

ANNUAL REPORT WA 2012-2013



**UNDERSTAND ALZHEIMER'S
EDUCATE AUSTRALIA**
FIGHTDEMENTIA.ORG.AU

VISION

A society committed to preventing dementia, while valuing and supporting people who live with it.

PURPOSE

To advance the interests of people living with dementia through advocacy, education, support and research.

PHILOSOPHY

Dementia is a human experience rather than just a biological condition. We therefore offer a holistic approach in our care that respects the individuality of people living with dementia.

VALUES

- Understanding the unique needs of people living with dementia.
- Recognising people as our greatest strength.
- Investing in partnerships.
- Treating people with respect and dignity.
- Encouraging innovation and creativity.
- Being transparent, accountable and sustainable.

DISCLAIMER

Articles in this publication provide a general summary of the subject matter covered. Any person with dementia should seek professional advice about their specific case. Alzheimer's Australia WA is not liable for any error or omission in this publication. Permission should be sought from the Editor before reproducing articles and/or images. Should permission be given, the source must be acknowledged.

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“JEB HAS BEEN A PART OF THE AAWA FAMILY FOR 13 YEARS. HE IS A LOVING COMPANION FOR THE MCC MEMBERS AND ALWAYS BRINGS A SMILE TO EVERYONE’S FACE.”

Marlene Grogan
and Jeb



CHAIRMAN'S REPORT

THIS LAST YEAR HAS SEEN A LOT OF CHANGE IN THE ENVIRONMENT IN WHICH ALZHEIMER'S AUSTRALIA WA (AAWA) OPERATES.

The state election, a federal election that sees Australia under new management, a new CEO, changes in the senior management and a number of directors retiring after years of service are the most significant of these changes.

The Board has played a significant role in overseeing these changes by working in a collaborative manner with the key stakeholders.

AAWA is a member of Alzheimer's Australia (AA), a federation of state and territory bodies that share a vision of a world without dementia and a mandate to provide consistent advocacy and policy across Australia to improve the lives of all those living with dementia. The members of this federation are working closely to increase effectiveness and efficiency as we work to achieve our vision.

AA lobbied strenuously for dementia to be listed as a national health priority. This status will ensure an increased, sustained focus and funding for dementia research and care from governments across the country.

Of great significance is the pledge by the Prime Minister Tony Abbott that the Coalition government will provide \$200 million over the next 5 years to the National Health and Medical Research Foundation for dementia research. This has been the centrepiece of AA's lobbying for the past 3 years and addresses a serious imbalance in the money spent on dementia research in this country.

My term as the WA representative and Treasurer on the national Board expires this year. Brian Roche will take over this role in November. The national Board continues to be well-served by our president, Ms Ita Buttrose AO. Ita's leadership and profile has been exceptional and on behalf of all at AAWA I acknowledge her contribution.

AAWA is a member of Alzheimer's Disease International (ADI). ADI is the international federation of Alzheimer's associations around the world, and has official status with the World Health Organization. There are over 104 member countries of ADI. Its vision is an improved quality of life for people with dementia and their families throughout the world.

ADI believes that the key to winning the fight against dementia lies in a unique combination of global solutions and local knowledge. As such, it works locally, by empowering Alzheimer associations to promote and offer care and support for people with dementia and their carers, while working globally to focus attention on dementia.

As of 2010, there were an estimated 35.6 million people with dementia worldwide. This number will nearly double every 20 years, to an estimated 65.7 million in 2030, and 115.4 million in 2050. Demographic ageing is a worldwide process that shows the successes of improved health care over the last century. Many are now living longer and healthier lives with the result that the world population now has a greater proportion of older people.

ADI holds an annual international conference which is the longest running international conference on dementia.

The conference is a unique multi-disciplinary event which unites people with an interest in dementia from around the world. In 2015 AAWA will have the pleasure and challenge of hosting this international conference.

ADI oversees World Alzheimer's Month, celebrated each September, with World Alzheimer's Day on September 21st. The month and the events are an opportunity to raise global awareness about dementia and its impact on families and the important work of our members throughout the world.

This year on World Alzheimer's Day we joined forces with the McCusker Alzheimer's Research Foundation to present. The *2013 Progress Report on The Cause, Prevention and Care of Dementia* at an event at Government House. His Excellency the Governor provided the welcome, followed by an address sharing the consumer experience by Bronte and Glenda Parkin and updates on current activities by Professor Ralph Martins AO and our CEO Rhonda Parker.

Rhonda has now been CEO for 12 months. It is an enormous task to take on the CEO position, especially when there is significant change in the external environment and during a period of change and rapid growth within the organisation.

There have been numerous achievements by Rhonda and her team over the past 12 months, including a review of our systems and processes to increase our productivity, efficiency and accountability, a review of our building project to provide a new head office, the commencement of our new Albany building, renewing many of our service contracts that now total millions of dollars, strengthening our relationship with the WA Department of Health and the securing of the new Dementia Partnership Program with the State Government, and recording a growth rate of almost 15%.

I want to acknowledge and congratulate Rhonda and her team and thank them for their tireless work and dedication over the past 12 months.

With an increased focus on dementia, AAWA faces a challenging, exciting future and a period of significant growth.

Our mandate to support those living with dementia has never been more relevant, our work never more necessary. We will continue to work with and value our stakeholders, including the federal and state governments and their relevant departments, the aged care providers, those working in the health and care sector, our sponsors and members and, most importantly, all those Western Australians living with dementia who come to us for support, information, education and assistance.

We value these partnerships as we seek to build capacity in the health and aged care industry, develop education and training curriculum for health professionals, aged care workers and the community, and provide essential support services for all those affected by dementia.

In closing I would like to thank and acknowledge our retiring directors. Mr Nick Di Lorenzo retires after 17 years as our Treasurer. Nick commenced his work with AAWA when our income was in the vicinity of \$1.3 million.

This financial year it has grown to over \$10.5 million. Nick will be sorely missed for his financial guidance and leadership. We wish him all the very best.

We also bid farewell to Mr Tony Ramshaw, Mrs Amanda Mitchell-Lewis and Mr Andrew Hogan and thank them very much for their significant contribution over the years.

Finally I would like to thank my fellow Board members, the senior management, staff, volunteers, donors and supporters for their assistance over the past 12 months. I would also like to thank the Australian Government and the Western Australian Government who continue to provide the bulk of our resources to fund the programs we deliver which are so crucial to the many thousands of West Australians and their families who are living with dementia.

"SINCE 1982 WE'VE BEEN DEDICATED TO PROVIDING HELP FOR PEOPLE WITH DEMENTIA AND THEIR CAREGIVERS. THAT HELP COMES IN MANY WAYS."



Back row left to right: Andrew Hogan – Director, Nick di Lorenzo – Honorary Treasurer, Dr Michael Preece – Director, Brian Roche – Director and Dr Sean Maher – Honorary Medical Director
Front row left to right: Jenny Rogers – Vice Chairman, Rhonda Parker – Chief Executive Officer, Craig Masarei – Chairman and Jenny Watt – Director

Chairman – Craig Masarei



CEO'S REPORT

ALZHEIMER'S AUSTRALIA WA (AAWA) HAS LONG LOBBIED FOR AN INCREASED AWARENESS OF AND PRIORITY ON DEMENTIA.

"I'M PROUD OF WHAT WE DO BUT I LOOK TO THE DAY WHEN PEOPLE WITH DEMENTIA HAVE ACCESS TO FAR-IMPROVED TREATMENT REGIMES AND CARE."



For many of our early years, we were the only provider of support services to people living with dementia in the community in Western Australia. Much has changed. Progress is being made. Dementia is now a national health priority, is recognised as the third leading cause of death in Australia, and has an increased awareness in the community. This in no way reduces the challenge, but it does increase the opportunity to make improvements in the national and local response to the growing numbers of individuals and families that are living with this degenerative condition.

The need for improved diagnosis, treatment regimes, education and care responses has never been greater. It remains an imperative for the 29,600 Western Australians and their families who are living with dementia.

The team at AAWA has worked with commitment over the last year to advance the breadth, quality and innovation in the range of services we provide. Change and challenge are constant across the business. This commitment saw our contract revenue increase from \$9,212,117 to \$10,535,502 – a significant growth rate of 15%.

The engine room behind all of this activity is the Corporate Services department. A focus on improved systems and accountabilities has increased efficiency and effectiveness across the organisation.

The finance team has overhauled all of its systems to improve budgetary compliance and discipline. A comprehensive risk management plan is now in place.

We have installed IT equipment to allow for a greater reach of programs and engagement with clients in rural and remote WA, as well as AAWA staff in Kalgoorlie, Albany, York, Mandurah and Bunbury.

Our media and public relations profile has increased. We made a commitment to develop Dementia Awareness Week in September into an iconic week in the Western Australian calendar. With this increased focus and effort, and generous sponsorship from ExxonMobil Australia, it was a huge success. We are planning an even greater impact next year.

We developed relationships with and continue to benefit from ambassadors such as Daniela and Stephania from My Kitchen Rules, Josh Catalano from Masterchef Australia, Deb Kennedy, Glen Jakovich and Sir Cliff Richard. These high profile ambassadors provide their time generously and are invaluable in increasing our profile and media presence.

The Memory Van was re-branded and painted in the unmissable teal green, black and white of our corporate colours.

The response to our fundraising appeals increased. The Christmas appeal increased by 23% and the tax appeal by 56%. Our membership grew by 9% from 3,139 to 3,436.

The Education, Research and Consultancy department is an area of real growth opportunity, and strong results were realised. We were successful in achieving registration as a Registered Training Organisation under the new federal legislation. Our Australia-first Certificate IV in Dementia Practice was also successful in receiving national registration. The range of training and education expanded to over 25 different courses and workshops. Over 350 courses and workshops were delivered to families, health care professionals and members of the community.

The team successfully completed the Dementia Enabling Environments Project (DEEP). The initiative was a finalist in the Aged Care Services WA 2013 Excellence in Care Awards, in the new projects/programs category. The DEEP virtual information centre has been recognised as the most comprehensive web based resource in the world for dementia design. The site has had over 10,000 visits since its launch last year.

CEO – Rhonda Parker

AAWA's public lectures were formalised into a series covering the calendar year, with the title being The Care and The Cure – Public Lecture Series 2013. The aim of this was to increase the conversation and understanding of dementia across the community. This lecture series saw a number of local, national and international dementia experts presenting a wide range of dementia related topics including younger onset dementia, diagnosis and assessment, latest medical research, risk reduction and care innovations. The response from health and care professionals and the public was consistent throughout the year and beyond our expectations, filling the lecture theatre to capacity on most evenings.

Together with other Alzheimer's Australia organisations, we launched Your Brain Matters, the first dementia risk reduction program in the world. We expanded student placements thanks to funding support from Health Workforce Australia. Over 1,400 placement days were delivered to students of Occupational Therapy, Physiotherapy, Nursing, Psychology and Medicine.

The Client Services department equally saw an increase in the quantity and quality of the services we provide. Their work is in many ways our flagship, working with our most important stakeholders, those living with dementia.

Funding for the Dementia Behaviour Management Advisory Service was renewed and expanded to include the Acute and Primary Health Care sectors. This represents an important step in a new interface with hospitals and General Practitioners.

There has been an increased demand for our Carer Support Groups and Volunteering Program over the past 12 months. We are currently reviewing these with a view to increasing the number and range of services provided. We are currently piloting an innovative approach to the Carer Support Groups which will provide an educational component to the therapeutic groups.

The Mary Chester Centre in Shenton Park has undergone a refurbishment with the help of a band of volunteers from Coca Cola Amatil Perth. We were excited to commence construction on the new Hawthorn House in Albany. Hawthorn House was successful in its application to be re-registered for all 10 Eden principles, and the Mary

Chester Centre was successful in its application to be registered for all 10 principles where it previously only registered for five.

We were successful in every audit of our care services. These audits were under the new federal common standards and involved a higher level of rigour and scrutiny of the quality of our services and systems. Our Perth, Mandurah and York services have now been audited under this new regime.

AAWA received funding for the Younger Onset Dementia Key Worker project as part of the national project. We received 37 referrals in the first 5 weeks after the recruitment of the whole team. At this rate, demand will outstrip our capacity to respond early in the funding period.

We continued to develop working relationships with the Culturally and Linguistically Diverse (CALD) community to support them to respond to dementia in their communities. We established a Memorandum of Understanding with the Chung Wah Community and Aged Care Association and are working toward similar arrangements with other CALD community groups.

We have been successful under the State Government Social Innovations grants scheme for a Dementia Friendly Communities project, the first state in Australia to do so. This project will commence early in 2014 and will work in partnership with local governments and other community groups.

Perhaps one of the most significant indicators of the progress of our work is a new partnership with the State Government. AAWA has been engaged by the WA Health Department to work with the community care sector and health professionals to deliver a capacity building project to enable care providers to better respond to the needs of people living with dementia. This project is a great challenge and a big responsibility. It will require a whole of business response. It will be formally launched with the State Government in the near future. This is an exciting challenge and we are grateful to the Department of Health for the opportunity to deliver this program of work. As a dementia specialist organisation, our primary aim is not to build an empire of services, but to provide exemplar service models and build capacity into service providers, individuals and families to strengthen their ability to respond to dementia.

None of this large program of activity could be achieved without a committed, professional team working together every step of the way. We now have 127 FTE and 218 staff on the team. I'd like to acknowledge each and every one of my staff, right across the state, in all of their varied roles, for their work, efforts and commitment to the organisation and, more importantly, to the interests of all those living with dementia. In particular, I'd like to thank my executive team of Jason, Lynne and Danielle, assisted by Jennifer, for their exceptional commitment to this organisation, for their support of me as I undertake my role, and of their unswerving dedication to improving the lives of all those in WA living with dementia.

I'd also like to acknowledge and thank our band of volunteers who enable us to deliver more. They also energise us with their willing spirits and in their sharing of our vision.

One of the most humbling aspects of the role is in signing letters of thanks to our donors. While we have a number of corporate and philanthropic sponsors, our financial supporters are more likely ordinary people with extraordinary generosity and compassion for our work. For the donations large or small, I thank you. The generosity of our donors and supporters is not only a great enabler of our work, but also a great encouragement.

I'd also like to thank the Board for their commitment, in particular the Chairman Craig Maserai, and Deputy Chair Jenny Rogers. Both are ever only a phone call away and have extended to me wonderful support as I have settled into my role, support for which I am grateful.

Finally, I know I speak on behalf of all of my team in acknowledging our greatest source of inspiration, all those living with dementia who access our services. I am continually inspired by the courage and resilience of our clients, and by their humanity. They are the reason we exist, and we strive to achieve more and better, and provide the support and care they so richly deserve. And we will continue to do so.

MEDICAL REPORT

AFTER READING A PLETHORA OF PAPERS ABOUT THE LIKELY CAUSES OF ALZHEIMER'S DISEASE (AD), IT'S EASY TO BE REMINDED OF THE FABLE OF THE THREE WISE MEN WHO, BLIND-FOLDED, FEEL DIFFERENT PARTS OF AN ELEPHANT AND COME TO VERY DIFFERENT CONCLUSIONS ABOUT WHAT THIS STRANGE CREATURE MIGHT BE. DESPITE A WEALTH OF RESEARCH, WE CANNOT YET CLAIM TO SEE THE WHOLE ELEPHANT.



CAUSES

There remains a significant focus on a 'junk protein' (beta amyloid) as a cause of AD or at least a contributor. However, other new contributors continue to emerge, many of which interact with beta amyloid. In mice, low levels of copper have been found to collect in the blood brain barrier and impair the ability of beta amyloid to be transported out of the brain attached to a carrier protein known as LRP1. The blood brain barrier becomes more leaky, allowing more copper into the brain and this causes both production of more beta amyloid and more clumping together into plaques.

Beta amyloid has also been shown to cause support cells in the brain (glial cells) to release a neurotransmitter known as glutamate. When released outside of the nerve junctions it causes abnormal signalling in neurons leading to loss of synapses. Many other interactions between beta amyloid and important cellular functions have been described.

The brain has a specialised system of glial cells that form tubes around blood vessels. This 'glymphatic' system allows fluid and unwanted proteins like beta amyloid out of the brain and this 'flushing' effect is significantly increased by sleep. Several studies support a link between poor sleep quality and increased risk of beta amyloid accumulation seen on brain PET scans. Additionally, people at greater risk of AD because of a particular gene (ApoE4) were less likely to develop AD if they had better sleep. They also had less neurofibrillary tangles at autopsy.

Inflammation and the immune system are also clearly involved. A molecule involved in destroying foreign proteins known as C1q has been found to concentrate at synapses as the brain ages, possibly impairing function and causing loss of synapses. The earliest accumulation begins in the memory parts of the brain. Another immune regulation molecule CD33 can be found on glial cells and is associated with increased levels of beta amyloid and plaques. There are other similar discoveries, some with a direct role in pruning back synapses. Extensive genetic studies have found 21 gene abnormalities thus far associated

with AD that may provide further clues to causes and possible targets for therapies. Many of them involve functioning of the immune system.

Another protein damaged in AD is tau. It is associated with the tangles seen in AD. It's thought that this damaged protein is ejected from damaged neurons which then induce changes in nearby neurons. This may explain why the pathological changes in AD typically start in the memory part of the brain and then spread in a very stereotyped way to adjacent areas. In mice, giving an antibody to bind tau prevented the changes spreading.

The Australian Imaging, Biomarkers, and Lifestyle (AIBL) study has shown that it takes approximately 13 years for amyloid accumulation seen on brain PET scans before people have memory complaints; and another 4 years before this is advanced enough to diagnose dementia. However, many people will have a scan showing amyloid but have completely normal cognition. Not everyone with amyloid will progress to have dementia. Some people even get better! And, some people will have dementia without any amyloid plaques. These facts and the long lag time between amyloid accumulation and cognitive change suggest that amyloid alone may not be sufficient cause for loss of neurons. It has been suggested by many authors that amyloid may represent a marker for another pathogenic process and may be part of the brain's attempt to recover from chronic injury.

The brain must defend itself over a lifetime from the effects of ageing as well as an accumulation of multiple and complex insults. It's unlikely there will be 'a cause' of AD, with 'a cure'. However, a better understanding of how it develops and progresses may still result in therapies during different phases of the disease that could slow or stabilise progression, or improve functioning.

TESTS

Using brain PET scans to detect changes in brain functioning as well as accumulation of beta amyloid has been invaluable in contributing to our understanding of AD. The aim is to detect change early as well as detect changes resulting from therapies.

We still need longitudinal studies to be sure about the time frame and risks of progression to dementia, as current information is based on relatively short studies spanning only a few years. Only then will we be able to give proper advice about likelihoods of developing AD and interpreting the effects of therapies.

New brain PET scans to detect damaged tau protein have recently been developed. Tau correlates much better with the degree of cognitive impairment and severity of disease. This may give new insights into when dementia is likely to develop. Early tau imaging studies in people show good correlation with disease stage and MRI and amyloid scans. These scans may also be helpful for confirming other dementias involving tau, including some types of frontotemporal dementia.

Special 'diffusion' MRI brain scans looking at subtle changes in the white matter in the memory part of the brain are better predictors of memory decline than looking at shrinkage of grey matter in both normal and mildly cognitively impaired people. The ability to perform these scans however is still only available in research settings.

Cerebrospinal fluid levels of DNA from mitochondria (which are the 'powerhouses' of cells) have been shown to fall approximately 10 years before changes in memory occur and may be a good early marker of AD. This is consistent with other findings that suggest problems with mitochondria in neurons in AD contribute to their poor functioning.

THERAPIES

Several trials of antibody therapies aimed at clearing beta amyloid have shown no or very minimal improvement in people. Several new trials are underway on the basis that giving therapy early before there is a significant burden of amyloid in the brain is more likely to be effective – assuming that beta amyloid does indeed play a pathogenic role. One trial is occurring in a Colombian population with a very high rate of a gene mutation that results in young onset dementia. Others are occurring in cognitively normal people with increased risk of AD due to having two copies of the ApoE4 gene or because they have other biomarkers to suggest increased risk.

Other novel therapies are being tried. A 'neurosteroid' called allpregnanolone stimulates neuron formation, improves

cognition and reduces pathological changes in mice. Human trials are underway. Resistance to insulin has been demonstrated in neurons in people with AD without diabetes. Human trials of intranasal insulin are underway to look at its safety and efficacy (Study of Nasal Insulin to Fight Forgetfulness 'SNIFF').

There was significant media attention recently regarding a 'breakthrough' – mice affected by a neurodegenerative disease caused by a tiny protein particle (a prion) were given a compound which halted the usual response of an affected neuron – that is, to shut down normal protein synthesis and cell mechanisms and die. It is suggested that this could work with junk proteins in AD and Parkinson's disease. The compound however resulted in significant side effects in the mice. The underlying mechanisms however give researchers new avenues to explore but this is still a long, long way from a treatment.

RISK REDUCTION

Reducing the risk of dementia with sensible lifestyle measures continues to accumulate evidence. People participating in the AIBL study were assessed according to the extent to which their diet matched the ideal of the Mediterranean diet. Those who adhered to the diet most closely were much less likely to develop cognitive impairment, even during the relatively short 18 month follow up period. The mechanisms are thought to be due to the diet's benefits in protection from vascular disease with better cholesterol, blood sugar and blood pressure, as well as antioxidants.

Further evidence of the benefits of exercise have been shown in a study of nearly 20,000 people who had a fitness assessment in mid life (av. age 49.8) and were followed over 25 years. The fittest people had a 36% less chance of developing dementia than the least fit. There was a strong correlation between the degree of fitness and risk reduction.

Another trial of twice weekly resistance training in older women with mild cognitive impairment for 6 months showed improvement in cognition compared with those doing aerobic exercise. These findings are encouraging in that individuals can take steps to reduce their risk.

There is much evidence to suggest that life-long cognitive activity reduces risk of cognitive decline. It's uncertain how much cognitive training or brain games benefit normal people other than to make one better at performing those training tasks. The benefits don't generalise to other areas. In people with cognitive impairment, there is little benefit but no harm according to a recent Cochrane database review.

Further studies are being done to assess the benefits of different kinds of cognitive training in different groups – those with early memory problems for example. Continuing to engage in cognitively stimulating, interesting and enjoyable tasks that improve quality of life should be encouraged. Slavishly doing computer based games if one doesn't enjoy them should not.

Elephants have excellent memories – they walk long distances, are sociable, curious and playful animals and they eat a very healthy diet. We should follow their example.

Dr Sean Maher –
Honorary Medical
Director



CLIENT SERVICES

DURING THE PAST 12 MONTHS THE CLIENT SERVICES AREA OF ALZHEIMER'S AUSTRALIA WA HAS COMMENCED A NEW SERVICE AND EXPANDED ANOTHER. THIS HAS ALSO BEEN A YEAR WHERE SERVICE MODELS HAVE BEEN REVIEWED AND SOME HAVE BEEN ADAPTED BASED ON THE CHANGING NEEDS OF OUR CLIENTS.

"I ENJOY COMING TO WORK KNOWING THAT THE WORK WE DO SUPPORTS PEOPLE THROUGH THEIR JOURNEY WITH DEMENTIA."



Left: General Manager, Client Services
Lynne Hedley

Right: DBMAS Team – Genevieve Major,
Philip Hur, Pam Nichols, Jennifer Edgecombe,
Christina Atkins and Dee Harding

YOUNGER ONSET DEMENTIA PROGRAM (FOR THOSE AGED UNDER 65 YEARS)

The national Younger Onset Dementia program commenced in July 2013 and uses a key worker model of service delivery to act as a single point of contact for people with dementia, their carers and family members. The aim of this program is to assist them to navigate services, not just within the health care system but also across systems such as the legal, educational, social services, financial resources, recreation and transportation. It delivers individualised, person-centred support by linking people with younger onset dementia to appropriate services and building capacity in the existing services.

ACUTE AND PRIMARY HEALTH CARE PROGRAM

Late in 2012 we were provided with funding through the Department of Health and Ageing to expand the Dementia Behaviour Management Advisory Service (DBMAS) into the acute and primary health care sectors. This program supports the sectors through staff education, assessments, practical resources and equipment to improve the care for the person with dementia who has associated behaviours which impact on their care in these environments.

THE EDEN ALTERNATIVE

Our two community based day centres, Hawthorn House in Albany and the Mary Chester Centre located in Perth have successfully achieved full Eden Alternative registration with all 10 Eden Principles making Alzheimer's Australia WA the only organisation with community based day centres in Australasia to achieve this. To achieve these Principles the teams within these centres reviewed their culture and transformed the environment to enable them to improve quality of life for all.



Left to right: Pam Nichols, Rhonda Parker and Lynne Hedley proudly holding their Bethanie Medallion Awards. As part of Bethanie's 10 year anniversary of the Medallion, Rhonda and Lynne were among 10 people recognised for their contributions to aged care and Pam was a finalist in the 'Bethanie Professional Medallion' category

QUALITY REVIEW AUDITS

Our offices in Mandurah, Kalgoorlie, York and Perth have all successfully achieved the expected outcomes of the Community Care Common Standards within the last 12 months. This means that we can be confident that our processes and systems are working well and that our clients are receiving high quality services.

COUNSELLING SERVICE

The Counselling Service is meeting its contractual outputs. The extra demand for support has required us to draw on the expertise of other staff working outside the program and with supervision our students who are currently on placement.

NATIONAL DEMENTIA HELPLINE 1800 100 500

Over 3,000 calls to our National Dementia Helpline were received during the 2012-13 financial year. Increased promotion of the service has resulted in a 15.8% increase in the number of calls from the previous year.



Dorothy Ebel leads the choir at the Annual Tea Dance at Government House



Linda Grenade, our Multicultural Communities Project Officer training volunteers at Chung Wah Community & Aged Care

NATIONAL DEMENTIA HELPLINE CALLS

JULY	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN
248	266	253	223	313	199	146	279	211	301	325	296

CARER SUPPORT GROUPS

AAWA currently hosts 16 Carer Support Groups across the Perth metropolitan area and look for opportunities to assist other organisations to set up similar programs. The model for these groups has recently been reviewed with the aim of developing a sustainable format including procedural guidelines for the program. The revised format will be delivered as a 5 module program and run over 11 months. Upon completion of the 5 modules, carers would be invited to attend a social support group for ongoing support.

RAISING AWARENESS OF DEMENTIA WITHIN CALD COMMUNITIES

It has been noted that 1 in 8 people living with dementia in Australia do not speak English at home. To support people with dementia from a culturally and linguistically diverse background (CaLD) and their carers, AAWA has linked Chung Wah Community & Aged Care and the Italian communities to raise awareness of dementia. This support has included providing information sessions, radio interviews and magazine articles.

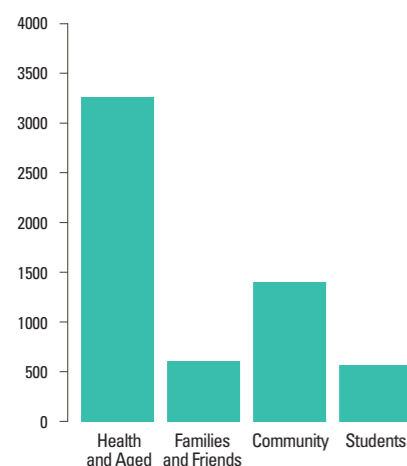
OUR REACH INTO REGIONAL AREAS OF WA

In addition to our presence through our regional offices in Albany, Kalgoorlie and York we have also visited carers of people with dementia and service providers across the Kimberley, Pilbara, Great Southern, Wheatbelt and South West regions of the state. We have been invited by the WA Country Health Service to partner with them in the past two years to visit remote Indigenous communities in the Kimberley. This partnership and access to these remote areas has allowed us to assist people to remain living within their own communities for longer. With the installation of audio-visual equipment in our Perth and regional offices, we will be able to further enhance this reach.

EDUCATION, RESEARCH AND CONSULTANCY

THIS YEAR HAS BEEN A VERY BUSY PERIOD FOR THE EDUCATION, RESEARCH AND CONSULTANCY DEPARTMENT WITH A GROWING DEMAND FOR DEMENTIA EDUCATION AND SKILLS TRAINING, DEVELOPING OUR INCREASING ROLE IN CAPACITY BUILDING AND THE DEVELOPMENT OF NEW AND INNOVATIVE PROJECTS.

Dementia Education and Training Participants



A growing recognition by aged care providers for skilled staff to provide person centred care to people living with dementia as well as a growing need of family and friends to understand dementia, and how to support their loved one, is driving the demand for high quality training and education.

Our community awareness program to educate, inform and reduce the stigma of dementia received a boost this year with Health Workforce Australia supporting the refurbishment and improvements to our community Memory Van. The memory van has been at a wide range of events across WA during the year and in its new colours certainly provided an eye catching presence.

During the year AAWA was successful in receiving registration for the Certificate IV in Dementia Practice. This industry leading qualification will help equip health and aged care staff to provide person centred care and develop specialist dementia practitioners of the future. The course will be offered through two intakes a year in March and September. fightdementia.org.au/western-australia/certificate-iv-in-dementia-practice.aspx

DEMENTIA ENABLING ENVIRONMENTS PROJECT (DEEP)

The end of the year saw the successful completion of funding for the Dementia Enabling Environments Project (DEEP).



The unmissable Alzheimer's Australia WA Memory Van

This important 2 year research to practice project, funded through the National Quality Dementia Care Initiative, brought together dementia experts from around Australia to develop practical evidence based interventions to influence the design of physical environments for people living with dementia. The DEEP virtual information centre was launched during the year and has been recognised as the most comprehensive web based resource in the world for dementia design. The site has had over 10,000 visits since its launch last year. The DEEP project also launched a specialist training programme for families teaching them how to create an enabling home environment and published a very practical carer's guide on home adaptations. AAWA will continue to provide expert advice and information on enabling environments through the DEEP team. enablingenvironments.com.au



Jackie Lewis, our Art Therapy Consultant with a client as part of the AAWA Artistic Adventures program



Ita Buttrose AO OBE, 2013 Australian of the Year, speaking for AAWA as part of the Public Lecture Series 2013

PUBLIC LECTURES AND WORKSHOPS

The range of training and education provided by AAWA increased over the year with over 350 courses and workshops delivered to families, health care professionals and members of the community across WA. The range of workshops expanded with 25 different courses and workshops presented.

This year AAWA has brought a number of local and international leading dementia experts to speak in Perth through The Care & The Cure public lecture series. The series features local, national and international speakers presenting a wide range of dementia related topics including younger onset dementia, diagnosis and assessment, latest medical research, risk reduction and care innovations. The lectures have been very well supported by the community and professionals with an average 150 plus people attending each lecture. In May AAWA partnered with Aged Care Services WA to deliver a high quality aged care conference with a key focus on dementia. AAWA sponsored leading American dementia innovator Dr Al Power to visit Perth where he spent time with AAWA staff exploring new service ideas and contributed a thought provoking involvement in the conference, challenging existing dementia paradigms and exploding some of the 'myths' of dementia care.

YOUR BRAIN MATTERS

With a growing base of evidence on the effectiveness of risk reduction strategies to prevent dementia, Alzheimer's Australia was successful in receiving Commonwealth Government funding to develop a national risk reduction strategy. To promote this message and inform the general community of lifestyle changes that can reduce the risk of developing dementia Alzheimer's Australia launched the Your Brain Matters (YBM) program. Through national advertising, YBM workshops and a range of initiatives AAWA is helping the community learn how to reduce the risk of dementia and lead a healthier life. yourbrainmatters.org.au

STUDENT PLACEMENTS

Recognising the increasing need for dementia trained and skilled health practitioners AAWA has been working with Curtin University, University of WA and Notre Dame University to promote high quality dementia care and to offer specialist workshops and placement opportunities for medical and allied health students.

"I'M PASSIONATE ABOUT CREATING A SOCIETY THAT VALUES, SUPPORTS AND ENABLES PEOPLE LIVING WITH DEMENTIA."

Left: Education Team – Caroline Iannello, Sheila Lapping, Veronica Keltie, Lyn Jude and Helena Cromb

Right: General Manager, Education, Research and Consultancy – Jason Burton



CORPORATE SERVICES

THE CORPORATE SERVICES AREA OF ALZHEIMER'S AUSTRALIA WA CONSISTS OF FINANCE, HUMAN RESOURCES AND POLICY, MARKETING AND COMMUNICATION, FUNDRAISING, ADMINISTRATION, INFORMATION TECHNOLOGY AND ASSETS MANAGEMENT.

"I FEEL SO PROUD MANAGING SUCH A DEDICATED AND PASSIONATE TEAM."

These teams are made up of professional, committed people who undertake the responsibilities of their roles to support and facilitate the activities, programs and grant funded areas of the business.

In January 2013, Danielle Wrench commenced as the Corporate Services General Manager. This appointment saw an internal review, particularly within the Finance and Human Resources and Policy departments, to ensure the growth and changing requirements of the business were being supported and to allow for ongoing growth.

VOLUNTEERS

Without the commitment, support and assistance of our dedicated volunteers, the work we do would not be possible. This year our volunteers provided Alzheimer's Australia WA with 5393 hours, which at \$23.23 per hour equates to \$125,279. We acknowledge and thank our volunteers who participated in a wide variety of activities from working in our respite centres, assisting with the Memory Van, Street Appeal, Memory Walk, Tea Dance and Art Projects through to undertaking administration and office support tasks.

ANNUAL TEA DANCE

Our 18th annual Tea Dance was held at Government House Ballroom on 29 August 2012, with His Excellency Mr Malcolm McCusker AC CVO QC and Mrs Tonya McCusker, in attendance. This iconic event was a success with 293 guests attending. Clients from the Mary Chester Centre were joined by guests from aged care, residential and nursing facilities across Perth. Special thanks go to Woodside Petroleum Ltd for graciously donating their time as chaperones for the guests and to the students at Churchlands Senior High School for providing the catering.

MEMBERSHIP

AAWA membership increased from 3139 to 3436 this year, an increase of 297 members. Our member's supported us by donating, volunteering or attending events. We recognise and thank our members for the contributions they gave.

DONATIONS

A total of 2,664 donations were received this year, totalling \$569,734. Our heartfelt thanks go out to each and every person who donated. Every donation makes a difference.

ALZHEIMER'S AUSTRALIA WA FUNDRAISING EVENTS AND ACTIVITIES

AAWA undertook a number of fundraising activities throughout the year, raising valuable funds. Without the hard work of our fundraising team, the support of our sponsors, members, community and volunteers, such activities would not be possible.

Bring it to the Table (formally Dine4Dementia)

Following on from AAWA's successful launch of Dine4Dementia in June 2012, this initiative was recognised by the Alzheimer's Australia federation and became a national fundraising event in 2013, complete with a name change to Bring it to the Table.

This year's event raised \$35,000. Thanks go to all the Bring it to the Table hosts and guests for their generous support, with special thanks made to Josh Catalano, Daniela and Stefania, 96FM's breakfast crew, channel Ten and Taste Budds Cooking Studio.



Clients moving to the band at the Annual Tea Dance 2012 at Government House

Left: General Manager, Corporate Services – Danielle Wrench

Right: Finance Team – Patsy Orr, Bing Xu, Susan Brummell and Lisa Sun

Memory Walk

The AAWA Memory Walk, held in October 2012, was a great success with over 700 participants raising in excess of \$81,000.

Golf day

Our annual golf day was held on 23 August 2012. Sponsored by our principal sponsor BGC Construction this event raised \$18,281. B&S Printing, Heyder & Shears Catering and Saracen Estates Margaret River also sponsored parts of the event. Special thanks go to Glen Jakovich for his support and to Meadow Springs Golf and Country Club who hosted the event for us.

Community Fundraisers and events

This year saw a number of Community events, held on behalf of AAWA.

Special thanks go to:

- Morley Family Practice who held a Gala Charity Ball in November 2012 which raised \$15,000
- Sir Cliff Richard Movement of Australia: Reelin' and A-Rockin' Charity Dance Night in February 2013 which raised \$20,000
- Fun for a Cause who held a Moments in Time – Masquerade formal Ball in May 2013 which raised \$7,978

A number of Community Fundraiser also took place this year, with thanks going to all the participants.

- HBF Run for a Reason, held in May 2013 which raised \$28,000
- City to Surf, held in August 2013 which raised \$20,000
- Suncorp Freo Fun Run, held November 2012 which raised \$5,000
- Business Chicks breakfast, held in February 2013 which raised \$4,354

COMMUNICATIONS AND MARKETING

The Communications and Marketing team were kept busy, undertaking the numerous and varied tasks and responsibilities of the department. Internal and external communications, public and media relations, campaigns, community engagement, online management, social media, publications, literature and the ongoing brand awareness rollout of Alzheimer's Australia rebranding of October 2011 formed the core of their roles.



2012 London Olympic gymnast Emily Little, Australian Olympic Kayaker Jesse Phillips, 2008 Beijing Olympic gymnast Olivia Vivian with Daniela Pirone and Stefania Muscara from My Kitchen Rules at the 2012 Memory Walk

We acknowledge and thank ExxonMobil Australia for their generous support, having sponsored the AAWA Dementia Awareness Week Raising Campaign. This campaign was very successful in raising awareness across Western Australia.

HUMAN RESOURCES AND POLICY

There was a strong focus on Human Resources and Policy this year, with the introduction of a Human Resources and Policy Manager in February 2013 and a review of the Quality Framework, systems, processes and procedures of AAWA.

FINANCE

The Finance Team welcomed a new Finance Team Leader in January 2013, who undertook a review of the systems, processes and procedures of the department.



Masterchef Australia's Josh Catalano cooked up a storm at the media launch of Bring it to the Table

The implementation of updated systems and processes has streamlined functions of this department, ensuring the organisational needs are being met now and into the future.



DEMENTIA AWARENESS WEEK

16 TO 21 SEPTEMBER 2013

BASED AROUND WORLD ALZHEIMER'S DAY, DEMENTIA AWARENESS WEEK IS AN ANNUAL ACTIVITY FOR ALZHEIMER'S AUSTRALIA WA.

With a generous donation from ExxonMobil Australia for the second year in a row, we were able to establish Dementia Awareness Week 2013 as an iconic event with a range of fundraising and awareness activities around Perth.

This year we celebrated by hosting events from Monday, 16 September to Saturday 21 September 2013. Our very recognisable memory van made an appearance at Perth's leading shopping centres where staff from Education and volunteers handed out information, merchandise and answered general queries. An AAWA video was on display throughout the month on the big screen at the Perth Cultural Centre amphitheatre in Northbridge with an audience of approximately 80,000 people each day. The video showcased key messages from our CSA Television Commercial and the *Is It Dementia?* video resource library created by Alzheimer's Australia SA.



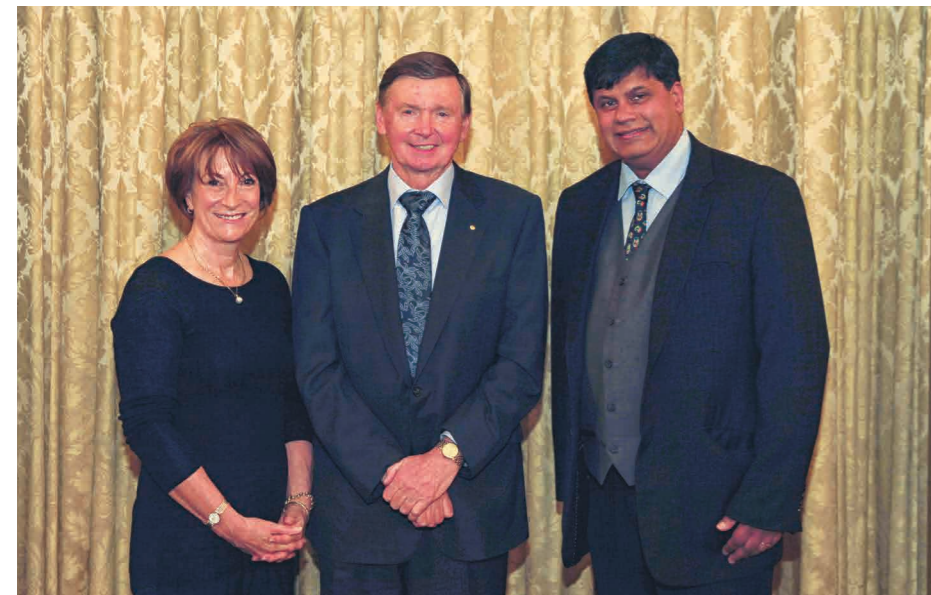
Synergy Spirit presenting a Cheque for \$585.60 they raised through Dress Down for Dementia

We ran a series of advertisements highlighting 'There is a difference between forgetfulness and Alzheimer's' that were advertised through newspapers, social media tools, news websites and displayed publically at bus and train station Adshels throughout Perth capturing the attention of a wide audience.

The Fundraising team launched a new initiative this year by encouraging government departments and the corporate world to use 'Casual Friday' at work as a simple way to make a difference to those living with dementia. Dress Down for Dementia Day was held on Friday, 20 September in conjunction with the City Street Appeal as part of Dementia Awareness Week 2013.

Dementia Awareness Week 2013 concluded with the celebration of World Alzheimer's Day on Saturday, 21 September. Alzheimer's Australia WA and The McCusker Alzheimer's Research Foundation held a joint event on 'The Cause, Prevention and Care of Dementia' at Government House. The event was opened by His Excellency Malcolm McCusker AC CVO QC, Governor of Western Australia. The event included presentations from Professor Ralph Martins AO, Rhonda Parker and a very moving speech on a consumer's perspective from Bronte and Glenda Parkins.

Our Dementia Awareness Week 2013 bus and train station Adshel posters



AAWA CEO, Rhonda Parker with His Excellency Malcolm McCusker AC CVO QC, Governor of Western Australia and Prof Ralph Martins AO, Director of Research – McCusker Alzheimer's Research Foundation for 'The Cause, Prevention and Care of Dementia' at Government House



Photographer: David Baylis – Community Newspaper Group

AAWA staff member Nicole Rudaizky and a volunteer strike a pose in front of the Memory Van outside a shopping centre

EVENT HIGHLIGHTS

A GLIMPSE OF SOME OF THE AMAZING EVENTS WE HELD TO RAISE PUBLIC AWARENESS OF DEMENTIA.



Sir Cliff Richard Movement of Australia: Reelin' and A-Rockin' Charity Dance Night



Memory Walk 2012



Hawthorn House Opening, Albany



Valentines Day



Bring it to the Table – media launch



Public Lecture Series 2013

CORPORATE SUPPORTERS



Above: AAWA Membership & Donations Officer, Lily Burridge and volunteer Dirk Berkhout raising funds at Claremont Quarter as part of our 2012 Street Appeal

ALZHEIMER'S AUSTRALIA WA GRATEFULLY ACKNOWLEDGES THESE ORGANISATIONS, GROUPS AND TRUSTS WHO HAVE SHOWN THEIR SUPPORT BY CONTRIBUTING GOODS, SERVICES OR DONATIONS TO THE VALUE OF \$500 OR OVER.

AECOM
Albany Golf Club Inc
Apache Energy Ltd
B & S Printing
BHP Billiton
BJ & JB Chapman Pty Ltd
Brightwater Care Group
Budget Forklifts
Business Chicks
Cake Decorators Association of WA
Cash Converters
Catalano Seafoods
Charities Aid Foundation Australia
Churchlands Senior High School
Counrty Women's Association of WA – Kalamunda Branch
Dejo Nominees Pty Ltd
Denmark Cottage Crafts Inc.
Department of the Premier and Cabinet
Dizzy Fingers Group
Drysdale Family Trust
EmbroidMe
ExxonMobil Australia
Greengib Foundation

Guildford Uniting Church – Wesley Chapel
HBF Angels Perth
IFE Elevators Pty Ltd
Interior Building Solutions
InvoCare Ltd
IPM Operation & Maintenance
Kwinana Pty Ltd
JBWere Charitable Endowment Fund
Kone Elevators Pty Ltd
Lasermail
Leeuwin Estate
Linties Singing Group
Lions Club of Albany South Coast Inc.
Lions Club of Armadale Kelmscott Inc.
Macquarie Group Services Australia Pty Ltd
Marsh Pty Ltd
MIM Bulk Cartage
Morley Family Practice – Sports Medicine and Acupuncture
Perth Convention and Exhibition Centre
Plantagenet Lodge
Qantas Perth Help Fund
Quality Of Life Foundation
Regent Motors
Riverside Gardens Estate
Sandalwood Arts & Crafts Group
Sir Cliff Richard Movement of Australia
Snappers
South Coast Embroiderers Group
St Barbara Ltd
Taoist Tai Chi Society of Australia
The Ragdoll Foundation Pty Ltd
Town of Kwinana
United Way
Victoria Park Carlisle Bowling Club
Wonteco Pty Ltd
Woodside Petroleum LTD

OUR VOLUNTEERS

Mr Sean Barrett
Mrs Manuela Bastera
Mrs Patricia Bell
Mrs Jeryl E Bennett
Mr Dirk Berkhout
Mr Evan R Biggs
Mr John Blaney-Murphy
Miss Kathryn Bradshaw
Mr Peter Brown
Mrs Mariangela Browner
Ms Val Caldwell
Mrs Susan Carter
Mrs Emma Cearn
Mrs Grace Chow
Mrs Heather Cooper
Mr James G Coutts
Miss Ashleigh Cerie
Mrs Cecily Crolepy
Mrs Hazel Cusick
Miss Courtney Dalton
Mrs Wendy Ding
Ms Peta Douglas
Mr Pat Dowd
Mr Sam Dowle
Rev John Edwards
Mrs Margaret Edwards
Ms Kelly Edmondson
Ms Katharine Elliott
Mrs Jean Freind
Mr & Mrs Graham & Shirley Garnett
Mr Noel L George
Mrs Judith Gibbs
Mr Jim Gibson
Ms Patricia Gignoli
Mr Russell Goodlet
Mr Rob Gordon
Mrs Georgena (Gene) Griffiths
Mrs Jayne Haartsen
Ms Paula Hanson
Ms Linda R Harloe
Mrs Molly Harris
Mr & Mrs Malcolm & Rosemary Hay
Miss Jan Healey
Mrs Glynis Herbert
Mr Gerald Hewitt
Mrs Margaret Hodgson
Mrs Jenny Horsley
Mrs Joy Houghton

Mrs Christine Howe
Mr Siew Huan
Mr Jim Hunt
Mrs Dianne Jacoby
Mrs Susan M Jarvis
Mrs Margaret Johnson
Mrs Bhavni Khimasia
Mrs Marcela Kuperinen
Mr Geoff Lane
Mrs Lynn Le Roux
Mrs Joan E Leeder
Ms Margaret Lesham
Ms Sue Lily
Ms Anna Lutero
Ms Anni Macbeth
Mrs Pauline Marwick
Miss Marli McGuckin
Mrs Dorothy Miles
Mr Norman W Mooney
Miss Alison Morris
Miss Luagh P Mulligan
Ms Kathleen Muntz
Mrs Heather Nelson
Mr Ian Nice
Ms Jill O'Connor
Mrs Elizabeth Papasergio
Mr John Parker
Mrs Janice Peake
Ms Barbara Postle
Mr Harry Raynes
Mrs Joan Raynes
Mrs Mary Roberts
Mrs Glenice Robson
Mrs Dawn Rose
Ms Sue Saraceni
Mrs Bronwen Schofield
Mrs Emma Schrader
Mr Maurice Searle
Mr Yogesh Shah

Mrs Faye Sheridan
Mrs Stella Silbert
Mrs Jean Skipper
Miss Julia Smith
Mrs Mollie Smith
Mr Roger Smith
Mr & Mrs Bill & Eunice Stephenson
Mrs Robyn Stone
Mrs Sharon Strachan
Ms Therese Strong
Ms Maggie M Tetley
Mr David Thackrah
Mrs & Mr Elizabeth Thackrah
Mrs Sylvia Timmins
Mrs & Mr Lilah A Waterfield
Ms Lynda Watson
Ms Marie Watts
Mrs Norma West
Mrs Nancy Williamson
Mr & Mrs Graham & Marion Wilson
Dr & Dr Michael and Valerie Wishart
Mrs Margaret Wood
Dr Ann Zubrick

“WORKING WITH OUR VOLUNTEERS HAS BEEN AND AMAZING AND HUMBLING EXPERIENCE.”



Volunteer Coordinator – Trish Miller

DIRECTORS’ REPORT
FOR THE YEAR ENDED 30 JUNE 2013

Your directors present this report to the members of Alzheimer’s Australia WA Ltd for the year ended 30 June 2013.

Directors	Date Appointed	Board		Executive	
		A	B	A	B
Mr Craig Masarei	Nov 2002	7	9	10	10
Mrs Jenny Rogers	Nov 2004	9	9	10	9
Mr Nick Di Lorenzo	Nov 2002	6	9	10	7
Dr Sean Maher	Sept 2010	7	9	N/A	N/A
Ms Terry Phillips	Nov 2002	3	3	N/A	N/A
Mr Frank J Schaper	Nov 2002	2	2	3	3
Mrs Jenny Watt	Nov 2005	7	9	N/A	N/A
Ms Tonia Zeeman	May 2006	1	1	N/A	N/A
Mr Tony Ramshaw	Nov 2006	9	9	N/A	N/A
Mr Andrew Hogan	Nov 2010	7	9	N/A	N/A
Ms Amanda Mitchell-Lewis	Nov 2010	4	9	N/A	N/A
Mr Arnold Stroobach	Nov 2012	4	6	N/A	N/A
Dr Michael Preece	Nov 2012	6	6	N/A	N/A
Mr Brian Roche	Feb 2013	3	5	N/A	N/A
Ms Rhonda Parker	Sept 2012	9	9	7	7

- A Number of meetings attended
- B Number of meetings held during the time the Director held office during the year

Details of directors’ qualifications, experience and special responsibilities are contained in the table below.

Directors	Qualifications	Experience	Special Responsibilities
Mr Craig Masarei	Bachelor of Jurisprudence, Bachelor of Laws (Hon)	Legal and economic	Chairman
Mrs Jenny Rogers		Financial Advisor/ Equities, Superannuation, Managed Funds	Deputy Chair
Mr Nick Di Lorenzo	Bachelor of Business Administration (Accounting)	Accounting and Taxation	Treasurer
Dr Sean Maher	Bachelor of Medicine Bachelor of Surgery Fellow of the Royal Australasian College of Physicians		Honorary Medical
Mr Frank J Schaper (Retired September 2012)	Bachelor of Arts (Education) Diploma Recreation Management	Organisation Management	CEO/Company Secretary
Ms Terry Phillips (Retired November 2012)	Bachelor of Social Work Mental Health Nurse Bachelor of Arts		Counselling, Crisis Intervention, Mediation, Social Work in an industrial setting
Mrs Jenny Watt	General Nursing and Midwifery Certificates	Carer	

Directors	Qualifications	Experience	Special Responsibilities
Ms Amanda Mitchell-Lewis	Bachelor of Business – MGT Advanced Diploma – Financial Planning Holds licence as Financial Planner	25 years experience Financial Services Industry Managerial training, Practice	
Ms Tonia Zeeman (Retired September 2012)	Bachelor of Science (Nursing) Diploma of Science (Nursing) Diploma Mental Health (Nursing)	Health Care/Services Management	
Mr Tony Ramshaw	Bachelor of Electrical Engineering Diploma of Management & maintenance, Carer		Business, Project & change management, Operations
Mr Andrew Hogan	BA (Psych) Flinders University BTh Flinders University	Minister of Religion Carer	
Mr Arnold Stroobach	Masters in Business Administration (MBA) Masters in Medical Informatics (M.Sc)	Management	
Dr Michael Preece	Advance Certificate of Aircraft Maintenance Engineering Diploma of Nursing Bachelor of Nursing Post Graduate Diploma of Health Science (Risk Management) Graduate Diploma of Business (Human Resource Management) Master of Business Management Administration Doctor of Business Management Administration	Health Care and Management	
Mr Brian Roche	Bachelor of Business Masters of Management	Finance and Management	
Ms Rhonda Parker (Appointed October 2012)	Diploma of Teaching	Government and not for profit sector leadership. Strategic planning and policy development	Chief Executive Officer /Company Secretary

COMPANY SECRETARY
Mr Frank J Schaper had been the company secretary since 2001 and retired September 2012. Rhonda Parker was appointed to the position in October 2012.

PRINCIPAL ACTIVITIES
The company’s principal activities during the year were;

- To provide representation and support while advancing the interest of individuals with dementia and their carers at a personal, community and political level.

There were no significant changes in the nature of the company’s activities during the year.

DIRECTORS' REPORT FOR THE YEAR ENDED 30 JUNE 2013

OPERATING RESULT AND REVIEW OF OPERATIONS

The operating result for the year was a net loss of \$2,446,474 (2012: Loss \$239,350). The company is exempt from income tax.

A detailed review of operations can be found in the annual report which accompanies this financial report.

DIVIDENDS

The company's constitution precludes the payment of dividends.

SIGNIFICANT CHANGES IN STATE OF AFFAIRS

In the opinion of the directors, there were no significant changes in the state of affairs of the company that occurred during the financial year under review not otherwise disclosed in this report.

AFTER BALANCE DATE EVENTS

There has not arisen in the interval between the end of the financial year and the date of the report any item, transaction or event of a material and unusual nature that in the opinion of the directors is likely to substantially affect the operations of the company, the results of those operations, or the company's state of affairs in future financial years.

FUTURE DEVELOPMENTS

The company will continue to carry on the principal activities noted above. There are no likely developments in the activities in future years which will affect the results and therefore require disclosure.

AUDITOR'S INDEPENDENCE

The auditor's declaration of independence appears on Page 4 and forms part of the Directors' report for the year ended 30 June 2013.

INDEMNIFICATION AND INSURANCE OF OFFICERS AND AUDITORS

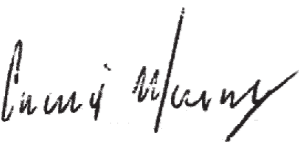
Since the end of the previous financial year the company has paid insurance premiums of \$5,918 in respect of directors' and officers' liability and legal expenses' insurance contracts for current and former directors and officers, including senior executives of the company. The insurance premiums relate to:

- Costs and expenses incurred by the relevant officers in defending proceedings whether civil or criminal and whatever the outcome
- Other liabilities that may arise from their position, with the exception of conduct involving wilful breach of duty or improper use of information or position to gain a personal advantage.

The company has not otherwise indemnified or agreed to indemnify an officer or auditor of the company against a liability incurred as such an officer or auditor.

Signed in accordance with a resolution of the directors made pursuant to s.298(2) of the Corporations Act 2001.

On behalf of the directors:



DIRECTOR



DIRECTOR

PERTH
DATED THIS 31ST DAY OF OCTOBER 2013.

AUDITS INDEPENDENCE DECLARATION



Certified Practising Accountants

PARTNERS

Anthony Macri FCPA
Domenic Macri CPA
Connie De Felice CA

AUDITOR'S INDEPENDENCE DECLARATION UNDER SECTION 307C OF THE CORPORATIONS ACT 2001

TO THE DIRECTORS OF ALZHEIMER'S AUSTRALIA WA LTD

I declare that, to the best of my knowledge and belief, during the year ended 30 June 2013, there have been:

- (i) no contraventions of the auditor independence requirements as set out in the Corporations Act 2001 in relation to the audit; and
- (ii) no contraventions of any applicable code of professional conduct in relation to the audit.



MACRI PARTNERS
CERTIFIED PRACTISING ACCOUNTANTS
SUITE 2, 137 BURSWOOD ROAD
BURSWOOD WA 6100



A MACRI
PARTNER

PERTH
DATED THIS 31ST DAY OF OCTOBER 2013.



DISCUSSION & ANALYSIS OF THE FINANCIAL STATEMENTS

INFORMATION ON THE COMPANY'S CONCISE FINANCIAL REPORT FOR THE YEAR ENDED 30 JUNE 2013

The financial statements and disclosures in the Concise Financial Report have been derived from the 2013 Financial Report of Alzheimer's Australia WA Ltd and is an extract from the full financial report. A copy of the full financial report and auditor's report will be sent to any member, free of charge, upon request.

The information about the concise financial report is provided to assist members in understanding this report and is based on the company's consolidated financial statements and has been derived from the full 2013 Financial Report of Alzheimer's Australia WA Ltd.

STATEMENT OF COMPREHENSIVE INCOME

The loss for the year is \$2,446,474. This is primarily due to the write-off of the Curtin Building Project expenditure as a result of the Board of Directors' decision not to pursue with the project. The increase in Other Comprehensive Income for the year is mainly attributed to the net change in fair value of the investment portfolio for the year of \$184,423 and the revaluation increment in land by \$8,616,168. Compared to last year, total revenue increased by \$865,432 (8.9%) whilst expenditure increased by \$3,072,556 (30.9%).

STATEMENT OF FINANCIAL POSITION

The Total Assets of the company increased to \$15,844,503. This increase is attributable to the following:

- An increase in the value of Land resulting from revaluation
- A significant increase in cash and cash equivalents (\$2,560,665) including Term Deposit - Leave accruals fund (\$837,447) and Term Deposit - Rockingham Branch fund (\$115,514).

Total liabilities increased by \$890,609 (19.2%) due to unexpended grants.

Statement of Cash Flows

Cash Flows from operating activities have increased during the year by \$958,274 due to increase in grants received compared to last year. Cash Flows from investing activities for the year are negative due to the ongoing investment in the Curtin building project and purchase of plant and equipment. Cash Flows from financing activities have decreased by \$141,188 for the year due to finance vehicle lease payments.

There has been a total increase in cash and cash equivalents for the year of \$1,016,290.

STATEMENT OF CHANGES IN EQUITY

The equity of the company has increased by \$6,354,117. This is largely due to the revaluation of land.

STATEMENT OF COMPREHENSIVE INCOME FOR THE YEAR ENDED 30 JUNE 2013

	NOTE	2013 \$	2012 \$
Revenue	2 (a)	10,570,481	9,705,049
Employee benefits expense		(7,331,842)	(6,904,356)
Depreciation and amortisation expense	2 (c)	(167,698)	(143,492)
Finance costs	2 (c)	(57,724)	(20,004)
Other expenses	2 (c)	(5,459,691)	(2,876,547)
		(13,016,955)	(9,944,399)
Profit/(Loss) for the year		(2,446,474)	(239,350)
Other Comprehensive Income:			
Net change in fair value of financial assets	2 (b)	184,423	(88,061)
Revaluation of Land		8,616,168	—
Other comprehensive income for the year		8,800,591	(88,061)
Total comprehensive income for the year		6,354,117	(327,411)

STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2013

	2013 \$	2012 \$
Assets		
Current Assets		
Cash and cash equivalents	2,560,665	1,544,375
Trade and other receivables	194,931	523,462
Inventories	28,680	21,786
Prepayments	14,172	1,000
Total Current Assets	2,798,449	2,090,623
Non Current Assets		
Financial Assets	1,416,863	1,190,736
Property, Plant and Equipment	11,564,144	5,237,108
Intangible Assets	65,048	81,310
Total Non Current Assets	13,046,055	6,509,154
TOTAL ASSETS	15,844,503	8,599,777
Liabilities		
Current Liabilities		
Trade and other payables	2,518,839	1,656,765
Borrowings	149,547	58,863
Provisions	609,268	704,502
Total Current Liabilities	3,277,654	2,420,130
Non Current Liabilities		
Borrowings	2,000,000	2,000,000
Provisions	251,044	217,958
Total Non Current Liabilities	2,251,044	2,217,958
TOTAL LIABILITIES	5,528,697	4,638,088
NET ASSETS	10,315,806	3,961,689
Members' Funds		
Revaluation Surplus	9,285,610	669,442
Retained Earnings	1,030,196	3,292,247
TOTAL MEMBERS' FUNDS	10,315,806	3,961,689

STATEMENT OF RECOGNISED INCOME & EXPENDITURE FOR THE YEAR ENDED 30 JUNE 2013

	RETAINED EARNINGS \$	REVALUATION SURPLUS \$	TOTAL \$
Balance at 30 June 2011	3,619,658	669,442	4,289,100
Profit/(Loss) attributable to operating activities of the company	(239,350)	—	(239,350)
Other Comprehensive Income	(88,061)	—	(88,061)
Balance at 30 June 2012	3,292,247	669,442	3,961,689
Profit attributable to operating activities of the company	(2,446,474)	—	(2,446,474)
Other Comprehensive Income	184,423	8,616,168	8,800,591
Balance at 30 June 2013	1,030,196	9,285,610	10,315,806

STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30 JUNE 2013

	2013 \$	2012 \$
CASH FLOWS FROM OPERATING ACTIVITIES		
Receipts from:		
– Donations and gifts	607,120	705,506
– Government grants	10,535,502	9,212,117
– Interest received	97,707	66,151
– Dividends received	94,471	57,544
– Fees & Charges	765,573	635,667
– Other Receipts	360,576	20,346
GST Paid	(718,031)	(405,329)
Payments to suppliers and employees	(10,284,787)	(9,829,864)
Borrowing Costs	(57,724)	(20,004)
NET CASH FLOWS FROM OPERATING ACTIVITIES	1,400,407	442,133
CASH FLOWS FROM INVESTING ACTIVITIES		
Proceeds from sale of property, plant and equipment	131,203	18,430
Purchase of property, plant and equipment	(374,132)	(1,232,954)
Net movement from sale/purchase of financial assets	—	(42,351)
NET CASH FLOWS USED IN INVESTING ACTIVITIES	(242,929)	(1,256,875)
CASH FLOWS FROM FINANCING ACTIVITIES		
Proceeds from borrowings	—	2,000,000
Finance lease payments	(141,188)	(25,541)
NET CASH FLOWS USED IN FINANCING ACTIVITIES	(141,188)	1,974,459
Net increase/(decrease) in cash and cash equivalents	1,016,290	1,159,716
Cash and cash equivalents at the beginning of the financial year	1,544,375	384,659
CASH AND CASH EQUIVALENTS AT THE END OF THE FINANCIAL YEAR	2,560,665	1,544,375

NOTES TO CONCISE FINANCIAL REPORT FOR THE YEAR ENDED 30 JUNE 2013

NOTE 1: BASIS OF PREPARATION OF THE CONCISE FINANCIAL REPORT

The concise financial report is an extract of the full financial report for the year ended 30 June 2013. The concise financial report has been prepared in accordance with Australian Accounting Standard AASB 1039: Concise Financial Reports and the Corporations Act 2001.

The financial statements, specific disclosures and other information included in the concise financial report are derived from, and are consistent with, the full financial report of Alzheimer's Australia WA Ltd. The concise financial report cannot be expected to provide as detailed an understanding of the financial performance, financial position and financing and investing activities of Alzheimer's Australia WA Ltd as the full financial report. A copy of the full financial report and auditor's report will be sent to any member, free of charge, upon request.

The financial report of Alzheimer's Australia WA Ltd complies with all Australian equivalents to International Financial Reporting Standards (AIFRS) in their entirety. The presentation currency used in this concise financial report is Australian dollars.

	2013 \$	2012 \$
Note 2: REVENUE, OTHER INCOME AND EXPENSES		
(a) Revenue		
Sale of goods	7,760	22,999
Rendering of services	406,390	553,855
Government grants	8,506,408	8,553,913
Donations and gifts	599,016	528,900
Legacies	8,104	109,741
Revenue from Rockingham Branch	9,847	18,338
(b) Other income		
Investment income		
– Interest	97,707	72,343
– Dividends	94,471	57,545
Net change in fair value of financial assets	184,423	(88,061)
(c) Expenses		
Finance costs	57,724	20,004
Depreciation	167,698	143,492
Operating lease payments	39,229	52,969
Auditors' remuneration	20,000	38,400
Write off Curtin Project	2,606,213	—

NOTES TO CONCISE FINANCIAL REPORT FOR THE YEAR ENDED 30 JUNE 2013

NOTE 3: SEGMENT REPORTING

The company operates predominately in one business and geographical segment being provision of community services in Western Australia.

NOTE 4: EVENTS AFTER THE REPORTING PERIOD

On 1 July 2013, the Rockingham Branch of Alzheimer’s Australia WA, separated to become an independent entity. From 1 July 2013, the Rockingham Branch of Alzheimer’s Australia WA became Rockingham and Districts Alzheimer’s (RADA).

NOTE 5: EXTRACT – QUALIFIED AUDITOR’S OPINION ON THE FULL FINANCIAL REPORT

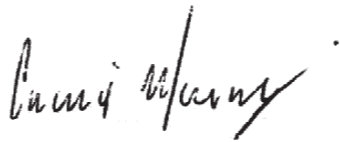
“Donations and gifts are a significant source of revenue for Alzheimer’s Australia WA Ltd. Alzheimer’s Australia WA Ltd has determined that it is impracticable to establish control over donations and gifts prior to entry into its financial records. Accordingly, as the evidence available to us regarding revenue from this source was limited, our audit procedures with respect to donations and gifts have to be restricted to the amounts recorded in the financial records. We therefore are unable to express an opinion whether donations and gifts obtained by Alzheimer’s Australia WA Ltd are complete.”

DIRECTORS’ DECLARATION

The Directors of the Alzheimer’s Australia WA Ltd declare that the accompanying concise financial report of Alzheimer’s Australia WA Ltd for the financial year ended 30 June 2013:

- a. complies with Accounting Standard AASB 1039: Concise Financial Reports; and
- b. is an extract from the full financial report for the year ended 30 June 2013 and has been derived from and is consistent with the full financial report of Alzheimer’s Australia WA Ltd.

This declaration is made in accordance with a resolution of the Board of Directors.



DIRECTOR



DIRECTOR

PERTH
DATED THIS 31ST DAY OF OCTOBER 2013.

INDEPENDENT AUDITOR’S REPORT



PARTNERS
Anthony Macri FCPA
Domenic Macri CPA
Connie De Felice CA

INDEPENDENT AUDITOR’S REPORT TO: THE MEMBERS OF ALZHEIMER’S AUSTRALIA WA LTD

REPORT ON THE CONCISE FINANCIAL REPORT

The accompanying concise financial report of Alzheimer’s Australia WA Ltd comprises the Statement of Financial Position as at 30 June 2013, the Statement of Comprehensive Income, Statement of Changes in Equity and Statement of Cash Flows for the year then ended and related notes, derived from the audited financial report of Alzheimer’s Australia WA Ltd for the year ended 30 June 2013, as well as the discussion and analysis. The concise financial report does not contain all the disclosures required by Australian Accounting Standards.

DIRECTORS’ RESPONSIBILITY FOR THE CONCISE FINANCIAL REPORT

The directors are responsible for the preparation and fair presentation of the concise financial report in accordance with Accounting Standard AASB 1039: Concise Financial Reports (including Australian Accounting Interpretations), statutory and other requirements. This responsibility includes establishing and maintaining internal controls relevant to the preparation of the concise financial report; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

AUDITOR’S RESPONSIBILITY

Our responsibility is to express an opinion on the concise financial report based on our audit procedures. We have conducted an independent audit, in accordance with Australian Auditing Standards, of the full financial report of Alzheimer’s Australia WA Ltd for the year ended 30 June 2013. Our auditor’s report on the financial report for the year was signed on 5 November 2013 and was subject to a modification. Australian Auditing Standards require that we comply with the relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report for the year is free from material misstatement.

Our procedures in respect of the concise financial report included testing that the information in the concise financial report is derived from, and is consistent with the financial report for the year, and examination on a test basis, of evidence supporting the amounts, discussion, and analysis, and other disclosures which were not directly derived from the financial report for the year. These procedures have been undertaken to form an opinion whether, in all material respects, the concise financial report complies with Accounting Standard AASB 1039: Concise Financial Reports and whether the discussion and analysis complies with the requirements laid down in AASB 1039.

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

INDEPENDENT AUDITOR’S REPORT (continued)

INDEPENDENCE

In conducting our audit, we have complied with the independence requirements of the Australian professional accounting bodies and the Corporations Act 2001. We confirm that the independence declaration required by the Corporations Act 2001, provided to the directors of Alzheimer’s Australia WA Ltd, would be in the same terms if provided to the directors as at the date of this auditor’s report.

AUDITOR’S OPINION

In our opinion, the concise financial report, including the discussion and analysis of Alzheimer’s Australia WA Ltd for the year ended 30 June 2013 complies with Accounting Standard AASB 1039: Concise Financial Reports.

MODIFICATION TO THE AUDITOR’S REPORT ON THE FINANCIAL REPORT FOR THE YEAR

The following paragraph is copied from our report on the financial report for the year. The modification to the opinion in that report does not apply to our opinion on the Concise Financial Report for the reason stated above in our Auditor’s Opinion.

BASIS FOR QUALIFIED AUDITOR’S OPINION:

Donations and gifts are a significant source of revenue for Alzheimer’s Australia WA Ltd. Alzheimer’s Australia WA Ltd has determined that it is impracticable to establish control over donations and gifts prior to entry into its financial records. Accordingly, as the evidence available to us regarding revenue from this source was limited, our audit procedures with respect to donations and gifts have to be restricted to the amounts recorded in the financial records. We therefore are unable to express an opinion whether donations and gifts obtained by Alzheimer’s Australia WA Ltd are complete.

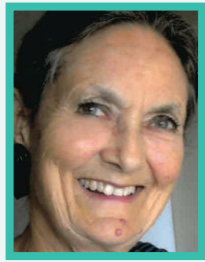
**MACRI PARTNERS
CERTIFIED PRACTISING ACCOUNTANTS
SUITE 2, 137 BURSWOOD RD
BURSWOOD WA 6100**

**PERTH
DATED THIS 31ST DAY OF OCTOBER 2013.**

**A MACRI
PARTNER**



TESTIMONIALS



“Very helpful, informative and friendly...”

I was desperate for information on how to cope as a carer for someone with dementia. Alzheimer’s Australia WA has been very helpful, informative and friendly. Their services are important to those with dementia, carers and leading the general public on how to accept and interact with those who live with dementia.

Lynn Blenkinsop
Perth, Western Australia



“I can’t imagine our journey without the help of Alzheimer’s Australia WA...”

Just go for it, I don’t know what holds people back from accessing help. There will be breakthroughs, support, and changes and choices. I can’t imagine the journey without the help of Alzheimer’s WA. The best thing you can do is get in touch with them.

Jayne Surry
Perth, Western Australia



“AAWA is such a wonderful support...”

I cannot speak highly enough of the services and support provided by Alzheimer’s Australia WA to those who contact them. It is such a big help to know we have someone to ask for help and advice when we need it. We have been connected to AAWA for about six years and they have been a wonderful support.

Dorothy Bennie
Perth, Western Australia



“Alzheimer’s Australia WA means a lot to me...”

When mum was diagnosed, we didn’t know much about dementia. Things happened and we just didn’t know how to handle situations. Alzheimer’s Australia WA is an organisation that understands us and is a tremendous support for mum.

Stefania Muscara
Former My Kitchen Rules Contestant
Dianella, Western Australia



“Amazing organisation with such a worthy cause...”

When my grandmother was diagnosed with dementia, I came across Alzheimer’s Australia WA. They helped us cope as a family and provided us with a wealth of resources and information that everyone in this situation needs.

Josh Catalano
Former Masterchef Australia Contestant
Doubleview, Western Australia



“Alzheimer’s Australia WA is the biggest help...”

Since Bob was diagnosed with dementia, Alzheimer’s Australia WA has been the biggest help for us. They have numerous resources, brochures, helpful trained staff, support groups and an easy to use website with lots of hints and tips for helping out in situations.

Bob and Val Jenner
Perth, Western Australia

