



ANNUAL REVIEW

2014/2015



WWW.CROHNSANDCOLITIS.COM.AU

Our goal is to ensure that no-one suffers from IBD

our organisation

Crohn's & Colitis Australia (CCA) is the peak body representing approximately 75,000 Australian with Crohn's disease or ulcerative colitis. These two conditions are commonly referred to as inflammatory bowel disease (IBD).

We have been supporting Australians with IBD since 1985. For over 30 years, we have helped make life more liveable for those living with IBD, for which there is currently no cure. We help the IBD community through support services, education, awareness campaigns and research.

our vision

Support for today, a cure for tomorrow

our mission

To support the Crohn's and colitis community, with a focus on confidential support programs including education, advocacy, counselling, increasing awareness, and generating and utilising funds for research and support.

from our chair & ceo

This year marked an exciting period for CCA as the first year of our newly implemented Strategic Plan for 2015-18. This new strategic direction will help take the organisation to the next level, and ensure a sustainable business model for the future.

Growing our organisation is an important step in the Strategic Plan, to gain the capacity to fund research and provide tailored, personalised support on scale. To achieve this, we must maintain strong relationships with key stakeholders such as government partners and industry sponsors, and ensure a robust planning process is undertaken that will underpin our strategic programs.

This year, we continued to receive support from the Victorian Department of Health which has helped us maintain funding for our Volunteer Teams and Peer Support Program. This pilot program in Victoria is expanding well, and we continue to work on securing funding in other states to roll the program out nationally.

One of our most significant projects, the IBD Quality of Care Program, is now well underway. Work recruiting hospital sites commenced in early 2015. At the end of June 2015, we secured the involvement of 58 hospitals and IBD clinics to be a part of the national IBD Audit. We anticipate many more will follow in the first half of FY 2016. Interim Australian IBD Standards have been completed and will have been released in September 2015. The IBD Standards will be finalised once the audit is completed. We anticipate the IBD Audit and accompanying standards will be completed at the end of the 2016 financial year and the report published later in the year.

Continuing our work to raise public awareness of Crohn's disease and colitis, CCA held two awareness campaigns over the year. *Our Into the Open* campaign, which included online promotion and advertising posters in public restrooms, spread the word that people living with IBD do not need to hide themselves away. The campaign, which ran from January until April 2015, reached an estimated 3,889,678 weekly patron visits across airports, shopping centres and universities. The reach through social media over this time was over 606,089.

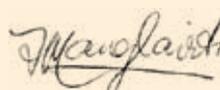
We continued to campaign with the international IBD Awareness Month theme of #UnitedWeStand2015. We encouraged members to share their stories via video on our Facebook page, and had an influx of videos from across the country. Hearing stories directly from our members is the best way we can spread the word that IBD is simply a part of a person, it does not define them.

There have been some changes at Board level this year with both our Chair Bernadette Or and Company Secretary Sophia Tzaferis stepping down from the board. I would like to thank them both for their commitment and support over the years and for their outstanding contribution to CCA's growth. Mr Philip Picking has stepping in as interim Chair as we continue to look to fill the role with a suitably qualified and experienced Board Chair who is capable of supporting CCA's vision for the next few years.

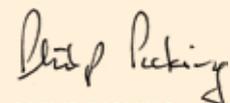
Our financial results have been better than expected. However, we did end the year with a deficit. Fundraising income from volunteers has dropped by eight per cent to \$222,930, which we are addressing by investigating new ways for members and supporters to get involved and raise funds.

Our Great Wall of China Challenge will take place in October 2016, with the support of charity travel organisation Inspired Adventures. This new way of fundraising will enable CCA supporters to set themselves a challenge and take on a lifetime experience, while helping us reach our target of \$80,000. We continue to look for new and innovative ways to get involved with our supporters, and are excited to see what arises in the next year.

As always, CCA is grateful for the support it receives from so many. Together with the CCA board, I would like to thank our sponsors, members, donors, volunteers, government partners, ambassadors, and my team at CCA whose support and passion have shaped a fruitful year that has provided building blocks for further success.



FRANCESCA MANGLAVITI
CEO



PHILIP PICKING
INTERIM CHAIR

who we are

OUR BOARD

FRANCESCA MANGLAVITI

Chief Executive Officer / Director

Francesca joined the CCA Board of Directors in 2008, having spent three years as the organisations Chief Executive Officer. Francesca has held senior management positions in not for profit, commercial and government organisations. She offers significant experience in strategic planning, liaison with government, stakeholder management, education and developing organisational capacity.

PAUL PAVLI

Director

Paul Pavli trained in Gastroenterology at Concord and Royal North Shore Hospitals in Sydney and holds a PhD in gastrointestinal immunology from Australian National University. Working with researchers from the ANU, he helped establish the Australian Familial IBD Register in the early 1990s, and more recently, has been studying the role of bacteria in triggering IBD. Paul has served on a number of Federal and Territory government bodies and professional organizations including the National Health and Medical Research Council (NHMRC), and the Gastroenterological Society of Australia.

CCA AMBASSADORS

Jordan Skinner

V8 Ute Racer

Brittani Nicholl

Australian champion surfer

Luke Escombe

musician, comedian and MC

Katrina Chambers

Reality TV star and blogger

Francesca McMillan

Bollywood choreographer and Mrs Australia Universe 2014

Peter Timbs

Radio personality

Tansel Ali

Australian memory champion

Natalie von Bertouch

retired Australian netball champion

Paula Duncan

Actor and Logie winner

PHILIP PICKING

Director

Philip Picking, ACA, Bachelor of Business (Accounting), is currently Business Manager with the Public Transport Ombudsman Victoria. He has extensive business experience, including with Deloittes, John Holland, Wandel & Goltermann and in the consulting engineering business as a Financial Controller with WE Bassett Consulting Engineers and AECOM Australia. Philip has lived with Crohn's disease since his mid twenties.

DR GREGORY MOORE

Director

Dr Moore is an IBD specialist gastroenterologist. He founded the Inflammatory Bowel Diseases Unit at Monash Medical Centre in 2006, and oversees a specialised IBD clinic. Dr Moore co-ordinates a busy clinical trials unit, undertakes ongoing research and combines private practice and undergraduate and post-graduate teaching. Dr Moore is also a member of Australian Inflammatory Bowel Disease Association, the peak medical IBD group, and is a sought after speaker at both scientific and public forums.

IBD QUALITY OF CARE STEERING COMMITTEE

Professor Paul Pavli (Chair)

Director Crohn's & Colitis Australia

Professor Jane Andrews

Chair, Australian Inflammatory Bowel Disease Association (AIBDA)

Gastroenterological Society of Australia (GESA)

Royal Australasian College of Physicians (RACP)

Ms Stephanie Buckton

Gastroenterology Nurses College of Australia (GENCA)

Associate Professor

Don Cameron

President, Gastroenterology Society of Australia (GESA)

Royal Australasian College of Physicians (RACP)

ANITA REILLY

Director

Anita has a long association with CCA, having served in an executive position with CCA Queensland, which merged with CCA in March 2009. Anita is the Queensland state coordinator and has over two decades of experience working with the IBD community, and in the provision of information and support services. She also coordinates CCA's IBD helpline. Anita's son has had Crohn's since he was a young child.

SCIENTIFIC & MEDICAL ADVISORY COMMITTEE

Dr Gregory Moore

Representing CCA

Prof Peter Gibson

Representing IBD Australia

Stephanie Buckton

Representing Gastroenterological Nurses College of Australia (GENCA)

Jaci Barrett

Representing the Dietitians Association of Australia (DAA)

Dr Andrew Luck

Representing Colorectal Surgeons Society

Ms Francesca Manglaviti

CEO, Crohn's & Colitis Australia

Mr Wayne Massuger

Project Manager, Crohn's & Colitis Australia

Dr Gregory Moore

Director, Crohn's & Colitis Australia

Mr James Moore

Colorectal Surgical Society ANZ (CSSANZ)

Ms Amy Page

Pharmaceutical Society of Australia (PSA)

Ms Elizabeth Purcell

Dietitians Association of Australia

Professor Nigel Stocks

Royal Australian College of General Practitioners (RACGP)

Professor Shane Thomas

Australian Psychological Society (APS)

fundraising highlights

Throughout the year, CCA is lucky enough to hear incredible fundraising stories from members across Australia. Whether it be a physical challenge, community effort, or something a bit left of centre, it is always a highlight to see what CCA's supporters have achieved.



MICHAEL TULLY Raised \$20,160.57 for CCA

Inspired by the challenges faced by his niece Kirah, who underwent an ileostomy in October 2014, Michael Tully organised a series of fundraisers as he felt it was important to show the impact that Crohn's and colitis can have on a young person's life. His events, which included a triathlon, a trivia night, and a swim challenge, raised more than \$20,000 for CCA thanks to a large network of hard workers and supporters.

"The idea was in response to my niece Kirah's ileostomy, and the hopelessness and feelings of frustration with the disease – we needed to do something.

"This disease is insidious, relatively unknown among the general public and needs research and awareness to support the sufferers. The number of times I've been "informed" it only requires a change of diet is staggering!"

"I would tell anyone ready to have a go at fundraising that it is long, hard work, requiring lots of friends and supporters, but is the most rewarding thing I've ever done. Knowing you've made a difference in any way is worth everything you do."

RICK FOSTER Raised \$17,414 for CCA

With his daughter Charlotte suffering from Crohn's disease and spending more than 300 days in hospital since 2009, Rick Foster from Bathurst decided it was time to do something. A keen cyclist, he put his pedal to the metal and raise as much as he could for CCA and the Children's Hospital at Westmead by cycling 1700km from South Australia to New South Wales.

In total, he and his fundraising team managed to raise \$17,414 for CCA over 12 months. Rick says it has been one of the best things he has ever done.

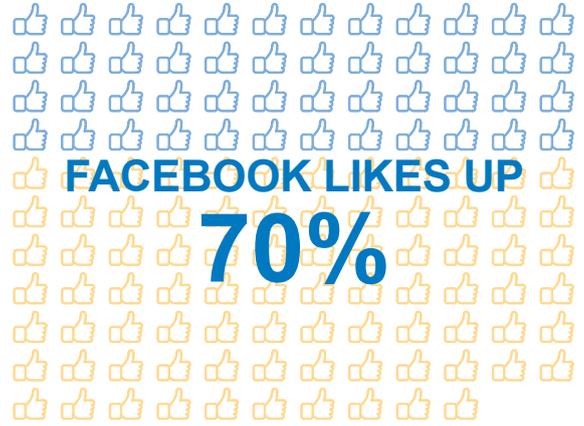
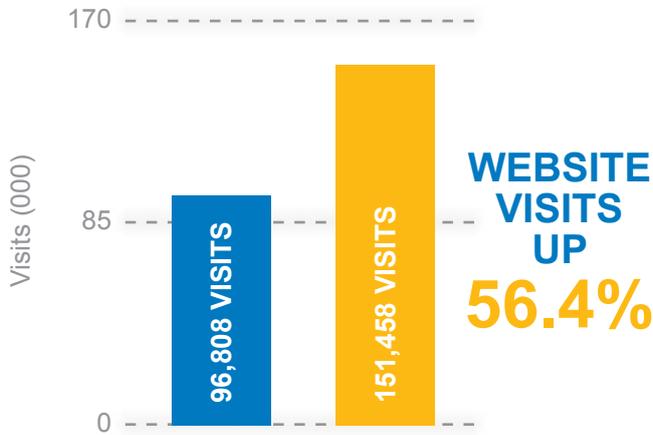
"I was amazed at the amount of people I spoke with over the 12 months leading up to the ride and even during the fundraising, of people who knew of someone who has Crohn's. It's such a horrible disease but many people are affected by it.

"I thought any money raised to help with finding a cure is money well spent and may help others down the track avoid what Charlotte went through.

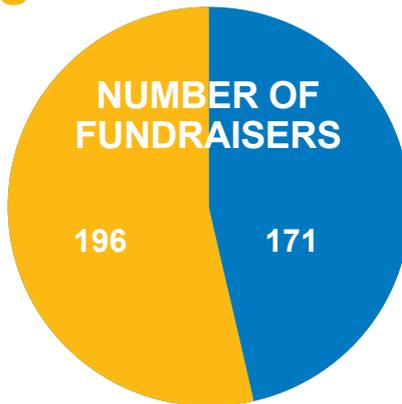
"I certainly enjoyed the challenge and had a sense of satisfaction when it was done."



our year in numbers



GOVERNMENT GRANTS REACHED
\$260,353



58
SITES JOINED UP TO THE IBD AUDIT

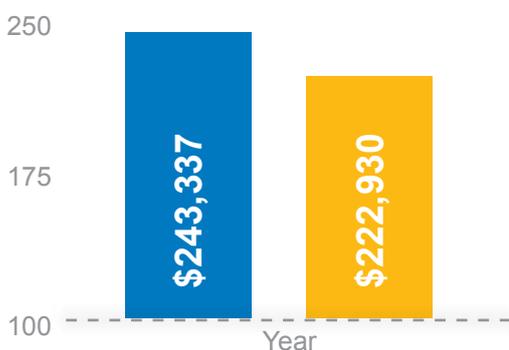
400
INSTAGRAM FOLLOWERS SINCE JAN 2015



TOTAL REVENUE UP BY 14%



VOLUNTEER FUNDRAISING



40 SUPPORT GROUPS
up from 37

3
TEEN CAMPS

new projects 2016

MEMBERSHIP RENEWAL PROJECT

In 2015, the Membership Renewal project was undertaken as part of our Strategic Plan for 2015-18, and to meet the following goals:

- Revitalise current membership packages to offer better value to members
- Provide a sustainable income to continually improve the services and support we can offer
- Work towards our strategic goal of 30,000 members.

Through a series of member surveys, we have been able to assess the perceived benefits in being a member of CCA, and work on a new membership program to be unveiled in early 2016.

We discovered that our members feel their membership gives them opportunities to learn more, it gives them a feeling of being more informed to help them manage their condition and a place to connect with others who understand.

The membership renewal project will now focus providing members with a new program which will introduce new value, as well as maintain the benefits which are already appreciated. The new program will be launched in March 2016 and includes tailored benefits for young children, teenagers and carers.

In line with our strategic priorities, Crohn's & Colitis Australia has set a target to increase membership by a third in the first year of the program. To complement the new membership offering, new communications materials will be developed, including a new application form and research updates newsletter.

ONLINE IBD SUPPORT TEAM & HELPLINE

As part of our strategic priority to offer tailored, personalised support to the IBD community, CCA is creating an online platform that will extend the current phone helpline option and provide an online peer-to-peer support service.

The Online IBD Support Team will offer phone support, an online chat with a health professional, information support tools such as Frequently Asked Questions or checklists and guidelines, and a section providing peer-to-peer support opportunities.

At present, members are only able to be assisted when our IBD Counsellor is physically available. We are also aware that the current helpline is well used by people caring for others with IBD, as well as patients themselves. The new online platform provides new information and support tools for carers as well as providing different formats for people to seek assistance within their own timeframes.

ONLINE MAGAZINE

As our membership demographics change, we are moving more of our services online. This helps us cater to people in rural areas who may not have immediate access to support group services or forums, as well as younger people who may wish to access IBD support online. This move is part of our ongoing strategic priority of being the go-to place for IBD comment, resources and support in Australia.

Our member magazine Inside Insight is currently mailed out to our members across the country each quarter. While it is presently available online in PDF format, CCA is committed to making the online magazine a more interactive and useful tool for our members. From March 2016, the magazine will be available online in full format, while the print edition will be scaled back to a smaller size.

The online magazine will be innovative through its video and social media offerings, and enable CCA to provide more flexible content on a quarterly basis, from lifestyle and nutrition advice to a wider variety of photos and stories from CCA members. We will be encouraging members to subscribe directly to the online magazine from the beginning of 2016. This will enable CCA to reduce printing and postage costs spent on the magazine, which can instead go into research and programs.

“CCA membership gives people a feeling of being more informed and a place to connect with others who understand”



IBD Quality of Care Program

The CCA Quality of Care Program is working to create an evidence-base that will be used to improve the delivery of care to IBD patients and their families in the future.

Funded by the Australian Government who provided \$500,000 in matched funding, the project will establish the first Australian IBD Standards and measure the services and quality of care provided by Australian hospitals.

CCA convened a steering committee of the key IBD stakeholders in November 2014 to support the project including: the Royal Australasian College of Physicians, Australian Inflammatory Bowel Disease Association, Gastroenterological Society of Australia, Gastroenterology Nurses College of Australia, Colorectal Surgical Society of Australia and New Zealand, Royal Australasian College of Surgeons, Pharmaceutical Society of Australia, Dietitians Association of Australia, Australian Psychological Society and the Royal Australian College of General Practitioners. The committee, chaired by Professor Paul Pavli, met three times between November and June to shape the project plan and, audit methodology and begin the work of identifying appropriate resources and evidence.

The CCA project team have developed relationships with the Royal College of Physicians (UK), the IBD Standards group (UK) and National Stroke foundation to build on the substantial existing knowledge of these groups in conducting similar project initiatives. In particular the steering committee has adopted the UK IBD Standards and adapted them for the Australian health care environment. A focus group of CCA members reviewed the draft standards and provided insightful feedback to guide the process. The standards are planned to be launched in conjunction with Australian Gastroenterology Week 2015 and then will undergo a period of testing and feedback. These standards will provide the benchmark for auditing hospitals nationally.

Recruitment of hospitals to participate in auditing of IBD services was commenced in February and at the end of June 58 sites had registered. These hospitals include a range of hospitals with 50 to more than 500 beds and are located throughout metropolitan and rural/regional areas of most states. Recruitment will continue towards a target of 80 – 100 sites. Audit questionnaires designed to characterize the variability in current IBD care programs and resources and identify the source of any variation in care were developed and will undergo testing prior to transfer into a web based format. Data collection will commence in late 2015 at hospital sites and a final report is anticipated to be published in mid-2016.

The CCA team has worked hard to raise funds to match the government contribution. A fundraising campaign among members and the general public has raised \$155,000 to date, but we are still working to raise more. We also thank Janssen for their unrestricted educational grant of \$150,000 to support the project.



“CCA’s Interim Australian IBD Standards will provide the benchmark for the IBD Audit”

#IntoTheOpen

CCA in the Media

As part of CCA's strategic priority to be the go-to place for IBD comment, resources and support, it is important we maintain a public presence. Media and public awareness campaigns are two of CCA's biggest tools in ensuring Australia's understanding of Crohn's and colitis is improving year on year.

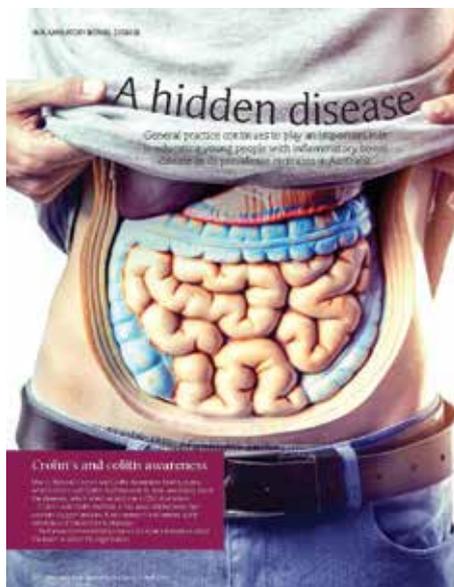
Over 2014/15, CCA held two major public campaigns to raise awareness of the number of Australians living with Crohn's disease or colitis and what these conditions mean for their everyday lives. These campaigns offer a unique opportunity for CCA to highlight specific IBD concerns, or encourage media to spread awareness among their consumers.

#UnitedWeStand2015

For IBD Awareness Month in May 2015, CCA partnered with international IBD organisations to spread the message of #UnitedWeStand2015, supporting those living with Crohn's disease and colitis.

CCA members were encouraged to post videos on our Facebook page sharing their story with the #UnitedWeStand2015 hashtag and showing support for fellow Australians living with Crohn's and colitis.

Around 15 people sent in videos, which CCA collected to publish on our YouTube account. This gave us a baseline to work with, that we can build on in future social media campaigns.



#IntoTheOpen

From January to April 2015, our awareness campaign Into The Open was held, with posters in bathroom facilities around the country and an online campaign sharing the message that with 75,000 Australians living with IBD, any one of your friends or family members could be living with it without you knowing.

Building a conversation around the #IntoTheOpen hashtag, CCA members spoke about living with Crohn's and colitis, and the 'invisible bully' that can take over their lives so quickly.

The posters in bathrooms were viewed approximately 49 million times, the online campaign reached around 947,000 people, and increased the CCA Facebook followers by almost 2000.

As one CCA follower said, "any awareness is helpful for the one in 250 people who suffer from it!"

In the Media

Across the year, CCA was pleased to have some of its members featured in the media, sharing their stories of life with Crohn's or colitis. By showing the way IBD can affect an individual, we are able to deepen the understanding of these diseases.

The April edition of the Royal Australian College of General Practitioners magazine, Good Practice, included a feature on inflammatory bowel disease, exploring its nature as a hidden disease, highlighting IBD Awareness Month, and speaking with CCA director Dr Gregory Moore.

Prompted by CCA member Carly Gordyn, the Sydney Morning Herald published a health feature on IBD. Carly wanted to spread the message that people need to be able to talk about their health concerns, even if they are not used to discussing their bathroom habits. "Digestive disorders are common and there's no reason for people to feel alone or embarrassed."

A number of fundraising members were also featured in local media, including a trio of friends from Coodanup, WA, who raised money at the Perth Color Run for CCA. We would like to thank all our members who fundraise for CCA and help raise the funds to make life more liveable for people living with Crohn's or colitis.

donors & supporters

Crohn's & Colitis Australia is grateful for the generous support of so many individuals, organisations and businesses.

We would like to acknowledge and thank those listed below for making a positive difference to those living with inflammatory bowel disease.

RESEARCH

\$36,600 Country Women's Association of NSW

\$25,000 Ted & Mandy Yencken

\$10,000 L Redman

\$5,713 S Gatt (Bottom's Up Ball),

\$1,000 - \$5,000 E Hatzimanolis, K Sandison, K Thomas, M Winter, S Robinson, S Bartlett, M Dodds, D McDermid

\$200 - \$999 H Baverstock, K Coulson, M Donnelly, C Tapping, P Hinchcliffe, J Skepastianos, J Corral, L Gatfield, P Brame, D Minns, J Leslie, A Kenna, D Reckenberg, A Hingston, J Dunstone, M & L Dumbleton, P Wicks, J Amprimo, K Lu, S Fotia, M Ebb, P Beukes

IBD AUDIT

\$5,000 P & H Butts

\$1,000 - \$4,999 M McPherson, D Birner, I Galloway, N Barrow, The Jackson Foundation, A Saraceni

\$200 - \$999 C Azzopardi, K Temple D & K Rechtman, S Klineberg, C Azzopardi, J Chan, P Goldsmith, B Boyd, M Hockless, S Woolston, M Corley, D Gluskie, R Singleton, E Camarri, C Azzopardi, M Flynn, Bentleigh RSL Women's Auxillary, E Hamilton, K Sandison, Alwyn Peffer & Company Pty Ltd, Hasting Old Holdens, John Finlay Engineering Pty Ltd, P Severs, K Rich, P Graves, P Humphreys, CBA – Melbourne Operations Centre, A Burt, D Shanahan, J Scuglia, G Board, F Macrae, K Ahern, C Van Der Jagt, H Baverstock, G Hume, R Haneman

GENERAL

\$25,000 Ted & Mandy Yencken

\$6,392 South Burnett Cricket Association

\$5,000 B Kilduff

\$1,000 - \$4,999 Rotary Club of Holroyd, Australand Foundation, National Australia Bank Ltd, Westpac Group Matched Giving, Macquarie Group Foundation Ltd, Sandhurst, C Dandy, S Bartlett, D Birner, K Rogers, R Beecraft, P & H Butts, J Boladeras, W & P Moran, K Thomas, Manning

Foundation, C Galvin, N Barrow, The Jackson Foundation, A Kingsford-Smith,

\$200 - \$999 E Bardoe, G Clark, V Anich, A Plint, Macquarie Bank Limited, ATO Departmental, Madsen, M Praciak, Clay & Water Pty Ltd, Diversified Communications, R Brierley, R Lardner, Qantas Airways Limited – Melbourne Contact Centre, Wallboard Tools, AMP Foundation Charitable Trust, City of Ballarat, Google Inc, B Gray, N Spitzer, M Watkins, J Thompson, M Congiusta, M Behling, R Boyle, A Ferencz, G Watts, S Lucas, H Rogers, J Nelder, P Zantis, D Gluskie, C Azzopardi, C Hounsell, A Junor, M Duggan, S Chhabra, G Gunn, D Phillips, R Winter, P Maguire, A Burt, M Taylor, D Shanehan, R Haneman, A Saraceni, R Johnston, C Busby, M Whitten, M Ismay, A Baud, H Tran, L Hinchey, E Cronin, A Ferris, J Dewar, M Chew, M Underwood, P Goldsmith, T Hassard, A Comninos, D Baxter, G Rickwood, J Fenton, P Farnan, J Weldon, F Manglaviti, Baden J Green Services P/L, Leap Consulting, C Mitchell, T & S Pick, E Camarri, L & R Eckel, Lions Club of Jarvis Bay, P Leonard, I Whiting, M Walker, C Arrigo, Muckerts Sawmill Pty Ltd, M Dominis, A Ziino, Lions Club of Morayfield & Dist Inc, Balmoral Excavation and Construction, M Clarke, John Finlay Engineering Pty Ltd, T Van Der Jagt, C Sampson, V Vickery, D Irwin, Vrinian Society of South Australia, B Clarke, Rotary Club of Brighton South Australia, O'Sullivan Johanson Lawyers, B Jenkins, M Wing, J Harding, A Dean, D Noble, A Patane, G & A Lord, The Honda Foundation, L Robinson

IBD FORUMS

\$1,119 Global Quest

Youth Camps

Up to \$999 Mondelez Australia, W & P Moran, C & S Hibbs, K Sidler

COMMUNITY FUNDRAISING

\$3,860 M Tully

\$1,000 - \$3,000 Entertainment Publications of Australia Pty Ltd, S Lee Baxter, Liverpool City Council, A Williams, S Heuston, K Hoddle, Copley & Districts Gymkhana

Committee, The Philip Kennedy Centre, Mount Pritchard Public School, P Bailey, Tea Tree Gully Golf Club, B Clarke, Money3 Corporation Ltd, I Lynass, S Maye, J Boladeras, G Provis, J Maher, G Robotis, M Kirke

Up to \$999 D Rodrigues, RevenueSA, A Turnbull, Lurnea High School, Wellington Secondary College, Leigh Creek Netball Club, Desert Riders Social Club, Leigh Creek Action Club, H Williams, William Creek Gymkhana Committee, Leigh Creek Basketball Club, Leigh Creek Sports Club, P Soumendra, N Pratten, LJ Hooker – Dickson Property Management, J Incoll, L Allan, F Failla, Heritage Bank Limited, W Batley, The Boys, M Wilkins, T Harrington, G Wilson, A Rahman, Ritchies Supermarket, M Borg, J Weldon, R Grice, B Egan, E Wells, J Baverstock, K Long, C Johnson, L Doyle, S Bailey, T Bell, L Beggan, C Ireland, J Barker, D Meffert, N Grice, F Jagger, M Ardagh, S Kingham, A Tiernay, P Bird, B Sand, J Morcos, K Smith, C Chapman, M Grice, V Fox, J Bent, J Hutchins, T Bell, G O'Connor, J & M Curie, G Doel, P Upton, R Tew, R Norvill, G Astwood, V Kemp, R Hendrich, B Grice, T Corey, F La Trobe, S Craig, M Grundy, D Grundy, J & H Liddall, A Boston, A Butcher, J Liddall, M Harney, K O'Connor, R Humbert Braid, N Pantazis, L Hines, A Grant, P Junni, L Skerman, A Grant, M Witt, T Corey, H Redding, S Tint, B Kirwan, T Helman, A Greenwood, M Corrigan, S McGregor, C Stamm, P McLean, M Mansell, N Crouch, J Crane, J McGregor, C Heffron, B Scoular, J DiStefano, H Carrol, B Chakos, J Crockett, S Richardson, D Woodland, M Thane, B Manuel, M Curry, C Crean, D Goldner, C Soutar, D Rowe

IN MEMORIAM DONATIONS

A Heidrich, P Sarri

IN CELEBRATION DONATIONS

Marni & Sydney's Wedding, C Smith, Stephanie's Wedding

MAJOR SPONSORS



CORPORATE SPONSORS



CORPORATE SUPPORTERS



We would also like to extend our thanks to the many organisations that have supported us through our Youth Camps, corporate volunteering, and offered their support through donation of goods or services.

our finances

TREASURER'S REPORT

CCA continued investing in research and creating awareness across a broad audience through events and activities mentioned in the attached Annual Review.

Overall revenue has risen from \$1,016,229 in 2013/14 to \$1,164,696, thanks in part to an increase in government grants and sponsorship for specific programs, such as the IBD Quality of Care Project.

This revenue increase is offset by a planned increase in expenses (up to \$1,319,081), as CCA invested in further resources such as an expanded staff. These changes, as well as sponsorship and grants from outside parties, put CCA in a strong position to further serve the IBD community in Australia.

Research programs included the new Edward and Mandy Yencken Postgraduate Research Scholarship, and we also undertook two public awareness campaigns. The Into the Open campaign involved convenience advertising in restrooms and generated positive feedback from the public. The international IBD Awareness Month campaign, #UnitedWeStand2015, prompted many members to share their stories with the IBD community through CCA's online channels during May.

HOW THE FUNDS WERE GENERATED

	2015 \$	2014 \$
Membership Fees	96,878	102,411
Donations	523,479	585,050
Sponsorship	238,447	94,999
Trusts and Foundations	985	92,083
Donated Goods and Services	1,800	37,005
Government Grants	260,353	50,000
Other	42,754	55,681
TOTAL	1,164,696	1,016,229

The recorded \$160,154 deficit has mainly been the result of changes in revenue streams. CCA had anticipated a better result from trusts and foundations, which brought in \$985. This was a significant drop from the previous financial year, in which trusts and foundations brought in \$92,093.

The drop in trust revenue, as well as a drop in revenue from membership fees (\$96,878 down from \$102,411) meant we had to draw on our reserves.

CCA has taken these fluctuations on board and will be implementing a renewed membership program in early 2016, which aims to address the falling membership numbers and reinforces our strategic goal of increasing membership to 30,000 by 2018. We will continue to track our expenses to ensure the best use of the resources available to us.

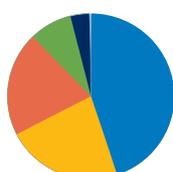
The Board is carefully monitoring all operations to position CCA well in the future and is confident that CCA will continue to perform well in the next financial year.

A full audited financial report is available upon request.

HOW THE FUNDS WERE SPENT

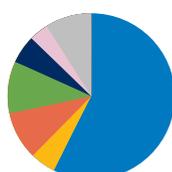
	2015 \$	2014 \$
Programs	723,382	620,983
Fundraising	206,183	267,596
Research	142,329	143,424
Administration	241,215	161,016
Queensland Office	5,972	8,603
TOTAL EXPENSES	1,319,081	1,201,622
SURPLUS (DEFICIT) FOR YEAR FROM OPERATIONS)	(154,385)	(185,393)
Realised/Unrealised Gain/(Loss)	(5,769)	(400)
SURPLUS (DEFICIT) AFTER IMPAIRMENT ASSETS	(160,154)	(185,793)

2015 INCOME



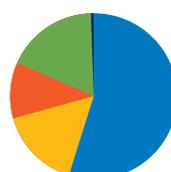
■ Donations (45%) ■ Government Grants (22%)
 ■ Sponsorship (20%) ■ Membership Fees (8%)
 ■ Other (4%) ■ Donated Goods & Services (0%)
 ■ Trusts & Foundations (0%)

2014 INCOME



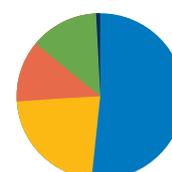
■ Donations (58%) ■ Government Grants (9%)
 ■ Sponsorship (9%) ■ Membership Fees (10%)
 ■ Other (5%) ■ Donated Goods & Services (4%)
 ■ Trusts & Foundations (9%)

2015 EXPENSES



■ Programs (55%) ■ Fundraising (16%)
 ■ Research (11%) ■ Administration (18%)
 ■ Queensland Office (0%)

2014 EXPENSES



■ Programs (52%) ■ Fundraising (22%)
 ■ Research (12%) ■ Administration (13%)
 ■ Queensland Office (1%)

BALANCE SHEET AS AT 30 JUNE 2015

ASSETS	2015 \$	2014 \$
Current Assets		
Cash Assets	52,766	61,478
Stock on Hand	4,696	939
Receivables & Prepayments	65,449	101,798
Bonds/Deposits	15,934	15,600
Total Current Assets	138,845	179,815
Non-Current Assets		
Investments	819,333	1,227,125
Office Equipment	147,604	149,417
Total Non-Current Assets	966,937	1,376,542
TOTAL ASSETS	1,105,782	1,556,357

BALANCE SHEET AS AT 30 JUNE 2015

LIABILITIES	2015 \$	2014 \$
Current Liabilities		
Payables and Accruals	21,333	59,499
Prepaid Membership	4,205	10,848
Unearned Revenue	50,000	73,150
Grant in advance	364,647	550,000
GST Payable	(7,109)	42,269
Other Liabilities	85,106	72,837
Total Current Liabilities	518,182	808,603
TOTAL LIABILITIES	518,182	808,603
NET ASSETS	587,600	747,754
EQUITY		
Retained Surplus	587,600	747,754
NET EQUITY	587,600	747,754

STATEMENT OF CASH FLOWS FOR THE FINANCIAL YEAR ENDED 30 JUNE 2015

	2015 \$	2014 \$
Cash Flows from Operating Activities		
Receipts from Members	90,235	100,853
Receipts from Donors and Supporters	782,428	760,476
Grants Received	75,000	550,000
Interest Received	24,012	21,153
Other Income	19,849	52,189
Payments to Suppliers and Employees	(1,384,589)	(1,071,260)
Net cash provided by/(used in) operating activities	(393,065)	413,411
Cash Flows from Investing Activities		
Purchases of property	(17,669)	(125,194)
Net cash provided by/(used in) investing activities	402,022	(313,844)
Net cash provided by/(used in) investing activities	384,353	(439,038)
Net Increase/(Decrease) in Cash Held	(8,712)	(25,627)
Cash at the beginning of the financial year	61,478	87,105
Cash at the end of the financial year	52,766	61,478