pleased to meet you.
OUR MISSION

Through the early detection of breast cancer, we work to reduce mortality and morbidity due to this disease in the Victorian community.

We are a not-for-profit, government-funded program providing mammographic screening and assessment through to a diagnosis of breast cancer to women for whom the evidence of benefit is strongest.

We strive for excellence in the provision of information and support to women, in multidisciplinary care and clinical practice.

Through program review and the analysis of data, we demonstrate our achievements and identify ways to improve.

We make a significant contribution to knowledge about cancer and its diagnosis and management.

Collaboration underpins everything we do. We build alliances throughout the health and community sectors to create a better health system.

We respect women's dignity and diversity and actively seek their input to make our services acceptable.

We provide services that are accessible to women whenever they live, whatever their background, women with special needs and those disadvantaged in our society.

We advocate for better treatment services and facilitate a pathway to care for women diagnosed with breast cancer.

OUR VISION

BY 2007:

We will show a reduction in mortality from breast cancer in the Victorian community.

Our leadership and achievements in cancer screening and health service improvement will be inspiring.

We will be seen as an essential component of cancer care in Australia.

We will be distinguished by the high esteem in which we are held by the women of Victoria.

Through the early detection of breast cancer, we work to reduce morbidity and mortality due to this disease in the Victorian community.

Our leadership and achievements in cancer screening and health service improvement will be inspiring.

We will be seen as an essential component of cancer care in Australia.

We will be distinguished by the high esteem in which we are held by the women of Victoria.

OUR VALUES

Listen to women and respect their needs.
Be passionate about excellence.
Work together as a team.
Respect each other’s differences and ideas.
Make well-informed decisions.
Be bold and proud.

BreastScreen Victoria gratefully acknowledges the support of the Population Screening Section, Department of Health and Ageing and Cancer Screening Services, and the Victorian Department of Human Services.
INTRODUCTION

BREASTSCREEN VICTORIA

BreastScreen Victoria is part of a national breast cancer screening program for women, BreastScreen Australia, which aims to reduce deaths from breast cancer through the early detection of the disease.

Jointly funded by the State and Commonwealth governments, BreastScreen Victoria invites women aged 50 to 69 years, who have not otherwise developed breast cancer symptoms or signs, to have free screening mammograms. Women aged 40 to 49 years and 70 years and over may also use the service.

Established in 1992 with just three staff, BreastScreen Victoria now operates through an extensive network, and continues to build on its achievements. This year two centres, Benalla and Gippsland, celebrated their ten-year anniversaries.

A comprehensive accreditation system ensures that all BreastScreen services delivered in Victoria operate under and comply with national standards. Services are assessed regularly by an independent multidisciplinary team.

The BreastScreen Victoria Program is managed by the Co-ordination Unit, which develops and reviews program policy, monitors service provision, coordinates special projects and administers the funding for the Program’s network of accredited screening and assessment centres. This statewide network of 8 assessment centres, 39 screening centres and 19 mobile screening locations ensures that all Victorian women have access to the Program.

BreastScreen provides free screening mammograms at two-yearly intervals for the target group for whom mammography screening studies have shown greatest benefit – women aged 50 to 69 years. Although a doctor’s referral is not required to attend the service, BreastScreen Victoria does liaise closely with general practitioners.

All BreastScreen services are free. For more information or an appointment call 13 20 50.

FROM THE CHAIR

Innovation, a continued commitment to quality improvement, and growth in the capacity to deliver a high quality breast cancer screening service are a challenge. New sites were opened in Casey, Hesket, and Wonthaggi and a second Mobile Screening Service was a challenge. New sites were opened in Casey, Hesket, and Wonthaggi and a second Mobile Screening Service became operational. As well as the opening of these new services, much time this year has also been put towards supporting the existing services.

Our 2004–2005 year closed with pride and celebration when BreastScreen Victoria’s Chief Executive Officer, Onella Stagoll was awarded the Medal of the Order of Australia as part of the Queen’s Birthday 2005 Honours.
Although there are always issues to be pursued and challenges to be faced at BreastScreen Victoria, 2004–2005 took us beyond our normal routine.

Over the year we started moving in exciting new directions, as we responded to new research and worked to keep providing a service that the women of Victoria value. It has been an invigorating experience, particularly as we begin to explore the potential of new technologies such as digital mammography.

Identifying critical success factors as part of our strategic planning in late 2003 enabled us to put a context around our activities in such a busy year. Achieving goals such as increasing the participation of women, expanding our capacity and optimising our resources were driving forces in 2004–2005.

In early 2005 BreastScreen Victoria succeeded in gaining funding for a digital mammography pilot program. Digital technology is set to transform breast cancer screening in much the same way as it has transformed the way we used to think about taking a picture. As workforce shortages continue to be an issue, we are hopeful that the new digital mammography will, among other things, enable us to use our radiologists and radiographers more effectively, expanding our capacity.

Building up our infrastructure has been another key activity for the year. The opening of new screening sites at Heidelberg, Casey and Wonthaggi and the launch of a new Mobile Screening Service were exciting achievements. Seeing our second Mobile Screening Service out on the road was particularly pleasing, as we will now be able to reach women in areas where access has previously been a problem.

The implementation of our new client data management system early this year was also quite an achievement. The new system is working well thanks to the dedication of our fantastic IT team and data managers, who have worked hard behind the scenes for the last 18 months.

A lot of emphasis was placed on our workforce over the year. Making sure the people of BreastScreen Victoria have appropriate support and training is fundamental to our culture. We worked hard to keep our staff – many of whom are based in rural areas or do not work solely for BreastScreen Victoria – up-to-date and connected to the Program.

BreastScreen Victoria’s services are delivered through a number of hospitals and health organisations, both in the public and private sector. This collaboration across sectors means women have access to a quality service in their community and is in some ways unique to BreastScreen Victoria. We cannot do it on our own and we are extremely grateful for the support we receive.

As Chief Executive Officer, I rely on the Board of Management and sub-committees, such as the Consumer Advisory Committee for support. The consumer voice is terribly important to the quality of the service and the input the Consumer Advisory Committee provides is vital. Members of this committee feature in this year’s annual report. I hope you enjoy reading more about them and their involvement.

On a final note, I would like to acknowledge the wonderful work of my staff in the Coordination Unit and the wider Program. It is a challenge keeping a vast operation like BreastScreen Victoria running smoothly and I would like to thank all of them for their efforts.

Ms. Onella Stagoll OAM
Chief Executive Officer
BreastScreen Victoria
Coordination Unit

IT IS RESPONSIVE TO THE NEEDS OF WOMEN THEMSELVES

For the Chief Executive Officer

Ms. Blackman

BreastScreen Victoria Consumer Advisory Committee Member Since 2000

...I’d had breast cancer and had become an advocate for women with breast cancer...It’s important for us, as advocates for women, to be closely associated with BreastScreen...that is one of the ways that I can hear, listen and understand the issues which are important to women who are using BreastScreen services.

...an important message for women to understand is that early detection is one of the best ways to protect them from dying of breast cancer...

...the only way that any service, but particularly health services, can provide a really high quality and responsive service to the women is if they collaborate with the women who are using that service. In my view, the Consumer Advisory Committee is one of the formal ways in which BreastScreen Victoria talks to women...listening to the voices of the women and incorporating those voices into the delivery of services. This is where the Consumer Advisory Committee is particularly important.

The program is a high quality service which can be demonstrated to be high quality. I also think it is responsive to the needs of women themselves...
NEW MOBILE SCREENING SERVICE LAUNCH

On 9 September 2004 at the City Square, Wirundjeri Elder Joy Wandin-Murphy welcomed an excited crowd of around one hundred BreastScreen supporters to her country and the launch of the expanded BreastScreen Victoria Mobile Screening Service. Joy spoke movingly of her family’s experience with breast cancer.

Our Minister for Health, the Honourable Bronwyn Pike MP, launched the new Mobile Screening Service, cutting ribbons and joining in the celebration led by Judy Jacques who sang for us. Many of the people at the launch were partners of our Program – people who help us move the Mobile Screening Service around the State, maintain equipment or reach out to communities.

The new Mobile Screening Service was a colourful sight in the City Square with the bright silhouettes based on real women, larger than life along each side of the screening service showcasing our commitment to accessible health services for Victorian women.

A special story about the importance of breast cancer screening and the launch of the expanded Mobile Screening Service appeared on Channel 9 that night. The news story had great depth because of the involvement of Mary Carbone who was diagnosed with breast cancer through BreastScreen Victoria’s regular visits to her hometown.

The new BreastScreen Victoria Mobile Screening Service greatly improves breast cancer screening opportunities for Victorian women because the service can now visit more communities.

DIGITAL MAMMOGRAPHY TRIAL AT BREASTSCREEN VICTORIA

In April 2005 BreastScreen Victoria was notified that it had secured funding to trial digital mammographic imaging systems on its rural Mobile Screening Service.

For the first time, BreastScreen Victoria radiographers working on the Mobile Screening Service will be able to view their images as they are taken and will know instantly if another x-ray image is required. This will reduce inconvenience to women, who currently need to come back to the mobile service if, for some reason, their first x-ray was not clear enough to read.

Assessment centres that currently support the Mobile Screening Service will continue to do so. However, these centres will no longer receive large numbers of unprocessed images that require developing and checking. These images will now be transmitted over a broadband network.

The project has received the following funding:

- $2 million from the Coordinated Communications Infrastructure Fund administered by the Australian Government Department of Communication, Information Technology and the Arts.
- $1 million from the Department Infrastructure and Regional Development.
- Contributions from project partners Telstra Country Wide and BreastScreen Victoria.

The project funding will be delivered over the three-year life of the project.

The Commonwealth contribution will underpin the building of communications infrastructure to transmit images from the Mobile Screening Service.

The project will be delivered through a partnership between BreastScreen Victoria, Telstra Country Wide, the Victorian Regional Health Alliance Network, and the Commonwealth and State governments.

A STATE-OF-THE-ART CLIENT INFORMATION MANAGEMENT SYSTEM

In January 2005, BreastScreen Victoria implemented a new, state-of-the-art client information management system.

With its innovative design and flexible interface, the new system will greatly improve the quality of Program data and as a result, the service offered to the women of Victoria.

The system, which was developed by BreastScreen Victoria’s own in-house team, represents a significant achievement and investment for the Program and is the result of 18 months of dedicated work by our multi-skilled team.

When BreastScreen Victoria was first established in 1992 the Program used a system inherited from South Australia which required continual modification and improvement to suit BreastScreen Victoria’s needs. As the Program grew it became clear that the legacy system was no longer able to satisfy the expanding needs of the organisation. Coupled with a significant growth in the Information Technology industry and the availability of advanced technologies and enhancements, it was decided to develop a new system.

ORDER OF AUSTRALIA HONOUR

In June 2005, the Chief Executive Officer of BreastScreen Victoria, Onella Stagoll, was awarded the prestigious Medal of the Order of Australia for services to community health.

The award recognises Onella’s commitment to community health and, in particular, through BreastScreen Victoria’s focus on education and awareness of services available to women in rural areas and those from culturally diverse backgrounds.

“This isn’t a one person show; it is hard work and I’ve been lucky to have good people alongside me all the way. I’ve had the privilege of working with many different people and I especially want to thank the many courageous women who have worked with me to make BreastScreen what it is today.”

The Governor of Victoria, John Landy, AC, MBE and Louise Stagoll, OAM, at the Queen’s Birthday Honours Investiture ceremony. Photo by Vicki Jones.
I was on the committee of management of Women’s Health Victoria and they needed somebody as a representative from there to become involved in BreastScreen so I said that I would... I just know so many people with breast cancer and I thought well, anything I can do I shall do it...

The committee offers a view of things very much from the consumers perspective which, when you get heavily involved in things, sometimes you forget who the actual user is and become involved in policy or procedure rather than looking at what the end result is meant to be...
We are included in everything...

Elizabeth Middle Park

BreastScreen Victoria Consumer Advisory Committee Member since 1996

I think it’s wonderful that the committee of management actually acknowledge us and look after us extremely well and value our input...they don’t like to take decisions that will involve the delivery of the service to women without having an input from consumers...it’s lovely to have been invited to be part of it...we are included in everything...

BreastScreen Victoria Consumer Advisory Committee Member since 2005

I’m a State Vice President of the Country Women’s Association...I was asked this year if I would be interested in going on the committee...you feel as though perhaps you are doing something for community...and I think a worthwhile cause...

I think the advisory committee makes sure that it’s in peoples face all the time which is important for women...so I think they are doing a wonderful job keeping it into the public eye.

I feel I’ve learnt and I feel I will continue to learn...

At the Services

Bendigo Regional Breastscreen

In March 2005, Bendigo Regional Breastscreen celebrated ten years of operation in fine style at the Bendigo Regional Art Gallery. It was a great occasion attended by many associated with the service, both past and present.

Mount Alvernia Mercy Hospital (the auspicing hospital for Bendigo Regional Breastscreen) was sold to St John of God Health Care in February 2005. The hospital is now known as St John of God Hospital Bendigo. The working relationship between Bendigo Radiology, St John of God Hospital Bendigo and Bendigo Regional Breastscreen continues.

Central Highlands and Wimmera Breastscreen

Central Highlands and Wimmera Breastscreen has relocated its screening centre at St John of God Hospital in Ballarat to a new location within the hospital. The area is more spacious than the previous area and provides added privacy for women attending for screening and those returning to the assessment clinic.

Staff from Central Highlands and Wimmera Breastscreen, St John of God Health Care and others associated with the local service attended a celebration to mark the opening of the new look screening area on Friday 16 December 2004. Service Director Dr Cliff Trotman officiated at the function and the centre was officially reopened by Sister Assumption Neary, one of the Sisters of St John of God.

Geelong and South West Breastscreen

The service underwent accreditation in November 2004 and achieved full four-year accreditation status. The accreditation site-visit team was pleased with Geelong’s performance particularly given that they were operating under temporary accommodation arrangements.

The site-visit report stated: “We commend the staff on maintaining such a high level of service delivery under these difficult circumstances...we would like to congratulate all the staff for their dedication to the program.”

In May 2005 St John of God Health Care advised Breastscreen Victoria that it had decided not to renew its contract to manage the Geelong and South West Breastscreen Service. The decision had no impact on screening services which continued to operate from the screening centres in Geelong and Warrnambool. Following the announcement, Breastscreen Victoria immediately began work to secure alternative arrangements. Breastscreen Victoria has been working with St John of God Health Care in Geelong for many years and thank them for their support.

Gippsland Breastscreen

In September 2004, Gippsland Breastscreen ran a special ‘Mother’s Day’ promotion, encouraging mothers and daughters to attend for a celebratory mammogram!

North Western Breastscreen

North Western Breastscreen, in conjunction with the Breastscreen Victoria Coordination Unit and the Cancer Council Victoria Community Language Program, conducted an important project in 2004–2005 with two culturally and linguistically diverse groups – the Italian and Filipino communities. The aim of the project was to gain an understanding of some of the barriers to screening for these particular groups and to deliver information and services tailored to the specific needs of these communities. A paper on the project was presented at the ‘Diversity in Health’ conference held in Melbourne in October 2005.

Following a site visit in June 2005, the service gained full accreditation and was commended for its strong multidisciplinary team work.

Maroondah Breastscreen

In July 2004, the Mobile Screening Service visited Wangaratta for the second time. Maroondah Breastscreen was extremely pleased with the attendance – a total of 2,966 women were screened, representing an increase of 4% women from the first visit in 2002. In March 2005, the Mobile Screening Service returned to service the rural towns of Mansfield and Alexandra. Following on from the rural visits, preparations began for the urban Mobile Screening Service to visit Belgrave for the first time. The visit will make screening more accessible for those women living in the ‘burbs’, an area that currently has lower than average participation.

Plans are underway for the expansion of the Maroondah catchment area to include the far north-eastern towns of Myrtleford, Corryong and Yarrawonga.

Following site visits concluding in June 2005, Maroondah Breastscreen was awarded full accreditation status.
MONASH BREASTSCREEN

Monash BreastScreen commenced assessment at its new satellite assessment centre in a purpose-built facility at the new Casey Hospital in Berwick. The Berwick BreastScreen site also moved into new, expanded accommodation.

As part of the BreastCare Indicator and Standards Project, a recent Department of Human Services peer review of breast services offered at Southern Health singled out consumer processes at the BreastScreen service for particular positive mention. This is testimony to the service's commitment to consumer participation and also to the high profile BreastScreen has within breast services at Southern Health.

The service underwent an accreditation site visit in late October 2004 and has been granted full accreditation status.

ST VINCENT’S BREASTSCREEN

In response to increased demand, a new screening site was opened in Heidelberg at the Austin Health Repatriation Campus.

Chief Radiologist and Director Dr Jennifer Cawson was awarded the Doctorate of Medicine at the University of Melbourne for her thesis ‘The “Black Star”: imaging and biopsy of 75 consecutive mammographic radial scars of the breast detected by population screening’. Dr Cawson also received the Educators Award from the ASEAN Association of Radiologists for her training work in breast imaging for radiologists from the region.

BREASTSCREEN VICTORIA MOBILE SCREENING SERVICE

BreastScreen Victoria’s Mobile Screening Service has once again provided much needed services in the more remote outer metropolitan and rural areas of Victoria. Over the past twelve months the outer metropolitan Mobile Screening Service, launched in September 2004, was located at Melton, Sheyghour, Gisborne, Kyneton and Belgrave, and the rural mobile unit visited Mallacoota, Orbost, Omeo, Yarram, Leongatha, Manfield, Alexandra and Birchip. Both units have been well received and over 17,000 women were screened.

RADIOGRAPHER TRAINING CENTRE

The Radiographer Training Centre has had another busy year. Demand was high for participation in both the clinical and academic components of the Certificate of Clinical Proficiency in Mammography. The centre has continued its collaboration with Monash University to improve the delivery and assessment of the academic component of the curriculum. The first rural workshop (‘Perfecting Standard Positioning’) was successfully held at Gippsland BreastScreen in April 2005. The centre also developed the first Australian ‘Perfect Good Moderate Inadequate’ (PGMI) test set, which will now be offered to other BreastScreen Australia services.

I TALK TO WOMEN ABOUT BREASTSCREEN

I think I have been an unofficial advocate for BreastScreen for many years...the people who do it day to day...they just accept that that’s how it is and you put up with it...whereas when there is consumer involvement... consumers can say, “hey no, it doesn’t have to be like this” ...

I think we have to stand up and be a bit more accountable and not just say well, the doctor knows everything and I’m just a little patient who doesn’t know anything...

I’m actively seeking opinions...I talk to women about BreastScreen...
The BreastScreen Victoria Program continues to attract interest from researchers because of its comprehensive data collection, which spans more than a decade of Program activity and over 2 million screens. The data set covers all aspects of screening and includes demographic details, screening and assessment activity, outcomes, pathology and histology details, and treatment. Research within BreastScreen Victoria focuses on larger, state-wide studies to smaller analyses of work within an individual service.

BreastScreen Victoria’s Board of Management has established the Research and Evaluation Committee (R&EC) to which all research proposals are directed.

BreastScreen Victoria does not fund research initiatives, but is committed to working collaboratively with investigators. We welcome approaches from researchers who have an interest in breast cancer screening.

1.0 RESEARCH AND EVALUATION PROJECT NOTIFICATIONS

Titles, authors, the institution of the principal investigator and a brief outline are listed below for research and evaluation studies endorsed by the BreastScreen Research and Evaluation Committee between January 2004 and June 2005.

FEBRUARY 2004

1.1 Genetic and environmental determinants of mammographic density. Hopper, J. Department of Public Health, Centre for Urban Health, University of Melbourne. Research category: Epidemiology/public health

MAY 2004


JULY 2004

1.4 Extension to HRT: menopausal status feasibility: breast density variability over time. Gertig D, and Erbas, B. Centre for Genetic Epidemiology, University of Melbourne, Victoria. Research category: Epidemiology/public health

1.5 Margins and outcomes of screen-detected breast cancer with extensive in-situ component. Kitchen, P., Henderson, M., Lawson, J. Research category: Clinical/biomedical

OCTOBER 2004

1.6 Three cases of myoablomastia of the breast in a screened population. Phal, P. and Cawson, J.

2.0 ORAL PRESENTATION AND POSTERS

This section includes papers and posters presented at conferences from January 2004 and December 2004. These include studies endorsed by the Research and Evaluation Committee and other projects and activities undertaken by BreastScreen staff.

ORAL PRESENTATIONS

2.1 Active consumer participation in breast health information. Bruce, N. The 18th World Conference on Health Promotion and Education, 26–30 April 2004, Melbourne, Australia.

2.2 Consumer participation in breast services. Williams, P., Bruce, N. and Innes, L. The 6th National Breast Care Nurses Conference: Research to Reality, 4–5 March 2004, Brisbane, Australia.


2.4 Hormone replacement therapy, percent mammographic density and the sensitivity of mammography. Kavanagh, A. The 12th Symposium Mammographicum, 18–20 July 2004, Edinburgh, United Kingdom.

2.5 Size distribution of screen-detected and interval cancers according to breast density suggests reduced screening benefits for women with higher density breasts. Nicholson, C. (presenter), Kavanagh, A. and Byrnes, G. The 12th Symposium Mammographicum, 18–20 July 2004, Edinburgh, United Kingdom.


2.8 Changing appearance in two projections: is this a useful sign for distinguishing radial scar from breast carcinoma? Van Gelderen, D. (presenter) and Cawson, J., Royal Australian and New Zealand College of Radiologists 55th Annual Scientific Meeting, 21–24 October 2004, Perth, Australia.

POSTERS


3.0 PUBLISHED PAPERS

Papers resulting from research or evaluation activities conducted within Breastscreen Victoria and published within the peer-reviewed literature are listed below.


Mammographic density: what does it mean for BreastScreen?

BreastScreen Victoria hosted the ‘Mammographic density: what does it mean for BreastScreen?’ research forum on Thursday 16 September 2004.

Mammographic breast density describes how white your breast tissue appears on an x-ray. Higher mammographic density is associated with reduction in the sensitivity of mammography in detecting cancers and possibility in the aetiology of breast cancer. Knowledge of these relationships, as well as the factors affecting breast density, may be important in the early detection of breast cancer.

The forum, moderated by the BreastScreen Chair, Associate Professor Richard Bell, showcased the latest research on the relationship between breast density and breast cancer and explored the implications of research findings for the screening program. Over sixty people from BreastScreen services, universities, cancer centres, consumer organisations, hospital staff and health services attended the forum.

RESEARCH FORUM

THE PRESENTERS

• Professor John Hopper, Director, Centre for Genetic Epidemiology at the University of Melbourne and Director, Australian Twin Registry. Professor Hopper’s areas of expertise include genetic epidemiology and his current research interests include the genetic and environmental determinants of mammographic density. His talk ‘Mammographic density: a strong and heritable risk factor for breast cancer’ focused on his work in estimating the genetic component of breast density.

• Associate Professor Anne Kavanagh, Key Centre for Women’s Health in Society, University of Melbourne and Consultant Epidemiologist, BreastScreen Victoria. Associate Professor Kavanagh’s current research interests include the relationship between hormone-replacement therapy and breast density and the impact of hormone replacement therapy and breast density on screening mammography outcomes. She presented on ‘Age, hormone replacement therapy, percent mammographic density and mammographic screening’.

• Ms Carolyn Nickson, PhD candidate. Key Centre for Women’s Health in Society, University of Melbourne. Ms Nickson is a National Breast Cancer Foundation National Network of Women in Superannuation scholar. Her research involves modelling the impact of targeted changes to screening intervals in the Australian breast screening program. Ms Nickson’s presentation explored the relationship between tumour size and breast density.

• Ms Jennifer Stone, PhD candidate. Centre for Genetic Epidemiology, at the University of Melbourne. Ms Stone presented results from her research focusing on the genetic epidemiology of breast density, and the factors affecting mammographically dense and non-dense areas in the breast.

Following the presentations, a panel initiated broad discussion about the complexities associated with breast density within a population screening program. The panel comprised Dr Greg Hill, Radiologist with Radar Medical Imaging and St Vincent’s BreastScreen; Nicole Steers, program manager, superannusion breastscreen; Urewa Stagoll, Chief Executive Officer, BreastScreen Victoria; Stewart Mars, breast surgeon and urologist, Monash BreastScreen; and Sue Macauly, Chief Radiographer, at Victoria’s BreastScreen, and Lieutenant Radiographer for BreastScreen Victoria’s Mobile Screening Service.

THE COMMITTEE HAS A BROAD RANGE OF PEOPLE...

BREASTSCREEN VICTORIA

CONSUMER ADVISORY COMMITTEE

MEMBER SINCE 1993

...It coincided with my interest in women’s health and also community development and therefore consumer involvement with program delivery…we ensure that we provide services that are appropriate and respectful of the broad range of women…the committee has a broad range of people on it.

...I’ve never doubted the unquestioning commitment to the Consumer Advisory Committee by BreastScreen Management but I think that overall the present BreastScreen staff have a greater sense of the role that the Consumer Advisory Committee can play and the value of the input that members can make. I think it’s reflected by the fact that currently, members of the Consumer Advisory Committee are being involved in a range of ways in quite a broad range of projects.
THE BOARD OF MANAGEMENT & ITS SUB-COMMITTEES

BOARD OF MANAGEMENT
Associate Professor Richard Bell, Chair
Ms Dorothy Reading, Deputy Chair
Ms Margaret Crossley, Treasurer
Ms Vera Boston, from February 2005
Dr Dallas Enright, from March 2005

Ms Patricia Green, representing the Medical and Scientific Advisory Committee
Ms Mary Anne Hartley, Associate Professor Michael Henderson, representing the Medical and Scientific Advisory Committee
Mrs Ann Macphie, ex officio, until November 2004
Professor Marian Pitts, representing the Research and Evaluation Committee
Ms Judy Rynhart, representing the Consumer Advisory Committee
Ms Onella Stagoll, ex officio
Ms Maria Wright, representing the Consumer Advisory Committee

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Ms Sue Macalay
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Mr David Speakman
Ms Onella Stagoll, ex officio
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Ms Jules Wilkinson, ex officio

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Ms Glenda Banks
Ms Anne Crizin, from February 2005
Mrs Fran Harrison
Mrs Judy Hogg
Dr Judy Laverty, until January 2005
Ms Sue Lockwood, observer member
Ms Liza Newby, until January 2005
Ms Elisabeth Newman
Ms Suzanne Phillips
Ms Judy Hynhart
Ms Onella Stagoll, ex officio
Ms Sotara Lapper
Ms Sandra Wilson, from February 2005 until June 2005

RESEARCH AND EVALUATION COMMITTEE
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Dr Anne Kavanagh, Deputy Chair
Dr Jacques Chirgwin
Dr Dorota Gertig
Ms Philippa Hartney
Ms Jane Jones
Associate Professor Franee Liampotong-Rice
Ms Rosetta Manasewicz
Mr Bruce Martin
Ms Michelle Muldowney
Ms Rachel Portelli, ex officio, until February 2005
Ms Barbara Taylor, representing the Consumer Advisory Committee
Dr Vicki White
Ms Jules Wilkinson, ex officio, from March 2005

PROFILE OF THE BOARD OF MANAGEMENT

ASSOCIATE PROFESSOR RICHARD BELL, CHAIR
Associate Professor Bell is Director of Cancer Services and Medical Oncology at Andrews Cancer Centre at Geelong Hospital. He has published widely in the area of cancer treatment, particularly breast cancer. Associate Professor Bell is a member of the Ministerial Task Force on Cancer and Director of the Regional Integrated Cancer Service. He was appointed Chair of the Board in July 2003.

MS VERA BOSTON
Ms Boston is the Chief Executive Officer of North Yarra Community Health and joined the Board in February 2005. She has previously worked in women’s health and in local government and has a strong interest in the health issues of migrant and refugee women.

MS MARGARET CROSSLEY, TREASURER
Ms Crossley is a chartered accountant and partner at Day Neillson. She was founding Treasurer to the BreastScreen Victoria Board in 1991 and continues to serve the Board in that role. She was also a member of the State Accreditation Committee from 1994 to 1998.

DR DALLAS ENRIGHT
Dr English is Associate Director of the Cancer Epidemiology Centre at the Cancer Council Victoria. He has substantial experience as a cancer epidemiologist, having worked in this field since 1982. He has also served on many state and national policy committees, including the Western Australian State Accreditation Committee for Breastscreen (from 1994 to 1999), and chaired one of the panels for the recent review of the National Accreditation Requirements. Dr English is active within Health and Medical Research Council and is currently chairing one of its Grant Review Panels.

ASSOCIATE PROFESSOR MICHAEL GREEN
Associate Professor Green is Director of the Department of Clinical Haematology and Medical Oncology at the Western Hospital and Deputy Director of the Department of Clinical Haematology and Medical Oncology at the Royal Melbourne Hospital. He was appointed as the Royal Australasian College of Physicians’ representative on Breastscreen Victoria’s Medical and Scientific Advisory Committee in 1994. He has represented this committee on the Board since 1996 and was appointed Chair of the Medical and Scientific Advisory Committee in 1999.

MS MARY ANNE HARTLEY
Ms Hartley joined the Board in 1997. She is a barrister, practising mainly in the area of medical negligence. Prior to going to the bar she was a partner at Phillips Fox, where she specialised in health law.

ASSOCIATE PROFESSOR MICHAEL HENDERSO
Associate Professor Henderson is Deputy Director of the Department of Surgical Oncology at the Peter MacCallum Cancer Institute and Breast Surgeon at the Peter MacCallum Cancer Centre and St Vincent’s Hospital. He was appointed as the Royal Australasian College of Surgeons’ representative on Breastscreen Victoria’s Medical and Scientific Advisory Committee in 1993. Mr Henderson chaired this committee from 1995 to 1998 and has represented M&SA on the Board since 1995.

MRS AVIS MACPHEE
Mrs Macphee is founder and Convenor of the Bone Marrow Donor Institute and Breast Cancer Support Group. She is also a member of the Board of Management of the Victorian Breast Cancer Research Consortium and a member of the steering committee of Breastscreen Victoria. Mrs Macphee joined the Breastscreen Victoria Board in 1995 and made a considerable contribution until the expiry of her final term in November 2004.

PROFESSOR MARIAN PITTIS
Professor Pittis is Director of the Australian Research Centre in Sex, Health and Society, La Trobe University, and has published extensively on psychological and social aspects of health care. She joined Breastscreen Victoria’s Research and Evaluation Committee in 2001, and was elected to chair the committee in April 2003 and became the committee’s representative on the Board of Management.

MS DOROTHY READING, DEPUTY CHAIR
Ms Reading is Senior Strategic Consultant at The Cancer Council Victoria. She was a member of the steering committee of the Essendon Mammographic Screening Pilot Program and was nominated as a representative of the Cancer Council Victoria on the founding Breastscreen Victoria Board in 1991 and elected Deputy Chair in 1993. Ms Reading has also been a member of the State Accreditation Committee since 1994 and is its current Chair.

MRS JUDY RYNHART
Ms Rynhart is a member of the Consumer Advisory Committee and has represented the committee on the Board since 1996. She is a farmer from Elmore and brings considerable experience in rural health and rural women’s concerns.

MS OANELLA STAGOLL OAM
As Chief Executive Officer, Onella Stagoll has managed Breastscreen Victoria since the Program’s beginnings in 1992. At a national level she is a member of the Physical Review and New Technologies and the Quality Improvement and Workforce working groups – both working groups of the Australian Screening Advisory Committee. She is also a member of the National Quality Management Committees. Within Breastscreen Victoria Ms Stagoll sits ex officio on the Board of Management, Executive Committee, State Accreditation Committee, Finance and Audit Committee and Consumer Advisory Committee.

MS MARIA WRIGHT
Ms Wright is a former research officer at the Centre for Development and Innovation in Health at La Trobe University. She was a founding member of Breastscreen Victoria’s Consumer Advisory Committee in 1993. Ms Wright was elected Chair of the committee in 1997 and has represented the committee on the Board since 1996. She was a member of the State Accreditation Committee from 1995 to 2002 and joined the Research and Evaluation Committee in October 2002.
A HIGH QUALITY PROGRAM SHOULD BE INFORMED BY FEEDBACK

GIVEN OUR DIVERSE BACKGROUNDS I THINK WE PROVIDE A USEFUL FUNCTION...

My first experience of BreastScreen Victoria was as a consumer. I was so impressed with the care and consideration I received I wrote to the Board expressing my appreciation and offering support. Shortly after that, I was invited to serve on the Consumer Advisory Committee.

Well, we all have professional and personal cohort networks and this offers a useful two-way conduit for information and opinion about the service throughout the State. Also, given our diverse backgrounds, I think we provide a useful function as a focus group for BreastScreen Victoria to workshop ideas for improving the service.

...it is being able to contribute to the work of an organisation with a genuine commitment to continually improving the quality of the service it offers, with the integrity and competence to achieve that.

BREASTSCREEN VICTORIA CONSUMER ADVISORY COMMITTEE MEMBER SINCE 2003

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QUALITY ASSURANCE GROUPS

DATA MANAGEMENT
Ms Genevieve Chappell, Convenor
Ms Busby Alessandri
Ms Naomi Benney
Ms Janita Betto
Ms Lisette Bicknell, until December 2004
Ms Ann Bowers
Ms Kaye Boyle, until August 2004
Ms Esther Cukier
Ms Amanda Eddy
Mr Darren Firth
Ms Helen McKenzie
Ms Suzan Maljevac
Ms Jundy Munro
Ms Karen Posey
Ms Faye Pult
Ms Philippa Robertson
Ms Nikki Ruggieri
Mr John Siddham
Ms Jean Smith
Ms Huw Yeoosor
Ms Pamela Wilkins, until April 2005

INFORMATION OFFICERS
Ms Merian Oliver-Weymouth, Convenor
Ms Deb Brown
Ms Cath Butler, until October 2004
Ms Jen Daddow
Ms Jodie Eden-Jones, until October 2004
Ms Allison Hartney, from November 2004
Ms Gillian Keir
Ms Lisa Innes
Ms Alison Jones
Ms Marg Lannen
Ms Libby Mitchell
Ms Susanne Rea, from November 2004
Ms Nicolitta Torcello
Ms Carol Whitehead

NURSE-COUNSELLORS
Ms Helen Varney, Convenor
Ms Heather Christensen-Anderson
Ms Julie Harris
Ms Christine Hoyne
Ms Frances Linke
Ms Glenys Makary
Ms Cecilia Palma
Ms Nola Phelan, until December 2004
Ms Gemma Sacco
Ms Gay Stevenson, from January 2005

PATHOLOGY
Dr Norman Sonenberg, Convenor
Dr Paul Bedford
Dr Malcolm Buchanan
Dr Prue Hill
Dr Maja Hnks
Dr Robert Spokes
Dr Eric Sumithran
Dr Beatrice Sisil-Sumithran
Dr Sarah Swain

PROGRAM MANAGEMENT
Ms Jules Wilkinson, Convenor
Ms Louise Bowren
Ms Erin Cosgriff
Ms Victoria Cuevas
Ms Leone English, from January 2005
Ms Philippa Hartney
Ms Yvonne Hewitt
Ms Michelle Muldowney
Ms Jennie Slattery
Ms Nicole Steers, until December 2004

RADIOGRAPHY
Ms Jayne Muller and Ms Elizabeth Stewert, Convenors
Ms Sherrill Hayes
Ms Brooke Hazlett, until March 2004
Ms Kim Kyatt, from March 2004
Ms Sue Macaulay
Ms Sue Omachen
Ms Joanne Ronald, until April 2004
Ms Liz Sundram
Ms Stephanie Tamlby
Ms Janis Uhe
Ms Marjoke Wijgers

PATHOLOGY
Dr Jennifer Cawson, Convenor
Dr Jill Evans
Dr Reb Jarvis
Dr Darren Lockie
Dr Prue Neehehu
Dr Rodney Tait
Dr Cliff Trotman
Dr Linda West

SURGERY
Ms Graeme Campbell, Convenor
Associate Professor John Collins
Mr David Deutscher
Mr Paul Kitchen
Mr Ian Miller
Mr Greg Mitchell
Ms Jenny Senior
Mr David Stoney
I FEEL BREASTSCREEN OFFERS WOMEN SOME LEVEL OF CONFIDENCE...

Consumers who have been diagnosed with breast cancer are able to offer first-hand knowledge. Consumers who are well women on the Consumer Advisory Committee are able to offer their expectations and I feel that those two combined contribute valuable information towards decision making on any issues discussed at the Consumer Advisory Committee meetings...

It’s a two-way street; we can bring to the meetings any concerns or issues that we feel are out there and take back with the meetings to other meetings... having the opportunity to voice the opinions and concerns of other consumers I feel privileged to sit on the Consumer Advisory Committee...

...apart from the valuable free service... I feel BreastScreen offers women some level of confidence because they are being looked after by a highly regarded screening service.
ACCREDITATION 2004-2005

BENDIGO REGIONAL BREASTSCREEN
Full accreditation valid until 28 February 2008

CENTRAL HIGHLANDS AND WIMMERA BREASTSCREEN
Full accreditation valid until 14 November 2007

GEELONG AND SOUTH WEST BREASTSCREEN
Full accreditation valid until 31 May 2009

GIPPSLAND BREASTSCREEN
Full accreditation valid until 16 November 2006

MAROONDAH BREASTSCREEN
Full accreditation valid until 10 August 2005

MONASH BREASTSCREEN
Full accreditation valid until 28 February 2009

NORTH WESTERN BREASTSCREEN
Full accreditation valid until 15 August 2005

ST VINCENT’S BREASTSCREEN
Full accreditation valid until 31 August 2007

MOBILE SCREENING SERVICE
Full accreditation valid until 26 November 2008

SCRENING AND ASSESSMENT SERVICES

BENDIGO REGIONAL BREASTSCREEN
375 Barnard Street, Bendigo Vic 3550
Tel: (03) 5441 6850
Director: Dr Rob Jarvis
Program Manager: Ms Philippa Hartney

CENTRAL HIGHLANDS AND WIMMERA BREASTSCREEN
St John of God Health Care
101 Drummond Street North, Ballarat Vic 3350
Tel: (03) 5320 2106
Director: Dr Cliff Trotman
Program Manager: Ms Jennie Slattery

GEELONG AND SOUTH WEST BREASTSCREEN
59 McKillop Street, Geelong Vic 3220
Tel: (03) 5225 3220
Director: Dr Linda West
Program Manager: Ms Yvonne Hewitt

GIPPSLAND BREASTSCREEN
LaTrobe Regional Hospital, Traralgon Campus
Princes Highway, Traralgon Vic 3844
Tel: (03) 5174 3149
Director: Mr Iain Miller
Program Managers: Ms Nicole Steers, until January 2005;
Ms Leane Langston, from February 2005

MAMMOGRAM SCREENING
2/3 Grey Street, Ringwood East Vic 3135
Tel: (03) 9870 6888
Director: Dr Ron Gatt
Program Manager: Ms Frances Menzies

MONASH BREASTSCREEN
Monash Medical Centre, Monorabon Campus
815 Centre Road, East Bentleigh Vic 3165
Tel: (03) 9828 8766
Director: Mr Stewart Hart
Program Manager: Ms Louise Brown

NORTH WESTERN BREASTSCREEN
MCRS Building 6, 34–54 Poplar Road, Parkville Vic 3052
Tel: (03) 6397 2070
Director: Dr Alison Rose
Program Manager: Ms Victoria Cuevas

ST VINCENT’S BREASTSCREEN
1st Floor, Healy Wing, St Vincent’s Hospital
41 Victoria Parade, Fitzroy Vic 3065
Tel: (03) 9288 2100
Director: Dr Jennifer Cawson
Program Manager: Ms Erin Cosgriff

SCREENING CENTRE LOCATIONS
Bairnsdale
Ballarat (Base Hospital)
Ballarat (St John of God)
Bendigo
Berwick
Boronia
16c Hill
Brimbank

SCREENING CENTRE LOCATIONS CONT.
Broadmeadows
Cambewell
Carlton
Dandenong
East Bentleigh
Elsternwick
Epping
Fitzroy
Footscray
Frankston
Greensborough
Heidelberg
Hawthorn
Lilydale
Mentone
Mt Martha
Moorooduc
Mount Waverley
Preston
Portland
Ringwood East
Rosebud
Sale
Shepparton
Traralgon
Warragul
Warrnambool
Wenibee
Wonthaggi

MOBILE SCREENING SERVICE LOCATIONS
Alacandra
Albury
Broadford
Echuca
Geelong
Halls Gap
Horsham
Hamilton
Karaing
Kyneton
Leongatha
Mallacoota
Manfield
Melton
Omaha
Orbost
Shaybourne
Sunbury
Swan Hill
Wangaratta
Yarram

COORDINATION AND SUPPORT
BreastScreen Victoria Coordination Unit
31 Pelham Street, Carlton South Vic 3053
Tel: (03) 9660 6888
Chief Executive Officer: Ms Neila Stagg
I FEEL REALLY STRONGLY THAT WOMEN IN VICTORIA TRUST BREASTSCREEN

BREASTSCREEN VICTORIA CONSUMER ADVISORY COMMITTEE MEMBER SINCE 1996

BreastScreen’s very open to consumer participation and we bring a perspective that people who are close to the action and who work there may not have... we also bring the perspective of women in the community in our peer group... we are able to be objective about issues... we can express opinions freely without any fear of repercussions.

... it’s been really interesting to have an inside view of a really well-organised service that plays an important part in the lives of Victorian women and being able to help develop the service for women in my peer group has also been important to me...

I feel really strongly that women in Victoria trust BreastScreen and we have to be very careful to maintain that trust...
I am pleased to present my twelfth report as Treasurer of BreastScreen Victoria and in doing so wish to acknowledge the support and expertise of the management team, which has capably steered the organisation towards a healthy surplus. This year’s surplus of $1,001,515 represents the second largest reported in the history of the organisation and reflects continued sound financial management. The year end result is attributed in part to the continued additional support of the Victorian Government. An additional $1.5 million was provided in 2004–2005 for breast cancer screening, completing the Victorian Government’s commitment to increase funding by $3 million over the 2003–2004 and 2004–2005 budgets.

The 2004–2005 year marked a significant achievement in the life of the Program. The major IT initiative for the past three years, the new client information management system, was successfully implemented in January 2005. We now have a client information management system with a centralised database that provides information to BreastScreen Victoria staff in real time.

During the year BreastScreen Victoria was notified of its successful application to trial digital mammographic imaging systems. Digital mammography takes an electronic image of the breast, allowing the data to be stored on a computer and enhanced, magnified, or manipulated for further evaluation. The project will enable BreastScreen Victoria to link our Mobile Screening Service to the Victorian Regional Health Alliance network, allowing the transfer of digital files to assessment centres and the client information management system. The project will be delivered through a partnership between BreastScreen Victoria, Telstra Country Wide, the Victorian Regional Health Alliance Network, and the Commonwealth and State governments.

The project has attracted the following funding:
- $2 million from the Coordinated Communications infrastructure fund administered by the Australian Government Department of Communication, Information Technology and the Arts
- $1 million from the Department of Infrastructure planning and transport's Victoria
- $900,000 from the Victorian Department of Human Services
- Contributions from project partners Telstra Country Wide and Breastscreen Victoria.

Additional highlights for the 2004–2005 financial year include:
- The Program screened 191,253 women, representing 96% of the Department of Human Services contracted target.
- Total revenues increased by $1.3 million or 5.8% to $25.9 million.
- Total expenditures increased by $159,000 or less than 1% to $24.9 million.
- Recurrent funding to services increased by 3%.
- Funded $1.1 million of non-recurrent capital expenditure.

Major items of capital expenditure were:
- Purchased two film processors at a cost of $155,000.
- Purchased an ultrasound machine at a cost of $200,000.
- Purchased one x-ray viewer at a cost of $89,000.
- Purchased a mammography machine at a cost of $91,350.
- Expanded over $500,000 on IT equipment and development costs for the new client information management system.
- Building works commitments for North Western Breastscreen and Geelong Breastscreen.
- Successfully launched our second Mobile Screening Service in September 2004.

Recurrent funding provided by the Department of Human Services for the year ended 30 June 2005 totalled $25.1 million: an increase of $1.8 million or 7.7% over that provided in 2003–2004.

The Program was pleased to receive the following additional funding from the Department of Human Services:
- A capital grant of $200,000; the grant was used to replace an ultrasound machine for St Vincent’s BreastScreen.
- A grant of $183,500 to undertake projects on behalf of BreastCare Victoria.

BreastScreen Victoria operates in an environment that is complex and challenging. The achievements throughout the year reflect the hard work of management and staff, and on behalf of my fellow Board members I express my sincere thanks.

ST. CLAIR

Ms. Margaret Crossley FCA
Treasurer, breastscreen victoria inc.

STATEMENT OF FINANCIAL PERFORMANCE

<table>
<thead>
<tr>
<th>NOTES</th>
<th>2004–05</th>
<th>2003–04</th>
</tr>
</thead>
<tbody>
<tr>
<td>Revenues from ordinary activities</td>
<td>2,083,578</td>
<td>24,559,918</td>
</tr>
<tr>
<td>Expenses from ordinary activities:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee expenses</td>
<td>3,118,739</td>
<td>2,082,740</td>
</tr>
<tr>
<td>Depreciation and amortisation expenses</td>
<td>404,796</td>
<td>404,603</td>
</tr>
<tr>
<td>Other expenses from ordinary activities</td>
<td>20,958,526</td>
<td>21,235,278</td>
</tr>
<tr>
<td>Profit (loss) from ordinary activities before income tax</td>
<td>3,001,515</td>
<td>(162,716)</td>
</tr>
<tr>
<td>Income tax expense relating to activities</td>
<td>1,001,515</td>
<td>(162,716)</td>
</tr>
<tr>
<td>Net profit (loss) from ordinary activities after income tax expense attributable to the association</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Total changes in equity of the association</td>
<td>1,001,515</td>
<td>(162,716)</td>
</tr>
</tbody>
</table>

The statement of Financial Performance should be read in conjunction with the Notes to the Financial Statements.

STATEMENT OF FINANCIAL POSITION

<table>
<thead>
<tr>
<th>NOTES</th>
<th>2004–05</th>
<th>2003–04</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and Bank</td>
<td>6,072,652</td>
<td>4,434,780</td>
</tr>
<tr>
<td>Receivables</td>
<td>13,130</td>
<td>98,555</td>
</tr>
<tr>
<td>Loans</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Total current assets</td>
<td>6,185,816</td>
<td>4,574,745</td>
</tr>
<tr>
<td>Non Current Assets:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Furniture, equipment and vehicles</td>
<td>1,808,800</td>
<td>1,507,209</td>
</tr>
<tr>
<td>Total non-current assets</td>
<td>1,808,800</td>
<td>1,507,209</td>
</tr>
<tr>
<td>Total assets</td>
<td>7,994,666</td>
<td>6,081,954</td>
</tr>
<tr>
<td>Current Liabilities:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Payables</td>
<td>4,322,764</td>
<td>2,276,974</td>
</tr>
<tr>
<td>Grants received in advance</td>
<td>1,336,700</td>
<td>-</td>
</tr>
<tr>
<td>Provisions</td>
<td>274,666</td>
<td>296,744</td>
</tr>
<tr>
<td>Total current liabilities</td>
<td>2,444,070</td>
<td>1,576,818</td>
</tr>
<tr>
<td>Non Current Liabilities:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provisions</td>
<td>358,633</td>
<td>350,008</td>
</tr>
<tr>
<td>Total non-current liabilities</td>
<td>358,633</td>
<td>350,008</td>
</tr>
<tr>
<td>Total liabilities</td>
<td>2,802,703</td>
<td>1,927,826</td>
</tr>
<tr>
<td>Net Assets</td>
<td>5,165,763</td>
<td>4,154,128</td>
</tr>
<tr>
<td>Equity:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reserves</td>
<td>12,034,000</td>
<td>4,034,000</td>
</tr>
<tr>
<td>Retained profits</td>
<td>13,113,763</td>
<td>130,246</td>
</tr>
<tr>
<td>Total equity</td>
<td>5,165,763</td>
<td>4,154,128</td>
</tr>
</tbody>
</table>

The statement of Financial Position should be read in conjunction with the Notes to the Financial Statements.
### Statement of Cash Flows

**For the Year Ended 30 June 2005**

####Cash Flows from Operating Activities

<table>
<thead>
<tr>
<th>NOTES</th>
<th>2004-05</th>
<th>2003-04</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash receipts from government grants</td>
<td>26,600,000</td>
<td>23,497,500</td>
</tr>
<tr>
<td>Interest received</td>
<td>339,790</td>
<td>338,065</td>
</tr>
<tr>
<td>Other cash received</td>
<td>362,882</td>
<td>292,001</td>
</tr>
<tr>
<td>Cash paid to suppliers and employees</td>
<td>(25,904,215)</td>
<td>(23,698,426)</td>
</tr>
<tr>
<td><strong>Net cash provided by operating activities</strong></td>
<td>(2,298,427)</td>
<td>399,960</td>
</tr>
</tbody>
</table>

####Cash Flows from Investing Activities

| Payments for purchases of fixed assets | (673,373) | (772,050) |
| Proceeds from sale of fixed assets | 12,818 | 16,900 |
| **Net cash provided by (used in) investing activities** | (660,555) | (755,150) |

| Net increase in cash held | 1,637,872 | (355,190) |
| Cash at beginning of financial year | 4,434,780 | 4,789,979 |
| **Cash at end of financial year** | 6,072,652 | 4,434,780 |

####Reconciliation of cash provided by operating activities to operating surplus/(deficit)

| Operating surplus/(deficit) | 1,001,515 | (162,716) |

| Add/(less) non-cash items: | |

| Depreciation of non-current assets | 550,727 | 362,000 |
| Amortisation – leasehold improvement | 54,071 | 42,667 |
| Loss/gain on sale of fixed assets | (45,845) | (4,962) |
| **Changes in net assets and liabilities (excluding non-operating activities):** | |
| Decrease/(increase) in accrued revenue/prepayments/debtors | 53,000 | (111,445) |
| (Decrease)/increase in creditors | (835,049) | 537,683 |
| (Decrease)/increase in provisions | (13,594) | 152,365 |
| (Decrease)/increase in provisions | (3,059) | 2,368 |
| Increase/(decrease) in grants received in advance | 1,336,700 | (417,840) |
| **Net cash provided by operating activities** | 2,298,427 | 399,960 |

####Additional Information

- **Reconciliation of net cash provided by operating activities to operating surplus/(deficit):**
- **Credit facility:** Nil
- **Non-cash financing and investing activities:**

<table>
<thead>
<tr>
<th>Description</th>
<th>2004-05</th>
<th>2003-04</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nil</td>
<td>Nil</td>
<td></td>
</tr>
</tbody>
</table>

---

### Notes to the Financial Statements

**Note 1: Statement of significant accounting policies**

The financial report of BreastScreen Victoria Inc. is a general purpose financial report that has been prepared in accordance with Australian Accounting Standards, Urgent Issues Group Consensus Views and other authoritative pronouncements of the Australian Accounting Standards Board and the requirements of the Associations Incorporation Act (Vic) 1987.

The financial report has been prepared on an accrual basis and is based on historical costs and does not take into account changing money values or, except where stated, current valuations of non-current assets. Lost is based on the fair values of the consideration given in exchange for assets.

The following is a summary of the material accounting policies adopted by BreastScreen Victoria Inc. in the preparation of the financial report. The accounting policies have been consistently applied, unless otherwise stated.

- **Rounding off:**
  - All amounts shown in the financial report are expressed to the nearest dollar.

- **Cash:**
  - For the purposes of the Statement of Cash Flows, cash includes cash on hand, deposits at call with banks or financial institutions and term deposits with banks or financial institutions maturing within twelve months.

- **Fixed assets:**
  - Fixed assets, with the exception of capital works in progress, valued at $1,000 or above, are recorded at historical cost and depreciation is calculated on the straight-line basis so as to write off the net cost of each fixed asset over its expected useful life to the Program. Leasehold improvements are amortised over the shorter of either the unexpired period of the lease or the estimated useful lives of the improvements.
  - The carrying amount of fixed assets is reviewed annually by the Board members to ensure it does not exceed the carrying amount of these assets.
  - The recoverable amount is assessed on the basis of expected net cash flows that will be received from the assets’ employment and subsequent disposal. The expected net cash flows have not been discounted to their present values in determining the recoverable amounts.
  - Gains and Losses on disposals are determined by comparing proceeds with the carrying amount. These gains and losses are included in the statement of financial performance.

<table>
<thead>
<tr>
<th>CLASS OF FIXED ASSETS</th>
<th>DEPRECIATION RATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Computer equipment</td>
<td>30%–33%</td>
</tr>
<tr>
<td>Furniture and fittings</td>
<td>10%</td>
</tr>
<tr>
<td>Leasehold improvements</td>
<td>20%</td>
</tr>
<tr>
<td>Motor vehicles</td>
<td>33%</td>
</tr>
<tr>
<td>Office equipment</td>
<td>20%</td>
</tr>
<tr>
<td>Mobile van screening equipment</td>
<td>20%</td>
</tr>
<tr>
<td>Data system development cost</td>
<td>14%</td>
</tr>
</tbody>
</table>

- **Employee entitlements:**
  - Provision made for the Program’s liability for employee entitlements arising from services rendered by employees to balance date. Employee entitlements expected to be settled within one year together with entitlements arising from wages and salaries, annual leave and sick leave which will be settled after one year, have been measured at their nominal amount. Other employee entitlements are payable later than one year have been measured at the present value of the estimated cash outflows to be made for those entitlements.
  - Contributions are made by the Program to an employee superannuation fund and are charged as expenses when incurred.

- **Incorporation:**
  - BreastScreen Victoria Inc. was incorporated on 2 September 1992 under the Associations Incorporation Act (Vic) 1987. BreastScreen Victoria Inc. was formerly called Victorian Breast Screening Coordination Unit Inc. and the name was changed on 19 October 1998.

- **Public liability/general insurance:**
  - BreastScreen Victoria Inc. is included under the Department of Human Services Master Insurance Policies.
NOTES TO THE FINANCIAL STATEMENTS

Tax status
The activities of Breastscreen Victoria Inc. are exempt from payment of income tax and payroll tax. Accordingly no provision for income tax and payroll tax has been made in the accounts. Payments for fringe benefits tax are made in accordance with the relevant legislation.

Goods and services tax
Revenues, expenses and assets are recognised net of the amount of goods and services tax (GST). Receivables and payables are stated with the amount of GST included. The net amount of GST recoverable from, or payable to, the Australian Taxation Office is included as a current asset or liability in the Statement of Financial Position.

Leases
Leases of fixed assets, where substantially all the risks and benefits incidental to the ownership of the asset, but not the legal ownership, are transferred to the Program, are classified as finance leases. There are no finance leases at this time.

Revenue
Interest revenue is recognised on a proportional basis taking into account the interest rates applicable to the financial assets.

Adoption of International reporting standards
For reporting period beginning on or after 1 January 2005, Breastscreen Victoria must comply with Australian equivalents to International Financial Reporting Standards (IFRS). This financial report has been prepared in accordance with Australian accounting standards applicable for reporting periods ended on 30 June 2005.

The association has substantially completed the process of transitioning its accounting policies and financial reporting from current Australian accounting standards to IFRS which is applicable for the financial year ended 30 June 2006.

The members of the board are of the opinion that the key differences in the association’s accounting policies which will arise from the adoption of IFRS is:

Impairment of assets
Under current Australian accounting standards, the carrying amounts of non-current assets are reviewed at reporting date to determine whether they are in excess of their recoverable amount.

Under AASB 136 - Impairment of Assets, the carrying amount of non-current assets will be reviewed each reporting date to determine if any such indication exists, the asset will be tested for impairment by comparing its recoverable amount to its carrying amount. Any excess of the assets carrying value over its recoverable amount is expensed to the income statement.

A review of the association’s non-current assets at reporting date did not reveal any indication of impairment.

Note 2: Revenue

<table>
<thead>
<tr>
<th>Revenue from operating activities</th>
<th>2004–05</th>
<th>2003–04</th>
</tr>
</thead>
<tbody>
<tr>
<td>Government grants</td>
<td>25,300,000</td>
<td>23,832,500</td>
</tr>
<tr>
<td>REVENUE FROM NON-OPERATING ACTIVITIES</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interest received</td>
<td>393,769</td>
<td>338,065</td>
</tr>
<tr>
<td>Proceeds from disposal of non-current assets</td>
<td>12,818</td>
<td>16,900</td>
</tr>
<tr>
<td>Other revenue</td>
<td>230,971</td>
<td>372,433</td>
</tr>
<tr>
<td>Total revenue from ordinary activities</td>
<td>25,433,578</td>
<td>24,509,818</td>
</tr>
</tbody>
</table>

Note 3: Profit/(loss) from ordinary activities

<table>
<thead>
<tr>
<th>Expenses</th>
<th>2004–05</th>
<th>2003–04</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depreciation or furniture, equipment and motor vehicles</td>
<td>550,727</td>
<td>362,000</td>
</tr>
<tr>
<td>Amortisation of leasehold improvements</td>
<td>54,071</td>
<td>42,667</td>
</tr>
<tr>
<td>Transfer to provisions for employee entitlements</td>
<td>13,593</td>
<td>152,365</td>
</tr>
<tr>
<td>Loss on disposal of non-current assets</td>
<td>-</td>
<td>1,234</td>
</tr>
<tr>
<td>Rental expenses on operating leases</td>
<td>249,909</td>
<td>170,651</td>
</tr>
<tr>
<td>INCOME:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Profit on sale of non-current assets</td>
<td>45,884</td>
<td>6,227</td>
</tr>
</tbody>
</table>

Note 4: Auditors’ remuneration

<table>
<thead>
<tr>
<th>Auditors’ remuneration</th>
<th>2004–05</th>
<th>2003–04</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auditing the accounts</td>
<td>7,372</td>
<td>7,579</td>
</tr>
<tr>
<td>Other service</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Total</td>
<td>7,372</td>
<td>7,579</td>
</tr>
</tbody>
</table>

Note 5: Cash assets

| Cash at banks | 1,508,076  | 753,131  |
| Short-term deposit | 4,563,074  | 3,681,199  |
| Petty cash | 500  | 450  |
| Total cash | 6,072,652  | 4,434,780  |

Note 6: Receivables (current)

<table>
<thead>
<tr>
<th>Receivables (current)</th>
<th>2004–05</th>
<th>2003–04</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accrued revenue</td>
<td>13,190</td>
<td>20,099</td>
</tr>
<tr>
<td>Debtors</td>
<td>7,455</td>
<td>9,355</td>
</tr>
<tr>
<td>Total receivables</td>
<td>11,645</td>
<td>29,454</td>
</tr>
</tbody>
</table>
### Notes to the Financial Statements

#### Note 7: Furniture, Equipment and Vehicles

<table>
<thead>
<tr>
<th></th>
<th>2004-05</th>
<th>2003-04</th>
</tr>
</thead>
<tbody>
<tr>
<td>Computer equipment – at cost</td>
<td>$843,808</td>
<td>$745,863</td>
</tr>
<tr>
<td>Accumulated depreciation</td>
<td>(584,022)</td>
<td>(429,518)</td>
</tr>
<tr>
<td><strong>Written down value</strong></td>
<td>$279,786</td>
<td>$318,345</td>
</tr>
<tr>
<td>Motor vehicles – at cost</td>
<td>243,560</td>
<td>206,065</td>
</tr>
<tr>
<td>Accumulated depreciation</td>
<td>(79,974)</td>
<td>(95,369)</td>
</tr>
<tr>
<td><strong>Written down value</strong></td>
<td>$163,586</td>
<td>$112,156</td>
</tr>
<tr>
<td>Office equipment – at cost</td>
<td>139,818</td>
<td>134,993</td>
</tr>
<tr>
<td>Accumulated depreciation</td>
<td>(117,167)</td>
<td>(92,841)</td>
</tr>
<tr>
<td><strong>Written down value</strong></td>
<td>$22,651</td>
<td>42,152</td>
</tr>
<tr>
<td>Furniture and fittings – at cost</td>
<td>154,230</td>
<td>150,249</td>
</tr>
<tr>
<td>Accumulated depreciation</td>
<td>(101,287)</td>
<td>(99,904)</td>
</tr>
<tr>
<td><strong>Written down value</strong></td>
<td>$52,933</td>
<td>60,336</td>
</tr>
<tr>
<td>Leasing improvement – at cost</td>
<td>332,995</td>
<td>332,995</td>
</tr>
<tr>
<td>Accumulated amortisation</td>
<td>(239,294)</td>
<td>(166,653)</td>
</tr>
<tr>
<td><strong>Written down value</strong></td>
<td>$112,711</td>
<td>166,342</td>
</tr>
<tr>
<td>Mobile van screening equipment – at cost</td>
<td>805,658</td>
<td>496,505</td>
</tr>
<tr>
<td>Accumulated depreciation</td>
<td>(406,901)</td>
<td>(301,384)</td>
</tr>
<tr>
<td><strong>Written down value</strong></td>
<td>$398,737</td>
<td>195,121</td>
</tr>
<tr>
<td>Data system development – at cost</td>
<td>818,180</td>
<td>433,006</td>
</tr>
<tr>
<td>Accumulated depreciation</td>
<td>(299,294)</td>
<td>(74,749)</td>
</tr>
<tr>
<td><strong>Written down value</strong></td>
<td>$518,866</td>
<td>358,257</td>
</tr>
<tr>
<td>Capital works in progress</td>
<td>-</td>
<td>256,500</td>
</tr>
<tr>
<td>Total written down value of fixed assets</td>
<td>$1,608,850</td>
<td>1,507,209</td>
</tr>
</tbody>
</table>

#### Movement in carrying amounts

<table>
<thead>
<tr>
<th></th>
<th>Computer equipment</th>
<th>Motor vehicles</th>
<th>Office equipment</th>
<th>Furniture &amp; fittings</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Balance at the beginning of the year</strong></td>
<td>316,345</td>
<td>112,156</td>
<td>42,152</td>
<td>60,336</td>
</tr>
<tr>
<td><strong>Additions</strong></td>
<td>129,711</td>
<td>167,268</td>
<td>4,825</td>
<td>3,990</td>
</tr>
<tr>
<td><strong>Disposals</strong></td>
<td>-</td>
<td>(37,162)</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Depreciation expense</strong></td>
<td>(166,270)</td>
<td>(78,676)</td>
<td>(24,326)</td>
<td>(11,393)</td>
</tr>
<tr>
<td><strong>Carrying amount at the end of the year</strong></td>
<td>279,786</td>
<td>163,586</td>
<td>22,651</td>
<td>52,933</td>
</tr>
</tbody>
</table>

#### Note 8: Payables (current)

<table>
<thead>
<tr>
<th></th>
<th>2004-05</th>
<th>2003-04</th>
</tr>
</thead>
<tbody>
<tr>
<td>Creditors and accruals</td>
<td>$632,806</td>
<td>1,267,856</td>
</tr>
<tr>
<td>GST</td>
<td>(42)</td>
<td>3,018</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$632,764</td>
<td>1,270,874</td>
</tr>
</tbody>
</table>

#### Note 9: Unearned revenue

<table>
<thead>
<tr>
<th></th>
<th>2004-05</th>
<th>2003-04</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rent received in advance</td>
<td>1,336,700</td>
<td>-</td>
</tr>
</tbody>
</table>

#### Note 10: Provisions (current)

<table>
<thead>
<tr>
<th></th>
<th>2004-05</th>
<th>2003-04</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual lease</td>
<td>217,376</td>
<td>235,856</td>
</tr>
<tr>
<td>Sick leave</td>
<td>55,264</td>
<td>59,672</td>
</tr>
<tr>
<td>Annual days off</td>
<td>1,264</td>
<td>1,216</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>274,606</td>
<td>296,744</td>
</tr>
</tbody>
</table>

#### Note 11: Provisions (non-current)

<table>
<thead>
<tr>
<th></th>
<th>2004-05</th>
<th>2003-04</th>
</tr>
</thead>
<tbody>
<tr>
<td>General reserve</td>
<td>4,034,060</td>
<td>4,034,000</td>
</tr>
<tr>
<td><strong>Nature and purpose of reserves:</strong> The general reserve is used for the purpose of funding capital asset maintenance expenditure and new technology.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Note 12: Reserves

<table>
<thead>
<tr>
<th></th>
<th>2004-05</th>
<th>2003-04</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retained profits</td>
<td>130,248</td>
<td>292,964</td>
</tr>
<tr>
<td>Net profit (loss) attributable to the association</td>
<td>1,001,515</td>
<td>(162,716)</td>
</tr>
<tr>
<td>Less transfers to reserves</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Retained profits at the end of the financial year</strong></td>
<td>1,131,763</td>
<td>130,248</td>
</tr>
</tbody>
</table>

#### Note 14: Commitments

<table>
<thead>
<tr>
<th></th>
<th>2004-05</th>
<th>2003-04</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Future operating lease rentals not provided for in the financial statements:</strong> Non-cancellable operating leases contracted for but not capitalised in the accounts.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>2004-05</th>
<th>2003-04</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total</strong></td>
<td>1,141,024</td>
<td>204,217</td>
</tr>
<tr>
<td><strong>Operating leases have an average lease term of 4 years. Assets that are subject to leases include offices and office equipment.</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### OTHER COMMITMENTS

<table>
<thead>
<tr>
<th></th>
<th>2004-05</th>
<th>2003-04</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service delivery within 12 months</td>
<td>26,400,000</td>
<td>24,800,000</td>
</tr>
<tr>
<td>Capital expenditure within 12 months</td>
<td>1,200,000</td>
<td>29,650</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>26,600,000</td>
<td>24,829,650</td>
</tr>
</tbody>
</table>

**Capital items will be expended on purchasing digital imaging equipment and the Record Archive and communications system (PAI).**
NOTES TO THE FINANCIAL STATEMENTS

Note 15: Program grants
Melbourne Health 2,347,000 3,592,969
Southern Health 4,272,070 4,235,889
St Vincent’s Hospital 3,803,154 3,432,551
St John of God Health Care Inc. – Geelong 1,525,896 1,825,273
Eastern Health 2,691,887 2,278,030
St John of God Health Care Inc. – Ballarat 1,148,768 1,129,490
Latrobe Regional Hospital 1,270,517 1,093,402
St John of God Health Care Inc. – Bendigo 973,801 964,042
Western Sydney Area Health Service 219,271 379,154
Koori Community -2,120 76,880
18,324,484 19,001,600

Note 16: Data management
Melbourne Health 35,912 23,789
Southern Health 32,435 26,030
St John of God Health Care Inc. – Geelong 30,486 45,161
St Vincent’s Hospital 41,864 32,978
Eastern Health 18,023 33,539
St John of God Health Care Inc. – Ballarat 31,579 37,566
Latrobe Regional Hospital 38,033 27,006
St John of God Health Care Inc. – Bendigo 17,775 21,965
236,107 246,031

Note 17: Training grants
Melbourne Health 79,048 78,654
Southern Health 286,396 214,559
St Vincent’s Hospital 49,049 48,654
454,492 341,858

Note 18: Coordination Unit operating expenses
Salaries and on-costs 423,037 552,692
Operating 181,458 218,020
Occupancy costs 227,987 130,400
Capital 47,086 27,403
Total annual running costs 879,578 928,515

Note 19: Segment reporting
The association operates in the health sector providing breast screening services to the public within Victoria.

Note 20: Financial instruments

<table>
<thead>
<tr>
<th>Financial Instruments</th>
<th>Effective Interest Rates</th>
<th>Floated Interest Rates</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>WEIGHTED AVERAGE</strong></td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td><strong>INTEREST RATES</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

All other financial assets and financial liabilities are non-interest bearing.

Credit risk
The maximum exposure to credit risk, excluding the value of any collateral or other security, at balance date to recognised financial assets is the carrying amount, net of any provisions for doubtful debts, as disclosed in the balance sheet and notes to the financial report.

The association does not have any material credit risk exposure to any single debtor or group of debtors under financial instruments entered into by the association, with the exception of the Department of Human Services.

Net fair value
The aggregate net fair values and carrying amounts of financial assets and financial liabilities are disclosed in the balance sheet and in the notes to and forming part of the financial report.

Note 21: Events subsequent to reporting date
On 25 August 2005, the National Bank notified BreastScreen Victoria of a bank error which applied to a Term Deposit for the period from 27 June 2005 to 10 July 2005. The error resulted in an undercharge of interest totaling $84,456.09. The error was corrected by the bank on 31 August 2005.

Mobile Digital Mammography Project
BreastScreen Victoria has signed agreements with Multimedia Victoria and the Australian Government, Department of Communication, Information Technology and the Arts. These agreements contractually obligate BreastScreen Victoria to spend no less than $1.2 million on capital expenditure in 2005-2006.

BreastScreen Victoria has entered into an Enterprise Work Agreement with Telstra Country Wide to build the telecommunications infrastructure that has been funded by the Coordinated Communications Infrastructure Fund administered by the Australian Government, Department of Communication, Information Technology and the Arts. BreastScreen Victoria will enter into a Business Service Agreement with Telstra Country Wide to use the telecommunications services.

Other than the above, there are no matters or circumstances that have arisen since the end of the financial year, other than those already disclosed, that have significantly affected or may significantly affect the operations of the association, the results of those operations or the state of affairs of the association, in future years.

Note 22: Association details
The principal place of business of the Association is: BreastScreen Victoria Inc.
311 Palmyra street, Carlton South, Victoria, 3053

Note 23: Related parties
The names of persons who were Board members at any time during the year are set out in the Annual Report. Board members do not receive remuneration for services provided. There were no other transactions that require disclosure for the year ended 30 June 2005.
**BOARD OF MANAGEMENT DECLARATION**

In the opinion of the officers below, the financial report as set out on pages 31 to 39:

(a) presents fairly the financial position of the BreastScreen Victoria Inc. as at 30 June 2005 and its performance and cash flows for the year ended on that date in accordance with Australian Accounting Standards, mandatory professional reporting requirements and other authoritative pronouncements of the Australian Accounting Standards Board.

(b) shows that there are, when this declaration is made out, reasonable grounds to believe that BreastScreen Victoria Inc. will be able to pay its debts as and when they fall due.

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

Associate Professor Richard Bell
Chair

Ms Margaret Crossley
Treasurer

Ms Onella Stagoli OAM
Director

Melbourne, 13 October 2005

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**INDEPENDENT AUDIT REPORT TO THE MEMBERS**

**Scope**

The financial report and committee’s responsibility

The financial report comprises the statement of financial position, statement of financial performance, statement of cash flows, accompanying notes to the financial statements, and the statement by members of the Board of Management for BreastScreen Victoria Inc. for the year ended 30 June 2005.

The board is responsible for the preparation and true and fair presentation of the financial report in accordance with the Associations Incorporations Act 1981 Victoria. This includes responsibility for the maintenance of adequate accounting records and internal controls that are designed to prevent and detect fraud and error, and for the accounting policies and accounting estimates inherent in the financial report.

**Audit Approach**

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

We performed procedures to assess whether in all material respects the financial report presents fairly, in accordance with the Associations Incorporation Act 1981 Victoria, including compliance with Accounting Standards and other mandatory financial reporting requirements in Australia, a view which is consistent with our understanding of the association’s financial position, and of its performance as represented by the results of its operations and cash flows.

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

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

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

**Independence**

In conducting our audit, we followed applicable independence requirements of Australian professional ethical pronouncements.

**Audit Opinion**

In our opinion, the financial report of BreastScreen Victoria Inc. presents a true and fair view in accordance with applicable Accounting Standards and other mandatory professional reporting requirements in Australia, the financial position of BreastScreen Victoria Inc. as at 30 June 2005, and the results of its operations and its cash flows for the year then ended.

**BDO**

BDO Chartered Accountants

Alison M. Brown
Partner

Melbourne, 13 October 2005
The BreastScreen Victoria Coordination Unit would like to thank the members of the BreastScreen Victoria Consumer Advisory Committee for their participation in this report.