

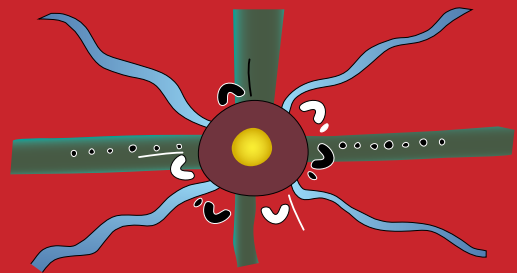


Western Australian
AIDS COUNCIL



30 YEARS SIDE BY SIDE
IN THE RESPONSE **TO HIV/AIDS**
1985-2015

ANNUAL REPORT 2016



NGALA KAADITJ WADJUK MOORT KEYEN KAADAK NIDJA BOODJA

We acknowledge Noongar people as the original custodians of the land on which our office stands



We acknowledge those around the world who have lost their lives to AIDS and also those living with HIV who continue to face stigma and discrimination every day

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2016. IN NUMBERS

421

Counselling
sessions



50% Increase in HIV
testing over three years

89% of 70

participants in Aged Care Training, conducted by WA AIDS rated
both the training content and the trainers as excellent.

2460

visits from

440

individuals across

159

drop-in sessions at

**Freedom
Centre**

**40
of 68**

Aboriginal PLHIV
in WA are
connected to
WA AIDS

4,186

Total M Clinic Clients

2 Community Forums

30% Increase in overall
attended appointments

1200
school staff have
received training by
Safe Schools WA

30

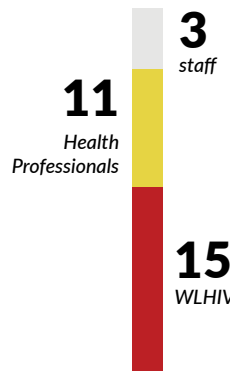
years serving the community



12,275 young people
engaged at KISS Leavers.

\$65,809 invested in
our Volunteer Program,
yielding approximately
\$296,140 in economic
value

Over **1.7 million** pieces of NSEP
equipment delivered (29% increase)



Attendees at a special
evening for WLHIV



13,200
connected people
across social media



10,200
Safe Sex Packs
Distributed at
Leavers Events

11,297
NSEP clients



CHAIRPERSON'S REPORT

The past twelve months has been a busy but effective year for the Council.

This year commenced with the Council's 30th anniversary celebrations with an event at Parliament House attended by a wide range of dignitaries, partners, staff, volunteers and friends. The event provided an excellent opportunity to acknowledge the work of the Council in response to the HIV/AIDS epidemic in WA. I felt honoured that one of my first acts as Chairperson was to present a number of awards at our second 30th anniversary celebration, held for community the following week, to some of the people that have been instrumental in our collective response to HIV/AIDS in WA over the last 30 years.



The 30th anniversary celebrations provided the Council with time to reflect on all of the good work that the Council has done over time and to respect the partnership and bipartisan political support that has provided such a solid foundation. However, when all the celebrating was done the new Board went to work ensuring that the right structures, governance and planning was in place to ensure that our good work continues into the future.

The end of 2015 saw the end of our first three years of core funding via agreements with the Department of Health Sexual Health and Blood-borne Virus Program. The Board was advised in November 2015 that the Department would take up the first of its two, one-year funding extensions. The Board of Management expects the final one-year extension to be granted at the end of 2016 and conclude in December 2017.

A significant part of the Treasurer's and the Board's work this year has been on ensuring the continued financial stability of the agency and ensuring that sufficient reserves are held to provide flexibility should the agency's funding situation negatively change at the end of the current core funding period. In particular, the Board has been satisfied with the work of the Chief Executive and Council staff in ensuring our programs stand up to an expected competitive tendering process and can be presented with clear evidence of their outcomes. In the period through until the end of 2017 it is anticipated that this current focus for the Board will continue, along with the development of a Revenue Strategy that identifies future funding opportunities and ensures that fundraising activities continue to respond to the needs of the agency and our communities.

This year the Board continued a strategic planning process to set priorities for the agency until 2021. This involved the identification of four key foci for us going forward and incorporates clear measures that ensure we meet the needs of the communities we serve. This work is near complete and I am grateful for the work of the management team, staff and Board throughout this process.

Despite being the first State to have an operational directive for Department of Health staff on the prescribing of PrEP, prescribing rates for PrEP have been disappointingly low and WA has fallen behind some other States in terms of ease of access to this crucial proven HIV prevention tool. Despite efforts to secure funding for the provision of free access for PrEP in WA it became clear to the Board this year that we must take steps to improve access. The Board endorsed the allocation of funding to enable the prescribing of PrEP at M Clinic and to break down some of the barriers that exist for clients in obtaining it through personal importation from overseas. The work on implementing this program must continue.

I would like to extend my sincere thanks for the hard work of the volunteers, staff, management and Board of the Council for the outstanding contributions over a very busy twelve months and look forward to seeing what the Council can achieve in its 32nd year!



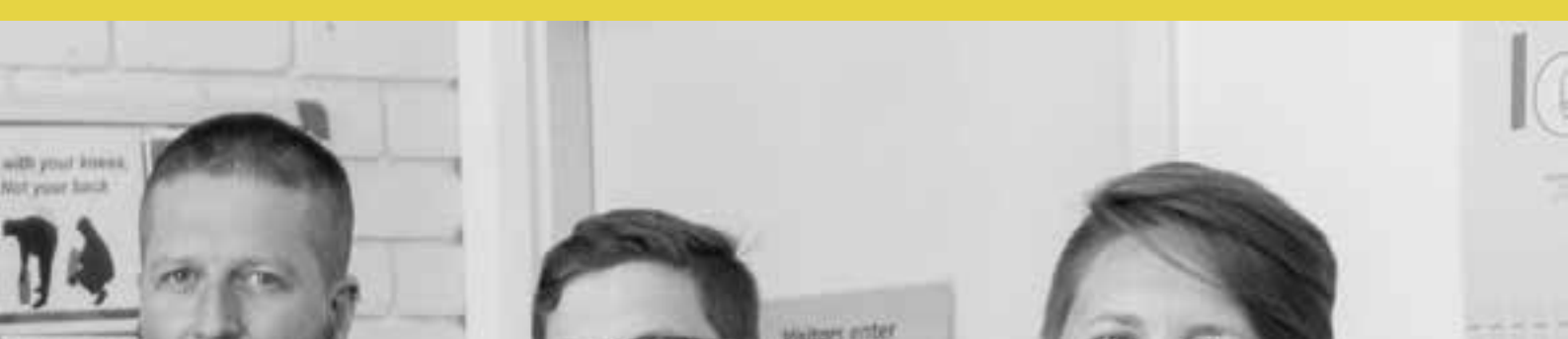


CEO's REPORT

This year was the first full-year's implementation of the Safe Schools Program, funded on a two-year contract with the Foundation for Young Australians. The year was characterised by significant levels of misinformed, inaccurate, mischievous and dangerous public comment from groups unable to respect a notion that schools must provide a safe environment, including for same-sex attracted and gender diverse students. Safe Schools is primarily a professional development program for teaching and allied staff, and despite the negative media, demand from WA high schools remained high. Indeed, more than 1,200 teachers accessed training and development through the program. Safe Schools is an important addition to 22 years work with young people delivered through Freedom Centre, which itself saw a significant increase in visitor numbers and other access to its resources. Across all of our programs, we directly engaged with well over 20,000 young people.

8 Pre-exposure Prophylaxis (PrEP) has absorbed a lot of energy. The WA Department of Health published an Operational Directive in August 2015, which opened the way for government employed doctors to prescribe PrEP to patients that met prescribing guidelines and who wanted it. This was an important initiative, but in the face of large scale trials announced shortly afterwards in NSW and Victoria and subsequently in Queensland, it was clear that a growing inequity was developing between the Eastern States and gay and bisexual men in WA regarding access to this proven and effective prevention tool. Whilst Eastern citizens in large numbers can access PrEP for free, those in our jurisdiction can either purchase it without subsidy or alternatively arrange for private importation at a lower, but not insignificant cost. Early attempts to persuade the government to address this imbalance were rebuffed, however the importance of maximising access remains and we implemented a number of initiatives. These included a substantial awareness campaign, peer education sessions at Fair Day and the approval of funds to help facilitate PrEP purchase for those who couldn't otherwise afford it.

However, affordability is but one of the barriers to achieving a higher uptake of PrEP in WA. Another is capacity constraints on sexual health services necessary to initiate and provide ongoing support for PrEP users. M Clinic has played a critical role. By year's end, it was estimated that there were more than 200 men in WA accessing PrEP, and of these, 70 (or more than one third) are receiving ongoing support and sexual health screening through our clinic. We are continuing to lobby for investment from government, including funding places for WA residents on one or more of the East Coast trials.



The ability of M Clinic to participate in PrEP support has been facilitated by continuing improvements in productivity, which have resulted in a 50% increase in annual testing numbers over the last three years and 100% increase since it opened in 2010. This has been achieved without any increase in costs beyond CPI adjustments. M Clinic now has more than 4,000 patients.

By September 2015, it became clear that we were experiencing a spike in diagnoses of infectious syphilis and gonorrhoea throughout the greater Perth Metropolitan area. The initial spike became an ongoing upward trend and demanded a substantial response. This took the form of the HIV/STI Action Plan, which incorporated an integrated mix of approaches increasing awareness, motivating action and increasing the capacity for gay and bisexual men to access sexual health screening services through general practice. We are very grateful and acknowledge the generous support provided by a number of general practitioners in developing an effective “working with your GP” initiative.

Despite the additional investments required for the HIV/STI Action Plan and PrEP awareness and access, we maintained good budgetary control and provided a fourth consecutive surplus. Whilst not large, these surpluses are a necessary buffer for a less certain funding environment in the future.

Contracts covering the bulk of our funding conclude in December 2017, and prior to this we anticipate that we will participate in a round of competitive tenders. This presents us with two key challenges.

The first is to ensure that we effectively influence how the specifications for these tenders are shaped and that the best interests of our clients and key populations are represented.

The second challenge is to continue the work we have been developing over the last couple of years in building the evidence base that demonstrates the additional and specific value that services we deliver offer relative to non-community based providers.

In regard to this second challenge, we were a partner in a major research program during the year; “The Value of Community Control in Australia’s HIV Response”. This was a ground-breaking study, and was presented at the International AIDS Conference in Durban and will be presented again at the 2016 Australasian HIV Conference.



CEO's REPORT



These three key attributes of AIDS Councils lead to the following conclusions:

- The key differentiating factor of AIDS Councils is that, as organisations, we understand and are deeply embedded in HIV affected communities. This allows us to design and develop more meaningful and successful services and programs targeted at communities
- HIV affected communities have had a long-standing relationship with AIDS Councils, which has fostered a sense of trust and respect

During the year, we also made some additional investments in our human resources in order to deliver beyond the strict service agreement outcomes and to leverage our community position in greater community benefit. Specifically, we expanded our Needle and Syringe Exchange Program (NSEP) by developing a project to identify and implement initiatives aimed at offering benefits beyond 'hardware exchange', and to address issues relating to broader impacts on social, mental and sexual health through the use of drugs and alcohol. Chemsex is one such example, and we continue to collaborate with the Mental Health Commission and the Department of Health in developing a high level policy response. We also developed a Gay Men's Health Strategy in order to provide expanded and more effective support for gay men generally.

Engaging with such a broad and diverse range of stakeholders places a significant emphasis on communication. We have been working within a three-year Communications Strategy, which was reviewed and updated. Over time, we have built up significant social media assets and expanded our reach both in terms of audience and geography. This year, we rebuilt and relaunched our main website and introduced an e-newsletter that is delivered to a large database and has achieved a high level of engagement. We have also expanded our work with media and taken advantage of the media training we have provided to staff over the last two years.

The reputation of our organisation and the regard in which we are held was demonstrated at two 30th Anniversary events held in September 2015. These celebrated the partnerships that have underpinned our work throughout our history. There is no doubting the support we have continue to receive across the political spectrum, but in reality it is the support of community and most particularly, the tens of thousands of individuals that trust us to deliver high quality services through our entire range of activities.

In a period of change, good governance is crucial. We are extremely grateful for the work of the Board this year, including its subcommittees, in helping to build a more comprehensive approach to risk management, a more robust policy framework and to ensure that we manage our financial and physical resources more effectively.

We are a human services organisation, and the contribution of our professional, dedicated and talented management and staff is deeply appreciated. The difference we make in the lives of so many is a testament to the determination and passion for the work we do and for the communities we serve.

30TH ANNIVERSARY.

WA AIDS COUNCIL: 30 YEARS TOGETHER WITH OUR PARTNERS AND THE COMMUNITY

"We have evolved as a result of the changing circumstances of an epidemic that frequently presented unexpected challenges."

We celebrated our 30th anniversary in September last year with two events acknowledging our stakeholders, partners and community. Our history is one of evolution, innovation and adaptation. In the beginning, we relied on money fundraised or donated largely from Western Australia's gay community for our activities. It was not until 1989 that we received public funding with the development of the first National HIV-AIDS Strategy.



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Three decades later we continue to focus on prevention and supporting those living with HIV to enjoy improved social, mental and physical health. Importantly, we now have a realistic possibility of ending HIV transmission within a generation.



We used this as an opportunity to reflect over the last three decades of partnership with key stakeholders, and particularly WA Governments who have much to be proud of in responding to the country's most dynamic and at times challenging AIDS crisis and ongoing HIV epidemic. The WA Government has demonstrated strong leadership in providing support to all of us seeking to minimise the transmission and social and personal impacts of this still incurable disease.

EVOLVE. INNOVATE. ADAPT

Both of the 30th anniversary celebration events were well-attended. Our first event was held on the 30th September 2015 at Parliament House, hosted by Minister for Health; Tourism, Hon Dr Kim Hames MB BS JP MLA. After a welcome to country from Kart Koort Wiern - Ingrid Cumming, Council stakeholders, former and current staff, volunteers and guests heard from Minister Hames, CEO Andrew Burry, Prof John Cordery, Provost & Senior Deputy Vice Chancellor, Curtin University, and Dr Graham Brown, Senior Research Fellow, La Trobe University.

The second event was held on the 10th October 2015 at WA Ballet Centre and acknowledged the support of our communities. Newly appointed Chairperson Sam Hastings opened proceedings as host for the day followed by a Welcome to Country by Daniel Garlett of the Dadajaal Dance Company. Paul Baines spoke as a NAPWHA representative followed by a captivating performance by the Gay & Lesbian Singers of WA (GALSWA).



We have evolved as a result of the changing circumstances of an epidemic that frequently presented unexpected challenges. We adapted to incorporate the lessons we learned along the way. Innovation is the bridge that links the natural process of evolution and the more managed process of adaptation, and it is innovation that will be ever more central to our work as we move ahead.

CLINICAL SERVICE: SERVICES AND SUPPORT FOR PLHIV

"The capacity to work in a cohesive multidisciplinary model with relevant HIV Clinics, hospital based Social Workers and other primary and allied health is essential in delivering high quality coordinated care services."

SUPPORTING HEALTH AND PERSONAL EMPOWERMENT (SHAPE) & CASE MANAGERS

Individual advocacy and support for people living with HIV is provided within Clinical Services at a number of levels. The Outreach programs SHAPE Officers and the Case Managers provide support that is client-centred, focused on recovery & resilience and can be provided on an out-reach or in-reach basis, dependent upon a client's capacity and needs.

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This year saw an increase in overall attended appointments by 30%. The majority of presentations involved poverty, housing, medical, mental health, and psycho-social issues. The key to good outcomes and an increase in PLHIV health and well-being continues to be our flexibility and capacity to ensure substantive equality, which is at the heart of our engagement. The diversity of our client base requires such an approach. The capacity to work in a cohesive multidisciplinary model with relevant HIV Clinics, hospital based Social Workers and other primary and allied health is essential in delivering high quality coordinated care services.

HIV POSITIVE PEER WORKSHOPS AND SOCIAL ENGAGEMENT

We continued to provide a broad range of opportunities for PLHIV to develop additional skills, take on new information, debate new and emerging issues and engage with peers in social networking spaces. Our program facilitated workshops focused on disclosure, relationships, treatments, HIV cure, diet & nutrition, fitness and health, newly diagnosed workshop, informative mini-series, the annual Treatments Forum, Planet Positive, St8 Up dinners and Community BBQ's.

In addition to group work, the HIV Positive Peer Education Officer provided individual advocacy and support for a diversity of issues including but not limited to; emotional & psychological support, new diagnosis support, migration support, travel, employment, insurances, disclosure issues, relationships and more.



A person is sitting on a sandy beach, looking out at the ocean. The sky is filled with soft, white clouds. The person is in the foreground, slightly out of focus, with their back to the camera. The ocean is in the middle ground, and the sky is in the background.

COUNSELLING

The Counselling Service not only provides crucial therapeutic counselling for vulnerable and at-risk clients, the service also contributes across the breadth of the organisation. Counsellors are involved in HIV/BBV Pre-Post Test Discussion training both internally for staff and externally in collaboration with the Training & Development Officer in the Organisational Development Department. One Counsellor is co-facilitator for the 'Beyond Positive' which is a psycho-educational program for Gay & Homosexually active men living with HIV. The Counsellor co-developed the program which initially will be run twice annually.

Counsellor Ben Bradstreet also remained involved with AFAO International in follow-up of a 3 months' secondment in Bangkok. Ben has been providing assistance from Perth office in activities such as following up at the country level with 13 countries in the region, to construct a report on their progress toward delivering PrEP in small demonstration projects, and plans to scale up this delivery in the future.

There were 41 new referrals to the Counselling service, with a total of 421 Counselling sessions being provided for clients, an increase of 10% from last year.

Access to PrEP continues to be an emerging issue. While there is a gradual increase in awareness about it amongst counselling clients, many are still unsure about what it is and how to access it, indicating the need for sustained PrEP education, campaigns, availability and outreach.

The use of crystal methamphetamine (Meth or ice) also remains an significant issue for our clients, and particularly those who are HIV positive. As with all drug and alcohol use, people reporting meth use in counselling are at various stages of change, with some coming in order to attempt reducing or stopping use, and others coming for other reasons and discussing their use as issues emerge.

HIGHLIGHTS FROM 2015-2016

HIV & AGEING

Whilst our suite of services has a focus on individual service and support, the department also ensures that systemic advocacy is targeted in regards to emerging issues.

One of the emerging issues for Perth and WA is the ageing population of people living with HIV. With 50% of PLHIV in WA aged 50 and older, there will be a time in the future when numbers of PLHIV will be accessing some form of residential or community aged care support.

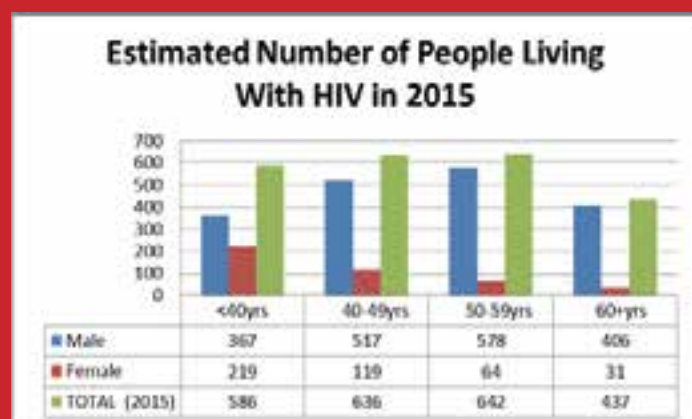
The WA AIDS Council facilitated a workforce development pilot program with Brightwater Aged Care Group, and has since trained the Australian Aged Care Quality Agency assessors. These are key accreditation staff who can put the issue of HIV and ageing on the agenda now, not later. We will be vigilantly working in the aged care sector to continue this important work into the future.



WORKING WITH ABORIGINAL PEOPLE LIVING WITH HIV

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In September 2015, the Clinical Services SHAPE & Case Manager programs were showcased at the Anwernekenhe National Aboriginal and Torres Strait Islander HIV/AIDS Alliance (ANA) Conference in Alice Springs. The program highlighted its ongoing capacity to successfully work with Aboriginal clients with complex and challenging health and psychosocial issues.



Our support programs have a long and proud history of working with Aboriginal people living with and/or affected by HIV, and in fact our working model was underpinned by the strength, elements and values of substantive equality well before the term came to be defined in regards to policy development. Our SHAPE Outreach Officers and Case Managers healthy working relationships with our clients is based on trust, respect and working at a client's pace.

Of the 68 Aboriginal people living with HIV in Western Australia, our programs have varying degrees of contact with 40 clients (58%). Aboriginal Health Promotion Officer Shahmir Rind, Reconciliation Action Plan (RAP) \ Working Group Chair Anthony Smith and Lisa Tomney, Manager of Clinical Services represented the WA AIDS Council along with WA 'Positive Aboriginal Torres Strait Islander Network' committee member and HIV Positive Aboriginal woman Lorna who shared her journey with conference delegates.

WOMEN'S FORUM 2016 - 'A SAFE & SUPPORTIVE SPACE FOR WOMEN LIVING WITH HIV AND WOMEN WHO WORK IN THE HIV SECTOR'

In June, we hosted a very successful event for women living with HIV and women who work as health professionals in the sector. In attendance were 15 women living with HIV (WLHIV), 11 health professionals and three WA AIDS Council staff members.

Women lead busy lives and in between careers, kids and everything else that consumes their days, it is often that women don't take time out for themselves. The forum provided WLHIV a safe space to come together as peers, engage with clinicians outside of the hospital setting and discuss all things old, new, and in the pipeline.

Presentations were facilitated by Dr Moira Wilson from Fiona Stanley Hospital, Dr Susan Herrmann from the Murdoch University's Institute for Immunology & Infectious Diseases, Clinical Nurse Specialist Allison Cain from Royal Perth Hospital, Diane Lloyd from the National Association of People Living with HIV Australia's 'Femme Fatales' network and Liz Walker, HIV Positive Peer Education Officer at the WA AIDS Council.

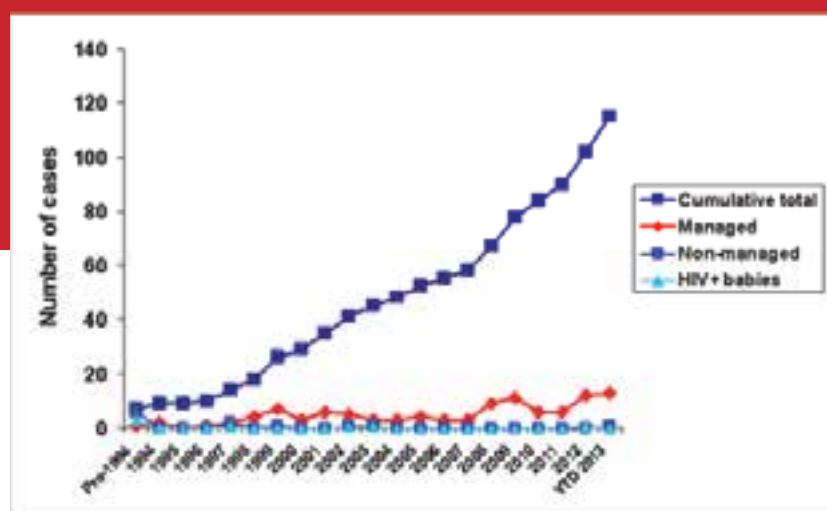
Susan discussed 'the elephant in the room' and how the persisting issue of HIV-related stigma is essentially the 'third' epidemic, following on from the beginning of the epidemic and understanding HIV, to the second, and many medical and treatment breakthroughs that see HIV now being referred to as a chronic manageable illness (CMI). So if HIV is a CMI, then why isn't it being spoken about as openly by women and others living with HIV, as are diabetes or rheumatoid arthritis or Parkinson's disease for example?

Moira presented information and themes based on her recent participation in a HIV & Women Conference held in Boston, Massachusetts, USA. The key themes at the conference were: Women - From Adolescence through Menopause, Stigma, Preventing Women Getting HIV - PrEP & Women, Breastfeeding, Keeping Women Engaged In Long-Term Care, Achieving Women-Centred Care.

Clinical Nurse Specialist Allison Cain shared her journey of working for many years in the sector, with a significant focus on working with women in the pregnancy program and also being the RPH coordinator of the rural & remote program for women. Allison discussed the crucial rural and remote service and how in 1998 when the program commenced, there were 21 PLHIV registered with the service, compared to 214 active patients in 2016.

The WA Multidisciplinary Pregnancy Team is an inter-agency team, established to manage all pregnancies for women living with HIV. The chart below demonstrates the climbing number of babies born to WLHIV in WA over the course of the program.

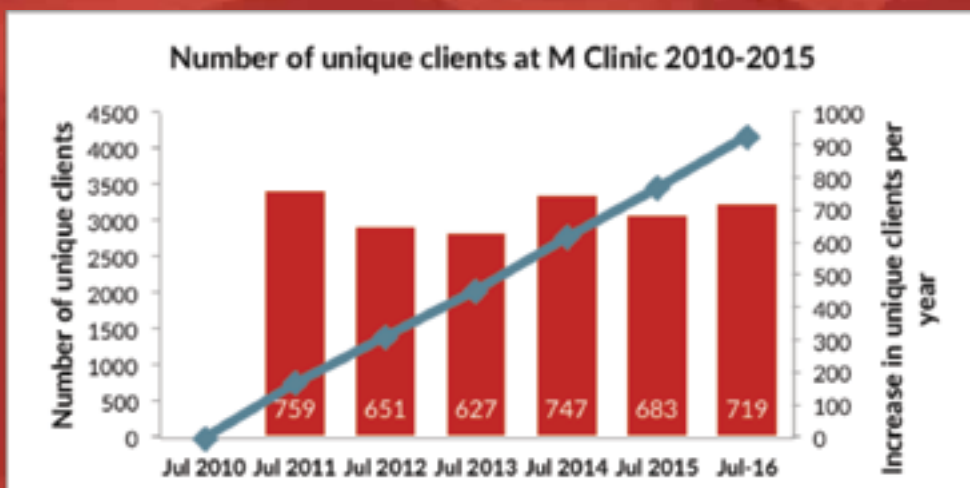
Babies Born to WLHIV In WA



M CLINIC

M Clinic unique clients increased by 21% during the year, and now totals some 4,186 by the end of June. When it was established six years ago, it was with a sole purpose of increasing capacity for sexual health screening of gay and bisexual men. This remains its purpose, as is an emphasis on peer-based support and education. Funding for the clinic has remained constant, yet over its years of operation it has seen a dramatic increase in productivity, resulting in an increase in HIV testing numbers from 1,646 in 2012 to 2,472 in 2015 – a 51% increase in the last three years.

Over this same period, the proportion of new clients referred by word of mouth has increased from 31% to 51%, which indicates that M Clinic is highly embedded in the communities it serves. This level of community engagement is important, since it indicates that M Clinic has a broad community reach and has an impact beyond those that directly use its services.



With such a large 'market share', monitoring the content of peer sessions and risk discussions, provides an early indication of emerging issues for gay and bisexual men and trends in sexual decision making. Amongst these trends this year has been a substantial rise in requests for information about PrEP (and support for those already utilising it), the influence of drugs and alcohol on sexual behaviour and an apparent decline in reported condom use.

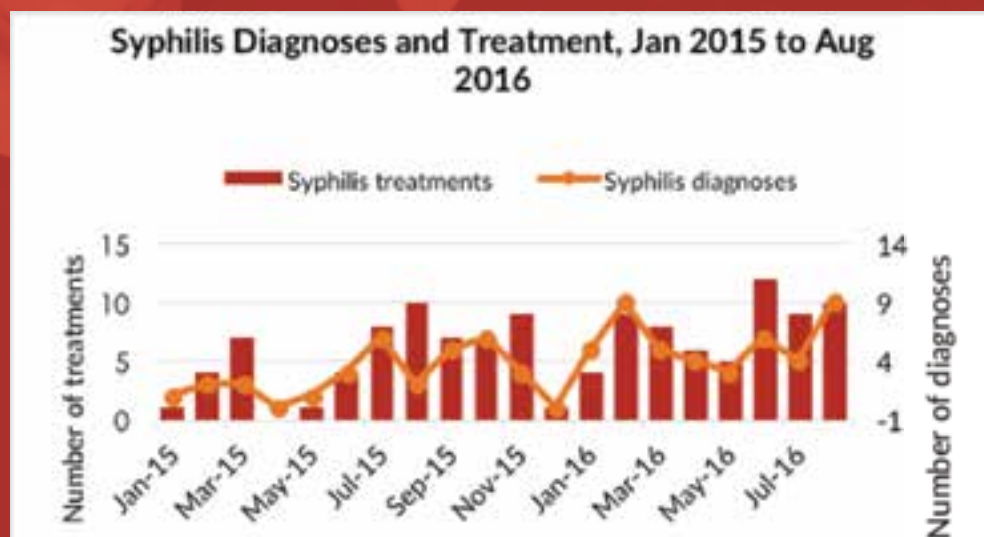


Of particular concern at the beginning of the year was a significant resurgence in diagnoses of infectious syphilis. This is a trend that reflects similar trends in other Australian capital cities.

M Clinic clients typically become regular in their testing patterns, and this leads to prompt diagnosis and treatment. It also provides a communication channel into the broader community and supports our other health promotion

programs and advice and information to the broader sector.

M Clinic has provided extensive support to patients considering PrEP, including referrals to prescribers, assistance in navigating the personal importation program and ongoing sexual health screening and peer support for those already on it. During the year M Clinic successfully implemented rapid



HIV testing as a standard service. Rapid Testing presented challenges for the service to continue to support its clients with little scope for additional resources.

M Clinic has an ethos of continual review and improvement, and has invested significant effort in the last 12 months in meeting our commitments to Reconciliation through an engagement strategy for Aboriginal and Torres Strait islander men. M Clinic has also more recently working with Transmen of WA to ensure the service is as inclusive as possible for trans men and trans masculine men. M Clinic will undergo some further changes in the coming month to better handle the client demand, including a drop-in clinic, electronic forms and exploration of novel testing methods and technology.



HEALTH PROMOTION

"We understand we are in a unique position to be able to influence supportive, empowered and resilient individuals and communities and all of our work is conducted within a comprehensive health promotion framework"

As a health promotion agency we remain committed to upholding the principles of the Ottawa Charter and understanding and addressing the social determinants of health. We understand we are in a unique position to be able to influence supportive, empowered and resilient individuals and communities and all of our work – in community engagement, in our clinical services, in our needle and syringe exchange program, at M Clinic and beyond – is conducted within a comprehensive health promotion framework.

This is writ large across our NSEP service, which operates far beyond a simple transactional exchange of injecting equipment. Our staff understand this organisation's commitment to improving health outcomes for our NSEP clients, and take every opportunity to provide information, resources and referrals; we provide our clients with fresh fruit, and especially a welcoming smile, knowing that these things matter – just as much as the hardware. This is the ethos that pervades all aspects of our work.

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COMMUNITY ACTIVITY

We were honoured to share in and contribute to a number of LGBTI community events over the course of the years. We had a float to be reckoned with in the Pride Parade and a bigger than ever presence at Fair Day where we engaged with thousands of community members, yarning about things important to them, and answering a lot of queries about PrEP.

We held two community forums to gauge our communities' attitudes towards PrEP. We had safe sex angels at a number of events, and accepted invitations to hang out with the Bears, the Loton Park Tennis Club, Primetimers, the WA Wanderers, drag artistes at the Court and the crew at Connections, LGBTI Networking Group and the Third Wednesday crowd. We are grateful to Pride, Steamworks, the Court Hotel, Connections and Loton Park Tennis Club for helping us conduct the Gay Community Periodic Survey and the Women's Western Australian Sexual Health Survey in their spaces.



YOUNG PEOPLE

For more than 20 years, we have been committed to the welfare and improved health outcomes of young people. While our dedicated programs continue to improve and expand our reach in the form of KISS and Freedom Centre, increasingly young people are accessing more of our other services. We ensure that all areas of our health promotion and clinical services programs are safe and appropriate for young peoples' access by constant review, analysis and feedback.

We have seen a continuing increase in numbers of young people accessing the M Clinic and our Needle and Syringe Exchange Program (NSEP). Neither of these services are advertised or marketed to young people, yet it is evident that the young people accessing our services are recommending us to their peers. Through our KISS project we engaged with a little under 20,000 young people, and Freedom Centre engaged with close to a further 600.

NUMBER OF YOUNG PEOPLE REACHED



FREEDOM CENTRE

Freedom Centre held 159 drop in sessions and 1 retreat, and received 2460 visits from a total of 440 individuals, of which 221 were trans or gender diverse. 285 were people attending for the first time. The Centre provided a total of 545 hours of drop in service, plus 48 hours of retreat.

In the previous 2014/15 financial year, Freedom Centre held 154 drop in sessions, receiving 1,963 visits, from a total of 389 individual young people, with 267 first-time visits and the Centre provided a total of 557 hours of drop in service.

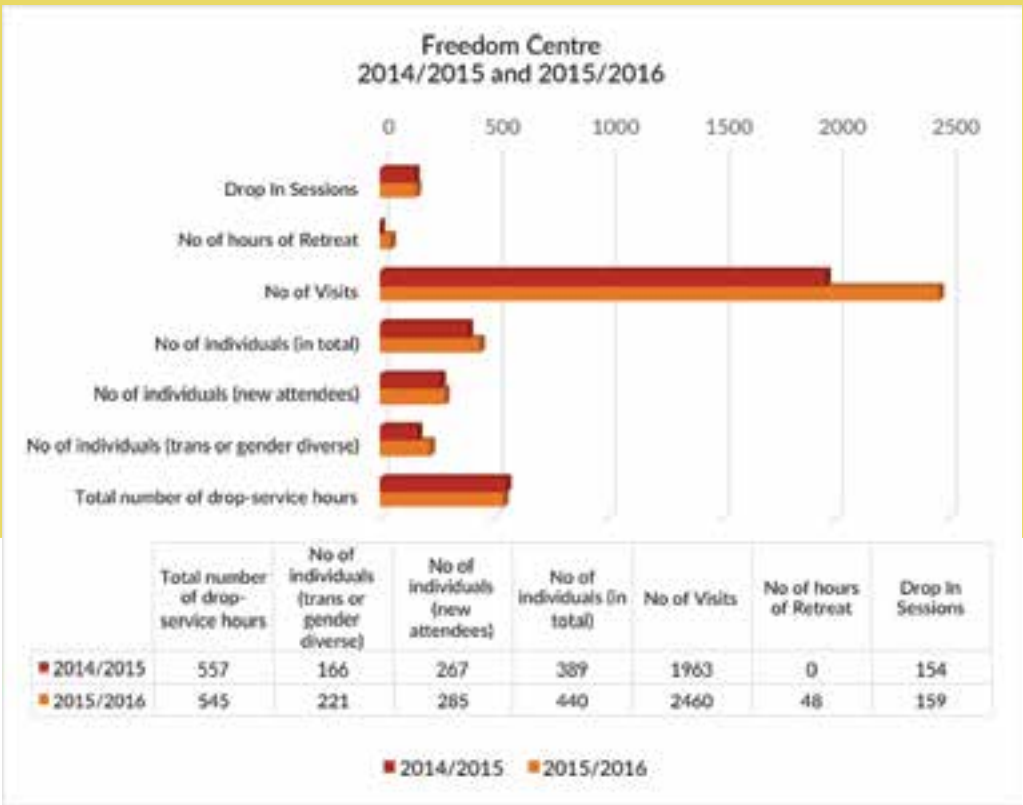
Freedom Centre Volunteers collectively provided over 2,700 hours of their time to Freedom Centre services. The Freedom Centre EPIC Retreat had 21 young people and 13 team members from Freedom Centre and Uniting Care West's True Colours Program in Bunbury and Kwinana attending.

At the end of the financial year Freedom Centre's Tumblr had 742 people following the blog and made 501 posts over the financial year.

Freedom Centre volunteers and staff have observed a need to provide more peer support in the drop-in centre to service recipients for coping with the homophobic media and political debate, and to give them a safe space to vent about these things and get more information to be empowered to create positive change in their local schools and communities.

When asked what the most significant change has been for them due to coming to FC drop-in sessions, service recipient feedback included:

- I've made friends and found a sense of security and community. It is important for my day to day wellbeing and mental stability.
- Having a place where I can be me without worrying about being misgendered. It makes me feel happier and more comfortable in my identity.



KEEP IT SAFE SUMMER (KISS)

In 2015 there were 12,275 young people engaged in KISS Leavers alone which included Leavers week and the Senior School presentations prior to leaving school. There were another 7,600 contacted through the other KISS events.

This is a rapid increase: in 2012 the KISS project engaged with 5,840 leavers, 2013 8,025 and 2014 10,200. In 2015, KISS engaged with 19,875 leavers.



SAFE SCHOOLS COALITION

We were successful in partnering with the Foundation for Young Australians to obtain federal funding to continue to deliver our existing good work in WA schools here in WA in the form of the Safe Schools Coalition program.

The grant enabled us to strengthen our existing work supporting schools to be safe and inclusive for LGBTI+ students, staff and families through the Health Promotion team and Freedom Centre. With this increase in funding we have been able to provide more staff training, resources and consultation to schools in both metropolitan and regional areas, as well as develop strong whole of school approaches to LGBTI+ inclusivity in partnership with school staff, that complement our existing initiatives with young people.

Despite the challenge of a negative media campaign directed against LGBTI diversity training in schools, in just four school terms more than 1200 school staff have received training through 30 training sessions and over 320 school staff have signed up to our email network, with increased requests for complementary support from both the Health Promotion and Freedom Centre Services.



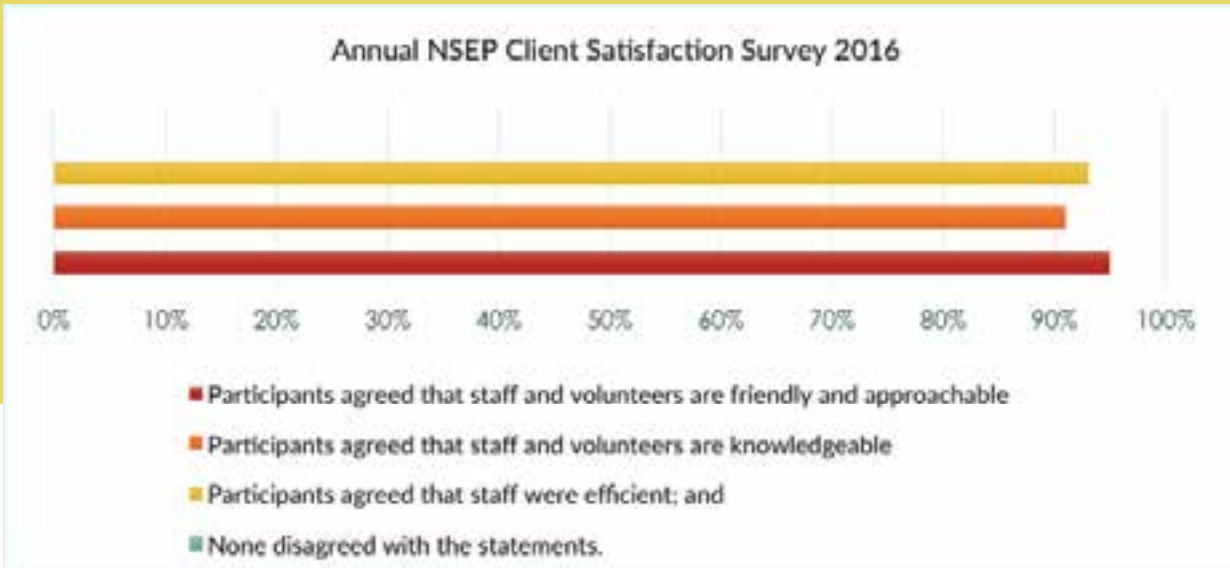
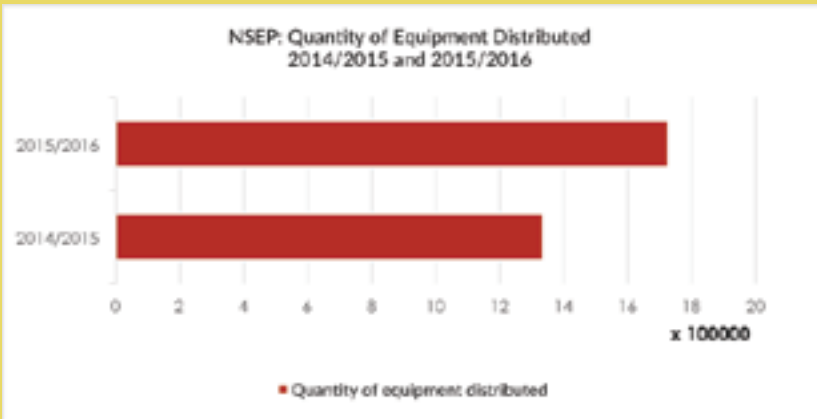
NEEDLE AND SYRINGE EXCHANGE PROGRAM (NSEP)

Our Needle and Syringe Exchange Program (NSEP) has had a successful year. The number of clients accessing the service has increased significantly (30%) rising from 8,644 last year to 11,297 this year. This is also reflected in amount of equipment distributed which also saw a 30% increase.

The return rate of the equipment remained high at 92.46% for the same period. This indicates that along with increased numbers of clients accessing the service and complementary rises in equipment distributed, clients are recognising the importance of returning their equipment and not leaving it in the community.

The annual NSEP client satisfaction survey was also conducted in March 2016, recruiting 187 participants. The survey provided clients who access the NSEP an opportunity to provide feedback on all aspects of the service.

It is only through continued access to sterile injecting equipment, ongoing education and information provision that transmission of BBVs and other health harms within the injecting population can be effectively reduced. The Needle Syringe Exchange Program remains an important avenue for health safety provision and health promotion for both the injecting population and wider community.





ORGANISATIONAL DEVELOPMENT

"These professionals work across the organisation collaboratively supporting all programs to deliver improved outcomes for clients and improved efficiency in our operations generally."

Developing our organisation in order to better meet the needs of a growing number of key populations in a time of rapid change in the community sector is the responsibility of the Organisation Development Department. The department houses key professional expertise encompassing media and communications, fundraising and events, training and development and our volunteer program.

These professionals work across the organisation collaboratively supporting all programs to deliver improved outcomes for clients and improved efficiency in our operations generally. At the same time, as with all aspects of our organisation, the focus is predominantly external and aligned to our Strategic Plan, national and state strategies and the expectations of our various other stakeholders including funding bodies.

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Key achievements of the team this year have been an extensive improvement in our communication assets and a broadening of our audiences, the establishment of new fundraising initiatives, expanded sector capacity building through training and development and continuing enhancement of our volunteer program. In addition, the department has continued to ensure that most of our staff receive media training in order to allow more staff to talk to more media more often on topics related to their specific expertise.

TRAINING AND DEVELOPMENT

We have continued to implement the Training and Development Strategy and this year subjected it to a review. The strategic objectives of this program is skills and capacity development for our communities and stakeholders (including our staff and volunteers), and to increase knowledge and understanding of HIV, STIs and BBVs of our external stakeholders. Training external partners within the health sector improves health access and equity and enhances the experience our clients receive when they access other services.



Our professional training falls into three broad categories:

- Blood-borne virus pre and post-test consent training
- Professional group training – general HIV education and awareness
- Professional group training – workforce development for health professionals working with people living with HIV

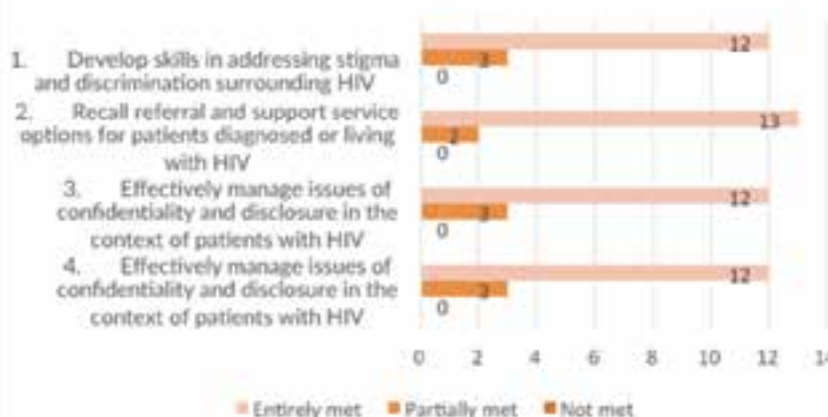
One of our significant trainings this year to the Australian Medical Association. The presentation was delivered as a 4 Category 2 Points RACGP QI&CPD Activity No. 40566 and was attended by over 40 doctors. The training covered a broad range of topics and was pitched specifically at a level appropriate for doctors. Content included epidemiology, transmission, treatments, TasP, PreP, PEP, various research studies, stigma and discrimination and confidentiality & disclosure. The program evaluated very highly.



Aged Care training was piloted last year with Brightwater and was delivered to over 70 staff including support workers, management and clinical staff. The objective of the training is to educate & develop aged care facilities to ensure provision of appropriate non-discriminatory service to PLHIV. It was conducted at two training sites; Currambine and Rockingham.

89% of participants rated both the training content and the trainers as excellent. The success of the pilot was leveraged into a grant from ViiV Healthcare to develop a comprehensive training package directed specifically towards the aged care sector. In 2016 we have secured a comprehensive training event for a group of health professionals from the Australian Aged Care Quality Agency (AACQA). The AACQA is the federal independent body responsible for managing the accreditation and ongoing supervision of Commonwealth funded aged care homes.

Summary from the AMA evaluation



VOLUNTEER PROGRAM

We had a successful year for the Council's volunteer program, which included a period of reflection and review of both the management and strategic direction. Of importance was a need to increase opportunities to provide service delivery capacity across both clinical services and health promotion. There was also an ongoing commitment to engage with the corporate sector to harness a growing attention to social responsibility.

We successfully applied for a Bankwest Foundation Social Media Grant. Valued at \$10,000, the grant facilitates 12 months of social media training, development and support. It has a focus on the recruitment and retention of our volunteers and is facilitated by an external marketing organisation.

The Council received positive feedback from the community, with one of our key focus areas - specialist skill based volunteering. The Council was able to secure a volunteer who provided migration support for people living with HIV, who were considering residency in Australia. The pathway to apply for residency in Australia can be complex and challenging, so for our community to have access to a skilled volunteer, who could support and provide a pathway for clients and families to apply for Australian residency, was a significant value add to the services the Council delivers.

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The Economic, Social and Cultural Value of Volunteering to Western Australia report was commissioned by Volunteering WA to quantify the economic, social and cultural value of volunteering to Western Australia by applying the Institute of Project Management (IPM) Model of Value Creation. Such findings included that every dollar invested by an organisation yielded approximately \$4.50 in benefits. For this financial year, the Council invested \$65,809 to our Volunteer Program, yielding approximately \$296,140 in economic value to our community.



The breakdown of the Council's investment, as a percentage, is shown in the graph below.



In the years ahead, continuing evolution is required across three crucial priority areas.

- How we as an organisation will respond to the emerging trend with the challenge of designing sustainable recruitment and retention strategies for our volunteer demographic.
- How we can harness technology to better match people to volunteering opportunities, as well as increasing participation in volunteering for the Council.
- How we strengthen our organisational capability to ensure the Volunteer Program strategy and operations are in alignment, to deliver a more coordinated and efficient services to our community.

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COMMUNICATIONS

Because of the increasing disparity of populations and communities we serve and who access one or more of our services, two years ago we developed a comprehensive Communications Strategy. Its primary purpose is to ensure that we can provide more timely and relevant responses to issues as they emerge, to those affected by these issues and in the form and via channels they are used to. A second priority is to continue to improve access to information and services beyond the greater Perth metropolitan area.

Whilst communications have become more complex in recent years, never before have there been as many opportunities. This year has seen a high level of deliverables resulting from a significant investment in our communications assets and the inclusion of more media channels.

CORPORATE WEBSITE AND E-NEWSLETTER

In late 2015 we rebuilt and relaunched our main website at waaid.com. This was the culmination of two years' research and planning.

The new website features:

- An active news section, which is easily and regularly updated by the Communications Team.
- A comprehensive resources database for people living with HIV
- Fundraising and event promotion
- A complete 'What We Do' section, showcasing the Council's wide variety of services
- An online, self-service HIV Risk Assessment
- Capacity for an online store to be launched in phase 2.



The site is now mobile optimised, and information now centres on images, rather than text.

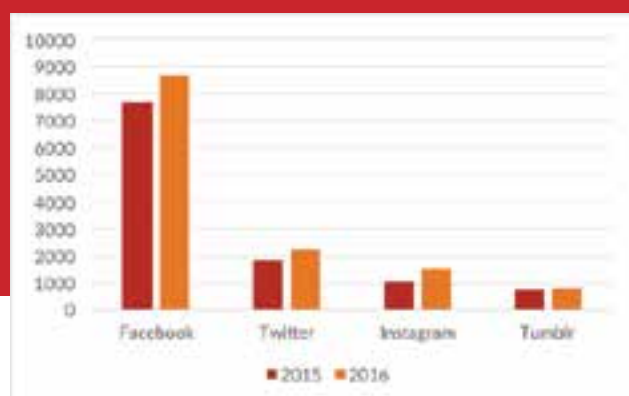


Complementing the website is a new e-newsletter system. A database list of over 1,000 subscribers receives monthly updates from the Council, with articles and images contributed from staff in all departments, and the occasional guest contribution. To date, the click through rate has been very high at approximately 50%.

The newsletter system is used to send updates to specific groups of stakeholders as well as the full list, for example, doctors and medical staff are alerted of training opportunities. The newsletter is used to inform stakeholders and to also communicate issues of concern to us, such as poor access to PrEP in WA, discriminatory media language that impacts on vulnerable groups or the negative health impacts of the public discourse on marriage equality.

SOCIAL MEDIA

Social Media channels owned and operated by the Council have continued to grow this year. Total reach now exceeds 13,200 connected people across Twitter, Facebook, Instagram and Tumblr. This is an increase of almost 2,000 from last year or 18%.



NEW BRAND DEVELOPMENT

With the establishment of a new Gay Men's Health Strategy, there is a clear need to develop a community owned and controlled communications channel. Fair Day was used to test the Give a Fuck (GAF) brand, a new initiative to engage gay and bisexual men. GAF is designed to be empowering and to acknowledge the continuing right of gay and bisexual men to make their own informed decisions around their own health. It is specifically sero-neutral.

GAF provides opportunities for men to consider the full range of issues some deal with including PrEP, the use of drugs and alcohol, domestic violence, relationships and discrimination.



WORLD AIDS DAY AND WORLD AIDS AWARENESS WEEK

We have been disappointed with attendance at World AIDS Day events in recent years. In 2015 we made a deliberate effort to return World AIDS Day to a more public domain and began a multi-year process of ensuring it becomes a focal point, targeting our whole community. Consequently, 2015 saw a range of new initiatives and increased exposure in a public arena and encompassed an entire week of activities.

We also incorporated a full media strategy. For example, each day during World AIDS Awareness Week, a member of staff conducted an on-air interview with RTRFM, discussing the current climate of HIV, their specific program, or topics such as PrEP.



The day concluded with a special public screening of the documentary film *It's Not Over*, in the Northbridge Piazza. Around 100 people attended the screening, while many more interacted with staff and volunteers on the outskirts of the square.

REFRESHING THE WA AIDS COUNCIL BRAND



In early 2016 we reworked our logo as part of the establishment of a comprehensive style guide. The development of greater consistency in our look and image will further strengthen our reputation and credibility as an expert voice on HIV, STIs and BBVs. The Style Guide also helps us to improve our language, style, tone and vocabulary so that it represents our corporate voice in a meaningful and relevant manner.

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FUNDRAISING

The primary goal for fundraising at the WA AIDS Council is to improve the organisational financial viability on a sustainable basis by diversifying income streams through various fundraising and fee-generating activities. In addition to raising funds for the WA AIDS Council, fundraising activities aim to raise public awareness of HIV, affected communities, key strategies (e.g. harm reduction) and related issues (e.g. sex worker issues). Our fundraising activities act as an additional 'communication channel' for the Council - promoting other events and services and showcasing successes, thereby reaching broader areas of our affected communities and key stakeholders.

STYLEAID GOGO

2015 marked the 18th year STYLEAID has been the main fundraising event for the WA AIDS Council. Work on the event began in September 2014 to maximize sponsorship opportunities, to further build the brand, to and raise the profile of the charity amongst supporters across all of the platforms that STYLEAID now works including a strong social media presence.



This year, the Council saw the return of Curtin University as naming rights sponsor with a cash component of \$40,000. There was also the continuation of Mini Cooper, through Auto Classics with \$8,000 cash.

This year saw a revitalisation of the STYLEAID Photographic Exhibition which was supported by a range of organisations that kept it at a cost neutral level and ensured that the sale of each photograph was a 100 per cent return for the charity.

With the current financial climate here in Perth being an issue for the majority of charity events this year, the issue of ticket sales once again proved to be of concern. This did put some pressure on the team in terms of garnering ticket sales however 608 guests attended the event which is just less than the 631 from 2014.

As with the last two years, there was a greatly increased emphasis on ensuring that everyone involved in supporting or attending the event were much more aware of the 'cause' they were supporting, and through the event and associated published material, much greater information provided about the reality of HIV in 2015 and sexual health more generally.

Event and Community Fundraising Income

| Activity | 2014-15 | 2015-16 |
|----------------------------------|--------------|--------------|
| Quiz Night 1 | \$5,074.36 | \$4,095.34 |
| Quiz Night 2 | n/a | \$3,489.47 |
| Holding the Man Film Premiere | n/a | \$3,162.45 |
| Entertainment Book Initiative | n/a | \$208.00 |
| STYLEAID Event | \$123,111.00 | \$100,579.00 |
| STYLEAID Photographic Exhibition | \$1,680.00 | \$6,000.00 |
| Total | \$129,865.36 | \$117,534.26 |

QUIZ NIGHTS

In the 2015-16 period, two quiz nights were held as part of event and community fundraising which successfully raised funds for the organisation:

- February 2016 Summer of 65 Quiz Night
- June 2016 Fantasy Quiz Night

Across both events, 444 people attended and the overall impression of the events were positive with comments from a post-event survey including "Looking forward to the next one!", "Thoroughly enjoyed the night". The majority of survey respondents were very likely to recommend the event to friends and family.



At both events, WA AIDS Council resources were provided on tables. In between quiz rounds, hosts informed guests of programs and initiatives by the WA AIDS Council and community including the new Rapid HIV Testing at M Clinic, Pride Fair Day and the MAC AIDS Fund. A round of Sexual Health questions also provided an opportunity to educate the audience on STIs and HIV facts.

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HOLDING THE MAN PREMIERE



In collaboration with Luna Cinemas, the WA AIDS Council held a special premiere of *Holding The Man* with funds donated to the WA AIDS Council. A love story for everyone, the much-anticipated *HOLDING THE MAN* reached the big screen in Neil Armfield's breath-taking and moving adaptation of Tim Conigrave's seminal memoir. An inspirational journey through passion, tragedy and love, Ryan Corr and Craig Stott star as Timothy Conigrave and John Caleo, who fell in love while teenagers at their all-boys high school. John was captain of the football team, while Tim was an aspiring actor.

The film follows their enduring romance over 15 years, through periods of bliss, turmoil, discrimination, and most tragically, through their dual HIV-positive diagnoses.

The event sold out and 300 ticket-holders watched the film premiere which was then followed by a Q&A session with actor Ryan Corr, hosted by Network Ten's Narelda Jacobs.



STAFF LIST 30 JUNE 2015

| | |
|-----------------------|---|
| Andrew Burry | Chief Executive Officer |
| Vincenzo Rigoli | Manager,, Finance and Facilities |
| Tania McGuinness | Administration Finance Officer |
| Lisa Tomney | Manager, Clinical Services |
| Sinéad Glackin | Case Manager |
| Emma Beattie | Case Manager |
| Ben Bradstreet | Counsellor |
| Hanieh Tolouei | Counsellor |
| Justin Manuel | Coordinator, M Clinic |
| Tony Bober | Community Engagement/Administration Officer, M Clinic |
| Garry Kuchel | Registered Nurse, M Clinic |
| Matthew Jones | Registered Nurse/Clinical Administrator, M Clinic |
| Simon Swallow | Registered Nurse, M Clinic |
| Anthony Smith | Peer Educator, M Clinic |
| Daniel Jessup | Outreach/Support Officer/Team Leader, SHAPE |
| Beck Sherman | Outreach Officer, SHAPE |
| Allison Paterson | Outreach Liaison Officer, SHAPE |
| Liz Walker | Positive Peer Educator |
| Matt Creamer | Manager, Health Promotion |
| Ruth Wernham | Team Leader, Health Promotion |
| Carley Robbins | Health Promotion Officer, At-Risk Youth |
| Adam Ehm | Project Officer, Gay Men's Health |
| Shahmir Rind | Health Promotion Officer, Aboriginal and Torres Strait Islander Projects |
| Bethany Martin | Health Promotion Officer, Scholarship Recipient |
| Dani Wright Toussaint | Coordinator, Freedom Centre |
| Sophia Rasmussen | Peer Educator / Project Officer, Freedom Centre |
| Claire Foster | Peer Educator, Freedom Centre |
| Stephen Boccaletti | Peer Educator, Freedom Centre |
| Gavin Brunini | Outreach Officer, Needle and Syringe Exchange Program / Client Services Officer |
| Samuel Gibbings | Project Officer, Needle and Syringe Exchange Program |
| Tina Stanton | Outreach Officer, Needle and Syringe Exchange Program |
| Olivia Knowles | Senior Project Officer, Safe Schools Coalition WA |
| Katie Darby | Project Officer, Safe Schools Coalition WA |
| Simon Yam | Manager, Organisational Development |
| Matt Ranford | Marketing and Communications Coordinator |
| Mark Reid | Fundraising, Media and Events Coordinator / Coordinator, STYLEAID |
| Reena D'Souza | Training & Development Officer |
| Suzanne Woolner | Volunteer Program Coordinator |
| Pamela Haskell Mahon | Communications Officer |
| Reno Furfaro | Client Services Officer |

STAFF TRANSITIONS 2014 – 2015

| | |
|-------------------|--|
| Natalie Hadland | Policy & Compliance |
| Natasha Brockwell | Volunteer Program Coordinator |
| Bethwyn Chigwada | Community Development and Advocacy Officer, Mobile Populations |
| Gavin Tsai | Community Development and Advocacy Officer, GAY/MSM |
| Rebecca Hall | Community Development and Advocacy Officer, Aboriginal and Torres Strait Islander Projects |
| Tyrone Atter | Freedom Centre Peer Educator |
| Jaini Shah | Freedom Centre Peer Educator |
| Brendan Morrison | Health Promotion Officer, Aboriginal and Torres Strait Islander Projects |
| Jeff Turner | Health Promotion Officer, Mobile Populations |

IN APPRECIATION

COMPANIES AND ASSOCIATIONS

Abbott, Aboriginal Health Council of WA, Acacia Connection, Adultshop, ae'lkemi, Agent Provocateur (Perth), AIDS Trust of Australia, Angove St Collective, Aurelio Costarella, Australian Federation of AIDS Organisations, B2 Clinic Fremantle Hospital, BACI, BAM Creative, Bankwest, Barrick Gold, Bears Perth, Bendigo Bank – Fremantle Community Branch, Betts Shoes, Black Swan State Theatre, The Blonde Candle, Boehringer Ingelheim, Braziliano, Bunnings Subiaco, Casa Regalo, Catering Essentials, Cathay Pacific, Chadwick Models, Champagne Jacquard, City Farm, City of Fremantle, City of Stirling, City of Vincent, City of Perth, Club Med, Clinipath, Club X, Coles North Perth, Connections Nightclub, Conrad Bali, Coolbelup Optimal Pharmacy, Corporate Computers, Cosmax, Cottesloe Civic Centre, Court Hotel, Crown Perth, CSA Models, Curtin University, Daniels Printing Craftsmen, David Wirrpanda Foundation, DB Idea, Delta Socials, Department of Communities (WA), WA Department of Health, Department of Families, Community Services and Indigenous Affairs, Derbarl Yerrigan Health Services, Diamond Lounge Limocoach, Dilettante, Direct Travel and Cruise, Dorper Lamb, Drug and Alcohol Office, Empire Rose, Equilibrium, European Foods, Fenella Peacock, Fremantle Arts Centre, Fitzgerald Photo Imaging, Flannel, Foote Francis, Sexual Health Quarters WA, Funky Bunches, Generics, Get Lucky (Fremantle), GLBTI Rights in Ageing Inc (GRAI), GHB, GLYDE, Golden Ravioli, Goldwell, HIV/AIDS Legal Centre NSW, Harbour Town Newsagency, Headphonic (Tuart Hill), Headspace Rockingham, Healthway, HepatitisWA, Highgate Wines, Injidup Spa Retreat, Issey Miyake, Int Paintballing Group, Kaos Hair Studio, Kart Koort Wiern, Ketel One Vodka, Kevin Murphy, Kimberly Aboriginal Community Controlled Health Organisation, KORO Fine Australian Jewellery, Kova Sound, Langford Aboriginal Association, Living Proud LGBTI Community Services WA (formerly GLCS), UnitLords Sports Centre, L'Oreal, Lotterywest, Loton Park Tennis Club, LUX Events, M.A.C, Mental Health Commission, Mirrabooka Multicultural Migrant Resource Centre, Miss Watson's Garden, Mondo's Butchers, Morrison, National Australian Bank (NAB), NAIDOC, National Association of People Living with HIV Australia, National LGBTI Health Alliance, Network 10, Notre Dame University, Office of Crime Prevention, OMG Events, One Fell Swoop, Out in Perth, Patties Pies, Peroni Italy, Perth Klimb!, Steamworks, Power Music, Preservation Framers, PRIDE WA, PURE Bar Subiaco, Rosemount Bowl, Royal Perth Hospital, Salvation Army, San Pellegrino, Schweppes, SCOOP Publishing, Scene Model Management, Single Vineyard Sellers, Sexual Health and Blood-borne Virus Applied Research and Evaluation Network (SiREN), Stockman Paper Merchants, Twisting Peacock Yoga, Unicare Health, United Constructions, Uniting Care West True Colours Program, University of WA, Vintage Cellars, Vital Human Resources, Vivien's Model Management, The West Australian, The West Australian Ballet, Town of Vincent, WA Association of Mental Health, WACOSS, WAM, WANADA, WA Centre in Health Promotion Research, WA Police Service, WA Substance Users' Association, WAtoday.com.au, Wizard Pharmacy, Wondersday Perth, Yokine Bowling Club, Zaccaria Concerts & Touring, ZOMP Shoez, Zoltan Importers, Zonta Club of Swan Hill, Zsadar, Zu, 2rsCards.

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INDIVIDUALS

Aaron Pitt, Alistair Yip, Alvin Fernandez, Aly May, Andrew Gordon, Anna Mains, Annette Hasluck, Anthony Von Leonhardt, Bruce and Carol Lake, Carol Mackie, Carolyn Bloye, Cameron Cole, Chelsey Wayte, Chloe Spalding, Chris Grant, Chris Van Tuinen, Christine Tomas, Dr Damian Conway, David Batty, Linda Forbes, David Trapp, Denise Cheir, Desiree Kerr, Di Bauwens, donors in memory of Isabelle Lake, Dr Paul Armstrong, Dr Paul Effler, Dr Toby Nicholls, Dr Mo Gaber, Dr Kevin O'Connor, Dr Glen Lo, Dr Donna Mak, Emma Bergmeier, Erin Larkin, Frank Farmer, Hannah McGrath, Hazel Buckley, Heidi Rawson, Hendra, Holly May, Ian Lowe, Jill Sergeant, Gavin Kingsbury, Gino Premici, Graeme Watson, Grant Capriotti, Guy Gomeze, Jenny Thomas, John Ferarri, John Koh, Joseph Di Rocco, Jude Bevan, Katharine Cooper, Kira Smith, Lex Randolph, Libby Edwards, Libby West, Levinia Crooks, Dr Lewis Marshall, Louise Pratt, Hon Lynn McLaren MLC, Professor Martyn French, Matthew Knight, Senator Dean Smith, Melané White, Melanie Poole, Willie Rowe, Michael Chester, Dr Michael Watson, Michele Kosky, Miles Burke, Oscar Langoulant, Pat Nolan, Paul O'Connor, R.A White, Ray Costarella, Rebecca Joanne, Rigby, Roanna Lobo, Rob Lake, Roger Jewell, Romain Duquesne, Ross Wallace, Sara Grossi, Sarah Collins, Shirin Carter, Stephanie Lane, Sue Morgan, Tamara Day, Teagan Sewell, Tijana Lilac, Tim Brown and Tony Salom.

We also acknowledge all donors to the Council.

BOARD OF MANAGEMENT

Samuel Hastings - Chairperson
Asanka Gunasekera - Deputy Chairperson
Isabelle Roy - Treasurer
Paul Baines - Secretary
Darren Vernade - HIV Positive Representative
Jesse Fleay - Community Representative

Kath Snell - Community Representative
Aimee Sinclair - Community Representative
Ruth Sims - Community Representative
Justin Manuel - Staff Representative
Andrew Burry - Chief Executive Officer



Western Australian
AIDS COUNCIL



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Western Australian
AIDS COUNCIL

**WESTERN AUSTRALIAN AIDS COUNCIL INC
SPECIAL PURPOSE FINANCIAL REPORT
For the year ended 30th June 2016**

FINANCIAL REPORT 2016

TREASURER'S REPORT

The F16 financial year resulted in a surplus of \$86,000 compared to \$119,000 in F15. Revenue increased by 7% to \$4,071,460. Income from the core grants received from the Sexual Health and Blood-borne Virus Program (SHBBVP) of the Department of Health represented 73% of total revenue at \$3,001,594 compared to 77% in the previous year.

This slight reduction in dependence on a single funding source is welcome and results from strategies intended to increase the diversity of revenue received. A significant contribution was the federally-funded Safe Schools program which provided \$181,231 in new money. There was a modest increase in training fees received. Funds from donations and fundraising remained the same as last year, totalling \$223,232 contributed by STYLEAID (net \$107,556) and the continuation of funding from the M.A.C. AIDS Fund (\$100,000).

Total expenditure amounted to \$3,985,364, which was an increase of 7.8% from F15. Total employee expenses accounted for 71% of revenue and was similar to last year. As a human services organisation, investing appropriately in our people reduces staff turnover and the resulting expenses for recruitment and training and more importantly, better provides for continuing improvements in the quality of our services and client outcomes. Providing funds for professional development is an important strategy in achieving this goal.

General expenses throughout the year were well contained and there were no significant variances from those budgeted for, or in comparison to previous years. There was, however, some one-off IT expenses associated with moving our servers into a cloud environment, and this expense will be offset by savings in future years.

Whilst travel and accommodation represents only 1.6% of our total expenditure, we remain conscious of the relative disadvantage of our geographic distance from where most meetings, seminars, workshops and training occurs. Gross travel and accommodation expenses were inflated this year as a result of travel associated with the implementation of the Safe Schools program, the biennial Gay Men's Health Promotion Conference, additional meetings associated with PrEP and participation in East Coast forums. However, all Safe Schools expenditure was reimbursed and some reimbursements were received from the Australian Federation of AIDS Organisations (AFAO), ViiV Healthcare, the Kirby Institute and the Department of Health. These reimbursements are recorded in 'other income'.

During the year, the Board approved a number of special projects amounting to \$52,275, including the 30th Anniversary events (\$20,000). Other projects included the HIV/STI Action Plan and support for PrEP.

There was only one significant capital expenditure during the year. This was the redevelopment of the Council's websites at a cost of \$43,293, which will be depreciated over five years with an annual amortisation cost of \$7,720.

The Council continues to be funded by the Department of Health and the Mental Health Commission through until the end of December 2017. Safe Schools funding concludes at the end of June 2017 and it is not expected to be extended. At some time after June 2017, it is likely that we will be engaged in competitive tendering for future funding. This provides for some uncertainties and the Board has felt it prudent to adopt a conservative approach and to continue to operate with a modest surplus. The current year surplus increases members' funds by 2.7% compared to the position at 30th June 2015.

WESTERN AUSTRALIA AIDS COUNCIL INC

SPECIAL PURPOSE FINANCIAL REPORT For the year ended 30 June 2016

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STATEMENT OF COMPREHENSIVE INCOME

For the year ended 30 June 2016

| | Note | 2016 \$ | 2015 \$ |
|------------------------------------|------|------------------|------------------|
| GRANT INCOME | | | |
| Government Grants | 2 | 3,214,678 | 3,201,914 |
| OTHER INCOME | | | |
| StyleAid Income | | 269,320 | 269,051 |
| Other Income | 3 | 471,786 | 246,702 |
| Donation Income | | 115,676 | 99,805 |
| TOTAL REVENUE | | 4,071,460 | 3,817,472 |
| EXPENDITURE | | | |
| Employee Expenses | 4 | 2,886,217 | 2,680,417 |
| Facilities Expenses | 5 | 231,428 | 230,075 |
| Administration Expenses | 6 | 128,174 | 130,677 |
| StyleAid Expenses | 7 | 161,764 | 144,260 |
| Advertising Expenses | 8 | 91,224 | 100,019 |
| Other Expenses | 9 | 164,085 | 110,006 |
| IT Expenses | 10 | 116,145 | 103,071 |
| Operating Expenses | 11 | 105,467 | 103,689 |
| Depreciation Expenses | 12 | 49,855 | 54,854 |
| Bequest Expenses | 13 | 51,005 | 41,513 |
| TOTAL EXPENDITURE | | 3,985,364 | 3,698,581 |
| TOTAL COMPREHENSIVE SURPLUS | | 86,096 | 118,891 |

STATEMENT OF FINANCIAL POSITION**As at 30 June 2016**

| | Note | 2016 \$ | 2015 \$ |
|--|------|------------------|------------------|
| CURRENT ASSETS | | | |
| Cash Assets | 14 | 926,837 | 829,125 |
| Receivables | | 123,057 | 62,825 |
| Deposits and Bond Monies | | 53,137 | 81,888 |
| Inventory | | 13,245 | 10,515 |
| Prepayments | | 42,874 | 112,695 |
| Work in Progress (Website Development) | | - | 8,184 |
| TOTAL CURRENT ASSETS | | 1,159,150 | 1,105,232 |
| NON - CURRENT ASSETS | | | |
| Property, Plant and Equipment | 15 | 2,693,846 | 2,692,379 |
| TOTAL NON - CURRENT ASSETS | | 2,693,846 | 2,692,379 |
| TOTAL ASSETS | | 3,852,996 | 3,797,611 |
| CURRENT LIABILITIES | | | |
| Payables | 16 | 230,669 | 271,292 |
| Grants In Advance | 17 | 50,495 | 28,679 |
| Income in Advance | 18 | 61,472 | 92,797 |
| Annual Leave | | 173,103 | 156,205 |
| Long Service Leave | | 49,389 | 28,232 |
| TOTAL CURRENT LIABILITIES | | 565,128 | 577,205 |
| NON - CURRENT LIABILITIES | | | |
| Long Service Leave | | 16,790 | 35,424 |
| TOTAL NON - CURRENT LIABILITIES | | 16,790 | 35,424 |
| TOTAL LIABILITIES | | 581,918 | 612,629 |
| NET ASSETS | | 3,271,078 | 3,184,982 |
| MEMBERS FUNDS | | | |
| Accumulated Funds | | 1,309,267 | 1,190,376 |
| Asset Revaluation Reserve | | 1,875,715 | 1,875,715 |
| Current Year Surplus | | 86,096 | 118,891 |
| TOTAL MEMBERS FUNDS | | 3,271,078 | 3,184,982 |

STATEMENT OF CHANGES IN EQUITY
For the year ended 30 June 2016

| | Reserves | Retained | Total Equity |
|---|------------------|------------------|---------------------|
| | \$ | Earnings | \$ |
| BALANCE AT 1 JULY 2014 | 1,875,715 | 1,190,376 | 3,066,091 |
| Comprehensive Income | | | |
| Surplus for the year attributable to members of the entity | - | 118,891 | 118,891 |
| Other comprehensive income for the year | - | - | - |
| Total comprehensive income attributable to members of the entity | 1,875,715 | 1,309,267 | 3,184,982 |
| BALANCE 30 JUNE 2015 | 1,875,715 | 1,309,267 | 3,184,982 |
| Comprehensive Income | | | |
| Surplus for the year attributable to members of the entity | - | 86,096 | 86,096 |
| Other comprehensive income for the year | - | - | - |
| Total comprehensive income attributable to members of the entity | - | 86,096 | 86,096 |
| BALANCE AT 30 JUNE 2016 | 1,875,715 | 1,395,363 | 3,271,078 |

STATEMENT OF CASH FLOWS
For the year ended 30 June 2016

| | Note | 2016 \$ | 2015 \$ |
|---|-----------|-----------------|-----------------|
| CASH FLOWS FROM OPERATING ACTIVITIES | | | |
| Receipts from donations, bequests and other income | | 766,921 | 595,957 |
| Grant receipts | | 3,236,494 | 3,186,298 |
| Payment to suppliers and employees | | (3,889,620) | (3,657,450) |
| Interest received | | 27,055 | 27,055 |
| Net cash provided by operating activities | | 140,850 | 151,860 |
| CASH FLOWS FROM INVESTING ACTIVITIES | | | |
| Payment for plant and equipment | | (43,138) | (20,244) |
| Net cash used in investing activities | | (43,138) | (20,244) |
| Net increase in cash held | | 97,712 | 131,616 |
| Cash on hand at the beginning of the financial year | | 829,125 | 697,509 |
| Cash on hand at the end of the financial year | 14 | 926,837 | 829,125 |

Note 1: Statement of Accounting Policies

These financial statements are special purpose financial reports for distribution to the members in accordance with the constitution of the WA AIDS Council Inc and the requirements of the Associations Incorporations Act 1987 and the *Australian Charities and Not-for-profits Commissions Act 2012*. No Australian Accounting Standards, Urgent Issues Group Consensus Views or other authoritative pronouncements of the Australian Accounting Standards Board have been used in the preparation of this financial report.

These statements are also prepared on an accrual basis. They are based on historic cost and do not take into account changing money values or, except where specifically stated, current valuations of non-current assets.

The following specific accounting policies, that are consistent with the previous period unless otherwise stated, have been adopted in the preparation of the statements:

(a) Income Tax

No provision has been made for the payment of income tax, as the Association is exempt from payment of income tax under the Income Tax Assessment Act 1936.

(b) Property, Plant and Equipment

Property, plant and equipment are included at cost or at valuation. All assets, excluding freehold land and buildings, are depreciated using the diminishing value method commencing from the time the asset is held ready for use at depreciation rates set by the Board of Management.

(c) Grants

Where grant monies have been received but relate to services that will be provided in subsequent financial years, then these amounts are carried forward as "Grants Received in Advance". Any amounts received in excess of expenditure, but for services relating to the current reporting period, are treated as income or profits for that year.

(d) Restricted Cash

The Watson Brown Bequest Funds are held to provide assistance to homosexual persons who are suffering from HIV or AIDS. The funds associated with the Bequest cannot be used to pay for WAAC expenditure and have been categorised as RESTRICTED FUNDS.

(e) Fundraised Monies

All fundraising income is recognised when received. All related expenses are recognised when incurred.

(f) Employee Entitlements

Provision is made for the Association's liability for employee entitlements arising from services rendered by employees to balance date. Employee entitlements, together with entitlements arising from wages and salaries, annual leave and superannuation have been calculated to meet the Association's legal obligations. Contributions are made by the Association to an employee superannuation fund and are charged as expenses when incurred.

(g) Goods and Services Tax (GST)

WA AIDS Council Inc is registered for GST. All revenue and expenditure is stated net of GST.

| | 2016 | 2015 |
|------|------|------|
| Note | \$ | \$ |

Note 2: REVENUE - GOVERNMENT GRANTS INCOME

| | | |
|---|------------------|------------------|
| Department of Health - Sexual Health and Blood-Bourne Virus Program | 2,671,953 | 2,622,138 |
| Department of Health - Support Services for People Living With HIV/AIDS | 329,641 | 323,495 |
| Department of Health - Mental Health Relief Grants | 188,329 | 187,874 |
| Department of Health - ENDHIV Funding | - | 5,050 |
| Grants Other | - | 22,148 |
| | 24,755 | 41,209 |
| TOTAL GOVERNMENT GRANTS INCOME | 3,214,678 | 3,201,914 |

Note 3: REVENUE - OTHER INCOME

| | | |
|---------------------------------|----------------|----------------|
| Sales | 69,356 | 75,173 |
| Training Fees - External | 13,850 | 8,232 |
| Client Fees | 9,061 | 9,219 |
| Interest Received | 13,781 | 14,784 |
| Interest Received - Bequest WB | 1,549 | 2,389 |
| Interest Received - Bequest PH | 685 | 1,034 |
| Interest Received - Fundraising | 8,295 | 8,448 |
| Interest Received - ILMF | 328 | 400 |
| Memberships | 1,656 | 1,300 |
| Other Income | 353,225 | 125,723 |
| TOTAL OTHER INCOME | 471,786 | 246,702 |

Note 4: EXPENDITURE - EMPLOYEE EXPENSES

| | | |
|--------------------------------|------------------|------------------|
| Salaries and Wages | 2,530,206 | 2,334,491 |
| Superannuation | 233,963 | 217,408 |
| Employee Wellness Program | 5,259 | 5,127 |
| Recruitment Costs | 1,858 | 1,872 |
| Temp/Casual Staff | - | 9,639 |
| Provision - Leave Entitlements | 19,420 | 25,976 |
| Conferences, Courses, Seminars | 27,216 | 25,579 |
| Travel & Accommodation | 63,832 | 60,325 |
| Professional Development | 1,293 | - |
| Other Employee Expense | 3,170 | - |
| TOTAL EMPLOYEE EXPENSES | 2,886,217 | 2,680,417 |

Note 5: EXPENDITURE - FACILITIES EXPENSES

| | | |
|----------------------------------|----------------|----------------|
| Building Expense/Maintenance | 11,756 | 13,728 |
| Parking Costs | 3,730 | 4,505 |
| Cleaning | 29,098 | 24,234 |
| Electricity & Gas | 20,318 | 18,374 |
| Rates & Charges | 16,941 | 15,059 |
| Rent & Outgoings | 147,444 | 151,831 |
| Security | 2,141 | 2,344 |
| TOTAL FACILITIES EXPENSES | 231,428 | 230,075 |

| | 2016 | 2015 |
|------|------|------|
| Note | \$ | \$ |

Note 6: EXPENDITURE - ADMINISTRATION EXPENSES

| | | |
|--------------------------------------|----------------|----------------|
| Accounting | 7,000 | 6,250 |
| Bank/Credit Card Fees | 5,762 | 4,997 |
| Consulting & Prof Fees | 39,069 | 29,582 |
| Insurance | 51,055 | 46,463 |
| Printing - Design & Graphics | 4,053 | 8,320 |
| Printing - External Providers | 14,332 | 27,678 |
| Printing - Internally Produced | (165) | - |
| Stationery | 7,580 | 7,387 |
| Rounding & Adjustments | (512) | - |
| TOTAL ADMINISTRATION EXPENSES | 128,174 | 130,677 |

Note 7: EXPENDITURE - STYLEAID EXPENSES

| | | |
|--------------------------------|----------------|----------------|
| Catering - Fundraising | 72,728 | 69,815 |
| Equipment Expenses | 4,953 | 47,300 |
| Equipment/Venue Hire | 76,053 | 20,245 |
| Printing - Fundraising | 8,030 | 6,900 |
| TOTAL STYLEAID EXPENSES | 161,764 | 144,260 |

Note 8: EXPENDITURE - ADVERTISING EXPENSES

| | | |
|--|---------------|----------------|
| Advertising expenditure includes Sex in Other Cities, GayMSM and M Clinic Campaigns | 91,224 | 100,019 |
| TOTAL ADVERTISING EXPENSES | 91,224 | 100,019 |

Note 9: EXPENDITURE - OTHER EXPENSES

| | | |
|--------------------------------|----------------|----------------|
| Catering - Volunteers | 6,950 | 9,995 |
| Catering - Staff/Board | 9,242 | 11,342 |
| Catering- Clients/Retreats | 7,991 | 9,173 |
| Catering - Projects | 12,771 | 8,914 |
| Courier/Freight | 4,713 | 4,414 |
| Occupational Safety & Health | 323 | 1,217 |
| Volunteer Costs | 1,181 | 1,157 |
| Legal Fees | 810 | 758 |
| MV - Fuel & Oil | 8,089 | 9,052 |
| MV - Maint/Rego | 5,305 | 5,941 |
| MV - Hire of Vehicles | 1,871 | 1,995 |
| MV - Leasing Costs | 3,996 | - |
| Photocopier & Printer Supplies | 17,301 | 20,109 |
| Postage | 8,085 | 6,252 |
| Speaker Fees | - | 410 |
| Special Projects | 52,275 | 6,809 |
| Sponsorship | 8,845 | 3,014 |
| Subscriptions/Memberships | 10,238 | 8,596 |
| Furniture and Fittings | 3,499 | 858 |
| Entertainment | 600 | - |
| TOTAL OTHER EXPENSES | 164,085 | 110,006 |

| | Note | 2016 \$ | 2015 \$ |
|---|------|----------------|----------------|
| Note 10: EXPENDITURE - IT EXPENSES | | | |
| Computer Expenses | | 36,293 | 46,698 |
| Hosting Expenses | | 24,829 | - |
| Internet Access | | 14,554 | 13,994 |
| Telephone | | 30,988 | 29,873 |
| Sundry Expenses | | 4,349 | 6,713 |
| Telephone/Fax Maintenance | | 1,210 | 1,200 |
| Website Design, Connection | | 3,922 | 4,593 |
| TOTAL IT EXPENSES | | 116,145 | 103,071 |
| Note 11: EXPENDITURE - OPERATING EXPENSES | | | |
| Condoms, Dams, Lubricant | | 19,318 | 32,654 |
| Late Payment Fees-On Purchases | | 11 | 20 |
| Donations | | 1,200 | - |
| IDU - Disposal & Buckets | | 10,907 | 9,728 |
| IDU - Other (H/Cream, Spoons) | | 8,603 | 13,330 |
| Med/ Pharm Supplies | | 11,105 | 18,720 |
| Resource Materials | | 29,877 | 28,568 |
| Resources SafeSexPacks | | 24,784 | - |
| Pathology Charges | | - | 75 |
| Inventory Adjustments | | (338) | 594 |
| TOTAL OPERATING EXPENSES | | 105,467 | 103,689 |
| Note 12: EXPENDITURE - DEPRECIATION EXPENSES | | | |
| Depreciation | | 43,915 | 54,854 |
| Amortisation | | 5,940 | - |
| TOTAL DEPRECIATION EXPENSES | | 49,855 | 54,854 |
| Note 13: EXPENDITURE - BEQUEST EXPENSES | | | |
| Bequest Expenditure | | 35,633 | 28,028 |
| Emergency Relief Grants | | 15,372 | 13,485 |
| TOTAL BEQUEST EXPENSES | | 51,005 | 41,513 |
| Note 14: CURRENT ASSETS - CASH ASSETS | | | |
| ANZ Trading a/c | | 66,112 | 49,467 |
| ANZ Emergency Relief Account | | 818 | 4,029 |
| ANZ Negotiator Account | | 580 | - |
| ANZ Debit Cards Account | | 23 | - |
| ANZ Trust a/c | | 15,969 | 1,487 |
| ING - WAAC Cash Management | | 375,705 | 282,254 |
| ING Bequest - Watson Brown | 19 | 56,035 | 72,572 |
| ING Bequest - Phyllis Hill | 20 | 17,510 | 33,472 |
| ING - Fundraising Account | | 378,518 | 370,224 |
| Isabelle Lake Fund | 21 | 14,059 | 14,632 |
| Cash on Hand | | 1,508 | 988 |
| TOTAL CASH ASSETS | | 926,837 | 829,125 |

| | 2016 | 2015 |
|------|------|------|
| Note | \$ | \$ |

Note 15: NON-CURRENT ASSETS
PROPERTY, PLANT AND EQUIPMENT

| | | |
|--|------------------|------------------|
| Land and Buildings (664 Murray Street) | 2,500,000 | 2,500,000 |
| TOTAL LAND AND BUILDINGS | 2,500,000 | 2,500,000 |

Also noted is a covenant held by Lottery West who hold a beneficial interest in fifteen (15) undivided twenty-eighth shares in the building.

| | | |
|-------------------------------|---------------|---------------|
| Motor Vehicles (at cost) | 142,296 | 142,296 |
| Less Accumulated Depreciation | (97,411) | (82,864) |
| TOTAL MOTOR VEHICLES | 44,885 | 59,432 |

| | | |
|--------------------------------------|----------------|----------------|
| Furniture and Equipment (at cost) | 585,012 | 575,556 |
| Less Accumulated Depreciation | (484,589) | (459,768) |
| TOTAL FURNITURE AND EQUIPMENT | 100,423 | 115,788 |

| | | |
|-------------------------------------|---------------|--------------|
| Leasehold Improvements (at cost) | 50,110 | 41,828 |
| Less Accumulated Depreciation | (37,145) | (32,598) |
| TOTAL LEASEHOLD IMPROVEMENTS | 12,965 | 9,230 |

| | | |
|------------------------------------|---------------|--------------|
| Website Redevelopment (at cost) | 43,293 | 9,709 |
| Less Accumulated Amortisation | (7,720) | (1,780) |
| TOTAL WEBSITE REDEVELOPMENT | 35,573 | 7,929 |

| | | |
|--|------------------|------------------|
| TOTAL WRITTEN DOWN VALUE OF PROPERTY, PLANT AND EQUIPMENT | 2,693,846 | 2,692,379 |
|--|------------------|------------------|

Note 16: CURRENT LIABILITIES - PAYABLES

| | | |
|----------------------------------|----------------|----------------|
| Creditors | 38,189 | 100,902 |
| GST Payable | 92,272 | 71,265 |
| PAYG Payable | 31,391 | 40,853 |
| VISA CARD | 14,844 | 10,450 |
| Provision for Variable Outgoings | 2,387 | 2,387 |
| FBT | 2,558 | - |
| Superannuation | 49,028 | 45,435 |
| TOTAL PAYABLES | 230,669 | 271,292 |

Note 17: CURRENT LIABILITIES - GRANTS IN ADVANCE

| | | |
|----------------------------------|---------------|---------------|
| Dept of Health - Core Grant | 19,154 | 19,148 |
| Dept of Health - SHAPE | 12,000 | - |
| Grants in Advance Freedom Centre | - | 3,172 |
| Grants in Advance Other | 19,341 | 6,359 |
| TOTAL GRANTS IN ADVANCE | 50,495 | 28,679 |

Note 18: CURRENT LIABILITIES - INCOME IN ADVANCE

| | | |
|--------------------------------|---------------|---------------|
| Pre Sold Ticket Sales | 51,875 | 76,100 |
| Sponsorship | 10,000 | 13,000 |
| Other Income in Advance | (403) | 3,697 |
| TOTAL INCOME IN ADVANCE | 61,472 | 92,797 |

| | 2016 | 2015 |
|------|------|------|
| Note | \$ | \$ |

Note 19: WATSON-BROWN BEQUEST FUNDS

| | | |
|---|---------------|---------------|
| Opening Balance | 72,572 | 105,047 |
| Transfer of FY 2014 Expenses to trading Account July 2014 | - | (14,129) |
| Bequest Disbursements | (18,086) | (20,736) |
| Interest Received | 1,549 | 2,390 |
| TOTAL WATSON-BROWN BEQUEST FUNDS | 56,035 | 72,572 |

Note 20: PHYLLIS HILL BEQUEST FUNDS

| | | |
|---|---------------|---------------|
| Opening Balance | 33,472 | 45,496 |
| Transfer of FY 2014 Expenses to trading Account July 2014 | - | (5,159) |
| Bequest Disbursements | (16,648) | (7,898) |
| Interest Received | 686 | 1,033 |
| TOTAL PHYLLIS HILL BEQUEST FUNDS | 17,510 | 33,472 |

Note 21: ISABELLE LAKE MEMORIAL FUND

| | | |
|--|---------------|---------------|
| Opening Balance | 14,632 | 15,132 |
| Bequest Disbursements | (900) | (900) |
| Interest Received | 327 | 400 |
| TOTAL ISABELLE LAKE MEMORIAL FUND | 14,059 | 14,632 |

STATEMENT OF THE BOARD OF MANAGEMENT

The Board has determined that the Association is not a reporting entity and that this special purpose financial report should be prepared in accordance with the accounting policies outlined in note 1 to the financial statements.

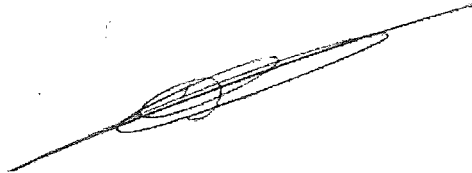
In the opinion of the Board of Management of the Western Australian AIDS Council Inc the financial report:

1. Presents a true and fair view of the financial position of the Western Australian AIDS Council Inc as at 30 June 2016 and its performance for the year ended on that date.
2. At the date of this statement, there are reasonable grounds to believe that the Western Australian AIDS Council Inc will be able to pay its debt as and when they fall due.

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



Board Chair



Treasurer

Dated at Perth this 22nd day of September 2016

RSM Australia Pty Ltd

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INDEPENDENT AUDITOR'S REPORT

TO THE MEMBERS OF

WA AIDS COUNCIL INC

We have audited the accompanying financial report, being a special purpose financial report, of WA Aids Council Inc ("the registered entity"), which comprises the statement of financial position as at 30 June 2016, the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, notes comprising a summary of significant accounting policies and other explanatory notes and the Statement by the Board of Management.

Board of Management's Responsibility for the Financial Report

The Board of Management of the registered entity is responsible for the preparation of the financial report 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 Charities and Not-for-profits Commissions Act 2012* and is appropriate to meet the needs of the members.

The Board of Management's responsibility also includes such internal control as the Board of Management determine is necessary to enable the preparation of a financial report that is free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

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

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the registered entity's preparation of the financial report that gives a true and fair view 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 registered entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the responsible persons, as well as evaluating the overall presentation of the financial report.

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

THE POWER OF BEING UNDERSTOOD

AUDIT | TAX | CONSULTING

RSM Australia Pty Ltd is a member of the RSM network and trades as RSM. RSM is the trading name used by the members of the RSM network. Each member of the RSM network is an independent accounting and consulting firm which practices in its own right. The RSM network is not itself a separate legal entity in any jurisdiction.

RSM Australia Pty Ltd ACN 009 321 377 atf Birdanco Practice Trust ABN 65 319 382 479 trading as RSM

Liability limited by a scheme approved under Professional Standards Legislation

Independence

In conducting our audit, we have complied with the independence requirements of the Australian professional accounting bodies.

Opinion

In our opinion the financial report of WA Aids Council Inc is in accordance with Division 60 of the *Australian Charities and Not-for-profits Commissions Act 2012*, including:

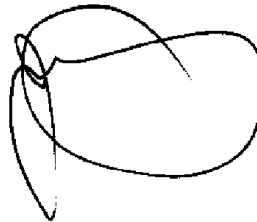
- (a) giving a true and fair view of the registered entity's financial position as at 30 June 2016 and of its financial performance and cash flows for the year ended on that date; and
- (b) complying with Australian Accounting Standards to the extent described in Note 1, and Division 60 of the *Australian Charities and Not-for-profits Commission Regulation 2013*.

Basis of Accounting

Without modifying our opinion, we draw attention to Note 1 to the financial report, which describes the basis of accounting. The financial report has been prepared for the purpose of fulfilling the Board of Management's financial reporting responsibilities under the *Australian Charities and Not-for-profits Commissions Act 2012*. As a result, the financial report may not be suitable for another purpose.



RSM AUSTRALIA PTY LTD



Perth, WA
Dated: 23 September 2016

J A KOMNINOS
Director



WAAC

WA AIDS C

Thank

You!

#NVW15

ANNUAL REPORT 2016