

As always due to its 28
July date, the year began
in full swing in preparation
for World Hepatitis Day.
This year, the Riverland
Roadshow was a key
activity – taking awareness
raising, education and rapid
HCV point of care testing
regional. The other main
activity was our yearly online
quiz – this year entitled
Hepatitis and Kids.

Between September and October 2022, after delays of two to three years due mainly to COVID, the Kirby Institute's TEMPO Study commenced at 4 South Australian Clean Needle Program (CNP) sites. TEMPO is a randomized controlled trial to compare point-ofcare HCV RNA testing, dried blood spot testing, and standard of care to enhance treatment uptake among people with HCV who have recently injected drugs. Hepatitis SA peers are part of the study team at each of the 4 SA sites in partnership with the three Adelaide Local Health Networks. TEMPO has kept all involved very busy since it started with recruitment still continuing by year's end.

The secondary CNP at our Hackney Road office has also become busier, with a 10% increase in CNP clients this year, an increase probably in part due to the closure of the CNP at Nunkuwarrin Yunti in February 2023.

Other research Hepatitis SA has directly supported this year has included the Annual Needle and Syringe Program survey in October; Hepatitis + the Law research by the University of Technology, a four year project which aims to identify and eliminate legal barriers to testing and

treatment for people with HIV and hepatitis B; and the Centre for Social Research in Health's Stigma Monitoring Research Project related to people with hepatitis B, as well as this research related to people who inject drugs. Several staff were also interviewed for various national research projects.

During the year, Hepatitis SA contributed to many consultations and reviews, including the Hepatitis B and Hepatitis C National Strategies, the Review of the SA Hepatitis B Model of Care and development of the HBV Monitoring Framework, SA HBV and HCV Health Pathways documents, the development of the SA AOD Workforce Development Strategy, and conducted focus groups for the post market review of the Opioid **Dependence Treatment** Program.

COVID again caused disruption to Hepatitis SA operations in July 2022 during the winter wave, when a number of staff and/or their families tested positive. Carol's travels to Port Pirie for the Aboriginal Harm Reduction Project also had to be cancelled midway, when an accompanying partner agency's staff member also tested positive.

In the last few months of the financial year, a working from home policy was finalised and a new worklife balance leave policy was introduced for those who aren't able to work from home due to the nature of their work, or who choose not to work from home.

Other organisational policies were reviewed according to the review schedule, regular fire drills and Work, Health

and Safety inspections undertaken, and all our e-equipment was tested and tagged.

Amidst all the online professional development staff attended again this year, it was also good to once again be able to travel interstate – with three staff attending the EC Australia Showcase in Melbourne in November 2022 and three CNP Peer Projects staff attending the International Harm Reduction Conference in Melbourne in April 2023.

In the early days of 2023, two of our long-term employees, Nicole Taylor and Mark Tiller resigned and I would like to thank them both for their valuable contributions to Hepatitis SA, Nicole in the Education Team and Mark as part of the Clean Needle Program Peer Projects Team.

Board member Kate Kelly also resigned due to a conflict of interest when she won a new role at Drug and Alcohol Services South Australia that is directly related to administering funding for one of our main grants. Thankyou Kate for your contribution too.

I would like to thank all staff at Hepatitis SA for their commitment to providing our high-quality services and thank our wonderful partners for their support, especially all our hardworking South Australian viral hepatitis nurses. Last but not least thankyou to our main funding administrators, the staff at the STI & BBV Section at the South Australian Department for Health and Wellbeing, and Drug and Alcohol Services South Australia.

Arieta Papadelos Chairperson

Hepatitis SA CNP Peer Projects consists of a team of peer educators placed at high volume CNP sites to provide harm reduction services to people who inject drugs. The Peer Education team is supported by a Coordinator and a Project Worker.

This year peer educators provided services full-time at 3 'Primary' CNPs: Noarlunga Health Precinct, Noarlunga Centre; Wonggangga Turtpandi Aboriginal Health Service, Port Adelaide; and DASSA Northern Service, Elizabeth.

Peer educators provided CNP services on a sessional (part time) basis at Nunkuwarrin Yunti Aboriginal Health Service, Adelaide (until March 2023); Uniting Communities Streetlink, Adelaide; and DASSA Central, Stepney. Sessional peer educators were also hosted by Community Access and Services SA in Athol Park and Uniting Communities **Aboriginal Community** Connect at Prospect for part of the year.

# CNP Client Interactions: Primary & Sessional Peer Sites

This year the CNP Peer Projects recorded an increase in client interactions, including an increase in new client interactions, and a 19% increase in the number of syringes distributed (190,000 more syringes). Similar to the previous few years, methamphetamine use (60% of interactions) far outweighs heroin use (16% of interactions).

- 13,307 client interactions
- 712 new clients
- 1,976 interactions with Aboriginal and/or Torres

- Strait Islander clients (15%)
- 1,165,505 syringes distributed
- an average of 87 syringes per client
- 2,673 occasions of information and peer education
- 130 intensive support/ complex needs interactions

# CNP Client Interactions: Hackney CNP

The Hepatitis SA office at Hackney Road, staffed by peers and non-peers, also provides harm reduction services. There were 1,053 client interactions this year (74% male; 26% female), which is a 10% increase in client numbers compared to last year. This year also saw a small increase in heroin use and PIEDs/steroids use amongst Hackney CNP clients.

- 64 new clients
- 66 Aboriginal client contacts
- 108,517 syringes distributed
- 218 occasions of information/education
- 75 referrals to other CNPs, AOD services and hepatitis C testing/ treatment
- 42% of clients reported using amphetamines
- 23% of clients reported using heroin
- 28% of clients reported using PIEDS

# Community Engagement and Workforce Training

Participating in annual events such as Closing the Gap (CTG) Day, ACC BBQ for

NAIDOC week, International Overdose Awareness Day (IOAD) and World Hepatitis Day created additional opportunities for engaging with people who inject drugs and the wider community. CNP peer educators raised awareness of important issues (eg overdose, and hepatitis C testing and treatment) through raffles, competitions and information stalls. A raffle was held at all peer CNP sites for World Hepatitis Day. The CNP Peer Projects engaged with over 250 people through events, including 100 people at CTG Day and 50 people at an Aboriginal **Community Connection** IOAD event where the Project Officer gave a talk about lived experience of witnessing overdose.

The CNP Peer Projects team provided training and education (online and face-to-face) to 143 paid staff, volunteers and students in the health and community sector. Training covered a range of topics including: DASSA CNP Training; Overview of CNP Peer Projects; Vein Care, High Risk Injecting and Harm Reduction; Overdose Response and Using

Naloxone; Introduction to CNP; CNP inductions and refreshers; EC It's Your Right Campaign SA Experience; and the Annual NSP Survey training.

# Aboriginal and Torres Strait Islander Harm Reduction Project

The Aboriginal and Torres Strait Islander Harm Reduction Project, funded by the Australian Government via the Australian and Illicit Drug Users League (AIVL), commenced in September 2021 and concluded this financial year, in May 2023. The project's aims were to increase Aboriginal community and workforce awareness of harm reduction and injecting related issues and to improve Aboriginal injectors' access to CNPs and peer education.

# **Outcomes:**

- 23 rural Aboriginal Community Controlled Health Organisation (ACCHO) staff were provided with Education and Training on IDU/CNP
- 164 Aboriginal and Torres Strait islander people who inject drugs were provided with peer education

 500 long sleeved t-shirts and 2,000 resources (3 different resources) were produced for distribution to SA ACCHOs to raise community awareness of CNPs and harm reduction

The success of this project is due to all of the people involved in its implementation – the steering committee members who guided the project, the artist who designed the images for the t-shirts and resources, the Aboriginal peer educators, and the Hepatitis SA team who supported the project in numerous ways.

• • •

I would like to thank the CNP Peer Projects team for their amazing effort throughout the past year:

Andrea, Bernadette, Bridget, Emma, Fiona, Justin, Margie, Mark B, Mark T, Meagan and Penni.

> Carol Holly Coordinator

This year definitely felt like we had gone back to some kind of normalcy with education sessions returning to pre-2020 times. Unfortunately for the team, we said our final goodbye to Nicole, who has found work closer to home and closer to her family, we wish her all the very best with her new adventures.

# **Community education**

This year the team provided, 69 viral hepatitis education sessions to 1,485 community members. This was an increase from last year's reporting of 49 sessions to 741 community members. Participants of community education sessions predominantly included people affected by alcohol and other drug issues, young people (including those in the juvenile justice system), Aboriginal people, people from culturally and linguistically diverse backgrounds, people affected by mental illness, people experiencing homelessness, and people in custodial settings.

Particular highlights of the community education program for this reporting period included:

Over the two days of September 28 and 29, two members of the Education Team attended Port Augusta Prison as part of a Hepatitis C Point of Care Testing blitz. The Team attended two weeks prior to the testing blitz to promote the Point of Care Testing. The staff at Port Augusta Prison were extremely helpful in ensuring the team got around to as many areas as possible in the short time they were there. The Team

visited units as well as the industries areas where the prisoners work, including textiles, wood-working, metal work, the kitchen and the laundry. The staff would get everyone to 'tools down' so we could provide some education and spruik the upcoming testing. We were also promoting the fact that each person who attended for testing would receive a 'full-sized' chocolate bar, this then eliminated the stigma associated with accessing the testing as the inmate could say they were just there for the chocolate bar. For the testing week, a CALHN Viral Hepatitis Nurse along with the Hepatitis C Peer Coordinator from Hepatitis SA attended the site, and over the week they tested 409 prisoners (74% of the prison population) and found 3 people living with hepatitis C. This result shows excellent work by the Prison Health Staff at the site.

The City of Salisbury kindly invited Hepatitis SA to provide education sessions to several community groups held at The Jack Young Centre, Pine Lakes Centre, and Para Hills Community Club. Groups included an intercultural group (17 participants), a Filipino group (20 participants), two Wellbeing Programs (9 participants & 12 participants), and a Friendship Group (28 participants). In total, we facilitated training with 86 participants.

# **Workforce education**

This year the Education
Team also delivered 73
viral hepatitis workforce
development sessions to 708
participants across a range
of workforces and registered

training organisations. This included workers from the Pharmacy sector, Aboriginal Health, Employment Services, University Courses, SA Forensic Mental Health Services, SA Mental Health Rehabilitation Services. and nursing and allied health staff at regional hospitals and community centres. Ongoing work with other workforces included Department for Correctional Services and the Metropolitan Fire Service.

Particular workforce highlights included:

In collaboration with the South Australian Viral Hepatitis Nurses and AbbVie, Hepatitis SA celebrated World Hepatitis Day in the Riverland conducting a micro-elimination project in the region titled the Riverland Roadshow.

In the first official week of the project, local services were offered free Blood Safety & Viral Hepatitis Education sessions. Educating workers in the local community aimed to ensure Riverland residents had access to non-stigmatising support from workers with knowledge about their health condition and suitable referral pathways. Sessions were provided at 10 services across the region. As well as messages around blood safety and viral hepatitis, each group was informed

about the upcoming
Hepatitis C Point of Care
Testing (PoCT) clinics and
were encouraged to spread
the word. We also put up
posters around the towns
and in shopping centres, and
did radio interviews for ABC
Regional Radio as well as the
local commercial stations.

On 28 July, World Hepatitis Day, an educational dinner was held at Berri Hotel for local GPs, Nurse Practitioners, Nurses and Pharmacists which focused on viral hepatitis and Point of Care Testing.

In the following fortnight, Viral Hepatitis Nurse Lucy Ralton, Peer Educator Sharon Drage, and AbbVie Representative Kristy Cross, facilitated Hepatitis C PoCT clinics at local pharmacies in Barmera, Loxton, Berri, and Renmark. In total, 88 residents were screened. One person was diagnosed with hepatitis C, one person was found to have spontaneously cleared the virus, and one person had been cured via previous treatment. We want to especially thank Sharon, who was highly adept at striking up conversations with passers-by and encouraging them to get tested. Her ability to build an easy rapport was important in encouraging community members who were less connected to health systems to take part in the clinic.

Throughout the campaign, all Riverland residents were encouraged to take part in a free raffle to win a \$500 Pike River Luxury Villa Voucher. Resident Angel H. was the lucky winner.

Hepatitis SA Positive Speakers continue to make huge impacts on the workforces they talk to. Below are just a couple of comments made from participants during the year:

- Brings theories to life. Thank you!
- It's more powerful to have someone sharing lived experience.
- Very open/honest storygreat to hear from a patient/consumer perspective.
- Very important to keep in mind that real people are behind the stats.
- Kath was fantastic and helped me understand from the perspective of someone with lived experience.

Lastly, to the Education Team, it has been another mammoth year, I have loved working with you. I look forward to another productive year ahead, with plenty of laughs along the way.

> Jenny Grant Coordinator

The Hepatitis SA
Communications Team
works to raise awareness
about hepatitis B and C
through media promotion,
publications, distribution of
information resources, and
promoting initiatives of the
other program areas.

# **New Resources**

# Hepatitis B Awareness Resource for Aboriginal Communities

We initiated discussions with the Aboriginal Health Council of SA (AHCSA) to develop a tailored Hepatitis B awareness resource for Aboriginal communities. Through AHCSA sample resources from other nonmainstream cultural groups were distributed to stimulate discussions and suggestions among the workforce in Aboriginal community health services.

In a broader community outreach effort, AHCSA's Sexual Health/BBV Program Officer, Joshua Riessen, worked with us as a presenter in a hepatitis B information video for the 2023 World Hepatitis Day hepatitis B quiz. This initiative aims to reach Aboriginal, Chinese, Filipino, and Vietnamese communities.

# Hepatitis B Lived Experience Video

We produced an engaging video interview featuring Joseph Li from the Chinese Association of SA (CASA), sharing how a fibroscan conducted during a 2017 Hepatitis SA Chinese community project led to an early diagnosis of liver cancer, ultimately saving his life. The Cantonese edition

of this video is scheduled for a premiere at an event hosted by CASA as part of the 2023 World Hepatitis Day campaign.

# Hepatitis C Testing Information Brochure

We developed a simple but informative hepatitis C testing brochure with up-to-date information on hepatitis C testing options including where to access them.

# GP Information Portal, GP Packs, and Non-Clinical Workforces

The GP Information Portal underwent a redesign with a mobile-responsive layout, and GP packs for both Hepatitis B and Hepatitis C were reviewed and updated. 84 packs were distributed. Additionally, 17,996 resource items and 454 workforce information packs were distributed to the non-clinical workforce.

The Liver Cirrhosis Booklet was well-received by clinical workers, receiving significant orders from Clean Needle Program sites and liver clinics. Over 208 copies were distributed, and Chinese and Vietnamese versions were completed following community reviews.

# **Community Engagement**

# Distribution of Printed Resources

During the financial year, 38,513 information resource items were distributed, with 10,875 items reaching rural postcodes, reflecting a substantial increase on the previous year. This was driven by the Riverland HCV micro-elimination campaign and activities by the Viral Hepatitis Nurses in Port Pirie.

# Hepatitis SA Community News

The Hepatitis SA Community News is an important part of our information outreach. In 2022-23, Issues 95, 96, 97, and 98 were produced, with Issue 98 scheduled for printing in early July 2023. The magazine is distributed in print form to approximately 725 individuals and organizations. Around 640 electronic copies go to individuals and 390 to organisations, per issue. The Community News is also available online via Issuu, reaching a broader audience.

# **Hepatitis SA Library**

In the financial year, 12 general alerts were sent out highlighting new additions to the catalogue. Recipients number around 800-900 for each alert.

Special alerts featuring highlights from the collection and links to complete collections for that topic in the catalogue, were sent to recipients collated specifically for each alert. They include service providers, organisations and individuals who may have an interest in that specific content.

# **Mail Outs**

Physical mail outs went to approximately 620 recipients, 143 of whom were our community and workforce members. Electronic mail outs with expanded content went to over 920 recipients, including sector workers, organizations, and members.

# **Online Services**

# Ongoing Maintenance of Online Assets

We maintain an active online presence on social media, including Facebook, Twitter, and the hepSAY blog. During this reporting period, 15 articles were posted on the blog, and 11 e-alerts were sent out to the audience.

# **Social Media Accounts**

On Facebook, Hepatitis SA's follower count increased from 304 to 326. In this period, 213 posts were made, reaching a total of 65,698 people, including 7,889 organic reach and 57,809 paid reach, though some historical data was unavailable due to platform changes.

On Twitter, regular posts were made despite the challenges due to the platform's recent upheavals. Interactions continued within established networks., and there were 170 tweets posted with a reach of 21,624 with183 likes, and an annual engagement rate of 3.93.

# **World Hepatitis Day**

SA's main World Hepatitis
Day 2022 activities featured
the Riverland Roadshow and
the WHD 2022 Quiz: Kids
and Hepatitis. The WHD 2022
campaign distributed 8,702
information resource items
including 3,000+ postcards
promoting the Kids &
Hepatitis Quiz.

The Kids & Hepatitis Quiz received 306 entries, with 260 participants correctly answering the bonus question, a higher percentage than in previous years. A 3-week

advertising campaign reached 26,440 people, resulting in 540 landing page views and 856 link clicks. The prize, a \$500 voucher for Adelaide Oval hotel accommodations or meals, added excitement.

The Quiz also engaged the Spire Community group, working with refugees and homeless individuals. We offered modest local prizes and entered participants into the main prize draw.

Hepatitis Australia provided 12 global campaign-themed social media tiles, with three customized for SA and Adelaide, enhancing our WHD social media presence.

Other WHD activities included:

- An online launch of a hepatitis C rapid testing video
- Quizzes for CNP clients and prisoners
- A Cirrhosis resource focus group with the Australian Haemophilia Foundation
- A presentation in SA by CNP program coordinator Carol
- An interview for SAMESH video by educator Gary Spence on hepatitis C risks.

# Conclusion

We would like to thank our colleagues for their support throughout the year, and especially Fred, without whose volunteer service, we would not have got so many information packs compiled and distributed.

Cecilia Lim Coordinator

# Hepatitis C TreatmentPeer Education andSupport

Over the past twelve months the team provided their lived experience of hepatitis C treatments to 984 individuals at risk of hepatitis C. They also provided tailored information regarding hepatitis C transmission and prevention, and testing and treatment as well as providing referrals. The majority of those engaged around hepatitis C by the Information and Support team this year, were also given rapid point of care testing using a GeneXpert machine, and participants found to be positive for hepatitis C, with their permission, were referred immediately to one of the South Australian viral hepatitis nurses for followup. The peers worked in partnership with all the viral hepatitis nurses at 14 locations to increase access to treatment for the participants who required care and support.

The 14 locations attended by the peers included Homelessness Services, Clean Needle Program sites, custodial settings, and pharmacies that provide opiate substitution medications.

By far the most effective work undertaken this year was the rapid testing for hepatitis C within the Adelaide Remand Centre with the most amount of testing by the peers and largest number of referrals for treatment by location. With thanks to the cooperation and support of Serco Staff each week, the peers were able to

test 268 males on remand. Other activities in custodial settings were in partnership with the Department for Correctional Services as part of Health Expos or part of the Australian National HCV POC Testing Project.

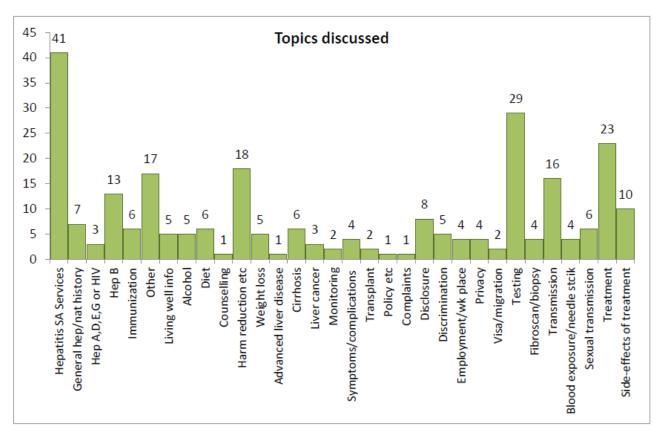
Members of this team also participated in two HCV point of care testing blitzes at two regional prisons, testing around 300 prisoners at each site, in partnership with the SA Prison Health Service, CALHN and SALHN viral hepatitis nurses, and Flinders University.

Peer workers in this program also played a large part in Study teams for the Kirby Institute's TEMPO Study, a multi-centre, practice-level, cluster randomized controlled trial to compare point-of-care HCV RNA testing, dried blood spot testing, and standard of care to enhance treatment uptake among people who have recently injected drugs attending needle and syringe programs.

# Hepatitis SA Helpline Information and Support

The confidential free call Helpline, and Prisonline service provided by Hepatitis SA to South Australians requiring information and support regarding viral hepatitis was provided by staff and two dedicated, long serving volunteers of Hepatitis SA.

The Helpline & Support
Service received a total of
101 contacts (50 male and 51
females); 82 made contact
through the helpline, 3 via
email, seven in-person and
9 through the web chat
service. 68 of the contacts
were new to the service,



making contact for the first time.

Infoline workers disclosed a lived experience as part of the information provision to 16 of the callers. All incidents of discrimination were resolved. Referrals to appropriate support services were provided to 63 contacts and written resources were sent on 14 occasions of service.

There were 23 contacts to the Prisonline (a 10-minute, free

call prison information and support service), including 10 who made contact for the first time. Most contacts were from the metropolitan area (YLP 9, ARC 5 and AWP 2). The remainder were from Cadell (4), Mobilong (2), and one from Port Augusta. HCV treatment was the primary reason for contact for 10 prisoners, eight sought information on Hepatitis SA services, five were related to testing. Other topics discussed included

transmission, symptoms, mental health, and HIV. Callers who require testing for HCV or HBV are referred to SAPHS for testing via the Kiosk Express System (KEX) system.

Lisa Carter Coordinator

# Treasurer's Report

Total revenue for Hepatitis SA for 2022-2023 was \$2,063,038. This was made up from grant income of \$2,002,891 for our 2 main recurrent grants from SA Health and several 1-off grants such as the National Hepatitis Infoline Project administered by Hepatitis Australia, two grants administered by AIVL and a small grant from EC Australia, as well as other income of \$60,147 which included interest, sponsorship and reimbursements.

Total expenditure for the year was \$2,047,389. The major expense was the Employee Benefits expense of \$1,789,159 with other large expenses being

Premises Rent and Outgoings of \$111,845, Office expenses of \$59,294 as well as other expenses of \$61,010 which

were comprised of Program costs of \$56,948 and Other staff costs of \$4,062.

Motor vehicle expenses were \$5,465 Travel and accommodation was \$16,616 and the Depreciation and amortisation expense was \$4000.

For the 2022-2023 financial year, Hepatitis SA had a surplus of \$15,649 and this resulted in total equity of \$351,741 as at 30 June 2023.

Hepatitis SA would like to thank the STI and BBV Section at the South Australian Department for Health and Wellbeing and Drug and Alcohol Services South Australia for administering Hepatitis SA's major grants during the 2022-2023 financial year.

> Michael Larkin Treasurer

# **Financial Report**

For the Year Ended 30th June 2023

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# **General information**

The financial report covers Hepatitis SA Incorporated as an individual entity. The financial report is presented in Australian dollars, which is Hepatitis SA Incorporated 's functional and presentation currency.

The financial report consists of the financial statements, notes to the financial statements and the board members' declaration.

The financial report was authorised for issue by the board members at the Annual General Meeting held in Adelaide.

# STATEMENT OF FINANCIAL PERFORMANCE FOR THE YEAR ENDED 30 JUNE 2023

	NOTE	2023 \$	2022 \$
REVENUE	2	2,063,038	1,951,189
EXPENSES			
Employee benefits expense		(1,789,159)	(1,703,721)
Depreciation and Loss on Disposals		(4,000)	(4,000)
Motor Vehicle Expenses		(5,465)	(8,087)
Office expenses		(59,294)	(60,411)
Premises Rent and On Costs		(111,845)	(108,046)
Travel and Accommodation		(16,616)	(8,256)
Other expenses		(61,010)	(56,251)
TOTAL EXPENSES		(2,047,389)	(1,948,772)
SURPLUS FOR THE YEAR	10	15,649	2,417

The above statement of Income and Expenditure should be read in conjunction with accompaying notes

# STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2023

	NOTE	2023	2022
ACCETO		\$	\$
ASSETS			
CURRENT ASSETS			
Cash and cash equivalents	3	1,137,296	1,189,926
Trade and other receivables	4	36,777	23,882
Total current assets		1,174,073	1,213,808
NON-CURRENT ASSETS			
Plant, Equipment and Motor Vehicles	5	60,352	52,315
Total non-current assets		60,352	52,315
TOTAL ASSETS		1,234,425	1,266,123
LIABILITIES			
CURRENT LIABILITIES			
Trade and other payables	6	6,585	3,436
Employee benefits	7	165,026	183,319
Grants in Advance	_	38,097	65,241
Other	8	67,904	63,548
Total current liabilities		277,612	315,544
NON CURRENT LIABILITIES			
Provision for Asset Replacement		10,000	10,000
Employee Benefits	9	595,072	604,487
Total non-current liabilities	ŭ	605,072	614,487
TOTAL LIABILITIES		882,684	930,031
		· · · · · · · · · · · · · · · · · · ·	<u> </u>
NET ASSETS		351,741	336,092
EQUITY			
Retained surpluses	10	314,241	298,592
Reserve : Cash Flow Boost		37,500	37,500
TOTAL MEMBERS EQUITY		351,741	336,092

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

Declaration of Independence under Section 60-40 of the ACNC Act 2012

By Peter Hall to the Committee of

**Hepatitis SA Incorporated** 

As lead auditor of Hepatitis SA Incorporated for the year ended 30 June 2023, I declare that to the best of my knowledge and belief, there have been no contraventions of:

- (a) The auditor independence of the ACNC Act 2012 in relation to the audit; and
- (b) Any applicable code of professional conduct in relation to the audit.

The declaration is in respect of Hepatitis SA Incorporated.

Peter Hall

**Peter Hall Chartered Accountant** 

Adelaide

Dated this 20

2014

day of Odrober

2023

# Notes to the financial statements For the Year Ended 30 June 2023

# Note 1. Summary of Significant Accounting Policies

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

# **Basis of Preparation**

These general purpose financial statements have been prepared in accordance with Australian Accounting Standards-Reduced Disclosure Requirements and Interpretations issued by the Australian Accounting Standards Board (AASB), legislation the Associations Incorporation Act 2009, the Charitable Fundraising Act1991 and associated regulations, as appropriate for not-for-profit oriented entities.

## **Historical Cost Convention**

The financial statements have been prepared under the historical cost convention.

## Revenue recognition

Revenue is recognised when it is probable that the economic benefit will flow to the incorporated association and the revenue can be reliably measured. Revenue is measured at the fair value of the consideration received or receivable.

## Other Revenue

Events, fundraising and raffles are recognised when received.

## **Donations**

Donations are recognised at the time the pledge is received by the organisation.

## Grants

Grants are recognised at their value where there is a reasonable assurance that the grant will be received and all attached conditions will be complied with.

# Other Revenue

Other revenue is recognised when it is received or when the right to receive payment is established.

## Income Tax

As the incorporated association is a charitable institution in terms of subsection 50-5 of the Income Tax Assessment Act 1997, as amended, it is exempt from paying income tax.

# Cash and Cash Equivalents

Cash and cash equivalents includes cash on hand, deposits held at call with financial institutions, other short-term, highly liquid investments that are readily convertible to known amounts of cash and which are subject to an insignificant risk of changes in value.

## Plant, Equipment and Motor Vehicles

Plant, equipment and motor vehicles are stated at historical cost less accumulated depreciation and impairment. Historical cost includes expenditure that is directly attributable to the acquisition of the items.

Depreciation is calculated on a straight-line basis to write off the net cost of each item of property, plant and equipment (excluding land) over their expected useful lives as follows:

The residual values, useful lives and depreciation methods are reviewed, and adjusted if appropriate, at each reporting date.

An item of plant and equipment is written off upon disposal or when there is no future economic benefit to the incorporated association. Gains and losses between the carrying amount and the disposal proceeds are taken to profit or loss.

# Notes to the financial statements For the Year Ended 30 June 2023

# Note 1. Summary of Significant Accounting Policies (continued)

# Trade and Other Payables

These amounts represent liabilities for goods and services provided to the incorporated association prior to the end of the financial year and which are unpaid. Due to their short-term nature they are measured at cost.

## **Employee Benefits**

## Wages and salaries and annual leave

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

## Long Service Leave

The liability for long service leave is recognised in current and non-current liabilities, depending on the unconditional right to defer settlement of the liability for at least 12 months after the reporting date. 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.

# Goods and Services Tax (GST) and Other Similar Taxes

Revenues, expenses and assets are recognised net of the amount of associated GST, unless the GST incurred is not recoverable. In this case it is recognised as part of the cost of the acquisition of the asset or as part of the expense.

## Receivables

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

Note 2. Revenue		
	2023	2022
	\$	\$
Grants Received	2,002,891	1,897,386
Interest Income	8,806	2,182
Other Income	51,341	54,621
	2,063,038	1,951,189
Note 3. Current Assets - Cash and Cash Equivalents		
	2023	2022
	\$	\$
Cash at Bank - Current Accounts	28,760	18,168
Online Saver	667,605	730,830
Term Deposit	405,413	405,413
Gift Fund	35,268	35,265
Petty Cash	250	250
	1,137,296	1,189,926
Note 4. Current Assets – Trade and Other Receivables		
	2023	2022
	\$	\$
Deposits	120	120
Receivables	28,274	16,143
Prepayments	8,383	7,619
	36,777	23,882

# Notes to the financial statements For the Year Ended 30 June 2023

Note 5. Non-Current Assets-	Plant,	<b>Equipment and Motor Vehicles</b>
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Note 5. Non-Current Assets- Plant, Equipment and Motor Venicles		
	2023	2022
	\$	\$
Plant, Equipment and Motor Vehicles- At Cost	91,453	79,416
Less: Accumulated depreciation	(31,101)	(27,101)
	60,352	52,315
Note 6. Current liabilities- Trade and Other Payables		
	2023	2022
	\$	\$
Creditors	6,585	3,436
Note 7. Current Liabilities- Employee Benefits		
	2023	2022
	\$	\$
Provision for Annual Leave	93,500	132,192
Provision for Sick Leave	71,526_	51,127
	165,026	183,319
Note 8. Current Liabilities- Other		
	2023	2022
	\$	\$
PAYG Employee Tax	22,720	21,364
PAYG Employee Tax GST Payable	22,720 45,184	21,364 42,184
	45,184	42,184
GST Payable	45,184	42,184
GST Payable	45,184 67,904	42,184 63,548
GST Payable	45,184 67,904	42,184 63,548 2022
GST Payable  Note 9. Non-Current Liabilities- Employee Benefits	45,184 67,904 2023 \$	42,184 63,548 2022 \$
OST Payable  Note 9. Non-Current Liabilities- Employee Benefits  Provision for Long Service Leave	45,184 67,904 2023 \$ 189,362	42,184 63,548 2022 \$ 208,256
OST Payable  Note 9. Non-Current Liabilities- Employee Benefits  Provision for Long Service Leave	45,184 67,904 2023 \$ 189,362 405,710	42,184 63,548 2022 \$ 208,256 396,231
Note 9. Non-Current Liabilities- Employee Benefits  Provision for Long Service Leave Provision for Employee Redundancies	45,184 67,904 2023 \$ 189,362 405,710	42,184 63,548 2022 \$ 208,256 396,231
Note 9. Non-Current Liabilities- Employee Benefits  Provision for Long Service Leave Provision for Employee Redundancies	45,184 67,904 2023 \$ 189,362 405,710 595,072	42,184 63,548  2022 \$ 208,256 396,231 604,487
Note 9. Non-Current Liabilities- Employee Benefits  Provision for Long Service Leave Provision for Employee Redundancies	45,184 67,904 2023 \$ 189,362 405,710 595,072	42,184 63,548  2022 \$ 208,256 396,231 604,487
Note 9. Non-Current Liabilities- Employee Benefits  Provision for Long Service Leave Provision for Employee Redundancies  Note 10. Equity- Retained Surpluses	45,184 67,904 2023 \$ 189,362 405,710 595,072	42,184 63,548  2022 \$ 208,256 396,231 604,487  2022 \$
Note 9. Non-Current Liabilities- Employee Benefits  Provision for Long Service Leave Provision for Employee Redundancies  Note 10. Equity- Retained Surpluses  Retained surpluses at the beginning of the financial year	45,184 67,904  2023 \$ 189,362 405,710 595,072  2023 \$ 208,592	42,184 63,548  2022 \$ 208,256 396,231 604,487  2022 \$ 296,175

# Notes to the financial statements For the Year Ended 30 June 2023

# Note 12. Key Management Personnel Disclosures

## Compensation

There was no aggregate compensation made to officers and other members or key management personnel of the incorporated association

# Note 13. Contingent Liabilities

The incorporated association had no contingent liabilities as at 30 June 2023 nor 30 June 2022.

## Note 14. Commitments

The incorporated association had no commitments for expenditure as at 30 June 2023 and 30 June 2022.

## Note 15. Related Party Transactions

Transactions with related parties

There were no transactions with related parties during the current and previous financial year.

Receivable from and payable to related parties

There were no trade receivables from or trade payables to related parties at the current and previous reporting date.

Loans to/from related parties

There were no loans to or from related parties at the current and previous reporting date.

# Note 16. Events After The Reporting Period

No matter or circumstance has arisen since 30 June 2021 that has significantly affected, or may significantly affect the incorporated association's operations, the results of those operations, or the incorporated association's state of affairs in future financial years.

# Note 17. Economic Dependence

The Association is dependent on operating grants from the South Australian Government and other sources. The Financial Statements have been prepared on a going concern basis on the expectation that such funding will continue.

# STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDED 30 JUNE 2023

	RETAINED	TOTAL
	SURPLUS	EQUITY
BALANCE 1ST JULY 2021	296,175	296,175
Surplus for the Year	2,417	2,417
BALANCE AT 30TH JUNE 2022	\$ 298,592	\$ 298,592
BALANCE 1ST JULY 2022	298,592	298,592
Surplus for the Year	15,649	15,649
BALANCE AT 30TH JUNE 2023	\$ 314,241	\$ 314,241

# STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30 JUNE 2023

Reconciliation of cash flows from operations with a surplus for the year

Surplus for the year		<b>\$</b> 15,649
NON CASH FLOWS IN SURPLUS Depreciation		4,000
CHANGES IN ASSETS AND LIABILITIES		
Increase in Trade and Other Receivables Purchase of Computer Server		(12,895) (12,036)
Increase in Trade and Other Payables		3,149
Increase in Grants Received in Advance		(27,144)
Increase in Employee Entitlements		(23,353)
NET CASH PROVIDED (DECREASE) BY OPERATING ACTIVITIES	\$	(52,630)
Cash at Beginning of Year	_	1,189,926
Cash at the End of the Year	\$ _	1,137,296

# **HEPATITIS SA INCORPORATED** FINANCIAL REPORT FOR THE YEAR ENDED 30 JUNE 2023

# **BOARD REPORT**

The Board members submit the financial report of the Hepatitis SA Incorporated for the financial year ended 30 June 2023.

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

Chairperson

Arieta Papadelos

Vice Chairperson

Bill Gaston

Secretary

Sharon Eves

Treasurer

Michael Larkin Ordinary members Samantha Raven

Bernadette McGinnes

Salma Safi Joshua Riessen

Kerry Paterson (CEO)

In accordance with Section 35(5) of the Associations Incorporations Act 1985, the Board of the Hepatitis SA Incorporated hereby states that during the financial year ended 30 June 2023

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

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.

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** 

Dated this

Financial Report For the Year Ended 30<sup>th</sup> June 2023

# STATEMENT BY MEMBERS OF THE BOARD OF MANAGEMENT

In the opinion of the Board, the financial report:

- Presents fairly the position of Hepatitis SA Incorporated for the year ended 30<sup>th</sup> June 2023 and its performance for the year ended on that date.
- 2. At the date of this statement, there are reasonable grounds to believe that Hepatitis SA Incorporated 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 Ph day of October 2023



# INDEPENDENT AUDITOR'S REPORT

# **Hepatitis SA Incorporated**

I have audited the accompanying financial report of **Hepatitis SA Incorporated** which comprises the Statement of Financial Position as at 30 June 2023, and the Income and Expenditure Statement for the year then ended, a summary of significant accounting policies and other explanatory notes.

The Board of **Hepatitis SA Incorporated** 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

My responsibility is to express an opinion on the financial report based on my audit. I conducted my audit in accordance with Australian Auditing Standards. These Auditing Standards require that I 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 SA Incorporated**, as well as evaluating the overall presentation of the financial report.

As is common for organisations of this type, it is not practicable for the Association to maintain a system of internal control over cash receipts until the entry into the accounting records. My audit over cash receipts has been limited to the amounts recorded in the accounting records of the Association.

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

# Auditor's Opinion

In my opinion, the financial report presents fairly, in all material respects, the financial position of the **Hepatitis SA Incorporated** as of 30 June 2023, and of its financial performance for the year then ended in accordance with Australian Accounting Standards (including the Australian Accounting Interpretations).

# Independence

In conducting my audit, I have complied with the independent requirements of Australian Professional Accounting Bodies.

Peter Hall Chartered Accountant

Dated 20 October 2023

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