# MNC Annual Report 2019









www.mndawa.asn.au

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# Motor Neurone Disease Association of Western Australia

Centre for Neurological Support The Niche, Suite B/11 Aberdare Rd Nedlands WA 6009 **Phone:** (08) 6457 7355 **Email:** admin@mndawa.asn.au

# **Board of Management**

Chairperson: Prof Samar Aoun Vice-Chairperson: Jan Stiberc Treasurer: Helen Kraus Secretary: Jan Taylor Member: Dr Lay Kho Member: Scott Ellwood Member: Prof Anthony Akkari Member: Sue Walters Member: Amanda Meloni

# Staff

Exective Officer: Andrew Hirst Fundraising & Events Manager: Sarah Wiley Fundraising & Events: Anne Northall Education Coordinator: Christina Line MND Advisors: Joan Ellis, Leanne Bodley, Bree Martin & Abi Crisp Accounts Receivable & Administration Officer: Wendy Jones Accountant: Ling Lee Equipment Coordnator: Ben Joseph

# Until there is a Cure, there is Care

# VISION

To be the recognised provider of care and support for people with Motor Neurone Disease (MND) and their families in Western Australia (WA) by adopting person and family centred best practices

# **MISSION**

To lead in the specialist support, enhancement of quality of life, awareness raising and promotion of research for people living with MND

# VALUES

# Care

Members, clients and their carers are our primary focus. We strive to understand and meet their needs in a compassionate manner to enhance the quality of life and care for people living with MND in WA.

# Inclusivity

The individuality of people is recognised and we acknowledge their rights.

# Respect

We treat everyone with respect, dignity and patience.

# Equity

We strive to enable equity of access to care and support services to people living with MND in WA, irrespective of their geographical location.

# Collaboration

We collaborate with professionals to build knowledge and pursue excellence in the care and support of people living with MND.

# Quality

We strive for continuous improvement in all we do: From association governance, management of staff and volunteers, liaison with professionals as well as the wider community and relationships with sponsors and partners in the pursuit of quality performance and best practice.



# From the Chairperson

In 2019, MNDAWA has focused on its core goals while adapting to new realities that presented themselves. A strategic and operational plan for the next 5 years was developed positioning MNDAWA well at the local and national levels and reflecting the vital role of the Association in improving services for clients in WA and their families. Responding to a significant educational unmet need in MND care, the MND educational program to regional and rural areas was highly commended by about 200 participating health professionals in five areas from all disciplines and has positioned MNDAWA at the forefront of providing education and raising awareness in the field, with further educational sessions continuing next year.

Also in the past year, The Board of Management has guided and overseen the development of a number of governance policies and procedures that are vital for MNDAWA compliance in the sector and risk management, such as: conflict of interest, confidentiality, privacy, record management, data and cyber security. The Board greatly appreciates Dr Sue Colyer's thorough input and voluntary assistance in this domain.

Our relationship with the MND Associations in other states and the peak body MND Australia has been boosted through working on a proposed unified approach starting with marketing and fundraising. MND Australia plays a key role in influencing the Federal government to improve the quality of services and support for people living with MND and fund research. Further strengthened relationships were with the Health Department of WA where we were gratefully granted an extension of funding period, and also with the research and clinical community where through national funding, WA clients are included on a national register that will assist in a more person centred approach to MND care and the identification of national policy priorities.

We are proud that we continue to have high satisfaction rates of our services through the yearly satisfaction surveys that we undertake. Many thanks go to our experienced and compassionate MND Advisors (Joan, Leanne, Abi and Bree) and the support staff. However, we can do better and we can do more particularly in the two areas of respite support and bereavement support. We greatly appreciate the generosity of Care Cure Support and FightMND in funding much needed equipment to make life a little more bearable for people with MND and their families. We also acknowledge the support and care provided by other organisations to our clients and in particular the Neurological Council of WA and MSWA.

It was really heart-warming that so many people with MND, carers, family members, friends, volunteers, politicians, clinical and research colleagues and students have joined us at the Charity Gala Dinner for a night of unity against MND on 14 September. This inaugural event was a great success, as all other 2019 fundraising events were, due to the tireless and competent work of our Fundraising and Events Manager, Sarah. Last but not least, I would also like to acknowledge the work of our highly committed Executive Officer. Andrew, in leading a harmonious team of dedicated staff, and in building sound relationships throughout the sector at the local and national levels, and seeking at every opportunity more and improved services for our clients.

In Australia, we have just over 2,000 people living with the disease. Although MND is relatively uncommon, with a prevalence of 7 in 100,000, it is a very costly disease in every aspect. There is a lot that goes into making this journey a little more tolerable with about 20 different professional disciplines involved. The associated direct costs (such as healthcare and expensive equipment), indirect costs (such as loss of productivity and income) and intangible losses (such as loss of independence and quality of life) contribute to the high cost of this illness to society. According to the 2015 Deloitte Access Economics report, the cost of MND is estimated to be \$1.13 million for each person with MND and the total cost in Australia is estimated to be \$2.37 billion. While we can quantify the economic disadvantage on families supporting people with MND, the enormous physical, psychological and emotional burden of the disease on these families cannot be truly measured.

As a one of a lifetime opportunity, we have proudly co-hosted with MND Australia and MND UK the 30th international ALS Symposium and MND Alliances meetings happening in Perth this year, which brought together about 850 researchers and practitioners from all over the world to share the latest evidence on alleviating the physical and psychosocial affliction of MND. This is why, because of all of you as a community of care, we can continue to make the lives of people living with MND a little easier and move closer to the global vision of a "world without MND". However, until this vision is fulfilled and a cure or treatment is found, we have in WA about 180 people and their families affected by the disease that need everyone's help to cope emotionally and physically during their traumatic journey.

All in all, it was a productive and successful year, and this could not have been achieved without members of the Board and staff, and Patrons and Ambassadors of the Association, working together as one team united against MND.

Prof Samar Aoun Chairperson



# From the **Executive Officer**

As with the previous year, the last 12 months have seen considerable change in healthcare and navigating through these changes has if anything been more challenging.

NDIS has continued to be rolled out and it has become more and more apparent that there needs to be change in order for people living with a rapidly progressive neurological disease to receive an expedited service that allows for the quality and level of service they deserve. All the MND State associations and our peak body MND Australia continue to lobby at State and Federal levels. In 2020 we will commence a major review of how and if we can provide or influence better NDIS coordination and support.

Service to people over 65 years has its own challenges with the closing of many of the block funded services such as CAPE and the long waiting list for aged care.

MNDAWA is endeavouring to fill in the gaps in service through equipment provision and education as well as coordination and advocacy for individual clients and as an organisation. The Board and myself are constantly reviewing our service provision to make sure it's as good as it can be and looking into what other services we can provide to people living with MND and their carers.

I am very proud of all our staff, the commitment and passion are apparent in everything they do. Our four Advisors provide, emotional support, coordination, advocacy and a lot more to the entire MND family. I see the emotional and physical toll this often takes on them. Walking alongside our clients is hard enough without having to navigate through NDIS and Aged Care systems that often are not adequate for people living with MND.

Without the rest of the MNDAWA team, Through this program we have provided none of this would be possible. I know that educational workshops to communities in they too are passionate about what they do Mandurah, Bunbury, Albany and Geraldton to help people living with MND achieve the as well as Metro Perth. These workshops best possible quality of life they can. are aimed at better equipping nursing and allied health professionals to provide The close contact we have with our clinical, emotional and social support to neurologists Dr Rob Edis, Professor people living with MND. About 200 health Merrilee Needham and Dr Lay Kho is really care professionals have attended these important to the level of support we can give workshops and the evaluation feedback and we highly value this relationship. We has been overwhelmingly positive. The believe that because of this relationship with workshops are interactive with lots of the clinicians we are in contact with 95% of opportunity for practical demonstrations. I all the people who are living with MND in would like to thank Professor Samar Aoun Western Australia. and the Perron Institute for taking the lead in helping to develop the content, organise Being part of a multi-disciplinary team is and present at these workshops. I would vital and we build relationships with quality like to thank Dr Rob Edis, Dr Peter Silbert, service providers such as the Neurological Respiratory Clinical Nurse Brooke Kyle, Council of WA (NCWA) who provide clinical Sleep Scientist Marie Hunter, the MND nursing services that are specific to people Advisor team, CATS and the ResMed living with MND. team for their time, passion and expertise in travelling to these regions to deliver this I would like to thank the WA Department high quality and much needed education.

of Health for extending much needed funding until 31st of December 2021. The relationship we have with the Health Department is vital to us and I would like to thank them for the work they have done on better reporting of outcomes this year and their willingness to listen and the obvious empathy and compassion they display in our interactions.

My thanks go to the Board of Management of MNDAWA for their continued support and encouragement. My role can sometimes be challenging but I know that every board member is behind me and the staff in providing the best possible service to people living with MND.

Education continues to be a major focus of MNDAWA, education to clients, carers and health professionals.

This year, to address the educational gaps, we commenced educational workshops in regional and rural WA. This was made possible through a 3 year grant funding from Perpetual through the Helen Leach Foundation. The Honda Foundation have also made a Honda CRV available to us until the end of the 2019/2020 financial year.

We continue with our You, Me and MND sessions and are hoping to roll these out into the regions this coming year.

Through much appreciated funding from Care Cure support, we have added \$135,000 of equipment to our equipment inventory. This included hoists, electric beds and communicative technology. Due to the generosity of Care Cure Support the lives of people living with MND will be made more comfortable. MNDAWA has also purchased a considerable amount of equipment such as Power Wheelchairs and lifting aids.

**Andrew Hirst Executive Officer** 



# **Our Fundraising Highlights**

More than 110 community fundraising events held







1086 people walked to D'Feet **MND** raising \$74,000

\$688,705 Raised in 2018/2019 4,500 People donated to **MNDAWA** 







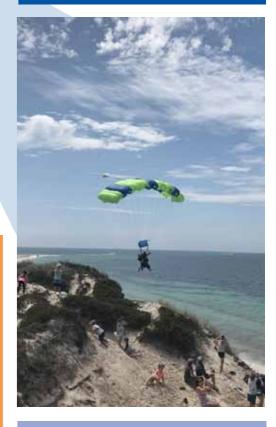


Man rode a bull & raised \$8,500

9 People trekked The Great Wall of China & raised over \$60,000



# 333 People donated to our 2 donor appeals











# Thank you for all your support

We would like to extend a special thank you to all those who have generously supported the Association during 2018/2019. Without your contribution MNDAWA would be unable to deliver its specialised care and support services to the highest level.

# **PLATINUM PARTNERS**

Acknowledging those who have donated over **\$50,000** to the Association over the last 10 years 1/7/09 – 30/6/19

Care Cure Support Ray White Western Australia Country Women's Association of WA Greg & Julie Hambley Harvey Norman WA JEM Foundation Lane Buck & Higgins Lotterywest Robert Minear John Mounsher Rotary Club of Attadale Santos Ltd The Helen Leech Endowment The Theodore and Isabella Wearne Charitable Trust (Inc)

# **DONORS**

Acknowledging those who have donated \$1,000 and over to the association over the last year 1/7/18 – 30/6/19

Anglican Parish of Turquoise Coast Australian Leisure & Hospitality Barbara Cooper Beaver Flooring Pty Ltd Bethanie Fields **Bethany Cooper BHP Billiton Matched Giving Programme** Blue Illusion **BP** Foundation Catholic Women's League Christ Church Grammar School City of Joondalup Craig Wood Dr Sue Colver Eleanor Roberts Gino and Debbie Salomone **GKMI Pty Ltd** Intermediate Capital Group James Giannas Jem Foundation John & Susan Blue John Curtin Leadership Academy Jubilee Singers of Bridgetown Judy Roberts Julia Fleming Kalbarri Motor Hotel Kate Keenan Kate Milentis Kojonup Football Club KPMG Perth CCC Mandurah Murray Mayday Club Inc Mardy-Ann Read Moline House Residents DA & VJ Headling

Joe & Jenny Edgecombe John & Robin McDonald Peter Rocke Aaron Doggett Frank & Sheila Granger **Ben Williams Brian Fitzgerald** Brian McCarthy Cael McLeish Darren Wood David Milne David Wearne Eric Thern Graeme Burr Jeffrey Hall Paul Stoodley Robert Minear Russell Dunne **Terence J Prindiville** Tom Pattison Zach Ferrari **Carol Bogaers** Coral Mahony Elizabeth Curtis Janice Taylor Kerrie Roberts **Kirsten Whitby** Linda Polsen Nicky Lord Ashlev Brown Cheryl Cova Helen Paul Jan Cicerello Joy Wearne Mikaela Bennett Mimi & Willy Packer Patricia Simmonds Sarah Wiley Tracy Davies North Beach Football Club Old Boys Business Club Onslow Rodeo Peter Roberts Racing and Wagering WA Red Dot Stores **Regis** Resources Rob Mason Rotary Club of Attadale Rotary Club of Como Inc Santos Ltd Skydive Geronimo WA Pty Ltd Supply Chain and Logistics Ass Talison Lithium Pty Ltd The Busby Family Fund The Giorgetta Charity Fund The Wood Family United Voice Wendy Houlahan Whitford Catholic Primary School Xeina Healy



# **VOLUNTEER OF THE YEAR 2018/2019**

individual.

This person has been volunteering for MNDAWA for a number of years. She willingly gives up her time to help out in the office one day a week as well as volunteering at Walk to D'Feet MND & our Pamper Days.

Volunteer of the Year 2018/2019 goes to MARGARET HUNTER.

Margaret's support of the Association and its clients and carers is greatly appreciated.



The Volunteer of the Year award was introduced in 2015 to recognise an individual who dedicated many hours and effort to the Association through their volunteering. It is a great privilege to recognise the volunteering efforts of this

# **BOARD OF MANAGEMENT REPORT**

Your board of management submits the financial report of Motor Neurone Disease Association WA Inc for the financial year ended 30 June 2019.		Note
Board Members	CURRENT ASSETS	
The names of board members throughout the year and at the date of this report are:	Cash and cash equivalents Trade and other receivables	23
	Inventories	4
Professor Samar Aoun (President) Ma Jan Stiham (Visa President) (Appointed October 2018)	Other current assets	5
Ms Jan Stiberc (Vice President) (Appointed October 2018) Mrs Helen Kraus (Treasurer)		
Dr Lay Kho	TOTAL CURRENT ASSETS	
Mrs Janice Taylor		
Mr Anthony Akkari		
Mr Scott Eldwood	NON-CURRENT ASSETS	
Ms Sue Walters (Appointed October 2018)		
Ms Amanda Meloni (Appointed October 2018)	Property, plant and equipment	6
Mrs Karen Smart (resigned January 2019)		
Ms Chau Huynh (resigned January 2019)	TOTAL NON-CURRENT ASSETS	
Ms Gilly Smith (appointed October 2018 and resigned January 2019)	TOTAL ACCETC	
	TOTAL ASSETS	
Principal Activities		
The principal activities of the association during the financial year were to provide guidance and support	CURRENT LIABILITIES	
services to those diagnosed with motor neurone disease and their families in Western Australia.	Grants and trust monies on hand	7
	Trade and other payables	8
Significant Changes	Provisions	9
	110/06/015	,
No significant change in the nature of these activities occurred during the year.	TOTAL CURRENT LIABILITIES	
Operating Result	TOTAL LIABILITIES	
The events for the 2010 financial year emounted to \$207.450		
The surplus for the 2019 financial year amounted to \$207,459.	NET ASSETS	
Signed in accordance with a resolution by the members of the board of management		
Signed in accordance with a resolution by the members of the board of management	MEMBERS' FUNDS	
MA 11		
Whon	Retained surplus	
	TOTAL MEMBERS' FUNDS	10
Board Mambar	IUIAL MEMDERS' FUNDS	10

Board Member

Board Member

25/10/2019 Dated:

Perth, Western Australia

e	2019 \$	2018 \$
	2,118,193 12,000 16,684 46,773	2,202,771 108 13,291 27,162
	2,193,650	2,243,332
	386,301	160,463
	386,301	160,463
	2,579,951	2,403,795
	152,091 51,825 25,748	201,764 45,618 13,585
	229,664	260,967
	229,664	260,967
	2,350,287	2,142,828
	2,350,287	2,142,828
	2,350,287	2,142,828

# **OUR FINANCIAL STATEMENTS INCOME & EXPENDITURE FOR THE YEAR ENDED 30 JUNE 2019**

# **OUR FINANCIAL STATEMENTS INCOME & EXPENDITURE FOR THE YEAR ENDED 30 JUNE 2019: FUNDRAISING**

	2019 \$	2018 \$	
Income		·	
Membership	2,262	1,927	Fi
Grants			Be
- Health Department of WA	419,878	416,422	C
- Perpetual Impact	84,254	-	Ce
- Other grants	22,120	12,299	D
Fundraising income (net)	770,032	514,321	D
Interest	49,008	40,495	D D
Total income	1,347,554	985,464	H IN
Expenditure			O St
Patient services			TI
MND advisory services	653,532	528,014	W
Information/education	92,335	100,709	Le
Indirect care advisory services			Le
- Equipment purchase/maintenance & respite	125,171	80,672	Ite
- Group support	49,494	15,578	Fe
Administration			
Administration costs	213,574	175,656	
Board expenses/conference	5,989	3,607	<b>N</b> 1)
Total expenditure	1,140,095	904,236	2)
Net current year surplus	207,459	81,228	

Fundraising activities
Bequest
Change 4 Change
Community fundraising events
Dive for Dollars
Donations – general
Donor appeal
Donated equipment
Hike for Health
IMO donations
Other MNDAWA events and merchandise
Street Appeal
The Drive
Walk D'Feet
Less MNDRIA donations
Less Provision clinical trials
Administration
Items given away for promotions
Fees associated with donations and fundraising

# lote:

- Jem Foundation bequest
- patient equipment in the balance sheet. The amounts reflected are as follows:

Equipment donated 2017 - 2019 Less depreciation 2017 - 2019

\_\_\_\_

- 3) 30% of the total costs of the items listed below were allocated to this account:
  - Admin staff wages and superannuation
  - Workers compensation insurance •
  - Postage •
  - Photocopying •
  - Audit fee •
- 4) Everyday hero fees, bank fees and Donman Project fees.

Note	2019 \$ Net Income	2018 \$ Net Income
1	36,963	10,000
	3,932	5,603
	199,657	240,927
	52,335	44,335
	126,029	85,750
	84,788	64,040
2	263,564	-
	50,149	-
	35,772	24,296
	17,545	10,650
	5,474	5,604
	2,622	162,219
	60,326	89,039
	(25,000)	(25,398)
	-	(76,422)
3	(113,352)	(88,654)
	(2,000)	(2,395)
4	(28,772)	(35,273)
	770,032	514,321

During the year it was identified that various patient equipment that had been donated over a number of years had not been accounted for in the financial accounts of the Association. These amounts are now being recognised this year as income (less depreciation) and as an addition to

> 474,599 (211,035)

\$263,564

# **OUR FINANCIAL STATEMENTS** STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30 JUNE 2019

	Members' Funds	Total	Note	2019 \$	2018 \$
Balance as at 1 July 2016	2,061,600	2,061,600	CASH FLOWS FROM OPERATING ACTIVITIES		
Total changes in members' funds recognised in the income and expenditure statement			Receipts from donations, fundraising and grants Payments to suppliers	1,321,785 (1,441,948)	1,264,696 (964,658)
Balance at 30 June 2017	2,061,600	2,061,600	Interest received	57,141	32,211
			Net cash generated by operating activities	(63,022)	332,249
Total changes in members' funds recognised in the income and expenditure statement	81,228	81,228	CASH FLOWS FROM INVESTING ACTIVITIES		
Balance at 30 June 2018	2,142,828	2,142,828			
Total changes in members' funds recognised in the income and expenditure statement	207,459	207,459	Disposal of property, plant and equipment Purchase of property, plant and equipment	49,000 (70,556)	(61,411)
Balance at 30 June 2019	2,350,287	2,350,287	Net cash used in investing activities	(21,556)	(61,411)
			Net increase in cash and cash equivalents Cash and cash equivalents at beginning of financial year	(84,578) 2,202,771	270,838 1,931,933
			<b>Cash and cash equivalents at end of financial year</b> 2	2,118,193	2,202,771

Note 1: Statement of significant accounting policies

## **Financial Reporting Framework**

The financial statements are special purpose financial statements prepared in order to satisfy the financial reporting requirements of the Associations Incorporation Act Western Australia. The board has determined that the association is not a reporting entity.

## Statement of Compliance

The financial report has been prepared in accordance with Associations Incorporation Act Western Australia, the basis of accounting specified by all Australian Accounting Standards and Interpretations, and the disclosure requirements of Accounting Standards AASB 101: Presentation of Financial Statements, AASB 107: Cash Flow Statements, AASB 108: Accounting Policies, Changes in Accounting Estimates and Errors, AASB 1031: Materiality and AASB 1054: Australian Additional Disclosures.

## **Basis of Preparation**

The financial statements have been prepared on an accrual basis and are based on historical costs. They do not take into account changing money values or, except where stated specifically, current valuations of non-current assets.

The following significant accounting policies, which are consistent with the previous period unless stated otherwise, have been adopted in the preparation of these financial statements.

## Income Tax (a)

No provision for income tax has been raised as the association is exempt from income tax under Division 50 of the Income Tax Assessment Act 1997.

## Property, Plant and Equipment **(b)**

Property, plant and equipment is carried at cost less, where applicable, any accumulated depreciation.

The depreciable amount of all property, plant and equipment is depreciated over the useful lives of the assets to the association commencing from the time the asset was held ready for use.

Leasehold improvements are depreciated over the shorter of either the unexpired period of the lease of the estimated useful lives of the improvements.

Class of Fixed Assets	Depreciation Rate	
Motor vehicles	17%	
Patient Equipment	20% - 67%	
Office equipment	10% - 67%	

## Impairment of Assets (c)

At the end of each reporting period, the board reviews the carrying amounts of its assets to determine whether there is any indication that those assets have been impaired. If such indication exists, an impairment test is carried out on the asset by comparing the recoverable amount of the asset, being the higher of the assets fair value less costs of disposal and value in use, to the asset's carrying amount. Any excess of the asset's carrying amount over it's recoverable amount is recognised in the income and expenditure statement.

# NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2019

Note 1: Statement of significant accounting policies (c		
(d)	Cash and cash equivalents	
	Cash and cash equivalents include cash on hand term highly liquid investments with original matu	
(e)	Accounts receivable and other debtors	
	Accounts receivable and other debtors includes receivable from customers. Receivable expected to reporting period are classified as current assets.	
(f)	Revenue and other income	
	Interest revenue is recognised using the effective assets is the rate inherent in the instrument. D receive a dividend has been established.	
	Grant and donation income is recognised when generally at the time of receipt.	
	If conditions are attached to the grant that must receive the contribution, recognition of the grant are satisfied.	
	All revenue is stated net of the amount of goods	
(g)	Goods and services tax (GST)	
	Revenues, expenses and assets are recognised net of GST incurred is not recoverable from the A payables are stated inclusive of the amount of GS recoverable from, or payable to, the ATO is in assets and liabilities statement.	
(h)	Accounts payable and other payables	
	Accounts payable and other payables represent to period for goods and services received by the as unpaid. The balance is recognised as a current li- days or recognition of the liability.	

## **Employee Provisions**

(i)

Provision is made for the association's liability for employee benefits arising from services rendered by employees to the end of the reporting period. Employee provisions have been measured at the amounts expected to be paid when the liability is settled.

# continued)

d, deposits held at call with banks, and other short urities of three months or less.

es amounts due from funders as well as amounts to be collected within 12 months of the end of the All other receivable are classified as non-current

e interest method, which for floating rate financial Dividend revenue is recognised when the right to

the entity obtains control over the funds, which is

ist be satisfied before the association is eligible to t as revenue will be deferred until those conditions

and services tax.

et of the amount of GST, except where the amount Australia Taxation Office (ATO). Receivables and GST receivable or payable. The net amount of GST ncluded with other receivables or payables in the

the liability outstanding at the end of the reporting ssociation during the reporting period that remain liability with the amounts normally paid within 30 Note 1: Statement of significant accounting policies (continued)

(j) Provisions

Provisions are recognised when the association has a legal or constructive obligation, as a result of past events, for which it is probable that an outflow of economic benefits will result and that outflow can be reliably measured. Provisions are measured at the best estimate of the amounts required to settle the obligation at the end of the reporting period.

# Note 2: Cash and cash equivalents

Cash at bank - Bankwest Petty Cash Term deposit - Bankwest

# Note 3: Trade and other receivables

Trade debtor Other debtor

# Note 4: Inventories

Stock on hand

# Note 5: Other current assets

Prepayments Accrued interest

# Note 6: Property plant and equipment

Office equipment at cost Less accumulated depreciation

Patient equipment at cost Less accumulated depreciation

Motor Vehicles at cost Less accumulated depreciation

Total property, plant and equipment

Note 7: Grants and trust monies on hand

Grants and trust monies on hand

2019 \$	2018 \$
208,254 500 1,909,439	349,567 500 1,852,704
2,118,193	2,202,771
12,000	108
12,000	108
16,684	13,291
42,268 4,505	14,523 12,638
46,773	27,162
66,438 43,254	118,717 82,532
23,184 942,516 603,977	36,185 404,031 352,722
338,539	51,309
43,169 18,591	178,666 105,697
24,578	72,969
386,301	160,463

152,091

201,764

# NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2019

<b>STATEMENT</b>	BY BOARD	OF MANA	GEME
------------------	----------	---------	------

	2019 \$	2018 \$	
Note 8: Trade and other payables			In accordance with a resolution by the board of management Inc., the members of the board declare that:
Other creditors Credit card Trade creditors GST & PAYG Superannuation	10,000 293 32,948 4,352 4,232	25,398 (1,125) 11,814 6,219 3,312	1. the financial statements as set out on pages 3 to 2 position of Motor Neurone Disease Association W for the year ended on that date in accordance with the financial report and the requirements of the Australia; and.
	51,825	45,618	2. at the date of this statement there are reasonable g Association WA Inc. will be able to pay its debts as
Note 9: Provisions			This statement is signed for and on behalf of the board of ma
Current Annual leave	25,748	13,585	Non
Note 10: Members' funds			Board Member
Total members' funds at the beginning of the year. Total changes in members' funds recognised in the	2,142,828	2,061,600	SA
income and expenditure statement	207,459	81,228	Board Member
Total members' funds as at 30 June 2019	2,350,287	2,142,828	Dated: 25/10/2019 Perth, Western Australia
Note 11: Statement of cash flow information			
Reconciliation of cash flow from operations with operating profit after income tax			
Profit (loss) after income tax	207,459	81,228	
Non cash flows in operation			
Depreciation and amortisation	164,944	55,273	
Changes in assets and liabilities Increase in stock Increase in trade debtors Decrease in prepayments Increase in accrued interest Increase in grants and trust monies Increase in trade and other payables Decrease in provisions Increase in donated equipment	(3,393)(11,892)(27,744) $8,133(49,673)6,20712,163(369,226)$	1,230 341 73,033 (8,284) 116,642 38,265 (25,479)	
	(63,022)	332,249	

# ENT

nent of Motor Neurone Disease Association WA

to 12 present a true and fair view of the financial n WA Inc. as at 30 June 2019 and its performance with the accounting policies described in Note 1 to of the Associations Incorporations Act Western

le grounds to believe that Motor Neurone Disease as and when they fall due.

management by:



# **Report on the Financial Report**

## Opinion

We have audited the accompanying financial report, being a special purpose financial report, of Motor Neurone Disease Association WA Inc. (the association), which comprises the assets and liabilities statement as at 30 June 2019, the income and expenditure statement for the year then ended, the statement of fundraising income and expenditure for the year then ended, statement of changes in equity, statement of cash flows for the year then ended, notes comprising a summary of significant accounting policies and other explanatory information, and the certification by members of the board of management on the annual statements giving a true and fair view of the financial position and performance of the association.

In our opinion, the accompanying financial report gives a true and fair view of the financial position of the association as at 30 June 2019 and its financial performance for the year then ended in accordance with the accounting policies described in Note 1 to the financial statements and the requirements of the Associations Incorporations Act Western Australia.

## Basis for opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Report section of our report. We are independent of the association in accordance with the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 : Code of Ethics for Professional Accountants (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

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

## Emphasis of matter – basis of accounting

We draw attention to Note 1 to the financial report, which describes the basis of accounting. The financial report has been prepared to assist the association to meet the requirements of the Associations Incorporation Act Western Australia. As a result, the financial report may not be suitable for another purpose. Our opinion is not modified in respect of this matter.

## Responsibilities of the Board for the Financial Report

The board is responsible for the preparation and fair presentation of the financial report in accordance with the financial reporting requirements of the Associations Incorporation Act Western Australia and for such internal control as the board determines is necessary to enable the preparation and fair presentation of a financial report that is free from material misstatement, whether due to fraud or error.

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

# Auditor's Responsibilities for the Audit of the Financial Report

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

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

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

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

# **Owen & Plaistowe**

Certified Practising Accountants

Hugh M E Plaistowe Partner Dated: 25th October 2019

Perth, Western Australia

# Patrons, Ambassadors, Life Members & Honorary Officers

# **PATRONS**

Narelda Jacobs Keith Potger, AO Kim Hughes Dr Rob Edis

# AMBASSADORS Kirsten Whitby

# LIFE MEMBERS

Joy Diver Janet Johns Christine Kingsnorth Marie Macdonald Emanuel Manolios Peter Murray Graham Peck Keith Potger, AO Jon Sanders Karen Smart Julie Touchell Ross Whiteman

# **HONORARY OFFICERS**

Hon. Solicitor: Mr Peter Murray Hon. Accountant: Mr Tony Silipo

# **THE CORNFLOWER**

The Blue MND Cornflower is the national symbol of hope for Motor Neurone Disease. It may have a fragile appearance, but it is hardy in nature which is representative of the remarkable strength people living with MND have. We live in hope that we will find a cure for Motor Neurone Disease.

# Until there is a Cure, there is Care

# **Notes**







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