

2011-2012



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Chairperson's Report

This year marked the beginning of a new three-year Strategic Plan for our organisation, and one of the key items in this plan was to look at changing our name to reflect our growing commitment to providing hepatitis B services along with our hepatitis C services, and for our name to signal that we are inclusive of people with chronic hepatitis B. This was achieved when a majority of members at the Annual General Meeting (AGM) in November last year voted to change the name of our organisation to Hepatitis SA. Leading up to the AGM, the Board also reviewed and updated our constitution, and the recommended changes were also adopted by members at the AGM.

Another shift in direction was made when we began a trial of the Clean Needle Program (CNP) in September 2011. Interested staff members are on a weekly roster to attend to the CNP clients, and a committee manages the trial and the administrative aspects such as ordering stock, used needle and syringe disposal and data collection. At the close of this year, a small regular clientele continues to use the CNP operating out of the front office at Hepatitis SA, and I would like to thank all staff involved for the smooth implementation of this CNP service at Hepatitis SA.

In the latter part of 2011, work intensified on preparing for a third important action of the Hepatitis SA Strategic Plan 2011–14: the quality improvement accreditation process. Evidence was gathered from the Board, staff and volunteers to meet

the service standards of the Service Excellence Framework, and at the end of January 2012, two members of Quality Management Systems made their assessment of Hepatitis SA. Feedback from the assessors was overwhelmingly positive about how Hepatitis SA goes about our business, and we expect to complete the process and attain accreditation at the certificate level in the latter part of 2012. I would particularly like to acknowledge Rose Magdalene for her work in leading this process at Hepatitis SA.

While I am speaking of quality service standards, another staff member who merits particular acknowledgement this year is Deborah Warneke-Arnold, who won the 2011 Hepatitis Australia Health Promotion Award for Outstanding Service to Viral Hepatitis Health Promotion Award. Congratulations, Deborah, for your continued excellence over many years in coordinating the Hepatitis SA Helpline and other support services.

Other Board business this year included the review of Board policies, approving infrastructure spending on new photocopier and phone system, preparing for a Board evaluation and reviewing the Executive Officer's contract period, as well as the regular business of bi-monthly Board meetings, such as approving and monitoring the annual budget, monitoring progress against the Strategic Plan, and receiving regular reports from the Executive Officer on a range of organisational, sector and strategic matters.

Certainly the Board of
Hepatitis SA has welcomed
the exciting news about this
period of new hepatitis C
treatments development we
are currently living in, which
is set to change the treatment
paradigm within a few years,
but we do acknowledge that
this excitement about treatment
breakthroughs for hepatitis C
is tempered by the growing
burden of HCV- and HBVrelated morbidity and mortality.

A most enjoyable aspect of my role this year was to attend a get-together of staff, volunteers and the Board in early May to meet everyone and to exchange information on the work we all do at Hepatitis SA. It was a rare opportunity to have most of us in the one place at the one time and glimpse how all the diverse pieces of Hepatitis SA fit together.

I would like to take this opportunity to thank all Board members for their ongoing support and in particular to acknowledge the valued contribution of Justine Price and Shabeena Laundy who left us this year. I would also like to thank our funders, SA Health and the Australian Government Department of Health and Ageing, for their continued support, and of course all the staff and volunteers at Hepatitis SA for the wonderful work they do, as well as the many partner agencies who supported the work of Hepatitis SA throughout the year.

Arieta Papadelos

Executive Officer's Report

The change of name of this organisation to Hepatitis SA was the most significant change to occur this year, as we now clearly signal our growing commitment to hepatitis B. A second name change occurred when Drug and Alcohol Services South Australia (DASSA) approached us to take over their Hepatitis Helpline, and since February 2012, the Telephone Information and Support Line has been the Hepatitis SA Helpline. A third change occurred when we began trialing our Clean Needle Program in September 2011.

Other aspects of our work remained more constant, such as the comprehensive program of hepatitis C information, education, referral and support services Hepatitis SA provides, predominantly to the hepatitis C priority population groups and healthcare workers throughout South Australia.

A brief summary of the number of services provided throughout South Australia certainly demonstrates a busy year for all.

- The Education Team provided a total of 134 education sessions to 1,330 people, including sessions for workforces (72 sessions for 745 people) and priority population groups (62 sessions for 585 people).
- The Peer Education Team provided hepatitis C education to 1,109 people, either individually or in group sessions.
- The Hepatitis SA Helpline had 589 enquiries; and 25 support groups were held



- with 114 attendances.
- The Information and Resources Team distributed 102,376 information resources/promotional items through regular mail-outs to members and organisations, resource drops to targeted organisations, and via World Hepatitis Day (WHD) awareness activities.

Of course it is not just about the numbers – the range of services, the target groups reached, the flexibility of service delivery and most importantly the quality of the services provided is what counts. A more in-depth look at these aspects of Hepatitis SA services is contained within the various program area reports on the following pages.

While most of the services Hepatitis SA provided this year are still focused on hepatitis C, due to the funding which is available, I would like to highlight two of the hepatitis B projects we have delivered this year, the Hepatitis B Community Forum in partnership with the Vietnamese Community of Australia, SA Chapter, for over 100 older members of the Vietnamese community; and the My Precious Liver awareness campaign targeting the Chinese community, funded with a small grant from Hepatitis Australia, which operated through seven ethnic Chinese schools and distributed around 2,000 hepatitis B information resources. I am also very pleased to report that, towards the end of this financial year, SA Health announced they would provide Hepatitis SA

with funding for a Statewide Hepatitis B Coordination Project for the next two years.

Hepatitis SA continued to have representatives on a number of South Australian advisory groups during the year, including the South Australian Health Steering Committee on HIV/AIDS and Hepatitis C (SAHSCHAHC); the SA Hepatitis C Treatment Model of Care; the Aboriginal and Torres Strait Islander Blood-borne Virus Coordinator Reference Group, and, on the national level, the Board of Hepatitis Australia. Hepatitis SA also supported the President of the Australian Injecting and Illicit Drug Users League (AIVL), who is a Hepatitis SA staff member, to fulfill this national role.

During the year, Hepatitis SA contributed to a number of consultations and reviews. including the SA Health HIV/ HCV Workforce Development Review; the DASSA Clean Needle Program and Peer Education Review; regulations in the new Public Health Act 2011 at the state level and at the national level, the National Hepatitis C Testing Policy, the National Hepatitis B Testing Policy, and The Australasian Hepatology Association Consensus-based Guidelines for the Nursing Care of Patients with Advanced Liver Disease.

Advocacy issues for Hepatitis SA during the year included a submission to support the findings of the report Balancing Access and Safety - Meeting the Needs of Blood-Borne Viruses in Prisons calling for a needle and

syringe program in the ACT prison; numerous submissions regarding the approval and listing of the two new hepatitis C treatment drugs, boceprevir and telaprevir, and the Hepatitis Australia Prison Consensus Statement.

I would like to thank all the staff from the agencies we have partnered with during the year for their support for our work; to our main funders, particularly those who administer these funds (the STI and BBV Section of SA Health and the SA State Office of the Department of Health and Ageing) for their ongoing support, and to all my colleagues here at Hepatitis SA-Board members, staff and volunteers—for their commitment to providing quality services.

Finally, I would like to acknowledge all those from the viral hepatitis-affected communities who have stepped up to contribute to Hepatitis SA's work during the year, as positive speakers, peer educators. Board members. staff members, volunteers, and as community members contributing your stories at Calming the C support groups or at education sessions, or in writing to *Hepatitis* SA Community News, and contributing your views to Hepatitis SA feedback and consultation processes about the services you have received, on advocacy issues, as well as on proposed services and information resources we have developed during the year. Thank you for your diverse and highly valued contributions to Hepatitis SA.

Kerry Paterson

Education Report

In the metropolitan area, Hepatitis SA provided 43 group education sessions to 485 workers, and 49 group education sessions to 470 at risk and affected community members. In rural areas, 29 sessions were delivered to 260 workers, and 13 sessions were delivered to 115 community members.

Hepatitis SA would like to extend our thanks to OARS Community Transitions, who provided 387 individual hepatitis C education sessions for prisoners in Yatala, The Remand Centre and the Pre Release Centre.

Project Highlights:

Particular project highlights and successes in 2011–12 included:

Hip Hop Hep Project: This was a collaborative project with Magill Training Centre, Tauondi College, and young people from the Vietnamese and Burundian communities. The young people worked with a professional musician to write and record hip hop songs about hepatitis C prevention.

Vietnamese Community
Hepatitis B Forum: A forum
aimed at raising hepatitis B
awareness was trialled with
around 100 older Vietnamese
community members.
Information presented included
prevention, testing, treatment
options and healthy eating for
the liver.

CPIX Project: This was a health promotion through the arts project working with young people recruited through Adelaide Northern Headspace. Two mannequins were painted with messages about hepatitis C and safe body art, with original tattoos designed by project

participants. These mannequins were then displayed at sites in northern Adelaide.



Women's Circle of Health: A collaborative health promotion through the arts project at Adelaide Women's Prison which continued successfully in 2012.

CTALK

Hepatitis SA welcomed six new faces to the CTALK Positive Speakers program in January 2012 to join our existing speakers. During 2011–12, CTALK speakers spoke at 44 education sessions across rural and metropolitan sites. We would like to express our gratitude to all our speakers; by sharing their lived experiences of hepatitis C, they continue to provide a valuable insight into the human face of the virus.

Collaborative Approach

Hepatitis SA would like to highlight the importance of partnerships in our work. By working with organisations to plan, implement and evaluate education sessions, we are able to identify specific needs of our disadvantaged and atrisk priority populations, and tailor our sessions to ensure the content and delivery is appropriate, relevant and practical. Working with agencies in this way allows us to maintain mutually beneficial partnerships into the future.

Hepatitis SA would also like thank all the Hepatitis SA program areas, and external organisations who worked with us this year, especially Drug and Alcohol Services SA, SA Department of Health, representatives from the tattooing and body piercing industry, the viral hepatitis nurses, and the Aboriginal Health Council of South Australia.

The Education Team

There were several changes in the education team this year, as we welcomed Dale, Dan and Ngoc to join Nicole and Michelle, and said goodbye to Mahdi wishing him all the best in his nursing career!

Looking Forward

In addition to our work involving hepatitis C, this year gave us the opportunity to expand on our knowledge and capacity to deliver hepatitis B education, which we will continue into 2012-13. We also hope to include a focus on the northern suburbs of Adelaide to address the unmet needs of people living with hepatitis C in this area.

We look forward to another busy and exciting year in 2012-13!

Nicole Taylor

Information & Resources Report

The year started in high gear with annual hepatitis awareness campaign preparations in full swing, as the national campaign had been moved to the end of July to coincide with World Hepatitis Day on 28 July.

Hepatitis Awareness Campaign

Activities during the 2011 campaign included: mail-outs of display material to relevant organisations, children's colouring competition in public libraries, a display in the Radio Adelaide window on North Terrace. Down Your Street bookmark distribution, launch of the new edition of the Little Book of Hep C Facts redeveloped with Aboriginal community input, O'liver walkabouts, community service announcements in country radio stations and media releases to all SA media outlets. Hepatitis SA educators were busy facilitating and supporting education and information sessions, many of which were a part of the small grants program (see below).

Thirty metropolitan and rural libraries participated in the O'liver colouring competition. There were 205 entries including some from the Queen Elizabeth Hospital liver clinic and the Bhutanese Association's Sisters Club. Libraries received the *Meet O'liver* booklet made from previous colouring competition entries as well as I ♥ My Liver bookmarks.

The Down Your Street campaign exceeded expectations with over 78 people distributing 15,325 bookmarks in their home or work neighbourhoods. This campaign started two years ago with around 6,000 bookmarks distributed by 39 participants in the first year and over 8,000 by 54 participants in the second.

In the 2011 awareness campaign we introduced a small grants project where partner organisations were invited to apply for small grants to organise activities for their communities. Thirteen groups—including prison health centres,

treatment centres, youth centres, Clean Needle Program (CNP) sites and refugee groups—received the grants of \$250 each. Activities ranged from quiz days and distribution of toothbrushes to lunches, workshops and the trial of a support group for people with cirrhosis.



Another new initiative was the Love Your Liver café, where Sarah's Sister's Sustainable Café, one of Australia's leading sustainable restaurants, agreed to offer a special liver-friendly "Great Liver Food" menu on and after World Hepatitis Day. Posters were displayed at strategic locations in the café and badges and bookmarks were available at the counter. In addition, we had a web-run photo competition, Adventures of O'liver, where participants submitted photographs which included O'liver in interesting situations or places.

Distribution

Over 102,370 items were distributed. This was a 60% increase on the 2010-11 where there was no awareness campaign, and a 7.4% increase on 2009–10. Organisations receiving the most resources in 2011–12 were academic institutions, community health services, hospitals and



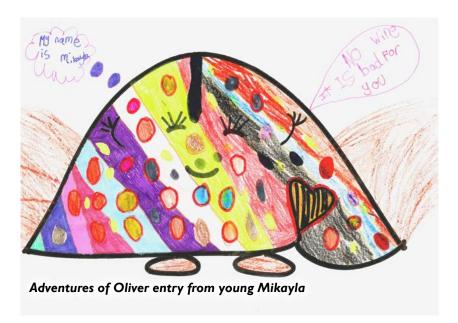
government agencies, liver clinics and drug and alcohol services. Absolute number of resource items going to rural areas dropped a little: compare 2011–12 (19,936) and 2010–11 (20,720).

Following the redevelopment of the *Little Book of Hep C Facts*, we implemented a promotional distribution to Aboriginal organisations. In all, 5,719 copies of the booklet were distributed in the financial year 2011–12, including to non-Aboriginal organisations and individual clients.

My Precious Liver

In 2012 we received a grant from Hepatitis Australia for a project to raise hepatitis B awareness in the Chinese community in South Australia. This project - My Precious Liver - aimed to reach the wider ethnic Chinese community through the seven community-based weekend Chinese language schools. We were able to reach over 1,000 schoolchildren and, through them, distribute information to over 770 parents. As well, over 90 information packs were distributed to teachers and school council members. As a spin-off, the information resources were also used in the mother tongue class of a mainstream primary school.

Two of the schools have invited us to return to provide information sessions to their



parent communities, while another two were open to us contacting their parent service organisations. These invitations will be followed up in the coming year.

Resources

The eBox electronic information vendor was updated this year and arrangements have been made to deploy the unit at the Woolshed.

Eat Well for your Liver—Tips and Recipes was updated and printed. The book will be promoted as part of the 2012 Down Your Street campaign during the annual Hepatitis Awareness campaign in July 2012.

Draft scripts for audio announcements were developed by staff during a workshop facilitated by Radio Adelaide. We plan on fine-tuning the scripts and recording them for radio broadcasts in the coming year.

Community News

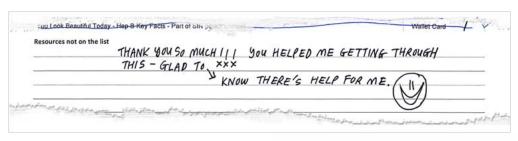
Once again, four excellent issues of *Hepatitis SA*Community News were published. In response to feedback from last year's survey, we offered vouchers for personal story contributions and best letter to the editor, and included more updates on new research and hepatitis-related international news.

Online Services

www.hepsa.asn.au

Our main website, hepsa.asn. au, continues to be a source of information and a channel for resource orders for the community and workers. More than half of the 200 pages on the Hepatitis SA website were updated during the year, some more frequently than others.

There were 18, 503 downloads of resources from the website compared to 15,271 downloads the previous year—a 21% increase. The website received 17,085 visits, an increase of 34% over the same period the year before.



Over 33% of client-initiated resource orders were received via online order forms and people can now provide feedback to us via a feedback page accessed from our main website.

Other Online Services

There were 2,114 visits to the K3MyLiver website compared to 1,506 visits the year before.

A dedicated library homepage was deployed in August 2011 and an electronic collection (e-resources catalogue) set up and launched in April 2012. The catalogue of e-resources was promoted via site links, articles in a number of magazines, Twitter, listings in directories, e-list articles, and personal recommendations within related networks. All resources are

and newsletters from relevant organisations in order to harvest the latest relevant resources and news.

Networking

Our program area facilitates the Hepatitis Network and participates in the Vietnamese Community's Hoi Sinh steering committee. We continue to seek out ways to maintain links with the Bhutanese Community through involvement in information stall activities and consultation in development of relevant resources.

Volunteers

Information and Resources volunteers contributed 1,132 hours filling orders, printing brochures, stocking shelves, staffing information stalls and doing resource drops. Volunteers undertook three resource drops to metropolitan regions and 11 resource drops to the RAH.

We thank all our volunteers— Amanda, Dayna, Eve, Mark, Phil and Philip—for their contribution, without which our resource distribution service would not have been as effective as it was. In particular we want to acknowledge Philip, who will be marking his fifth anniversary as a volunteer with us in November 2012, and Phil. who has volunteered with us for over nine years.

Information and Resources Team:

Cecilia Lim (Coordinator) Rose Magdalene (Information and Resources Officer) James Morrison (Publications Officer)

Joy Sims (Librarian) Bryan Soh-Lim (IT Support Officer)



The online hep C selfassessment tool, hepccheck. info, had 840 visits in the 12 months to end of June 2012, compared to 446 in the previous year.

A mobile-friendly version of the K3MyLiver site was developed and will be launched during the 2012 hepatitis awareness campaign. This will make the website more readily available to people via smartphones and tablets.

We maintained a Twitter account and an Issuu account where all issues of our magazines are published and accessible on computers and other digital devices.

measured against strict inclusion criteria to ensure relevance, reliability and currency. The collection is unique in its scope and ease of access and is quickly acquiring a positive reputation:

"Wow – this is brilliant. This service is fast (immediate, in fact), efficient, comprehensive and easy to use. I typed in a few key words to test it and the response was immediate—I found exactly what I was looking for, within seconds. Thank you and well done. A great new resource."

-Stuart Loveday, EO Hepatitis NSW

The library maintains and updates the collection weekly, subscribing to regular e-lists

Hepatitis SA Helpline & Support Services Report

The Hepatitis SA Helpline and Support Service operates Monday–Friday, 9–5, and provides confidential, high-quality, accurate and up-to-date information on hepatitis C and related issues with a component of emotional support, as needed. The services provided through this program are:

- Hepatitis SA Helpline
- · Information via email
- Free-call Prisonline (available through all SA prisons)
- In-person/drop-in information
- Calming the C (fortnightly support group)
- Referrals to appropriate services
- Written resources (posted)

In an effort to streamline the services available for people seeking information regarding hepatitis, the former Hepatitis Helpline, run through the Alcohol and Drug Information Service (ADIS) discontinued their service in February 2012 and Hepatitis SA has taken on the provision of all hepatitis helpline support in the state. Callers to the former helpline are automatically redirected to 1300 437 222 or 1300 HEP ABC

The Hepatitis SA Helpline is staffed by the Coordinator and a team of dedicated volunteers. There are currently seven Helpline volunteers rostered to work between one and two shifts per week. Over the year, our volunteers contributed 1,117.15 hours of time to Helpline shifts. During the year, Fred, our longest serving volunteer with over 14 years experience, successfully gained full-time employment with the Peer Education team at Hepatitis SA, but continues to facilitate the debrief meetings and takes overflow calls and calls when the Helpline is not staffed by a volunteer or the Coordinator. Hepatitis SA sincerely thanks Fred, Will, Debra, Karan, Louise, Michele, Janette and Steve for their time and dedication to providing a quality service to all

How people made contact



FIGURE 1

those seeking information and support regarding hepatitis in SA

"The operators were very helpful and offered follow up assistance. Thank you."

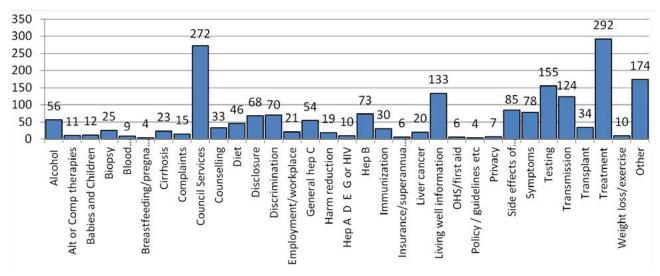
"A million thank-yous for your support. It has really helped me a lot."

The primary target groups for this program's 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 though the Coordinator.

In this financial year, there were 703 occasions of service. Information and support regarding hepatitis C accounted for the most client contacts (69%) and there were 79 (11%) contacts relating to hepatitis B and co-infections. The great majority of people (658 or 93%) who used the services were from the primary target groups; 390 (55%) were living with hepatitis, 80 were family members and friends, 59 were at risk or awaiting test results, 82 health and community workers called on behalf of people living with hepatitis and 47 who cleared hep C either naturally or though



FIGURE 2



treatment. The remaining 45 contacts were from the public, including employers, students/teachers and general enquiries from other health and community workers. Again, the majority of service users were living in the metropolitan area (77%), but rural contacts increased to 19% this year and 24 information requests were received from interstate and overseas. 150 contacts were followed up with posted written information targeted towards clients' individual needs. 263 people were also referred to other services for assistance, including 77 to treatment nurses.

"You understood and answered my questions in a manner easy to understand. This has the effect of making one feel optimistic regarding the future."

Although the most common reasons for contact were testing and treatment related, there were many diverse information requests.

Figure 2 below shows topics discussed with clients through all program services.

"I've learned more in the last short time than I have forever."

"Everything was cloudy until I spoke to you. This service is fantastic."

Calming the C - Support Group

Calming the C is an informal support group facilitated by Hepatitis SA. The group meets fortnightly over a healthy light lunch. Conversation is selfdirected by the participants and generally centred on treatment: how to access it in a timely manner, preparation, chances of a Sustained Viral Response (cure) and how to manage sideeffects. The ability to speak to others who have been, or are on, the same journey normalises people's experience and provides reassurance. Regular participants are very welcoming and supportive of all new people attending the group.

There were 25 Calming the C sessions held over the year with a total of 114 attendances. In previous years, gender distribution was even but this year there have been more men (75/66%) than women (39/34%) attending. Eight people attended for the first time. All participants were from the primary target groups, including seven partners of positive

people. The majority (110) came from the metropolitan area and there were four people living in rural SA who attended.

Through the evaluation surveys people attending the group reported feeling welcome, and as a result of attending the group had a greater understanding of hepatitis C and related issues, were better able to manage symptoms or side-effects of treatment, and most were more aware of services that could assist them.

"There is a wealth of knowledge at these meetings – warmth and support given to all who attend."

"The openness and friendliness is what I like best about Calming the C."

This year, a Calming the C in the North support group also began operating monthly at the GP Plus at Elizabeth, as an initiative of the Outreach Hepatitis C Peer Education and Support project. Thank you to Fred and volunteer Debra, who facilitate this group for people living with hepatitis C in the northern suburbs of Adelaide.

Deborah Warneke-Arnold

Outreach Hepatitis C Peer Education & Support Report

The Outreach Hepatitis C Peer Education and Support Project trains and supports hepatitis C peer educators, who are placed within alcohol and other drug agencies and related services to engage with clients of these services about hepatitis C. The peer educators provide hepatitis C information, education, support and referral services for these clients either individually or in groups.

During 2011-2012, 132 group sessions for 712 participants were provided by peer educators, and 397 clients were provided with individual sessions, totalling 1,109 clients who were provided with hepatitis C peer education by this project.

There were regular placements at various 'host' agencies, including Warinilla, Joslin, Northern Drug and Alcohol Services South Australia (DASSA); Vietnamese Community of Australia, South Australia Chapter (VCASA); Archway at Port Adelaide, as well as Adelaide Women's Prison; and Cadell and Mobilong prisons.

The peer educators also worked with the Hepatitis SA rural educator to train and support prison peer educators at Port Augusta and Port Lincoln prisons this year, as well as continuing to participate in community events such as the Aboriginal Women's Gathering at West Beach and the Homeless Health and Housing Expo in Whitmore Square.

Peer educators continued to provide support for people

considering and undergoing hepatitis C treatment at Warinilla and Southern DASSA treatment clinics, in partnership with Flinders Medical Centre and DASSA staff, and towards the end of this period peer educators were planning similar services in other community settings with the viral hepatitis nurses based at the Parks. This resulted in the establishment of a Calming the C support group in the northern suburbs of Adelaide in March, staffed by a peer educator together with a volunteer from the Hepatitis SA Helpline, both of whom have been through the treatment journey.

The Outreach Hepatitis C
Peer Education and Support
Project, in its fourth year
of operation this year, was
externally evaluated by Dr Paul
Aylward from the University of
Adelaide, whose findings about
the project from interviews with
participating 'host' agencies
and their clients included the
following:

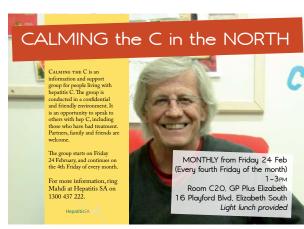
"The peer educators are seen as providing a unique service which both enhances client engagement and complements existing services holistically adding value to those services

[...] The project has raised knowledge and awareness of hepatitis C, its treatment and prevention among clients, many of whom openly asserted having little information about the virus prior to meeting the peer educator [...] The peer educators have clearly acted as role models for clients providing tangible evidence of physical health and the effectiveness of treatment [...] This has raised spirits, optimism and a sense of hope for some clients."

The project and has also been successful in attaining funding for the next three years from the NGO Treatment Grants Program, Department of Health and Ageing, and I would like to thank the Department for their continued support.

I would also like to thank
Mahdi Nor for taking on the
Coordinator role while I was
on maternity leave this year, as
well as all the peer educators
on the team for the 2011–12
period: Fred, Karan, Will, Penni,
Mark, Krystal and Megan.
Thank you all for your excellent
contribution to the ongoing
success of this Project.

Maggie McCabe



Treasurer's Report

Total income from grants for Hepatitis SA in the 2011-2012 Income and Expenditure Statement is \$1,045,443. Grant income is the net result of 12 months recurrent funding for the financial year of \$729,705 for the SA Hepatitis C Prevention and Health Promotion Program; \$82,894 for the Hepatitis C Education and Prevention Rural Expansion Program; and \$1,919 for the Statewide Hepatitis B Coordination Project from SA Health; and \$199,925 for the Hepatitis C Peer Education Program from the NGO Treatment Grants Program funded by the Australian Government Department of Health and Ageing; and small one-off grants of \$11,000 from Hepatitis Australia for the Hepatitis B Awareness Campaign, and \$20,000 from SA Health for the SA Tour of Body Armour by the Ilbijerri Theatre Company.

Other sources of income for the year totaling \$110,490 included Interest of \$16,586; Memberships of \$100; Reimbursements of \$8,446 (being mainly cost recovery of information resources produced); Sundry *Income* totaling \$33,338, being \$22,727 from the Aboriginal Health Council of South Australia as a contribution towards the costs of the twoweek SA tour of Body Armour, and \$10,609 from Centrelink for paid parental leave for a staff member, and a \$2 donation; and Consultant Income of \$52,020 which was income from a partnership in the SA HIV/Hepatitis C Workforce Development Program with Relationships Australia South Australia (RASA). Total Income for 2011-12 was \$1,155,933

which is \$61,908 greater than the previous year.

Total expenditure for the year was \$1,128,798. The major expense was Salaries and Oncosts for staff totalling \$786,061. Other large expenses included Premises Rent and On-costs of \$77,830 and Consultants costs of \$55,298, the largest components being payments of \$41,616 for partnership with Partners of Prisoners Program in delivering hepatitis C education to remandees in the SA Hepatitis C Prevention and Health Promotion Program; \$5,864 mainly to Lay Lee Tang, but also to Diwani for their work on the hepatitis B awareness campaign in Chinese ethnic schools; \$5,000 to Quality Management Services for the two assessors for the Service Excellence Standards Accreditation process; \$2,550 for a community artist and yoga practitioner who worked on Hepatitis SA education projects *Hip Hop* Hep and the CHI project respectively; and \$268 for an interpreter who worked on the hepatitis B Community Forum for over 100 older members of the Vietnamese community.

There was an increase of \$6,571 in Salaries and oncosts from the previous year, mainly in provisions for staff entitlements. Some of the other larger movements in expenditure from the previous year included *Postage and* Freight up \$4,061 to \$12,726 in 2011-12, and increase of \$3,708 in Staff travel and accommodation to \$18,660, though this was offset by a decrease in *Motor* Vehicle Running Costs of \$7,856 to a total of \$14,496 in 2011-12. This decrease in Motor Vehicle Running Costs is the result of

replacing two leased vehicles with two purchased vehicles which will be depreciated over two years. Another significant decrease in costs was in Telephone, for the second year in a row, down \$2,020 from the previous year to \$9,892 in the 2011–12 year. This further decrease was a result of fewer mobiles being used by staff and more suitable plans for the remaining mobiles being negotiated, once the initial contract period finished. The decrease in Accounting and Bookkeeping of \$2,258 to just \$623 this year, reflects the fact that this task is now done inhouse and not outsourced. as it still was to some extent in the previous year, as the Administration Officer gradually took over this role from an external provider.

For the 2011–12 financial year, Hepatitis SA had a surplus of \$27,135 resulting in total equity of \$117,265 as at 30 June 2012.

Hepatitis SA would like to thank the STI and BBV Section at the SA Department of Health and the SA Branch of the Australian Government Department of Health and Ageing for administering Hepatitis SA's major recurrent funding during the 2011–12 financial year.

Darrien Bromley





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INDEPENDENT AUDITOR'S REPORT

Hepatitis SA Incorporated

We have audited the accompanying financial report of the Hepatitis SA Incorporated, which comprises the Balance Sheet as at 30 June 2012, and the Income and Expenditure Statement for the year then ended, a summary of significant accounting policies and other explanatory notes.

The 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

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 SA Incorporated, 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.

Peter Hall FCA
Tino Lizamore BCompt CA
Liability limited by a scheme approved under Professional Standards Legislation

Auditor's Opinion

In our opinion, the financial report presents fairly, in all material respects, the financial position of the **Hepatitis SA Incorporated** as of 30 June 2012, and of its financial performance for the year then ended in accordance with Australian Accounting Standards (including the Australian Accounting Interpretations).

Peter Hall Chartered Accountant

Dated 12TH September 2012

HEPATITIS SA INCORPORATED INCOME & EXPENDITURE STATEMENT FOR THE YEAR ENDED 30TH JUNE 2012

2011 \$			2012 \$
Φ	INCOME		P
924,207	Grants Recurrent		1,014,443
105,801	Other Grants		31,000
7,198	Interest Received		16,586
175	Membership		100
- 147	Profit/(Loss) on Disposal of Asset		-
3,532	Reimbursements		8,446
2,260	Sundry Income		33,338
51,000	Consultant Income - RASA		52,020
1,094,025			1,155,933
	OPERATIONS		
	Administration		
3,218	Advertising	1,667	
2,500	Audit Fees	1,900	
640	Bank Charges	623	
2,620	Accounting & Bookkeeping	362	
62,506	Consultants	55,298	
19,192	Depreciation	16,562	
1,715	Equipment Purchased < \$300	4,052	
1,210	Hire Fees	971	
5,272	Information Technology Support	6,713	
4,100	Insurance	5,152	
77	Legal & Filing fees	135	
2,259	Memberships & Fees	1,785	
22,352	Motor Vehicle Running Costs	14,496	
2,921	Office Maintenance & Repairs	3,985	
8,665	Postage & Freight	12,726	
76,871	Premises Rent and On Costs	77,830	
25,539	Printing	25,148	
13,306 719	Resource purchase Security	4,674	
3,651	Staff Amenities	1,021 3,882	
3,439	Staff Training	5,679	
4,648	Stationery	5,750	
118	Sundries	233	
11,912	Telephone	9,892	
14,952	Travel & Accommodation	18,660	
6,731	Volunteer Expense	5,625	
301,130	TOTAL OPERATIONS	284,818	

HEPATITIS SA INCORPORATED INCOME & EXPENDITURE STATEMENT FOR THE YEAR ENDED 30TH JUNE 2012

2011 \$			2012 \$
	Employment Expenses		
680,354	Wages	674,466	
890	Other Wage Costs	192	
60,109	Superannuation	59,213	
11,919	WorkCover	11,873	
26,218	Provisions for Staff Entitlements	40,317	
779,490	TOTAL EMPLOYMENT EXPENSES	786,061	
	Programs Expenses		
7,195	Program Expenses	57,919	
7,195	Control of the Contro	57,919	
7,195	TOTAL PROGRAM EXPENSES	57,919	
1,087,815	TOTAL EXPENDITURE	-	1,128,798
6,211	NET SURPLUS (DEFICIT) FOR THE YEAR	-	27,135

HEPATITIS SA INCORPORATED BALANCE SHEET FOR THE YEAR ENDED 30TH JUNE 2012

2011 \$		2012 \$
83,919 6,211 90,130	ACCUMULATED FUNDS Opening Balance Net Surplus/(Deficit) for the Year TOTAL FUNDS	90,130 27,135 117,265
14,276 285,388 675 750 51 5,199 306,339	Represented by:- ASSETS Current Assets Cash at Bank - Current Account On Line Saver Gift Fund Account Petty Cash Receivables Prepayment Represented by:- ASSETS 21,579 284,178 677 750 158,558 750	471,550
164,757 - 97,164 67,592 373,931	Non-Current Assets Plant & Equipment - at cost 179,382 Less Accumulated Depreciation - 113,726 TOTAL ASSETS	65,656 537,206
30,194 53,994 29,234 - 17,899 131,321	CURRENT LIABILITIES Creditors 14,855 Employee Entitlements 73,746 Grants in Advance 123,892 Other in Advance 2,143 Net GST Payable 32,259	246,895
10,000 61,657 80,823 	NON-CURRENT LIABILITIES Provision for Asset Replacement 10,000 Provision for Long Service Leave 75,234 Provision for Redundancy (Employees) 87,812 TOTAL LIABILITIES	<u>173,046</u> 419,941
90,130	NET ASSETS	117,265

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HEPATITIS SA INCORPORATED

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 noncurrent assets.

(b) **Non-Current Assets**

All assets held by the Association with an original cost exceeding \$300 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.

Income Tax (d)

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

HEPATITIS SA INCORPORATED FINANCIAL REPORT FOR THE YEAR ENDED 30 JUNE 2012

BOARD REPORT

The Board members submit the financial report of the **Hepatitis SA Incorporated** for the financial year ended 30 June 2012.

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

Arieta Papadelos

Catherine Ferguson

Darrien Bromley

Carol Holly

Lisa Carter

Tess Opie

Kerry Paterson

Stefan Parsons

Jeffrey Stewart

William Gaston

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 2012.

- (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 19 day of October 2012

HEPATITIS SA INCORPORATED FINANCIAL REPORT FOR THE YEAR ENDED 30 JUNE 2012

STATEMENT BY MEMBERS OF THE BOARD OF GOVERNANCE

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:

- Presents fairly position of the Hepatitis SA Incorporated for the year ended 30th
 June 2012 and its performance for the year ended on that date.
- At the date of this statement, there are reasonable grounds to believe that the 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 i A day of O

day of October 2012



HepatitisSA COMMUNITY FORUM HEPATITIS C: NEW TREATMENTS & PRACTICAL ISSUES

Wednesday, 14th November • 2-4PM GP Plus Elizabeth, 16 Playford Boulevard, Elizabeth

Hepatitis SA is hosting a free forum to explore the new medications (BOCEPREVIR and TELAPREVIR) used in the treatment of hepatitis C.

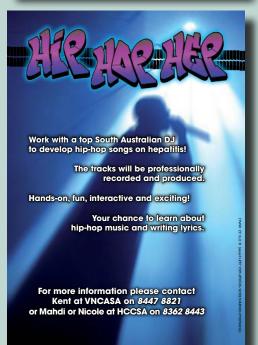
Come along to find out more about:

- the future of hepatitis C treatment
- BOCEPREVIR and TELAPREVIR: what are they, how do they work,
- clinical trials and hepatitis C treatment
- practical issues and getting prepared to go on treatment
- meet the nurse providing treatment support in the northern suburbs

Afternoon tea provided. No cost—all welcome to attend!

Please RSVP to Nicole at Hepatitis SA on nicole@hepsa.asn.au or call 8362 8443.







Want a FREE FILTER?

Come and see a Hep C Peer Educator, and spend a few minutes getting new information about hepatitis C!

We will be here every Friday in February from 5-8РМ.

C Health **Inspiration**

HCCSA is planning its second series of six-week workshops for people living with hepatitis C, starting October 2011.

The workshop program will provide participants with practical skills for living well with hepatitis C, as well as building networks. The course is FREE, FUN and INTERACTIVE, and most of all it is conducted in a friendly, safe and confidential space.

> To register your interest, please contact Mahdi on 8362 8443 or Mahdi@hepccouncilsa.asn.au



online col

Have you checked our online catalogue recently? We now have a considerable collection of free-to-access online resources, from reputable national and international source, which you can link directly to including:

- books video and audio clips
- brochures and pamphlets •
- useful websites

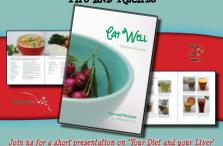
Our online catalogue at www.hepsa.asn.au/library is easy to use and will give you details of all of the resources in our collection, both hard copy and online.

Topics include: treatment, tests and procedures, lifestyle matters (nutrition, mental health etc), drug issues and other risk factors, discrimination, information for different cultures and interest groups, as well as policy and statistical documents.



Adelaide MRC Didis' Group and Hepatitis SA invite you to the launch of

EAT WELL FOR YOUR LIVER TIPS AND RECIPES



Rose Magdalene (Hepatitis SA) and a delicious lur prepared by members of the Bhutanese community.

Saturday 8 September • 12 NOON to 2PM Venue: MRCSA Community Centre 23 Coglin Street, Adelaide

For more information call Gauri at MRCSA on 8217 9500 (Fri) or Cecilia at Hepatitis SA on 8362 8443

norted by the Settlement Grant Program of the Department of Imm SA Health has contributed funds to this he patitis awareness event.



Vào ngày Thú Ba, 1ª tháng Năm 2012, Hepatitis SA sẽ tổ chức một buổi diễn đán miễn phí nhằm cung cấp tin tức cho cộng đồng chúng ta về bệnh viêm gan.

Hãy đến và tìm hiểu về bệnh viêm gan B từ những nhân viên y tế và các dịch vụ cung cấp. Quí vị sẽ được học hỏi về cách:

Làm sao để sống cho khỏe mạnh nếu quí vị hiện đang có bệnh viêm gan B
 Làm sao để bảo vệ chính bản thân mình và gia đình để không bị nhiễm viêm gan

Bệnh viêm gan B được y học chữa trị như thế nào
 Cách chăm sóc lá gan của mình qua các thức ăn

Nếu quí vị muốn tham dự, xin vui lòng gọi điện thoại đến bác sĩ Huy tại Cộng Đồng Người Việt, số 8447 8821 hoặc Dale hay Nicole tại văn phòng Hepatitis SA 8362 8443.

