

Rekindle helps to address these issues by providing participants with a wide range of tools, activities and practical advice, and includes real stories from cancer survivors, carers and health professionals. It is designed for people affected by any type of cancer and includes 12 versions tailored to gender, relationship status and sexual orientation. During 2014/15, 166 people registered for the Rekindle study.

Looking ahead

We are committed to ensuring the community has access to a wide range of supportive care services, and expanding our services available online. We also plan to review our programs for cancer survivors so that they can be supported after their active cancer treatment is finished.



For cancer information and support, call: Cancer Council 13 11 20 Information and Support



Advocacy priority



Robert Salt
Aboriginal
cancer
advocate

“I imagine a world where there is equality for health services; where Aboriginal staff will be valued for their cultural knowledge, empathy and skills in cancer care.”

I was born in Brewarrina, in Northern NSW, with English and French ancestry on my father's side and Muwarri, Kunja and Wirrajurri on my mother's. Cancer was an unexpected event in my life, but interestingly, I was in contact with Cancer Council NSW even before I knew cancer would come to affect my family.

Cancer is an issue in my community, but like many others, I didn't know much about it or how to help. In 2013, I attended a Cancer Council Yarn Up to learn more.

Later that year, my mother was diagnosed with pancreatic cancer and passed away soon afterwards. This was a difficult time for my family and our community. After my mother's cancer experience, I realised we needed more Aboriginal people working in cancer care who are strong in their Aboriginality. People who could provide relevant advice and culturally appropriate support. This issue became important to me personally and I wanted to do something about it.

I had the opportunity to present at Cancer Council's conference as part

of the Saving Life 2015: Change Starts Here campaign and I trained to be a cancer advocate. Through these sessions, I have connected with people passionate about the same issues and now I'm more informed about cancer and its impact.

As an Aboriginal cancer advocate, I'm supporting Cancer Council to engage with my community and increase our presence in cancer services. We need to improve the cancer experience for Aboriginal people and Cancer Council NSW is in a good place to make this happen.

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 do not reflect what available evidence tells us about cancer prevention and access to care and treatment. Cancer Council NSW mobilises the power of the community to influence governments to take action on cancer.

The community helps us drive change and improve cancer care for the NSW community, by advocating with us to achieve significant improvements in legislation, public policy and funding.

Mobilising the community

Our **CanAct Community** is made up of over **18,600 passionate supporters who believe that together we can beat cancer.**

Together we campaign for improvements in the treatment and care of people with cancer and public health initiatives to help prevent cancer.

Saving Life 2015: Change Starts Here

Organising and mobilising our community is an effective way to influence government action on cancer-related issues. In the lead-up

to the NSW State Election, Cancer Council NSW launched the **Saving Life 2015: Change Starts Here** campaign, which outlined five of the most important things the next State Government could do to help beat cancer. Our CanAct Community helped us to select the priorities:

- reducing the availability of tobacco
- abolishing the fee gap on chemotherapy co-payments
- ensuring coordinated cancer care for patients
- funding more palliative care services
- increasing the Aboriginal workforce in cancer services.

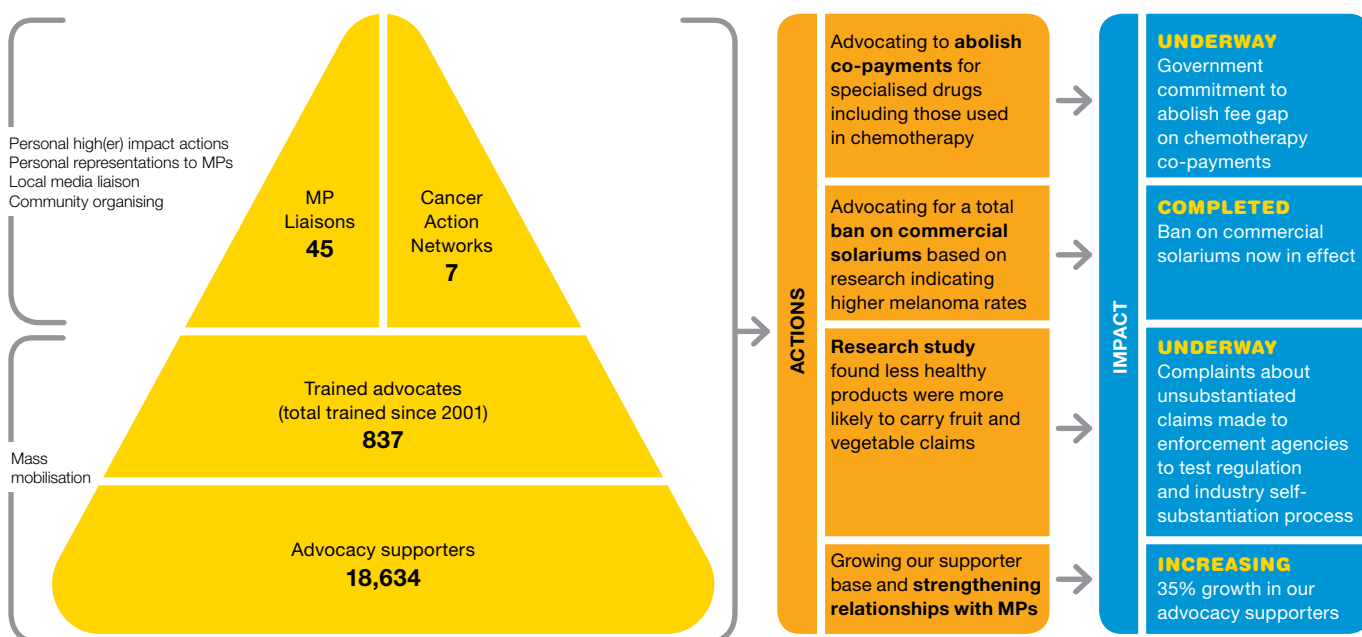
For seven months, Cancer Council NSW, together with community supporters and leaders, campaigned to ensure that those who were standing for election knew about these

five key issues. We achieved positive progress on three of the five issues, but the big win was the commitment the Liberal, Labor and Greens political parties made to abolish co-payments for specialised drugs, including those used in chemotherapy.

Making chemotherapy co-payments history has happened because our community spoke up and got these issues on the agenda.

This will make a real difference to people's lives and will lessen the burden of cancer for those facing it now, and those who may do so in the future. It is a decision which highlights the difference we can make by working with the community. Our CanAct Community placed chemotherapy co-payments – along with our four other key issues – front and centre for election candidates

CanAct – our advocacy supporter structure – leading to change



across the state. Throughout our Saving Life 2015 campaign, CanAct members held more than 135 meetings with MPs and candidates, reaching nearly 75% of the 93 state electorates across NSW. This ensured election candidates knew what action we wanted them to take on these important issues.

The NSW Government has announced the chemotherapy co-payment will be removed in the first quarter of 2015/16, removing a known burden for many people facing cancer.

Making chemotherapy co-payments history has happened because our community spoke up and got these issues on the agenda.

Food labelling

Unhealthy food choices can lead to obesity, a growing problem in NSW and across Australia that increases an individual's risk for a number of cancers. This is why we believe in helping people make informed choices about what they eat through improved food labelling.

This year, a **voluntary Health Star Rating food labelling scheme** was introduced by the Commonwealth Government to help shoppers quickly and easily identify healthier food choices. Cancer Council NSW, with assistance from our CanAct

Community, was influential in contributing to this outcome, with our consumer research on front-of-pack labelling used to inform the development of the new Health Star Rating scheme. While our preference remains for a compulsory scheme, we are satisfied with the Commonwealth Government's indication that a mandatory approach will be considered if voluntary industry uptake of the scheme is not widespread within two years.

We also continued investigating food labelling, with our latest research revealing that Australian food companies are misleading consumers about the amount of fruit and vegetable content they are consuming in processed foods and drinks. Almost half (48%) of the packaged fruit and vegetable-based products surveyed by Cancer Council NSW made fruit and vegetable claims on their packaging, despite some having as little as 13% content. Our study also found that less healthy products were actually more likely to carry fruit and vegetable claims than healthier products. As a result, Cancer Council NSW called on the government to strengthen the Food Standards Code, as it does not currently regulate fruit and vegetable claims on food labels.

Unhealthy food choices can lead to obesity, a growing problem in NSW and across Australia that increases an individual's risk for a number of cancers.

Solarium ban

On 31 December 2014, **a ban on commercial solariums** came into effect, making it illegal for any business or individual in NSW to offer UV tanning services for a fee. Cancer Council NSW advocated hard for this total ban on commercial solariums, as each year in Australia, over 40 melanoma-related deaths and 2,500 new squamous cell carcinomas are attributed to solarium use. Research shows that people who use solariums before the age of 35 have a 59% higher risk of melanoma than those who do not and the risk of squamous cell carcinoma is twice that of non-users, regardless of age.

Cancer Council NSW advocated hard for this total ban on commercial solariums.

NSW was the first state in Australia to announce such a ban, and as a result, commercial solariums are now banned in all states and territories across Australia except Western Australia, where the ban will be implemented at the end of 2015.

Our National Sun Protection Survey published this year, showed that the majority of adults in NSW (76%) supported the ban on solariums and less than 1% had used a solarium in the previous 12 months. The rollout of this ban is a positive step in helping reduce the skin cancer risk of the NSW population.

Continued...

Performance

How	Measures	2011	2012	2013	2014	2015	Some outcomes from 2014/15
We develop and deploy ways to engage, equip and mobilise people in achieving social change aligned to our mission.	Total Cancer Council advocates trained in NSW	566	617	702	787	837	Highlight: ↑ Our election campaign Saving Life 2015: Change Starts Here saw the State Government commit to abolishing chemotherapy co-payments from early next year. Positive progress was also achieved in relation to palliative care and increasing the Aboriginal cancer workforce.
	Cancer Council advocacy supporters in NSW	3,672	8,000	10,600	13,745	18,634	
We enhance understanding and support among policy makers for changes required to reduce the incidence and impact of cancer.	Number of trained volunteers joining our MP Liaison Program	13	15	33	48	15	

Curbing e-cigarette usage

This year, the use of **electronic cigarettes (e-cigarettes)** quickly emerged as an important issue in tobacco usage with these products becoming more readily available and their use increasing. As of July 2014, there was no legislation addressing e-cigarettes. Cancer Council NSW is concerned that unregulated sale, use and promotion of e-cigarettes could re-normalise smoking within the community, mislead consumers about their safety and effectiveness as a quit smoking aid, and lead to tobacco use and nicotine addiction by tempting non-smokers, such as children.

To address these gaps, Cancer Council NSW joined forces with the National Heart Foundation to advocate for changes to legislation around the sale of e-cigarettes, their use in smoke-free environments and advertising and promotion of these products.

Cancer Council NSW research found that most NSW tobacco retailers (82%) observed selling e-cigarettes had promotional displays featuring fruit and confectionery flavours, a tactic previously used to market cigarettes to children. A NSW community survey also found strong public support (73%) for regulating e-cigarettes in a similar way to tobacco products.

Thanks to our research and advocacy with Members of Parliament, we were able to inform and influence the political debate on more comprehensively regulating e-cigarettes in a similar way to tobacco.

In May 2015, a Bill was introduced to amend the *Public Health (Tobacco) Act* to ban sales of e-cigarettes to minors. Thanks to our research and advocacy with Members of Parliament, we were able to inform and influence the political debate on more comprehensively regulating e-cigarettes in a similar way to tobacco. As a result, further amendments to the original Bill were passed, including restricting sales via vending machines, banning advertising and promotions including in-store displays and sponsorship, and use in cars with minors. Our advocacy efforts helped extend the legislation beyond the original limited regulations banning sales to minors.

Going forward, Cancer Council NSW is keen to see smoke-free area provisions extended to e-cigarettes.

Improving transport for isolated cancer patients

As part of our continued work in ensuring people can access timely, quality health care regardless of where they live, Cancer Council NSW recognises that more needs to be done to help patients in the country with the burden of travel for treatment.

In February 2015, we welcomed the NSW Government's pre-election promise to improve reimbursement rates for the Isolated Patient and Accommodation Assistance Scheme (IPTAAS), which will help reduce the financial burden for patients who face high costs for accommodation or petrol when travelling long distances for treatment. We know from our work with cancer patients, their families and carers, that increasing the accommodation and transport subsidies will help to reduce the additional costs that rural and regional cancer patients face when receiving vital treatment.

Looking ahead

We know that despite all the progress we have made, there is always more to be done if we are to beat cancer. Our work to increase the Aboriginal workforce in cancer services continues, as does our focus on reducing the retail availability of tobacco. We are also in the process of determining what other issues may need more attention over the coming years.



To find out more about the CanAct Community and Cancer Council NSW's ongoing advocacy campaigns, visit:
CanAct.com.au



Fundraising priority



Luca Turrini
Fundraiser

“I imagine a future where no-one develops a cancer preventable by lifestyle choices.”

I lost my mother to cancer in 2011, which was the catalyst for my change of attitude towards cancer and my lifestyle choices. Throughout my mother's battle, I had used running as my way to deal with what was happening and get my thoughts together. Then I decided to use this passion to make my contribution to research and advocate for prevention.

I have run several marathons, ultra marathons and completed a few unusual running challenges around the world, to test myself and inspire others. I founded Outrun Cancer,

a non-profit organisation which uses running to raise awareness and funds for cancer prevention. With events such as our Outrun Cancer Corporate Treadmill Marathon, we take the prevention message around Australia. We are currently funding one of Cancer Council NSW's research projects which looks at the relationship between body mass index, physical activity, diet and cancer risk. I am extremely happy and feel privileged to be able to support Cancer Council NSW.

Research is fundamental for understanding what causes cancer and how we can prevent it and beat it. Turning research into practical and shareable knowledge also empowers people and helps support those affected.

Research, prevention and advocacy are the stones thrown in the water that creates a wave of change. However far our finish line may be from beating cancer, we will get there, one step at a time.

Fundraising priority



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

Being 97% community funded, Cancer Council NSW relies on the generosity of our supporters who want to help beat cancer. We are grateful to the 272,914 community supporters who generously donated to us in 2014/15. This contribution helps 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.

We achieved a strong fundraising result this year, raising \$67.4 million, a 13% increase on the previous year. This is thanks to the continuing support from the community who donate to our diverse range of fundraising streams.

Our cost of fundraising decreased by 4% this year to 33%. This reflects the cost of running a multichannel fundraising program across diverse income streams, which harnesses the collective support of more than 27,000 volunteers and community supporters who get behind our cause and connect with our mission to beat cancer. We continuously monitor our fundraising costs to maximise funds directed to beating cancer.

As well as raising vital funds, our fundraising activities are key strategies for engaging our communities, allowing us to increase understanding about our work and ensure everyone has access to cancer information, support and care.

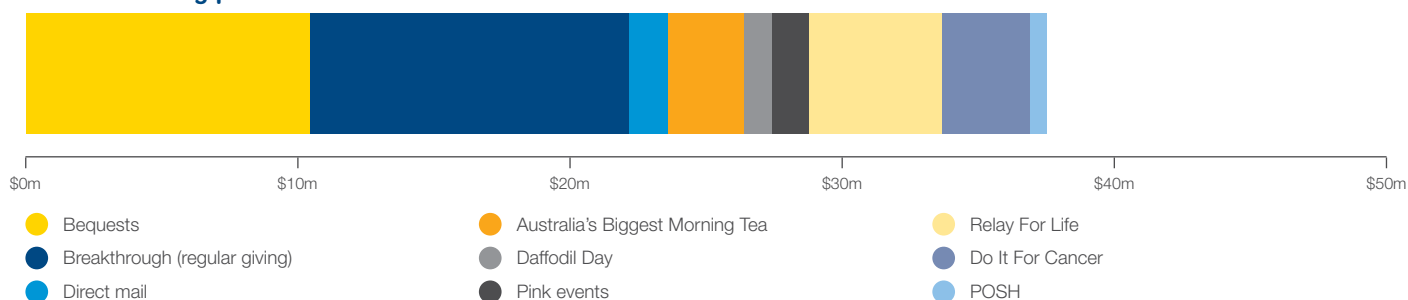
Thank you to our individual supporters

There are a number of different ways that individuals can support Cancer Council NSW, such as making a one-off gift, joining our regular giving program, contributing through workplace giving programs, or leaving a gift in their will.

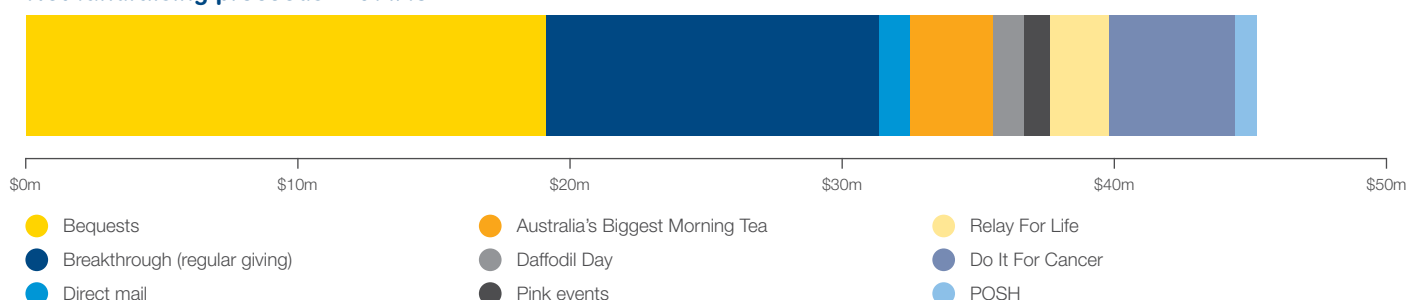
In 2014/15, individual supporters contributed \$48 million to Cancer Council NSW through these giving programs. This year, we had 11,488 people join as regular donors through our face-to-face fundraising program, **Breakthrough**. This continues to be our biggest fundraising program with 42,293 regular donors, who generated \$15.9 million, or 34% of our fundraising income in 2014/15 (excluding bequests).

This year, 121 people left Cancer Council NSW a **bequest**, with \$20.7 million of generous gifts left in wills. This amount is the highest ever bequeathed to us and is the result of a long-term supporter engagement strategy.

Net fundraising proceeds* 2013/14



Net fundraising proceeds* 2014/15



* Funds raised after deducting fundraising costs

Connecting with the community through our events

Cancer Council NSW continues to have the **largest event fundraising portfolio in the Southern Hemisphere**, raising \$24.2 million this year. Our events allow individuals and communities to connect 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 20,000 event hosts, volunteers and supporters.

This year, over 8,000 people hosted an **Australia's Biggest Morning Tea** event in their homes, offices, businesses and communities, raising \$4.8 million. This is a 4% increase on 2013/14. We also refreshed the campaign (which is in its 22nd year), with a new TV commercial as part of a strategy to reinvigorate the campaign, increase participants and tap into new audiences. This was a huge success, with a 42% increase in new hosts bringing in almost 50% of the total income. Income from new corporate supporters was up 34%.

These results demonstrate there is still an appetite for Australia's Biggest Morning Tea and our focus for 2015/16 will be to continue the

acquisition drive and have a strong retention strategy in place to bring back the hosts who were new to this year's campaign.

Daffodil Day is our longest running event and is held in August each year. In 2014/15, 3,093 people volunteered at 592 locations in communities across NSW. In its 29th year, the campaign raised \$3.1 million, a slight increase of 3% on 2013/14.

We engage more than 150,000 people in our events each year, including more than 20,000 event hosts, volunteers and supporters.

Our **Relay For Life** events were held in 53 local communities across NSW this year, bringing together 36,200 participants. More than a fundraising event, Relay For Life is an opportunity for local communities to come together to remember loved ones, celebrate survivors and support each other. This year, a total of \$5.6 million was raised, a 32% decrease on the previous year. The decline is due to a range of factors which we will continue to investigate and develop solutions. In the coming year, we will look to reinvigorate what has become a key event for engaging with local communities. In 2014/15, we rolled

out our online platform, which will undergo continuous improvements at a national level over the next two years. Relay For Life remains an effective channel for Cancer Council NSW to inform local communities about advocacy opportunities, the research we fund and our prevention and support programs.

Pink Ribbon events raise awareness and funds for breast and gynaecological cancers in and around October, which is Breast Cancer Awareness Month. Supporters can participate by holding a Pink Ribbon Fundraiser event or Girls' Night In, volunteering on Pink Ribbon Day or ordering merchandise to sell within their community or workplace. In 2014/15, our Pink Ribbon events raised over \$2.7 million, a 15% decrease on 2013/14. As a result, next year we are focusing on Girls' Night In as the main event driver to bring in new hosts and boost income.

This year, our community fundraising portfolio, **Do It For Cancer**, raised \$4.3 million. More than 850 community fundraisers supported Cancer Council NSW by raising money in their own way, such as cooking for cancer, taking part in a race, shaving their head, or hosting a workplace event. **Stars of Cancer Council** has really evolved over

Continued...

Performance

How	Measures	2011	2012	2013	2014	2015	Some outcomes from 2014/15
For efficiency, we monitor our fundraising portfolio to ensure profitability and continuous improvements in an ever-increasing competitive market.	Cost:income ratio	32%	31%	37%	37%	33%	Highlight: ↑ A focus on reducing our fundraising cost:income ratio paid off with many events and appeals reducing costs.
	Fundraising income/ fundraising staff FTE*	\$751,000	\$809,000	\$774,000	\$818,548	\$820,492	
	Average \$ per Relay For Life event	\$100,789	\$132,845	\$140,776	\$146,357	\$105,830	
We facilitate mass participation events and appeals across NSW that engage the community in our mission to beat cancer.	Number of event hosts and supporters	24,200	28,300	28,000	24,500	20,500	Challenge: ↓ Relay For Life is down 32%, however we are continuing to investigate and develop solutions.
	Number of Relay For Life events	67	58	58	56	53	
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)	52.9	58.5	59.6	59.8	67.4	

*FTE: Full-time equivalent

the past five years and has been a standout Do It For Cancer event, raising over \$709,000 in 2014/15, a 90% increase on the previous year.

Sh*tbox Rally is our largest beneficiary fundraiser, with 450 people raising money for Cancer Council NSW by driving their clapped-out cars from Canberra to Townsville. Now under the umbrella of 'Box Rallies', this year's event raised \$1.84 million for Cancer Council NSW, a 2% increase on 2013/14. Next year, the event is expanding to include a new rally in New Zealand, taking the event to a broader audience. Sh*tbox Rally crews have now raised over \$6.2 million since the founder, James Freeman, began the event in honour of his parents in 2010.

Another one of our high-profile beneficiary events is the **Seven Bridges Walk**, which we deliver in partnership with the Pedestrian Council of Australia. In 2014/15, over 8,000 people took to the course, walking up to 26.2 kilometres across seven bridges (including the Sydney Harbour Bridge, ANZAC Bridge and Gladesville Bridge) in one day – raising \$629,000, a 6% increase on 2013/14.

This year, 780 people attended Cancer Council NSW's **POSH Gala Ball**, raising \$1.2 million. Over the past 16 years, the event has raised \$9 million for cancer research, advocacy, prevention and patient support services.

Our retail stores

Our eight retail stores are located in major shopping centres across NSW and sell sun protection products, such as sunglasses, hats and sunscreen. This year, our retail revenue was \$7.3 million, which is down 7% on 2013/14.

The profits we make from our retail sales go towards melanoma research. Over the past 10 years, our stores have raised over \$8.7 million in profits by selling and distributing sun protection products to the community.

This year we have developed a new, modern look for our retail stores, which will be unveiled at our Bondi Westfield and Chatswood Chase stores prior to Christmas 2015. We have also designed a new apparel collection, which will be introduced to the stores next year, offering customers a fashion-forward look and range of choices for the new summer season.

The profits we make from our retail sales go towards melanoma research. Over the past 10 years, our stores have raised over \$8.7 million in profits by selling and distributing sun protection products to the community.

Collaborating with Can Too

This year, Cancer Council NSW formed a new partnership with The Can Too Foundation, a health promotion organisation. This collaboration sees two like-minded charities working together to achieve common goals of beating cancer through increasing physical activity, and reducing the impact of the disease.

Together, we are developing new fundraising programs in the health and fitness space, engaging members of the community to take part in fitness events to encourage a healthy lifestyle and raise funds that will go towards cancer research.

Looking ahead

Fundraising is key to delivering our research, prevention, and information and support programs, and ensuring that we understand our supporters and offering them a diverse range of ways to support our cause is vital. We will continue to grow our existing flagship events, while fostering current opportunities and identifying new income streams. Digital innovation will remain a focus, with continued planning to improve online-giving opportunities and support community engagement through a variety of online communities including social media.



To find out more about our fundraising events and how you can get involved, visit:
cancercouncil.com.au/get-involved

How you can help beat cancer



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 at one of our information centres, or perhaps you would like to help out at a fundraising event.

Find out more about opportunities for you or your organisation to volunteer with us by emailing volunteervacancies@nswcc.org.au or calling **13 11 20**.

Join a Relay For Life

Relay For Life is a global movement where communities come together in an overnight journey to take on the fight against cancer. Survivors are honoured, carers are applauded and supporters raise funds to help those affected by the disease. By standing in solidarity with others in the community we can all make a difference. Find your nearest Relay and join the fight at relayforlife.org.au

Call Cancer Council 13 11 20 Information and Support

For information about any aspect of cancer, call our Cancer Council 13 11 20 Information and Support service. For the cost of a local call, you can talk confidentially with one of our experienced cancer professionals, who can provide you with the information and support you may need about 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 20,000 people hosted or organised a fundraising event or activity for us this year. Our events are some of the most popular and well recognised in Australia – Daffodil Day, Australia's Biggest Morning Tea and Pink Ribbon events to name just a few.

To find out when and how you can get involved, visit: cancer council.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: cancer council.com.au/donate

Visit us online

For all cancer related information, to get informed, get support or get involved, visit: cancer council.com.au

Online communities

Join us on social media – Facebook, Twitter, Instagram and more. Share your story, join the conversation, see what we are up to and the difference we are making thanks to your help. See the impact your donation makes, find out how you can take part in our events or become a volunteer, locate screening programs or support services and groups in your community and learn about our prevention programs – our online communities cover it all. Visit cancer council.com.au/social

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

Cancer Council NSW is a community-focused organisation, which is 97% community funded. We work in and with communities across the state to help beat cancer. Our vision can only be realised by harnessing the support and power of our community to achieve better outcomes and drive positive and lasting change at the grassroots level.

Our network of 16 offices across NSW, enables us to work within every metropolitan, regional, rural and remote community. This ensures that our services and programs are tailored to their needs.

Cancer Council NSW staff work alongside committed volunteers and supporters in all 152 local government areas across NSW. This gives us a greater understanding of the unique needs of these communities and helps us to identify the opportunities and challenges we face in ensuring everyone has access to cancer information, support and care when they need it.

Community consultation

Understanding community needs is important to us and consulting with communities helps us to decide which programs and services to deliver and where. It allows us to gather important information about what the community view as priorities and whether our work is meeting these needs.

Consulting with communities helps us to decide which programs and services to deliver and where.

This year, **8,288 people participated in our consultation survey**, helping to ensure that we continue to deliver locally relevant programs and services to all communities across NSW through tailored community plans. There was consensus across respondents that Cancer Council NSW delivers prevention, awareness, information and patient support services well.

Assisting patients to access cancer information, support and care are key priorities for Cancer Council NSW. In 2014/15, we provided transport services across 19 locations and home help services across 10 locations,

supporting 7,859 people across NSW. These services are free and delivered in a variety of ways depending on community need. Our transport and home help programs are made possible through the dedicated support of our community-based volunteers.

The highest perceived needs identified by survey respondents related to the provision of practical support services (including transport, home help and accommodation).

Helping patients with access to treatment

This year, we undertook a review of the patient accommodation landscape across NSW, which revealed an ongoing need for patients to be able to access affordable accommodation facilities when they need to travel to their cancer treatment. Our review also revealed a need for these facilities to provide a consistent level of service delivery, including holistic practical and emotional support options tailored to the needs of cancer patients.

As a result, we have developed a new strategy for our approach to patient accommodation which will ensure that all patients travelling for treatment are not only able to access affordable accommodation facilities during their cancer treatment, but that these facilities act as a key engagement point for patients and carers, providing access to comprehensive cancer programs, information and support services.

Cancer Council NSW is currently involved in the provision of patient accommodation at 11 facilities across NSW through a range of funding and partnership models. In the coming year, we will continue to expand our support in this area, including the development of tailored approaches for both metropolitan Sydney and regional, rural and remote NSW.

Engaging with culturally and linguistically diverse communities

Cancer affects people of all backgrounds and Cancer Council NSW is committed to engaging with culturally and linguistically diverse (CALD) communities across the state. With more than 30% of people living in NSW speaking a language other than English at home, language remains a barrier to accessing cancer information and services.



30% of people speak a language other than English at home.

This year, in partnership with the University of Wollongong, we have started developing a model to support our engagement with CALD communities and will focus on improving our program delivery and impact within these communities.

Through this work, we are identifying best-practice, culturally appropriate engagement strategies that will support Cancer Council NSW staff to deliver programs that meet community needs and engage with priority CALD communities. We are developing a CALD Engagement Framework, which will be trialled in day-to-day planning and activities.

We also modified our Eat It To Beat It program this year to better reach CALD communities and help parents learn about simple ways to eat more fruit and vegetables. We piloted our interactive Healthy Lunch Box sessions

for **Arabic speaking communities** in Greater Western Sydney as part of our partnership with the Western Sydney and Nepean Blue Mountains Local Health Districts. We trained five bilingual volunteer program facilitators, who delivered five sessions reaching 38 Arabic speaking parents, and will continue working with these communities in 2015/16.

As part of our Fruit and Veg Made Easy strategy, we have modified our Healthy Lunch Box session and resources to better help us reach other **disadvantaged and lower literacy groups**. We will continue to trial this strategy next year.

We are identifying best-practice culturally appropriate engagement strategies.

Our work in Aboriginal communities

Cancer is the second most common cause of death for Aboriginal people and we are working to reduce the higher rates of cancer by raising awareness and increasing cancer support services for Aboriginal communities.

We use our research through the Aboriginal Patterns of Cancer Care (APOCC) project (see page 13) to inform the development of programs and resources tailored for Aboriginal communities. The research shows that Aboriginal people may be reluctant to undergo cancer treatment due to fear and confusion surrounding the disease, alongside practical barriers related to transport and cost. It also highlighted a need for culturally appropriate information for Aboriginal communities. To address this need, **we launched a web portal for Aboriginal people**, their carers and health professionals to access information and resources to help navigate and support their cancer journey. This important resource, developed in consultation with the Aboriginal community, aims to target the gaps in cancer care for Aboriginal people, including the barriers that

prevent access to appropriate and timely cancer care.

The portal also includes video stories from Aboriginal researchers, cancer survivors, carers and health care workers. Although there is still much work to do to close the gap, the portal will help improve access to information and resources to help break down barriers.

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**.

We do this by connecting with the community through targeted newsletters including *Volunteer Voice* and *Research Update*, and a number of community-based newsletters.

We also engage with our community through online communications that assist people to get informed, get support or get involved. Social media, such as Twitter and Facebook, provides up-to-date information and an opportunity to engage with us. In 2014/15, our Facebook page grew 47%, increasing to 31,880 fans, while our Twitter presence increased by 18% to 16,644 followers.

Our website (cancercouncil.com.au) is one of the community's central points of contact with Cancer Council NSW, with 1,547,959 visits to the site this year, which is a 1.2% increase on the previous year.

The media is also key to our communications with coverage of our research, our cancer programs and our fundraising events being vital to spreading the word about our work and getting people involved in our fundraising.

We are also committed to **transparency of our annual reporting** and were pleased to receive a number of prestigious Australasian Reporting Awards again this year. Our *Annual Report 2013/14* was awarded

a Silver Award for Distinguished Achievement in Reporting and the 2015 Online Reporting Award in the Not-for-Profit Sector. We were also named as a finalist in the Communication Award for the Not-for-Profit Sector.



NRL Kick Bowel Cancer campaign

This year, Cancer Council NSW teamed up with the National Rugby League (NRL), The Gut Foundation and Bowel Cancer Australia to launch the new 'NRL Kick Bowel Cancer' campaign.

Each year, 15,000 new cases of bowel cancer are detected and 4,000 people die from the disease, making it Australia's second biggest cancer killer. But it is also one of the most curable cancers if found early, so early detection can save lives.

The campaign, which commenced during the 2014 NRL season and continues in the 2015 season, encouraged Australian men and women to go online and take a bowel cancer survey with the aim of raising awareness, reducing stigma and urging people to take action that will help prevent the disease. Commercials featured across Channel 9, Foxtel and social media, together with activity during the finals series urging people to visit nrlickbowelcancer.com.au to take a bowel cancer survey. To date, nearly 9,000 people have visited the NRL website and taken the test.

Our people

Our staff and volunteers are our greatest assets and we value their commitment, their passion and their contribution to the cancer cause. We are proud of our positive workplace culture, and we invest in our people by fostering innovation, recognising performance and offering professional development opportunities so that we can attract and retain the best workforce.

Our strong, highly committed and diverse teams work together to beat cancer. In 2014/15, we had 345 permanent and contract staff and 27,154 community members, including 2,308 registered volunteers, who generously donated their time to work alongside our staff performing specific roles.

Highly engaged workforce

In order to understand what motivates our staff and volunteers, and identify areas of improvement in HR and management practices, **we undertake regular engagement surveys**. In May this year, we undertook both an employee engagement survey and a volunteer engagement survey. Led by Cancer Council NSW, the surveys were undertaken in collaboration with five other state and territory Cancer Councils, which allowed for national benchmarking of the results and provided significant cost-savings for survey design and analysis.

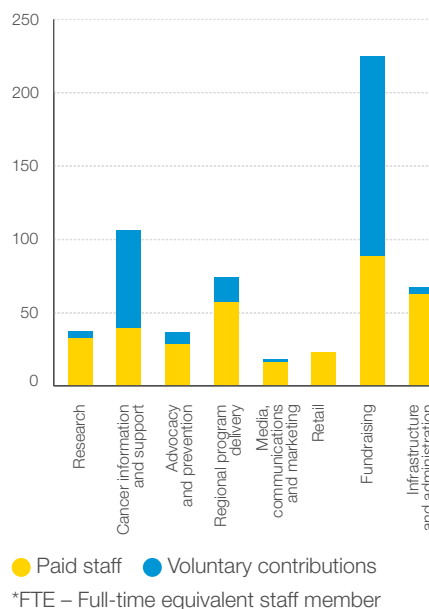
Our employee engagement score for 2015 was 79%, and while there is not a direct comparison to the previous year's results due to changes in the survey methodology, our engagement is in line with the Cancer Council national average and 5% above the not-for-profit benchmark. Our key areas of strength are the belief in the mission, values and work done by Cancer Council NSW, teamwork and good work relationships and safety.

From the survey, we determined three high priority areas for improvement: change and innovation, career opportunities and cross-divisional cooperation. Further work will be undertaken with teams to understand and address these priority areas, with workforce planning already underway to support efforts to address the area of career opportunities.

Workforce planning

Throughout 2014/15, Cancer Council NSW undertook **workforce planning** to provide sustainability, risk management and a link between our strategy and the people initiatives needed to achieve our objectives.

Paid staff and voluntary contributions (FTEs*)



We undertook a rigorous assessment of the internal and external environment, capability and capacity forecasting, and identification of critical roles. The approach looks to provide more structured and targeted investment in workforce development and focuses on talent retention, ensuring that we have the appropriate workforce capability and capacity to deliver our strategy.

Performance planning and development

Our **Performance Planning and Development System** ensures that we align team and individual objectives to Cancer Council NSW's priorities, while also encouraging behaviours that

are consistent with our organisational values of innovation, responsibility, courage and collaboration.

In 2014/15, 100% of eligible permanent staff and those on maximum-term contracts developed a performance plan and undertook a review process, which is linked to annual reward and recognition.

This year, a new moderation process was introduced to the performance review cycle to improve consistency and transparency. A more open review process builds consistency and accountability, and facilitates robust discussion, ensuring performance ratings are an accurate reflection of organisational, divisional and individual performance.

The CEO's performance is reviewed by the Board's Remuneration and Nomination Committee (see page 43).

Developing our staff

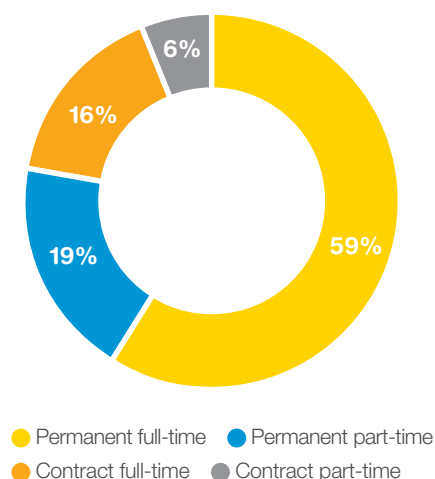
To support the development of our employees, in 2014/15 we rolled out a new **Behavioural Framework**, which identifies the core behaviours that our people need to thrive and be successful at Cancer Council NSW.

The Framework was developed with executive directors, managers and team members across the organisation to ensure that our behaviours are aligned to our future direction, our *Strategic Intent* and our organisational values. It is also embedded in all performance and development plans, and makes up the behavioural component against which staff are assessed across the annual performance cycle.

We also have a commitment to ensuring our staff have the skills and knowledge they need in their current roles, 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.

Staff by employment type



Rewarding our people

In 2014/15, we expanded our reward strategy. Recognising that reward encompasses more than just remuneration, we rolled out a new **Employee Benefits Package**, which offers a range of expanded benefits to help staff maximise their income, reduce expenses and develop their career. These include benefits related to reducing cancer risk (such as reduced-price gym memberships, private health insurance discounts and the availability of free fresh fruit in all our offices), and leave benefits in addition to statutory entitlements.

We also extended relevant benefits to our volunteers, such as a discount in our retail stores and access to our Employee Assistance Program and discounted private health insurance. We are committed to continuing to grow this benefits package for our volunteers and staff.

Work, health and safety

In 2014/15, membership of our Work, Health and Safety (WHS) Committee was re-focused to be representative of common work groups and risk areas. This change has streamlined the way the committee consults with workers and engages with management, and ensures all high-risk work areas are represented at quarterly WHS meetings.

Due to the complexity of staging mass participation, overnight and outdoor events in public places, Relay For Life has been identified as a safety risk. As such, all 25 Relays held in Autumn 2015 were the subject of detailed risk assessments completed by a staff member, in consultation with their volunteer organising committee.

This year, we built a **performance dashboard** to capture key WHS data. This enables us to measure our performance in this area, focusing on indicators such as future safety performance and continuous improvement to prevent injuries and illness.

We are proud of our employee engagement survey results, showing 93% of staff believe their managers and colleagues prioritise and engage in good health and safety practices and are aware of their responsibilities.

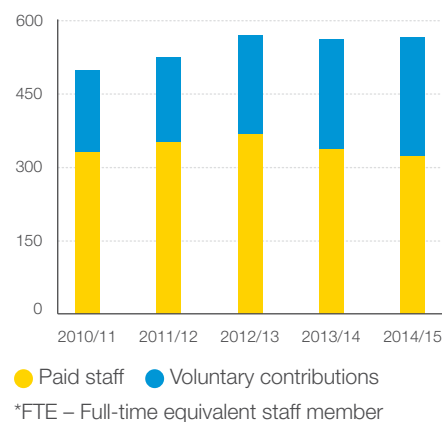
Improving staff engagement with reporting of WHS hazards will be an area of focus in 2015/16 to ensure we maintain our good safety record.

Valuing our volunteers

Cancer Council NSW has relied on the support of volunteers since 1984, and we would like to thank every one of the 27,154 community supporters who provided us with the equivalent of **242 full-time employees** this year, increasing our workforce by 70%.

Volunteers work across every area of the organisation – from delivering the programs and services, to supporting community engagement, fundraising and operational areas such as human resources and finance.

Trends over five years (FTEs*)

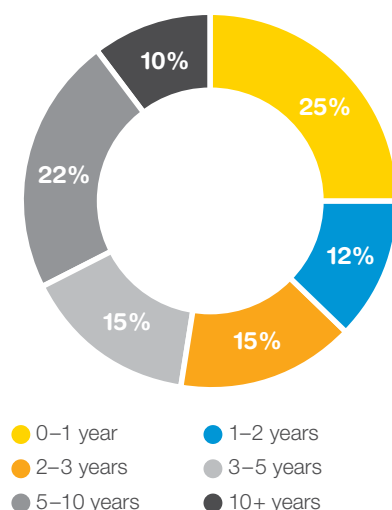


This year, in consultation with our staff and volunteers, we developed a three-year volunteer strategy. Our consultation reinforced that Cancer Council NSW is a demonstrated leader in volunteering, and our staff and volunteers are dedicated to working together to achieve our mission. Further, the consultation highlighted that there is significant potential to expand the scope of volunteering, including developing strategic relationships and partnerships with corporate organisations and becoming involved in peak body decision-making. Opportunities also exist to streamline and improve recruitment, training, recognition and volunteer management to maximise the volunteer experience.

Our volunteer engagement score from this year's volunteer engagement survey is 88%, which is also in line with the other Cancer Councils and the not-for-profit benchmark, with volunteers believing in our mission and our work, and being proud to tell people they work for us. The areas of improvement include learning and development, greater involvement of volunteers in decision-making, and change management, all of which are addressed in our Volunteer Strategic Plan.

Continued...

Staff by tenure



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 2014/15 reporting period were:

- 83% of total overall employees are female, which is significantly higher than the national average of 51%
- The male-to-female ratio of the Executive team is 22:78. Other management groups include Senior Managers (38:62 ratio) and other Managers (20:80 ratio).

Doing the right thing

This year, we extended the rollout of a series of eLearning modules, 'Doing the right thing', with a further four compliance-based online learning modules: 'Purchasing', 'Privacy', 'Fraud Awareness' and 'Charitable Fundraising'. These are in addition to modules on 'Workplace Health and Safety (WHS)', 'Equal Employment Opportunities' and 'Bullying and Harassment'. The modules have had a high compliance rate of 95% of staff completing the training.

Compliance training will now be rolled out to volunteers, with the first eLearning module for volunteers designed and ready for launch in 2015/16.

eLearning Module	Completion %
Bullying and Harassment	98%
Workplace Health and Safety	97%
Equal Employment Opportunities	97%
Purchasing	94%
Privacy	96%
Fraud Awareness	94%
Charitable Fundraising	91%

Performance

How	Measures	2011	2012	2013	2014	2015	Some outcomes from 2014/15
We engage volunteers in a wide variety of roles, extending our mission and reach in the community.	Volunteer contributions (hours captured)	279,843	294,109	348,298	374,975	407,507	Highlight: ↑ An increasing number of volunteer hours contributed to our organisation, including in areas where their particular skills have a significant impact on the community and people with cancer.
We ensure volunteers have opportunities to use their diverse skills and capabilities.	Number of volunteers and community supporters contributing during the year	37,153	36,312	38,156	32,681	27,154	
We have an engaged and highly skilled paid workforce.	Number of staff, headcount (excluding casuals)	352	374	358	355	345	Highlight: ↑ Our employee engagement survey showed that 79% of our staff are engaged.
We provide learning opportunities to increase and extend the capabilities of our people, so that they are equipped to deliver our mission.	Learning and development spend as percentage of staff costs	1%	1%	0.8%	0.8%	0.8%	Highlight: ↑ A new Behavioural Framework ensures our people can thrive and be successful.

Our Board



Mr Bruce Hodgkinson SC

Chair of the Board, Chair of the Governance Committee, Acting Chair 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 James Butler

Elected to the Board in December 2014

Mr Butler has been an active volunteer for Cancer Council NSW for over 17 years, including roles as Chair of the Hills Relay For Life Committee, a trained Cancer Council NSW advocate and Chair of the Western Sydney Cancer Advocacy Network. As a two-time cancer survivor, he understands the need to influence decision-makers around key issues that affect cancer patients.

Mr Butler is currently Chair of Cancer Council NSW's Consumer Review Panel for research and the Hills Community Cancer Network. Outside of Cancer Council NSW, Mr Butler is an active consumer representative on cancer services committees in the Western Sydney Local Health District and has owned a business for 25 years.



Ms Mary Chiew

Member of the Remuneration and Nomination Committee

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

Consultant

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.



Clinical Associate Professor Lisa Horvath MBBS, FRACP, PhD

Board Director Representative Cancer Research Committee

Appointed to the Board in April 2015

Clinical Associate Professor Horvath is the Director of Medical Oncology and Acting Director of Research at the Chris O'Brien Lifehouse. She completed medical school at The University of Sydney and trained in medical oncology at Royal Prince Alfred Hospital, where she was appointed to the senior staff in 2003. She completed her PhD in translational research at the Garvan Institute of Medical Research in 2004.

A/Prof Horvath's research interest is predominantly in the field of prostate cancer biomarkers and

therapeutics. She is involved in a large number of clinical trials in prostate and colorectal cancers as well as Phase I trials and holds academic appointments at both The University of Sydney and the University of New South Wales, and is the Head of Prostate Cancer Therapeutics at The Kinghorn Cancer Centre/Garvan Institute of Medical Research. She has also published more than 60 research papers in peer-reviewed journals in the past 15 years.



Dr John Laker AO, BEc(Hons 1) (Syd), MSc(Econ) PhD (London), Hon DSc (Syd)

Member of the Governance Committee

Elected to the Board in December 2014

Dr Laker was Chairman of the Australian Prudential Regulation Authority (APRA), the regulator of the Australian financial services industry from 2003 to 2014. An economist by training, Dr Laker had an extensive career in the Reserve Bank of Australia prior to his appointment to APRA, holding senior positions in the economic, international and financial stability areas, both in Australia and London. He has also worked in the Commonwealth Treasury and the International Monetary Fund.

Currently, Dr Laker is a member of the Council of the University of Technology Sydney and the External Advisory Panel of the Australian Securities and Investments Commission (ASIC). He also lectures at The University of Sydney. Dr Laker was made an Officer of the Order of Australia in 2008 and has won other professional awards for his services to the regulation of the Australian financial system.



Associate Professor Joe McGirr MBBS, MHSM, FRACMA

Elected to the Board in December 2014

Associate Professor McGirr is Associate Dean Rural of The University of Notre Dame Australia School of Medicine, Sydney. He has worked in clinical medicine and senior health administration in south west rural and regional NSW for more than 25 years. He originally practised clinically as a specialist in emergency medicine before making a career in health administration, becoming Chief Executive Officer of the Greater

Murray Area Health Service and then Director of Clinical Operations for the Greater Southern Area Health Service. He is a fellow of the Australasian College for Emergency Medicine and the Royal Australasian College of Medical Administrators. He has been a member of the Western Regional Advisory Committee of Cancer Council NSW since 2011.



Mr Jeff Mitchell MBA, FAICD

Member of the Audit and Finance Committee

Appointed to the Board in April 2015

Mr Mitchell has over 35 years' experience in the financial services industry and was most recently a member of the Group Executive team at Westpac with responsibility for strategy implementation. He was Managing Director of Corporate & Institutional Banking at Westpac and has held senior executive roles across the breadth of institutional banking at

National Australia Bank that include General Manager Global Markets, General Manager Asia and General Manager UK & Europe.

Mr Mitchell is currently involved in business advisory, leadership coaching, mentoring and non-executive directorships.



Mr Mark Phillips BCom(Hons), MCom, FAICD

Deputy Chair of the Board, Member of the Audit and Finance Committee, Chair of the Investment 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

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.



Ms Melanie Trethowan MB(Mktg)

Member of the Audit and Finance Committee

Elected to the Board in December 2008, re-elected December 2011 and December 2014

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 a graduate of the Australian Rural Leadership Program, Australian Institute of Company Directors and is a Vincent Fairfax Fellow. Since 1996, she has operated a marketing and project consultancy business based in Mudgee.

Company Secretary

Ms Angela Aston, JP, CSA(Cert)
(until December 2014)

Ms Louisa Fitz-Gerald
(from December 2014)

Directors' benefit

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

Meeting of Directors/Committees:

	Full meetings of Directors		Audit and Finance Committee		Investment Committee		Governance Committee		Remuneration and Nomination Committee		Cancer Research Committee	
	A	B	A	B	A	B	A	B	A	B	A	B
S Ackland¹	2	3	*	*	*	*	*	*	*	*	3	5
M Back¹	1	2	*	*	*	*	0	2	*	*	*	*
J Boehm¹	2	3	2	2	*	*	2	2	*	*	*	*
J Butler²	2	2	*	*	*	*	*	*	*	*	*	*
M Chiew	5	5	*	*	*	*	*	*	4	4	*	*
B Hodgkinson	5	5	*	*	*	*	4	4	3	4	*	*
L Horvath³	0	0	*	*	*	*	*	*	*	*	1	1
P Lahiff⁴	4	4	*	*	5	5	*	*	3	3	*	*
J Laker^{2,5}	2	2	*	*	*	*	2	2	*	*	*	*
J McGirr²	2	2	*	*	*	*	*	*	*	*	*	*
J Mitchell^{3,6}	0	0	2	3	*	*	*	*	*	*	*	*
M Phillips^{7,8}	5	5	5	5	1	1	*	*	*	*	*	*
S Roberts	5	5	5	5	*	*	*	*	*	*	*	*
J Stubbs¹	0	3	*	*	*	*	*	*	*	*	*	*
M Trethowan	5	5	4	5	*	*	*	*	*	*	*	*

1 Retired December 2014

2 Elected December 2014

3 Appointed April 2015

4 Resigned April 2015

5 Appointed to Governance Committee February 2015

6 Appointed to Audit and Finance Committee October 2014

7 Appointed Deputy Chair February 2015

8 Appointed Chair of Investment Committee April 2015

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 past 25 years, Jim has held a number of executive leadership roles across a diverse range of industries, including finance, entertainment and sport.

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 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 roles in 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.



Adjunct Professor Karen Canfell

Director, Cancer Research

As Director of the Cancer Research Division, Karen Canfell is responsible for ensuring Cancer Council NSW conducts and funds world-class research that reduces the impact of cancer.

Karen is internationally known as an expert on cancer prevention, especially in relation to HPV vaccination and cervical screening. Her current research includes evaluating new strategies for testing for prostate cancer, bowel cancer screening, screening in people with a genetic

condition called Lynch Syndrome, lung cancer screening and breast screening.

Karen holds a D.Phil. (PhD equivalent) from the University of Oxford and is an Adjunct Professor, Sydney Medical School at The University of Sydney. She chairs Cancer Council Australia's Cancer Screening and Immunisation Committee and is also a member of the Government's Medical Services Advisory Committee's Protocol Advisory Sub-Committee.



Branko Ceran

Chief Information Officer

Branko Ceran leads our Information Technology team and brings a strategic approach to his role. He is responsible for ensuring we maximise our technology investments. With over 25 years' experience optimising and transforming organisations, Branko joined Cancer Council NSW in July 2014 from the not-for-profit MTC

Australia, where he led an ambitious technology transformation. Nominated in 2014 as one of the top 100 CIOs globally, Branko previously worked as an independent consultant for several of Australia's largest financial service organisations including NAB, Westpac and Commonwealth Bank of Australia.



Kathy Chapman

Director, Cancer Programs

Kathy Chapman has a Bachelor of Science and Masters in Nutrition and Dietetics from The University of Sydney, and is currently a PhD candidate at The University of Sydney. Kathy is an Accredited Practising Dietitian and has more than 20 years' experience working in public health and clinical settings. She has more than 80 peer reviewed journal publications and has significant expertise in public health and cancer control programs.

As Director of the Cancer Programs Division, Kathy is responsible for developing and evaluating strategies and programs to meet Cancer Council NSW's mission to beat cancer across our strategic priorities of prevention, supportive care and advocacy. Kathy is the Chair of Cancer Council Australia's Nutrition and Physical Activity Committee. She also sits on a range of government health committees.



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 NSW. She has more than 14 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 strategic direction and leading the delivery of human resources and volunteering programs, services and technologies in order 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 NSW and has completed 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 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 Organization.

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.



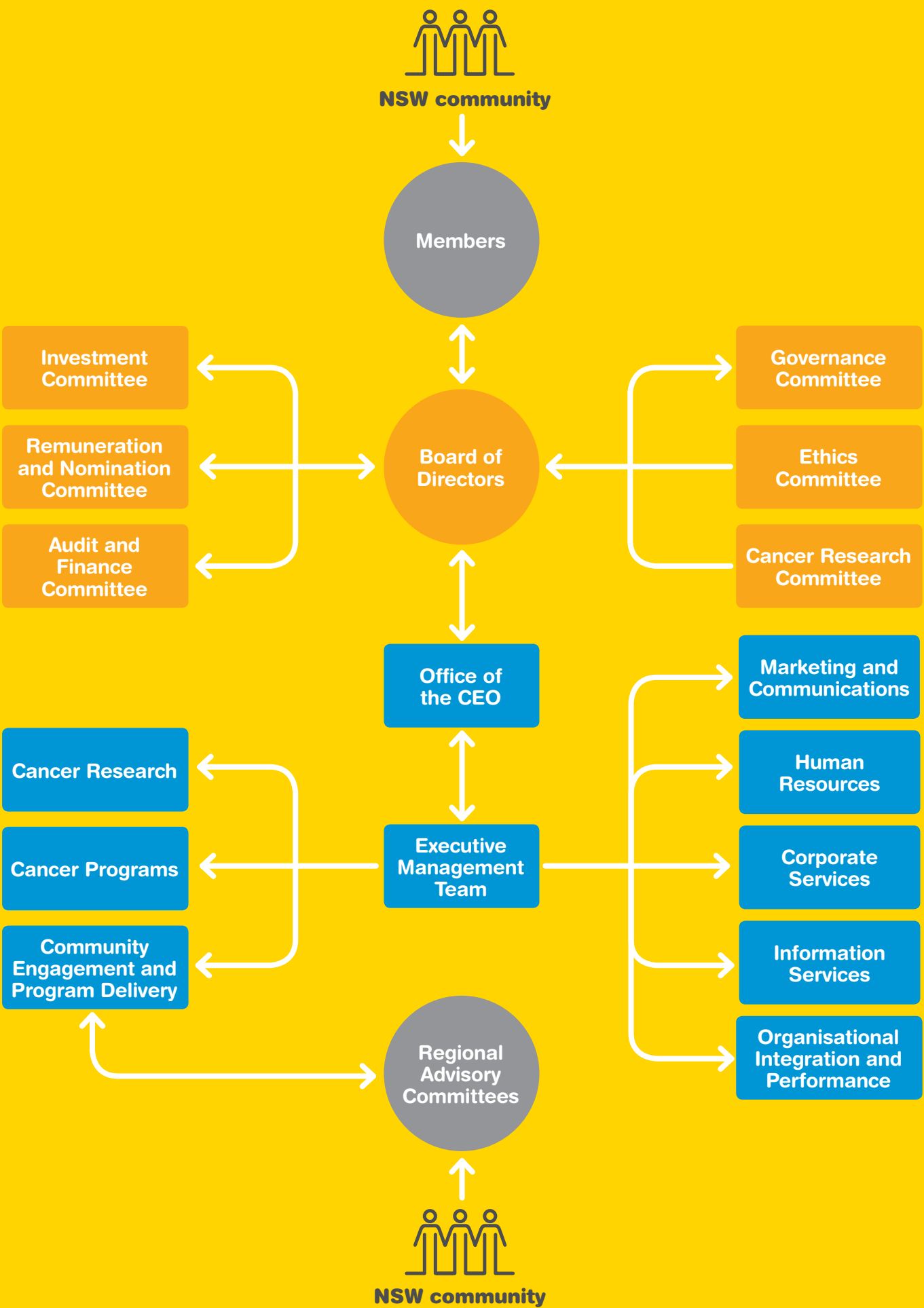
Sandra Simm

Chief Financial Officer

Sandra Simm holds a Bachelor of Commerce from 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 been the Company Secretary and a board member for Include A Charity and is also a member of Cancer Council Australia's Finance, Audit and Risk Committee.

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, shared services functions, and ensuring that Cancer Council NSW has appropriate risk and control measures in place.

Our structure



Our committees

The Board of Directors

The Board directs the affairs of Cancer Council NSW, 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 Cancer Council NSW, including its employees, customers and the community.

Mr Bruce Hodgkinson SC (Chair)
Barrister, Denman Chambers

Dr Stephen Ackland
(until December 2014)
Senior Staff Specialist, Medical Oncology, Calvary Mater Newcastle

Assoc Prof Michael Back
(until December 2014)
Northern Sydney Cancer Centre

Ms Jill Boehm OAM (Deputy Chair)
(until December 2014)

Mr James Butler
(from December 2014)

Ms Mary Chiew
Consultant

Assoc Prof Lisa Horvath
(from April 2015)
Director of Medical Oncology and Acting Director of Research, Chris O'Brien Lifehouse

Mr Paul Lahiff
(until April 2015)
Consultant

Dr John Laker AO
(from December 2014)
Former Chairman, Australian Prudential Regulation Authority

Assoc Prof Joe McGirr
(from December 2014)
Associate Dean Rural, The University of Notre Dame Australia School of Medicine

Mr Jeff Mitchell
(from April 2015)
Adviser to Business

Mr Mark Phillips
(Deputy Chair from February 2015)
Adviser to Business, Social and Charitable Organisations

Mr Stephen Roberts
Non-Executive Director

Mr John Stubbs
(until December 2014)
CEO, CanSpeak

Ms Melanie Trethowan
Consultant

In attendance:

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

Ms Sandra Simm
CFO, CCNSW

Ms Angela Aston
(until December 2014)
Company Secretary, CCNSW

Ms Louisa Fitz-Gerald
(from December 2014)
General Counsel,
Company Secretary, CCNSW

Governance Committee

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

Mr Bruce Hodgkinson (Chair)
CCNSW Board Chair

Assoc Prof Michael Back
(until December 2014)
CCNSW Board Member

Ms Jill Boehm
(until December 2014)
CCNSW Board Member

Dr John Laker
(from February 2015)
CCNSW Board Member

Ms Michelle Seagert
(from October 2014)
Partner, Squire Paton Boggs, Independent Expert

In attendance:

Mr Jim L'Estrange
CEO, CCNSW

Ms Angela Aston
(until December 2014)
Company Secretary, CCNSW

Ms Louisa Fitz-Gerald
(from December 2014)
General Counsel,
Company Secretary, CCNSW

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.

Mr Stephen Roberts (Chair)
CCNSW Board Member

Mr Mark Abood
(until August 2014)
Former Director of Financial Audit,
Audit Office NSW

Mr Jeff Boehm
(until December 2014)
CCNSW Board Member

Mr Steve McLeod
(from October 2014)
Director of Financial Audit,
Audit Office NSW

Mr Jeff Mitchell
(from October 2014)
CCNSW Board Member

Mr Mark Phillips
CCNSW Board Member

Ms Melanie Trethowan
CCNSW Board Member

In attendance:

Mr Paul Marsh
Oakton

Mr Ben Owens
Oakton

Mr Paul Bull
BDO

Mr Adrian Thompson
BDO

Mr Jim L'Estrange
CEO, CCNSW

Ms Sandra Simm
CFO, CCNSW

Ms Claire Patterson
Minute Secretary, CCNSW

Ms Amanda Bainbridge
Minute Secretary, CCNSW

Ms Katie Fairbrass
Minute Secretary, CCNSW

Investment Committee

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

Mr Paul Lahiff (Chair)
(until April 2015)
CCNSW Board Member

Mr Mark Phillips
(Chair from May 2015)
CCNSW Board Deputy Chair

Mr Craig Parker
Executive Director,
Debt Capital Markets,
Westpac Banking Corporation

Mr Bruce Tomlinson
Sunsuper Pty Ltd

In attendance:

Mr Simon Eagleton
Mercer Investments

Mr Doyle Mallett
Mercer Investments

Ms Jill Reid
Mercer Investments

Mr Paul Scouller
Mercer Investments

Mr Jim L'Estrange
CEO, CCNSW

Mr Ryan Alexander
Senior Manager Financial
Accounting & Risk, CCNSW

Ms Claire Patterson
Minute Secretary, CCNSW

Ms Katie Fairbrass
Minute Secretary, CCNSW

Remuneration and Nomination Committee

The Remuneration and Nomination Committee assists the Board in its oversight of both remuneration policy for the organisation, and the composition and performance of the Board.

Mr Bruce Hodgkinson (Acting Chair)
(from April 2015)
CCNSW Board Chair

Mr Paul Lahiff (Chair)
(until April 2015)
CCNSW Board Member

Ms Mary Chiew
CCNSW Board Member

Mr Peter McAuley
Consultant

In attendance:

Mr Jim L'Estrange
CEO, CCNSW

Ms Fiona Fahey
Director, Human Resources, CCNSW

Ms Angela Aston
(until December 2014)
Company Secretary, CCNSW

Ms Louisa Fitz-Gerald
(from December 2014)
General Counsel,
Company Secretary, CCNSW

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 advice to researchers and research staff on navigating the challenges of preparing applications for ethics review of 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 confirm they are adequately equipped for reviewing proposals.

Ms Alanna Linn
(Chair from May 2015)
Laywoman
Ms Meghan Carruthers (Chair)
(until April 2015)
Lawyer, Ebsworth & Ebsworth
Ms Lani Attwood
Counsellor, Radiation Therapist,
Royal Prince Alfred Hospital
Mr Stuart Davey
Minister, Glebe Uniting
Church, Pastoral Carer
Mr James Emmerig
Legal Representative, Solicitor,
King Wood & Mallesons
Ms Annie Fraser
(from September 2014)
Counsellor, Nurse Educator,
NSW Justice Health
Mr Chris Gardiner
(from December 2014)
Layman
Prof Bill McCarthy AM
(until August 2014)
Experienced Researcher
Representative, Emeritus Professor
of Surgery (Melanoma and Skin
Oncology), The University of Sydney
Rev John Neasey
(until December 2014)
Anglicare Chaplain, Pastoral Care
Mr Felix Ratcliff
(until September 2014)
Counsellor (Allied Health Professional)
Representative, CCNSW
Mr Tim Read
Layman
Dr Monica Robotin
Medical Director, CCNSW
Dr John Sanders
(until September 2014)
Layman
Assoc Prof David Smith
Experienced Researcher
Representative, Research Fellow,
Cancer Research Division, CCNSW
Ms Frances Taylor
Laywoman

In attendance:

Dr Libby Topp
(until April 2015)
Research Strategy Manager, CCNSW
Dr John Williams
Research Governance Officer and
Committee Secretary, CCNSW

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 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 consideration by the Board.

Prof Anna DeFazio (Chair)
(from March 2015)
Head, Gynaecological Oncology
Research Group, Westmead
Millennium Institute of Cancer
Research, Westmead Hospital
Prof Michelle Haber (Chair)
(until November 2014)
Executive Director, Children's Cancer
Research Institute Australia
Prof Stephen Ackland
Senior Staff Specialist, Medical
Oncology, Calvary Mater Newcastle
Prof Minoti Apte OAM
(from March 2015)
Director, Pancreatic Research Group,
University of NSW
Prof Mark Baker
(until November 2014)
Professor of Proteomics,
Macquarie University
Mrs Jane Bennett
(until November 2014)
Consumer Representative
Ms Robyn Bransby
(from March 2015)
Consumer Representative
Prof Jacob George
(from March 2015)
Robert W. Storr Professor of Hepatic
Medicine, Storr Liver Unit, Westmead
Millennium Institute, The University
of Sydney; Head of Department of
Gastroenterology and Hepatology,
Westmead Hospital and
Director of Gastroenterology and
Hepatology Services, Western
Sydney Local Health Network
Assoc Prof Lisa Horvath
(from April 2015)
Director of Medical Oncology
and Acting Director of Research,
Chris O'Brien Lifehouse;
CCNSW Board Member
Prof Sandra Jones
(until November 2014)
Research specialist, behavioural
psychosocial, Director Research Unit,
Australian Catholic University
Mr Jim L'Estrange
CEO, CCNSW (Ex officio)
Mr Dez Maule
(from March 2015)
Consumer Representative
Mr John Moroney
(until November 2014)
Consumer Representative
Dr Monica Robotin
(until November 2014)
Medical Director, CCNSW
Assoc Prof Nataka Suchowerska
Head, Research and Education,
Department of Radiation Oncology,
Royal Prince Alfred Hospital

Assoc Prof Claire Vajdic
Team Leader, Cancer Aetiology and
Prevention Group, Adult Cancer
Program, University of NSW Lowy
Cancer Research Centre
Dr Claire Wakefield
(from March 2015)
Senior Research Fellow,
School of Women's and Children's
Health, University of NSW
Prof Kate White
(until November 2014)
Director, Research
Development and Support Unit,
The University of Sydney
Prof Jane Young
Professor in Cancer Epidemiology,
School of Public Health,
The University of Sydney

In attendance:

Adjunct Prof Karen Canfell
(from April 2015)
Director, Cancer Research, CCNSW
Ms Kathy Chapman
Director, Cancer Programs, CCNSW
Dr Libby Topp
(until April 2015)
Research Strategy Manager, CCNSW
Dr John Williams
Research Governance Officer and
Committee Secretary, CCNSW

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.**

Assoc Prof Claire Vajdic (Chair)
Team Leader, Cancer Aetiology and
Prevention Group, Adult Cancer
Program, University of NSW Lowy
Centre Cancer Research Centre
Prof Alexandra Barratt
Professor in Cancer
Epidemiology, School of Public
Health, The University of
Sydney; Co-Director, Centre
for Medical Psychology and
Evidence-Based Decision-Making,
The University of Sydney

Mrs Jane Bennett
Consumer Representative
Prof Suzanne Chambers
Professor, School of
Applied Psychology, Griffith
University, Queensland
Mr Peter Coupland
(until April 2015)
Consumer Representative
Prof Jonathon Craig
(until February 2015)
Professor, Clinical Epidemiology,
School of Public Health,
The University of Sydney
Assoc Prof Patrick Cregan
(until June 2015)
Chair, Nepean Blue Mountains
Local Health District
Prof Sandra Eades
(until June 2015)
Head of Indigenous Maternal and
Child Health; Associate Head of
Preventative Health Research,
Baker IDI Heart and Diabetes
Institute, Victoria
Prof Louisa Jorm
Director, Centre for Health Research;
Professor of Population Health,
University of Western Sydney
Assoc Prof Rosemary Knight
Principal Advisor, Population Health
Division, Australian Government
Department of Health
Mr Jim L'Estrange
CEO, CCNSW (Ex officio)
Prof Bernard Stewart
Professor of Medicine, Faculty of
Medicine, University of NSW
Prof Alison Venn
Deputy Director and Associate
Director, Research, Menzies
Research Institute, Tasmania; Director
Tasmanian Cancer Research Registry
Prof David Whiteman
Head, Cancer Control Group;
Senior Research Fellow, QIMR
Berghofer Medical Research Centre
Institute, Queensland
Prof John Wiggers
Professor, School of Medicine and
Public Health, University of Newcastle
Prof Jane Young
Professor in Cancer Epidemiology,
School of Public Health,
The University of Sydney

In attendance:

Adjunct Prof Karen Canfell
(from April 2015)
Director, Cancer Research, CCNSW
Ms Kathy Chapman
Director, Cancer Programs, CCNSW
Dr Libby Topp
(until April 2015)
Research Strategy Manager, CCNSW
Dr John Williams
Research Governance Officer and
Committee Secretary, CCNSW

Our organisation

Our governance principles

- **Principle 1:**
Lay solid foundations for management and oversight
- **Principle 2:**
Structure the Board to add value
- **Principle 3:**
Act ethically and responsibly
- **Principle 4:**
Safeguard integrity in corporate reporting
- **Principle 5:**
Make timely and balanced disclosure
- **Principle 6:**
Respect the rights of 'stakeholders'
- **Principle 7:**
Recognise and manage risk
- **Principle 8:**
Remunerate fairly and responsibly

- 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'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 is endorsed as a deductible gift recipient under Subdivision 30-BA of the *Income Tax Assessment Act 1997* (Cth).

In 2014/15, our Prevention Unit within the Cancer Programs Division received:

- Funding totalling \$79,319 from Nepean Blue Mountains Local Health District.
- Funding totalling \$158,850 from the Cancer Institute NSW.

In 2014/15, our Cancer Information and Support Services Unit within the Cancer Programs Division received:

- Funding of \$62,171 from NSW Department of Ageing, Disability and Home Care for our Carers project.
- Funding of \$111,000 from Cancer Australia for our cancer information and support webinar series for the Chinese community project.

Registrations and legislation

On 30 September 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.

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 2014/15 the division received:

- Funding totalling \$283,150 from the National Health and Medical Research Council (NHMRC).



To find out more about our governance, or to view our Constitution, visit:
cancercouncil.com.au/about-us

Performance

How	Measures	2011	2012	2013	2014	2015	Some outcomes from 2014/15
We strive to work more effectively: better harnessing people, funds, technology and other resources to minimise our administration and costs.	Infrastructure and administration costs as a percentage of total expenditure	7%	8%	8%	9%	11%	Highlight: ↑ In 2014/15, we commenced a significant IT transformation program to better enable our staff.
We maintain our investments at levels equivalent to between nine 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	9.4%	0.1%	16.8%	14.5%	8.3%	Highlight: ↑ The return for our investment portfolio was 8% this year, another very strong result driven by an experienced Investment Committee. Our 10-year return of 8.4% continues to outperform the ASX300's 3.6% over the same period.
	Months of operational expenditure covered by investments	10.9	10.9	10.0	11.9	12.8	

Our infrastructure and systems

Embedding a culture of effective risk management

Following a 2013 risk survey undertaken by our internal auditors, in 2014/15 we directed resources to existing and emerging high risk areas. Where risks cannot be eliminated, we focus on strengthening existing and building new controls. Transforming our Information Systems, innovating to grow revenue, and alignment of planning across the organisation were three areas of focus. Formal workforce and succession planning were also commenced to address key people risks (see pages 34-35).

Enabling our people with technology

This year, we renewed our focus on technology enablement. This project will continue in the coming year and is designed to increase our productivity and enable better connectivity with the community. To support this and future organisation-wide projects, we established an IT project office. The team's priority is information technology improvements.

With our network of regional staff and volunteers across the state and an increasingly mobile workforce, we have focused on ensuring speed, mobility

and improved productivity are the key areas for enhancement in the first phase of the project, which will be completed in the coming year.

Additionally, **we identified business continuity and disaster recovery as key areas to mitigate risk related to data loss.** This involved implementing secure off-site data storage solutions with improved security, ensuring Cancer Council NSW is able to continue to operate following any type of catastrophic event impacting our offices or other locations.

Continuous improvement

There has been an organisational focus during 2014/15 to improve efficiencies, remove duplication and reduce costs. This has been a multi-tiered approach and **business improvement workshops** were held with managers across the organisation to increase awareness and identify organisational opportunities to identify and eliminate waste and duplication. From these workshops, a number of areas were identified, including reviewing the logistics of our fundraising events. This review commenced with 'Project Lean', which continues reviewing **opportunities for improving processes and reducing the costs** associated with our merchandise

events. Recommendations from the project will be implemented in 2015/16 and this will become a rolling review program during the year ahead.

We have also focused on streamlining a number of our administrative business processes, including banking for our regular giving program, which delivered additional revenue of \$274,000 during the year through an improvement to our processes.

We commenced a **targeted focus on procurement** activity to maximise commercial value from our purchasing decisions. Through greater rigour and negotiations, and working closely with Cancer Council Victoria in a number of key areas to achieve greater economies of scale and alignment, we have delivered some material savings in 2014/15.

An internal audit highlighted **opportunities to improve our contract management practices.** After a review of best practice contract management, and consultation with key staff, we have commenced scoping of a centralised contract register within our financial management system, Technology One, which will leverage greater efficiencies and streamline controls. This new register will be implemented in 2015/16.

Internal audits conducted in 2014/15



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	Quarter finalised	Number of recommendations	Percentage (%) of recommendations implemented to date
Payroll processes and system	Q2	2	60%
Management of responses to research peer reviews	Q2	5	0%*
Contract management	Q2	6	40%
Information systems: general controls	Q3	4	45%
Tobacco control program	Q3	4	80%
Retail operations and stocktake	Q4	0	N/A
Health check of the sufficiency of revenue growth	Q4	10	0%

*Implementation of recommendations delayed until appointment of new Director of Research late in 2014/15.

Publications and submissions

The following pages document the extensive research undertaken by Cancer Council NSW staff and published in peer-reviewed publications in 2014/15. 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 Food Standards Australia New Zealand on supplementary sports foods and electrolyte drinks (CCA) – September 2014.

Submission to the Australian Government Competition Policy Review Panel addressing alcohol retailing issues (CCNSW) – November 2014 and May 2015.

Submission to the National Health and Medical Research Council regarding the methodological framework for the review of nutrient reference values (CCA) – December 2014.

Submission to Food Standards Australia New Zealand on the extension of timeframe for complying with labelling standards relating to claims about dietary fibre claims (CCA) – November 2015.

Submission to Free TV Australia on proposed changes to the Commercial Television Industry Code of Practice Code relevant to food marketing to children (CCA) – April 2015.

Submission to the Commonwealth Government's National Diabetes Strategy Advisory Group on the draft National Diabetes Strategy and the importance of investing in preventive health initiatives on diabetes, obesity and related cancers (CCA) – May 2015.

Submission to the NSW Food Authority consultation on the proposed Food Regulations 2015, focusing on non-compliance of fast food chains with menu labelling legislation (CCNSW) – June 2015.

Submission to House of Representatives inquiry into skin cancer in Australia (CCA/Clinical Oncology Society of Australia) – March 2014.

Submission to Legislative Council inquiry into registered nurses in New South Wales nursing homes – June 2015.

Submission to House of Representative Standing Committee on the environment inquiry into the register of environmental organisations – May 2015.

Our summarised financial report



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INDEPENDENT AUDITOR'S REPORT - To the members of The Cancer Council NSW

Report on the Summary Financial Report

We have audited the accompanying summary financial report of The Cancer Council NSW, which comprises the summary statement of financial position as at 30 June 2015, the summary statement of profit or loss and other comprehensive income, the summary statement of changes in equity, the summary statement of cash flows for the year then ended, and related notes, derived from the audited financial report of The Cancer Council NSW for the year ended 30 June 2015. We expressed a qualified audit opinion on that financial report dated 27 October 2015. The summary financial report does not contain all the disclosures required by the Australian Accounting Standards and accordingly, reading the summary financial report is not a substitute for reading the audited financial report.

Directors' Responsibility for the Summary Financial Report

The directors are responsible for the preparation of the summary financial report in accordance with Accounting Standard AASB 1039 *Concise Financial Reports*, and the *Australian Charities and Not-for-profits Commission Act 2012 (ACNC Act)*, and for such internal control as the directors determine are necessary to enable the preparation of the summary financial report.

Auditor's Responsibility

Our responsibility is to express an opinion on the summary financial report based on our procedures which were conducted in accordance with Auditing Standard ASA 810 *Engagements to Report on Summary Financial Statements*. We have conducted an independent audit, in accordance with Australian Auditing Standards, of the financial report of The Cancer Council NSW for the year ended 30 June 2015. We expressed a qualified audit opinion on that financial report in our report dated 27 October 2015. The Australian Auditing Standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report for the year is free from material misstatement.

An audit involves performing procedures to obtain evidence about the amounts and disclosures in the summary financial report. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the summary financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation of the summary financial report in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Our procedures included testing that the information in the summary financial report is derived from, and is consistent with, the financial report for the year, and examination on a test basis, of audit evidence supporting the amounts and other disclosures which were not directly derived from the financial report for the year. These procedures have been undertaken to form an opinion whether, in all material respects, the summary financial report complies with AASB 1039 *Concise Financial Reports* and whether the discussion and analysis complies with the requirements laid down in AASB 1039 *Concise Financial Reports*.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

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 the 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.

Opinion

In our opinion, except for the possible effects of the matter described in the basis for Qualified Opinion paragraph, the summary financial report is consistent in all material respects, with the financial report from which it was derived for the year ended 30 June 2015 and complies with Accounting Standard AASB 1039 *Concise Financial Reports*.

BDO East Coast Partnership

Paul Bull
Partner
Sydney, 27 October 2015

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The financial statements and charts in this summarised financial report have been derived from Cancer Council NSW's *Full Financial Report 2014/2015*.

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.

Statement of profit or loss and other comprehensive income

For the year ended 30 June 2015

	2015 \$'000	2014 \$'000
Revenue		
Fundraising income	67,378	59,754
Retail income	7,338	7,926
Interest and investment income	3,508	3,790
Grant income	1,709	980
Other income	1,066	1,048
Total revenue	80,999	73,498
Increase in fair value of investment property	80	110
Total income	81,079	73,608
Expenses		
Fundraising expenditure	22,025	22,172
Retail expenditure	6,881	7,202
Research expenditure	14,926	14,232
Regional program delivery	7,254	7,283
Information and support services	5,260	6,237
Advocacy and prevention	4,620	4,195
Media, communication and marketing expenditure	3,065	3,452
Infrastructure and administration	7,686	6,135
Total expenses	71,717	70,908
Surplus before income tax expense	9,362	2,700
Income tax expense	–	–
Surplus for the year	9,362	2,700
Other comprehensive income		
Items that will not be reclassified subsequently to surplus or deficit		
Increase/(decrease) in investments at fair value through other comprehensive income	2,676	5,326
Total comprehensive income for the year	12,038	8,026



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/annualreport2015

Statement of financial position

As at 30 June 2015

	2015 \$'000	2014 \$'000
Assets		
Current assets		
Cash and cash equivalents	9,998	6,316
Trade and other receivables	2,100	1,996
Inventories	1,133	1,517
Financial assets	129	–
Total current assets	13,360	9,829
Non-current assets		
Investment properties	580	440
Financial assets	80,737	70,303
Intangible assets	744	690
Property, plant and equipment	23,709	17,164
Total non-current assets	105,770	88,598
TOTAL ASSETS	119,130	98,427
Liabilities		
Current liabilities		
Trade and other payables	4,746	3,296
Provisions – employee benefits	2,269	1,906
Total current liabilities	7,015	5,202
Non-current liabilities		
Provisions – employee benefits	527	745
Total non-current liabilities	527	745
TOTAL LIABILITIES	7,542	5,947
NET ASSETS	111,588	92,479
Funds		
General funds	90,015	73,721
Restricted funds reserve	9,884	7,361
Investments at fair value reserve	(380)	6,962
Grant income reserve	1,427	860
Asset revaluation reserve	10,642	3,575
TOTAL FUNDS	111,588	92,479

Statement of changes in funds

For the year ended 30 June 2015

	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 2013 (restated)	71,198	6,842	1,636	1,202	3,575	84,453
Transfer to/ (from) reserves	(177)	519	–	(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	73,721	7,361	6,962	860	3,575	92,479
Opening balance as at 1 July 2014 (restated)	73,721	7,361	6,962	860	3,575	92,479
Transfer to/ (from) reserves	6,932	2,523	(10,018)	567	7,067	7,071
Surplus for the year	9,362	–	–	–	–	9,362
Other comprehensive income for the year	–	–	2,676	–	–	2,676
Total comprehensive income for the year	9,362	–	2,676	–	–	12,038
Closing balance as at 30 June 2015	90,015	9,884	(380)	1,427	10,642	111,588

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.

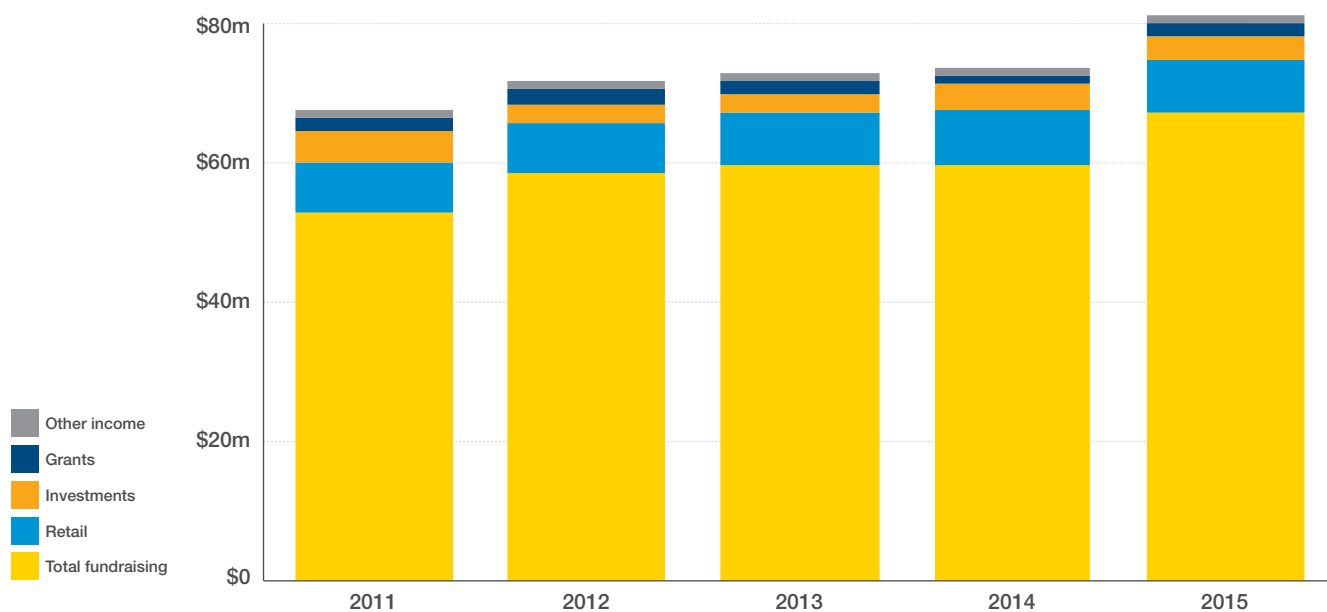
A data error impacting on the prior year reserves has been identified and corrected via a prior year adjustment. See the full financial report for more detail.

Statement of cash flows

For the year ended 30 June 2015

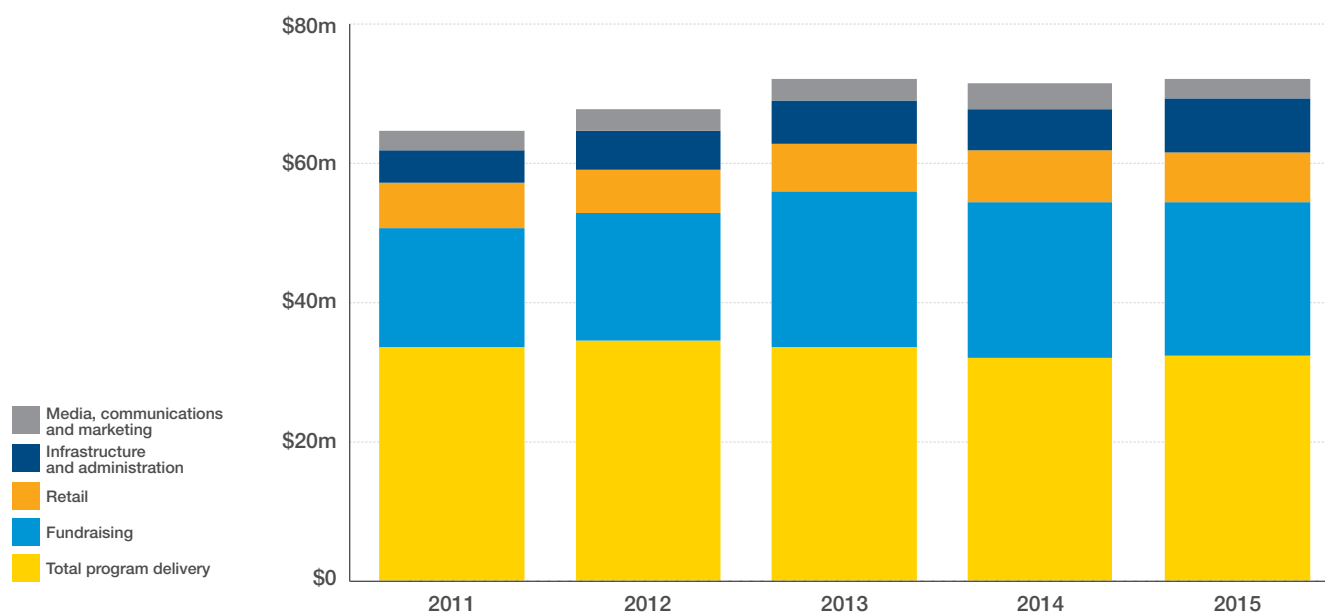
	2015 \$'000	2014 \$'000
Cash flows from operating activities		
Receipts		
Receipts from supporters and funding sources (inclusive of GST)	75,524	70,212
Receipts from grant funding	1,709	980
Dividends, franking credits and interest received	497	421
	77,730	71,613
Payments		
Payments to suppliers and employees (inclusive of GST)	(67,922)	(68,423)
	(67,922)	(68,423)
Net cash inflow from operating activities	9,808	3,190
Cash flows from investing activities		
Proceeds from sale of property, plant and equipment	184	66
Proceeds from sale of financial assets	39,443	–
Payments for purchase of held-to-maturity investments	(129)	–
Proceeds from sale of investment properties	–	880
Payments for purchase of investments at fair value through other comprehensive income	(44,343)	(1,500)
Payments for purchase of intangible assets	(230)	(139)
Payments for purchase of property, plant and equipment	(1,052)	(733)
Net cash inflow from investing activities	(6,127)	(1,426)
Net increase in cash and cash equivalents	3,682	1,764
Cash and cash equivalents at beginning of year	6,316	4,552
Cash and cash equivalents at end of year	9,998	6,316

Where the money comes from



	2011 \$m	%	2012 \$m	%	2013 \$m	%	2014 \$m	%	2015 \$m	%
Events	16.6		18.3		18.0		19.8		18.2	
Appeals	26.3		26.2		27.9		28.5		28.5	
Bequests	10.0		14.0		13.7		11.5		20.7	
Total fundraising	52.9	78%	58.5	82%	59.6	82%	59.8	81%	67.4	83%
Retail	7.3	11%	7.1	10%	7.6	11%	7.9	11%	7.3	9%
Investments	4.6	7%	2.7	4%	2.5	3%	3.8	5%	3.5	4%
Grants	1.9	3%	2.3	3%	2.2	3%	1.0	1%	1.7	2%
Other income	0.9	1%	0.9	1%	0.9	1%	1.1	2%	1.2	2%
Total income	67.6		71.5		72.8		73.6		81.1	

Where the money goes



	2011		2012		2013		2014		2015	
	\$m	%	\$m	%	\$m	%	\$m	%	\$m	%
Program delivery expenditure										
Research	16.1		15.0		14.8		14.2		14.9	
Regional program delivery	5.6		6.4		7.2		7.3		7.3	
Advocacy and prevention	4.8		4.7		4.5		4.2		4.6	
Information and support services	7.0		8.1		7.0		6.2		5.3	
Total program delivery	33.5	53%	34.2	51%	33.5	47%	31.9	45%	32.1	45%
Other expenditure										
Fundraising	16.9	26%	18.2	27%	22.0	30%	22.2	31%	22.0	31%
Retail	6.4	10%	6.3	10%	6.9	10%	7.2	10%	6.9	9%
Infrastructure and administration	4.7	7%	5.5	8%	6.0	8%	6.1	9%	7.7	11%
Media, communications and marketing	2.6	4%	2.9	4%	3.3	5%	3.5	5%	3.0	4%
Total expenditure	64.1		67.1		71.7		70.9		71.7	

Thank you

We thank the following generous individuals and organisations who have supported us in 2014/15. 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.

Simon and Anna Ainsworth	Boehringer Ingelheim Pty Ltd
AMP Foundation Charitable Trust	Brands Exclusive CAF
Tim Andrews	Cancer Research Advocate Bikers
AusGrid	Carols by the Sea Avalon
Pam Bender	Angela Cho
Natasha Beyersdorf	Brent Collier
Beyond Bank Australia	Reg Crick
Bingo Group	Families of the Bangladeshi Community
Bloomfield Group	

Fleet Helicopters
Fiona Foulkes
James Freeman, Sh*tbox Rally
Fussell Family Foundation
Galston Girls Night In
Julie Giovenco
Catherine Giunta and Nancy Sherry
Heaven Can Wait Sailing Regatta
Henry Pollack Foundation
Holland America Line
Jessica Hore
Horsley Park Community Social Group & Friends
Kim and Michael Iori and the Aaron's Wish Team
ImagineNations Church
Italian Catholic Federation
Kambala
Peter Kelly

Tony Laing
Clancy-Lee Lane
Barbara Lee
Macquarie Bank
Macquarie Group Foundation
Patricia McAlary
Jason Muhs
NAB
National Rugby League
Neuroblastoma Australia
Grace Newcombe
Nine2Three Employment Solutions Pty Ltd
Nomads Sydney North
Northern Beaches Girls Night In
Outrun Cancer
Paspaley
Pink Bitz
Ritchies IGA

Rix's Creek Invitational Golf Day
Frank Robertson
Keith and Alison Ross
Maxwell Schroder
Kay Sidman
Skipper-Jacobs Charitable Trust
SOS Print + Media Group
Sydney Restaurant Group
Sydney Water
Telstra
The Blue Robinson Foundation
The JDS Group Pty Ltd
The Profield Foundation
The Westin Sydney
Dr Nikki Verrills
Andrew Wade
Westpac Group
Patricia Williams
Jean Willmington

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.

Marion Lorraine Almond	Barry Reginald Bray
Zelma Frances Arena	Lorraine Mary Brophy
Norman Cyril Atkinson	Colin James Brown
Sybil Eva Baer	Dorothea Margaret Burns
Phillipa Alice Bannon	Anthony Butta
Margaret Geraldine Barnett	Pauline Grace Carr
Mary Kathleen Elizabeth Benson	Maxwell James Cathro
Effie Victoria Berry	Joan Margaret Clerke
Vallex Blackford	Mair Collins
Miroslav Blaha	Miriam Lucy Cordock
	Margaret Eleanor Cousin

Ross Ferguson Daniell
Mervyn Francis Dean
Ronald Frederick Doyle
Jill Taylor Duddy
Sally Eason
Reginald Herbert Edmonds
Neil William Favelle
John Patrick Foley
Betty Mildred Gill
Barbara Ann Gregan
Anne Hogan
Florence May Hurley
Lynne Ivens
Basil Percy Whiddett Jenkins
Brian Edward Joines
Marjory May Jonas
David Kershaw
Norma Joyce Lea
Anna Leman
Bruce Lemcke
Veanne McKendrick

Henry Lawrence McPaul
Mabs Melville
James Baird Mitchell
Charles Vernon Moore
John Gregory North
Antoinette Dolores O'Carroll
Winsome Gilmour Pender
Roger Carlo Numa Pietri
Valona June Plowman
Betty Gloria Pollett
Dorothy Jean Purdue
Eva May Randell
May Eileen Runting
John Pelham Russell
Kathleen Ryan
Mavis Kathleen Salkeld
Agnes Gardner Sanfilippo
Allen James Scholz
Joyce Shade
Margaret Nairn Sharp
James Richard Simmons
George Henry Simpson

Margaret Hannah Skinner
Bruce Sprague
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Sophia Cheung Chu Tang
June Lilian Tebb-Pitt
Winifred Isabella Thom
Lillian Ethel Thomas
Elizabeth Mary Truman
James Turnbull Wallace
Betty Beryl Weatherby
Douglas Arthur Westerland
Margaret Alexandra Williams
Elva May Williams
Kathleen Patricia Wilson
Laurine Wilson
Winifred Lily Wood
Dawn Brown Woodward
Edith Phyllis Woolverton
Joseph Zeleznik

Professional services

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

Bankers
NAB

Internal auditors
Oakton

External auditors
BDO

Investment advisors
Mercer

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

Baker & McKenzie
Clayton Utz
DLA Piper

Herbert Smith Freehills
Minter Ellison
Monahan Estate Planning

Sparke Helmore
TressCox Lawyers
Workplace Law

We also thank the professionals in the community who provide free legal, financial planning, small business accounting and workplace advice via our Pro Bono Program.

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Henry Street
Penrith NSW 2750
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Kotara

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Westfield Kotara
Cnr Park Avenue and
Northcott Drive
Kotara NSW 2289
Ph (02) 4923 0770

Warringah Mall

Shop 349
Warringah Mall
Cnr Condamine Street
and Old Pittwater Road
Brookvale NSW 2100
Ph (02) 8245 8000

Hornsby

Shop 3010
Westfield Hornsby
Pacific Highway
Hornsby NSW 2077
Ph (02) 9457 4200

Chatswood

Shop LG B-018
Chatswood Chase
Shopping Centre
345 Victoria Avenue
Chatswood NSW 2067
Ph (02) 9308 0280

Bondi

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Westfield Bondi Junction
500 Oxford Street
Bondi Junction NSW 2022
Ph (02) 9308 0200

Miranda

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Westfield Miranda
The Kingsway
Miranda NSW 2228
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Rouse Hill

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Rouse Hill Town Centre
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imagine
a world
without cancer



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