



NATIONAL BREAST CANCER CENTRE
incorporating the Ovarian Cancer Program

ANNUAL REPORT
2004-2005

“*To strive to reduce mortality from breast and ovarian cancer and improve the wellbeing of women diagnosed with these diseases*”

National Breast Cancer Centre

The National Breast Cancer Centre (NBCC) is Australia's peak body for breast and ovarian cancer control. It was established in 1995 by the Australian Government in response to community concerns about the human cost of breast cancer. In 2001 the Government provided additional funding to expand the NBCC's work into ovarian cancer.

The NBCC works with women, health professionals, cancer organisations, researchers and governments to improve the management of breast and ovarian cancer and the wellbeing of women with these diseases. It aims to improve health outcomes for women with breast and ovarian cancer by ensuring that wherever they live, women receive the best possible care.

The work of the NBCC is made possible by funding from the Australian Government Department of Health and Ageing.

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Report from the Chairman

This year marks 10 years since the establishment of the National Breast Cancer Centre by the Federal Government in 1995.

We have accomplished significant gains in ensuring women with breast and ovarian cancer have the best possible outcomes through the delivery of quality medical and supportive care. This is only achievable through work on many fronts – the provision of reliable, up-to-date, evidence-based information to both consumers and the health professionals who manage their care; the delivery of care in an environment which supports best practice and equity of care; ensuring the approach to care is patient-centred and supportive; identification of areas of specific need or gaps in care and ways in which to address them within the Australian health care context. Care today has improved significantly compared with care 10 years ago and we are proud of the contribution we have been able to make towards these improvements.

This year has also seen the appointment of Dr Helen Zorbas as Director of the National Breast Cancer Centre and the start of a new triennium of work against a 3 year Strategic Plan. We have built on and strengthened our relationships with our valued colleagues from cancer organisations, medical colleges, professional groups, researchers and consumer organisations. The National Breast Cancer Centre's corporate relations have also been strengthened this year, with many of our sponsors having pledged not only continued, but also increased levels of support for the National Breast Cancer Centre's activities in 2005-2006. The 10th Anniversary Pink Ribbon Breakfast in October 2004 enjoyed an unprecedented level of corporate support and was successful in raising awareness about the importance of early detection of breast cancer, particularly through the address by Mrs Janette Howard, patron of the National Breast Cancer Centre Public Awareness Campaign.



The additional funding of \$4 million over 5 years received from the Australian Government in the May 2005 budget, indicates their confidence in and support of the National Breast Cancer Centre. We are very pleased to have this increased funding to expand our work particularly in raising awareness about the importance of early detection, which, in the absence of a cure or a means of prevention, still remains the best way of surviving breast cancer.

The Board wishes to express its thanks to the Australian Government and in particular the Honourable Tony Abbott MP for their ongoing support of this fine organisation.

JANET MCDONALD AO

Chairman

September 2005

Report from the Director

In July 2004, the National Breast Cancer Centre identified its future directions with the development of the three-year Strategic Plan for 2004-2007 and the Business Plan for 2004-2005. The past 12 months have seen the National Breast Cancer Centre renew its engagement with key stakeholders, establish additional relationships and implement a new advisory structure with Expert Advisory Groups in the areas of Information, Data and Implementation.

The National Breast Cancer Centre's leadership role has been recognised through representation on a number of key national and state cancer control committees. The National Breast Cancer Centre was invited to provide insights on the 'priorities for a national body' at the Cancer Australia Workshop conducted by the Department of Health and Ageing. The Senate Community Affairs References Committee Inquiry into Cancer Services invited the National Breast Cancer Centre to be a witness and our significant work, particularly in multidisciplinary care, was noted with very high regard.

The National Breast Cancer Centre's resources continue to be in high demand. Approximately 8,000 paper-based resources are disseminated each month and our web-sites are increasingly popular. We have initiated a new approach to updating guideline recommendations which will ensure this key function of the Centre remains sustainable into the future. A new system has also been implemented to support a pro-active and re-active media strategy and to provide stakeholders with the National Breast Cancer Centre's analysis of new and emerging research.

Significant collaborative achievements for the National Breast Cancer Centre in 2004-2005 included its work with the Australian Cancer Network and The Cancer Council Australia to produce a discussion paper on Accreditation of Cancer Services and the collaboration with National Cancer Control Initiative in the implementation of the psychosocial guidelines for adults with cancer. Another key initiative in 2004-2005 was the launch of the Clinical Practice Guidelines for the Management of Women



with Epithelial Ovarian Cancer and the first ever guide for women diagnosed with ovarian cancer. Over 1,000 copies of this guide were disseminated in the first month after release.

The National Breast Cancer Centre also continued to provide leadership in the development and delivery of communication skills training to clinicians, in championing multi-disciplinary care and providing evidence-based recommendations to support clinical and consumer decision-making.

It has been a privilege to work with so many dedicated experts from across Australia who contribute immeasurably to the quality and relevance of our work, and with such a highly committed and talented team of staff. The National Breast Cancer Centre looks forward with enthusiasm to delivering on an ambitious business plan in 2005-2006.

DR HELEN ZORBAS

Director

September 2005



“ *The National Breast Cancer Centre will collaborate with key stakeholders, government and key agencies to contribute to national policy and set strategic priorities in cancer control.* ”

LEADERSHIP

The National Breast Cancer Centre (NBCC) has continued to take a leadership role and pursue innovative ways to improve the care and treatment of women with breast and ovarian cancer. A number of NBCC initiatives have broken new ground and are now being used as models by organisations and agencies in controlling other cancers and diseases. These include the promotion of multidisciplinary care, development of core professional competencies for specialist nurses and the NBCC, Australian Cancer Network The Cancer Council Australia scoping study on the Accreditation of Cancer Services.

National Strategic Directions

NBCC's leadership role was reinforced by our participation in the Cancer Australia workshop, auspiced by the Australian Government at which NBCC provided insights on priorities for a national cancer organisation.

During the year the Director and Chairman have met with The Federal Minister for Health, The Hon. Tony Abbot, the Chief Health Officer Professor John Horvath and a number of federal parliamentarians to discuss current and emerging issues in cancer control. The NBCC provided a submission and presentation to the Senate Community Affairs References Committee inquiry into services and treatment options for people with cancer.

Collaboration

The National Breast Cancer Centre has continued to share skills and expertise with a variety of organisations and agencies in pursuit of our mutual goal to improve outcomes for women with breast and ovarian cancer. All of our programs are informed by the needs of women with breast and ovarian cancer and consultation with relevant clinical, academic or scientific experts.

A new Advisory structure was implemented in 2004 to ensure that our work is informed by the views, experiences and knowledge of as many stakeholders as

possible. Advisory groups were formed in the areas of Implementation, Information and Data to complement the existing Clinical Expert Advisory Panel and the Women's Advisory Network.

Key committees on which we are represented include; The Australian Screening Advisory Committee (ASAC), The National Cancer Strategies Group, ASAC Quality Improvement and Workforce Working Group, ASAC Monitoring and Evaluation Working Group, Cancer Screen NSW Advisory Committee, Quality and Clinical Effectiveness NSW Advisory Committee, Union Internationale Contre le Cancer Australian and Southeast Asian TNM Committee, The Director is a member of the NHMRC's Health Advisory Committee.

Sharing Knowledge and Expertise

NBCC Ovarian Cancer Seminars and Women's Forums were held across the country in collaboration with the state Cancer Councils and NBCC collaborated with OvCa Australia to launch Ovarian Cancer Awareness Week.

A workshop to discuss strategies for improving the implementation of clinical practice guidelines was held at the National Breast Cancer Centre in collaboration with the National Institute of Clinical Studies and the Australian Cancer Network.

Staff of NBCC presented in plenary sessions at a number of national and international conferences during the year including the 2004 International Conference on Cancer Nursing, The Leura V International Breast Cancer Conference, The Clinical Oncological Society of Australia Annual Scientific Meeting and the National Breast Care Nurse Conference.

In recognition of the international standing of our program work, the outcomes of an NBCC/ACN/TCCA scoping study on the Accreditation of Cancer Services will be presented at the International Society for Quality in Health Care in Vancouver in October 2005.



“The National Breast Cancer Centre will collaborate with relevant stakeholders to develop, implement and evaluate, as appropriate, evidence-based training and standards of best practice to support current and emerging paradigms of care”

QUALITY ASSURANCE AND STANDARDS OF CARE

Communication skills

A focus of the 2004-2005 program was on improving communication between health professionals and their cancer patients. Many women who have undergone treatment for breast or ovarian cancer continue to identify communication with health professionals as an area that they believe could be improved. Three new modules were added to the National Breast Cancer Centre's (NBCC) suite of communication skills training materials. These modules provide an evidence-based summary of relevant research and guidelines for clinicians who manage patients with cancer. The material added this year addressed identified needs in communication within a multidisciplinary team, discussing the often difficult transition to palliative care and the complex issues around prognosis. In addition a training module addressing the needs of younger women with breast cancer is being developed through a donation from Ms Nelune Rajapasko, a younger woman with breast cancer.

A series of workshops were commenced and will continue in future years to provide training in communication skills. One of these workshops, on Effectively Discussing Prognosis was provided at the Annual Scientific Congress of the Royal Australasian College of Surgeons in May.

Accreditation

Highlights of the work program on improving standards of care include the report on Accreditation Processes developed on behalf of the Australian Cancer Network, which will be presented at conferences in Australia in July and Canada in October 2005. This is a significant and timely report in light of the establishment of Cancer Australia and the various state-based cancer control initiatives.

Projects to support the accreditation process of Breastscreen Australia were completed in 2005 and a report about competency standards for Specialist Breast Nurses has been completed and will be released in July at the Winter Congress of the Cancer Nurses Society of Australia.

Supporting Rural Care

The National Breast Cancer Centre promoted standards of care for people in rural areas again in 2004-2005 through the Polo Ralph Lauren Pink Pony Initiative. As a result of increased funding from Polo Ralph Lauren the existing program of scholarships for rural nurses and community health workers was extended by adding further seeding grants for community-based initiatives that improve access to health and support services for women with breast cancer. Twenty-eight nurses were awarded scholarships to enhance their skills in caring for women with breast cancer in rural Australia and seeding grants were made to Centacare Kimberley in Western Australia, Fairfield Health Service in NSW and Young Action on Breast Cancer in Victoria.

Nowra nurse, Louise Barnes was one of the recipients of a 2005 Polo Ralph Lauren scholarship.

The scholarship allowed Louise to attend the National Breast Care Nurses Conference held in February in Melbourne.

As well as receiving an update on clinical and scientific information and knowledge about where to direct people to access the latest information Louise came away with renewed reassurance about the importance of her role “Being a good nurse and offering a compassionate listening ear can make a big difference to somebody undergoing treatment for cancer.”

newsbrief

Breast cancer treatment guidelines now available
The National Breast Cancer Centre has developed the first nationally agreed guidelines for breast fine needle aspiration cytology and core biopsy.

These new recommendations provide advice about patient care, best performing, completing the

studies covering all procedures including performance and Dr Aileen Gray, member of the team.

is provided advice effectively with the procedures.”

had the fine needle and core biopsy.

from June 2005.

NBCCC





“ The National Breast Cancer Centre will ensure that research findings are translated and disseminated in a timely manner to support clinical practice, and proactively and reactively inform policy, the media and the community ”

LEADING THE WAY WITH COMMUNICATION AND INFORMATION

Information is one of the National Breast Cancer Centre’s (NBCC) primary resources and is the key to successful communication with consumers, government, key cancer organisations and the media. NBCC has established a reputation as an impartial and credible source of evidence-based information

Working with the Media

The NBCC has developed a proactive relationship with the media as one of its most important tools to facilitate the promotion of information and key messages about breast cancer. NBCC provides expert, evidence based commentary on topical issues to the media, both in response to enquiries from journalists and proactively, to promote NBCC programs or resources, to raise awareness about relevant issues or to explain the implications for Australian women of new research.

NBCC’s role as Australia’s leading source of up-to-date information about breast cancer was exemplified by the unprecedented number of calls from media in search

of credible information in response to Kylie Minogue’s breast cancer diagnosis. NBCC gave 60 interviews in May to television, radio and print media, including BBC London television and radio coverage.

Sites to Remember

The NBCC’s web portal continues to be a one-stop shop for comprehensive information about breast and ovarian cancer. NBCC website visitors include women with cancer and their families, clinicians, cancer agencies and health organisations, the media, well women and other consumers and researchers from all fields. The World Wide Web is an increasingly accessed source of information and NBCC websites receive an average of 55,000 individual visits per month.

The Breasthealth website was developed in 2003 with support from the Macquarie Bank Foundation. The site provides specially consumer-oriented information and resources, including fact sheets, frequently-asked questions and relevant statistical data. A survey of breasthealth.com.au users conducted from October 2004 to February 2005 showed that most used were highly satisfied with the site and found it user-friendly and highly relevant. Sixty-percent of users were over 45 years of age and most visited the site from their home computer once a month or more. Feedback from the survey had been incorporated into site upgrades.

The NBCC’s web portal provides access to five sites, tailored to meet the needs of particular audiences:

- www.nbcc.org.au
- www.breasthealth.com.au
- www.myparentscancer.com.au
- www.ovariancancerprogram.org.au
- www.nbcc.org.au/bestpractice

Awareness is Our Best Weapon

With Mrs Janette Howard as Campaign Patron, the Any Change is Worth Talking About campaign was funded





by the Department of Health and Ageing to raise breast awareness nationally through advertising, printed resources, NBCC websites and the media.

As part of the initiative, seven regional forums featuring celebrity speakers and a panel of experts were convened across Australia to target well women promoting the key messages of breast awareness and the importance of early diagnosis. Forums were held in Tamworth, Geelong, Darwin, Townsville, Albany, Launceston from July to December 2004.

Assessing New Evidence

The constant flow of new and emerging research necessitates the periodic review of guideline recommendations for clinicians, and in the past this has meant reviewing entire sets of specific guideline recommendations which may also involve duplication and repetition of large areas of work.

The National Breast Cancer Centre has developed an efficient new topic-specific approach to the review and update of information and clinical practice recommendations for clinicians and information for women.

This new approach was piloted in a project involving an expert multidisciplinary working group to develop recommendations about the use of aromatase inhibitors in the management of hormone-receptor positive early breast cancer in post-menopausal women.

Informing the Investigation of Breast Symptoms

This year, NBCC has also released the first nationally agreed recommendations to guide the clinical investigation of breast symptoms and image-detected breast lesions through breast fine needle aspiration (FNA) cytology and core biopsy.

The publication, *Breast fine needle aspiration cytology and core biopsy: a guide for practice*, was developed by a multidisciplinary project team led by Dr Julienne Grace including expert clinicians and consumer representatives. The guide was endorsed by The Royal College of Pathologists of Australasia, The Royal Australasian College of Surgeons, The Royal Australian and New Zealand College of Radiologists and the Breast Cancer Network Australia.

Raising Clinical Awareness of Ovarian Cancer

In July 2004 NBCC launched Australia's first *Clinical Practice Guidelines for the management of women with epithelial ovarian cancer*, developed by the National Breast Cancer Centre's Ovarian Cancer Program and Australian Cancer Network.

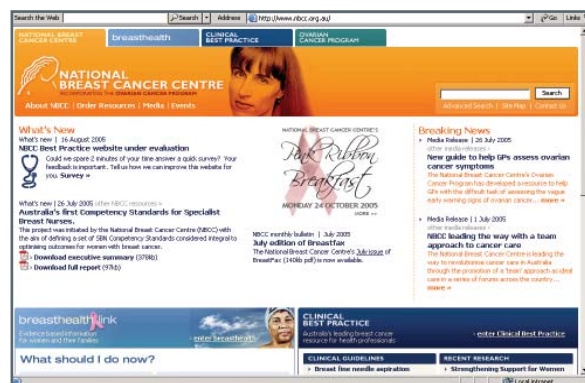
Research has indicated that less than 50 percent of women with ovarian cancer receive the optimal approach to care (Victorian study).

Chair of the Guidelines Working Group and Director of Gynaecological Oncology at Royal Adelaide Hospital, Dr Margaret Davy AM, said, "The guidelines will help to address the information gap about ovarian cancer for clinicians and will promote optimal treatment in a multi-disciplinary care setting for women with the disease."

Ovarian Symptoms Assessment Resource

General Practitioners play a vital role in the early diagnosis of ovarian cancer. While ovarian cancer is a rare disease, over 70 per cent of women are diagnosed at an advanced stage where the cancer has spread – making it Australia's leading cause of death from gynaecological cancers. The non-specific symptoms of ovarian cancer, including abdominal bloating, loss of appetite and fatigue, are common in general practice for a range of conditions.

The new NBCC guide *Assessment of symptoms that may be ovarian cancer: a guide for GPs* provides GPs with a step-by-step process to follow in the investigation of symptoms. The guide was developed by a multidisciplinary working group chaired by general practitioner Dr Amanda McBride.





“ The National Breast Cancer Centre will develop, trial, implement and evaluate selected innovative approaches to improve practice and health service delivery, to impact on policy and ensure that the work of the NBCC informs other cancer control initiatives. ”

INNOVATION AND BEST PRACTICE

The National Breast Cancer Centre (NBCC) continues to lead the way in trialing and developing new approaches to improve both practice and health service delivery in breast and ovarian cancer, guiding policy and informing other key cancer control initiatives.

Multidisciplinary Care

Evidence has shown that a ‘team approach’ to cancer care can reduce mortality and significantly improve the quality of individual patient care. The ‘team approach’ to cancer care involves health care professionals from a variety of disciplines coming together to consider all relevant treatment options and to develop an individual patient treatment plan.

The NBCC is recognised as a pioneer in researching and developing multidisciplinary care models for cancer treatment in Australia’s unique health environment.

An expert Working Group advised and assisted NBCC to develop a practical Meeting Guide to assist health service providers to establish, prepare and support multidisciplinary meetings for cancer care. The Guide will be a key resource to promote the implementation of multidisciplinary care throughout 2005/2006. In addition, NBCC

has established a website at www.nbcc.org.au/mdc to house information and resources to support the nationwide implementation of multidisciplinary cancer care.

Ovarian Cancer Clinicians’ Seminars

NBCC has also led innovation and best practice in the area of ovarian cancer.

The first *Clinical practice guidelines for the management of women with epithelial ovarian cancer* were launched by NBCC and ACN in July 2004. The guidelines highlighted the importance of appropriate initial referral to specialist gynaecological oncology services and that outcomes for women were improved when their care was managed by a multidisciplinary team. The NBCC disseminated the guidelines and conducted a series of seminars in collaboration with the Cancer Councils and ACN to encourage the adoption of the guidelines. Seminars were held in Adelaide, Sydney, Melbourne, Perth, Darwin, Brisbane and Hobart.

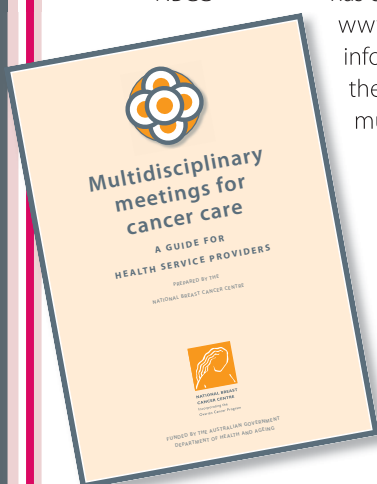
Core Competencies for Cancer Nurses

“...I felt overwhelmed with information when I was diagnosed. I can’t speak highly enough of the Breast Care Nurse, who not only gave the most incredible emotional support but gave me medical information in a way I could understand. The Breast Care Nurse was just wonderful.”

NIKKI CRAYSON, BREAST CANCER SURVIVOR

Specialist breast nurses provide valuable information, support and care co-ordination for women with breast cancer. However, inconsistencies in levels of practice and training and in the definition of the role of specialist breast nurse can contribute to varied outcomes for women with breast cancer.

With the guidance of a steering Committee chaired by Professor Patsy Yates, the National Breast Cancer Centre developed a set of Competency Standards for specialist breast care nurses. These include the minimum educational, training and support requirements and levels of performance to ensure optimal and consistent levels of care for women undergoing treatment.





“ In collaboration with BCNA, OvCa Australia, and other key consumer groups and individuals, the National Breast Cancer Centre will ensure that its work and planning reflects and supports the needs of consumers to make informed decisions about their care and to advocate for improved cancer services based on evidence of best practice. ”



EMPOWERMENT OF CONSUMERS

National Breast Cancer Centre (NBCC) publishes a variety of consumer information that is disseminated either by health professionals, cancer organisations or directly to consumers in hard copy or via our website. Over 31,000 hard copies of our consumer resources were distributed in 2004/2005 and over 100,000 copies were downloaded from the internet.

NBCC actively participated in the 2004 Breast Cancer Network Australia's (BCNA) consumer conference 'Still Making a Difference'. NBCC staff contributed as panel members in workshops on Multidisciplinary Care, Breast Reconstruction, Early Detection and Communication Skills training as well as delivering presentations on Clinical Updates and National Progress. This forum also provided an excellent opportunity for NBCC staff to be informed by consumers' issues first-hand.

Translating the Evidence

The NBCC developed a revised Position Statement on early detection in 2004. This Statement is based on the latest evidence and includes recommendations about breast awareness, clinical breast examination and mammographic screening for women of different age groups and at varying levels of risk for breast cancer. To ensure that the community was appropriately informed about the latest information a flyer encapsulating this information and encouraging awareness of the importance of early detection of breast cancer was produced and 480,000 copies were distributed as an insert in 'New Idea'. The printing of this resource was donated by J.S. Macmillan and the evidence review was made possible by the generosity of Mrs Ann Hollingworth. This information is also available on the NBCC's Breasthealth website.

Informing Choice for Women with Ovarian Cancer

NBCC developed the first national consumer guide for women diagnosed with ovarian cancer in 2004. This publication was developed to help women understand their diagnosis and to make informed decisions about their treatment and care. The guide was launched during 2005 Ovarian Cancer Awareness Week in February, at a very successful awareness raising event held in collaboration with OvCa Australia. Over 2,500 copies of this guide were distributed between February and June 2005.

NEW CONSUMER INFORMATION

Published by NBCC in 2004-2005

Epithelial ovarian cancer- understanding your diagnosis and treatment.

Ovarian Cancer in Australia
Answers to frequently asked questions about ovarian cancer.

Skin care and radiotherapy.
Fact sheet

Breast Cancer: Any change is worth talking about. *Brochure*

Breast Cancer: Any change is worth talking about. *Leaflet*

Breast Cancer Any change is worth talking about. *Poster*

Breast Awareness *Presentation Kit for Community groups.*

From the Source, NBCC's *quarterly insert* into BCNA's newsletter, The Beacon.





“The National Breast Cancer Centre will seek to ensure sustainability through best governance, management and staff development and will seek to secure additional funding sources as appropriate.”

SUSTAINABILITY

The National Breast Cancer Centre (NBCC) has built partnerships with a variety of organisations. These partnerships are enormously valuable in multiplying the impact of the NBCC’s work and allowing us to achieve optimal results with our existing resources.

Woolworths sponsored and provided invaluable assistance in promoting the regional forums for the “Any Change is Worth Talking About” campaign. Woolworths’ in-store promotion was a very cost-effective way to make the public aware of the events which aimed to inform well women about the importance of breast awareness and strategies for early detection of breast cancer.

The Macquarie Bank Foundation was the principle supporter of the NBCC’s flagship awareness raising event, the Pink Ribbon Breakfast in 2004 and have pledged further support for 2005. Estee Lauder,

Australian Women’s Weekly, Smell the Roses and Staging Connections all offered gifts or in-kind support that was invaluable in making the breakfast such a successful event. A prize was donated by Jan Logan Jewellery and raffled at the breakfast with proceeds being used to support the production of NBCC’s resources for women with breast cancer. For the first time in the Breakfast’s 10 year history, corporate tables were offered, raising additional funds to support NBCC’s programs. .

Contracts to perform services during the year for external agencies and organisations such as BreastScreen Australia and the Cancer Institute NSW have allowed the NBCC to share its expertise and to achieve some diversification in funding sources. Similarly the NBCC continues to collaborate with other organisations to pursue funding grants to further research in breast and ovarian cancer. Submissions have been made to NHMRC, Australian Research Council, Cancer Institute NSW and Australian Health Ministers Advisory Council. Ensuring that the NBCC has the optimal mix of skills and expertise to continue to lead the way in cancer control is essential. Strategic partnerships with organisations such as the Pam Mclean Cancer Communications Centre, Cochrane Collaboration and the University of Wollongong has allowed access to particular skills and expertise to supplement our internal expertise where appropriate.





PINK RIBBON BREAKFAST

The theme of the 2004 Pink Ribbon Breakfast was "Ten years of breast cancer progress". Over 850 people from corporate, government and consumer sectors heard from speakers including Mrs Janette Howard, Minister for Health and Ageing The Hon. Tony Abbott and representatives of Breast Cancer Network Australia, the National Breast Cancer Foundation and The Cancer Council Australia. To highlight the advances in treatment and supportive care, the compere Ms Maxine McKew interviewed two women, one of whom had received treatment for breast cancer over ten years ago and the other who had undergone treatment last year.

The Hon. Tony Abbott made the welcome announcement that the NBCC would receive additional funding to expand breast cancer awareness programs. The Australian government committed an additional \$750,000 per year over the next four years.

Media interest in the event is extremely valuable in raising awareness of breast health in the wider community. Extensive media coverage included reports in major metropolitan and regional newspapers, television news, morning show appearances and radio interviews, as well as numerous radio news items and discussion on talkback programs.





“The National Breast Cancer Centre will promote standardised approaches to data collection and reporting, and identify, monitor and report on key indicators of cancer control.”

MONITORING

In collaboration with other key bodies such as NCCI, AACR, AIHW and NCSG as well as other relevant national and state-territory stakeholders, NBCC works to promote standardised data collection procedures and the timely identification and monitoring of key indicators of cancer control.

The NBCC’s *Monitoring and Surveillance Plans for Breast and Ovarian Cancer*, describing planned activities to support the NBCC’s role in monitoring and surveillance over the period 2005 to 2007. The NBCC’s Data Advisory Group chaired by Dr Jane Young informed the development of the Plan.

National body of cancer registries

The consistent collection and reporting of data across states and territories is vital for providing a national picture of cancer control.

The NBCC, in collaboration with Dr Paul Jelfs, Chair of the Australasian Association of Cancer Registries (AACR), has undertaken to review variations in the collection of breast and ovarian cancer data in cancer registries nationally.

Breast Health Survey

The 2003 Breast Health Survey was designed to collect important information about women’s knowledge, attitudes and behaviour with regard to the early detection of breast cancer. Questions were also included about ovarian cancer. The Survey involved the interview of just over 3000 women aged 30-69 years with no history of breast cancer. The project was administered and the data analysed by the University of Wollongong. The results revealed significant gaps in information and provided strong evidence that key messages about breast cancer were not reaching Australian women.

The results of the Breast Health Survey will form the basis of the objectives of the 2005 Public Information Campaign.

Risk and Family History

NBCC has undertaken a two-phase project with BreastScreen Australia to develop and trial a tool to facilitate the assessment of women who may be at increased risk of breast cancer due to their family history.

Many women overestimate their risk of developing breast cancer based on their family history, and currently no consistent model for assessing increased risk is available. Women who are at potentially high risk of breast cancer due to family history require additional surveillance strategies and management advice compared to women at normal population risk.

About 50 women attending BreastScreen Queensland, North Brisbane were interviewed as part of the trial, with detailed family trees taken. An information kit and protocol to train BreastScreen counselors in the family history assessment tool have been developed.

THE NATIONAL BREAST CANCER CENTRE

incorporating the Ovarian Cancer program

ABN 85 094 118 902

ANNUAL FINANCIAL REPORT

FOR THE YEAR ENDED 30 JUNE 2005

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Your directors submit their report for the year ended 30 June 2005.

DIRECTORS

The names and details of the company's directors in office during the financial year and until the date of this report are as follows. Directors were in office for this entire period unless otherwise stated.

Names, qualifications, experience and special responsibilities:

Mrs Janet McDonald AO (Chairman);

Janet McDonald has been very actively involved in women's health issues for more than 20 years. She has been a member of the National Breast Cancer Centre NBCC since 1996 and was appointed Chair of the (NBCC) in April 2003. Mrs McDonald is also a member of the Drug Utilisation Sub-Committee for the Commonwealth Government. Some of Mrs McDonald's former board memberships include; former Trustee of the Powerhouse Museum for nine years; Chair of Royal Hospital for Women, Member NSW Mammographic Screening Advisory Council and Board member of National Breast Cancer Foundation.

Professor Bruce Barraclough AO

MB BS FRACS DDU FACS

Professor Barraclough is the Chair of the Australian Council of Safety & Quality in Health Care; Member of the Executive Board of the International Society for Quality in Health Care; Chair Board of New South Wales Clinical Excellence Commission; Medical Director Australian Cancer Network and member of multiple committees of Federal and State Governments. He is also Director of Cancer Services at the Northern Sydney Health Area, Royal North Shore Hospital Sydney.

Professor Christine Ewan AM

MB BS MA PhD FAFPHM FAICD

Resigned effective 1 July 2004

Professor Ewan served as the Chair of the National Breast Cancer Centre's Board of Directors from 1998-2002 and as the Chief Executive Officer from December 2002 to 1 July 2004. Professor Ewan's appointments included member of NSW Public Health Forum; Professorial Fellow at the University of Wollongong; Honorary Research Associate, Faculty of Health Sciences, University of Sydney.

Professor John Hopper (Deputy Chairman)

MSc PhD BA

Professor John Hopper is a NHMRC Senior Principal Research Fellow and Professorial Fellow with a PhD in Mathematical Statistics. He is Director of the Centre for Genetic Epidemiology in the Department of Public Health at The University of Melbourne. Professor Hopper is also Director of the Australian Twin Registry. He is principal or co-investigator on a number of family studies across a range of diseases and conditions, which includes breast cancer.

Dr David Ingram,

MB BS MS FRCS FRACS

Dr Ingram is the Consultant Specialist Surgeon in the management of Diseases for the Breast, at Mount Hospital Medical Centre, Perth. His previous appointments include Associate Professor of Surgery, at the University of Western Australia and inaugural Director of the Sir Charles Gairdner Hospital Breast Centre, a clinic that he was instrumental in establishing. Dr Ingram has authored more than 70 scientific papers, which have been published in refereed journals of medical literature. He has extensive research experience in breast cancer and in particular into the relationship between diet, hormones and breast cancer.

Professor Don Iverson

PhD

Professor Iverson is the Dean of Health and Behavioural Sciences at the University of Wollongong (UOW). Previous experiences include senior positions in the US and Canada within Cancer related institutes and centres as well as state department health services. He has also served on a number of governing/advisory committees in the US.

Dr Megan Keaney

MB BS

Dr Keaney is the Major Claims Manager for UNITED Medical Protection and Australasian Medical Insurance Limited. She is also a part-time Medical Officer, Emergency Department, at the Royal North Shore Hospital, Sydney and has an interest in remote health care and Aboriginal health.

The Hon. Jocelyn Newman AO

Senator Newman's career has encompassed many areas of the political arena, some of which have been Senator (Lib.) for Tasmania; Federal Minister for Family and Community Services; Minister Assisting the Prime Minister for the Status of Women; Federal Minister for Social Security; Federal Shadow Minister for Defence; and Federal Shadow Minister for Family and Health. She has also been, and remains today, heavily involved in a number of community organisations.

Professor Ian Olver,

MB BS MD PhD CMin FRACP MRACMA FChPM
Professor Olver is the Clinical Director, Royal Adelaide Hospital Cancer Centre; The Cancer Council Professor of Cancer Care, Adelaide University; Director, Medical Oncology, Royal Adelaide Hospital; Head, Hanson Clinical Research Centre. He is also a member on the Cancer Strategies Group of Commonwealth Department of Health and Aged Care. There are a number of committees that Professor Olver is currently on some of those are: Chair of the Medical Oncology Group of Australia; Operations Committee, Royal Adelaide Hospital; Board Member, Anti-cancer Foundation, South Australia

Mrs Lyn Swinburne

Mrs Swinburne is the CEO of the Breast Cancer Network Australia which she founded in 1998. Mrs Swinburne is Chair of the Breast Cancer Reference Committee to the Department of Human Services, a member of the Victorian Ministerial Taskforce Against Cancer and a member of the Clinical Advisory Group to the Royal Australian College of Surgeons' National Surgical Audit.

Ms Deborah Thomas

Ms Thomas is the Editor-in-chief for The Australian Women's Weekly. She is also a Patron of the Taronga Foundation and a member of the Board of the Walkley Foundation.

Professor Jeanette Ward

PhD
Resigned effective 1 March 2005
Professor Ward has a medical background, a master's degree in health personnel education and a PhD in behavioural science. Professor Ward was Area Director, South Western Sydney Area Health Service (SWSAHS) Division of Population Health. She was the NSW Regional Committee Chair of the Australasian Faculty of Public Health Medicine, a member of the Board of the NSW Cancer Council and a member of NSW Cancer Institute's Cancer Research Advisory Committee and its Population Health & Screening Working Party.

Dr Helen Zorbas

MB BS FASBP
Dr Zorbas was appointed Director of the National Breast Cancer Centre (NBCC) in July 2004. Current appointments include: member, Health Advisory Committee of the NHMRC for the triennium 2003-2005; member, Australian Screening Advisory Committee; member, NHMRC Hormone Replacement Therapy Working Party. In addition, Dr Zorbas has held a number of positions on national steering committees and working groups including member, Policy Working Group, BreastScreen Australia, and member, Steering Committee, Prevention and Management of Breast and Cervical Cancer in ATSI women, Royal Australian College of General Practitioners. Dr Zorbas is also a practicing breast physician and has a staff specialist appointment at the Rachel Forster Breast Clinic, Royal Prince Alfred Hospital, Sydney.

All directors were in office from the date of the last report of the company until the date of this report unless otherwise stated.

PRINCIPAL ACTIVITIES

The principal activities during the year for the company were activities associated with breast and ovarian cancer including development and implementation of guidelines about diagnosis, treatment and support and the provision of a clearing house for information and monitoring of breast and ovarian cancer control.

RESULTS

The net profit of the company for the year ended 30 June 2005 was \$513,026 (2004: \$(412,759)).

DIVIDENDS

The company is a non-profit organisation and the constitution of the company prohibits the payment of a dividend.

REVIEW OF OPERATIONS

The National Breast Cancer Centre was incorporated as an Australian Public Company Limited By Guarantee on the 11th August 2000. Since incorporation, the Centre has continued to work in activities associated with the control of breast cancer additionally extending the work of the National Breast Cancer Centre to activities associated with the control of ovarian cancer.

SIGNIFICANT CHANGES IN THE STATE OF AFFAIRS

There have been no significant changes in the state of the company's affairs during the financial year.

SIGNIFICANT EVENTS AFTER THE BALANCE DATE

There have been no significant events which have occurred after 30 June 2005.

FUTURE DEVELOPMENTS AND RESULTS

The company expects to continue its activities relating to the awareness of breast and ovarian cancer over the next financial year.

ENVIRONMENTAL REGULATION AND PERFORMANCE

The company is not subject to any particular or significant environmental regulation.

DIRECTOR'S MEETINGS

The number of meetings of directors held during the year and the number of meetings attended by each director were as follows:

NAME OF DIRECTOR	NUMBER OF MEETINGS ELIGIBLE TO ATTEND	NUMBER OF MEETINGS ATTENDED
J. McDonald	5	5
B. Barraclough	5	4
J. Hopper	5	5
D. Ingram	5	5
D. Iverson	5	3
M. Keaney	5	4
J. Newman	5	5
I. Olver	5	3
L. Swinburne	5	4
D. Thomas	5	4
J. Ward	3	3
H. Zorbas	5	5

COMMITTEE MEMBERSHIP

Directors acting on the committees of the board and the meetings attended are as follows;

Finance and Audit Committee

NAME OF DIRECTOR	NUMBER OF MEETINGS ELIGIBLE TO ATTEND	NUMBER OF MEETINGS ATTENDED
J. Ward	4	4
M. Keaney	5	5
J. McDonald	5	5
J. Hopper	5	5
M. Jordan	2	2
H. Zorbas	5	5

Communications and Innovations Committee

NAME OF DIRECTOR	NUMBER OF MEETINGS ELIGIBLE TO ATTEND	NUMBER OF MEETINGS ATTENDED
B. Barraclough	4	4
J. McDonald	4	4
J. Hopper	4	2
J. Newman	4	3
D. Thomas	4	3
H. Zorbas	4	4

Programs and Partnerships Committee

NAME OF DIRECTOR	NUMBER OF MEETINGS ELIGIBLE TO ATTEND	NUMBER OF MEETINGS ATTENDED
D. Iverson	4	4
D. Ingram	4	4
J. McDonald	4	3
I. Olver	4	1
L. Swinburne	4	3
J. Hopper	4	3
H Zorbas	4	4

Executive Committee

NAME OF DIRECTOR	NUMBER OF MEETINGS ELIGIBLE TO ATTEND	NUMBER OF MEETINGS ATTENDED
J. McDonald	3	3
J. Hopper	3	3
B. Barraclough	3	3
D. Iverson	2	2
M. Keaney	1	1
J. Ward	1	1
H. Zorbas	3	3

INDEMNIFICATION AND INSURANCE OF DIRECTORS

The company has entered into an insurance contract to indemnify all directors for any breach of the Trade Practices Act or discrimination laws by the company for which they are held personally liable. The amount of the maximum indemnity cover provided under the insurance policy is \$10,000,000. During the year, the company paid premiums of \$17,151 for the professional indemnity insurance policies.

AUDITOR INDEPENDENCE

We have obtained the independence declaration from our auditors, Ernst & Young, a copy of which is included on page 26 of the financial report.

NON-AUDIT SERVICES

The Company's auditors, Ernst & Young, have not provided any non-audit services during the year ended 30 June 2005.

Signed in accordance with a resolution of the directors.

J. MCDONALD
Chairman

Sydney, 12 September, 2005

STATEMENT OF FINANCIAL PERFORMANCE

YEAR ENDED 30 JUNE 2005	NOTES	2005 \$	2004 \$
REVENUES FROM ORDINARY ACTIVITIES	3	3,363,572	3,035,995
Depreciation and amortisation expenses	4	(17,610)	(27,307)
Salaries and employee benefits expense		(1,652,486)	(1,815,030)
Rent and premises expense		(124,533)	(122,023)
Consultants & contract payment expense		(361,009)	(571,350)
Meeting costs		(100,984)	(61,197)
Printing and stationery expense		(215,394)	(191,075)
Travel expense		(62,649)	(130,753)
Other expenses from ordinary activities		(315,881)	(530,019)
PROFIT/(LOSS) FROM ORDINARY ACTIVITIES BEFORE INCOME TAX EXPENSE		513,026	(412,759)
INCOME TAX EXPENSE RELATING TO ORDINARY ACTIVITIES	5	-	-
PROFIT/(LOSS) FROM ORDINARY ACTIVITIES AFTER INCOME TAX EXPENSE		513,026	(412,759)
NET PROFIT/(LOSS) ATTRIBUTABLE TO MEMBERS OF NATIONAL BREAST CANCER CENTRE		513,026	(412,759)

STATEMENT OF FINANCIAL POSITION

YEAR ENDED 30 JUNE 2005	NOTES	2005 \$	2004 \$
CURRENT ASSETS			
Cash assets		3,034,931	1,867,588
Receivables	6	51,742	755,389
Other assets	7	26,700	29,864
TOTAL CURRENT ASSETS		3,113,373	2,652,841
NON-CURRENT ASSETS			
Property, Plant and equipment	8	95,148	100,878
TOTAL NON-CURRENT ASSETS		95,148	100,878
TOTAL ASSETS		3,208,521	2,753,719
CURRENT LIABILITIES			
Payables	9	199,987	250,972
Provisions	10	76,003	88,790
TOTAL CURRENT LIABILITIES		275,990	339,762
NON-CURRENT LIABILITIES			
Provisions	11	17,276	11,728
TOTAL NON-CURRENT LIABILITIES		17,276	11,728
TOTAL LIABILITIES		293,266	351,490
NET ASSETS		2,915,255	2,402,229
EQUITY			
Members Funds	12	2,915,255	2,402,229
TOTAL EQUITY		2,915,255	2,402,229

STATEMENT OF CASH FLOWS

YEAR ENDED 30 JUNE 2005

	NOTES	2005 \$	2004 \$
CASH FLOWS FROM OPERATING ACTIVITIES			
Grants and Funds received		4,238,494	2,961,495
Payments to suppliers and employees		(3,200,220)	(3,965,116)
Interest received		95,949	74,500
NET CASH FLOWS FROM/(USED IN) OPERATING ACTIVITIES	13(a)	1,179,223	(929,121)
CASH FLOWS FROM INVESTING ACTIVITIES			
Proceeds from sale of property, plant and equipment		-	14,000
Purchase of property, plant and equipment		(11,880)	(11,700)
NET CASH FLOWS FROM/(USED IN) INVESTING ACTIVITIES		(11,880)	2,300
CASH FLOWS FROM FINANCING ACTIVITIES			
NET CASH FLOWS FROM FINANCING ACTIVITIES		-	-
NET INCREASE/(DECREASE) IN CASH HELD		1,167,343	926,821
Add opening cash balance		1,867,588	2,794,409
CLOSING CASH CARRIED FORWARD	13(b)	3,034,931	1,867,588

NOTES

30 JUNE 2005

1. CORPORATE INFORMATION

National Breast Cancer Centre is a company limited by guarantee that is incorporated and domiciled in New South Wales, Australia. The registered office and principal place of business of National Breast Cancer Centre is located at: 4/92 Parramatta Road, Camperdown, New South Wales, 2050

The principal activities during the year for the company were activities associated with the control of breast and ovarian cancer including development and implementation of guidelines about diagnosis, treatment and support and the provision of a clearing house for information and monitoring of breast and ovarian cancer control.

The entity employed 25 employees as of 30 June 2005 (2004: 22).

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

(a) Basis of accounting

The financial report is a general-purpose financial report, which has been prepared in accordance with the requirements of the Corporations Act 2001 which includes applicable Accounting Standards. Other mandatory professional reporting requirements (Urgent Issues Group Consensus Views) have also been complied with.

The financial report has been prepared in accordance with the historical cost convention.

(b) Change in accounting policies

The accounting policies adopted are consistent with those of the previous year.

(c) Cash and cash equivalents

Cash on hand and in banks and short-term deposits are stated at nominal value.

For the purposes of the Statement of Cash Flows, cash includes cash on hand and in banks.

(d) Receivables

Trade receivables are recognised and carried at original invoice amount less any provision for uncollectible debts. An estimate for doubtful debts is made when collection of the full amount is no longer probable. Bad debts are written-off as incurred.

Receivables from related parties are recognised and carried at the nominal amount due. Interest is taken up as income on an accrual basis.

(e) Recoverable Amount

Non-current assets measured using the cost basis are not carried at an amount above their recoverable amount, and where a carrying value exceeds this recoverable amount, the asset is written down. In determining recoverable amount, the expected net cash flows have been discounted to their present value using a market determined risk adjusted discount rate of 6.5%.

(f) Property, plant and equipment

Cost and valuation

Subsequent to initial recognition as an asset all classes of property, plant and equipment are measured at cost.

Depreciation

Depreciation is provided on a straight-line basis on all property, plant and equipment. Assets with an individual value greater than \$300 are capitalised and depreciated over the course of their useful life.

	2005	2004
Plant and equipment:	5 to 20 years	5 to 20 years
Motor vehicles:	5 to 15 years	5 to 15 years
Computers:	2 to 4 years	2 to 4 years
Furniture and Fitting:	13 to 14 years	13 to 14 years

NOTES CONTINUED

30 JUNE 2005

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

(g) Leases

Leases are classified at their inception as either operating or finance leases based on the economic substance of the agreement so as to reflect the risks and benefits incidental to ownership.

Operating leases

The minimum lease payments of operating leases, where the lessor effectively retains substantially all of the risks and benefits of ownership of the leased item, are recognised as an expense on a straight-line basis.

(h) Payables

Liabilities for trade creditors and other amounts are carried at cost which is the fair value of the consideration to be paid in the future for goods and services received, whether or not billed to the company.

(i) Revenue recognition

Revenue is recognised to the extent that it is probable that the economic benefits will flow to the entity and the revenue can be reliably measured. The following specific recognition criteria must also be met before revenue is recognised:

Grants and sponsorship incomes

Are recognised on an accrual basis as invoiced.

Interest

Control of the right to receive interest payment.

j) Employee entitlements

Provision is made for employee benefits accumulated as a result of employees rendering services up to the reporting date. These benefits include wages and salaries, annual leave and long service leave.

Liabilities arising in respect of wages and salaries, annual leave and any other employee entitlements expected to be settled within twelve months of the reporting date are measured at their nominal amounts based on remuneration rates which are expected to be paid when the liability is settled. All other employee entitlement liabilities are measured at the present value of the estimated future cash outflow to be made in respect of services provided by employees up to the reporting date. In determining the present value of future cash outflows, the market yield as at the reporting date on national government bonds, which have terms to maturity approximating the terms of the related liability, are used.

Employee benefit expenses and revenues arising in respect of the following categories:

- Wages and salaries, non-monetary benefits, annual leave, long service leave, and other leave benefits
- Other types of employee benefits

are recognised against profits on a net basis in their respective categories.

(k) Taxes

Income Taxes

National Breast Cancer Centre has endorsement as an income tax exempt charitable entity and as such incurs no liability to pay income tax.

Goods and Services Tax

Revenues, expenses and assets are recognised net of the amount of GST except:

- where the GST incurred on a purchase of goods and services is not recoverable from the taxation authority, in which case the GST is recognised as part of the cost of acquisition of the asset or as part of the expense items applicable; and
- receivables and payables are stated with the amount of GST included.

The net amount of GST recoverable from, or payable to, the taxation authority is included as part of receivables and payables in the Statement of Financial Position.

Cash flows are included in the Statement of Cash Flows 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 are classified as operating cash flows.

Commitments and contingencies are disclosed net of the amount of GST recoverable from, or payable to, the taxation authority.

NOTES CONTINUED

YEAR ENDED 30 JUNE 2005	NOTES	2005 \$	2004 \$
3. REVENUE FROM ORDINARY ACTIVITIES			
Revenues from operating activities			
Grant received		2,922,271	2,578,650
Sponsorship received		-	81,000
Donations received		149,028	107,832
Revenue from sale of goods		-	147
Other operating revenue		196,324	193,866
Total revenues from operating activities		3,267,623	2,961,495
Revenues from outside the operating activities			
Interest			
Other persons/corporations		95,949	74,500
Total revenues from outside the operating activities		95,949	74,500
Total revenues from ordinary activities		3,363,572	3,035,995
4. EXPENSES AND LOSSES			
Depreciation of non-current assets			
Plant and equipment		2,312	2,197
Computers		8,221	15,783
Furniture and fittings		7,077	6,392
Motor vehicle		-	2,935
Total depreciation expenses		17,610	27,307
Operating lease rental			
Minimum lease payments		113,314	138,149
Total operating lease rental		113,314	138,149
Superannuation contributions		103,745	126,085

5. INCOME TAX

National Breast Cancer Centre has endorsement as an income tax exempt charitable entity and as such does not incur a liability to pay income tax.

NOTES CONTINUED

YEAR ENDED 30 JUNE 2005

	NOTES	2005 \$	2004 \$
6. RECEIVABLES (CURRENT)			
Trade debtors		42,715	747,019
Provision for doubtful debts		-	-
		42,715	747,019
Other Debtors		1,027	370
Security Deposit		8,000	8,000
		9,027	8,370
		51,742	755,389
7. OTHER ASSETS (CURRENT)			
Prepayments		17,727	17,236
Goods and Services Tax ("GST") receivable		8,973	12,628
		26,700	29,864
8. PROPERTY, PLANT AND EQUIPMENT			
Computers			
At cost		48,535	46,715
Accumulated depreciation		(39,440)	(31,219)
		9,095	15,496
Furniture and fittings			
At cost		95,518	85,458
Accumulated depreciation		(20,588)	(13,511)
		74,930	71,947
Plant and equipment			
At cost		16,857	16,857
Accumulated depreciation		(5,734)	(3,422)
		11,123	13,435
Total written down amount		95,148	100,878

NOTES CONTINUED

YEAR ENDED 30 JUNE 2005	NOTES	2005 \$	2004 \$
8. PROPERTY, PLANT AND EQUIPMENT (CONTINUED)			
Movement in non-current assets			
Motor vehicles			
Balance at start of year		-	17,035
Additions/Adjustments		-	(14,100)
Depreciation expense		-	(2,935)
Balance at the end of the year		-	-
Computers			
Balance at start of year		15,496	25,472
Additions		1,820	5,807
Depreciation expense		(8,221)	(15,783)
Balance at the end of the year		9,095	15,496
Furniture & Fittings			
Balance at start of year		71,947	76,017
Additions		10,060	2,322
Depreciation expense		(7,077)	(6,392)
Balance at the end of the year		74,930	71,947
Plant & Equipment			
Balance at start of year		13,435	11,961
Additions		-	3,671
Depreciation expense		(2,312)	(2,197)
Balance at the end of the year		11,123	13,435
Total Property, Plant & Equipment			
Balance at start of year		100,878	130,485
Additions/Adjustments		11,880	(2,300)
Depreciation expense		(17,610)	(27,307)
Balance at the end of the year		95,148	100,878

NOTES CONTINUED

YEAR ENDED 30 JUNE 2005

NOTES
2005
\$

2004
\$

9. PAYABLES (CURRENT)

Trade creditors		109	36,520
Goods and services tax		3,836	67,029
Other creditors		196,042	147,423
		199,987	250,972

Terms and conditions

Terms and conditions relating to the above non-interest bearing financial instruments

- (i) Trade liabilities are normally settled on 30 day terms.

Other creditors are non-interest bearing and have an average term of 30 days.

10. PROVISIONS (CURRENT)

Employee entitlements	15	76,003	88,790
		76,003	88,790

11. PROVISIONS (NON-CURRENT)

Employee entitlements	15	17,276	11,728
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NOTES CONTINUED

YEAR ENDED 30 JUNE 2005

NOTES

2005

2004

\$

\$

12. RESERVES AND MEMBERS FUNDS

Members Funds	<u>2,915,255</u>	<u>2,402,229</u>
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Movements in members funds:

(a) Members Funds

Balance at start of year	2,402,229	2,814,988
Net profit / (loss)	513,026	(412,759)
Balance at end of year	<u>2,915,255</u>	<u>2,402,229</u>

13. STATEMENT OF CASH FLOWS

(a) Reconciliation of the operating profit /(loss) after tax to the net cash flows from operations

Operating (loss)/profit after tax	513,026	(412,759)
Depreciation of non-current assets	17,610	27,307

Changes in assets and liabilities

(Increase)/Decrease in trade and other receivables	706,811	(549,788)
(Decrease)/Increase in trade and other creditors	(50,986)	(30,614)
(Decrease)/Increase in employee entitlements	(7,239)	36,733
Net cash flow from (used in) operating activities	<u>1,179,223</u>	<u>(929,121)</u>

(b) Reconciliation of cash

Cash balance comprises:

– cash on hand	800	800
– cash at bank	3,034,131	1,866,788
Closing cash balance	<u>3,034,931</u>	<u>1,867,588</u>

NOTES CONTINUED

YEAR ENDED 30 JUNE 2005	NOTES	2005 \$	2004 \$
14. EXPENDITURE COMMITMENTS			
Lease expenditure commitments			
Operating leases :			
Minimum lease payments			
- not later than one year		108,784	97,918
- later than one year and not later than five years		217,569	2,206
- later than five years		-	-
Aggregate lease expenditure contracted for at balance date		326,353	100,124

15. EMPLOYEE ENTITLEMENTS AND SUPERANNUATION COMMITMENTS

Employee Entitlements

The aggregate employee benefit liability is comprised of:

Accrued wages, salaries and on-costs		3,445	16,455
Provision for annual leave (current)	10	76,003	88,790
Provisions for long service leave (non-current)	11	17,276	11,728
		96,724	116,973

Superannuation commitments

All employees are entitled to varying levels of benefits on retirement, disability or death. The superannuation plans provide defined benefits based on years of service and final average salary. Employees may contribute to the plans at various percentages of their wages and salaries. The National Breast Cancer Centre contributes to the plans at the rate of 9% of wages and salaries. Contributions by the National Breast Cancer Centre at 9% of wages and salaries are legally enforceable in Australia.

16. CONTINGENT LIABILITIES

No contingent liabilities exist as at the date of this financial report.

NOTES CONTINUED

YEAR ENDED 30 JUNE 2005

NOTES

2005

2004

\$

\$

17. SUBSEQUENT EVENTS

18. ECONOMIC DEPENDENCY

A large proportion of income is received by way of grant from the Department of Health and Aged Care, which is administered and funded by the Commonwealth government.

19. REMUNERATION OF DIRECTORS

Directors' remuneration

Income paid or payable, or otherwise made available, in respect of the financial year, to all directors of National Breast Cancer Centre, directly or indirectly, from the entity or any related party:

379,274

62,378

The number of directors of National Breast Cancer Centre whose income (including superannuation contributions) falls within the following bands is:

2005

2004

\$0 – \$9,999

11

9

\$10,000 – \$19,999

-

-

\$30,000 – \$39,999

-

-

\$40,000 – \$49,999

-

-

\$170,000 – \$180,000

-

1

\$170,000 – \$190,000

1

-

\$190,000 – \$200,000

1

-

20. AUDITORS' REMUNERATION

2005

2004

\$

\$

Amounts received or due and receivable by the auditors of National Breast Cancer Centre for:

- an audit and review of the financial report

16,500

15,750

- other audit related services

2,000

-

18,500

15,750

NOTES CONTINUED

21. RELATED PARTY DISCLOSURES

(a) The directors of National Breast Cancer Centre during the financial year were:

J. Mc Donald, B. Barraclough, C. Ewan, J. Hopper, D. Ingram, D. Iverson, M. Keaney, J. Newman, I. Olver, L. Swinburne, D. Thomas, J. Ward, and H. Zorbas.

(b) The following related party transactions occurred during the financial year:

(i) *Transactions with the directors of National Breast Cancer Centre*

Reimbursement of Business Expenses

Expenses are reimbursed to directors on a normal commercial practice basis in the same manner as reimbursed to employees.

(ii) *Transactions with director-related entities*

Postage costs for publications of \$8,693 and reimbursement of expenses of \$888 were paid to the to the Breast Cancer Network Australia of which L. Swinburne is the Chief Executive Officer.

Contract payments for project work to the value of \$33,078 were paid to the University of Wollongong at which D. Iverson is an employee.

Payments of \$382 made to the University of Melbourne for reimbursement of expenses incurred by J. Hopper.

22. SEGMENT INFORMATION

The company operates predominantly in the control of breast cancer and in one geographical area - Australia.

23. MEMBERS OF THE COMPANY

The company has 12 members as at the end of the year. All the directors are members of the company, and the maximum number of members allowed under the company constitution is 13. The Commonwealth Government is also a member of the company.

In the event of the winding up of the company, the members of the company undertake to contribute to the company's property an amount not exceeding \$100 per member.

NOTES CONTINUED

YEAR ENDED 30 JUNE 2005

24. FINANCIAL INSTRUMENTS

24(a) Interest rate risk

The company's exposure to interest rate risks and the effective interest rates of financial assets and financial liabilities at the balance date are as follows:

Financial Instruments	Fixed interest rate maturing in:											
	Floating interest rate		1 year or less		Over 1 to 5 years		More than 5 years		Non-interest bearing		Weighted average effective interest rate	
	2005	2004	2005	2004	2005	2004	2005	2004	2005	2004	2005	2004
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	%	%
(i) Financial assets												
Cash assets	3,034,931	1,867,588	-	-	-	-	-	-	-	-	-	4.75
Trade debtors		-	-	-	-	-	-	-	42,715	747,019	N/A	N/A
(ii) Financial liabilities												
Trade creditors	-	-	-	-	-	-	-	-	109	36,520	N/A	N/A

All other financial assets and financial liabilities, both recognised and unrecognised, are non-interest bearing.

24(b) Net fair values

The carrying amounts of financial assets and financial liabilities, both recognised and unrecognised, at balance date, approximate their aggregate net fair values.

(i) The following methods and assumptions are used to determine the net fair values of financial assets and liabilities

Recognised financial instruments

Cash and cash equivalents: The carrying amount approximates fair value because of their short-term to maturity.

Trade receivables and trade creditors: The carrying amount approximates fair value.

24(c) Credit risk exposures

The company's maximum exposures to credit risk at reporting date in relation to each class of recognised financial asset is the carrying amount of those assets as indicated in the statement of financial position.

Concentrations of credit risk

The trade debtors of the company are mainly comprised of Federal and State Governments in Australia. The credit risk associated with these trade debtors is considered low.

NOTES CONTINUED

YEAR ENDED 30 JUNE 2005

25. INFORMATION AND DECLARATION TO BE FURNISHED UNDER THE CHARITABLE FUNDRAISING ACT 1991

The company is registered under the Charitable Fundraising Act to conduct fundraising activities.

25 (a) Details of aggregated gross income and total expenses of fundraising appeals

	2005	2004
	\$	\$
Gross proceeds from fundraising appeals	96,118	111,824
Total direct cost of fundraising appeals	(53,738)	(83,132)
Net Surplus from fundraising appeals	42,380	28,692

25 (b) Statement showing how funds received were applied to charitable purposes.

All funds received from fundraising appeals have been allocated to fund project work. No funds are used for the purpose of administration.

26. IMPACT OF ADOPTING AASB EQUIVALENTS TO IASB STANDARDS

The company is in the process of transitioning its accounting policies and financial reporting from current Australian Accounting Standards to Australia equivalents of International Financial Reporting Standards (AIFRS) which will be applicable for the year ending 30 June 2006. The company does not expect any changes to be made upon adoption of AIFRS on total equity as at the date of transition and 30 June 2005 as well as on net surplus for the year ended 30 June 2005. The actual effects of transition to AIFRS may differ due to potential amendments to AIFRSs and Interpretations thereof being issued by the standard-setters and IFRIC and emerging accepted practice in the interpretation and application of AIFRS and UIG Interpretations.


DIRECTOR'S DECLARATION

In accordance with a resolution of the directors of National Breast Cancer Centre, I state that:

In the opinion of the directors:

- (a) the financial statements and notes of the company are in accordance with the Corporations Act 2001, including:
 - (i) giving a true and fair view of the company's financial position as at 30 June 2005 and of the company's performance for the year ended on that date; and
 - (ii) complying with Accounting Standards and Corporations Regulations; and
- (b) there are reasonable grounds to believe that the company will be able to pay its debts as and when they become due and payable.
- (c) the Statement of Financial Position gives a true and fair view of the state of affairs of the company with respect to fundraising appeals;
- (d) the provisions of the Charitable Fundraising Act 1991, the regulations under the Charitable Fundraising Act 1991 and the conditions attached to the fundraising authority have been complied with by the company; and
- (e) The internal controls exercised by the company are appropriate and effective in accounting for all income received and applied by the company from any of its fundraising appeals.

On behalf of the Board



J. McDonald
Chairman

Sydney, 12 September, 2005



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In relation to our audit of the financial report of National Breast Cancer Centre for the financial year ended 30 June 2005, to the best of my knowledge and belief, there have been no contraventions of the auditor independence requirements of the Corporations Act 2001 or any applicable code of professional conduct.

A handwritten signature in black ink that reads "Ernst & Young".

Ernst & Young

A handwritten signature in black ink that reads "Madeleine Mattera".

Madeleine Mattera
Partner
12 September 2005

Independent audit report to members of the National Breast Cancer Centre

Scope

The financial report and directors' responsibility

The financial report comprises the statement of financial position, statement of financial performance, statement of cash flows, accompanying notes to the financial statements, and the directors' declaration for the National Breast Cancer Centre (the company), for the year ended 30 June 2005.

The directors of the company are responsible for preparing a financial report that gives a true and fair view of the financial position and performance of the company, and that complies with Accounting Standards in Australia, in accordance with the *Corporations Act 2001* and complies with the Charitable Fundraising Act 1991. This includes responsibility for the maintenance of adequate accounting records and internal controls that are designed to prevent and detect fraud and error, and for the accounting policies and accounting estimates inherent in the financial report.

Audit approach

We conducted an independent audit of the financial report in order to express an opinion on it to the members of the company. Our audit was conducted in accordance with Australian Auditing Standards in order to provide reasonable assurance as to whether the financial report is free of material misstatement. The nature of an audit is influenced by factors such as the use of professional judgement, selective testing, the inherent limitations of internal control, and the availability of persuasive rather than conclusive evidence. Therefore, an audit cannot guarantee that all material misstatements have been detected.

We performed procedures to assess whether in all material respects the financial report presents fairly, in accordance with the *Corporations Act 2001*, including compliance with Accounting Standards in Australia, the Charitable Fundraising Act 1991 and other mandatory financial reporting requirements in Australia, a view which is consistent with our understanding of the company's financial position, and of its performance as represented by the results of its operations and cash flows.

We formed our audit opinion on the basis of these procedures, which included:

- examining, on a test basis, information to provide evidence supporting the amounts and disclosures in the financial report, and
- assessing the appropriateness of the accounting policies and disclosures used and the reasonableness of significant accounting estimates made by the directors.

While we considered the effectiveness of management's internal controls over financial reporting when determining the nature and extent of our procedures, our audit was not designed to provide assurance on internal controls.

We performed procedures to assess whether the substance of business transactions was accurately reflected in the financial report. These and our other procedures did not include consideration or judgement of the appropriateness or reasonableness of the business plans or strategies adopted by the directors and management of the company.

Independence

We are independent of the company, and have met the independence requirements of Australian professional ethical pronouncements and the *Corporations Act 2001*. We have given to the directors of the company a written Auditor's Independence Declaration, a copy of which is included in the Directors' Report. In addition to our audit of the financial report, we were engaged to undertake the services disclosed in the notes to the financial statements. The provision of these services has not impaired our independence.

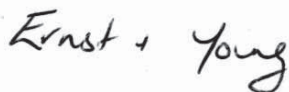
Qualification

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

Qualified Audit Opinion

In our opinion, except for the effects on the financial report of such adjustments, if any, as might have been required had the limitation referred to in the qualification paragraph above not existed:

- (a) the financial report of National Breast Cancer Centre is in accordance with the *Corporations Act 2001* including:
 - (i) giving a true and fair view of the company's financial position as at 30 June 2005 and the performance of the company for the year ended on that date; and
 - (ii) complying with the Accounting Standards and the *Corporations Regulations 2001*; and
 - (iii) other mandatory professional reporting requirements in Australia.
- (b) the financial report of National Breast Cancer Centre shows a true and fair view of the financial results of fundraising appeals for the year ended 30 June 2005;
- (c) the financial report has been properly drawn up, and associated records of National Breast Cancer Centre have been properly kept during the year ended 30 June 2005 in accordance with the Charitable Fundraising Act 1991;
- (d) money received as a result of fundraising appeals conducted during the year ended 30 June 2005, has been properly accounted for and applied in accordance with the Charitable Fundraising Act 1991; and
- (e) there are reasonable grounds to believe that National Breast Cancer Centre will be able to pay its debts as and when they fall due.



Ernst & Young



M Mattera
Partner
Sydney
12 September 2005

Acknowledgements and listings

STAFF

Helen Zorbas	Director
Fiona Booth	Executive Assistant
Robert Cotter	Resource Assistant
Alison Evans	Program Manager, Breast Cancer
Jane Francis	Program Manager, Ovarian Cancer
Bree Hancock	Media & Communications Coordinator
Christine Hyde	Office Coordinator
Thea Kremser	Project Officer
Karen Luxford	Deputy Director
Lucinda Matthews	Executive Assistant
Caroline Nehill	Senior Project Officer
Janice O'Brien	Project Assistant
Lisa Robinson	E-Communications Manager
Melinda Seed	Business Manager
Kaye Taing	Executive Assistant
Rosie Vagg	Research Analyst
Elmer Villanueva	Epidemiologist
Alison Windmill	Design & Resources Coordinator

Honorary Positions

Emeritus Professor Tom Reeve AC CBE NBCC Patron

Professor Alan Rodger International Advisor

NBCC ADVISORY STRUCTURE

The achievements of the NBCC would not be possible without the contribution of time and expertise, both freely given, of the members of our expert advisory groups (listed below) and working groups.

Implementation Advisory Group

CHAIR

Dr Jane Turner Queensland

MEMBERS

Professor Sanchia Aranda Victoria
 Ms Cathy Balding Victoria
 Associate Professor Michael Bilous NSW
 Associate Professor John Boyages NSW
 Professor Jo-anne Brien NSW
 Dr Heather Buchan Victoria
 Professor Enrico Coiera NSW
 Ms Elise Davies Victoria
 Professor Stewart Dunn NSW
 Professor Richard Hays Queensland
 Dr Marjorie Kossoff NSW
 Professor Linda Kristjanson WA
 Dr Amanda McBride NSW
 Ms Onella Stagoll OAM Victoria
 Dr Craig Underhill Victoria
 Dr Gerry Wain NSW
 Professor Patsy Yates Queensland
 Dr Amanda Young Tasmania

Information Advisory Group

CHAIR

Dr Martin Stockler NSW

MEMBERS

Dr Fran Boyle NSW
 Associate Professor Phyllis Butow NSW
 Associate Professor Sandra Jones NSW
 Dr Liz Kenny Queensland
 Mr Jim Kollias SA
 Ms Nicole Livingstone-Stevenson Victoria
 Ms Prue MacSween NSW
 Ms Jocelyn Murphy NSW
 Professor Beth Newman Queensland
 Ms Dorothy Reading Victoria
 Dr Mary Rickard NSW
 Ms Susan Rooney WA
 Professor Martin Tattersall AO NSW
 Dr Julie Thompson Victoria
 Professor Kate White Queensland
 Dr Nicholas Wilcken NSW

Data Advisory Group

CHAIR

Dr Jane Young NSW

MEMBERS

Dr Dorota Gertig Victoria
 Professor Graham Giles Victoria
 Professor Jane Hall NSW
 Mr John Harding ACT
 Professor David Hill AM Victoria
 Associate Professor Judy Kirk NSW
 Dr Anne Krickler NSW
 Professor Guy Maddern SA
 Ms Jennifer Muller Queensland
 Mr David Oliver WA
 Professor David Roder AM SA
 Professor David Steel NSW
 Ms Susan Timbs Victoria
 Dr Penny Webb Queensland
 Dr Nikolajs Zeps WA

Clinical Expert Advisory Panel

Associate Professor Roger Allison Queensland
 Associate Professor Michael Bilous NSW
 Dr Melissa Bochner SA
 Dr Fran Boyle NSW
 Associate Professor Judy Kirk NSW
 Dr Amanda McBride NSW
 Dr Mary Rickard NSW
 Professor David Roder AM SA
 Ms Onella Stagoll OAM Victoria
 Dr Jane Turner Queensland
 Dr Gerry Wain NSW
 Professor Kate White NSW

Women's Advisory Network

CHAIR

Ms Ita Buttrose AO OBE NSW

MEMBERS

Ms Bronwyn Bancroft NSW

The Hon Justice Margaret Beazley NSW

Professor Mary Ann Bin-Sallik NT

Ms Yvonne Buckley TAS

Ms Penny Button QLD

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Ms Teresa Dyson VIC

Ms Justine Ferrari NSW

Ms Valerie Fisher AO OBE VIC

Ms Patria Jafferries WA

Ms Maxine McKew NSW

Ms Di Morrissey NSW

Ms Sue Neales VIC

Ms Margaret Pomeranz NSW

Ms Ann Sanders NSW

Ms Barbara Stone AM NSW

Ms Sandra Sully NSW

Ms Vicki Wilson QLD

PRESENTATIONS AND CONFERENCES AND PAPERS IN PEER-REVIEWED JOURNALS

Conference papers or presentations by NBCC staff (2003–04)

Drummond R, Power A, Evans A, Luxford K, Blakey D, Delaney G, Rodger A. Changes in practice of breast cancer radiotherapy 1998–2002: an Australasian survey. Leura V International Breast Cancer Conference, Sydney, 10-14 November 2004

Evans A, Luxford K, Nehill C, Power A, Zorbas H. Clinician perceptions of clinical practice guidelines. 2nd Guidelines International Network Conference – Evidence in Action, Wellington, 1-3 November 2004.

Luxford K, Hill D, Bell R. The Matrix: a tool for assisting with guideline implementation. 2nd Guidelines International Network Conference – Evidence in Action, Wellington, 1-3 November 2004.

Luxford, K. Improving psychosocial care for cancer patients. 13th International Conference on Cancer Nursing, Sydney, 8-12 August 2004.

Metelovski E, Luxford K, Evans A, Campbell D, Rankin N. Improving supportive care for rural women with breast cancer: a national evaluation. Clinical Oncological Society of Australia (COSA) 31st Annual Scientific Meeting, Canberra, 24-26 November 2004.

Metelovski E, Luxford K, Evans A, Campbell D, Rankin N. Breast care nurses (BCNs) – A national perspective on their role in improving supportive care in rural and remote areas. 7th National Breast Care Nurses Conference, Melbourne, 24-25 February 2005.

Turner J, Fletcher J, Luxford K. Implementing evidence-based psychosocial care. Clinical Oncological Society of Australia (COSA) 31st Annual Scientific Meeting, Canberra, 24-26 November 2004.

Turner J, Fletcher J, McAvoy B, Luxford K. Depression and cancer: Using the Clinical practice guidelines for the psychosocial care of adults with cancer. 39th Australian Psychological Society Annual Conference, Sydney, 29 September – 3 October 2004.

Vaughan K, Evans A, Luxford K, Villanueva E, Zorbas H. Evidence-based information for health practitioners:

dilemmas and solutions. 2nd Guidelines International Network Conference – Evidence in Action, Wellington, 1-3 November 2004.

Zorbas H. Senate Community Affairs Committee, Inquiry into Cancer Services, Sydney, April 2005.

Zorbas H. The Cancer Australia Workshop, The Commonwealth Department of Health and Ageing, Canberra, March 2005.

Zorbas H, Luxford K, Evans A. Breast 2005 Conference, Best Practice Guidelines, Sydney, June 2005.

Zorbas H, Luxford K, Evans A, Redman S, Rainbird K, Price N. The National Multidisciplinary Care Demonstration Project. Leura V International Breast Cancer Conference, Sydney, 10-14 November 2004

Papers by NBCC staff (published in 2004–05)

Drummond R, Power A, Evans A, Luxford K, Blakey D, Delaney G, Rodger A. Changes in practice of breast cancer radiotherapy 1998-2002: An Australasian survey. *Australasian Radiology*. 2005; 49(1): 44-52.

Turner J, Zapart S, Pedersen K, Rankin N, Luxford K, Fletcher J. Clinical practice guidelines for the psychosocial care of adults with cancer. *Psycho-Oncology*. 2005; 14(3): 159-173.

Zorbas H, Luxford K, Evans A, Villanueva EV. Re: Trends in the treatment of ductal carcinoma in situ of the breast [letter]. *Journal of the National Cancer Institute*. 2004; 96(16): 1258; author reply 1259-60.

NBCC COMMITTEE REPRESENTATION

Dr Helen Zorbas

- Member, Health Advisory Committee of the NHMRC
- Member, National Cancer Strategies Group
- Member, Australian Screening Advisory Committee (ASAC)
- Chair, ASAC Quality Improvement & Workforce Working Group
- Chair, Microwave Cancer Review Committee of the NHMRC
- Member, NHMRC Hormone Replacement Therapy Working Party
- Member, NHMRC Consumer Participation Working Group
- Member, Australian Cancer Network (ACN) Council
- Member, National Cancer Control Initiatives (NCCI) Management Committee
- Member, Cancer Screen NSW Advisory Committee
- Member, RACS ASERNIP-S Breast Audit Clinical Advisory Committee (ACAC)
- Member, RACS ASERNIP-S ACAC Outliers Committee
- Member, Victorian Cooperative Oncology Group (VCOG) Breast Cancer Committee

Dr Karen Luxford

- Member, ASAC Monitoring and Evaluation Working Group.
- Member, National Institute of Clinical Studies Evidence Uptake Networks, Review Panel
- Member, European School of Oncology ACE Reporter Award Judging Panel
- Executive Committee, Health Services Research Association of Australia & New Zealand, founding member and Treasurer

- Member, NCCI Psychosocial Guidelines National Implementation Committee.
- Member, The Cancer Council of Australia, Medical and Scientific Committee.
- Member, ACN Guideline Implementation Steering Committee.
- Member, ACN Accreditation Development Steering Committee.
- Member, Australian Guidelines for Type 1 Diabetes in Children Committee.
- Member, Organising and Scientific Committees, 4th Health Services & Policy Research Conference 2005.
- Member, Breast Cancer Knowledge Online Project, Advisory Group.
- Member, Border Cancer Care Coordination Project, External Advisory Group
- Member, Cancer Institute NSW Quality and Clinical Effectiveness Advisory Committee.

Dr Elmer Villanueva

- Member, UICC Australian and Southeast Asian TNM Committee.
- Member, National Cancer Strategies Group, Data and Monitoring Sub-committee

Dr Alison Evans

- Member, Steering Committee, NCCI Lung Cancer Guidelines Implementation Project.
- Member, VCOG Breast Cancer Committee

NEW PUBLICATIONS

Consumer information

Epithelial ovarian cancer – Understanding your diagnosis and treatment. Camperdown (NSW): National Breast Cancer Centre, 2005

Ovarian Cancer in Australia. Camperdown (NSW): National Breast Cancer Centre, 2005

Answers to frequently asked questions about Ovarian Cancer. Camperdown (NSW): National Breast Cancer Centre, 2005

Skin care and radiotherapy. Fact sheet, 2004

Breast Cancer: Any change is worth talking about. Brochure, 2004

Breast Cancer: Any change is worth talking about. Leaflet, 2004

Breast cancer: Any change is worth talking about. Poster, 2004

Any change is worth talking about – Community Relations Kit. Presentation kit for community groups, 2004

Recommendations, reports, research and data reviews

Breast fine needle aspiration cytology and core biopsy; a guide for practice. Camperdown (NSW): National Breast Cancer Centre, 2005

Ductal Carcinoma in Situ (DCIS) in women in New South Wales: 1995-2000. Camperdown (NSW): National Breast Cancer Centre, 2004

Early detection of breast cancer - position statement. Camperdown (NSW): National Breast Cancer Centre, 2004

Strengthening Support for Women with Breast Cancer: National Process Evaluation Report. Camperdown (NSW): National Breast Cancer Centre, 2005

A Core Strategy for Cancer Care: Accreditation of Cancer Services – A Discussion Paper. Camperdown (NSW): National Breast Cancer Centre, The Cancer Council Australia and Australian Cancer Network, 2005

Multidisciplinary meetings for cancer care: A guide for health service providers. Camperdown (NSW): National Breast Cancer Centre, 2005

Sustainability of Multidisciplinary Cancer Care (MDC). Camperdown (NSW): National Breast Cancer Centre, 2005

Multidisciplinary Care (MDC) in Australia: summary brochure. Camperdown (NSW): National Breast Cancer Centre, 2005

Corporate

National Breast Cancer Centre's Strategic Directions 2004-2007. Camperdown (NSW): National Breast Cancer Centre, 2004

NBCC Annual Report 2003 – 2004. Camperdown (NSW): National Breast Cancer Centre, 2005

Newsletters

Breastfax – the monthly newsletter of the NBCC

e-Clinical Update – the NBCC's bimonthly electronic newsletter for clinicians.

From the source – the NBCC's quarterly insert into The Beacon.

Ovarian e-upd@te – the bimonthly newsletter of the NBCC's Ovarian Cancer Program.

SUPPORTERS AND DONORS

The NBCC thanks all individuals and organisations who donated funds or provided pro bono support to assist our work in 2004–05 (including those who contribute anonymously).

Adele & Brian Winter	M & A Melki	The Cancer Council Australia
AMP	MA Payne	Theo & Fay Isak
AMP Foundation	Macquarie Bank Foundation	Toongabbie Pottery
Andrew Messenger	Margaret & Graeme Seers	University of Western Sydney – Library Staff
Angelo Christian	Michelle Primmer	Vanessa Gunner
Australian Consolidated Press	Mr & Mrs C Mormanis	Werribee Fernwood Fitness Centre
Breast Cancer Network Australia	National Breast Cancer Foundation	Westin Hotel
Bruce Williams	Nelune Rajapakse	Women In Finance
Carole Scott	New Idea	Woolworths
Caroline Howard	Nundah State School	
Chanel	Pascoe Vale Girl's Secondary College	
Dandenong Tennis Club	Patrick Williams	
Dr Andrew Barling	PF & L Collins Contractors Pty Ltd	
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John Christopher	Staging Connections	
John Karatsoreos	Telopea Park School After School Programme	
JS McMillan Printing Group	Terri Piccioli	
Kambala Anglican School	The Australian Women's Weekly	
Katrina Farquhar		



NATIONAL BREAST CANCER CENTRE

incorporating the Ovarian Cancer Program

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