



CNSA 2016-2017

Annual Report

Cancer Nurses Society of Australia Incorporated

A shared voice. A shared vision.

1 April 2016 – 31 March 2017

CNSA 2016-2017 Annual Report

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MISSION STATEMENT

Promoting excellence in cancer care through the professional contribution of cancer nurses.

To achieve this mission, CNSA acts as a resource to cancer nurses around Australia, no matter what their geographical location or area of practice. The CNSA is the link between cancer nurses in Australia, the consumers of cancer nursing services and other health professionals involved in cancer care.

VALUES

CNSA's mission and strategic aims are supported by these core values:

Excellence – we promote excellence through advocacy, education, leadership and research in all activities of the society


Professionalism – we are committed to the society and exhibit integrity, honesty and ethical behaviour in all we strive to achieve

Innovation – we actively seek creativity and knowledge to enhance the practice of cancer nurses to improve patient outcomes; and

Collaboration – we openly seek opportunities to grow our membership and build partnerships to further the work of the society.

STRATEGIC AIMS

To achieve its mission CNSA undertakes the following strategic aims:

- Developing and disseminating resources which contribute to advances in cancer nursing practice
 - Facilitating research in the area of cancer nursing that will contribute to improvements in the care of people with cancer
 - Taking a leadership role in addressing the educational needs of cancer nurses
 - Collaborating with other groups and organisations involved in the development and provision of services to people with cancer
 - Promoting cancer nurses' contribution to national cancer control activities and policy; and
 - Providing opportunities for professional networking amongst cancer nurses.
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CNSA NATIONAL EXECUTIVE COMMITTEE

For the reporting period 1 April 2016 – 31 March 2017

Current		Term Commenced
Ray Chan	President	Jan 2015
Jane Campbell	President Elect	Jan 2017
Kylie Ash	Treasurer	Jan 2017
Laura Pyszkowski	Secretary TAS Representative/SPN Coordinator	Feb 2017 Jan 2014
Sue Schoonbeek	QLD Representative	Jan 2017
Ellen Barlow	NSW Representative/RG Coordinator	Jan 2014
Nicole Loft	SA Representative	Jan 2014
Lucy Patton	WA Representative	Jan 2015
Carmel O’Kane	VIC Representative	Jan 2016
Trevor Saunders	Ex-officio	Jan 2017
		Term Concluded
Trevor Saunders	Treasurer	Dec 2016
Jane Campbell	Secretary/Website & Membership Coordinator	Dec 2016
Kylie Ash	QLD Representative	Dec 2016



PRESIDENT'S REPORT



Over the past 12 months, the National Executive Committee (NEC) has focused our efforts on enacting a number of key measures to ensure the CNSA will have a robust governance infrastructure going forward. These measures include, but are not limited to the constitutional review, appointment of the Chief Executive Officer (CEO), governance training for the NEC, and development of a strategic plan for 2017-2021. Ensuring the success of these measures has been challenging and complex, but I would like to acknowledge the relentless courage and professionalism of the NEC and staff, which has been key to the success of these measures.

While these measures/projects have taken up a considerable amount of time and effort of the NEC and staff, I am confident that each of these projects will be essential to the future growth and sustainability of the organisation. These efforts will lead to a number of short-term and long-term gains. We expect some of these to be realised within the 2017-2018 reporting period. It would be remiss of me to not make a special mention of the significant contribution of the Constitution Review Steering Committee. Thank you to Sandy McKiernan, Deborah Hoberg, Catherine Johnson, Anne Mellon and Patsy Yates. The approval of relevant special resolutions by the membership at the Annual General Meeting was a testament to the quality work undertaken by the committee and the NEC.

The CEO appointment is a key milestone of growth for the CNSA, as well as a sign of maturity as the organisation steps into our 20th Anniversary. Since the appointment of Ms. Samantha Gibson, the support received by members and stakeholders (from both internal and external to the organisation) has been overwhelming. I am confident that Samantha will be able to lead the organisation to the next level of success.

I would like to specifically commend Mr. Trevor Saunders (CNSA Immediate Past Treasurer) for his leadership over the financial governance of this organisation. As Chair of the Finance and Audit Committee, he has led the centralisation of finances of all Regional Groups (RGs) and Specialist Practice Networks (SPNs) over the past 24 months. This project does not only raise the standard of financial governance of the organisation, it also allows the RGs and SPNs to focus on their operational priorities and local educational initiatives. It is very clear that the CNSA is in a financially strong position. We are mindful that the financial reserves of the organisation will allow us to invest in initiatives and strategies that will result in members' benefits.

Over the past 12 months, we have funded eight professional development travel grants (three offered by regional groups) and two research grants. While I am pleased with these outcomes, the Education Standing Committee has continued concerns about grants being incomplete and consequently the sub-optimal success rates for travel grants. Over the next 12 months, the Education Standing Committee and the NEC will work together to implement capacity building strategies to equip members with grant writing skills. From a research perspective, the CNSA has been providing a well-attended research pre-Congress workshop over the past 2 years where novice researchers receive mentoring and support as they develop a research concept. We are currently working with the Primary Care Collaborative Cancer Clinical Trials Group to offer a joint research workshop that will focus on cancer survivorship. In addition to the grants above, the NEC has also extended the project timelines for the two special projects led by Professor Sandie McCarthy and the Education Standing Committee. These extensions will allow the teams to be able to deliver on the expected outcomes and disseminate the findings of their projects.

In February 2017, the CNSA launched Sosido for our members. Sosido enables members to keep track of the latest publications of CNSA members and the latest literature on cancer nursing and supportive care. The next step will be for members to access the community forum, where members can have professional interactions and discussions. I have received great feedback from our members about this initiative.

Developing and maintaining national and international partnerships remains a key focus for the CNSA. The CNSA was represented at a number of committees of our partner organisations including: International Society of Nurses in Cancer Care; Cancer Australia; Clinical Oncology Society of Australia; Coalition of National Nursing and Midwifery Organisation; Psycho Oncology Collaborative Research Group; and Australian New Zealand Urogenital and Prostate Cancer Trials Group. The CNSA has also made concerted efforts to enhance our partnership with the Canadian Association of Nurses in Oncology and the New Zealand's Cancer Nurses College.

If the membership approve the motion to register CNSA as a public company limited by guarantee with the Australian Securities and Investments Commission (ASIC), and approve the proposed constitution, the new constitution will come into effect upon registration with ASIC. The Board of Directors will then be nominating the new CNSA President from within the Board. This will also mark the end of my term as CNSA President. I am very pleased with the productive, collaborative relationship I have shared with Ms. Jane Campbell (President Elect) and the remainder of the NEC over the past three years. Jane's tremendous professionalism, dedication, and support to my leadership is well recognised. I am very confident that Jane, the Board and CNSA staff will take the organisation to greater heights, ultimately benefiting our members and people affected by cancer.

In closing, I would like to conclude my report by expressing the privilege that I have had to serve CNSA members. The leadership journey over the past 12 months has been a highlight of my career. I look forward to contributing to the Society in other ways and witnessing future growth of the organisation

Professor Raymond Chan GAICD
CNSA President

TREASURER'S REPORT



On behalf of the National Executive Committee (NEC) and the Finance and Audit Committee (FAC), I am pleased to inform members that the 2016-2017 reporting period has once again seen sustained growth in the organisation's total financial equity. I acknowledge the huge contribution that my predecessor Trevor Saunders has played in ensuring the financial management of CNSA is responsible and considered. CNSA also benefits from strong and productive partnerships with our bookkeeper and accountant; relationships that Trevor has fostered and enhanced for the betterment of our Society. In taking on the Treasurer role in the wake of numerous changes in the governance of CNSA, I have been reassured by the strong foundation and vision of the FAC to remain responsive to current and future challenges and opportunities.

In this reporting period, key income streams remain member subscriptions and Annual Congress. Continued growth in membership subscription income amounted to almost \$157,000 for the year ending 31 March 2017. The 2016 CNSA Annual Congress in Cairns attracted strong attendances and sponsorship. Annual Congress 2016 was the most financially successful Congress in history, with \$422,675 in support and exhibition sales, an increase of over \$28,000 from the 2015 Winter Congress in Perth. After disbursements and management fees were paid, CNSA netted a record net profit for 2016 of just over \$218,000.

Building on the prudent investment approach in previous years, and to mitigate against current low interest rates, the NEC and FAC have strategically expanded the CNSA investment portfolio to maximise returns on the significant financial assets held by the CNSA. Funds currently held in investment are just over \$812,000 with interest income of over \$12,300 received in this financial year.

The NEC and FAC have a key responsibility to members to maintain and extend the assets of the organisation, to support activities in line with the strategic goals of CNSA. The financial stability of the Society has enabled an increased allocation, in 2016-2017, toward member benefits. Over \$27,000 was awarded to members through CNSA grants and scholarships. Over \$17,500 was awarded within the Special Projects Program to develop professional development resources and activities.

CNSA Regional Group and Specialist Practice Network finance reporting has highlighted the extraordinary amount of activity undertaken by these groups. Almost \$170,000 income was generated and \$143,514 reinvested back into local member benefits.

Overall, the CNSA remains in a sound financial position with a total equity of \$854,415 and an operating surplus of \$85,515 for the year ended 31 March 2017. This surplus is testament to the sound fiduciary management by the NEC and FAC in balancing expenditure related to necessary administration, employment and legal costs incurred by the Society in this financial year. As an incorporated association in Australia, the CNSA is required to satisfy the financial and reporting requirements of the Associations Incorporation Act 1991 (ACT), in addition to complying with requirements specified by the Australian Accounting Standards. The accompanying annual financial report, statements and notes reflect these disclosure requirements.

Kylie Ash
CNSA Treasurer

WEBSITE AND COMMUNICATIONS



The CNSA social media profile has continued to grow over the past year, with the Twitter feed and Facebook page serving as a platform for regular communication and news to our members, aided with attracting some new members. At the end of the reporting period, the Twitter feed had 900 followers, an increase of 183 followers. The CNSA Facebook page had 1543 likes, representing an increase of 437 likes.

The CNSA Communications Officer, along with Chilli Fox Events, continue to maintain the social media platform for CNSA. A social media plan has been developed with monthly themes, member profiles, Fact Fridays and posting relevant news stories and information from like-minded organisations. Social media themes highlighted over the past year have included; lifestyle and risk reduction, bowel cancer, head and neck cancer, venous access device and infusion therapy, childhood cancer, breast cancer, blood cancer, lung cancer, geriatric oncology, prostate cancer, ovarian cancer and palliative and end-of-life care.

The publication of the newsletter continues to be an important part of the CNSA communication strategy. This is distributed via email to CNSA members and posted on the CNSA website on a quarterly basis, with contributions from the President, Regional Groups, Specialist Practice Networks and CNSA committees and working groups.

Anne Mellon
CNSA Communications Officer



Two issues of the journal were published during the reporting period and both comprised entirely proffered manuscripts.

The reporting period has seen a sustained advertising revenue and the number of pages per issue.

Members of the Editorial Board:

- Elisabeth Coyne (QLD)
- Catherine Johnson (NSW)
- Louise Nicholson (TAS)
- Gabrielle Prest (NSW)



The editors thank the following people for their time and expertise in reviewing manuscripts during the reporting period:

- | | | |
|---------------------|---------------------|------------------|
| • Kylie Ash | • Catherine Johnson | • Suzanne Oakley |
| • Gillian Blanchard | • Diane Lear | • Jane Phillips |
| • Kerrie Curtis | • James McNab | • Shannon Philp |
| • Pammie Ellem | • Louise Nicholson | • Mary Ryan |
| • Samantha Gibson | • Sarah Northfield | • Di Seward |
| | | • Leanne Stone |

The Editors and Publishers are in the process of transitioning the submission and review process to ScholarOne and anticipate that this will be completed by the end of 2017.

ScholarOne is a comprehensive journal workflow management system and is proving to be intuitive and effective in testing.

The publication, distribution and postage of the journal continues to be undertaken by Cambridge Media in Perth.

Tish Lancaster and Moira Stephens
Editors, Australian Journal of Cancer Nursing





Committee Members included: Samantha Gibson - Annual Congress Committee Chair; Raymond Chan - CNSA President; Kate Miller - Professional Congress Organiser (Chili Fox Events); Sara Hurren - Local Cairns Representative; David Larkin - Research Standing Committee Representative; Lucy Patton - NEC Committee Representative; Christine Henneker - Committee Member.

The National Executive Committee chose Cairns as the location for the 2016 Annual Congress. The location lent itself to the theme “Bridging the Gap” – Distance, Culture, Workforce & Knowledge. The theme, location and program attracted 560 delegates from a diverse range of cancer nursing disciplines including clinical, research, management, education and executive.

As the gateway to the Asia Pacific region, boasting two world heritage listings, the Great Barrier Reef and the ancient tropical rainforests, many delegates chose to stay on and enjoy the offerings of the region. Delegates fulfilled their professional development needs, met up with friends and colleagues, networked with industry and took time to enjoy the freshest local produce and world renowned scenery and landscapes.

Delegates were treated to three high calibre international speakers. The draw card for the 19th Annual Congress was the acclaimed and engaging international keynote speaker, Professor Margaret Barton-Burke from The Memorial Sloan Kettering Cancer Centre New York. Margaret spoke of her work in recognising and addressing the care needs of women with breast cancer from disparate populations. She challenged delegates to think beyond their own backyard and participate in global healthcare reform. Her message was further enhanced by an unforgettable plenary address from Cancer Council CEO, Professor Sanchia Aranda, who left the audience captured by her informed, educated and forceful address that insisted that as nurses, we must take a seat at the table and broaden our vision.

Widely published and highly regarded vascular access experts Jocelyn Hill from Vancouver Canada and Associate Professor Nancy Moreau from Greenville, USA, provided up to date insights into current research and evidence in the vascular access domain. Delegates had opportunities to hear from Jocelyn and Nancy in the pre-Congress arena and the plenary program and connect with these two leaders during Congress. Jocelyn’s attendance was generously supported by Angio Dynamics and Nancy’s by TeleFlex.

Professor Bill Runciman from South Australia ignited delegates with an entertaining and reflective presentation focusing on quality and safety in healthcare, reminding the audience of the responsibility that nurses play in contributing to a safe and efficient health care environment. His presentation was complimented by the legendary Patricia Staunton AM, who spoke extensively on the legal ramifications and obligations that nurses are bound by undertaking their duties in nursing both at the bedside and away from the bedside.

The full program theme was explored by Dr. Rachel Hughes, Professor Sabe Sabesan and Associate Professor Gail Garvey. Dr. Hughes presented on the inequity of access to cancer care for those patients in the adolescent or young adult (AYA) group. Dr. Hughes spoke on the differences in cancer care needs in the AYA group and referred to barriers of small patient numbers, geographical dispersion, developmental factors and insufficient specialist support to optimise patient outcomes in this cohort. Professor Sabe Sabesan addressed solution based care for those patients with cancer living in rural and remote regions of Queensland. He inspired delegates with the Telehealth initiative that had been rolled out in Queensland enabling cancer care closer to home supported by partnerships in community healthcare. To round out the program, Gail Garvey gave an enlightening address on the disparity of outcomes in Aboriginal and Torres Strait Islander people affected by cancer. She highlighted the need for healthcare solutions for all, independent of location, culture and race.

An impressive 105 abstracts were submitted, with 45 offered podium presentation, 44 offered poster presentation and only a small number rejected or withdrawn. The program ran for a total of 3 days, offering 6 pre-congress workshops/symposia attended by 261 delegates, 5 plenary sessions, 4 breakfast sessions attended by 223 delegates, concurrent sessions and a poster display.

A number of CNSA committee meetings took place including the CNSA AGM, CNSA member forum, CNSA Specialist Practice Network Meetings and meetings of both the Research and Education Standing Committees of CNSA.

CNSA marketed Congress through numerous avenues including Facebook, Twitter, use of promotional Congress slides by Regional Groups, Congress flyers and posters, regular e-blast notices and advertising through various societies including COSA, ISNCC, Cancer Institute NSW, Lung Foundation, New Zealand Nurses Organisation (Cancer Nurses Group), College of Nursing, Palliative Care Australia, Australian College of Nurse Practitioners and Australian Practice Nurses Association.

An unprecedented level of industry support ensured Congress 2016 was a huge success for CNSA as a society. The large exhibition was supported by 4 Major Congress Partners, BMS, Hospira, MSD and Roche. BMS also supported an industry education dinner on the Thursday evening, attracting more than 100 attendees. The exhibition was sold out with 65 exhibitor and sponsor booths occupied, hosted by 45 different industry, pharma and not-for-profit groups. Delegates and exhibitors were offered the opportunity to mingle with colleagues and friends at the Welcome reception and at the Congress dinner. More than half of all delegates enjoyed the Welcome reception and more than 200 attended the Congress dinner.

To engage with industry the exhibitor passport competition was repeated in 2016. An iPad mini was offered as the industry passport prize which inspired hundreds of delegates to actively engage with industry throughout the exhibition space. This initiative again proved successful as evidenced by industry evaluation and feedback.

Annual Congress 2016 was the most financially successful Congress in history, with \$422,675 in support and exhibition sales, an increase of over \$28,000 from the 2015 Winter Congress in Perth. After disbursements and management fees were paid, CNSA netted a record net profit for 2016 of \$249,932.71 (inc. GST).

Best Clinical Research Paper was awarded to Natalie Bradford, Best Clinical Practice Paper awarded to Joanne Shaw, Best Poster Award awarded to Danielle Spence, Best Poster Award – People’s Choice awarded to Rachel Brown and First Time Presenter Awarded to Alison Marven. All prize recipients were awarded a cash prize of \$250.

Samantha Gibson
Chair, Annual Congress Committee

EDUCATION STANDING COMMITTEE



Committee Members included: Elisabeth Coyne - Education Standing Committee Chair; Karen Munton - Committee Member; Sarah Northfield - Committee Member; Sharon Murcott - Committee Member; Catherine Barratt - Committee Member; Corrie Miles - Committee Member; Michelle Hamblin - Committee Member; Linda Clarke - Committee Member; Leisa Brown-West - Chair (Term concluded Dec 2016).

The Education Standing Committee meet monthly via teleconference. The committee is responsible for leading the review of CNSA travel grant applications. This year, 14 grants were received, and eight were successful. Seven grants provided support for attendance at the 20th CNSA Annual Congress and the remaining grant funded a member to attend an international nursing conference.

In addition to the collaborative committee responsibility for reviewing travel grant applications, each committee member is designated to a specific portfolio. Historically portfolio allocation has worked well, although in 2017 the main focus for the Education Standing Committee has and will be on the collaborative efforts towards the special project, “The minimum safety and education requirements for nurse administration of antineoplastic drugs.” Other portfolios focus on the Cancer Nurse credentialing, EEN and CPD.

In the past reporting period, the committee undertook a review to update the process for evaluating grant applications. The completed review saw the incorporation of a guiding template for reviewer reference and the adoption of exemplars to guide the process of moderation. The committee also reached consensus on the minimum requirements and scores for grants to be considered for awarding. For 2018 travel grant applications, the committee will set a specified date from which the applicants membership must have been in place. This step is expected to remove any ambiguity in meeting all grant criteria. In addition, exemplars of successful grants will be made available to applicants through the CNSA website to support members to submit quality applications.

A key outcome of the Education Standing Committee in 2016-17, saw the publication of work undertaken as a scoping exercise into Enrolled Nurse administration of antineoplastic agents, in the Australian Journal of Cancer Nursing. The completed work by the committee has provided a base line for the development of the review process for the position statement, referenced below;

Ash, K., Baychek, K., Black, E., Brown, L., Coyne, E., Pascoe, L., Patton, L., Pearse, H., Peterman, D., Pigott, C., & Reid, A. (2016). A scoping exercise by the CNSA Education committee regarding Enrolled Nurse (EN) administration of antineoplastic agents. Australian Journal of Cancer Nursing, 11(1), 14-18.

The focus for 2017-18 is to update the CNSA Position Statement on the minimum education and safety requirements for nurse administration of antineoplastic drugs. The first stages of this project have been completed and a comprehensive literature review will be conducted to ensure the new position statement is informed by current evidence.

Dr. Elisabeth Coyne
Chair, Education Standing Committee

RESEARCH STANDING COMMITTEE



Committee Members included: Kim Alexander - Research Standing Committee Chair; Kate Cameron - Secretary; Leanne Monterosso - Committee Member: Research Skills Workshop Planning; Emma Cohen - Committee Member: Preliminary Review of Survey Requests; Nicole Gavin - Committee Member: Preliminary Review of Survey Requests; Victoria Jayde - Committee Member: Research Skills Workshop Planning; David Larkin - Committee Member: Congress Planning Research Representative; Kate Cameron - Chair (Term concluded Dec 2016).

The Research Standing Committee meets via teleconference three to four times each year and undertakes assigned tasks via email follow-up outside of dedicated meetings. The committee provides general research advice to members, connections to cancer researchers, mentoring options, review of project proposals, review of publications including conference abstracts and reviews and administers the request for surveys to the membership via eblasts.

Additionally, the Research Standing Committee is responsible for leading the review of CNSA research grant applications. In this reporting period, nine grants were received, two were successful and awarded;

- Renee Xiangfeng, awarded \$9,499

Understanding Cancer Pain Management Experiences and Needs of Chinese Migrants in Australia: a mixed method study.

- Julie Flynn, awarded \$5,500

Evaluating current methods for effective decontamination of needleless connectors: A pilot randomised control trial.

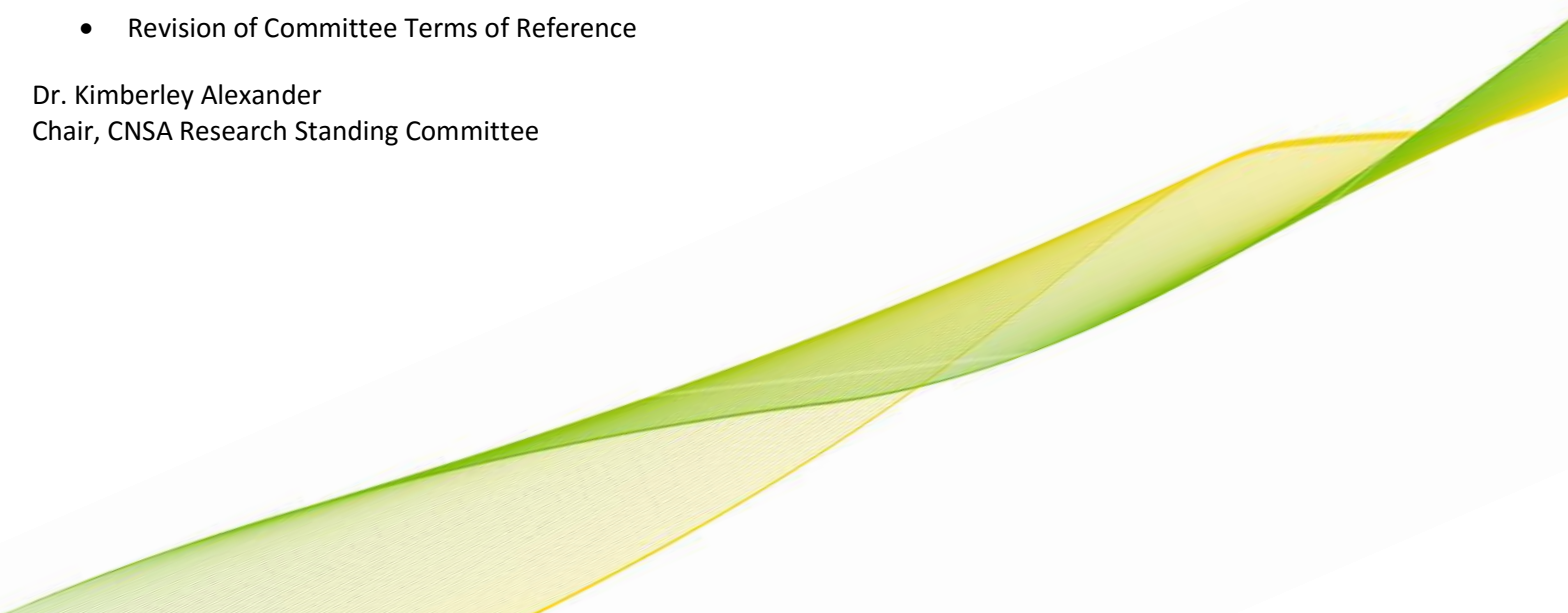
In the 2016-17 reporting period, the committee undertook a review to update the process for evaluating grant applications. In doing so, the committee considered the grant closing date and agreed that in order to maximise the benefit of research workshops incorporated into the Annual Congress, the closing date would move to September 30 in each year. This change has been reflected on the CNSA website.

A key outcome of the Research Standing Committee in 2016-17 was the research workshop for novice researchers at Annual Congress in Cairns in May 2016. Through the workshop, participants received mentoring and assistance to develop and write a research grant application. The workshop was well received and will form the basis of further research workshops planned for future Congress programs.

The priorities of the Research Standing Committee in the coming year include;

- Review of strategic direction for CNSA research and contribution of Research Standing Committee
- Review of grant expectations regarding significance to cancer nursing
- Establish Annual Congress plan to establish an embedded cancer nursing research stream
- Decrease review turn-around time to within two weeks
- Revision of Committee Terms of Reference

Dr. Kimberley Alexander
Chair, CNSA Research Standing Committee



REGIONAL GROUPS COORDINATOR REPORT



As always, it has been a pleasure to read the NSW Sydney, NSW Hunter, Victorian, WA and SA Regional Groups (RG) Annual Reports. Over the past twelve months, the RGs have continued to flourish and provide members with a broad range of professional development and networking opportunities.

I would like to acknowledge and thank the RG Chairs, Meredith Cummins (Sydney RG), Gillian Blanchard (Hunter RG), Pammie Ellem (Queensland RG), Deb Hoberg (SA RG) Sue Bartlett (VIC RG) and Sharon Ray (WA RG) for their enthusiasm and hard work on behalf of their members. Special mention should be made of Adam Rutyna (VIC RG), and Leanne Stone (QLD RG) who both stepped down as Chairs in 2016.

I would also like to acknowledge the many other members that actively participate on these committees, all with important roles and duties. However, space constraints prevent detailing their names and positions. The dedication, commitment and hard work of these, and all the members of the RG committees are greatly appreciated by the CNSA Executive and the wider membership.

Over the past 12 months, the RG committees have organised an impressive array of educational events, offered in various formats, such as; breakfast workshops and seminars, half-day symposiums, and dinner presentations. These events covered topics across a range of clinical issues, new frontiers in treatments, current research, leadership and professional development, and supportive care. The Regional Groups have also continued to collaborate with partner organisations in hosting educational events, such as the HSNZ Nurses Group, and the Victorian Palliative Nurses Group.

The RG Committees should be congratulated on their commitment to providing financial support for their members in various ways. The WA, Hunter and SA RGs provided travel grants to assist with the cost of airfares, accommodation and registration to attend the CNSA Annual Congress. The Victorian RG continues to provide a travel grant in honour of Nicole King, named the Nicole King Memorial Educational Grant. The SA RG sponsored six members from South Australia, and one member from the Northern Territory to attend MASCC in Adelaide.

All the RGs provide some funds, or grants to assist members from regional or rural areas to attend educational events. This is generally in the format of funds to assist with transport and accommodation costs. It is reassuring to note the increased focus of the RGs to support regional and remote cancer nurses to participate in educational and professional development activities. The RGs have continued to develop and maintain strong relationships with pharmaceutical and health related industry groups. It is through these collaborative partnerships and sponsorship that the aforementioned activities are possible.

I would like to thank both Anne Mellon, Gynae Onc Specialist Practice Network (SPN) Chair, and Meredith Cummins, NSW Sydney RG Chair who have been working with us to review the SPN and RG Guidelines.

I look forward to ongoing engagement with the RGs, and another productive meeting with the RG Chairs when we meet prior to the Annual Congress in Adelaide.

Ellen Barlow
CNSA Regional Groups Coordinator
NSW Representative, National Executive Committee

NSW HUNTER REGIONAL GROUP (NSW HUNTER RG)



Committee Members included: Gillian Blanchard - Chair; Yolande Cox - Vice Chair; Rebecca Chenery - Treasurer; Michael Weston - Secretary; Justine Gaynor - Social Media; Lyndal Moore - Committee Member; Rachel Pitt - Committee Member; Jacquie Ruhl - Committee Member; Kelly Randall - Committee Member; Sandy MacKellar - Committee Member; Lyndal Moore - Chair (Term concluded Dec 2016).

The NSW Hunter RG committee meet on the first Tuesday of each month. The committee has undergone some recent changes with Lyndal Moore stepping down as Chair of the NSW Hunter RG and Gillian Blanchard taking over as Chair in January 2016. Optimising committee function has been challenging at times, especially given the competing clinical commitments that each committee member faces. To address this and promote efficiency and commitment, Terms of Reference were developed and ratified by the committee in this reporting period. The NSW Hunter and NSW Sydney RGs combined, recorded a 1% membership growth at the close of the reporting period, with membership at 323.

The NSW Hunter RG has welcomed an increasing number of attendees at educational events in the past year. To accommodate this, and based on feedback, the committee elected to switch the standing venue location for NSW Hunter RG events to Noah's at the Beach, a location that accommodates and draws consistently high numbers of attendees. The committee utilises the CNSA website to market local events and benefits from the inbuilt event registration system managed by the CNSA Administration Officer. Members are supported to attend these events without co-payment, and non-members are encouraged to join CNSA through imposing a registration fee for attendance at these events. We are proud to have maintained the focus of having cancer nurses present at most of our educational events.

The NSW Hunter RG group has experienced challenges with increasing regulatory constraints imposed on pharmaceutical sponsorship. However, in saying that, four pharmaceutical sponsors, MSD, Menarini, Pfizer and Mundipharma, have provided financial support that has enabled the NSW Hunter RG to offer three educational events in this reporting period as outlined below:

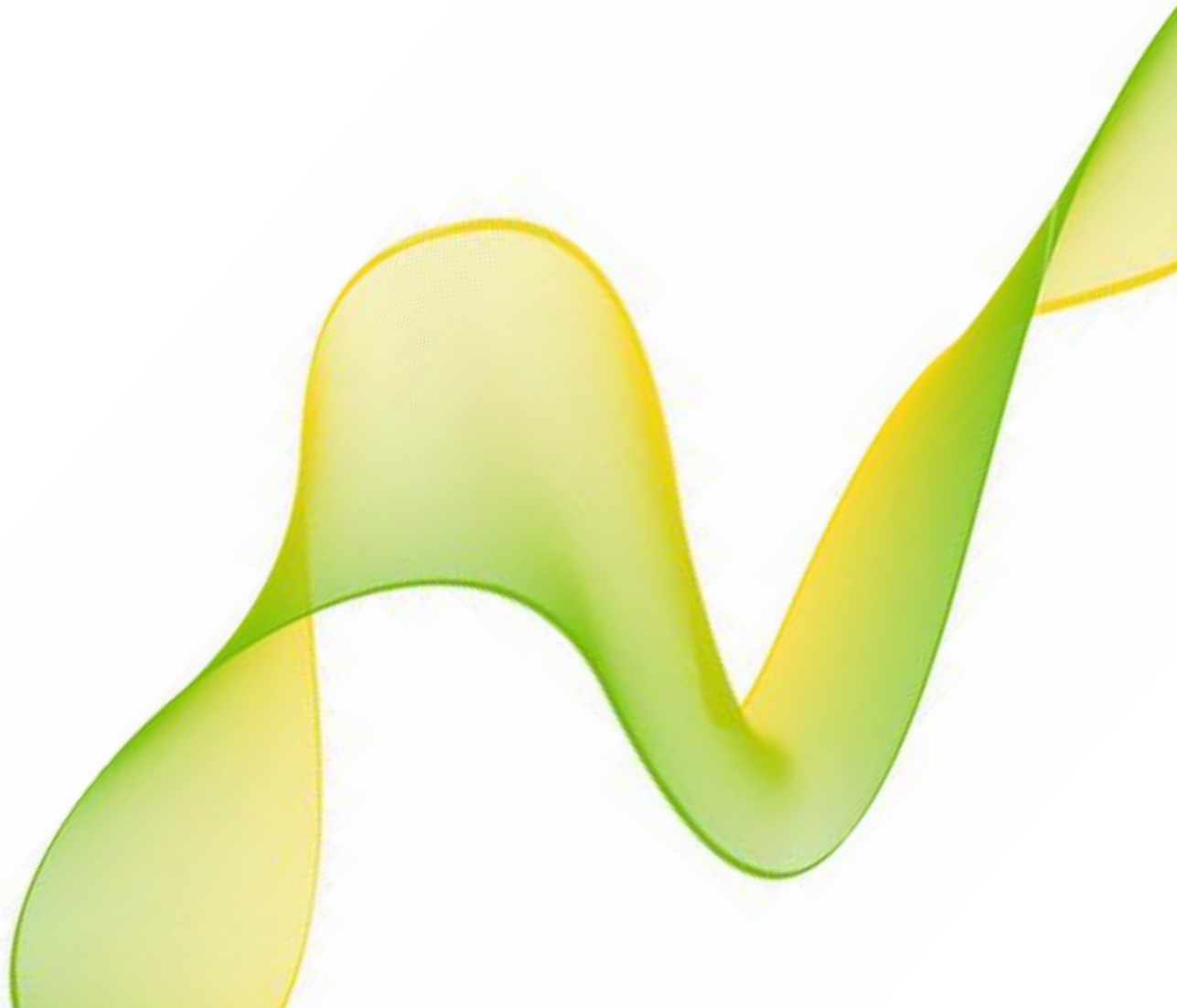
- **Care of the Carer – Preventing burnout in Nurses: Management strategies to deal with the day to day stressors experienced by cancer nurses**
Attendance: 80
Presenters: Sofia Wooldridge (Clinical Psychologist), CNSA Congress update: Lyn Holz and Jacquie Ruhl (RN DTC), MASCC Feedback: Gillian Blanchard (NP)
- **Complex pain management - Opioids, adjuncts and interventions**
Attendance: 61 (with a waiting list)
Presenters: Dr. Lindy Turner and Dr. Erica Cameron-Taylor (Palliative Care Staff Specialists Calvary Mater Newcastle)
- **Cancers Impact on the Liver & Nursing Management of GI Toxicities**
Attendance: 56
Presenters: Dr. Tin Quah (Medical Oncology Advanced Trainee Calvary Mater Newcastle), Ms Catherine Johnson (CNC Calvary Mater Newcastle)

The NSW Hunter RG is committed to promoting the membership benefits of CNSA. This is achieved through dissemination of information about quality educational events, institutional visits by members to highlight member benefits and awarding a prize of a free membership at each educational event. In addition, the NSW Hunter RG offered travel grants to their local members. Two travel grants were offered to the value of \$500 for the 2016 CNSA Annual Congress in Cairns and 2 offered for the 2017 Annual Congress in Adelaide. A further grant of \$500 for a participant from a low and middle income country was offered to attend ISNCC.

Communication of local CNSA activities is promoted through Facebook, Twitter and through posting of events on the Hunter New England Local Health District Intranet message centre. Submissions to the Hunter Cancer Care Network Newsletter and contributions to the CNSA national newsletter have enabled our RG to promote CNSA events and staff achievements to cancer nurses within the wider Hunter New England region.

As at the end of the reporting period, the cumulative net assets held in relation to the NSW Hunter RG was \$4,267.22.

Gillian Blanchard
Chair, CNSA NSW Hunter Regional Group



NSW SYDNEY REGIONAL GROUP (NSW SYDNEY RG)



Committee Members included: Meredith Cummins - Chair; Meredith Oatley - Deputy Chair; Jennifer Cater - Treasurer; Angela Whittingham - Secretary; Theresa Nielsen - Education Officer; Beth Ivimey - Education Officer; Christian Steiner - Sponsorship Liaison Officer; Helen Westman - Committee Member; Suzannah Walden - Committee Member; Natalie Byrne - Treasurer (Term concluded Dec 2016).

The NSW Sydney Regional Group (RG) committee meet every second month in addition to meeting at the three educational events held throughout the year. The committee also meet annually to plan the educational events and set a budget for the year ahead. The committee has undergone some recent changes in the 2016-17 reporting period. Angela Whittingham and Suzannah Walden joined the NSW Sydney RG committee and Natalie Byrne resigned from the committee. On behalf of the NSW Sydney RG, I would like to express my immense gratitude to Natalie for the many years she has been on the committee in the role as Treasurer. The Sydney RG would like to acknowledge the National Executive Committee for their ongoing support, particularly Raymond Chan, CNSA President and Amy Ribbons, CNSA Administration Officer, for administrative support and assistance. I especially wish to acknowledge and thank my colleagues on the NSW Sydney RG Committee for their collegiality, ongoing commitment and hard work. I would also like to acknowledge and thank the members of NSW Sydney RG for their continued participation, contribution and support.

We continue to look for opportunities to increase our membership which is disbursed across metropolitan, rural and remote areas, representing members from private and public healthcare settings, academic institutions, and not-for-profit organisations. The NSW Sydney and NSW Hunter RGs combined, recorded a 1% membership growth at the close of the reporting period, with membership at 323.

Our goal for the last 12 months was to continue to consolidate our finances and enhance the educational opportunities, with diverse topics, to truly benefit members across NSW. This included providing financial assistance to attend meetings and travel expense support for members outside the 50km radius of Sydney. We have been able to provide regional members with support to attend education sessions in 2016 and will continue to promote this. We are committed to promoting our members' experience and skills through encouraging them to participate and present at our meetings.

The committee utilises the CNSA website to market local events and benefits from the inbuilt event registration system managed by the CNSA Administration Officer. Members are supported to attend these events with a reduced co-payment of \$25 and non-members are encouraged to join CNSA through imposing a \$50 registration fee for attendance at these events. Flyers advertising educational meetings are emailed to members and other interested parties. Evaluation of our events are done via email, coordinated by the Education Officers within the NSW Sydney RG Committee.

In the next reporting period our goals are to offer three educational events, a half day symposium, ensure viability through securing industry sponsorship and offer a NSW Sydney RG Grant to a rural nurse for educational enhancement. We also aim to video record some of the educational sessions in the coming year so that members who are unable to attend or live in outlying areas away from Sydney can have access to quality, ongoing education.

The NSW Sydney RG has continued to offer excellent educational presentations to cancer nurses in the region. The educational topics are selected, for the most part, from member feedback and requests. Sponsorship to support the educational offering of the NSW Sydney RG have been provided by pharmaceutical and industry sponsors; MSD, Ipsen, Mundipharma, Hospira, Novartis, B Braun, Pfizer and Roche. This sponsorship has enabled the NSW Sydney RG to offer three educational events in this reporting period as outlined below:

- **Genomics and Immunotherapy**
Attendance: 40
Presenters: Mona Saleh, Catriona McNeil, Theresa Nielsen, Chris Weir
- **Head and Neck Cancers – a Multidisciplinary Approach**
Attendees: 60

Presenters: Dr Steven Kao, Prof Chris Milgross, Sarah Davies
Pharma Sponsorship: Ipsen, Novartis

- **Gastric Cancer**

Attendees: 44

Presenter: A/Prof Winston Liauw

Pharma Sponsorship: Novartis, MSD

The NSW Sydney RG supported two nurses working in the regional area to attend the half day symposium in 2016 (approx. \$1,000 in total support). Additionally, for those members who reside outside of the Sydney metropolitan area, we have continued to offer some financial assistance to attend our educational evenings through provision of a 'Bowser Buster' program which provides \$40 to members who meet the eligibility criteria and travel from outside the 50 km radius of Sydney.

As at the end of the reporting period, the cumulative net assets held in relation to the NSW Sydney RG was \$4,210.79.

Meredith Cummins
Chair, CNSA NSW Sydney Regional Group

QUEENSLAND REGIONAL GROUP (QLD RG)



Committee Member included: Pammie Ellem - Chair; Elise Button - Treasurer; Doreen Tapsall - Secretary; Peter Hancock - Committee Member; Tammy Lehn-Van Diem - Committee Member; Renee McMullen - Committee Member; Ron Middleton - Committee Member; Penny Reed - Committee Member; Penny Stevens - Committee Member; Carla Thamm - Committee Member; Leanne Stone - Chair (Term concluded Dec 2016); Leisa Brown-West - Deputy Chair (Term concluded Dec 2016); Jane Campbell - Committee Member (Term concluded Dec 2016).

The Queensland Regional Group (QLD RG) have been very active over the past 12 months. As Chair, I would like to extend my sincere thanks to Leanne Stone, Jane Campbell and Leisa Brown-West for all their work in creating the foundations for the QLD RG of CNSA. I would also like to extend my thanks to the present committee including Doreen Tapsall, Elise Button, Carla Thamm, Peter Hancock, Tammy Lehn-Van Diem, Renee McMullen, Ron Middleton, Penny Reed, and Penny Stevens. Furthermore, Ray Chan and Kylie Ash have been a wonderful source of support. It is exciting to see that our committee is representative of both metropolitan and regional/rural Queensland members. Due to our diverse geographical locations, we have elected to meet as a Committee via videoconference monthly, enabling attendance by everyone. Membership within the QLD RG has grown by nearly 1% at the close of the reporting period, with membership at 239. Current CNSA members have assisted in creating further interest in their own geographical locations and strong state representation of CNSA has further promoted interest and membership. Members have attended all events without charge and non-members have paid a nominal fee of between \$20 and \$50 to attend these events.

The QLD RG group offered four educational events in the 2016-17 reporting period, supported through sponsorship from and partnership with; MSD, Takeda Oncology, Queensland University of Technology and the Haematology Society of Australia and New Zealand Nurses Group. The four educational events in this reporting period are outlined below:

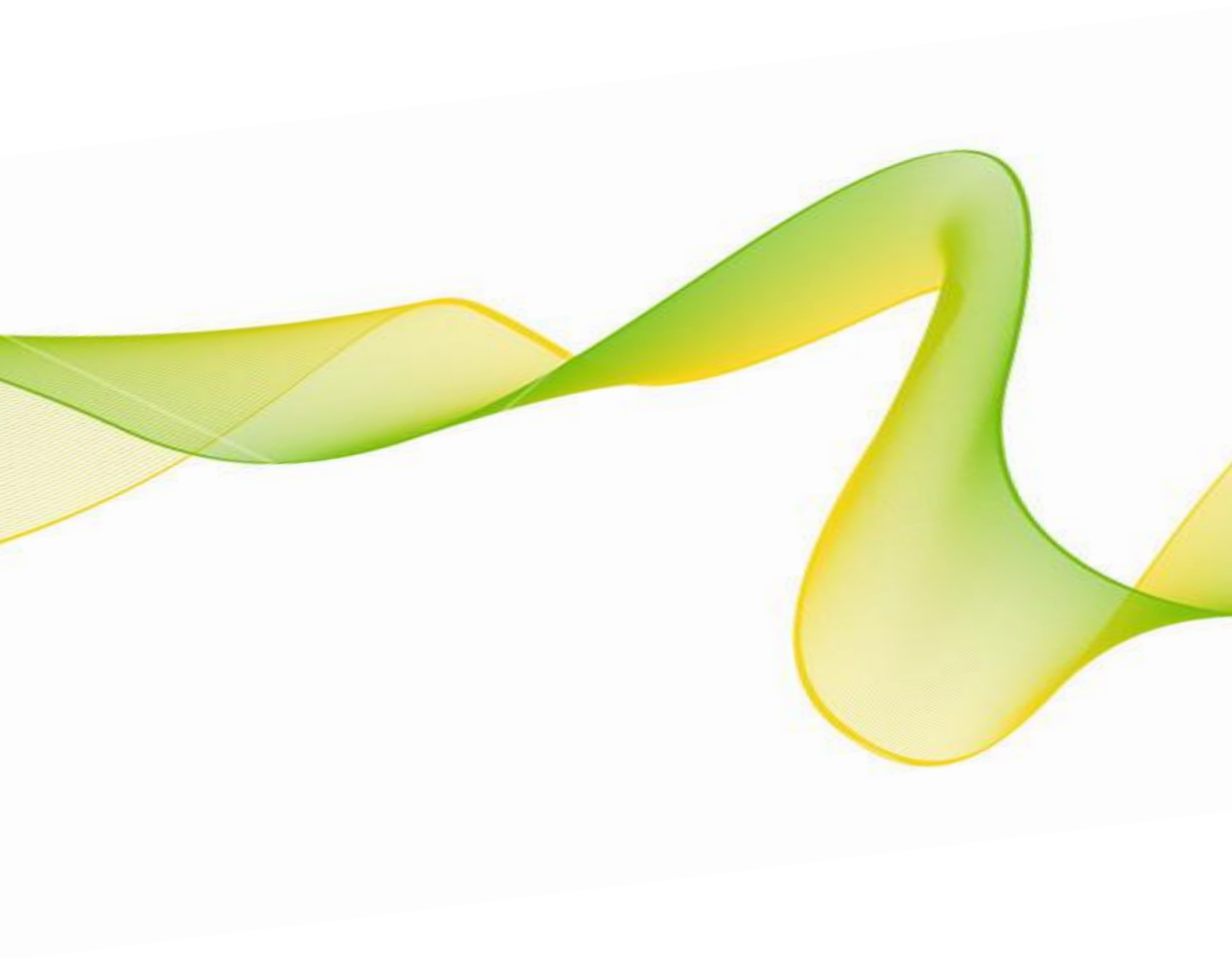
- **A Reflection on Four Decades in Cancer Nursing – How can this inform the future of cancer nursing?**
Attendance: 41
Presenter: Professor Sanchia Aranda
- **Key Educational Areas in Melanoma Management and Application**
Attendance: 25
Presenters: Krista Rubin, NP
- **Cancer Nursing Research Concept Development workshop
In conjunction with QUT**
Attendance: 11
Presenter: Professor Christine Miaskowski
- **Advances in the treatment of Lymphoma
in conjunction with HSA NZ Queensland nurses group**
Attendance: 54
Presenters: Dr Maher Gandhi, Dr Colm Keane, Ms. Stephanie-Buhagiar

The QLD RG are currently planning a number of educational activities for the forthcoming year, aimed at all spectrums of Cancer Nursing Care from the novice to the experienced. In keeping with our whole state focus the education events will be video conferenced to regional and rural sites. Furthermore, we will also deliver some of the sessions from the far sites to enable a further understanding of activities such as Tele-Chemo in the regional/rural sites. Additionally, the group are planning development of mentorships between metropolitan and rural cancer nursing services thereby enabling staff in regional/rural areas to expand their skills and confidence. This is timely with the wide roll out of the Tele-Chemo model where by low risk chemotherapy is delivered in regional and rural areas under the close supervision of experienced staff in tertiary centres via Telehealth.

The future of the QLD RG promises to be strong. Although only newly formed there is plenty of energy focused on educational programs, membership and promotion of CNSA. Once again, I would like to take this opportunity to thank all who have supported the QLD RG this year.

As at the end of the reporting period, the cumulative net assets held in relation to the QLD RG was \$934.16

Pammie Ellem
Chair, CNSA Queensland Regional Group



SOUTH AUSTRALIAN REGIONAL GROUP (SA RG)



Committee Members included: Deb Hoberg - Chair; Judy Iasiello - Deputy Chair; Melisa Laan - Treasurer; Nicole Loft - NEC SA Representative; Koli Ali - Committee Member; Gillian Miller - Committee Member; Alicia Hopper - Deputy Chair (Term concluded Aug 2016); Maki Toyoda - Committee Member (Term concluded Dec 2016); Wendy Vaughan - Committee Member (Term concluded Dec 2016); Heather Pearce - Committee Member (Term concluded Dec 2016).

2016 saw some changes to the original committee with the resignation of the Deputy Chair in August 2016. Three other committee members nominated to complete their final terms in December 2016 after serving several years. A special mention and thanks to Heather Pearce who served on the South Australian Regional Group (SA RG) both pre and post its renewal, in a number of roles, and was one of three committed members that kept the Regional Group from dissolving during a period of inactivity in the early 2010's.

A call for nominations last year secured us two new committee members but unfortunately family commitments forced one member to resign shortly after taking office. The South Australian RG committee meet every month and meet annually in December to establish goals and plan the coming year.

The strategic goals of the SA RG have focused on promoting sustainability, both through actively exploring committee succession planning and financial sustainability through sponsorship remodeling, based on seeking annual group sponsorship rather than event sponsorship. The changes to the committee along with a new employment opportunity for the Chair has seen our goals progress slower than we had hoped. Succession planning has been difficult with members stating that they love attending the meetings but find committing to additional voluntary hours outside of their normal work commitments difficult. While the annual sponsorship packages have created more financial stability for the group, local funds have been more difficult to secure in the 2016-17 year with industry allocating more of their local dollars towards attendance at the CNSA Annual Congress planned in Adelaide in June 2017.

Promoting membership growth through engagement with our rural colleagues, targeting workplaces that are under-represented and actively promoting the membership benefits of CNSA at educational events has seen membership grow 1% at the close of the reporting period, with membership at 103.

Members are supported through the provision of quality local educational events, resource sharing via group e-newsletters and financial support to attend conferences and educational events relevant to cancer nursing. Rural members whilst supported to attend educational events in Adelaide have reported that getting the time off work to attend events is difficult, despite grants being allocated specifically to assist rural members with some of the associated costs of attending.

In July 2016, the SA RG allocated financial support for six members to attend MASCC in Adelaide, this was in addition to offering a Northern Territory member a grant covering the accommodation, travel, ticket to the President's ball and registration to attend MASCC in Adelaide. In 2017, funding for three grants has been allocated to support attendance at the CNSA Annual Congress in Adelaide, one of which is specifically allocated to a rural member.

Sponsorship to support the educational offering of the SA RG have been provided by pharmaceutical and industry sponsors: MSD, Novartis, Amgen, Roche, BMS, Hospira, Mayne pharma, Mundipharma and Specialised Therapeutics. This sponsorship has enabled the SA RG to offer four educational events in this reporting period as outlined below:

- **Rash Decisions: Medical and Nursing Management of Skin Toxicities**
Attendance: 55
Presenters: Dr Pablo-Fernandez Penas, Dermatologist and Julie Campbell, Nurse Practitioner Candidate
- **MASCC: Highlights from Adelaide 2016**
Attendance: 78
Presenters: Multiple (five of the six grant recipients presented as a condition of their grant on an aspect of the conference they had found interesting, thought-provoking, contentious or most enjoyable)

- **Immuno-oncology – the new frontier**

Attendance: 72

Presenters: Dr Donna Milne & Dr Amy Wong

- **Adelaide Radiation Centre Presentation: An evening with ARC**

Attendance: 32

Presenters: Dr Phuong Tran and a tour of Adelaide Radiotherapy Centre's Kurralta Park facility. Attendees were divided into four groups and moved through the consultation process, CT simulation, planning & into a treatment bunker in the same way patients would to gain a better understanding of patient flow.

Events are communicated to both members and non-members electronically via a service agreement with a public relations agent at scheduled time frames prior to events. This service provides an online registration program, collation of details and creation of all event-marketing materials for each event. From January of 2017, we have utilised the online registration system offered on the CNSA website and e-blasts via the CNSA server have been used in conjunction with the agent already in use to maximise distribution. The mailing list is maintained by the Chair and is comprised of both member and non-members who have attended previous events.

Our own e-newsletter unfortunately suffered after the resignation of our Deputy Chair who had previously held the task of Communications Officer within the committee. This year we hope to be able to offer a quarterly local newsletter to keep our members updated about relevant educational events, member info and useful resources within South Australia and still contribute to the national member newsletter twice yearly.

All funds are now held centrally and bookkeeping is done by the National bookkeeper with the RG treasurer holding a debit card. Centralised bookkeeping has substantial benefits for the local committee & ensures that our financial reporting requirements are met. There have however been occasions where the debit card has been declined. We are working with the Bookkeeper on processes and systems to avoid these difficulties in the future and to have standardised reporting made available so as that the Chair and Treasurer are informed about exact bank balances prior to each committee meeting. Profit & Loss statements and all other monthly/yearly finance reports are done by the National Bookkeeper & a copy is sent to the RGs email address and added to Dropbox.

As at the end of the reporting period, the cumulative net assets held in relation to the SA RG was \$15,932.43.

Deborah Hoberg

Chair, CNSA SA Regional Group

VICTORIAN REGIONAL GROUP (VIC RG)



Committee Members included: Sue Bartlett - Chair; Rachel Hodges - Deputy Chair; Tracey Dryden - Treasurer; Carmel O'Kane - NEC VIC Representative; Diane Dave - Sponsorship/Corporate Relations; Margaret Hjorth - Committee Member; Katherine Lane - Committee Member; Adam Rutyna - Chair (Term concluded Nov 2016); Angela Mellerick - Membership (Term concluded Dec 2016); Lisa Sheeran - Treasurer (Term concluded Dec 2016).

The past year for CNSA Victorian Regional Group (VIC RG) has been filled with many changes. Adam Rutyna resigned from the role as Chair in November 2016 to spend time with the new addition to his family. Lisa Sheeran and Angela Mellerick resigned from their positions as Treasurer and Membership Relations and I stepped up to the role of VIC RG Chair, delivering an exciting opportunity and a challenge. We welcomed three new members to the VIC RG committee, Rachel Hodges, Diane Davey and Margie Hjorth.

On behalf of the VIC RG committee, I would like to acknowledge and thank Adam, Lisa and Angela for their dedication and contribution to the VIC RG committee. The committee meets every two months via teleconference and every other month, face to face at our educational dinner events held five times a year. At the close of the reporting period, membership was down nearly 4%, at 325 members.

In the past year, we had terrific attendance and enthusiasm at the educational evenings that we hosted. In promoting collaborative partnerships, we elected to host two combined meetings, one with the Haematology Society of Australia & New Zealand Nurses (HSANZ) group and the other with the Victorian Palliative Care group, both of which were very successful. As a committee, we have decided not to run our workshop in October, having made a decision to run these every 2nd year. We have a wonderful opportunity to hold a research workshop for our members in October 2017 and look forward to sending more information out to our members once the details are confirmed.

As in previous years we wish to be a meaningful resource to oncology nurses in Victoria both in urban and rural areas, to provide relevant and interesting education and to attract new members, particularly nurses new to Oncology. One of the challenges facing our RG is the difficulty in providing accessible education to our rural cancer nurses, who find it logistically difficult to travel to Melbourne for educational events. We plan to start alternating the location of our educational dinner events in Melbourne and for early 2018, we will look at the possibility of videoconferencing our events to rural Victoria and our outer metropolitan members unable to attend.

In 2016, we updated our sponsorship prospectus and outlined our educational plans for 2016. We offered a number of sponsorship levels with varying inclusions and dollar values. This was distributed to industry partners, and translated into generous support. Sponsorship to support the educational offerings of the VIC RG were provided by pharmaceutical and industry sponsors: Ipsen, Roche, Bristol-Myers Squibb, Astellas, Menarini, Amgen, Sanofi and Grifols. This sponsorship enabled the Victorian RG to offer five educational events in this reporting period as outlined below:

- **Immunotherapies: Understanding the Management Pathway and Optimising Patient Outcomes**
Attendance: 70
Speakers: Dr Ben Brady and Dr Donna Milne
- **A funny Thing Happened on the Way to Chemo & AGM**
Attendance: 28
Speaker: Luke Ryan, Sarcoma Survivor
- **Emotional Hazards (Joint meeting with HSANZ)**
Attendance: 29 (CNSA)
Speaker: Debra Boyle
- **Palliative Radiotherapy (Joint Meeting with Victorian Palliative Care Nurses Group)**
Attendance: 92
Speakers: Dr Andrew See and Linda McGinn

- **Integrating Supportive Care into Clinical Practice**

Attendance: 50

Speakers: Katherine Lane and Tracey Moroney

The committee utilises the CNSA website to market local events and benefits from the inbuilt event registration system managed by the CNSA Administration Officer. Members are supported to attend these events with a reduced co-payment of \$25 and non-members are encouraged to join CNSA through imposing a \$50 registration fee for attendance at these events. Flyers advertising educational meetings are emailed to members and other interested parties. The Victorian RG contributes to the CNSA national newsletter twice yearly.

As at the end of the reporting period, the cumulative net assets held in relation to the VIC RG was \$18,468.68.

Sue Bartlett

Chair, CNSA VIC Regional Group

WESTERN AUSTRALIAN REGIONAL GROUP (WA RG)



Committee Members included: Sharon Ray - Chair; Sara Jaenke - Treasurer; Lucy Patton - NEC Representative; Chris Henneker - Regional Representative; Sandy McKiernan - Committee Member; Catherine Barratt - Committee Member; Tanya O'Connor - Committee Member; Therese Thompson - Committee Member; Nicole Watson - Committee Member; Marie Condon - Committee Member; Cheryl Penter - Events Coordinator (Term concluded Dec 2016).

After 10 years of service to the West Australian Regional Group (WA RG), Cheryl Penter resigned from the committee. Cheryl's contribution and dedication to the committee was outstanding and she will be sadly missed. Sara Jaenke will be adding to her family in the coming months and Marie Condon will step in as interim Treasurer whilst Sara is on maternity leave and the committee welcomed Nicole Watson and Therese Thompson.

The committee meet monthly and hold an annual planning day in August each year to plan the educational events for the coming year and set a budget and outline goals against the strategic plan. At the close of the reporting period, membership was down by just over 1%, at 166 members.

Our main goal in this reporting period was to support our members with provision of high quality educational events. The committee recognised that in doing so, we needed to provide professional development for cancer nurses across the development spectrum, from beginner to expert. Historically the WA RG have offered three educational events each year. To address the development needs of more senior nurses we added a Leadership Development day earlier this year.

The WA RG supports members through provision of education, travel assistance for rural members travelling to Perth for educational events and travel grants for West Australian members to attend the CNSA Annual Congress. In 2016, the recipient of the Annual Congress travel grant was Sharron Carson. In recognising the non-clinical development needs of cancer nurses, the WA RG offered a Leadership Skills Development Scholarship in 2016 to the maximum value of \$5,000. The scholarship was offered to a WA based member to enable the development of leadership skills and attributes. Unfortunately, there were no applicants in 2016, however this will be offered again in 2017.

Sponsorship to support the educational offerings of the WA RG have been provided by pharmaceutical and industry sponsors: MSD, BMS, Roche, Teleflex, Cook Medical, Novartis, Amgen and Smiths Medical. This sponsorship has enabled the West Australian RG to offer four educational events in this reporting period as outlined below:

- **Breaking Bad News**
Attendance: 63
Presenters: Peter Martin and Meg Chiswell
- **Leadership Professional Development**
Attendance: 12
Presenters: Dr Gilly Smith and Associate Professor Vicki Cope
- **Metastatic Cancer**
Attendance 59
Presenters: Dr Anne Long, Dr Mo Ballal, Amanda Bolleter and Amelda Doyle
- **Professional and Legal Issues**
Attendance: 66
Presenters: Gary Cooper, Kim Greave and Susan Slatyer

We currently use an external provider for advertising events to members and non-members. This service provider also assists with IT services on the day of events and coordinates post-event evaluations. We contribute to the national newsletter twice yearly.

As at the end of the reporting period, the cumulative net assets held in relation to the WA RG was \$91,218.92.

Sharon Ray
Chair, CNSA WA Regional Group

SPECIALIST PRACTICE NETWORK COORDINATOR



I would like to take the opportunity, to thank all the Specialist Practice Network (SPN) Chairs, Kerry Patford (Breast SPN), Margaret Hjorth (RON SPN), Gillian Blanchard (CNP SPN), Nicole Gavin (VAD & IT SPN) and Anne Mellon (GYN SPN) for their ongoing work and commitment to the organisation. Special mention and thanks to Keith Cox, OAM, who stepped down as Chair of the CNP SPN at the end of 2016. I would further like to acknowledge all the other members that have worked with, and alongside the SPN Chairs in various roles and duties to support each group to undertake the work as outlined in the annual reports.

During 2016 – 2017 the SPNs have continued to draw inspiration from CNSAs Mission statement and strategic aims, to provide their members with a range of education events and access to updated clinical resources.

SUMMARY OF EVENTS AND ACTIVITIES	
Breast SPN	<ul style="list-style-type: none"> • May 2016 – Pre Congress symposium CNSA Annual Congress • Principles for Nursing Practice in the Management of Post-Surgical Seroma for Breast Cancer Document Review
CNP SPN	<ul style="list-style-type: none"> • June 2016 - CNP SPN Education Event aligned with MASCC – Supportive Care Theme - Adelaide • November 2016 – Masterclass, endocrinology, cardiology and pharmacology – Gold Coast • March 2016 – 2 day Clinical Skills Based CNP SPN Event - Sydney
GYN SPN	<ul style="list-style-type: none"> • April 2016 - ANZGOG Nurses Meeting Workshop • May 2016 - Pre Congress Workshop CNSA • Mar 2017 – ANZGOG nurses meeting
VAD&IT SPN	<ul style="list-style-type: none"> • May 2016 - Pre Congress Workshop CNSA Annual Congress • November 2016 - Victorian Vascular Access Education & Discussion Forum • March 2017 - Victorian Vascular Access Education & Discussion Forum
RON SPN	<ul style="list-style-type: none"> • May 2016 - Pre Congress symposium CNSA Annual Congress

With the majority of groups experiencing membership growth, the future direction of the SPNs will be to review and establish strategies to meet specific member needs, with an emphasis on collaboration and networking to streamline resources and support for SPNs. This work will be commenced at the face-to-face meeting with SPN & RG Chairs at Congress in Adelaide; with the aim to improve work flow processes, to enable SPN Chairs to meet their strategic goals and improve member benefits.

Integral to this work has been the review of the RG & SPN guidelines. All SPN & RG Chairs were invited to participate in the guideline review led by myself and Ellen Barlow (NEC RG Coordinator). Anne Mellon (Chair, GYN SPN) and Meredith Cummins (Chair, NSW Sydney RG) contributed actively in reviewing these guidelines. The purpose of the review was to develop a document that provides consistent guidance to all Chairs and members of Standing Committees relating to the day to day running of the RGs & SPNs. The plan moving forward will be to table this document at the face-to-face meeting in Adelaide.

I look forward to strengthening relationships and networks with the Chairs when we meet in Adelaide and progressing the future direction of the SPNs.

Laura Pyszkowski
 NEC Appointed SPN Coordinator
 TAS Representative and Secretary NEC

BREAST ONCOLOGY SPECIALIST PRACTICE NETWORK (BREAST SPN)



Committee Members included: Kerry Patford - Chair; Marion Strong - Committee Member; Sarah Pratt - Committee Member Sholeh Boyle - Committee Member; Judy Iasiello - Committee Member.

Thank you to everyone who has contributed to the Breast Oncology Specialist Practice Network (Breast SPN) in anyway in the last 12 months. We, as cancer nurses have many competing priorities, both within our professional and personal lives. Your efforts towards the goals of this group are greatly appreciated. Membership to the Breast SPN was down 25% at the end of the reporting period, with 214 members.

The strategic goals for 2016-17 reporting period focused primarily on the revision of the Principles for Nursing Practice in the Management of Post-Surgical Seroma for Breast Cancer. Originally published in 2008, this document has gone through a rigorous process of review and re-writing by a diligent working party formed in early 2016. It is very pleasing to be a member of a group of such knowledgeable cancer nurses. This document is now in the final stages of review and will be available through CNSA in the Member Hub of the website.

The goals for the Breast SPN will be tabled at the SPN meeting to be held at Congress in Adelaide, with consideration towards developing further teaching aids for seroma management, participation in Cancer Australia projects and the possibility of forming a working party to review the Breast Care Nurse Competency Standards. Associations with stakeholders such as Cancer Australia, Breast Cancer Network Australia, and the McGrath Foundation continue with active participation in strategic planning and advisory groups as required.

Sponsorship to support the educational offering of the Breast SPN within the reporting period was provided by the McGrath Foundation. This sponsorship enabled the Breast SPN to offer a breast cancer specific pre-congress symposium in Cairns as part of the 19th Annual Congress. The event was held as a full day event and attracted more than 100 nurses. It was determined that there would not be a specific breast cancer symposium component in the 20th Annual Congress in Adelaide in 2017, due to the abundance of breast cancer specific conferences held in 2016, namely Leura and COSA.

The Breast SPN had no monies earned or retained in this reporting period.

Kerry Patford
Chair, CNSA Breast Oncology SPN



CANCER NURSE PRACTITIONER SPECIALIST PRACTICE NETWORK (CNP SPN)



Committee Members included: Gillian Blanchard - Chair; Justin Hargreaves - Deputy Chair; Vicki McLeod - Treasurer; Rachel Pitt - Secretary; John McKenna - Committee Member; Carmel O’Kane - Committee Member; Keith Cox - Chair (Term concluded Dec 2016); Samantha Gibson - Secretary (Term concluded Mar 2017); Nicole Loft - Committee Member (Term concluded Dec 2016); Sue Bartlett - Committee Member (Term concluded Aug 2016).

The last year has seen many changes within the Cancer Nurse Practitioner Specialist Practice Network (CNP SPN) committee. Early in the year Sue Bartlett left the committee and at the end of 2016 Nicole Loft and our previous Chairperson Keith Cox OAM resigned. Early this year Samantha Gibson resigned from the Secretary position to take on the role as CEO of CNSA. This position remains vacant and is expected to be filled shortly. With committee representatives from across the country, the CNP SPN committee meet monthly via teleconference. In addition, the committee meet annually

face to face to plan the educational events for the coming year and to set the strategic goals of the CNP SPN. Each committee member is allocated to a specific portfolio to promote sustainability of the committee and capitalise on the expertise that each committee member brings. Secretarial support is outsourced to take and produce meeting minutes of the CNP SPN.

Membership to the CNP SPN continues to grow. We have members across the country from all states and territories except the Northern Territory. At the end of the reporting period, membership was up 15% with 52 members from all disciplines of cancer care including Medical Oncology, Radiation Oncology, Surgical Oncology, Haematology and Palliative Care. CNP SPN members are supported through free educational offerings and access to financial support of up to \$500 per event towards the cost of attendance at CNP SPN hosted educational events. The CNP SPN aims to have at least two educational events each year. To date the events have been well received with many people coming to both events during the year despite often having to travel interstate.

Sponsorship to support the educational offerings of the CNP SPN were provided by pharmaceutical sponsors: MSD, Mundipharma, Teva, Amgen, Astellas, BMS, Roche, Hospira. This sponsorship has enabled the CNP SPN to offer four educational events in this reporting period as outlined below:

Pre-conference symposium Multinational Association of Supportive Care in Cancer (MASCC) ASM – Adelaide

Attendance: 53

Presenters: Professor Dorothy Keefe, Dr. Karen Mustian, Tracey Doherty and Professor Lawrence Einhorn

Endocrinology and cardiology in cancer – Gold Coast

Attendance: 35

Presenters: Dr Christine Carrington, Chris Helms, A/Prof Peter Davoren, A/Prof Tony Russell

2-day Masterclass at the Chris O’Brien Lifehouse - Sydney

Attendance: 35

Presenters: Dr. Justin Bowra, Dr. Sean Lal, James McVeigh, Dr. Nicole Roche, The Pam McLean Centre

We have utilised email lists from previous events to advertise CNP SPN events as well as the member database maintained by CNSA. We contribute to the CNSA newsletter twice yearly and include updates, news and publications from our members. To assist with event coordination given the national reach of our membership, we have engaged Chilli Fox Events to provide support service to coordinate events inclusive of venue negotiations, registrations and assistance in managing invited speaker requirements.

As at the end of the reporting period, the cumulative net assets held in relation to the CNP SPN was \$100,274.91.

Gillian Blanchard
Chair, CNSA Cancer Nurse Practitioner Specialist Practice Network

GYNAECOLOGICAL ONCOLOGY SPECIALIST PRACTICE NETWORK (GYN SPN)



Committee Members included: Anne Mellon - Chair; Danielle Carpenter - Committee Member; Jessica Jude - Committee Member; Belinda Zielony - Committee Member.

Anne Mellon continued as the Chair of the Gynaecological Oncology Specialist Practice Network (GYN SPN) during the 2016-17 reporting period. Following a call for nominations to join the committee in late 2016, Danielle Carpenter, Jessica Jude, Belinda Zielony and Natalie Williams joined the committee. The committee meet annually at Congress and at other times via teleconference as required. The GYN SPN continues to grow and currently has 180 members up 2%.

The GYN SPN held a successful preconference workshop at the CNSA 19th Annual Congress in Cairns, sponsored by Roche. Topics presented included Indigenous women's participation in cervical screening and its given consequences; treatment side effects and management; future changes to cervical screening; Ovarian Cancer Australia: support services and the flagship resource, The Resilience Kit; the Rekindle Project; survivorship care plans in gynaecology; low risk endometrial cancer follow up project; and the gynaecological oncology specialist nurse project.

An additional workshop was held at the ANZGOG 2017 meeting in Melbourne with the theme of endometrial cancer. Topics presented included an overview of endometrial cancer; current and future trials in endometrial cancer; obesity and diet; exercise; psychological issues; and new approaches to follow up of low grade endometrial cancer.

The GYN SPN is currently planning the nurses' workshop to be held at the International Gynaecologic Cancer Society Biennial Meeting in Kyoto, Japan from September 14-16, 2018. Members of the GYN SPN are kept abreast of relevant information through the CNSA newsletter and GYN SPN email updates.

The GYN SPN had no monies earned or retained in this reporting period.

Anne Mellon
Chair, Gynaecological Oncology Specialist Practice Network

RADIATION ONCOLOGY SPECIALIST PRACTICE NETWORK (RON SPN)



Committee Members included: Margaret Hjorth - Chair; Gabby Vigar - Deputy Chair; Pauline Rose - Events Coordinator; Mary Wade - Committee Member; Michelle Roach - Committee Member; Sharron Carson - Committee Member.

As Chair of the Radiation Oncology Specialist Practice Network (RON SPN) committee, I would like to acknowledge and thank the RON SPN committee and membership for continuing to raise the profile of radiation oncology nursing within the cancer community. Through collaborative partnerships within the CNSA community, the RON SPN have again been invited to provide speakers for the Victorian RG seminar in June, focusing on 'Nursing considerations in caring for patients undergoing radiotherapy for breast cancer and gynaecological cancer'. The RON SPN aim to engage with other regional groups and have radiotherapy as a part of their education agenda. Membership to the RON SPN rose markedly during the reporting period, up 40% with 166 members.

To meet the professional development needs of the RON SPN membership, two educational events were offered in the reporting period.

The 2016 CNSA Annual Congress Radiation Oncology pre-congress symposium was a great success. It was well attended by oncology nurses and allied health professionals who provided very positive feedback. The agenda highlighted new and emerging technologies in radiation therapy with a focus on the impact of these technologies on our nursing role. This was also an opportunity to share our experience and knowledge on symptom management. I'd like to thank all the expert presenters and Linda Cibau and Jill Graham for co-facilitating a wonderful workshop. We successfully applied for a pre-Congress symposium for 2017 in Adelaide and I look forward to facilitating a day on the multidisciplinary approach to care in radiotherapy.

The VIC RG had a strong radiation therapy focus and invited the RON SPN to present at two of their education dinners in the reporting period 2016-17. Ninety delegates benefited from the bringing together of the RON SPN and Victorian Palliative Care group in November 2016 to present on 'Palliative Radiotherapy – medical decisions and nursing management of the person requiring radiotherapy for advanced disease'.

Communication with our membership can be challenging. Being a large national group makes it difficult to deliver face to face meetings beyond the opportunity at Annual Congress. We aim to keep our members up to date with current topics of interest and provide an opportunity to share experiences and practices. Gabby Vigar has taken over the production of the newsletter which we contribute to twice yearly and encourage member contributions.

The RON SPN had no monies earned or retained in this reporting period.

Margaret Hjorth
Chair, CNSA Radiation Oncology Specialist Practice Network

VASCULAR ACCESS DEVICE & INFUSION THERAPY SPECIALIST PRACTICE NETWORK (VAD&IT SPN)



Committee Members included: Nicole Gavin - Chair; Kerrie Curtis - Deputy Chair; Fiona Fuller - Treasurer.

The Vascular Access Device & Infusion Therapy Specialist Practice Network (VAD&IT SPN) formed their Committee in March 2016. Fiona Fuller was appointed as the Treasurer in late 2016. At the close of the reporting period, membership was up by 45% with 259 members.

The second meeting of the VAD&IT SPN meeting was held in Cairns in May 2016 at the Annual Congress. The VAD&IT SPN discussed the Cancer Wiki Guidelines as a group and how we should tackle the task of developing vascular access guidelines for cancer nurses. We decided as a group to focus on *vessel preservation* and *occlusion & thrombosis*.

Cancer Wiki Guidelines has a comprehensive and transparent way of searching, appraising and reporting the literature in relation to clinical questions. As the Guidelines are available on-line, updates can be made as new literature is published. This ensures the resource provides the most up-to-date evidence for cancer nurses. The VAD&IT SPN plan for Nicole Gavin to undertake some training with Cancer Wiki. It was expected that this would have been completed at the end of this reporting period, however due to competing commitments with PhD studies this has been delayed.

The primary focus of the VAD&IT SPN in the coming year is to update the CNSA Central Venous Access Device (CVAD) Guidelines, originally published in 2007. Cancer Council Australia has agreed to host our guidelines on their Cancer Wiki Guidelines. This format means that the VAD&IT SPN can be appraising the evidence for a few clinical questions at a time and the guideline can be updated as new evidence becomes available. The CNSA CVAD Guidelines will comprise three broad topics and the CVAD Guideline Leads will be made up of CNSA members as identified below.

TOPIC	ISSUE	GUIDELINE LEAD
Pre-insertion & insertion	Vessel preservation	Tricia Kleidon (QLD)
	Device selection & insertion	Fiona Gillanders (NSW)
	Patient education	<i>position vacant</i>
Maintenance & Failure (mechanical & infective)	Dressing & securement	Sarah Northfield (QLD)
	Skin prep & integrity	Sara Hurren (QLD)
	Occlusion & thrombosis	Fiona Fuller (QLD)
	Flushing & blood taking	Renee McMullen (QLD)
	Infection	Peter Haywood (VIC)
	ANTT & NC	Julie Flynn (QLD)
Competency & Documentation	Surveillance of complications	Emily Larsen (QLD)
	Nurse education & competency	Leisa Brown (QLD)
	Legal issues & documentation	<i>position vacant</i>

To support the professional development needs of the VAD&IT SPN, three educational events were offered within the 2016-17 reporting period. Sponsorship to support the educational offerings of the VAD&IT SPN were provided by industry sponsors: Hospira, 3M, Bard Medical Australia, Teleflex, BD and Medical Specialties Australia. This sponsorship enabled delivery of educational events as outlined below:

- May 2016 - Annual Congress Cairns**
 Delivered as a pre-Congress Workshop at the 19th Annual Congress in Cairns. The workshop, sponsored by Hospira, 'Whose IV line is it anyway?' was well supported and received by the 60 delegates in attendance. The workshop highlights were the inclusion of two international vascular access experts, Nancy Moureau (supported by Teleflex) and Jocelyn Hill (supported by Angiodynamics). Nancy Moureau and Julie Flynn focused on infective complications and Jocelyn Hill and Sarah Northfield concentrated on mechanical complications.

- **Victorian event 2016**

Victoria held its first vascular access education and discussion forum in mid-November. Forty five enthusiastic delegates from across the state of Victoria attended and teleconferenced in to listen to Prof. Sam Keogh (Queensland University of Technology, President of AVATAR and AVAS), Peter Haywood (Melbourne Health) and Kerrie Curtis (Austin Health). The topic was what evidence existed for vascular access. This led to a discussion about what we wanted in the way of future vascular access education.

- **Victorian event 2017**

The topic for the 2nd Victorian event to be held on March 30th is *Everything dressings! Evidence, gaps and the future. Education and discussion*. Dr. Amanda Ullman from Brisbane teleconferenced in to speak about 'Dressings. What we know and don't know: A paediatric perspective' and Kerrie Curtis discussed 'Dressings. Securement: Evidence and gaps'.

As at the end of the reporting period, the cumulative net assets held in relation to the VAD&IT SPN was \$2,214.49.

Nicole Gavin

Chair, CNSA Vascular Access Device & Infusion Therapy Specialist Practice Network

ANNUAL FINANCIAL REPORT

The Cancer Nurses Society of Australia Incorporated (ABN 98 781 699 178) National Executive Committee's Report

Your National Executive Committee members submit their report on The Cancer Nurses Society of Australia Incorporated ("the Society") for the year ended 31 March 2017

Committee Members

The names of the Executive Committee members in office during or since the end of the year are:

Kylie	Ash	
Ellen	Barlow	
Julie	Calvert	Ex-Officio as Executive Officer of CNSA
Jane	Campbell	
Raymond	Chan	
Nicole	Loft	
Carmel	O'Kane	
Lucy	Patton	
Laura	Pyszkowski	
Trevor	Saunders	Term concluded 31 December 2016
Sue	Schoonbeek	Term commenced 1 January 2017

Unless indicated otherwise, all Committee members held their position throughout the entire year and up to the date of this report.

Committee members are appointed on an honorary basis and as a result do not receive any remuneration either directly or indirectly from the Society.

Operating Result

The surplus of the Society for the year ended 31 March 2017 amounted to \$80,515 (2016: surplus \$129,860).

Principal Activities

The principal activity of the Society during the year was to act as a resource to cancer nurses around Australia through the provision of services which aim to advance cancer nursing education, practice and research.

Significant Changes in the State of Affairs

There were no significant changes in the state of affairs of the Society during the year ended 31 March 2017.

Signed in accordance with a resolution of the Executive Committee.



Raymond Chan
President



Kylie Ash
Treasurer

June 2017

The Cancer Nurses Society of Australia

Incorporated

ABN 98 781 699 178

Annual Financial Report
For the year ended 31 March 2017

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The Cancer Nurses Society of Australia Incorporated
Statement by National Executive Committee
For the year ended 31 March 2017


In the opinion of the National Executive Committee of the Cancer Nurses Society of Australia Incorporated:

1. The financial statements and the notes to the financial statements:
 - a) comply with Accounting Standards to the extent described in Note 1, the *Associations Incorporation Act 1991 (ACT)* and the *Australian Charities and Not-For-Profit Commission Act 2012*; and
 - b) the financial statements and notes are drawn up to give a true and fair view of the financial position as at 31 March 2017 and the performance, as represented by the results of its operations and the cash flows for the year then ended; and
2. At the date of this declaration, there are reasonable grounds to believe that The Cancer Nurses Society of Australia Incorporated will be able to pay its debts as and when they become due and payable.

This statement is made in accordance with a resolution of the National Executive Committee made pursuant to Section 60.15 of the *Australian Charities and Not-for-profits Commission Regulations 2013* and is signed for and on behalf of the Committee by:



Raymond Chan
President



Kylie Ash
Treasurer

Dated 15th of May 2017.

AUDITOR'S INDEPENDENCE DECLARATION

As auditor for Cancer Nurses Society of Australia Incorporated for the year ended 31 March 2017, I declare that, to the best of my knowledge and belief, there have been:

- (i) no contraventions of auditor independence requirements of the *Australian Charities and Not-for-profits Commission Act 2012* in relation to the audit; and
- (ii) no contraventions of any applicable code of professional conduct in relation to the audit.

LDASSURANCE
CHARTERED ACCOUNTANTS



Stephen O'Kane
Partner

MELBOURNE
22nd of May 2017

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF THE CANCER NURSES SOCIETY OF AUSTRALIA INCORPORATED

Report on the Audit of the Financial Report

Opinion

We have audited the financial report, being a special purpose financial report of Cancer Nurses Society of Australia Incorporated ('the Association'), which comprises the statement of financial position as at 31 March 2017, the statement of profit or loss and other comprehensive income, the statement of changes in equity and the statement of cash flows for the year ended, and notes to the financial statements, including a summary of significant accounting policies, and statement by national executive committee.

In our opinion, the accompanying financial report of Cancer Nurses Society of Australia Inc. has been prepared in accordance with the *Associations Incorporation Act 1991 (ACT)* and Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012*, including:

- i. giving a true and fair view of the Association's financial position as at 31 March 2017 and of its financial performance for the year then ended; and
- ii. complying with Division 60 of the *Australian Charities and Not-for-profits Commission Regulation 2013*.

Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described as in the *Auditor's Responsibilities for the Audit of the Financial Report* section of our report. We are independent of the Association in accordance with Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012* and the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants* (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

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

Emphasis of Matter - Basis of accounting

We draw attention to Note 1 to the financial report, which describes the basis of accounting. The financial report has been prepared to for the purpose of fulfilling the Association financial reporting requirements of the *Associations Incorporation Act 1991 (ACT)* and the *Australian Charities and Not-for-profits Commission Act 2012*. As a result, the financial report may not be suitable for another purpose. Our opinion is not modified in respect of this matter.

Responsibilities of the Committee for the Financial Report

The Committee is responsible for the preparation of the financial report that gives a true and fair view and have determined that the basis of preparation described in Note 1 to the financial report is appropriate to meet the requirements of the Australian Accounting Standards, the *Associations Incorporation Act 1991 (ACT)* and Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012*. The Committee's responsibility also includes such internal control as it determines is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

Responsibilities of the Committee for the Financial Report (Continued)

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

Auditor's Responsibilities for the Audit of the Financial Report

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

As part of an audit in accordance with Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Association's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Committee.
- Conclude on the appropriateness of the Committee's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Association's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Association to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation

We communicate with the Committee regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

LDAssurance
Chartered Accountants



Stephen O'Kane
Partner

Dated this 22nd day of May 2017
250 Collins Street, Melbourne.

The Cancer Nurses Society of Australia Incorporated
Statement of Profit & Loss and Other Comprehensive Income
For the year ended 31 March 2017

	Note	2017	2016
		\$	\$
Revenues	6	1,008,311	985,313
Grant Expenses		(43,488)	(25,852)
Administration staffing expenses		(131,847)	(163,242)
Other administration expenses		(75,812)	(65,377)
Executive Committee meeting expenses		(44,385)	(24,343)
Journal and Newsletter expenses		(17,461)	(17,473)
Annual Congress expenses		(536,855)	(521,444)
Other expenses		(77,948)	(37,722)
Total comprehensive income for the year		<u>80,515</u>	<u>129,860</u>

The Cancer Nurses Society of Australia Incorporated
Statement of Financial Position
As at 31 March 2017

Assets	Note	2017	2016
		\$	\$
Current Assets			
Cash & Cash equivalents	7	1,131,578	726,668
Trade and other receivables	8	165,255	48,053
Other current assets	9	<u>145,096</u>	<u>522,346</u>
Total Current Assets		<u>1,441,929</u>	<u>1,297,067</u>
Non-Current Assets			
Property, Plant & Equipment	10	<u>12,889</u>	<u>23,387</u>
Total Non-Current Assets		<u>12,889</u>	<u>23,387</u>
Total Assets		<u>1,454,818</u>	<u>1,320,454</u>
Liabilities			
Current Liabilities			
Trade & Other Payables	11	603,656	616,966
Provisions	12	<u>1,747</u>	<u>14,973</u>
Total Current Liabilities		<u>605,403</u>	<u>631,939</u>
Total Liabilities		<u>605,403</u>	<u>631,939</u>
Net Assets		<u>849,415</u>	<u>688,515</u>
Equity			
Retained Earnings		<u>849,415</u>	<u>688,515</u>
Total Equity		<u>849,415</u>	<u>688,515</u>

The accompanying notes form part of these financial statements

The Cancer Nurses Society of Australia Incorporated
Statement of Changes in Equity
For the Year Ended 31 March 2017

2017	Retained Earnings \$
Balance as at 1 April 2016	688,515
Result for the year	80,515
Funds transferred from Regional Groups and Specialist Practice Networks (i)	80,385
Balance as at 31 March 2017	849,415
2016	
Balance as at 1 April 2015	519,921
Result for the year	129,860
Funds transferred from Regional Groups and Specialist Practice Networks (i)	38,734
Balance as at 31 March 2016	688,515

- (i) During the period, the Regional Groups and Specialist Practice Networks financial activities continued to be incorporated into the financial reports. Where this involved a transfer of further funds into the CNSA, the amount of funds have been taken to retained earnings to represent the carried forward surpluses for these groups over a number of years. In the 2016/17 financial year, this amount was represented by an increase in retained earnings of \$80,385.

The Cancer Nurses Society of Australia Incorporated
Statement of Cash Flows
As at 31 March 2017

	2017	2016
	\$	\$
CASH FLOWS FROM OPERATING ACTIVITIES		
Subscription Receipts	222,928	187,629
Income from Annual Congress	674,945	810,742
Funds received in advance for current year's Annual Congress	247,000	-
Interest Income	7,880	16,360
Other Income (including Regional Groups & Specialist Practice Networks)	103,712	127,445
Payments to suppliers and employees	(930,671)	(989,684)
Net cash provided by operating activities	325,794	152,492
	Note 16	
CASH FLOWS FORM INVESTING ACTIVITIES		
Property, Plant & Equipment	(1,270)	(33,040)
Funds received from Regional Groups	80,385	38,734
Net cash from investing activities	79,115	5,694
Net Increase / (decrease) in cash held	404,909	158,186
Cash at the beginning of the financial year	726,668	568,482
Cash at the end of the financial year	1,131,578	726,668
	Note 7	

The accompanying notes form part of these financial statements

The Cancer Nurses Society of Australia Incorporated

Notes to the Financial Statements

For the year ended 31 March 2017

The financial report covers The Cancer Nurses Society of Australia Incorporated as an individual entity. The Cancer Nurses Society Australia is an incorporated association incorporated and domiciled in Australia.

The principal activities of the Society during the year was to act as a resource to cancer nurses around Australia through the provision of services which aim to advance cancer nursing education, practice and research.

The functional and presentation currency of The Cancer Nurses Society of Australia Incorporated is Australian dollars.

Comparatives are consistent with prior years, unless otherwise stated.

Note 1. Basis of Preparation

In the National Executive Committee members' opinion, the Society is not a reporting entity since there are unlikely to exist users of the financial report who are not able to command the preparation of reports tailored so as to satisfy specifically all of their information needs. This special purpose financial report has been prepared to meet the reporting requirements of the *Associations Incorporation Act 1991 (ACT)* and the *Australian Charities and Not-for-profits Commission Act 2012*.

The financial statements have been prepared in accordance with the recognition and measurement requirements of the Australian Accounting Standards and Accounting Interpretations, and the disclosure requirements of AASB 101, Presentation of Financial Statements, AASB 107 Statement of Cash Flows, AASB 108 Accounting Policies, Changes in Accounting Estimates and Errors and AASB 1054 Australian Additional Disclosures.

Note 2. Summary of Significant Accounting Policies

The accounting policies that have been adopted in the preparation of the statements are as follows:

(a) Income Tax:

The Society is exempt from the payment of income tax pursuant to Section 50-5 of the *Income Tax Assessment Act (1997)*.

(b) Revenue and other income

Revenue is recognised when the amount of the revenue can be measured reliably, it is probable that economic benefits associated with the transaction will flow to the Society and specific criteria relating to the type of revenue as noted below, has been satisfied.

Revenue is measured at the fair value of the consideration received or receivable.

All revenue is stated net of the amount of goods and services tax (GST).

The Cancer Nurses Society of Australia Incorporated

Notes to the Financial Statements

For the year ended 31 March 2017

2 Summary of Significant Accounting Policies continued

Donations

The Society, in common with most organisations dependent upon contributions, is unable to establish control over voluntary donations prior to their initial entry into the accounting records, therefore they are recorded on the basis of cash received.

Member Subscriptions

Member subscriptions are recorded on an accruals basis and apportioned across the calendar year of membership.

Grants and Bequests

The Society receives grants and bequests for certain activities. Where a grant or bequest is non-reciprocal, it is recognised as revenue of the Society upon receipt. Associated expenditure for the completion of a grant or bequest is recorded as incurred. Where a grant or bequest is subject to a reciprocal transfer, a liability associated with the reciprocal transfer is recorded upon receipt of the transfer. The income and expenditure is then subsequently reported at the time of the subsequent grant or bequest.

Interest Revenue

Interest is recognised using the effective interest method.

Other Income

Other income is recognised on an accruals basis when the Society is entitled to it.

Net Annual Congress Income

The Society contracts a professional Events Co-ordinator to manage the staging of the Annual Congress including the receipt of revenue and payment of expenses in relation to the event. Documents detailing the income and expenses have been received from the Events Co-ordinator together with a reconciling statement. Revenues and expenses associated with the Congress are recognised through the Statement of Profit & Loss and Other Comprehensive Income in the year the Congress is conducted. In the period in the lead up to the Congress, expenditure is incurred and income received which is taken up as prepayments and unearned income respectively. Where there is an excess of funds received by the Events Co-ordinator above an agreed limit, these funds are remitted back to the society and retained within the cashflows.

(c) Goods and services tax (GST)

Revenue, expenses and assets are recognised net of the amount of goods and services tax (GST), except where the amount of GST incurred is not recoverable from the Australian Taxation Office (ATO). Receivables and payables are stated inclusive of GST.

The net amount of GST recoverable from, or payable to, the ATO is included as part of receivables or payables in the statement of financial position.

Cash flows in the statement of cash flows are included on a gross basis and the GST component of cash flows arising from investing and financing activities which is recoverable from, or payable to, the taxation authority is classified as operating cash flows.

The Cancer Nurses Society of Australia Incorporated
Notes to the Financial Statements
For the year ended 31 March 2017 (continued)

2 Summary of Significant Accounting Policies continued

(d) Property, plant and equipment

Each class of property, plant and equipment is carried at cost less any accumulated depreciation and impairment.

Items of property, plant and equipment acquired for nil or nominal consideration have been recorded at the acquisition date fair value.

Depreciation

Property, plant and equipment is depreciated on a straight-line basis over the assets useful life to the Society, commencing when the asset is ready for use.

The estimated useful lives used for each class of depreciable asset are shown below:

Fixed asset class	Useful life
Office Equipment	3 years
Computer Equipment	3 years
Web site Development	3 years

At the end of each annual reporting period, the depreciation method, useful life and residual value of each asset is reviewed. Any revisions are accounted for prospectively as a change in estimate.

(e) Cash and Cash Equivalents

Cash and cash equivalents include cash on hand, deposits held on call with banks and other short-term highly liquid investments with original maturities of three months or less.

(f) Employee benefits

Provision is made for the Society's liability for employee benefits arising from services rendered by employees to the end of the reporting period. Employee benefits that are expected to be wholly settled within one year have been measured at the amounts expected to be paid when the liability is settled.

(g) Income in Advance

Income in Advance includes member subscriptions, which have been received for the 2017 membership year, (Refer to note 2 (b)) and Annual Congress income received (Refer to note 2 (b)) or other future income such as sponsorships, which may cover the full proceeding calendar year.

(h) Comparative Figures

Comparative figures have been adjusted to conform to changes in presentation for the current year where required by accounting standards or as a result of changes in accounting policy.

The Cancer Nurses Society of Australia Incorporated
Notes to the Financial Statements
For the year ended 31 March 2017 (continued)

2 Summary of Significant Accounting Policies continued

(i) Other Current Assets

Prepayments included in other assets primarily relates to prepayments for the future Annual Congress.

(j) Trade and Other Payables

Trade and other payables represent the liabilities for goods and services received by the Society that remain unpaid at year-end. Trade payables are recognised at their transaction price. They are subject to normal credit terms and do not bear interest.

Note 3. Critical Accounting Estimates and Judgments

The National Executive Committee make estimates and judgements during the preparation of these financial statements regarding assumptions about current and future events affecting transactions and balances.

These estimates and judgements are based on the best information available at the time of preparing the financial statements, however as additional information is known then the actual results may differ from the estimates.

The significant estimates and judgements made have been described below.

Key estimates - receivables

The receivables at reporting date have been reviewed to determine whether there is any objective evidence that any of the receivables are impaired. An impairment provision is included for any receivable where the entire balance is not considered collectible. The impairment provision is based on the best information at the reporting date.

Note 4. Nature and objects of the Society

The Society is an association incorporated under the *Associations Incorporation Act 1991*. Its object is to determine and regulate professional standards and competencies for cancer nursing practice and education, facilitate research and standards in the area of cancer nursing, act as a resource for the development and dissemination of information relating to new technologies in cancer nursing, ensure that cancer nurses perspectives' are evident in national nursing debates, actively lobby government on issues relevant to cancer nursing and collaborate locally, nationally and internationally with other organisations involved in the development and provision of services to people with cancer.

In the event of the Society being wound up, the members undertake to contribute to the assets an amount not exceeding the ordinary membership fee of the Society.

The Cancer Nurses Society of Australia Incorporated
Notes to the Financial Statements
For the year ended 31 March 2017 (continued)

Note 5. Economic Dependence:

The ability of the Society to maintain its operations is dependent inter alia on continuing support of its members by way of voluntary subscriptions.

	2017	2016
	\$	\$
Note 6. Revenues:		
Subscription Income	156,919	142,326
Income from Annual Congress	642,278	668,618
Interest Income	12,311	15,189
Other Income	27,196	34,997
Regional Groups & Specialist Practice Networks	169,607	124,183
	<u>1,008,311</u>	<u>985,313</u>

Note 7. Cash & Cash Equivalents:

Current

Petty Cash	-	123
Cash at Bank	319,481	220,821
Term Deposits	812,097	505,724
	<u>1,131,578</u>	<u>726,668</u>

Note 8. Trade and Other Receivables:

Trade and other receivables	160,824	48,053
Sundry Debtors	4,431	-
	<u>165,255</u>	<u>48,053</u>

Note 9. Other Current Assets:

Prepayments - Annual Congress	79,282	485,969
Prepayments - Other	65,814	36,377
	<u>145,096</u>	<u>522,346</u>

The Cancer Nurses Society of Australia Incorporated

Notes to the Financial Statements

For the year ended 31 March 2017 (continued)

	2017	2016
	\$	\$
Note 10. Property, Plant & Equipment:		
Computers & Office Equipment	5,456	5,720
Less: Accumulated Depreciation	<u>(2,394)</u>	<u>(1,826)</u>
	<u>3,062</u>	<u>3,894</u>
Web-site Development	29,000	29,000
Less: Accumulated Depreciation	<u>(19,173)</u>	<u>(9,507)</u>
	<u>9,827</u>	<u>19,493</u>
	<u>12,889</u>	<u>23,387</u>
Note 11. Trade & Other Payables:		
Trade Creditors	45,470	77,536
Income in Advance - Annual Congress	405,033	436,594
Income in advance - Other	<u>153,153</u>	<u>102,836</u>
	<u>603,656</u>	<u>616,966</u>
Note 12. Provisions:		
Provision for Annual Leave	<u>1,747</u>	<u>14,973</u>
Note 13. Capital & Leasing Commitments		
There are no capital & leasing commitments as at 31 st March 2017		
Note 14. Events after reporting period		
There have been no events subsequent to year-end that have affected or may affect the financial statements as at 31 March.		
Note 15. Remuneration of Auditor		
During the year, the following fee was paid or is payable for services provided by the auditor to the Society.		
Audit and Review of Financial Report	<u>4,200</u>	<u>3,195</u>

The Cancer Nurses Society of Australia Incorporated
Notes to the Financial Statements
For the year ended 31 March 2017 (continued)

Note 16. Cash flow information

	2017	2016
	\$	\$
Reconciliation of net cash provided by operating activities attributable to surplus / (deficit) from ordinary activities		
Total comprehensive income for the year		
Non-cashflows in profit	80,515	129,860
Depreciation	11,673	10,557
(Profit) / Loss on sale of fixed assets	95	-
Changes in assets and liabilities		
(Increase) / Decrease in receivables	(112,771)	(47,653)
(Increase) / Decrease in sundry debtors	(4,431)	1,171
(Increase) / Decrease in prepayments	(29,437)	13,514
(Increase) / Decrease in congress prepayments	406,687	(85,831)
Increase / (Decrease) in congress income received in advance	(31,561)	75,262
Increase / (Decrease) in subscriptions paid in advance	50,317	31,070
Increase / (Decrease) in other payables & bequests	(32,066)	18,360
Increase / (Decrease) in provisions	(13,227)	6,182
	<u>325,794</u>	<u>152,492</u>

Note: During the period, an amount of \$247,000 was received in advance of the 2017 congress from the events co-ordinator. These funds are recorded against congress prepayments and are included in the cashflows from congress in the cashflow statement. In the prior year, no funds had been received in advance as at balance date

The Cancer Nurses Society of Australia Incorporated
Detailed Trading Profit & Loss Statement
For the 12 months ended 31 March 2017

	2017	2016
Income	\$	\$
Subscription Income	156,919	142,326
Bequests	-	2,000
Annual Congress	642,278	668,618
Interest Income	12,311	14,313
Grant Income	4,000	4,031
Other Income	23,196	28,967
	<u>838,704</u>	<u>860,255</u>
Expenditure		
Administrative Costs		
Accountancy Services	9,000	9,000
Audit	5,689	3,195
Bank Charges	467	314
Bookkeeping	18,225	15,025
Depreciation Office Equipment	11,121	10,517
Information Technology	1,905	1,966
Insurance	4,856	4,457
Legal and Consulting	32,373	-
Merchant Fees	2,104	1,691
Postage & Packaging	1,372	503
Printing & Stationery	495	1,318
SecurePay Salary Payment Gateway	1,920	1,613
Storage Fees (Archive)	1,204	1,221
Sundry Expenses	3,723	4,989
Total Employment Expenses	132,994	165,806
Website Costs	9,400	5,160
Total Administrative Costs	<u>234,988</u>	<u>226,775</u>
Other Costs		
CNSA Grants & Scholarships	27,125	19,572
National Executive Committee Meetings	32,125	23,452
Journal & Newsletter	17,461	17,473
Marketing & Promotional Resources	10,346	10,379
Regional Group Meetings	3,746	3,536
Special Projects	17,541	12,562
Specialist Practice Networks Meetings	4,454	2,483
Standing Committee	1,812	891
Subscriptions	2,916	3,200
Travel & Accommodation (ISNCC, CoNNO, AONS)	8,485	6,324
Annual Congress Costs	423,283	473,864
Total Other Costs	<u>549,294</u>	<u>573,736</u>
Total Expenditure	<u>784,282</u>	<u>800,511</u>
Operating Surplus/(Deficit)	<u>54,422</u>	<u>59,744</u>
Non-Operating Income & Expenses		
Regional Groups & Specialist Practice Networks (Income)	169,607	125,058
Regional Groups & Specialist Practice Networks (Expenses)	(143,514)	(54,942)
	<u>26,093</u>	<u>70,116</u>
Net Result for the Year	<u>80,515</u>	<u>129,860</u>

DISCLAIMER

The additional financial data as presented in the detailed trading profit and loss statement is in accordance with the books and records of The Cancer Nurses Society of Australia Incorporated (the Society), that have been subjected to the audit procedures applied in the audit for the year ended 31 March 2017. It will be appreciated that our audit did not cover all details of the additional financial data. Accordingly, we do not express an opinion on such data and no warranty is given to its accuracy or reliability. Neither the firm, nor any member or employee of the firm undertakes responsibility in any way whatsoever to any person other than the Society in respect of such data including any errors or omission however caused.

LDAssurance
Chartered Accountants



Stephen O'Kane
Partner

Dated this 22nd day of May 2017 at 250 Collins Street, Melbourne.