

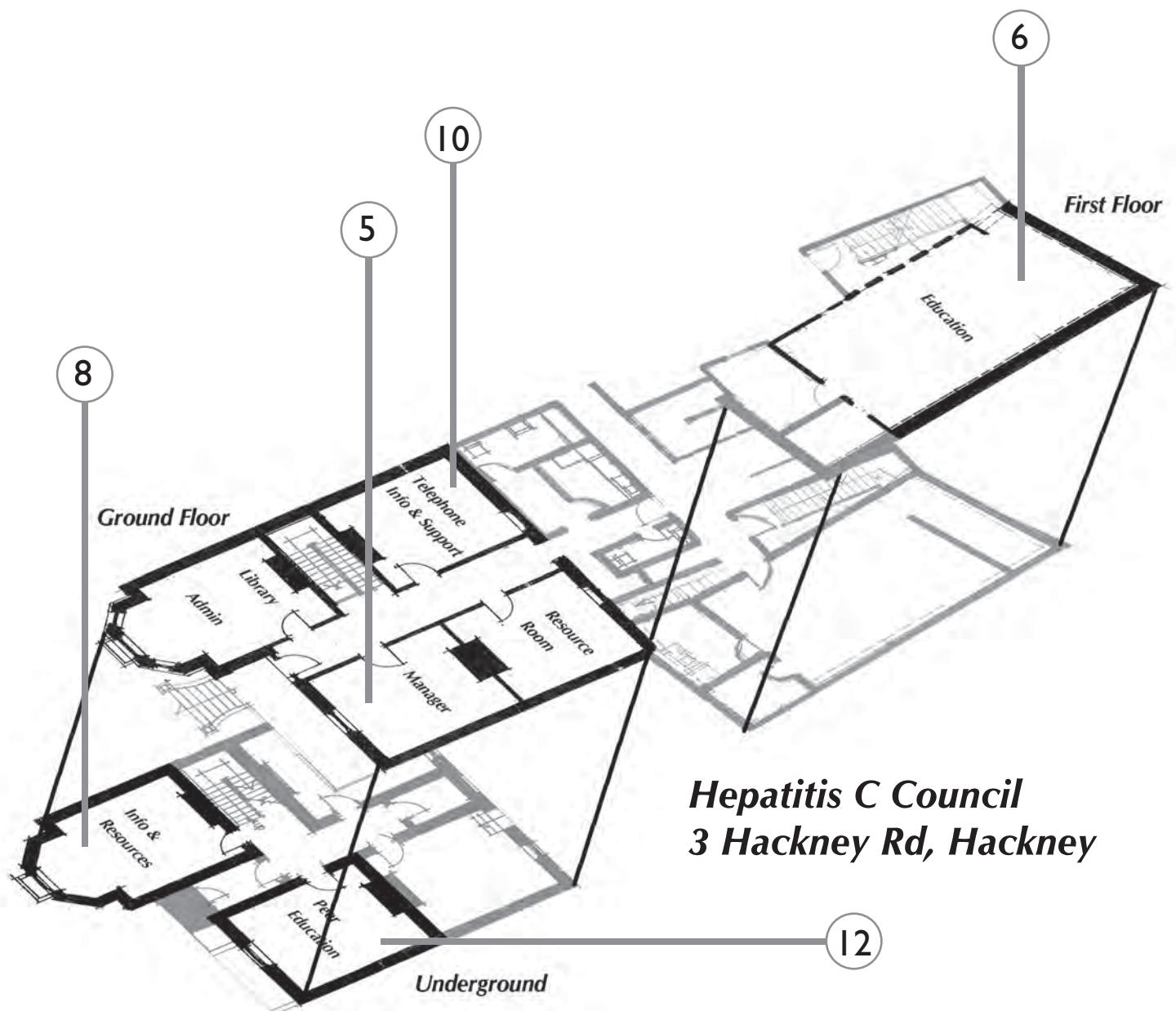


# Annual Report 2009-2010



# Contents

4	Chairperson's Report
5	Executive Officer's Report
6	Education Team's Report
8	Info & Resources Team's Report
10	Info & Support Team's Report
12	Peer Education Team's Report
14	Treasurer's Report
15	Auditor's Report



# Chairperson's Report

The year began well with the tender for the South Australian Hepatitis C Prevention and Health Promotion Program from the HIV and Hepatitis C Non-Government Programs in South Australia being awarded to HCCSA, thus securing three-year funding from July 2009 to June 2012 for our core services: telephone information and support, information and resources, and education services.

The tender process outcome for the HIV/Hepatitis NGO sector has meant that HCCSA is now in more formal partnership arrangements with the Partners of Prisoners Program of Offenders Aid and Rehabilitation Services SA in delivering hepatitis C education services for prisoners, and in delivering hepatitis C education services in the SA HIV/Hepatitis C Workforce Development Program, the tender won by Relationships Australia SA (RASAs).

HCCSA, along with other agencies in the sector, has also spent much time with the HIV/Hepatitis C Policy and Programs during the year, further developing evaluation systems for

our work as well as negotiating a new resource approvals policy and process to assist SA Health with their risk management around the sometimes 'politically sensitive' health information that the sector provides to some of our client groups.

2009-2010 was the first year of implementation of the first SA Hepatitis C Action Plan launched in May 2009, and by the end of the year, two key items had been progressed with the (almost finalised) employment of the first four of nine new hepatitis C nurse positions approved by SA Health to increase treatment access in SA, and a trial of syringe vending machines begun to enhance hepatitis C prevention efforts. HCCSA has representation on the South Australian Health Steering Committee on HIV/AIDS and Hepatitis C (SAHSCHAHC) which monitors progress on the implementation of the strategy. HCCSA is also represented on the Hepatitis C Model of Care sub-committee of SAHSCHAHC to develop a statewide hepatitis C treatment model utilising the new nurse positions.

Other strategic developments in the response to viral hepatitis in 2009-2010 occurred at both the national and international level. The third National Hepatitis C Strategy, the third National Aboriginal and Torres Strait Islander Blood-Borne Viruses and Sexually Transmissible Infection Strategy and the first National Hepatitis B Strategy were developed and launched, and signed off by all state and territory health ministers.

Internationally, the World Health Organisation adopted a resolution on viral hepatitis,

which endorsed World Hepatitis Day on 28 July each year, beginning in 2011, and committed to developing a global strategy to address viral hepatitis. HCCSA contributed to the development of the national strategies and is a board member of Hepatitis Australia, which in turn is a member of the World Hepatitis Alliance, which successfully advocated for the WHO resolution on viral hepatitis.

At an organisational level, the HCCSA Board has carried out the usual ongoing governance tasks of policy approval and review, financial monitoring via monthly reports against the annual budget, and the monitoring of grant acquittals. The Board made decisions about two important items in terms of HCCSA's medium-term future during the year, by approving the option for a new five-year term on the property lease of HCCSA premises in September 2009, as well as approving a server upgrade in early 2010. This year the Board has also been briefed by the Executive Officer about changes to employment legislation and the impact of the new Fair Work Australia legislation on the Enterprise Bargaining Agreement that is scheduled to be negotiated with HCCSA staff during the latter part of 2010.

I would like to thank all my colleagues on the HCCSA Board for their ongoing support, and to thank all staff and volunteers at HCCSA and our partner agencies for their commitment to delivering high-quality hepatitis services to the South Australian community.

**Arieta Papadelos**  
*Chair*





# Executive Officer's Report

In 2009-2010 HCCSA continued to provide its core service delivery programs to the SA community – the Telephone Information and Support Program, the Information and Resources Program and the Education Program. There was also a continued focus on providing services to the hepatitis C priority population groups across all program areas, such as the Telephone Information and Support Program's Prisonline, which connects to all SA prisons; the Information and Resources Program's eBox project in partnership with SAVIVE to provide hep C information to people who inject drugs, and the work of the HCCSA peer educators, who regularly visited 'host' agencies such as CNP sites, prisons and DASSA outpatients and rehabilitation sites.

The HCCSA Education Program also targeted the hepatitis C priority populations in their activities, and this year one of their highlights was working in partnership with the Migrant Resource Centre of SA (MRCSA) on the New Country, New Food

project, which targeted refugees newly arrived in Adelaide and refugee settlement volunteers. This project culminated in a celebratory feast with the Southern Bhutanese community during Awareness Week.

The *C Pix* project was another highlight of the year. HCCSA peer educators, educators and community artists worked with young people from Streetlink Youth Health Services, Magill Training Centre, Berri Headspace and Bowden Brompton Community School to create a powerful and dynamic exhibition of photoessays with hepatitis C prevention messages for other young people.

HCCSA had some other very colourful highlights to the year, which came from general community awareness-raising activities such as the 'I love my liver' T-shirts in National Awareness Week, and the development of the delightful children's colouring book, promoted through SA libraries and featuring our mascot O'liver, living a liver-friendly lifestyle, as well as the red spectacle of

the HCCSA float at the Fringe Festival Opening Parade.

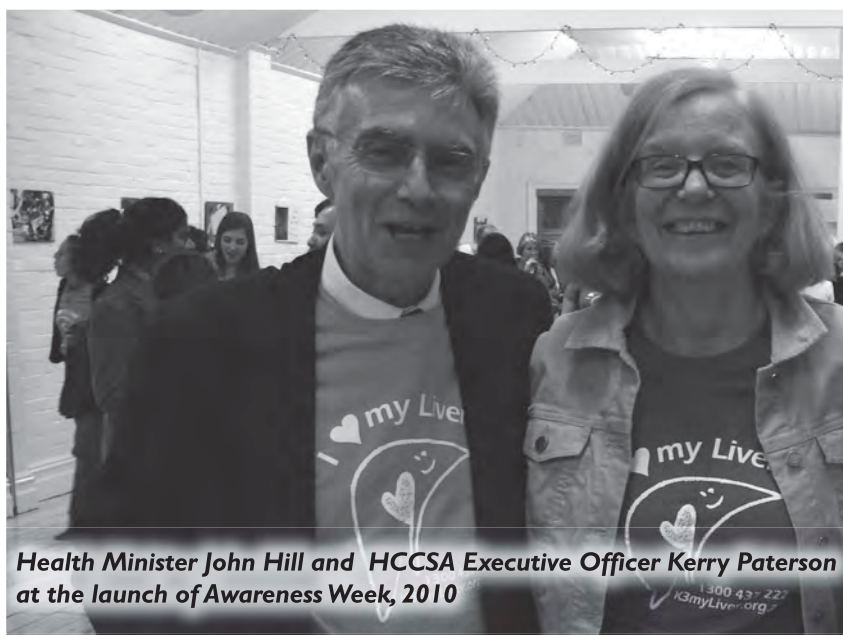
This year, there was quite a bit of movement amongst HCCSA's human resources. HCCSA welcomed six new staff (Mahdi Nor, Rose Magdalene, Gauri Gajmere, Caitlin Dowell, Dominic Guerrero and Kirsten Kennington) and we farewelled others (Lynn Newman, Lola Aviles, Alan Yale, Kevin O'Laughlin and Alan Kelly). Some of the new recruits were only here for the short term, with Gauri, Dominic and Caitlin also leaving in June.

The expansion in HCCSA staff during the year meant we had to carefully consider whether we would remain at our current premises when our lease ended in September or look for an alternative site. Thanks to creative thinking and careful measuring of the available space by staff members, we decided on an internal move rather than a move to another location.

HCCSA's volunteer contingent also grew during the year with the intake of new recruits to the Telephone Info and Support Service, where we welcomed new volunteers Karan, Louise, Steve, Janette and Antoin. Karan and Antoin also joined the Info and Resources team volunteers this year, as did Lola and Dayna.

2009-2010 has indeed been a year of colour and movement at HCCSA and I would like to thank all staff and volunteers for their contributions to our work during the year, which was offered with much energy and the occasional bit of *bling*. Thanks also to our partners and funders for their ongoing support.

**Kerry Paterson**  
Executive Officer



Health Minister John Hill and HCCSA Executive Officer Kerry Paterson at the launch of Awareness Week, 2010

# Education Team's Report

The education team wishes to thank all the volunteers who have helped within the organisation this year: we could not do this work without you. We would also like to extend our gratitude to the C Talk positive speakers who have shared, grown and empowered community and workforce participants whenever they shared their personal stories. It is a privilege to work with such an inspirational group of people.

## The Numbers

In the past year the education team delivered 39 education sessions to community members from our priority population groups, with 341 people attending these education sessions. 10 of these sessions for 72 participants were at the Woolshed, and two were at Kuitpo Community with 21 people in attendance, which is a total of 12 education sessions delivered to 93 people from rural drug and alcohol rehabilitation sites.

In addition to group education sessions, our education partners, the POP team from OARS SA, delivered individual hepatitis C education sessions to 419 people in the Adelaide Remand Centre, Adelaide Pre Release Centre and Yatala Labour prison.

This year, the education team was also a partner with the HIV/Hepatitis C Workforce Development Program at Relationships Australia, and for this program, HCCSA educators delivered 47 education sessions to workers who work with HCV priority populations in the metro area, with 259 people attending these education sessions.

A HCCSA educator also presented at eight GP sessions,

in partnership with the GP Department of Adelaide University and specialists from all treating hospitals. Four of these were held in Adelaide and four in rural areas of South Australia, and a total of 109 GPs attended these sessions. During the latter six months of this period we also delivered 11 education sessions to 85 rural workers and six sessions to 56 Aboriginal workers.

## The Places

● **Community:** Berri Headspace, Kuitpo Community, The Woolshed, Magill Youth Training Centre, Cavan Training Centre, Red Cross (Save a Mate), Bowden Brompton School, Streetlink, PEACE, Vietnamese Community, Bhutanese Community, Afghani Community and Cambodian Community

● **Workforce:** DASSA, Waranilla, The Woolshed, Flinders University, Adelaide University, Regency and Salisbury TAFE, Noarlunga Health Village, SHineSA, Australian Red Cross, RASA, United Care Wesley, Unity Housing Company, Magdalene Centre, OARS and Vietnamese Community

● **Rural and Aboriginal:** DASSA Yorke Peninsula, DASSA Clare, Cadell Training Centre, Community Service Victor Harbour, Coober Pedy Hospital and Primary Health Care Centre, Aboriginal Sobriety Group, Aboriginal Prisoners and Offenders Support Service, Nunkuwarrin Yunti and Aboriginal Family Support Services

## Other Education Activities

A HepLinkSA forum was organised during the year with a number of interstate guest speakers, and attracted 45 healthcare workers. The HepLinkSA e-list has grown to over 250 members, receiving the latest information and research findings about hepatitis C and any courses, positions or events that are relevant.

We currently have five main positive speakers (C Talkers) who presented at 49 education sessions during the year, 19 of those with community and 30 with workforce, and all were well received. The C Talk speakers also met quarterly during the year for debrief and support.





The education team supported new team member Gauri Gajmere to develop and implement an innovative project, the New Country, New Food project. This project provided opportunities for refugee settlement volunteers at the Migrant Resource Centre of South Australia (MRCSA) to share their learning about food in their new country, to assist them to establish a healthy and culturally familiar eating environment in their new country, and also to increase their health literacy in relation to viral hepatitis.

HCCSA educators also worked with the peer education team to deliver the C Pix photo-essay project, and were also able to

involve a young tattooist and body piercer in the workshops whom they had met during a previous project. This project is reported on in the Peer Education Program report.

This has been a productive and challenging year for the education team with a number of creative and innovative strategies that we trialled proving successful, while we grappled with the accountability which is expected of us as well as the constant turnover in staff. At various times during the year, the education team consisted of John McKiernan, Maggie McCabe, Mahdi Nor, Gauri Gajmere, Kirsten Kennington, Dominic Guerrera and Alan Yale, with only Mahdi and John remaining at the end of the year.

Thanks to all the team, our POP partner educators, Stefan Parsons and Emma Bailey, the workforce development team at Relationships Australia, and our other partner organisations for their continued backing and cooperation.

**John McKiernan**  
**Education Coordinator**



# Info & Resources Team's Report

There were a number of significant changes for Info & Resources (IR) this year.

The creation of a new position—IR Officer—allowed us to support to our volunteers more consistently, take a more systematic approach to resource drops and complete the long-awaited Resource Room Workers' manual.

In addition, the appointment of two short-term contract workers enabled us to:

- Build on past, successful O'liver colouring competitions to develop a children's liver awareness picture book.
- Support other program areas in the development of databases to meet reporting requirements.
- Further develop the eBox electronic information vendor.
- Develop a set of high quality material for the update of our "Eat Well" resource.

## Distribution

Overall, resource distribution increased by more than 13% with 95,336 items distributed. While basic information about hepatitis C still heads the list in terms of quantity, there was a large increase (135%) in distribution of information on testing and treatment. Distribution of resources on other hepatides also increased very significantly (144%).

There was a dramatic increase (52.3%) in resources being distributed to rural locations and an increase of over 4% in resources going to indigenous organisations. Services working with people from non-English-

**Figure 1.1**

Customer type	Qty 09-10	Qty 08-09	% Change
Indigenous organisations	10086	9665	4.4%
Youth organisations	2912	3634	-19.9%
Cultural / Ethnic specific organisations	3993	2317	72.3%
<b>Organisation Type</b>			
Drug and Alcohol Service	17669	18712	-5.57%
Hospitals and other general govt health services	9063	7168	26.44%
Community Health Service	8268	6403	19.48%
Community Service	7650	5383	41.82%
Liver Clinic	7634	4883	10.08%
Corrections and Justice System	5375	6082	-30.96%

speaking cultural backgrounds received over 72% more resources than the previous year and distribution to hospitals also saw a significant increase (26.4%).

Distribution to prisons dropped by almost 31%. The difference is due primarily to a mail-out of "prison packs" in the previous year. This was not repeated in the 2009-10 year as we were unable to ascertain if the information packs made it to the community areas within the prisons for which they were intended.

See figure 1.1 for further details.

## Resources

Aside from the always excellent quarterly issues of the Hepatitis C Community News, new resources of note this year included *Meet O'liver* (the children's picture book referred to above), a hepatitis B vaccination pamphlet, a new liver information website ([K3myLiver.org.au](http://K3myLiver.org.au) or [ilovemyLiver.org.au](http://ilovemyLiver.org.au)) and the eBox (a computer system set up as an electronic information vendor deployed at the SAVIVE Clean Needle Program site at Salisbury).

The top ten resources distributed for 2009-2010 are shown in figure 1.2.

**Figure 1.2**

The top ten resources distributed for 2009-2010 were:

This is Hepatitis Bookmark	10655
Little Book of Hep C Facts	5320
Little Book of Hep B Facts	4465
Hep C Info and Support Line card	3517
Hepatitis C Community News	3385
12 Questions about hepatitis C testing	3150
12 Questions to Ask Your GP about Hep B	3150
12 Questions about Hepatitis B Testing	3140
This is Hepatitis sticker	3000
12 Questions to Ask Your GP about Hep C	2829



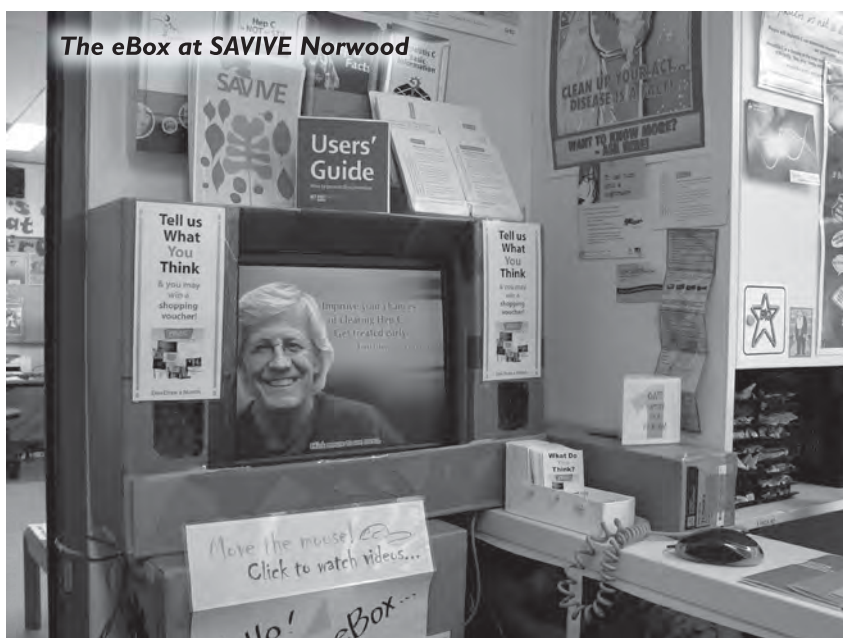


## Information Stalls

We participated in 16 information stalls in this period, most of which were staffed by the HCCSA Peer Educators. Some were staffed by workers volunteering hours on weekends. Events of interest included the State Aboriginal Women's Gathering, the Vietnamese Tet Festival, Refugee Week's Women's Information Day, the Homeless Health and Housing Expo and the YAC-RAP Youth Expo.

- Love Your Liver meals at Community Food SA (x3) and Vietnamese Community centre.
- New Country, New Food Feast
- Peer Educators' Hepatitis Awareness promotions at SIN, Hindmarsh CNP, Warinilla, Elizabeth, Archway

Awareness Week resources were mailed out to **647** organisations who together received a total of **17,352** resource items.



## Awareness Week Highlights

Hepatitis Awareness Week activities in South Australia involving all HCCSA Programs included:

- C Pix Photoessay Exhibition
- Down Your Street Letterboxing campaign
- eBox launch at SAVIVE Norwood
- Educators' University tour
- I ♥ My Liver T-shirts campaign
- Libraries colouring competition

The I ♥ My Liver T-shirt campaign reached 42 organisations, all of whom set up displays and whose staff wore the shirts during the week. In all, 597 T-shirts were distributed. The campaign introduced to us six new rural-based services who all ordered additional resources for the Week as well as after.

The Down Your Street bookmark distribution this year saw an increase in participants from 37 to 57 and a 1,675 increase in bookmarks distributed (Total= 8055). Twelve of the participants were from rural areas compared with one last year.

## Website

There was a small drop (6%) in visitors to the website although visitors were staying 28% longer on the site. Orders coming through the online ordering facility jumped from 25% to almost 55% of all client-initiated orders. This was clearly due to the new, smoother, easy-to-use shopping cart launched with the new website in May 2008.

The new *I <3 my liver* website (read: *I love my liver*) was well received. We hope to use it further in reaching general audiences to promote liver awareness.

## Volunteers

A new website, accessible only by IR workers, was built to facilitate communication within the team and provide an opportunity for the volunteers to improve their computing skills. There was relatively high turnover of volunteers due to ill health and new work commitments. Volunteers contributed over 1300 hours filling orders, doing resource drops, staffing information stalls and programming software. We had nine volunteers at the close of the financial year.

We thank our volunteers for their commitment and contribution with special thanks to Lola for taking on the role of O'liver. Our volunteers enable us to provide quality services which would not be possible otherwise.

IR Team members at various times throughout 2009-2010: Antoin, Adil, Bryan, Caitlin, Cecilia, Dayna, Eve, Gauri, James, Joy, Karan, Lola, Lyn, Mark J, Phil, Philip and Rose.

**Cecilia Lim**  
IR Coordinator

# Info & Support Team's Report

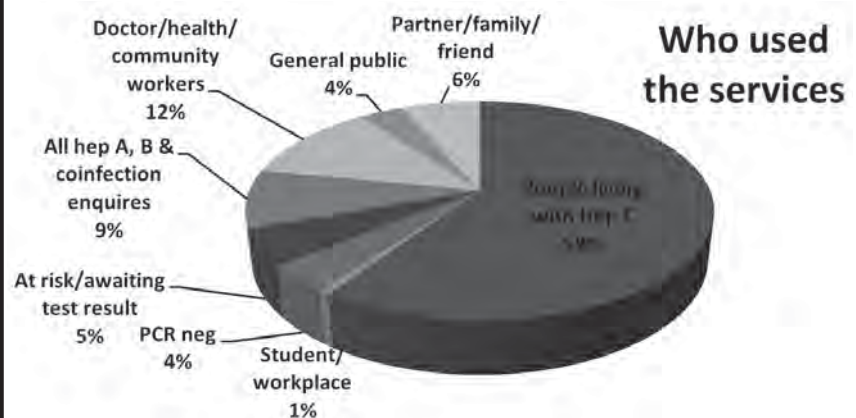
The Information and Support Program provides a Monday to Friday, 9 to 5 telephone information and support service (TIS), on-request information via email, a free-call Prisonline, face-to-face information sessions for individuals and couples, and a fortnightly support group called Calming the C.

The primary target groups for the program services include people living with, affected by or at risk of hepatitis C, their partners, family or friends and health or community workers who make contact on their behalf. Basic information and resources are also available for people affected by hepatitis B.

There were 830 contacts made with Information and Support services over the past year. The majority of contacts (612) were through the phone line, 38 via the Prisonline, 51 face to face sessions, 115 attended Calming the C and 14 via email. See figure 2.1 for details.

The majority of people (59%) who used the four services were living with hepatitis C. Although only 2% of contacts were living

**Figure 2.1**



with hepatitis B or coinfections, 58 people affected by hepatitis B made contact for information or support. Overall, 84% of service users were residing in the metropolitan South Australia and 12% from rural SA. However rural contacts increased to 15% in people who used either the phone service or email to make contact, and in addition rose to 17% in the second half of the year after increased promotion through the rural educator. A high proportion of calls through the Prisonline (45%) were from the rural areas and 21% identified as Aboriginal or Torres Strait Islander compared to only 3%

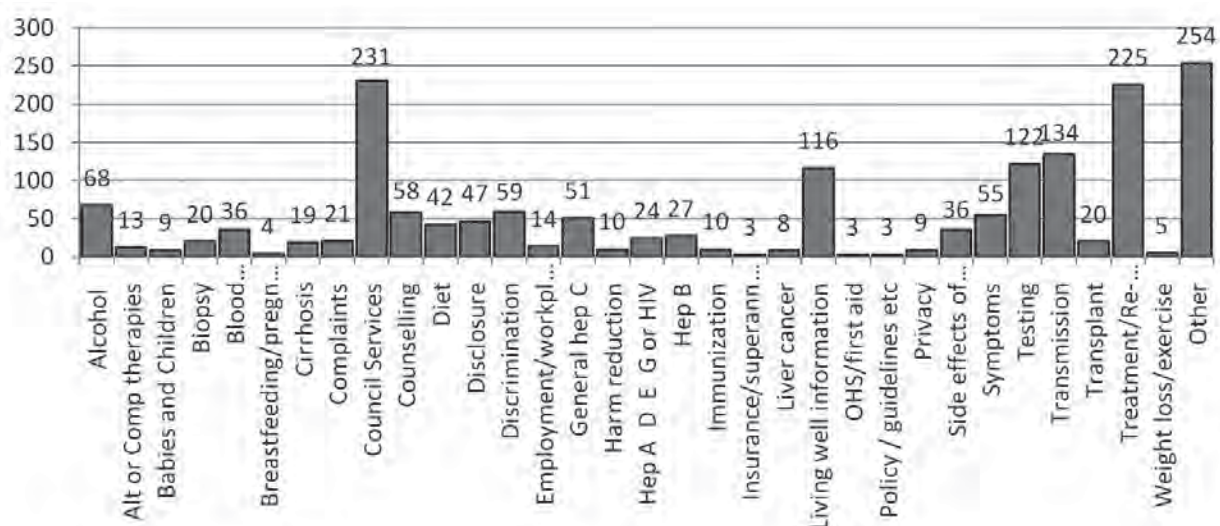
through the general phonenumber.

The program also refers people to other services. Over the past year, 367 referrals were provided to clients. Most referrals were health-related, including dental, but people were also referred to mental health, anti-discrimination, housing and welfare services.

Figure 2.2 shows topics discussed through the TIS and email, Prisonline and face to face sessions.

Currently there are nine volunteers in the team, Fred has over 12 years experience, Will has over five years and

**Figure 2.2**



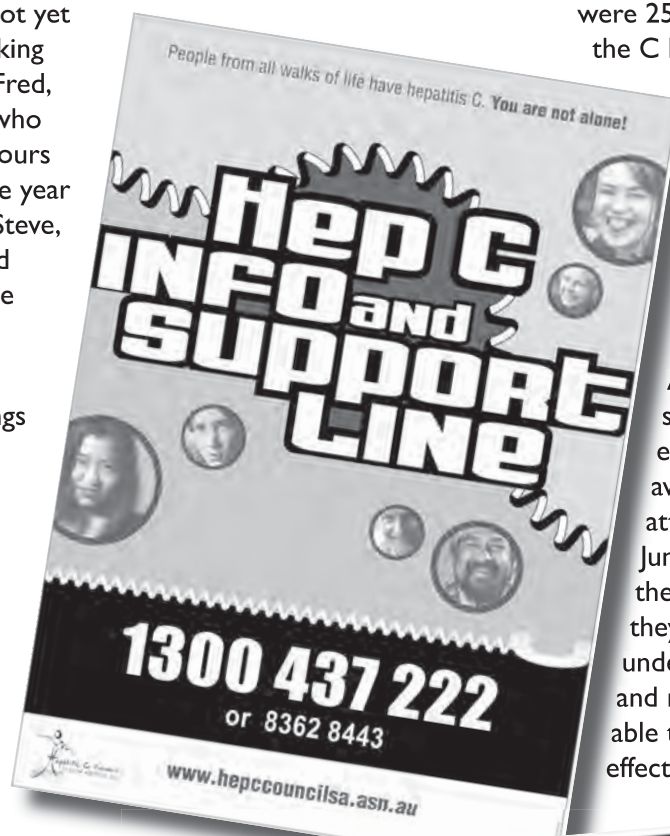


Debra and Michele have over four years on the phonenumber. Five new volunteers began in February, and at the end of the year are continuing their on-the-job training, and are not yet working independently taking calls. A big thank-you to Fred, Will, Debra and Michele who worked a total of 1,066 hours taking calls throughout the year and a warm welcome to Steve, Antoin, Janette, Louise and Karan who have joined the team this year.

Debrief and professional development (PD) meetings are held four-weekly to enable the phonenumber volunteers to meet and discuss calls and also participate in ongoing education on issues relevant to their phone work. Guest speakers are regularly invited to present on their service and/or area of expertise. There were eight debrief /PD meetings held during the year. No meetings were held between November 2009 and February 2010 due to volunteer illness, the Christmas break and phonenumber training. Professional development included:

- David Vemeeren on HIV and PEP,
- Bill Gaston on new casework services at MOSAIC,
- Russell Waddell on hep A and B,
- two lifestyle advisers on the *Do It For Life Program*, and
- Sharon Liberali and Bronwyn Scopocasa from the Adelaide Dental Hospital Special Needs Unit on changes to Dental Hospital Services.

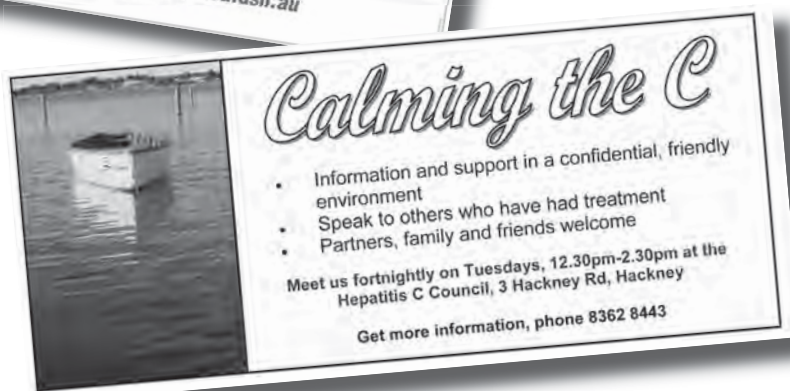
All meetings from March 10 until June 10 have been dedicated to modules not covered in the initial Certificate IV training.



more or just wanting to talk to others who are living with hepatitis C attend the group. Participants are welcoming and friendly to all newcomers. There were 25 meetings of Calming the C held over the year. Of

the 115 attendances, 65 (56%) were male and 50 (43%) female and 16 people had come for the first time. All people who attended reside in the metropolitan area.

Anonymous evaluation surveys (with reply paid envelopes) were made available to all participants attending in February and June 2010. People reported they felt welcome when they attended, have a greater understanding of hepatitis C and related issues, are better able to manage symptoms/side effects and were more aware



### Calming the C

Calming the C is an information and support group that meets fortnightly at the Council over a platter of sandwiches. Conversation is self-directed by the participants. People newly diagnosed, considering or on treatment, wanting to know

of services that can help them as a result of attending the group. All who responded said they would highly recommend this group to others.

**Deborah Warneke-Arnold**  
TIS Coordinator



# Peer Education Team's Report

## Background

The Outreach Hepatitis C Peer Education and Support Project, funded for three years through the NGO Treatment Grants Program, Department of Health and Ageing has now completed its second year in 2009-2010. The project has trained and supported hepatitis C peer educators to regularly attend 'host' agencies which provide services to the hepatitis C priority population groups, so that they can engage the clients of these services in hepatitis C education.

## Regular Placements of Peer Educators

By the end of this financial year, HCCSA peer educators were regularly attending Uniting Care Wesley's Kuitpo, Mission Australia's Hindmarsh Centre Clean Needle Program (CNP), Offenders Aid and Rehabilitation Services Partners of Prisoners Family Centre at Yatala Prison, Cadell Prison, Drug and Alcohol Services SA (DASSA) Eastern and Northern sites, the Sex Industry Network (SIN), the SA Voice of Intravenous Education (SAVIVE) and the Vietnamese Community in Australia SA Chapter CNP. Towards the end of this year, with the establishment of a hepatitis C treatment clinic at Warinilla, the HCCSA peer educator at this agency is now involved in supporting DASSA clients undergoing hepatitis C treatment.

## Approaches

The HCCSA peer education project has developed a range of strategies and innovative approaches to engage with our

clients to sensitively address the highly stigmatised and innately personal topic of hepatitis C. Peer eds have developed quizzes, designed t-shirts displaying *Ask me about hep C* to wear to their placements and provided *Love Your Liver Lunches* at the Community Food SA centre on Cromwell Road, Kilburn, as well as the Vietnamese Community Centre in Athol Park and at three SAVIVE CNP sites in Norwood, Noarlunga and the Parks.

Throughout the year, the peer educators participated in a range of awareness-raising activities at community events targeting the hepatitis C priority population groups including the Aboriginal Women's Gathering at West Beach, the Homeless Health and Housing Expo in Whitmore Square, James Nash House during Drug Action Week and

the Youth Expo in the Adelaide Hills.

The peer educators were also busy during National Hepatitis Awareness Week creating and disseminating two targeted information resource kits. One of these was for street-based sex workers and consisted of a bag with sterile injecting equipment including water, filters, spoons, a torchlight and referral information for AOD and hepatitis services. Also included in this bag was a card about hepatitis B vaccination, developed by the peer educators displaying key points that were derived from their interactions with their clients. To maximise hepatitis C awareness and peer educators' engagement with their CNP clients, the second resource kit included all the requirements needed for safe injecting.





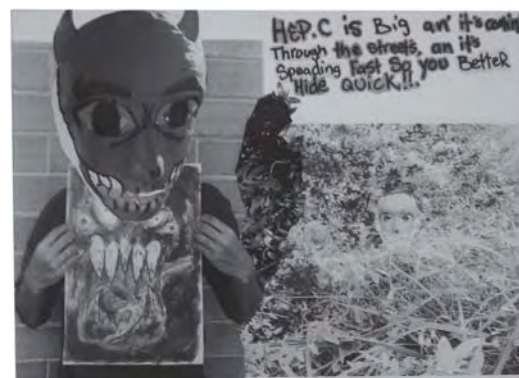
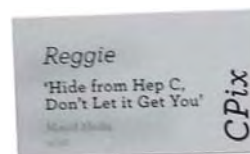
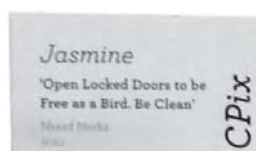
## CPix

The HCCSA Peer Education team also worked on a hepatitis C resource development project with HCCSA Educators. The CPix project was developed for young people, with a series of workshops involving education and arts activities being held at the Riverland Headspace, Bowden and Brompton Community School, Magill Training Centre and Streetlink Youth Health Service.

Our peer educators engaged with young people affected by hepatitis C to provide their experience and knowledge about the virus and the risk behaviours.

This project provided HCCSA staff with excellent opportunities to learn about young people's experiences in relation to risk and hepatitis C, and to develop networks with youth agencies to develop hepatitis C peer education models for young people.

The peer education team assisted with the artistic development of an exhibition consisting of 21 diverse and provocative artworks, known as photo essays, about hepatitis C and risk by young people for young people. The exhibition was launched by the Health Minister in National Hepatitis Awareness Week at



Streetlink, and has since also been staged at Magill and in the Riverland.

Following on from this project, peer educators were invited to Bowden Brompton Community School to provide peer-based education during Drug Action Week and HCCSA will be implementing a youth peer education model at Streetlink Youth Health Service in the next financial year.

## Conclusion

There is never a dull moment in this program as we continue to explore new and innovative ways to provide this valuable service that supports disease prevention and treatment uptake to the hepatitis C-affected community. Outreach peer education work is demanding and HCCSA has greatly valued and respected the work of our peer educators Fred, Karan, Megan, Yvonne, Anya, Phil, Mark, Alan and Kevin in taking on this challenging role throughout the year.

**Maggie McCabe**

**Outreach Peer Education  
Coordinator**



# Treasurer's Report

Total income from grants for the Hepatitis C Council of SA (HCCSA) in the 2009-2010 Income and Expenditure Statement is \$971,510. Grant income is the net result of 12 months recurrent funding for the financial year of \$641,158 for the SA Hepatitis C Prevention and Health Promotion Program, and \$76,903 for the Hepatitis C Education and Prevention Expansion Program from the SA Department of Health; two grants from the Hepatitis C Education and Prevention (CHEP) Program which finished at 30 October 2009 for the Education Program Coordinator of \$22,226 and the Rural and Remote Education and Prevention Program of \$33,269; and \$197,954 for the Hepatitis C Peer Education Program from the NGO Treatment Grants Program, both the CHEP and NGO Treatment Grants Programs were funded by the Australian Government Department of Health and Ageing.

Other sources of income for the year were:

- Interest - \$13,884,
- Donations - \$120,
- Memberships - \$50,
- Reimbursements – \$6,684,
- Sundry Income - \$600, and
- Consultant Income - \$50,000 (income from a partnership in the SA HIV/Hepatitis C Workforce Development Program with Relationships Australia South Australia (RASA))

Total Income for 2009-2010 was \$1,042,848, which is \$233,108 greater than the previous year.

Total expenditure for the year was \$1,031,511. The major

expense was Salaries and On-costs for staff totalling \$706,214. Other large expenses included Premises Rent and On-costs of \$72,307 and Consultants costs of \$73,062, the largest components being payments of \$40,000 for partnership with Partners of Prisoners Program in delivering hepatitis C education to remandees in the SA Hepatitis C Prevention and Health Promotion Program; \$12,000 for external evaluation components of the Outreach Hepatitis C Peer Education Program by Adelaide University; \$7,360 for personnel involved in the server upgrade; and \$10,434 for a peer educator and community artists for education projects.

Salaries and On-costs accounted for the greatest increase in expenses from the previous year at \$132,045 reflecting new staff positions at the Council. Travel and Accommodation costs of \$15,784 and Motor Vehicle Running Costs of \$19,483 did not vary much from last year's expenses for these items. While Printing costs of \$22,753 were

down on last year by \$1,393; telephone costs of \$12,998 and IT Support costs of \$12,880 were up by \$2,112 and \$3,488 respectively.

For the 2009-2010 financial year, HCCSA had a surplus of \$11,337, resulting in total equity of \$83,919 as at 30 June 2010. The majority of existing assets of \$400,233 are cash assets of \$352,938, and the most significant current liabilities are grants in advance of \$108,937 which will be expended in the coming financial year according to contractual arrangements with the relevant funding bodies.

HCCSA would like to thank the HIV, Hepatitis C Policy and Programs at the SA Department of Health and the SA Branch of the Australian Government Department of Health and Ageing for administering HCCSA's major recurrent funding during the 2009-2010 financial year.

**Darrien Bromley**  
*Treasurer*



## INDEPENDENT AUDITOR'S REPORT

### Hepatitis C Council of South Australia Inc

We have audited the accompanying financial report of the **Hepatitis C Council of South Australia Inc**, which comprises the Balance Sheet as at 30 June 2010, and the Income and Expenditure Statement for the year then ended, a summary of significant accounting policies and other explanatory notes.

The **Hepatitis C Council of South Australia Inc** are responsible for the preparation and fair presentation of the financial report in accordance with Australian Accounting Standards (including the Australian Accounting Interpretations). This responsibility includes designing, implementing and maintaining internal control relevant to the preparation and fair presentation of the financial report that is free from material misstatement, whether due to fraud or error; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

#### *Auditor's responsibility*

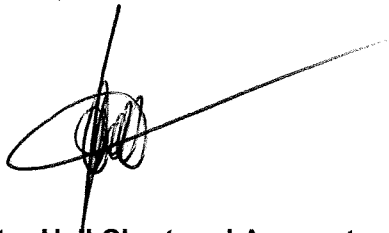
Our responsibility is to express an opinion on the financial report based on my audit. We conducted my audit in accordance with Australian Auditing Standards. These Auditing Standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial report in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion of the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the **Hepatitis C Council of South Australia Inc**, as well as evaluating the overall presentation of the financial report.

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

*Auditor's Opinion*

In our opinion, the financial report presents fairly, in all material respects, the financial position of the **Hepatitis C Council of South Australia Inc** as of 30 June 2010, and of its financial performance for the year then ended in accordance with Australian Accounting Standards (including the Australian Accounting Interpretations).

A handwritten signature in black ink, consisting of a series of loops and a long horizontal stroke extending to the right.

**Peter Hall Chartered Accountant**

Dated 30<sup>th</sup> September 2010

**HEPATITIS C COUNCIL OF SOUTH AUSTRALIA INC  
FINANCIAL REPORT  
FOR THE YEAR ENDED 30 JUNE 2010**

---

**BOARD REPORT**

The Board members submit the financial report of the **Hepatitis C Council of South Australia Inc** for the financial year ended 30 June 2010.

The name of the Board members at the date of this report are:

Arieta Papadelos  
Catherine Freguson  
Darrien Bromley  
Carol Holly  
Lisa Carter  
Kristy Schirmer  
Bill Gaston  
Kerry Paterson  
Justine Price  
Stefan Parsons  
Shabeena Laundry

In accordance with Section 35(5) of the Associations Incorporations Act 1985, the Board of the **Hepatitis C Council of South Australia Inc** hereby states that during the financial year ended 30 June 2010.

- (a) (i) No officer of the association;  
(ii) No firm of which the officer is a member;  
(iii) No body corporate in which an officer has a substantial financial interest;

Has received or become entitled to receive a benefit as a result of a contract between the officer, firm or body corporate and the association.

- (b) No officer of the association has received directly or indirectly from the association any payment or other benefit of a pecuniary value.

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

  
BOARD MEMBER

  
BOARD MEMBER

Dated this                      day of                      2010



**HEPATITIS C COUNCIL OF SOUTH AUSTRALIA INC  
FINANCIAL REPORT  
FOR THE YEAR ENDED 30 JUNE 2010**

---

**STATEMENT BY MEMBERS OF THE BOARD OF MANAGEMENT**

The Board have determined that the association is not a reporting entity.

The Board have determined that this special purpose financial report should be prepared in accordance with the accounting policies outlined in Note 1 to the financial report.

In the opinion of the Board, the financial report:

1. Presents fairly position of the **Hepatitis C Council of South Australia Inc** for the year ended 30<sup>th</sup> June 2010 and its performance for the year ended on that date.
2. At the date of this statement, there are reasonable grounds to believe that the **Hepatitis C Council of South Australia Inc** will be able to pay its debts as and when they fall due.

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

  
BOARD MEMBER

  
BOARD MEMBER

Dated this                      day of                      2010

**HEPATITIS C COUNCIL OF SOUTH AUSTRALIA INC**  
**INCOME & EXPENDITURE STATEMENT**  
**FOR THE YEAR ENDED 30TH JUNE 2010**

<b>2009</b>		<b>2010</b>
<b>\$</b>		<b>\$</b>
	<b>INCOME</b>	
762,012	Grants Recurrent	971,510
10,000	Other Grants	-
350	Donations	120
12,058	Interest Received	13,884
150	Membership	50
3,405	Positive Speaker Fee	-
5,705	Reimbursements	6,684
16,060	Sundry Income	600
-	Consultant Income - RASA	50,000
<u>809,740</u>		<u>1,042,848</u>
	<b>OPERATIONS</b>	
	<b>Administration</b>	
98	Advertising	6,027
1,870	Audit Fees	1,900
610	Bank Charges	930
5,126	Accounting & Bookkeeping	12,135
3,962	Meetings Expenses	-
499	Computer Consumables	-
25,633	Consultants	73,062
7,704	Depreciation	14,769
2,640	Equipment Purchased < \$500	2,601
3,576	Hire Fees	2,766
9,392	Information Technology Support	12,880
2,400	Insurance	3,200
71	Legal & Filing fees	74
1,563	Memberships & Fees	1,550
19,725	Motor Vehicle Running Costs	19,483
1,250	Office Maintenance & Repairs	3,289
10,739	Postage & Freight	9,222
72,489	Premises Rent and On Costs	72,307
24,146	Printing	22,753
3,549	Resource purchase	8,988
506	Security	943
2,481	Staff Amenities	3,511
4,005	Staff Training	2,160
6,980	Stationery	4,053
2,131	Sundries	1,224
10,886	Telephone	12,998
16,119	Travel & Accommodation	15,784
3,939	Volunteer Expense	5,006
<u>244,089</u>	<b>TOTAL OPERATIONS</b>	<u>313,615</u>

**HEPATITIS C COUNCIL OF SOUTH AUSTRALIA INC**  
**INCOME & EXPENDITURE STATEMENT**  
**FOR THE YEAR ENDED 30TH JUNE 2010**

<b>2009</b>		<b>2010</b>
<b>\$</b>		<b>\$</b>
	<b>Employment Expenses</b>	
507,942	Wages	607,020
1,319	Other Wage Costs	62
44,435	Superannuation	52,484
10,719	WorkCover	11,667
9,754	Provisions for Staff Entitlements	34,981
<u>574,169</u>	<b>TOTAL EMPLOYMENT EXPENSES</b>	<u>706,214</u>
	<b>Programs Expenses</b>	
-	Program Expenses	11,682
<u>-</u>		<u>11,682</u>
-	<b>TOTAL PROGRAM EXPENSES</b>	<u>11,682</u>
<u>818,258</u>	<b>TOTAL EXPENDITURE</b>	<u>1,031,511</u>
<u>( 8,518)</u>	<b>NET SURPLUS (DEFICIT) FOR THE YEAR</b>	<u>11,337</u>



**HEPATITIS C COUNCIL OF SOUTH AUSTRALIA INC**  
**BALANCE SHEET**  
**FOR THE YEAR ENDED 30TH JUNE 2010**

2009 \$			2010 \$
	<b>ACCUMULATED FUNDS</b>		
81,100	Opening Balance		72,582
( 8,518)	Net Surplus/(Deficit) for the Year		11,337
<u>72,582</u>	<b>TOTAL FUNDS</b>		<u>83,919</u>
	Represented by:-		
	<b>ASSETS</b>		
	<b>Current Assets</b>		
6975	Cash at Bank - Current Account	18617	
325,781	On Line Saver	327,344	
555	Gift Fund Account	675	
750	Petty Cash	750	
993	Receivables	866	
4,685	Prepayment	<u>4,686</u>	
339,739			352,938
	<b>Non-Current Assets</b>		
113,377	Plant & Equipment - at cost	139,290	
(77,226)	<b>Less Accumulated Depreciation</b>	<u>(91,995)</u>	<u>47,295</u>
36,151			
<u>375,890</u>	<b>TOTAL ASSETS</b>		<u>400,233</u>
	<b>CURRENT LIABILITIES</b>		
17,017	Creditors	16,199	
48,728	Employee Entitlements	48,844	
136,325	Grants in Advance	108,937	
14,690	Net GST Payable	<u>20,921</u>	
216,760			194,901
	<b>NON-CURRENT LIABILITIES</b>		
37,269	Provision for Long Service Leave	53,722	
49,279	Provision for Redundancy (Employees)	67,691	
86,548			121,413
<u>303,308</u>	<b>TOTAL LIABILITIES</b>		<u>316,314</u>
<u>72,582</u>	<b>NET ASSETS</b>		<u>83,919</u>

## HEPATITIS C COUNCIL OF SOUTH AUSTRALIA INC

### NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS

#### **Note 1: Summary of Significant Accounting Policies**

The Association is not a reporting entity because in the Council's opinion, there is unlikely to exist users who are unable to command the preparation of reports tailored so as to satisfy specifically all of their information needs and these Financial Statements are therefore "Special Purpose Financial Reports" that have been prepared solely to fulfil the requirements of the constitution of the Association.

The Association has applied the provisions of Miscellaneous Professional Statement APS 1 "Conformity with Statements of Accounting Concepts and Accounting Standards" relevant to Special Purpose Financial Reports. On this basis no Accounting Standards are applicable. Accounting Standards have only been applied to the extent that they coincide with the accounting policies set out below.

#### **(a) Basis of Accounting**

The accounts have been prepared on the basis of historical costs and except where stated do not take into account current valuations of non-current assets.

#### **(b) Non-Current Assets**

All assets held by the Association with an original cost exceeding \$500 have been capitalised.

#### **(c) Depreciation of Plant, Equipment and Buildings**

Depreciation is calculated on a diminishing value basis so as to write off the cost of each depreciable non-current asset over its expected useful life.

#### **(d) Income Tax**

The Association is a non-profit organisation and is exempt from income tax pursuant to Section 23(ea) of the Income Tax Assessment Act.





