

# We're here.

Annual Report 2018/2019



**Cancer  
Council**  
NSW

# Contents

Hello from our Chair and CEO	1
Our highlights of 2018/19	2
Research	4
Prevention	6
Information and support	8
Advocacy	10
Fundraising	12
We're working with the NSW community	14
We're developing our people	16
We're working with Aboriginal and Torres Strait Islander people	18
We're improving our ways of working	19
Our performance over time	20
Where the money comes from	22
How we put the money to work	23
Directors' report	24
Auditor's declaration of independence	29
Financial statements	30
Independent auditor's report	43
Thank you	45
How you can get involved	48

Cover star: Lily Gubbay, cancer survivor. Read her story on p49

# About us

**Cancer Council is Australia's leading cancer charity, working across every area of every cancer.**

Every day, we support people affected by cancer when they need it most, speak out on behalf of the community on cancer issues, empower people to reduce their cancer risk, and find new ways to better detect and treat cancer.

With your help, we're getting closer to a cancer free future every minute, every hour, every day.

**Our 2018/19 Annual Report is a snapshot of our achievements.**

In the following pages, we share some of the stories and successes from the past year and celebrate the incredible generosity of our volunteers and supporters.



**Mark Phillips**  
Chair, Cancer Council NSW

# Hello from our Chair and CEO

**This year, we have continued to be inspired by our supporters' tireless work to bring us closer to a cancer free future.**

In 2018/19, more than 246,000 people across the state took part in fundraising activities or made donations, raising almost \$64 million. Some did it by bringing friends and workmates together for **Australia's Biggest Morning Tea** or pounding the pavement at **Relay For Life**. Others decided to make a regular donation or leave a gift in their will. No matter how they chose to do it, the NSW community has ensured we can continue to fund world-class research, prevention, advocacy and information and support services for people affected by cancer.

As the only organisation in NSW working across every area of every cancer, this year has also seen an increased demand for our support services. With almost 48,000 new cases of cancer expected to be diagnosed each year across the state, this trend is likely to continue.

We should never lose sight of the good news: prevention, detection and treatments are evolving, and they are improving and saving the lives of thousands of Australians each year.

Overall cancer survival in Australia has improved by around 40% during the past 30 years, largely through prevention and early detection. An example of this has been the anti-smoking reforms driven by Cancer Council and our allies. These initiatives will save 1.9 million Australian lives by the end of this century.

We are driving an innovative research agenda aimed at leading the community toward truly ground-breaking cancer solutions. For example, our world-leading cervical cancer research has put Australia on track to be the first country in the world to eliminate cervical cancer.

In 2018/19, we spent \$52.2 million on our vision of a cancer free future, but we know there is still a lot of work to be done.

This year, we refreshed the strategy that will guide our work for the next five years. Our 2019-2023 strategy is the result of a great deal of careful thought and community consultation about where we need to increase our investment, who we partner with and how to maximise our impact, so that we can best serve communities across NSW.

We have committed to four key priority areas: reducing cancer risk, increasing cancer survival, improving the quality of life of people affected by cancer and improving cancer outcomes for priority populations. We are here for all Australians, regardless of where they live, what language they speak, their circumstances or their heritage.

Without our volunteers, supporters and employees, we could never make our vision a reality. Thank you for your passion, your skills and your commitment to a world without cancer.



**Jeff Mitchell**  
CEO, Cancer Council NSW

**Cancer survival  
in Australia  
has improved  
by around 40%  
during the past  
30 years**



# Our highlights of 2018/19

Here is a snapshot of the impact of our work to date and how, together, we will continue to reduce the burden of cancer.

Everything we do is underpinned by world-class research. In the past 5 years alone, Cancer Council NSW has invested \$83.6 million into essential cancer research.

In 2018/19, we contributed \$19 million to cancer research, funding:



**250**  
researchers



**65**  
projects



**19**  
institutions



Almost **10,000 new advocates** joined our CanAct Community this year, bringing the total to **40,000 members** who influence what politicians do about cancer.



## REDUCING CANCER RISK

**1.9 million:** The number of Australian lives that will be saved through reduced lung cancer burden up to the year 2100, thanks to anti-smoking reforms driven by Cancer Council and allies\*.

Thanks to our research, **300,000 deaths** from cervical cancer could be prevented globally each year.

Applying research led by Cancer Council NSW, Australia has declared its intention to become the first country in the world to **eliminate cervical cancer by 2035**.

80% of children in NSW primary schools are reducing their risk of skin cancer, thanks to our **SunSmart Schools Program**.



## IMPROVING THE QUALITY OF LIFE OF PEOPLE AFFECTED BY CANCER

More than **530,000** people affected by cancer relied on us for information and support in 2018/19.

We helped **2,660** cancer patients and carers get to treatment centres and hospitals through our **Transport to Treatment** service, driving more than **1.1 million kilometres** across NSW.

We provided affordable accommodation to **2,258** cancer patients and carers, so they could stay close to their treatment centres.

**2,677** people were helped through a time of financial stress thanks to our **Financial Assistance Program**.

Our **Pro Bono Program** provided an estimated **\$5.2 million** worth of legal, financial, workplace or small business assistance to people in need.



## INCREASING CANCER SURVIVAL

The number of Australians who survive cancer has increased by an estimated **40% in the past 30 years\***.

Most of that improvement is through prevention and early detection, with increased survival in early-stage cancers of the breast, bowel, cervix, prostate and melanoma.

Today, almost **7 in 10 people** in NSW will survive at least 5 years after a cancer diagnosis\*.

**84,000** Australian lives could be saved by 2040, if we can increase bowel cancer screening rates to 60% from the current rate of around 40%\*.



## IMPROVING CANCER OUTCOMES FOR PRIORITY POPULATIONS

Smoking rates among Aboriginal and Torres Strait Islander people in NSW have decreased by about **25% in the past five years\***.

A key priority of our cervical cancer research agenda is to **reduce cervical cancer inequities** faced by Aboriginal and Torres Strait Islander people and other disadvantaged groups in Australia.

\*These figures reflect the work of both Cancer Council and others.

'Cancer Council' refers to the work of the Cancer Council Federation, not only Cancer Council NSW.



# We're discovering

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

We are committed to conducting and funding research that improves outcomes across the entire cancer journey. Cancer Council funds more cancer research than any other non-government organisation in Australia. Thanks to our supporters, Cancer Council NSW invested \$19 million in 2018/19.

## Pathways to a cancer free future

This year, our team of researchers continued their work on a long-term program called *Pathways to a cancer free future* (**Pathways**). This world-leading initiative aims to identify where the greatest impact can be made in reducing the burden of cancer, ultimately saving more lives.

Integrated with the latest research, **Pathways** is underpinned by innovative predictive modelling research across several key cancer types: cervix, lung, bowel, prostate, breast and hereditary cancers related to Lynch syndrome, along with new work in ovarian cancer and melanoma. Our modelling research allows us to ask a series of 'what if' questions to identify the best ways to reduce the impact of cancer – from prevention to early detection and screening strategies, treatment and survivorship.

## Our impact – bowel cancer screening

In early 2019, a major investment from the Australian Government into the National Bowel Screening Program demonstrated a vital way our **Pathways** program can make an impact. Knowing that only 40% of eligible Australians currently participate in the National Bowel

Screening Program, the **Pathways–Bowel** team asked the question, "What if we could raise the participation rate?". Their modelling showed that 84,000 lives could be saved by 2040 if participation in the screening program could be increased from around 40% to 60% of eligible Australians. This prediction underpinned a case for the Australian Government to allocate \$10 million to Cancer Council Australia to deliver the first-ever national mass-media campaign to promote bowel cancer screening.

## Funding world-class research

In 2018/19, we awarded funding to 13 new projects worth almost \$9 million over the next five years. We were proud to award one of two Translational Program Grants, valued at \$3.75 million each, in partnership with Cancer Institute NSW. Professor David Gottlieb and his team at the Westmead Institute were the recipients of the five-year grant, which aims to rapidly translate a breakthrough immunotherapy from benchtop to bedside.

One of the most exciting cancer therapies to emerge in recent years, CAR T-cell immunotherapy, involves taking a patient's own immune cells, growing them in a highly specialised clinical laboratory, reprogramming them to attack only cancer cells or infections and then returning them to the patient. Based on successful clinical trials, the Therapeutic Goods Administration recently approved CAR T-cell immunotherapy for use in paediatric and young adult patients with acute lymphoblastic leukaemia and adult patients with a particular type of lymphoma who have exhausted other treatments, including chemotherapy.

Up until now, CAR T-cell production in Australia has been on a small scale. With our funding, Professor Gottlieb and his team will develop methods for upscaling CAR T-cell production in NSW – accelerating the introduction of this cutting-edge therapy and making treatment more affordable. For patients who are eligible for CAR T-cell immunotherapy now, this project will provide a significant and immediate benefit. As this revolutionary therapy becomes available for other cancers, the benefit to patients will continue well into the future.


## Supporting the next generation of researchers

This year we supervised 13 PhD students, including six who received Cancer Council NSW scholarships to complete their research. We saw five students complete their thesis during 2018/19.

## What's next?

Our researchers are investigating a new, risk-based screening program for breast cancer. They are also investigating risk-based screening approaches for lung cancer, to help establish a structured approach to early detection of lung cancer.

To help improve outcomes for priority populations, they are also developing new modelling platforms for individual populations such as Aboriginal and Torres Strait Islanders, in collaboration with these communities.

 You can find out more about our work in cancer research at [cancercouncil.com.au/research](https://cancercouncil.com.au/research)



## This is Professor Jacob George

**He is a liver cancer researcher and Director of the Storr Liver Centre.**

Liver cancer is one of the top 10 causes of cancer death in Australia, but there have been no new, first-line treatments developed in the past decade. Sadly, the survival rate for patients is very poor, with only around 19% of people living for five years or more after diagnosis. Every day, we see patients with large, inoperable tumours, and we know what their outcome will be.

During the past decade, the number of liver cancer cases in Australia has grown about 350% and we expect to see a significant increase in rates of liver cancer diagnosis until 2035. In Australia, seven out of 10 cases are due to the liver damage caused by viral hepatitis, which disproportionately affects migrant and lower socio-economic communities.

In our current research funded by Cancer Council NSW, we are investigating a new way to combat drug resistance in liver cancer.

Unfortunately, liver cancer has a high rate of recurrence. The reason cancers recur is that there is a population of stem cells, comprising less than 1% of the tumour, that are extremely resistant to treatment.

My team and I are looking at the specific markers that identify liver cancer stem cells and developing aptamer molecules, also known as chemical antibodies, to target those markers. We have also shown these aptamers can be combined with a widely used anticancer drug to form a 'therapeutic complex'.

We've had very exciting laboratory results – we can demonstrate that these aptamer targeted drugs reduce tumour number and size and can ultimately allow the test subject to live longer. Since stem cells are not unique to liver cancer, aptamer mediated treatments could be used to treat a range of other cancers.

**Professor Jacob George**  
Director, Storr Liver Centre

**“We are investigating a new way to combat drug resistance in liver cancer.”**





# We're preventing

To reduce cancer by encouraging and supporting people to lead healthy, cancer-smart lifestyles

Preventing cancer is one of the most effective ways to create a cancer free future. Research shows that one in three cancers can be prevented. We can reduce cancer risks by empowering communities to lead healthier, cancer-smart lifestyles through our sun protection, tobacco control and nutrition initiatives.

## Improving sun protection

Australia has one of the highest rates of melanoma in the world, making skin cancer prevention a high priority.

Our **SunSmart** program has continued to help protect school-aged children from exposure to harmful UV radiation, reducing their risk of developing skin cancer later in life. This year, the program reached almost 90% of early childhood centres, 80% of primary schools and about half of out of school hours care services. To further support NSW primary schools to implement **SunSmart** policies and practices, we developed a suite of resources to increase **SunSmart** hat wearing, through the Cancer Institute Innovations in Cancer Control grant.

Men over the age of 40 are one and a half times more likely to be diagnosed with melanoma and two and a half times more likely to die from the disease than women of a similar age. Now in its fifth year, our **Improve Your Long Game** program – aimed at this often hard-to-reach demographic – has continued to empower golf clubs to encourage good sun protection behaviours among players. Evaluation of the program has delivered positive results, with 97% of participating

clubs recommending the program. In 2018/19, we introduced new systems to increase the program's efficiency and reach more clubs across the state.

## Addressing the link between smoking and mental illness

Tobacco smoking remains the leading preventable cause of cancer in Australia. Concerningly, smoking rates remain high among vulnerable groups, including people living with severe mental illness. Our **Tackling Tobacco** program continues to build the capacity of community service organisations working with these priority populations to address smoking and give their clients the support they need to quit. In the past 18 months, 26 community managed mental health services were a part of the **Tackling Tobacco** mental health trial, funded by the NSW Ministry of Health. Evaluation of the program began in 2018/19 and results will be released in 2019/20.

## Helping families eat well

Eating well and maintaining a healthy weight can lower your cancer risk. However, less than one in 10 Australians eat the recommended five serves of vegetables each day. Our interactive **Healthy Lunch Box** website makes it easier for parents to plan and pack a healthy lunch box. In 2018/19 we commissioned an independent website review, which found the **Healthy Lunch Box** website was unique in the market and had the highest overall quality rating of all reviewed websites and apps, scoring 4.2 out of 5. This reflected the website's high level of functionality, quality of information and aesthetics.

## Cancer Prevention Community Survey

Knowing the community's views on various preventable cancer risk factors helps us to understand where progress is being made and areas where we need to strengthen our focus. Our 2019 Cancer Prevention Community Survey measured the behaviours, attitudes and opinions of 3,213 NSW adults across a range of topic areas related to cancer risk and prevention. Previous surveys were conducted in 2013 and 2016.

### What's next?

Our 2019 Cancer Prevention Community Survey results suggest that the community is well educated about the links between sun exposure and skin cancer. However, less than half of participants knew that not eating enough fruit or vegetables, being overweight or obese and being inactive were risk factors for developing cancer. Additionally, only 54% knew that drinking alcohol increased their cancer risk. We will analyse the survey data in more detail and start to publish our findings in 2019/20.

 You can find out more about our work in cancer prevention at [cancercouncil.com.au/cancer-prevention](https://cancercouncil.com.au/cancer-prevention)



# This is Susan Ellwood

She is the Relieving Assistant Principal at Blaxland Public School and has championed our **SunSmart** hat wearing project.

We're a relatively small school of 150 students. We had about 80% of students wearing hats, but we could never seem to increase that. The students viewed it as a big chore – they didn't see the value and they would only do it because the teachers were nagging them.

The other aspect was that some teachers often didn't wear a hat while on duty, which the kids would see.

I'm so pleased we're involved in the **SunSmart** hat wearing project. All the resources made it so much easier to develop an action plan and teach kids those deeper understandings and develop **SunSmart** habits.

The resources made it so easy for staff to bring the lessons into the classroom. We could use the information from the posters at our school assemblies, then teachers were able to take the focus, such as UV radiation facts and myths, back to the classroom and make it grade-specific.

We got to 95% of students wearing hats and then just couldn't crack that final 5%. We got around that by providing classes with three spare hats. If a child forgot their hat, there was a backup.

We now have 100% of children consistently wearing **SunSmart** hats. The kids can now see the reason for our rule, which I think has helped a lot.

All the resources Cancer Council NSW provided made that so much easier to achieve. We could aim for those high expectations, because we had the explicit teaching supported by the resources and we were able to be systematic with our action plan.

## **Susan Ellwood**

Relieving Assistant Principal, Blaxland Public School

**“The resources made it so easy for staff to bring the lessons into the classroom.”**





# We're supporting

To empower and support people affected by cancer, so that no one faces cancer alone

We are here to support people affected by cancer through every challenge a diagnosis may bring. Cancer can affect every part of a person's life. We provide practical and emotional support, as well as evidence-based information at the times when it is most needed.

## Accessing the right services at the right time

Although a cancer diagnosis can impact every part of a person's life, we know that many people are never asked about their emotional wellbeing or practical needs. Patients also tell us that they can have difficulty navigating the available information and services.

Based on-site at major cancer treatment centres, the new Cancer Council Liaison role aims to improve awareness of, and access to, cancer information and support services for people diagnosed with cancer and their family and carers. We want to ensure people are connected to the right services, in the right place, at the right time. Our Liaisons complement the work of health care professionals, providing people living with cancer and their carers with emotional support, evidence-based information and referral to Cancer Council NSW and other community support services.

We worked closely with Northern Sydney Cancer Centre, Concord Cancer Centre and Albury Wodonga Regional Cancer Centre to ensure the Liaison position would add value for both patients and health professionals and would complement existing services.

The positions will be evaluated at 12 and 24 months, and we hope to locate up to 18 Liaisons across NSW in the next three to five years.

## Providing face-to-face financial counselling

To reduce the financial impact of cancer for people in the Hunter and Central Coast communities, we offered face-to-face counselling for the first time. It complemented our existing telephone financial counselling program. Running from February 2018 to February 2019, the face-to-face **Financial Counselling Service** pilot was made possible thanks to \$97,050 in funding from Greater Charitable Foundation.

This free financial counselling service was designed to help people affected by cancer get access to professional support, reducing the financial burden of their diagnosis, alleviating stress and improving their overall wellbeing.

Throughout the pilot, we waived almost \$84,000 of debt on behalf of 126 people affected by cancer. In addition, we referred more than 120 patients to our other support services and referred 60 people to other organisations.

After receiving face-to-face financial counselling, patients were more aware of the options available and felt better able to cope with their financial situation. There were also observed reductions in financial stress. Although the external funding support has ended, we are continuing to provide this face-to-face service in the Hunter and Central Coast communities.


## Improving access to Transport to Treatment booking

With generous funding from Newcastle Permanent Charitable Foundation, we began the roll out of an Australian-first **Transport to Treatment** booking system called TRIPS. This integrated, online system will increase the reach, efficiency and effectiveness of our statewide **Transport to Treatment** service and create a strong foundation for the expansion of additional transport services in the future. Tailored to meet the requirements of our **Transport to Treatment** service, TRIPS allows users to update information in real-time, ensuring the safety of drivers and passengers at all times.

## What's next?

We want to expand two of our key **Pro Bono Program** referral services: **Workplace Referral Service** and **Small Business Referral Service**. This will mean increasing the number of volunteer HR, recruitment professionals and small business accountants involved in the program, as well as working with health professionals to increase awareness of these services for their clients.

With almost 70% of people diagnosed with cancer now surviving, we are developing a strategy to expand our survivorship programs to more people living with cancer.

 You can find out more about our information and services by calling **Cancer Council 13 11 20 Information and Support**.





## This is Ellen Tailby

### She is our first Cancer Council Liaison.

From all the research we did, it was clear that cancer patients and their carers often don't know what services are available or where to look when they need more information, emotional support or help with practical things like their finances.

We also saw a need for someone to be there to support the health professionals. They are usually aware of Cancer Council NSW, but not familiar with all the services we can offer their patients.

Cancer affects many aspects of a person's life. I want patients to have the opportunity to talk about the whole picture and know what services are available.

Peter\* was in his 60s and was diagnosed with prostate cancer that had metastasised to his bones. He had finished his regime of chemotherapy and wanted to talk through living with advanced cancer.

He was overwhelmed with thoughts of the cancer spreading further. We talked about things that he could control and could focus on when those thoughts came into his head. Peter asked about working with ongoing side effects from living with cancer – how do you explain these to a future employer? We have a workplace support service that was the perfect referral for him to be able to talk through those issues.

I also referred him to our fortnightly telephone support group for people living with advanced cancers. As Peter wasn't prepared for early retirement his financial situation was becoming difficult, so I was able to refer him to our **Financial Counselling Service**.

I feel privileged that people share their journeys with me and that I can point them toward services that can really help them.

### Ellen Tailby

Cancer Council Liaison

**“I want patients to have the opportunity to talk about the whole picture and know what services are available.”**

\*Name has been changed to protect identity.





# We're advocating

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

We believe the community should have a say in what governments do about cancer. To achieve this, we bring evidence and people together to influence changes in policy, funding and legislation. We work closely with our 40,000-strong CanAct Community members to urge politicians to act on issues related to cancer.

## Campaigning to reduce the impact of cancer

In the lead-up to the 2019 NSW state election, we launched our **Saving Life 2019** campaign, which called on the next government to take steps to reduce the impact of cancer. In forming our campaign, we asked the CanAct Community to prioritise what actions they'd like to take to government. The four final issues were: improving funding for lymphoedema services, the need for smoke-free workplaces, reducing tobacco availability and restricting junk food advertising. This was the first time that tackling obesity has been a priority of the CanAct Community.

The campaign motivated more than 16,000 community members to sign postcards in support of our **Saving Life 2019** campaign. Volunteers and staff met with MPs and candidates more than 230 times, including at 17 candidate forums

held across NSW. The campaign attracted more than 200 pieces of media coverage.

## Tackling childhood obesity and junk food advertising

Almost one in four children living in NSW are overweight or obese\*. Junk food marketing can influence children's food preferences and their diet. It undermines parents' efforts to establish healthy eating habits and can set children up to become overweight or obese in later life, putting them at risk of developing 13 different types of cancer. We backed up our request for junk food advertising to be removed from state owned property with research. Concerningly, we found that 82% of food ads seen on NSW state transport infrastructure – specifically on Sydney buses and in train stations – were for unhealthy foods and drinks.

This means that a child travelling to school by train sees an average of 7.3 junk food ads per trip, which is equivalent to more than 2,800 junk food ads per year. We also found that three out of four ads on designated school buses were for unhealthy foods and drinks.

Our research gained media coverage in the *Sydney Morning Herald* and on multiple radio and television programs, and contributed to about

half of the overall **Saving Life 2019** campaign coverage.

Although no election promises were secured, the campaign resulted in two Ministers committing to further investigate food advertising in their portfolios.

Many in the community are unaware of the link between obesity and cancer. Promoting this issue through our **Saving Life 2019** campaign helped raise awareness, both among the community and parliamentary representatives.

## What's next?

We will continue to talk to the community and the state government about our priorities. Our focus on restricting food marketing to children can help people lead healthy lives and reduce their cancer risk.

 You can find out more about our work in advocacy at [cancercouncil.com.au/get-involved/campaign-with-us](https://cancercouncil.com.au/get-involved/campaign-with-us)

\*NSW Ministry of Health, NSW Childhood Overweight and Obesity Data Report [cited 8 October 2019]. Available from: [www.healthstats.nsw.gov.au/Resources/child-obesity-data-report.pdf](http://www.healthstats.nsw.gov.au/Resources/child-obesity-data-report.pdf)

# This is Hiba Jebeile

**She is a dietitian working in childhood obesity, a mother of two, and was part of our *Saving Life 2019* campaign.**

My kids are aged 7 and 9. Children are impressionable – every time they pass an ad for junk food, they ask if they can have the product. I feel like my children are constantly asking for junk food and I'm constantly having to say no.

We used to pass a billboard on the way to school with an ice cream advertisement that was clearly targeting kids – it had images of kids eating ice cream – and every time my kids walked past it, they asked for ice cream. Eventually, we changed the way we walked to school.

It's upsetting, because as a parent you feel guilty for constantly saying no. Food is something that should be enjoyed and be a positive and social experience for children. It becomes very stressful for a lot of families, because kids only want fast food or junk food, which can take the enjoyment out of mealtimes.

Junk food advertising creates a perception that these foods are part of an everyday diet, particularly when they're on government-owned property, or any environment where you expect regulation. Government and the food industry know these are not the kind of foods kids should be eating all the time, but the industry is still allowed to target kids with bright colours and designs that they know will appeal to them. This needs to change.

It makes me angry that money is being put ahead of our children's health, which is why I spoke about how junk food advertising affects our family at the launch of the *Saving Life 2019* campaign.

Parents and members of the public can submit complaints when they see advertising targeting children that breaches the standards. However, this is industry-regulated and there are no real consequences – I have had two complaints upheld but the ad continues to be used. There's a limit to what parents can do to protect their kids from these ads.

The government has a responsibility to provide a healthy environment for families. They have a responsibility to make having the healthy choice, the easy choice.

**Hiba Jebeile**  
Dietitian

**“It makes me angry that money is being put ahead of our children's health.”**





# We're fundraising

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

Our research, prevention, information and support and advocacy work are only made possible through fundraising. We receive more than 94% of our funds from the community and simply wouldn't exist without the thousands of passionate and hard-working people who donate and raise funds for us every year, in what continues to be a very tough fundraising environment.

## An innovative future for fundraising

Creating a cancer free future is a long-term goal, so we are committed to finding innovative and sustainable ways to continue funding our work. This year, we focused on enhancing our supporter experience and identified campaigns that could reach parts of the community we have not previously engaged.

We saw 350% growth in **The Longest Day** revenue compared to 2017/18 and 400% more registrations. This 72-hole golf marathon is targeted towards males aged 25 to 65, who have historically been a challenging group for us to reach.

This year, we continued to build on the successful changes we made to **The March Charge** in 2017/18. The campaign's new online platform made fundraising more engaging and fun through gamification, which

rewarded actions such as donating to yourself and personalising and sharing fundraising pages. These techniques have also been used in other campaigns including **Do It For Cancer**, **BANuary**, **7 Bridges Walk** and **The Longest Day**.

We also used data insights to help identify what motivates people to support us on our community fundraising platform, **Do It For Cancer**. These insights were used for **BANuary**, a campaign that challenges people to give up a bad habit for January, which saw 300% more participants and a 350% growth in revenue compared to 2017/18.

## Thank you to our supporters

The community continued to show incredible support this year for our most-loved campaigns. In May, more than 6,500 supporters gathered their friends, colleagues and communities for **Australia's Biggest Morning Tea**, raising \$4.6 million. On **Daffodil Day** 2018, we were joined by nearly 3,000 amazing volunteers who supported 425 **Daffodil Day** stalls, raising \$1.2 million.

**Box Rallies** continued to be a fundraising powerhouse. In 2018/19, 476 teams drove cars worth less than \$1,000 each across Australia, raising almost \$5.3 million and bringing the total amount raised in a decade of rallying to an incredible \$20 million.

## Building partnerships

This year, we continued to grow our valued relationships with our corporate partners, trusts and foundations and major donors. Newcastle Permanent Charitable Foundation donated \$154,000 to fund the development and implementation of an online booking system for our **Transport to Treatment** program. Bingo Industries raised \$353,000 during their 2018 Deep Blue Gala Dinner, which will be used to support cancer patients in NSW going through financial hardship.

## What's next?

Our supporters are the reason we can exist, so building long-term, meaningful relationships with them is a priority. We plan to achieve this by using technology to improve their experiences with us, while continuing to find new ways to raise funds. We will also continue to create strategic partnerships through our philanthropy work.



# MORE THAN 246,000 PEOPLE DONATED TO US IN 2018/19, RAISING \$63.8 MILLION

10,535 people walked 28km for the  
**7 Bridges Walk** raising

**\$1.4 million**

147 generous estates contributed

**\$17.5 million**

from gifts in wills.

1,133 incredible **Do It For Cancer**  
supporters chose to raise

**\$1.9 million**

their way, whether by shaving their  
head, hosting an event or quitting  
a bad habit.

At our annual **POSH Gala Ball**,  
650 guests raised more than

**\$1.1 million**

More than 3,000 survivors  
and carers raised

**\$3.4 million**

across 34 **Relay For Life** events

During **The March Charge**,

4,565 people in NSW got active,  
Charging 447,822km and raising

**\$874,000**

45 **STARS** local celebrity dance  
competitions raised

**\$2.3 million**



You can find out more about our fundraising activities and how to  
get involved at [cancercouncil.com.au/get-involved/fundraising](https://cancercouncil.com.au/get-involved/fundraising).

60,283 people gave regular monthly  
gifts worth

**\$15.9 million**

**James Freeman founded Box Rallies, which have raised \$20 million for cancer research since 2010.**

I'm fortunate to come from a very close family. Mum had bowel cancer a few times, but she'd received treatment and things were looking pretty good. Then we found out Dad had prostate cancer. When Dad started to go through his treatment, Mum's came back very aggressively.

My brother and I became the primary carers for both my parents. I would take them to their appointments and sit with them while they were having their chemotherapy – it was very tough.

Mum and Dad died within a year of each other. I'd been overseas for quite a while, and when I came back to Australia to care for them, I felt like a stranger in my own country. I started

thinking I wanted to see more of Australia and the idea for the **Sh\*tbox Rally** grew from there.

I wanted to turn fundraising on its head and inject humour into what we were doing. Cancer is awful, and because you're dealing with something that is grim, the fundraising can also be pretty grim. When you say you are going to take this sh\*tbox car and drive it from one side of the country to another, across very rough outback roads, people laugh and say you're mad.

The rallies themselves are so much more than a long, challenging drive. We build spirits, belief, comradery, a support network and what I call our Rally Family.

I never expected that we'd be in year 10 and have three rallies a year, 250 teams each rally and a target of raising \$5 million a year. I am thrilled with what we are achieving.

**“I wanted to turn fundraising on its head and inject humour into what we were doing.”**



**James Freeman**  
Founder, **Box Rallies**

# We're working with the NSW community

We work with our communities across NSW by creating awareness about our information and support services, influencing what politicians do about cancer, engaging and supporting fundraisers, and providing education on cancer prevention. Our focus is understanding our communities' insights and needs.



## Helen White, Carer

📍 ARMIDALE

My 84-year-old mother Margaret had a cancer removed on her face. When the tests came back, it showed they didn't get it all – it had gone into a nerve and she needed a five-week course of radiation treatment in Tamworth. Mum lives in Guyra and my sister and I both work, so to have five weeks off would have been difficult. She stayed in Armidale with me so I could look after her, which is still an hour and half each way to the hospital.

Mum's oncologist told us about Cancer Council NSW's **Transport to Treatment** service. I thought it might be okay, but I didn't know how Mum would handle it and whether she'd be comfortable with people she didn't know.

Cancer Council NSW and the volunteer drivers couldn't have been more helpful. Most of the drivers had either had cancer or had a family member who had been through cancer, so they knew what mum was going through and could help take her mind off things. They were just so good to Mum – it was more like being on an outing with a friend! They were always on time, they'd chat with her, walk her into the hospital, then be there when she was finished to drive her home.

The drivers just took all the stress out of it for us. I couldn't recommend them highly enough – I just think it's one of the best things ever.

**"They were just so good to Mum – it was more like being on an outing with a friend!"**

## Melissa Jackman, *ENRICHing Survivorship* participant

📍 BATHURST

When I found a lump in 2015, I didn't do anything about it for a month – I was in denial. When I had biopsies taken, I knew I had breast cancer.

I had a bi-lateral mastectomy, chemotherapy, radiation, and will be taking hormone blocker tablets for at least 10 years. I also had a breast reconstruction last year.

The **ENRICHing Survivorship** program showed me the importance of taking time to look after my health. The sessions discuss healthy eating and showed me exercises that I can do anywhere.

Conversations at **ENRICHing Survivorship** are ones you

never have with your husband

or best mate. In one session,

we discussed the stages of grief.

I thought I was handling cancer,

but I realised I was still in the anger phase. My cancer

experience taught me to reprioritise my life. I used to

paint at school before I had kids, but hadn't for years.

I now attend an art class each week.

**"The program showed me the importance of taking time to look after my health."**



Our network of offices, retail stores and information and support services are located across metro, regional, rural and remote NSW.



**12**

Cancer Council  
NSW offices



**24**

Information  
services

## David Naylor, Founder of the Walk For Sheree

📍 WOLLONGONG

I started the **Walk For Sheree** to give back and help people who are affected by cancer. I also wanted to do something in my daughter's memory.

Before 2015, life was rosy. Sheree and her husband had three children between the ages of three and seven, and we were just like any other family.

Then Sheree was diagnosed with melanoma on her tongue. She was treated for it and we thought that was that. A short time later she began complaining about a tooth ache. She went to a dentist but there was nothing wrong with her teeth, so her dentist referred her back to her oncologist.

It turned out Sheree had cancer in her neck. She had an operation and in the process a nerve in her neck was severed and she lost the ability to drink and eat.

It was all downhill from there. We lost Sheree in April

2017. In October that year, I gathered a group of Sheree's friends and we did **7 Bridges Walk**.

With the help of family and friends, we raised \$20,000 as a team. We were extremely proud that we could help make a difference.

I came up with the idea to hold our own walk in Sheree's memory. The first **Walk For Sheree** took place in December 2018. We had more than 500 walkers and raised \$8,500 for Cancer Council NSW. We're holding the **Walk For Sheree** again this year, hoping to raise \$10,000.

It might not be in my time, but I am hopeful that one day we will live in a world without cancer. If we can play our part, then we've done well.

**"It might not be in my time, but I am hopeful that one day we will live in a world without cancer. If we can play our part, then we've done well."**



## Veronica Leonardo, Cancer Council NSW Advocate

📍 PENRITH

My breast cancer diagnosis in 2016 was a surprise because I felt like I was doing the right things – I was fit, and I usually ate well. Still, there were signs – I was experiencing incredible fatigue, and I couldn't explain why. I was constantly getting colds that I could never fully shake.

My husband and I married 18 months before my diagnosis. It was a time when we were considering children, and my diagnosis had a huge impact on those plans. I was devastated and for the first six weeks I wasn't coping. Thankfully, I found a fantastic counsellor that Cancer Council NSW subsidised.

I had an aggressive form of cancer, so I had a right breast mastectomy that involved removal of lymph nodes in my armpit, in addition to six months chemotherapy and five weeks of radiation and then a year of immune therapy.

I remember saying to my surgeon that once the storm passes, I would like to try to support others with cancer. I knew about Cancer Council NSW from a research perspective but didn't realise the impact of their advocacy work, some of which I got to benefit from, such as not paying for parking while going through treatment. I completed the two-day Cancer Council NSW advocacy training in 2018 and became very involved with the **Saving Life 2019** campaign. I got to see the amount of work that goes into advocacy and the impact we can make. There's just so much that needs to be done to support people affected by cancer. I plan to continue my advocacy work and make my experience count for something.

**"I plan to continue my advocacy work and make my experience count for something."**



**30**

Transport to  
Treatment services



**11**

Patient Accommodation  
services



**7**

Retail  
stores



# We're developing our people

Our staff and volunteers are our greatest assets. We value their commitment, passion and contribution to our vision. We support them by providing a safe and inspirational work environment that celebrates achievements and recognises talent.

## Implementing our volunteer and employee engagement survey

In 2018/19, we asked our staff and volunteers what they enjoyed about working with us and where we needed to improve. Overall, 81% of employees said they were passionate about working with us, which was a 1% increase on the previous survey held two years ago, and an encouraging 5% ahead of the industry benchmark. For volunteers, 89% were passionate about their role with us – a 1% increase on the previous survey. Staff told us they were most satisfied with how we build awareness and belief in our work, mission and values, their ability to foster good working relationships with co-workers and the priority we place on safety. The area needing the greatest improvement was ensuring technology is up-to-date and used well.

Volunteers told us that, while they're also happy with the awareness of our mission, they would value having more input in day-to-day decision-making.

## Conducting inspirational place to work and volunteer workshops

We conducted 12 workshops across each of our communities, asking a total of 220 staff and volunteers how we could achieve our 2023

outcome of being an inspirational place to work and volunteer. At each of the workshops, we brainstormed to build a shared meaning of the outcome and discussed ideas about the actions we could take over the next five years to bring this outcome to life. The ideas arising from the workshops have been combined with our 2019 engagement survey results, to develop our five-year priorities and an organisational action plan for 2019/20.

## Building diversity in our workplace

We want our workplace to better reflect the communities we support. To help achieve this, we have drafted the organisation's first **Diversity and Inclusion** strategy, which is now being reviewed by stakeholders from across the organisation.

## Developing leaders

We are developing bold and transformational leadership among our people. Our **Leadership Development** program is designed to create leaders throughout our organisation, supporting a philosophy that our people can lead from wherever they stand. The **Leadership Development** program is a fantastic opportunity for our current and aspiring leaders to drive greater innovation and be champions for creating an agile, community-centric culture.

## Growing careers

Staff have consistently highlighted career development in engagement and exit surveys as one of the main reasons that they choose to leave us.

We delivered two career development initiatives, **My Career** and **Career Conversations** workshops across all our offices this year to support both managers and team members, including volunteers, to have more effective discussions about career development and progression.

## Launching our Wellness Program

In 2018/19 we launched our **Wellness Program** in response to feedback from staff and volunteers in 2018.

We kickstarted it with health expos across NSW, which included information on all aspects of health and wellbeing. **Lunch and Learn** sessions have covered sleep and fatigue management, busting food myths and mindfulness. We continue to offer and promote physical programs, including **The March Charge**, yoga, personal training and therapeutic massage in-house.


We also piloted a program addressing mental health in the workplace. The aim of the program is to help our leaders identify the early signs of mental health challenges faced by staff and volunteers. The program will be launched in 2019/20 to equip our leaders with the necessary information and resources to provide support where it is needed.

## Recognising our people

Our **Make Your Mark** recognition program has continued to evolve this year with our inaugural CEO Awards event held in August 2018. The awards celebrated 80 employees and volunteers who received recognition for the significant contributions they made to the success of our organisation in 2018/19.

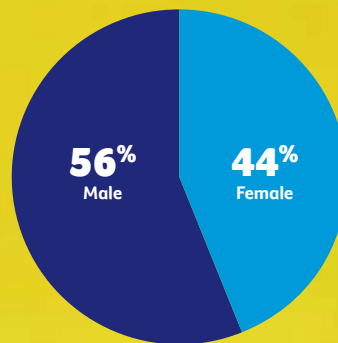
### What's next?

Thanks to our engagement surveys and workshops, we now have an unprecedented level of insights that we can use to improve our staff and volunteers' experiences. Next year, we will put this valuable feedback into action in several exciting ways, extending on existing programs and introducing new initiatives. We will also implement our new Diversity and Inclusion strategy, *Being Me @ NSWCC*.

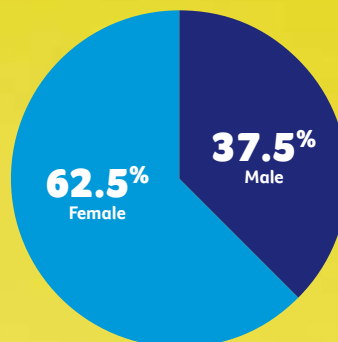
 You can find out more about working or volunteering with us at [cancercouncil.com.au](https://cancercouncil.com.au)

## Leadership profile

Our Board members volunteer their time to provide governance across all our work.



Board level<sup>\*\*</sup>



Executive level

## Workforce profile

Across 2018/19, our average workforce was:



■ 1,773 registered volunteers  
■ 365 employees<sup>\*</sup>

Across 2018/19, a total of **2,436 volunteers** dedicated their time, energy and passion.

<sup>\*</sup>Permanent and contract employees (excluding casuals).

<sup>\*\*</sup>The number of females this year is lower than males because there was a vacancy on the Board.



Volunteer Ben Liyanagama with staff members Jasmine Enright, Oliver Woolrych and Angelica Chu.

# We're working with Aboriginal and Torres Strait Islander people

Reducing the impact of cancer for Aboriginal and Torres Strait Islander people is a priority. Aboriginal Australians are 60% more likely to die from cancer than non-Aboriginal Australians\*. This year, we continued to work together with Aboriginal and Torres Strait Islander communities and organisations to improve cancer outcomes.

## Implementing Cultural Respect training for all new starters

As part of our commitment to be a welcoming, culturally safe and responsive place for Aboriginal and Torres Strait Islander people, this year we embedded Aboriginal Cultural Respect training into orientation for all new staff. This included forming a partnership with EVOLVE Communities to deliver the training, with Elder and Director Munya Andrews as the facilitator. The workshops developed our staff's understanding of Aboriginal and Torres Strait Islander culture and helped them learn culturally appropriate ways to communicate and connect.

## Building trusted partnerships

Our Western NSW team collaborated with Western Local Health District staff to present together at the Cancer Institute NSW Aboriginal Cancer Network Forum. The presentation was on the topic of Yarning About Cancer in our Local Region. This was a great platform to showcase all the initiatives happening across the state, share information and identify priorities.

## Developing a Reconciliation Action Plan

Our 2019-23 strategy prioritises partnering with Aboriginal and Torres Strait Islander people to improve cancer outcomes. We are

committed to developing a new **Reconciliation Action Plan (RAP)** with our RAP Strategy Leadership Group, which includes the Aboriginal and Torres Strait Islander community, our executive leadership team and staff who work in our communities. Consultations with several Aboriginal and Torres Strait Islander organisations were held through National Reconciliation Week this year.

## Working with AHS to implement Tackling Tobacco

Since 2016, our **Tackling Tobacco** program, in partnership with the Aboriginal Health and Medical Research Council of NSW, has been rolled out at 10 Aboriginal Health Services (AHS) across NSW. Participating AHS have received up to \$15,000 each, plus support from local Cancer Council NSW staff, to enact and embed organisational changes that address smoking. Some of these changes include training staff in smoking cessation, developing locally tailored non-smoking information materials and holding community events to raise awareness about the dangers of tobacco.

### What's next?

A key focus area of our 2019-23 strategy is improving cancer outcomes for priority populations. We aim to partner with and support Aboriginal and Torres Strait Islander people, culturally and linguistically diverse communities and lower socio-economic communities.

The year ahead will see us working with Reconciliation Australia to further refine our **RAP**, with a view to seek endorsement and launch our **RAP** in 2019/20.

I'm the Aboriginal Liaison Officer for the Western NSW Local Health District at Bourke Hospital. I've been working in health for 15 years and have worked with all sorts of people affected by cancer and undergoing palliative care.

Through my work in health, I realised that many Aboriginal Health Workers in Western NSW aren't aware of the information and services available to help Aboriginal people affected by cancer. So, together with Cancer Council NSW, we held two Yarning About Cancer forums to try and improve this.

At the forums, we had stalls so people could mingle and listen to presentations about topics like cancer literacy and prevention. It was a great way for local health workers to get to know each other and learn about each other's work. The feedback we got from the forums was very positive, so we'd like to do more in the future.

### Louise Brown

Aboriginal Liaison Officer,  
Western NSW



\*Cancer Council NSW Aboriginal Patterns of Cancer Care study.



# We're improving our ways of working

We are continually reviewing our tools and processes to ensure we are efficient, effective and focused on high priority actions that have the greatest impact for our community. Our new five-year strategy will help us keep the community at the heart of everything we do, and be ready to adapt to changing needs, trends and opportunities.

## Improving project management

In 2018/19, we launched a Project Management Office (PMO) to improve the transparency of projects across the organisation. Our new PMO established standardised procedures and processes, toolkits, and support structures. This allows us to select and prioritise initiatives and understand how our projects are performing through enhanced reporting.

We also focused on building project management skills among our staff and volunteers through mentoring, training and shared ways of working.

## Better managing our risk

This year, we revised our organisational risk management framework. This helps reinforce accountability for risk management and ensure that risks are managed in a consistent and effective manner.

We know that effective risk management improves efficiency, protects our reputation and is a key way to achieve our strategic outcomes. We will continue to evolve our risk processes in coming years.

## Proactively driving strategy development

This year, we developed our 2019-23 strategy. While our vision of a cancer free future remains the same, our new strategy shows a shift in our thinking. In the past, our priorities were based on our areas of work, but we are now focused on the collective outcomes we want to achieve during the next five years. This shift will allow us to put people affected by cancer, our supporters, partners and communities at the centre of what we do and how we make decisions.

To help clarify our organisation's role in reducing the burden of cancer, we surveyed our volunteers and employees and reviewed what other organisations are doing. We also interviewed health sector leaders, held focus groups with health care professionals and conducted a NSW general population survey. These results helped inform our strategy by identifying unmet needs we can focus on fulfilling.

## What's next?

We will continue to invest in technology and systems to be an innovative, agile and effective organisation.

Next year, we will be focused on improving the quality of decision-making across the organisation by having a better understanding of our supporters and improving the way we use this information. This will improve our supporters' experience, while at the same time creating better employee engagement and effectiveness.

The IT team are vital for the day-to-day operations of Cancer Council NSW. I am responsible for all the technology needs and smooth operation of IT resources, so staff and volunteers can perform their tasks without any disruption. I feel proud knowing that I am not just working but also helping to support a cancer free future.

**Sashank Singh**  
Systems Engineer



# Our performance over time

This year, we invested more money than ever before into **life-saving research** and continued to fund external researchers.



We also partnered with government and collaborators, seeking competitive grant and contract funding.



	2015	2016	2017	2018	2019
Number of research grants received	14	12	16*	13	21
Total research grants received (\$m)	0.9	1.5	2.6*	1.9	2.3

\*Figures corrected from 2017/18 Annual Report.

With around 396 Australians being diagnosed with cancer every day, we know there is a growing demand for **information and support** services. We continue to see an increase across a range of our cancer support services.

## We are improving access to treatment through our patient transport and accommodation services.

2017 was the first year we were able to collect data for our **Transport to Treatment** service. Since that time, we continue to help more people get to their treatment.

### Number of trips by our Transport to Treatment service:



	2017	2018	2019
Number of trips	20,296	22,138	28,407

We also continue to see an increase in the number of patient accommodation nights supported by Cancer Council NSW.

### Number of accommodation nights:



	2015	2016	2017	2018	2019
Number of accommodation nights	19,246	19,878	19,897	21,074	23,144

## We are supporting cancer patients with a loss of income by providing free legal, financial planning, workplace and small business assistance.

We know that cancer can place a huge financial burden on patients and their loved ones. That is why we are dedicated to increasing the financial assistance payments we provide to people in acute financial hardship.

### Financial assistance payments (\$):



	2015	2016	2017	2018	2019
Financial assistance payments (\$)	486,083	508,000	587,052	943,000	1,013,258

## We are providing easy-to-understand information about specific types of cancer, treatments, and emotional and practical issues.

Last year, we launched a podcast series called *The Thing About Cancer*. Next year, we will launch new episodes and explore new ways to share our podcasts through social media and popular streaming channels.

There was a 316% increase in the number of people visiting our *Online Community* this year.

### Individual listens:



2018	2019
<b>16,451</b>	<b>13,194</b>

We did not produce new episodes this year and therefore we saw a decrease in the number of individual listens.

	2015	2016	2017	2018	2019
Visits to the Cancer Council Online Community (launched in 2017)			<b>27,998</b>	<b>53,120</b>	<b>221,004</b>
Understanding Cancer books and fact sheets distributed in print and digital formats	<b>252,956</b>	<b>257,038</b>	<b>218,219</b>	<b>192,147</b>	<b>179,813*</b>

\*As more people choose to access information online, there is lower demand for information in printed form.

We receive pro bono contributions from organisations who generously dedicate their time to support to cancer patients and carers.

### Number of matters:



2015	2016	2017	2018	2019
<b>3,457</b>	<b>3,882</b>	<b>3,518</b>	<b>3,719</b>	<b>4,003</b>

Since 2017, we have continued to increase the number of matters we refer to our *Pro Bono Legal and Financial Program* across Australia.

## We are committed to enabling the community to **fundraise** for a cancer free future.

This year, we increased our fundraising income, raising **\$63.8 million**.



	2015	2016	2017	2018	2019
Total fundraising income (\$m)	<b>67.4</b>	<b>67.4</b>	<b>66.9</b>	<b>56.5</b>	<b>63.8</b>
Number of people who left us a gift in their will	<b>121</b>	<b>152</b>	<b>150</b>	<b>108</b>	<b>147</b>

We had a difficult period last year and saw a decrease in fundraising, so it is very pleasing to have delivered a stronger outcome this year. The fundraising landscape continues to be a competitive one and the broader economy and low wages growth are having an impact.

## We are working to **prevent** cancer by creating healthier environments and empowering people to reduce their cancer risk.

### We are committed to reducing the impact of skin cancer in NSW.

We are continuing to expand our *SunSmart* influence among early childhood services and primary schools. Since 2014, our membership has grown to more than 6,700 *SunSmart* schools and services now receiving resources and year-round support to implement a best practice sun protection policy.

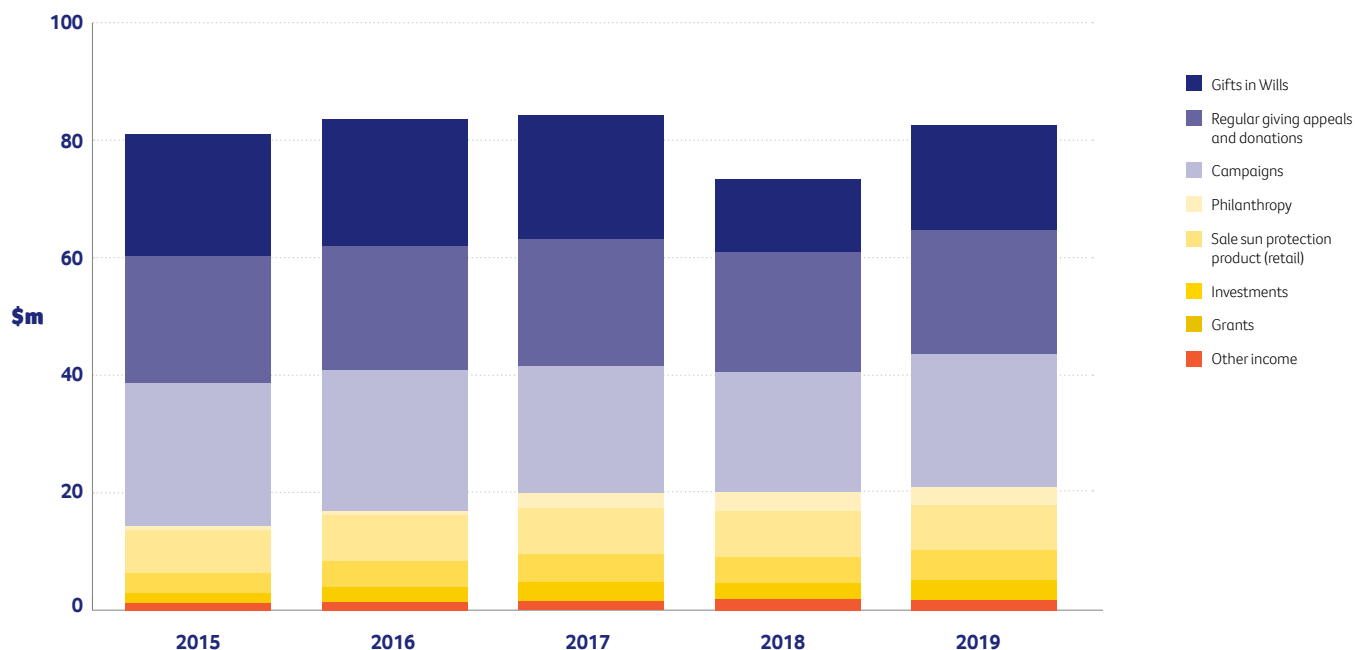


	2015	2016	2017	2018	2019
Early childhood services	<b>3,042</b>	<b>3,402</b>	<b>3,649</b>	<b>3,646</b>	<b>3,926</b>
Primary schools	<b>1,947</b>	<b>2,037</b>	<b>2,043</b>	<b>2,059</b>	<b>2,065</b>
Out of hours school care	<b>440</b>	<b>470</b>	<b>591</b>	<b>578</b>	<b>784</b>

**Thanks to our community's support, we are here to help everyone affected by cancer when they need it most.**



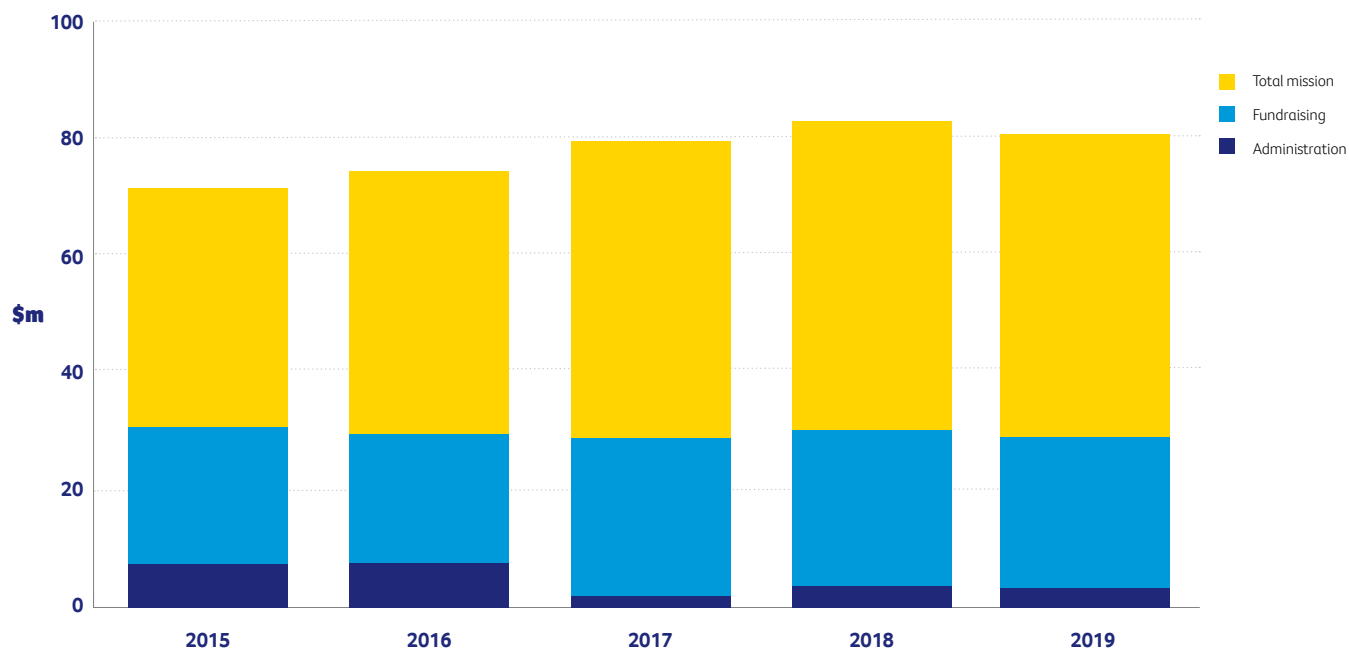
# Where the money comes from



	2015		2016		2017		2018		2019	
	\$m	%	\$m	%	\$m	%	\$m	%	\$m	%
Gifts in Wills	20.7		21.6		21.1		12.3		17.5	
Regular giving, appeals and donations	21.7		21.1		21.7		20.6		20.9	
Campaigns	24.3		24.0		21.6		20.3		22.5	
Philanthropy	0.7		0.7		2.5		3.3		2.9	
<b>Total fundraising</b>	<b>67.4</b>	<b>83%</b>	<b>67.4</b>	<b>81%</b>	<b>66.9</b>	<b>79%</b>	<b>56.5</b>	<b>77%</b>	<b>63.8</b>	<b>78%</b>
Sale sun protection products (retail)	7.3	9%	7.8	9%	8.0	10%	7.7	10%	7.6	10%
Investments	3.5	4%	4.4	5%	4.6	5%	4.5	6%	5.1	6%
Grants	1.7	2%	2.6	3%	3.3	4%	2.8	4%	3.4	4%
Other income	1.2	2%	1.4	2%	1.6	2%	1.9	3%	1.7	2%
<b>Total income *</b>	<b>81.1</b>		<b>83.6</b>		<b>84.4</b>		<b>73.4</b>		<b>81.6</b>	

\* Excludes capital gains on investments

# How we put the money to work



	2015		2016		2017		2018		2019	
	\$m	%	\$m	%	\$m	%	\$m	%	\$m	%
<b>Mission expenditure</b>										
Research	14.9		15.0		16.0		18.7		19.0	
Community engagement	7.3		9.7		11.3		12.3		10.6	
Advocacy and cancer prevention	4.6		5.1		6.5		4.8		4.4	
Cancer information and support	5.3		5.6		7.4		7.8		10.2	
Sale of sun protection products (retail)	6.9		7.4		7.4		7.2		7.2	
Direct mission support	1.7		2.0		2.1		2.0		0.8	
<b>Total mission</b>	<b>40.7</b>	<b>57%</b>	<b>44.8</b>	<b>60%</b>	<b>50.7</b>	<b>64%</b>	<b>52.8</b>	<b>64%</b>	<b>52.2</b>	<b>64%</b>
<b>Mission enabling expenditure</b>										
Fundraising	23.5	33%	22.1	30%	26.9	33%	26.6	32%	26.0	32%
Administration*	7.5	10%	7.7	10%	2.1	3%	3.8	4%	3.5	4%
<b>Total expenditure**</b>	<b>71.7</b>		<b>74.6</b>		<b>79.7</b>		<b>83.2</b>		<b>81.7</b>	

\*Items from these categories which are directly related to mission have been reallocated to Direct mission support

\*\*Excludes capital losses on investments

2016 and onwards reflects Total mission on a restated basis

2017 and onwards reflects administration costs allocated to mission and fundraising on a different basis

# Directors' report

For the year ended 30 June 2019

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The Directors of Cancer Council NSW (CCNSW) present their report with respect to the results for the financial year ended 30 June 2019 and the state of CCNSW's affairs at that date.

## Board of Directors

CCNSW'S Constitution provides that the Board directs its affairs. 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 CCNSW, including its members, volunteers, supporters, employees and the community.

The following persons were Directors of CCNSW at any time during or since the end of the financial year:

- |                         |                    |              |                   |
|-------------------------|--------------------|--------------|-------------------|
| • Mark Phillips (Chair) | • Toby Heap        | • John Laker | • Nerida Dean     |
| • Nicholas Adams        | • Lisa Horvath     | • Joe McGirr | • Vicki Wade      |
| • James Butler          | • Christine Howard | • Jane Young | • Haryana Dhillon |

## About Cancer Council NSW

Cancer Council NSW believes in a cancer free future and is the only organisation in Australia that works across every area of every cancer. Together with its volunteers, supporters, stakeholders and employees, CCNSW is committed to reducing the impact of cancer on individuals and the community, and to lessening the burden for people affected by cancer.

CCNSW is a member of a national federation of Cancer Councils that covers every state and territory across Australia. This federated model allows it to focus on opportunities, needs and initiatives within NSW, while collaborating nationally on issues that impact all Australians.

## Principal activities and how they assisted in achieving objectives

The principal activities of CCNSW during the year were aimed at achieving its short and long-term outcomes in the following focus areas. The page references beside each point refer to pages in this document, where we provide more detail on each of the focus areas, and achievements in this financial year.

- |                                  |                         |
|----------------------------------|-------------------------|
| • research                       | (pages 2-3, 4-5, 20)    |
| • prevention                     | (pages 2-3, 6-7, 20-21) |
| • information and support        | (pages 2-3, 8-9, 20-21) |
| • advocacy                       | (pages 2-3, 10-11)      |
| • fundraising                    | (pages 12-13, 21)       |
| • working with the NSW community | (pages 14-15)           |
| • our people                     | (pages 16-17)           |

## How we measure our performance, including any key performance indicators used

We assess the outcome of our work in relation to:

- the prevalence of adverse cancer risks and healthy behaviours
- the unmet needs of cancer patients
- the support of community and government leaders for our agenda in cancer control
- the quality and impact of results from research, and
- trends in net returns from revenue programs.



## The operational effectiveness of our work is measured by

- the coverage of target populations or settings with programs in cancer prevention and support
- mission expenditure ratios to ensure expenditure on mission delivery is maximised
- net income from fundraising and revenue streams
- fundraising cost: income ratios
- the number of NSW people engaged as donors, volunteers, advocates and research participants, and
- the match between the distribution of research funding and the burden of disease and cancer in NSW.

Our key performance indicators and our results for the past five years are outlined on pages 2–3 and 20–21. Data is captured and reported regularly to provide insight into performance and outcomes. CCNSW conducts regular business reviews and uses its internal auditors to review and advise on the performance of various programs and to identify opportunities for improvements. Annual performance planning is conducted for all staff to ensure alignment with the organisation's direction.

## Information on our Directors

### Mr Mark Phillips

**BCom (Hons), MCom, FAICD**

*Chair of the Board, Chair of the Remuneration and Nomination Committee from October 2018*

Appointed to the Board in April 2013 and re-appointed in April 2016 and April 2019

Mr Phillips has more than 30 years' experience in business, including a 20-year career with the Commonwealth Bank of Australia, where he was instrumental in the development of a range of new business divisions. Subsequently, Mr Phillips spent more than 10 years as the Chief Executive Officer of various companies listed on the Australian Securities Exchange and as an adviser to businesses and not-for-profit organisations. He is currently Chief Executive Officer of CatholicCare Sydney.

### Mr Nicholas Adams

**BCom (Marketing)**

*Chair of the Fundraising and Marketing Committee*

Elected to the Board in December 2015 and re-elected in December 2018

Mr Adams is the Chief Market Manager at Allianz Australia Insurance and has 23 years' experience in financial services and telecommunications marketing with companies such as Westpac, American Express Banking Corporation Company and Bupa. He has expertise in deploying MarTech and AdTech, loyalty and digital marketing, and building data-driven marketing programs to drive both revenue and customer engagement with brands.

Mr Adams was awarded the Australian Direct Marketer of the Year in 2009/10, and in 2013 was named as one 100 Global Marketing Leaders by Internationalist Magazine four years running between 2011–2015.

### Mr James Butler

*Member of the Remuneration and Nomination Committee, Chair of the Consumer Research Review Panel, Chair of the Relay For Life Steering Committee*

Elected to the Board in December 2014 and re-elected in December 2017

Mr Butler has been an active volunteer for Cancer Council NSW for almost 20 years, holding roles including Chair of the Hills Relay For Life Committee, and Chair of the Western Sydney Cancer Advocacy Network. He is a cancer survivor and has been a business owner for 25 years. Mr Butler is also currently Chair of the Hills Community Cancer Network.

### Dr Toby Heap

**BAppSc (Syd), MCom (Finance) (Syd), PhD (Syd), CF GAICD**

*Chair of the Investment Committee, Member of the Audit and Risk Committee, Member of the Fundraising and Marketing Committee*

Elected to the Board in December 2015 and re-elected in December 2018

Dr Heap is a Founding Partner of H2 Ventures, a venture capital investment firm, and a Board Member of equity crowd-funding platform Equitise. Previously he founded several digital startups, was a Research Fellow at the University of Sydney, and was a member of the Australian Securities and Investment Commission's Digital Finance Advisory

Committee. Dr Heap holds a PhD in Health Sciences from The University of Sydney. He was awarded a Churchill Fellowship in 2017 and an Eisenhower Fellowship in 2018 to study disruptive innovation.

### Professor Lisa Horvath

**MBBS, FRACP, PhD**

*Board Director Representative on the Cancer Research Committee until February 2019*

Appointed to the Board in April 2015, reappointed in April 2018 and retired from the Board in March 2019

Professor Horvath is the Director of Medical Oncology and Inaugural 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, and she completed her PhD in translational research at the Garvan Institute of Medical Research in 2004. Professor Horvath's holds academic appointments at both The University of Sydney and UNSW and is the Head of Clinical Prostate Cancer Research at The Kinghorn Cancer Centre/Garvan Institute of Medical Research.

### Ms Christine Howard

**B.Soc.Sc, Dip.App.Sc, Mid,**

*Member of the Fundraising and Marketing Committee*

Elected to the Board in December 2017

Ms Howard has 20 years of rural health management experience with a specific interest in understanding and responding to the health needs of rural areas. She has a background in nursing, midwifery and occupational rehabilitation before

moving to executive management in primary health. Ms Howard is currently employed as the Director of Three Rivers University Department of Rural Health at Charles Sturt University in Wagga Wagga and is a Board member of the Australian Rural Health Education Network.

**Dr John Laker AO**

**BEd (Hons 1) (Syd), MSc (Econ) PhD (London), HonDSc (Syd)**

*Chair of the Governance Committee, Chair of the Audit and Risk Committee, and Cancer Council NSW representative on the Cancer Council Australia Board from May 2018*

Elected to the Board in December 2014 and re-elected in December 2017

Dr Laker was Chairman of the Australian Prudential Regulation Authority (APRA), the regulator of the Australian financial services industry, from 2003 to 2014. Previously, Dr Laker had an extensive career in the Reserve Bank of Australia and also worked in the Commonwealth Treasury and the International Monetary Fund (IMF). Currently, Dr Laker is Chair of the Banking and Finance Oath, Deputy Chancellor of the University of Technology Sydney and a Director of ING Bank Australia; he is also an External Expert for the IMF. Dr Laker was made an Officer of the Order of Australia in 2008.

**Associate Professor Joe McGirr**

**MBBS, MHSM, FRACMA**

*Chair of the Remuneration and Nomination Committee until September 2018*

Elected to the Board in December 2014 and re-elected in December 2017 and retired in September 2018

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 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.

**Professor Jane Young**

**MBBS, MPH, PhD, FAFPHM**

*Chair of the Cancer Research Committee*

Appointed to the Board in June 2016 and re-appointed in June 2019

Professor Young trained in medicine in the United Kingdom in 1983, undertook a Master of Public Health in 1998 and completed a PhD in applied epidemiology at The University of Sydney in 2000. She holds joint appointments with The University of Sydney and Sydney Local Health District. Professor Young has undertaken research spanning the cancer journey and has an interest in surgical trials as well as developing and evaluating new models of care, promoting evidence-based practice and using data to improve cancer service delivery.

**Vicki Wade**

**Dip App Sc, BHsc N, MN**

Appointed to the Board in October 2018 and retired from the Board in August 2019

Ms Wade is a proud Noongar woman and has lived and worked in NSW on the lands of the Cabrigol people of the Darug Nation for over fifty years. She has dedicated over 40 years to improving the health of all Australians and over 25 years to closing the health gap of Aboriginal and Torres Strait Islander peoples. Ms Wade has taught undergraduates and postgraduates Aboriginal health and cardiac health and held a number of roles including Cardiac Rehabilitation nurse, NSW State

Manager of Aboriginal Vascular Health, and current Senior Cultural leader of RHD Australia.

**Nerida Dean**

**BEd Dip Ed (UNE)**

*Member of the Remuneration and Nomination Committee from March 2019*

Appointed to the Board in October 2018

Ms Dean brings a wealth of experience and a strong community perspective. She has spent the bulk of her working life as a secondary teacher and has served on a number of Boards at a local and regional level, including as the Deputy Chair Queanbeyan Local Health Committee for 14 years.

She has been involved with Cancer Council NSW for six years, taking on numerous volunteer roles such as Community Speaker, MP Liaison and Relay For Life Committee member.

**Dr Haryana Dhillon**

**BSc MA(Psych) PhD**

Appointed to the Board in July 2019

Dr Dhillon is an Associate Professor in Psycho-Oncology at the University of Sydney. She is a Director of the Centre for Medical Psychology & Evidence-based Decision-making, School of Psychology at the University of Sydney where she co-leads the Cancer Survivorship Research Group. Dr Dhillon has more than 25 years experience in cancer clinical research and was formerly a member of the Clinical Oncology Society of Australia Board and Chair of the Survivorship group of COSA. She is Chair of the Scientific Advisory Committee of the Psycho-Oncology Cooperative Research Group, and actively involved in leadership roles with other trials groups.

## Directors' benefit

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

## Board and committee meeting attendance

	Full meetings of Directors		Audit and Risk Committee		Investment Committee		Governance Committee		Remuneration and Nomination Committee		Fundraising and Marketing Committee		Cancer Research Committee	
	A	B	A	B	A	B	A	B	A	B	A	B	A	B
<b>N Adams</b>	6	6	*	*	*	*	*	*	*	*	4	4	*	*
<b>J Butler</b>	6	6	*	*	*	*	*	*	3	3	*	*	*	*
<b>N Dean</b>	5	5	*	*	*	*	*	*	1	2	*	*	*	*
<b>T Heap</b>	5	6	3	4	4	4	*	*	*	*	2	4	*	*
<b>L Hovath<sup>3</sup></b>	3	4	*	*	*	*	*	*	*	*	*	*	2	3
<b>C Howard</b>	5	6	*	*	*	*	*	*	*	*	4	4	*	*
<b>J Laker</b>	4	6	4	4	*	*	3	3	*	*	*	*	*	*
<b>J McGirr<sup>2</sup></b>	0	0	*	*	*	*	*	*	1	1	*	*	*	*
<b>M Phillips</b>	6	6	*	*	*	*	*	*	2	2	*	*	*	*
<b>V Wade</b>	3	5	*	*	*	*	*	*	*	*	*	*	*	*
<b>J Young<sup>1</sup></b>	5	5	*	*	*	*	*	*	*	*	*	*	3	3

<sup>1</sup> Jane Young leave of absence 14 February 2018–24 August 2018

<sup>2</sup> Joe McGirr leave of absence 19 August 2018–9 September 2018, retired 27 September 2018

<sup>3</sup> Lisa Horvath retired 1 March 2019

**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

## Registrations and legislation

On 30 September 2005, CCNSW began operating as a company limited by guarantee under the provisions of the *Corporations Act 2001* (Cth).

CCNSW is registered with the Australian Taxation Office as a Health Promotion Charity. CCNSW is also registered as a not-for-profit charity with the Australian Charities and Not-for-profits Commission.

- CCNSW's Australian Business Number (ABN) is 51 116 463 846.
- CCNSW's Australian Company Number (ACN) is 116 463 846.
- CCNSW is a company limited by guarantee trading under the name of The Cancer Council NSW.
- CCNSW's Charitable Fundraising Number (CFN) is 18521. This certifies CCNSW holds a charitable fundraising authority under Section 16 of the *Charitable Fundraising Act 1991* (NSW), and this authority must comply with the Act, the *Charitable Fundraising Regulation 2003* and the conditions of the authority.
- CCNSW is endorsed as a deductible gift recipient under Subdivision 30-BA of the *Income Tax Assessment Act 1997* (Cth).



### **Matters subsequent to the end of the financial year**

No matters or circumstances have arisen since the end of the financial year that could significantly affect the operations of CCNSW in future years.

### **Likely developments and expected results of operations**

The results of CCNSW's operations in the financial year is a surplus of \$2,420,000 (2018: deficit at \$4,400,000). CCNSW does not expect any significant changes to the nature of its operations.

### **Environmental regulation**

CCNSW is not subject to any significant environmental regulation.

### **Dividends**

CCNSW's Constitution does not permit any dividends and therefore no dividends have been paid or declared.

### **Members' liability**

CCNSW is incorporated under the *Corporations Act 2001* (Cth) and is a public company limited by guarantee. If CCNSW is wound up, the constitution states that each member of CCNSW is required to contribute a maximum of \$2 each towards meeting any liabilities of CCNSW. As at 30 June 2019, the number of members was 154 (2018: 185).

### **Insurance of officers**

During the financial year, CCNSW paid a premium of \$12,000 to insure the Directors and Secretary of the company, and an additional \$13,500 on professional indemnity insurance. The liabilities insured are legal costs that may be incurred in defending civil or criminal proceedings that may be brought against the officers in their capacity as officers of CCNSW, and any other payments arising from liabilities incurred by the officers in connection with such proceedings. This does not include such liabilities that arise from conduct involving a wilful breach of duty by the officers or the improper use by the officers of their position or of information to gain advantage for themselves or someone else or to cause detriment to the company. It is not possible to apportion the premium between amounts relating to the insurance against legal costs and those relating to other liabilities.

### **Proceedings on behalf of the company**

No person has applied to the Court for leave to bring proceedings on behalf of the company, or to intervene in any proceedings to which the company is a party, for the purpose of taking responsibility on behalf of the company for all or part of those proceedings. No proceedings have been brought or intervened in on behalf of the company with leave of the Court.


### **Auditor**

BDO continues in office as auditor and this report is made in accordance with a resolution of Directors.



**Mr Mark Phillips**  
Director

Sydney  
29 October 2019



**Dr John Laker**  
Director

Sydney  
29 October 2019

# Auditor's declaration of independence



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[www.bdo.com.au](http://www.bdo.com.au)

Level 11, 1 Margaret St  
Sydney NSW 2000  
Australia

## DECLARATION OF INDEPENDENCE BY GILLIAN SHEA TO THE MEMBERS OF THE CANCER COUNCIL NSW

As lead auditor of The Cancer Council NSW for the year ended 30 June 2019, I declare that, to the best of my knowledge and belief, there have been:

1. No contraventions of the auditor independence requirements of the *Australian Charities and Not-for-profits Commission Act 2012* in relation to the audit; and
2. No contraventions of any applicable code of professional conduct in relation to the audit.

A handwritten signature in black ink, appearing to read 'G Shee', with a long horizontal flourish extending to the right.

Gillian Shea  
Partner

**BDO East Coast Partnership**

Sydney, 29 October 2019

# Statement of profit or loss and other comprehensive income

For the year ended 30 June 2019

	Notes	2019 \$'000	2018 \$'000
<b>Revenue</b>			
Fundraising	3	63,812	56,472
Sale of sun protection products (retail)		7,635	7,690
Interest and investment		5,093	4,514
Grants received	4	3,365	2,812
Other (contributions from other Cancer Councils, publications and joint ventures)		1,725	1,890
<b>Total income</b>		<b>81,630</b>	<b>73,378</b>
<b>Expenses</b>			
Fundraising	3, 5	25,966	26,568
Research	5	18,966	18,672
Community engagement	5	10,641	12,332
Cancer information and support services	5	10,216	7,789
Sale of sun protection products (retail)	5	7,177	7,182
Advocacy and cancer prevention	5	4,412	4,791
Administration	5	3,452	3,776
Marketing and communications	5	832	2,048
<b>Total expenses</b>		<b>81,662</b>	<b>83,158</b>
<b>Operating surplus/(deficit)</b>		<b>(32)</b>	<b>(9,780)</b>
Income tax expense	2 (c)	-	-
Increase in investments at fair value	8 (b)	2,452	5,380
<b>Surplus/(deficit) for the year</b>		<b>2,420</b>	<b>(4,400)</b>
<b>Other comprehensive income</b>			
Items that will not be reclassified subsequently to surplus or deficit:			
Revaluation of land and buildings	9	412	11,055
<b>Total other comprehensive income for the year</b>		<b>412</b>	<b>11,055</b>
<b>Net result for the year</b>		<b>2,832</b>	<b>6,655</b>

The above statement of profit or loss and other comprehensive income should be read in conjunction with the accompanying notes.



# Statement of financial position

For the year ended 30 June 2019

	Notes	2019 \$'000	2018 \$'000
<b>Assets</b>			
<b>Current assets</b>			
Trade and other receivables	6	6,896	6,674
Cash and cash equivalents	7	8,701	6,021
Financial assets	8	142	3,139
Inventories		785	944
<b>Total current assets</b>		<b>16,524</b>	<b>16,778</b>
<b>Non-current assets</b>			
Financial assets	8	89,907	88,104
Property, plant and equipment	9	33,693	33,256
Intangible assets	10	6,847	7,733
Investment properties		1,100	600
<b>Total non-current assets</b>		<b>131,547</b>	<b>129,693</b>
<b>TOTAL ASSETS</b>		<b>148,071</b>	<b>146,471</b>
<b>Liabilities</b>			
<b>Current liabilities</b>			
Trade and other payables	11	6,551	8,031
Provisions - employee benefits	12	2,653	2,670
<b>Total current liabilities</b>		<b>9,204</b>	<b>10,701</b>
<b>Non-current liabilities</b>			
Provisions - employee benefits	12	707	531
<b>Total non-current liabilities</b>		<b>707</b>	<b>531</b>
<b>TOTAL LIABILITIES</b>		<b>9,911</b>	<b>11,232</b>
<b>NET ASSETS</b>		<b>138,160</b>	<b>135,239</b>
<b>Equity</b>			
Accumulated funds		98,031	97,576
Asset revaluation reserve		22,111	21,699
Investments at fair value reserve		10,706	8,254
Restricted funds reserve		4,448	4,612
Grant income reserve		2,864	3,098
<b>TOTAL EQUITY</b>		<b>138,160</b>	<b>135,239</b>

The above statement of financial position should be read in conjunction with the accompanying notes.

# Statement of changes in equity

For the year ended 30 June 2019

	Accumulated funds \$'000	Asset revaluation reserve \$'000	Investments at fair value reserve \$'000	Restricted funds reserve \$'000	Grant income reserve \$'000	Total equity \$'000
<b>Opening balance as at 1 July 2017</b>	<b>102,823</b>	<b>10,642</b>	<b>2,874</b>	<b>9,085</b>	<b>3,112</b>	<b>128,536</b>
<b>Transfer to/(from) reserves</b>	<b>4,485</b>	<b>2</b>	<b>-</b>	<b>(4,473)</b>	<b>(14)</b>	<b>-</b>
<b>Casuarina Lodge</b>	<b>48</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>48</b>
Surplus/(deficit) for the year	(9,780)	-	5,380	-	-	(4,400)
Other comprehensive income for the year	-	11,055	-	-	-	11,055
<b>Total comprehensive income for the year</b>	<b>(9,780)</b>	<b>11,055</b>	<b>5,380</b>	<b>-</b>	<b>-</b>	<b>6,655</b>
<b>Closing balance as at 30 June 2018</b>	<b>97,576</b>	<b>21,699</b>	<b>8,254</b>	<b>4,612</b>	<b>3,098</b>	<b>135,239</b>
<b>Opening balance as at 1 July 2018</b>	<b>97,576</b>	<b>21,699</b>	<b>8,254</b>	<b>4,612</b>	<b>3,098</b>	<b>135,239</b>
<b>Transfer to/(from) reserves</b>	<b>398</b>	<b>-</b>	<b>-</b>	<b>(164)</b>	<b>(234)</b>	<b>-</b>
<b>Casuarina Lodge</b>	<b>89</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>89</b>
Surplus/(deficit) for the year	(32)	-	2,452	-	-	2,420
Other comprehensive income for the year	-	412	-	-	-	412
<b>Total comprehensive income for the year</b>	<b>(32)</b>	<b>412</b>	<b>2,452</b>	<b>-</b>	<b>-</b>	<b>2,832</b>
<b>Closing balance as at 30 June 2019</b>	<b>98,031</b>	<b>22,111</b>	<b>10,706</b>	<b>4,448</b>	<b>2,864</b>	<b>138,160</b>

## Nature and purpose of reserves

### Accumulated funds

Accumulation of funds over time as a net result of past surpluses and deficits.

### Asset revaluation reserve

The asset revaluation reserve is used to record increments and decrements on the revaluation of CCNSW land and buildings, as described in note 9.

### 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 profit or loss, as described in note 8 (b).

### 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.

### 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.

The above statement of changes in funds should be read in conjunction with the accompanying notes.

# Statement of cash flows

For the year ended 30 June 2019

	2019 \$'000	2018 \$'000
<b>Cash flows from operating activities</b>		
Receipts from supporters and funding sources (inclusive of GST)	73,590	65,632
Receipts from grant funding	3,365	2,812
Dividends, franking credits and interest received	746	814
Payments to suppliers and employees (inclusive of GST)	(81,121)	(80,431)
<b>Net cash inflow/(outflow) from operating activities</b>	<b>(3,420)</b>	<b>(11,173)</b>
<b>Cash flows from investing activities</b>		
Proceeds from sale of property, plant and equipment	192	890
Net purchases of investments in financial assets	8,000	11,090
Payments for purchase of intangible assets	(483)	(4,753)
Payments for purchase of property, plant and equipment	(1,698)	(1,235)
<b>Net cash inflow/(outflow) from investing activities</b>	<b>6,011</b>	<b>5,992</b>
Net increase/(decrease) in cash and cash equivalents	2,591	(5,181)
Cash and cash equivalents at beginning of year	4,797	9,978
<b>Cash and cash equivalents at end of year</b>	<b>7,388</b>	<b>4,797</b>

The above statement of cash flows should be read in conjunction with the accompanying notes.

# Notes to the financial statements

For the year ended 30 June 2019

## 1. Introduction

This financial report covers Cancer Council NSW (CCNSW) as an individual entity for the year ended 30 June 2019. The financial report is presented in Australian dollars, which is the company's functional and presentational currency.

CCNSW is a not-for-profit unlisted public company limited by guarantee, incorporated and domiciled in Australia. Its registered office and principal place of business is:

The Cancer Council NSW  
153 Dowling Street  
Woolloomooloo NSW 2011

A description of the nature of CCNSW's operations and its principal activities is included on page 24.

The financial report was authorised for issue by the Directors on 29 October 2019. The Directors have the power to amend and reissue this financial report.

## 2. Significant accounting policies

The principal accounting policies adopted in the preparation of this financial report are set out below. These policies have been consistently applied to all the years presented, unless otherwise stated.

### (a) Basis of preparation

These general-purpose financial statements have been prepared in accordance with Australian Accounting Standards and Interpretations issued by the Australian Accounting Standards Board (AASB), NSW legislation (the *Charitable Fundraising Act 1991* (NSW) and associated regulations), and the *Australian Charities and Not-for-profits Commission Act 2012* (Cth), as appropriate for not-for-profit oriented entities.

CCNSW has applied Reduced Disclosure Requirements as set out in AASB 1053: *Application of Tiers of Australian Accounting Standards*. This application was approved by the Board of CCNSW.

CCNSW is a not-for-profit organisation and as such the term 'profit' is not applicable and the term 'surplus' is used where required.

### Historical cost convention

These financial statements have been prepared under the historical cost convention, as modified by the revaluation

of financial assets and liabilities, certain classes of property, plant and equipment, and investment property.

### (b) Change in accounting policy

Investments classified as fair value through profit or loss were previously accounted for as investments at fair value through other comprehensive income. Management have adopted a change in accounting policy for these investments to align its practice with interpretative discussions by the International Financial Reporting Interpretations Committee (IFRIC) in September 2017. Comparative figures have been restated in line with the new accounting policy.

The effect of this change in accounting policy is that the change in fair value in investments of \$5.380m during the year ended 30 June 2018 was restated and is included in profit or loss instead of directly to other comprehensive income. The 2018 opening balance of the investment revaluation reserve of \$2.874m has been held at that amount and will be reduced when the investments are disposed of with the gains or losses from those periods prior to 1 July 2017 then transferred to retained earnings. There has been no change in the net assets as at 30 June 2018 as a result of this change in accounting policy.

Dividends or other distributions received from these investments are still recognised in the profit or loss as part of the interest and investments income.

### (c) Income tax

CCNSW is exempt from income tax within the terms of Subdivision 50-5 of the *Income Tax Assessment Act 1997* (Cth).

### (d) Leases

The determination of whether an arrangement is or contains a lease is based on the substance of the arrangement and requires an assessment of whether the fulfilment of the arrangement is dependent on the use of a specific asset or assets and the arrangement conveys a right to use the asset.

Operating lease payments, net of any incentives received from the lessor, are charged to the statement of profit or loss and other comprehensive income on a straight-line basis over the term of the lease.

### (e) Goods and services tax (GST)

Revenues, expenses and assets are recognised net of the amount of GST, unless the amount of GST incurred is not recoverable from the Australian Taxation Office (ATO). In this case, it is recognised as part of the cost of acquisition of the asset or as part of the expense.

Receivables and payables are stated inclusive of the amount of GST receivable or payable. The net amount of GST receivable from or payable to the ATO is included with other receivables or payables in the statement of financial position.

### (f) Public company limited by guarantee

In the event of CCNSW being wound up, the liability of each member is limited to an amount not exceeding \$2.

### (g) Rounding off

CCNSW is of a kind referred to in Legislative Instrument 2016/191, issued by the Australian Securities and Investments Commission, relating to the 'rounding off' of amounts in the financial report. Amounts in the financial report have been rounded off in accordance with the class order to the nearest thousand dollars.

### (h) Critical estimates and judgements

The preparation of financial statements requires the use of certain critical accounting estimates. It also requires management to exercise its judgement in the process of applying CCNSW's accounting policies. The areas involving a higher degree of judgement or complexity, or areas where assumptions and estimates are significant to the financial statements, can be found in the following notes to the financial statements:

	Note
Financial assets	8
Useful life of assets	9
Employee benefits	12

### (i) Financial assets at fair value through profit or loss

CCNSW holds an investment in shares classified as financial assets at fair value through profit or loss. As at 1 July 2018, in adopting AASB 9: *Financial Instruments* CCNSW has made an irrevocable election on initial recognition to present gains and losses on investments in equity instruments that are not held for trading through profit or loss.



*(ii) Estimation of useful lives of assets*

CCNSW determines the estimated useful lives and related depreciation and amortisation charges for its property, plant and equipment, and finite life intangible assets. The useful lives could change significantly as a result of technical innovations or some other event. The depreciation and amortisation charge

will increase where the useful lives are less than previously estimated lives, or where technically obsolete or non-strategic assets that have been abandoned or sold will be written off or written down.

*iii) Long service leave provision*

The liability for long service leave is recognised and measured at the present

value of the estimated future cash flows to be made in respect of all employees at the reporting date. In determining the present value of the liability, estimates of attrition rates and pay increases through promotion and inflation have been taken into account.

### 3. Fundraising

*(a) Fundraising income*

	2019 \$'000	2018 \$'000
Campaigns	22,510	20,271
Regular giving, appeals and donations	20,910	20,604
Gifts in Wills	17,456	12,268
Philanthropy	2,936	3,329
	<b>63,812</b>	<b>56,472</b>

Fundraising revenue is recognised when the amount of revenue can be measured reliably and it is controlled by CCNSW.

*(b) Fundraising activities*

The below information is furnished under the *Charitable Fundraising Act 1991* (NSW) and NSW Fair Trading Fundraising Authority Conditions.

*(i) Details of aggregate gross income and total expenses of fundraising appeals*

Gross proceeds from fundraising activities (including gifts in wills)	63,812	56,472
Total cost of fundraising appeals	(25,966)	(26,568)
<b>Net surplus from fundraising appeals</b>	<b>37,846</b>	<b>29,904</b>
<i>Net margin from fundraising appeals</i>	59%	53%
<i>Fundraising costs as a percentage of Total expenses</i>	32%	32%

*(ii) Application of funds for charitable purposes*

During the year, CCNSW achieved the following net surpluses:

Net surplus from fundraising appeals	37,846	29,904
Net surplus from investments	5,093	4,514
Net surplus from grants	3,365	2,812
Net surplus from other income	1,725	1,890
Net surplus from sale of sun protection products	458	508
<b>Surplus available to spend on CCNSW mission</b>	<b>48,487</b>	<b>39,628</b>
Less:		
Research	18,966	18,672
Community engagement	10,641	12,332
Cancer information and support services	10,216	7,789
Advocacy and cancer prevention	4,412	4,791
Administration	3,452	3,776
Marketing and communications	832	2,048
	<b>48,519</b>	<b>49,408</b>
<b>Net surplus/(deficit) to be spent on future CCNSW projects</b>	<b>(32)</b>	<b>(9,780)</b>

#### 4. Grants received

	Opening balance 1 July 2018 \$'000	Receipts 2019 \$'000	Payments 2019 \$'000	Closing balance 30 June 2019 \$'000
Cancer research grants	2,300	2,268	(2,479)	2,089
Community support grants	487	680	(651)	516
Cancer prevention grants	311	417	(469)	259
	<b>3,098</b>	<b>3,365</b>	<b>(3,599)</b>	<b>2,864</b>

Grants from the government and other organisations are recognised at their fair value where there is a reasonable assurance that the grant will be received and that CCNSW will comply with all attached conditions.

Grant income has been recognised as revenue in the statement of profit or loss and other comprehensive income. It includes amounts yet to be spent in the manner specified by the contributor. Unexpended amounts totalling \$2,864,259 have been included in revenue and held in reserves at 30 June 2019.

#### 5. Mission expenditure

CCNSW seeks to maximise its expenditure on mission delivery. Below is a summary of those mission areas that CCNSW has funded in 2018/19.

	2019 \$'000	2018 \$'000
<b>Mission</b>		
Research	18,966	18,672
Community engagement	10,641	12,332
Cancer information and support services	10,216	7,789
Sale of sun protection products (retail)	7,177	7,182
Advocacy and cancer prevention	4,412	4,791
Direct mission support - Marketing and communications*	832	2,048
<b>Total mission expenditure</b>	<b>52,244</b>	<b>52,814</b>
<b>Mission enabling</b>		
Fundraising expenditure	25,966	26,568
Administration	3,452	3,776
<b>Total mission enabling expenditure</b>	<b>29,418</b>	<b>30,344</b>
Total expenses	81,662	83,158
<b>Mission spend as a percentage of total expenses</b>	<b>64%</b>	<b>64%</b>
<b>Total mission/net surplus from fundraising</b>		
Total mission	52,244	52,814
Net surplus from fundraising	37,846	29,904
<b>Mission spend as a percentage of net surplus from fundraising</b>	<b>138%</b>	<b>177%</b>

\*Items from these categories which are directly related to mission have been reallocated to Direct mission support.

#### 6. Trade and other receivables

Trade receivables	5,701	5,443
Provision for impairment of trade receivables	(2)	(2)
Other receivables	1,197	1,233
	<b>6,896</b>	<b>6,674</b>

Trade receivables are initially recognised at fair value, and subsequently measured at amortised cost. Trade receivables are generally due for settlement within 30 days.

A provision is made for doubtful debts when there is evidence that those debts may not be collected. Bad debts are written off when identified.

	2019 \$'000	2018 \$'000
<b>7. Cash and cash equivalents</b>		
Cash on hand and at bank	7,388	4,797
Restricted cash	1,313	1,224
	<b>8,701</b>	<b>6,021</b>

For statement of cash flow presentation purposes, cash and cash equivalents include cash on hand; deposits held at call with financial institutions; and other short-term, highly liquid investments with original maturities of three months or less that are readily convertible to known amounts of cash and that are subject to an insignificant risk of change in values.

Restricted cash represents cash relating to joint operations with Casuarina Lodge (note 17).

## 8. Financial assets

### Current assets – Financial assets at amortised cost

Term deposits	-	3,000
Held-to-maturity investments	142	139
	<b>142</b>	<b>3,139</b>

### Non current assets – Investments at fair value through profit or loss

#### (a) Investments at the end of the financial year were as follows:

Australian shares (tax exempt)	25,241	26,001
Overseas shares (unhedged)	17,023	15,579
Direct property fund	9,582	11,659
Cash fund	8,367	10,167
Australian sovereign bonds	7,809	4,092
Unlisted infrastructure fund	7,164	4,639
Global credit fund	6,708	8,200
Australian small companies fund	5,544	5,478
Overseas sovereign bonds	2,469	2,289
	<b>89,907</b>	<b>88,104</b>

Changes in the fair value of investments are recorded in equity and disclosed through profit or loss.

#### (b) Movement in investments

Opening balance 1 July	88,104	84,083
Additions	9,596	3,754
Increase/(decrease) in fair value of managed funds	2,452	5,380
Disposals	(10,245)	(5,113)
<b>Closing balance 30 June</b>	<b>89,907</b>	<b>88,104</b>

## Classification of financial assets

CCNSW classifies its financial assets in the following categories: 'investments at fair value through profit or loss', and 'financial assets at amortised cost'. The classification depends on the purpose for which the financial assets were acquired. Management determines the classification of CCNSW's financial assets at initial recognition:

### (i) Investments at fair value through profit or loss

At initial recognition, CCNSW may make an irrevocable election (on an instrument-by-instrument basis) to recognise the change in fair value of investments in equity instruments through profit or loss. This election is permitted for equity instruments that are not held for trading purposes.

### (ii) Financial assets at amortised cost

Financial assets at amortised cost are recognised initially at fair value and subsequently measured at amortised cost using the effective interest rate method, less provision for impairment.

These instruments are initially recognised at fair value plus transaction costs. Subsequent to initial recognition, they are measured at fair value and changes therein are recognised through profit or loss and presented within equity in the investments at fair value reserve. When an instrument is derecognised, the cumulative gain or loss is transferred directly to retained earnings and is not recognised in profit or loss.

Dividends or other distributions received from these investments are still recognised

in profit or loss as part of interest and investment income.

## Recognition and derecognition

Regular purchases and sales of financial assets are recognised on trade date – the date on which CCNSW commits to purchase or sell the asset. Investments are initially recognised at fair value plus transaction costs for all financial assets not carried at fair value through profit or loss. Financial assets are derecognised when the rights to receive cash flows from the financial assets have expired or have been transferred, and CCNSW has transferred substantially all the risks and rewards of ownership.

## 9. Property, plant and equipment

	Buildings \$'000	Freehold land \$'000	Motor vehicles \$'000	Office furniture and equipment \$'000	Leasehold improvements \$'000	Total \$'000
Year ended 30 June 2019						
<b>Opening net book amount</b>	<b>22,322</b>	<b>8,405</b>	<b>1,128</b>	<b>1,048</b>	<b>353</b>	<b>33,256</b>
Additions	310	-	499	879	10	1,698
Revaluation increment/ (decrement)	377	35	-	-	-	412
Disposals	-	-	(73)	(4)	-	(77)
Depreciation expense	(630)	-	(345)	(411)	(210)	(1,596)
<b>Closing net book amount</b>	<b>22,379</b>	<b>8,440</b>	<b>1,209</b>	<b>1,512</b>	<b>153</b>	<b>33,693</b>
At 30 June 2019						
Cost or fair value	23,854	8,440	1,990	6,570	2,091	42,945
Accumulated depreciation	(1,475)	-	(781)	(5,058)	(1,938)	(9,252)
<b>Net book amount</b>	<b>22,379</b>	<b>8,440</b>	<b>1,209</b>	<b>1,512</b>	<b>153</b>	<b>33,693</b>

### Valuations of freehold land and buildings

All property, plant and equipment categories are valued at cost, with the exception of land and buildings. The valuation basis of land and buildings is fair value. Building valuations were conducted as at 30 June 2018, with revaluations based on independent assessments by members of the Australian Property Institute. The revaluation increment was credited to the asset revaluation reserve in accumulated funds.

Any accumulated depreciation at the date of revaluation is eliminated against the gross carrying amount of the asset, and

the net amount is restated to the revalued amount of the asset. All other property, plant and equipment are stated at historical cost less depreciation. Historical cost includes expenditure that is directly attributable to the acquisition of the items.

Land is not depreciated. Depreciation on other assets is calculated using the straight-line method to allocate their cost or revalued amounts, net of their residual values, over their estimated useful lives, as follows:

- buildings  
25 to 40 years
- leasehold improvements  
2 to 5 years

- office furniture and equipment  
3 to 10 years
- motor vehicles  
5 years

The asset residual values and useful lives are reviewed, and adjusted if appropriate, at each reporting period. An asset's carrying amount is written down immediately to its recoverable amount if the asset's carrying amount is greater than its estimated recoverable amount. Gains and losses are determined by comparing proceeds with carrying amount. These are included in the statement of profit or loss and other comprehensive income.

## 10. Intangible assets

	Computer software \$'000	Internally generated intangible assets \$'000	Total \$'000
Year ended 30 June 2019			
<b>Opening net book amount</b>	<b>254</b>	<b>7,479</b>	<b>7,733</b>
Additions	-	483	483
Amortisation	(113)	(1,256)	(1,369)
<b>Closing net book amount</b>	<b>141</b>	<b>6,706</b>	<b>6,847</b>
At 30 June 2019			
Cost or fair value	1,061	8,890	9,951
Accumulated amortisation	(920)	(1,180)	(2,100)
Intangible impairment	-	(1,004)	(1,004)
<b>Net book amount</b>	<b>141</b>	<b>6,706</b>	<b>6,847</b>



Finite intangible assets include acquired or developed software, capitalised on the basis of the costs incurred to acquire and install the software. Subsequent software expenditure is expensed as incurred.

Finite intangible assets are accounted for using the cost model, whereby capitalised costs are amortised on a straight-line basis over their estimated useful lives (between 3 to 10 years). Residual values and useful lives are reviewed at each reporting date.

CCNSW continues to invest in technology to improve how it engages with the community, simplify its working environment and help it work more effectively.

## 11. Trade and other payables

	2019 \$'000	2018 \$'000
Trade creditors and accruals	4,273	5,749
Cancer Council Australia membership fees	1,982	1,966
Other current payables	296	316
	<b>6,551</b>	<b>8,031</b>

These amounts represent liabilities for goods and services provided to CCNSW prior to the end of the financial year and that were unpaid as at the reporting date. These amounts are unsecured and are paid within the suppliers' terms, usually 30 days.

## 12. Employee benefits

### (a) Employee benefits provisions - Current

Annual leave	1,840	1,783
Long service leave	813	887
<b>Current Employee benefits</b>	<b>2,653</b>	<b>2,670</b>

### (b) Employee benefits provisions - Non-current

Long service leave	707	531
<b>Non-current employee benefits</b>	<b>707</b>	<b>531</b>

## Short-term employee benefits

Liabilities for wages and salaries, including non-monetary benefits, and leave expected to be settled within 12 months of the reporting date, are recognised in current liabilities, and are measured at the amounts expected to be paid when the liabilities are settled.

## Other long-term employee benefits

The leave liabilities not expected to be settled within 12 months of the reporting date are recognised in non-current liabilities. The liability is measured as the present value of expected future payments to be made in respect of services provided by employees up to the reporting date, using the projected unit credit method. Consideration is given to expected future wage and salary levels, experience of employee departures, and periods of service. Expected future payments are discounted using market yields at the reporting date on national government bonds with terms to maturity and currency that match, as closely as possible, the estimated future cash outflows.

### (c) Employee benefits expense

<b>Employee benefits expense</b>	<b>34,273</b>	<b>35,628</b>
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## 13. Key management personnel

### (a) Executive remuneration

<b>Executive remuneration expense</b>	<b>2,187</b>	<b>2,086</b>
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### (b) Transactions with Directors and key management personnel

During the financial year Dr John Laker was an (unpaid) Board Member of both CCNSW as well as Cancer Council Australia (CCA). CCNSW paid CCA \$2,923,575 during the year ended 30 June 2019 for membership fees and national merchandise purchases. CCNSW also received distributions of \$2,628,318 from CCA for the NSW share of national fundraising campaigns.

## 14. Commitments

Commitments contracted for at the reporting date, but not recognised as liabilities are as follows:

	1 year or less \$'000	Over 1 to 5 years \$'000	Total \$'000
Research grant commitments	8,561	10,036	18,597
Rental lease commitments	1,418	1,412	2,830
Campaign licensing commitments	300	550	850
<b>Total commitments</b>	<b>10,279</b>	<b>11,998</b>	<b>22,277</b>

The total commitments above include input tax credits of \$2,025,181 that are expected to be recoverable from the Australian Taxation Office.

Operating lease expense for the financial year was \$1,982,394 (2018:\$1,961,425).

## 15. Contingent liabilities

Contingent liabilities consist of \$118,000 in bank guarantees in respect of operating leases (2018: \$118,000).

## 16. Events after reporting period

CCNSW was not aware of any events that have occurred after reporting date that are of such significance that they need to be disclosed or recognised in the financial statements.

## 17. Interests in joint ventures

CCNSW has entered into two joint ventures to provide accommodation for cancer patients and their relatives while receiving radiotherapy treatment in NSW: Lilier Lodge at Wagga Wagga and Casuarina Lodge at Westmead.

CCNSW holds a 50% voting power in Lilier Lodge.

CCNSW holds a 50% ownership interest in the operations of Lilier Lodge and is entitled to a 50% share of their output.

CCNSW's 50% interest in Lilier Lodge's assets, liabilities, revenues and expenses was recognised in the financial statements as part of a joint operation.

CCNSW recognises 50% of a joint cash fund with Casuarina Lodge.

## 18. New Accounting Standards

CCNSW has adopted all of the new, revised or amending Accounting Standards and Interpretations issued by the Australian Accounting Standards Board (AASB) that are mandatory for the current reporting period.

Any new, revised or amending Accounting Standards or Interpretations that are not yet mandatory have not been early adopted.

The adoption of these Accounting Standards and Interpretations did not have any significant impact on the financial performance or position of CCNSW.

Reference	Title	Summary	Impact on financial report	Application date
AASB 15	Revenue from contracts with customers	This standard provides a single comprehensive framework for determining whether, how much and when revenue is recognised. The core principle of the standard is that an entity will recognise revenue when control of goods or services is transferred rather than on transfer of risks and rewards as is currently the case under AASB 118: Revenue.	Management will continue to evaluate the overall impact of AASB 15 on the financial statements in the forthcoming period. The key area of impact for the CCNSW will be the recognition of grant revenue.	1 July 2019
AASB 1058	Income of Not-for-Profit Entities	This standard provides specific guidance with respect to the revenue recognition treatment of donations, government grants and volunteer services.	Management continues to evaluate the overall impact of AASB 1058 on the financial statements in the forthcoming period.	1 July 2019
AASB 16	Leases	All leases will be included in the balance sheet of lessees as right-of-use assets (non-current asset) and lease liabilities (split between current and non-current). In addition, rent expense will no longer be treated as an operating expense but will be classified as a financing activity.	Management anticipates the company's operating lease contracts, currently in effect, which are largely related to premises leases, will be impacted by the introduction of AASB 16, and is currently in the process of determining the potential effects on the financial statements.	1 July 2019

## END OF AUDITED FINANCIAL STATEMENTS

# Directors' declaration

In the Directors' opinion:

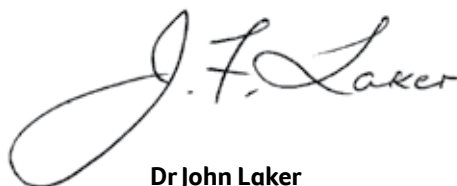
- the attached financial statements and notes thereto comply with the *Australian Charities and Not-for-profits Commission Act 2012* (Cth), the Accounting Standards, the *Australian Charities and Not-for-profits Commission Regulations 2013* and other mandatory professional reporting requirements
- the attached financial statements and notes thereto give a true and fair view of the company's financial position as at 30 June 2019 and of its performance for the financial year ended on that date
- there are reasonable grounds to believe that the company will be able to pay its debts as and when they become due and payable.

This declaration is made in accordance with a resolution of the Board of Directors and is signed for and on behalf of the Directors by:



**Mr Mark Phillips**  
Director

Sydney  
29 October 2019



**Dr John Laker**  
Director

Sydney  
29 October 2019

# Declaration by Chief Executive Officer in respect of fundraising appeals

I, Jeff Mitchell, Chief Executive Officer of The Cancer Council NSW declare that in my opinion:

- a) the income statement gives a true and fair view of all income and expenditure of The Cancer Council NSW with respect to fundraising appeals
- b) the balance sheet gives a true and fair view of the state of affairs with respect to fundraising appeals
- c) the provisions of the *Charitable Fundraising Act 1991* (NSW), the regulations under the Act and the conditions attached to the authority have been complied with
- d) the internal controls exercised by The Cancer Council NSW are appropriate and effective in accounting for all income received and applied by The Cancer Council NSW from any of its fundraising appeals.



**Jeff Mitchell**

*Chief Executive Officer*

Sydney  
29 October 2019



# Independent auditor's report



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Australia

## INDEPENDENT AUDITOR'S REPORT

To the members of The Cancer Council NSW

### Report on the Audit of the Financial Report

#### Qualified opinion

We have audited the financial report of The Cancer Council NSW (the Entity), which comprises the statement of financial position as at 30 June 2019, the statement of profit or loss and other comprehensive income, the statement of changes in equity and the statement of cash flows for the year then ended, and notes to the financial report, including a summary of significant accounting policies, and the responsible entities' declaration.

In our opinion, except for the effects of the matter described in the *Basis for qualified opinion* section of our report, the accompanying financial report of The Cancer Council NSW, is in accordance with Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012*, including:

- (i) Giving a true and fair view of the registered entity's financial position as at 30 June 2019 and of its financial performance for the year then ended; and
- (ii) Complying with Australian Accounting Standards - Reduced Disclosure Requirements and Division 60 of the *Australian Charities and Not-for-profits Commission Regulation 2013*.

#### Basis for qualified opinion

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

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the *Auditor's responsibilities for the audit of the Financial Report* section of our report. We are independent of the registered entity in accordance with the auditor independence requirements of the *Australian Charities and Not-for-profits Commission Act 2012* (ACNC Act) and the ethical requirements of the Accounting Professional and Ethical Standards Board's *APES 110 Code of Ethics for Professional Accountants* (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

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

#### Other information

Those charged with governance are responsible for the other information. The other information obtained at the date of this auditor's report is information included in the registered entity's annual report, but does not include the financial report and our auditor's report thereon.

Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon.

BDO East Coast Partnership ABN 83 236 985 726 is a member of a national association of independent entities which are all members of BDO Australia Ltd ABN 77 050 110 275, an Australian company limited by guarantee. BDO East Coast Partnership and BDO Australia Ltd are members of BDO International Ltd, a UK company limited by guarantee, and form part of the International BDO network of independent member firms. Liability limited by a scheme approved under Professional Standards Legislation.



In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated.

If, based on the work we have performed on the other information obtained prior to the date of this auditor's report, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

#### **Responsibilities of responsible entities for the Financial Report**

The responsible entities of the registered entity are responsible for the preparation and fair presentation of the financial report in accordance with Australian Accounting Standards - Reduced Disclosure Requirements and the ACNC Act, and for such internal control as the responsible entities determine is necessary to enable the preparation of the financial report that is free from material misstatement, whether due to fraud or error.

In preparing the financial report, responsible entities are responsible for assessing the registered entity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the responsible entities either intends to liquidate the registered entity or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the registered entity's financial reporting process.

#### **Auditor's responsibilities for the audit of the Financial Report**

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

A further description of our responsibilities for the audit of the financial report is located at the Auditing and Assurance Standards Board website (<http://www.auasb.gov.au/Home.aspx>) at:

[http://www.auasb.gov.au/auditors\\_responsibilities/ar4.pdf](http://www.auasb.gov.au/auditors_responsibilities/ar4.pdf)

This description forms part of our auditor's report.

**BDO East Coast Partnership**

BDO

Gillian Shea  
Partner

Sydney, 29 October 2019



# Thank you

We thank the following individuals, trusts and foundations and organisations who have supported us in 2018/19.

They have made a significant contribution towards reducing the impact of cancer through the financial or in-kind support provided. We also thank those who wish to remain anonymous.

Adrian and Jane O'Connor  
Angelo Cho  
Anna and Simon Ainsworth  
Bennett Family Foundation  
Cancer Research Advocate Bikers  
Carolyn Keep and Debbie Veale  
Catherine Giunta and Nancy Sherry  
Christy Boyce and Stephen Roberts  
Code C  
CommBank Foundation  
Cure for Brain Cancer  
Denton Family Trust  
ETC Community Support Fund  
Fay Vitalone – Wisdom Homes  
Fussell Family Foundation Pty Ltd  
George and Christine Penklis  
Hay Dust Rally  
Heaven Can Wait  
Honeybees  
James Freeman and the Box Rallies team  
Jean Willmington  
Jeff and Yvette Mitchell  
Jennifer Pridham  
Jim and Fran Sweeny  
Jo-Anne Kempshall  
Job Link Plus

Jodie Myers  
John and Bianca White  
John Winning  
Judith Warner  
Julie Hannaford  
Kathryn MacMillan and 923  
Recruitment and HR  
Keith, Alison and Kelly Ross  
Kim Iori  
Louise Barrett-White  
Luke Maruncic  
Macquarie Group Foundation  
Mavid Constructions  
Max Schroder  
Michael and Louise Daniels  
Michael and Maryrose Morgan  
Michael Bradley  
Michele Brooks and Andrew Michael  
Nomads Sydney North  
NSW Community Building Partnerships  
NSW Health  
Outrun Cancer Pty Ltd  
Peninsula Girls' Night In  
Peter and Fiona Langham  
Peter Smith

Raelee Shearer  
Rajdeep Kaur  
Regional Australia Bank  
Richard and Jan Freemantle  
Sally Butchers  
Skipper Jacobs Charitable Trust  
St Johns Bosco College Engadine  
Steph's Sass Squad – Stars of Orange  
Sydney Restaurant Group  
Tanti Financial Services  
Tanveer Shaheed  
Team Cooch – 7 Bridges Walk  
Terry and Susi Willis  
The Estate of the Late Violet Falls  
The Estate of the Late V. Sharp  
The Phillips Family Foundation  
The Profield Foundation  
Theresa Quattromani and Josephine Borg  
Tracey Hourd  
Trent Castles  
Vince Sorrenti  
William Arthur Hugh Gordon Estate  
Winning Appliances  
Yvonne Hughes and the Cranbrook Junior  
School Committee



Researchers Dr Stephen Wade,  
Preston Ngo and Dr Marianne Weber.

# Thank you

## Professional services

**We thank the professional services of the following organisations:**

Bankers – NAB

External auditors – BDO Australia

Investment advisors – Mercer

Internal auditors – Grant Thornton

**We thank the following firms for providing pro bono legal advice to Cancer Council NSW:**

Baker & McKenzie

Clayton Utz

Colin Biggers & Paisley

DLA Piper

RMB Lawyers

Workplace Law

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

## Financial assistance

**We thank the following organisations for their contribution towards the Financial Assistance Program:**

Telstra

Sydney Water

## Our partners

**We acknowledge the following partners:**





We acknowledge the extraordinary generosity of the following people who left a gift in their will to Cancer Council NSW\*.

There is no greater legacy than a gift that keeps on giving. We would also like to thank the benefactors who wish to remain anonymous.

Agnes Gwendolene Davey  
 Alan Chapman Targett  
 Alan Hammond  
 Alice Eira Harris  
 Alice Norma Jenkins  
 Angela Monica Gibson  
 Ann Kirby (née Plotke)  
 Annabel Virginia Crouch  
 Barbara Prudence Whipple  
 Beatrice Joy Treadwell  
 Bernard Charles Gray  
 Bessie Howes  
 Betty Clare O'Keefe  
 Bradley Raymond Clark  
 Bruce James O'Connor  
 Charmayne Twyman Sheridan  
 Christine Lillian Mitchell  
 Clamor Schurmann  
 Colin Hedley Napper  
 Colin James O'Brien  
 Dawn Chasty  
 Denis Anthony Northwood  
 Denis Ashton  
 Dorothy Ellen Maloney  
 Dorothy Frances Hayward  
 Dorothy Myrtle Wilson  
 Edmund Otho Smith  
 Edwin John Trenery  
 Eileen Marion Smith  
 Eileen Willard Campbell  
 Ella May Bush  
 Eugene Michael Dale  
 Eunice Elaine Campbell  
 Euphemia Lindsay Harrison  
 Eva Norah Pratt  
 Fay Emily Daines  
 Fay Kafer  
 Fiona Gae Moon  
 Flora Maria De Kamper  
 Florence Probine  
 Freda Shields  
 Geoffrey Vincent Wainwright  
 George Webster  
 Gerarda Laura Schreur  
 Gloria Genevieve Lewis  
 Gwendolene Blackman  
 Hazel Beatrice Cromack  
 Helen Erwyd Martin  
 Hilda Margaret Stone  
 Isabella Tonner  
 James Henry Duckham  
 James Ronald Montgomery  
 Jeanette Doris Toupein  
 Joan Deanne Martin  
 John Robert Warren  
 Joy Romaine Gerling

Joyce Eileen Hemmings  
 Joyce Gilcreest Blomley  
 Joyce Mary Porter  
 Joyce Milly Butterfield  
 Judith Ann Povey  
 Judith Ellen Jenkins  
 Karin Elizabeth Wigmore  
 Kathleen Mary Sheather  
 Kenneth O'Hara  
 Kuk Kock  
 Leone Dorothy Mayne  
 Lesley Kay Bourke  
 Leslie Glen McGrath  
 Lillian May Chambers  
 Lionel John Eric Millard  
 Lorna Jean Klein  
 Luciano Mauro  
 Lynette Lalla Mawby  
 Marcelle Fay Hunt  
 Margaret Edith Beatrice McDonald  
 Margaret Joyce Johnsen  
 Margaret Provan Maclaren  
 Margaret Rye Rush  
 Margarita Grunberg  
 Marie D'Souza  
 Marie Marion Rogers  
 Marie Therese O'Brien  
 Marjorie Jean Reed  
 Mary De Salvo-Hall  
 Mary Elizabeth Symons  
 Mary Margaret Lamplough  
 Maurice Kiss  
 Mavis May Lobley  
 Mavis McDonald  
 Mohammad Habib Alavi  
 Nadia Prykaz  
 Nancy Kathleen Roy  
 Neville Frank Saywell  
 Noelene Mary Martin  
 Nola Dawn Bryant  
 Norma Willard  
 Patricia Geidans  
 Peter Reynolds  
 Phillip Geoffrey Thomas  
 Poh Cheng Kok  
 Raymond Edgar Haswell  
 Rhonda Carolyn Winterflood  
 Robert Costin Matthews  
 Roma Mae McDonnell  
 Roma Valeria Joy Ellis  
 Ronald James Osland  
 Ruby Anderson Roderick  
 Russell James Bradley  
 Sadie Joy Kingston  
 Susan Belinda Pryor  
 Susan Maree Puddey

Sylvia Lucy Mary Evans  
 Thelma Melba Chandler  
 Valda Winifred Shortus  
 Valerie Elaine Priestley  
 Warren Desmond Shellback  
 William Charles Sedgeman  
 William Edgar Albert Murray  
 William John Blackstone  
 Yvonne Adele Alexander

**I started volunteering for Cancer Council NSW 20 years ago and I haven't looked back. Shortly before this I was diagnosed with breast cancer, and then four years ago I received a diagnosis of myeloid lymphoma in the breast. Throughout it all, Cancer Council NSW was there whenever I needed them.**

**I've decided to leave a gift in my will to Cancer Council NSW. You don't have to be wealthy, but I believe we can all give in some way, either volunteering, donating or leaving a gift in your will.**

 For more information on leaving a gift in your will, contact [giftsinwills@nswcc.org.au](mailto:giftsinwills@nswcc.org.au) or phone 02 9334 1444

**Marjorie Pettigrew**

Volunteer and Gifts in Wills donor



\*Gifts in wills financially received during 2018/19.

# How you can get involved

Our work would not be possible without the community's power and support. We rely on their knowledge and commitment to help us carry out our life-saving work.

## Here's how Sandro got involved

When I was asked if I would compete in the first **Stars of Orange** in 2015, I didn't think twice. My mother-in-law passed away 12 years ago from cancer and I have a passion for the work Cancer Council NSW does.

My daughter Steph is a dance teacher and was my mentor for the competition, which was fantastic – I was a total diva! There were so many dance rehearsals and I can't tell you the amount of sleepless nights I had – I'd wake up, go downstairs and practice the steps, then sneak back into bed.

The amount of people who wanted to support my fundraising was overwhelming. That year, Steph and I were the highest fundraisers. That is something I will cherish for the rest of my life – being able to get up and dance with my daughter.

The first **Stars of Orange** event drew 200 people and raised \$35,000. This year, there were 840 people and we raised \$250,000.

It just keeps growing! Since 2015, I've been a judge for **Stars of Bathurst** and a master of ceremonies for **Stars of Orange** every year. I love being the MC – I like being part of the work that Cancer Council NSW does, and I have huge admiration for the local community who time and time again shows their support for this event.

Steph was diagnosed with brain cancer last year. It's been a tough journey. This year, 11 of my daughter's close friends competed in **Stars of Orange** in Steph's honour, and she came out on stage with them. To see her friends rally around her was absolutely unbelievable.

I was the MC of the Orange **Relay For Life** this year too. The Hope Ceremony was one of the hardest things I've done but it meant so much to our family – it was a very emotional and heart-warming experience.



**Sandro Tranfaglia**  
**Stars of Orange MC**

**“The amount of people who wanted to support my fundraising was overwhelming.”**

## Here's how John got involved

I was diagnosed with aggressive prostate cancer in 2007. It was found by accident; I had a biopsy and was told I had limited time left.

It was devastating. I was unable to work and I had to pull the pin on our electrical engineering business.

There was a **Cancer Council Information Service** at Gosford Hospital. The woman there was very helpful and I was inundated with reading matter, which enabled me to make an informed decision about my treatment when my head was spinning.

I didn't know support groups existed when I was going through my treatment. Having cancer can be lonely – some friends quietly disappeared.

After my treatment, I joined the local Prostate Cancer Foundation Australia

support group. After about three visits, the chairman of 15 years decided to quit, so I put my hand up. Cancer Council ran the support group leader training, and they asked if I would be interested in being a **Cancer Connect** volunteer. I've been volunteering for five years now.

They connect me with people who are contemplating the same treatment I've had. There are often difficult side effects to prostate cancer treatment. If guys aren't unaware of the help that's out there, the road ahead can look pretty grim. I can reassure people that help is available and they're not alone.

I've gotten a great deal out of it. I come away and say, 'Gee, I think I've really helped that guy'.



**John Daven**  
Support group  
leader and  
**Cancer Connect**  
volunteer

**“I can reassure people that help is available and they're not alone.”**

With your help, we are getting closer to a cancer free future.

- **Volunteer with us**
- **Give regularly**
- **Host or join a fundraising event**
- **Campaign with us**
- **Visit one of our retail stores**



**To find out more, visit**  
**[cancercouncil.com.au/get-involved](https://cancercouncil.com.au/get-involved)**

Call **13 11 20** for information  
and support

This free and confidential service is staffed by  
experienced cancer professionals, who provide  
evidence-based information and support to  
people affected by cancer.

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## **Our cover star's story**

As soon as I heard the word 'cancer' my whole body went numb. After the initial shock I somewhat managed to regain some composure and all I could think of asking was, 'Am I going to die? How long have I got? Tell me straight – what should I do?'

Before my operation I was told that I could lose my voice altogether. I remember thinking: 'This can't be happening – no voice at all?' Being told I may lose my voice hit me hard and I made myself a promise – that if I lived, I would start speaking up for what I believe in.

I'm confident I am now doing just that – I've trained as a positive culture coach, hold my own workshops and am a Community Ambassador for Cancer Council NSW which I do to help make people with cancer aware of all the support on offer, so they don't have to face their cancer journey isolated and alone.

It's been almost three years now since I was declared 'cancer free' and, each year, I celebrate my anniversary. I feel it is important to celebrate these milestones, to celebrate life and the people around you.

### **Lily Gubbay**

Cancer survivor and Community Ambassador

Lily Gubbay with her daughter Liz and granddaughter Irima.





