

Arthritis and musculoskeletal conditions

Arthritis is a term used to describe a broad group of musculoskeletal conditions affecting the muscles, the bones and the joints. There are more than 100 different arthritis conditions in which inflammation and degeneration of the joints causes chronic pain, stiffness, swelling, disability and may reduce life expectancy. The most commonly occurring conditions are osteoarthritis, rheumatoid arthritis, ankylosing spondylitis and gout.

Osteoporosis is a different musculoskeletal condition in which reduced bone density and strength can result in increased risk of fracture. Osteoporosis may severely impact upon the quality of life, through pain, disability, deformity, mobility impairment and loss of independence, and may even reduce life expectancy. Common fracture sites include the hip, wrist and spine ¹. Half of all women and one-third of men over 60 in Australia will have a fracture due to osteoporosis.

Arthritis, osteoporosis and related musculoskeletal conditions are the most common chronic conditions in Australia, affecting an estimated 6.3 million men, women and children ². Although they are not often direct causes of death, these conditions significantly contribute to pain, deformity, mobility restriction and functional impairment, as well as affecting mental health and quality of life. In July 2002, arthritis and musculoskeletal conditions were declared a National Health Priority Area in recognition of the major health and economic burden these conditions place on the Australian community.

Prevention, early diagnosis and treatment, and appropriate long term management can reduce the effects of arthritis, osteoporosis and related musculoskeletal conditions.

¹ *Arthritis and osteoporosis in Australia 2008. AIHW. December 2008, p.13*

² *2007-08 National health survey; summary of results report by the ABS, May 2009*

Annual Report 2010



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Patron, Committee of Management & Personnel

PATRON His Excellency the Honourable Peter Underwood AC
Governor of Tasmania

COMMITTEE OF MANAGEMENT

President Mr Rhys Jones
Treasurer Mr Brian Claridge
Vice President Ald Eva Ruzicka
Directors Mr Paul Lawler
Mrs Karen Frost
Mrs Julie Milnes
Dr Helen Cooley
Ms Rose Hetherington
Ms Alison Park
Dr Ann Halliday (resigned April 2010)

FINANCE & AUDIT SUB-COMMITTEE

Mr Brian Claridge (Chair)
Mrs Karen Frost
Mrs Jackie Slyp

PERSONNEL

Mrs Jackie Slyp (CEO)
Mrs Maureen Lightfoot (Office Manager)
Mrs Tracey Parry (Community Educator)
Mrs Heather Donaldson (Community Educator)
Ms Rachel Turner (Community Educator)
Mrs Christine Etherington (Community Fundraiser)

Arthritis Tasmania

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Our purpose

We are here to provide services and programs that make a positive difference to the lives of people affected by arthritis, osteoporosis and related musculoskeletal conditions.

To achieve this, we will:

- Provide high quality, up-to-date and relevant information in a variety of accessible formats.
- Offer a range of healthy lifestyle and self-management programs.
- Provide education and training programs for GPs, health professionals and volunteer peer educators to enhance their capacity to prevent and reduce the impact of arthritis and osteoporosis in the community.
- Advocate for increased awareness of arthritis, osteoporosis and related conditions, and to maintain and improve the quality of life for people affected through the availability of quality programs and services.

Our services are available to:

- People affected by arthritis, osteoporosis and related conditions.
- Their families and carers.
- Medical practitioners and health professionals.

The values that guide us

- We believe that people feel better when they have control of their own lives. All our services are geared towards helping people self-manage their own conditions through simple, practical and enjoyable steps.
- We understand the serious impact that arthritis and related conditions can have on people and offer our services with compassion and respect for each person's unique experience and situation.
- Making the decision to seek assistance can be difficult. We offer a friendly voice and face to people who contact us.
- We value and appreciate the knowledge and willing help offered by our volunteers, who are crucial to our work.
- As a Tasmanian organisation, we understand the unique mix of rural and urban communities that people with arthritis, osteoporosis and related conditions live within. We keep a close eye on the availability of services statewide and work with local communities as much as possible to provide services, train other providers or locate alternatives close by.
- We aim to make our services and programs accessible and easily available to everyone who needs them. Information sheets and booklets are free, and services and programs are offered at affordable prices.
- Healthy relationships and partnerships underpin our work. We are committed to working productively with others to bring about the best possible services for people with arthritis and related conditions, their families and carers, and health professionals and practitioners.
- There are many ways that the lives of people affected by arthritis and related conditions can be improved and there is growing evidence to support this. We offer programs that meet current professional standards and are of high quality.
- We aim to provide services according to our financial capabilities ensuring optimum utilisation of available funds.

I am pleased to present to members Arthritis Tasmania's annual report and financial statements for the period July 2009 to June 2010.

Arthritis Tasmania is now more than 34 years old and I believe doing more now for people with arthritis than ever before whilst remaining true to the purpose of the Foundation. Our services to people with arthritis have significantly increased in volume and reach, and are much improved in relevance and quality.

However, what hasn't changed over the past three decades is our seemingly perpetual hand-to-mouth existence. The ongoing viability of Arthritis Tasmania continues to be reliant upon the receipt of fundraising, bequests, donations, sponsorships and grants funding.

Despite our financial concerns, there have been many positive developments with Arthritis Tasmania introducing the Ease of Use product and packaging endorsement concept; leading the development of a national bone and joint minimum dataset to provide a national framework for data collection; developing the only short course in management of musculoskeletal conditions in the country; and partnering with non-RTO Arthritis Foundations to deliver nationally accredited training services for delivering health care information on musculoskeletal conditions. Research Australia's Public Opinion Poll (2008) showed that Australians are more worried about developing arthritis than any other disease – yet arthritis receives less funding than other National Health Priorities such as heart disease, cancer, diabetes or mental illness. Nearly 1 in 4 Tasmanians has arthritis and we know that the risk of contracting arthritis increases with age to nearly 1 in 2 by the age of 55. In 2002 the Australian Government recognised arthritis as a serious health issue by making it a National Health Priority. It is the most prevalent of all National Health Priorities. You are more likely to contract arthritis than heart disease, cancer, asthma, diabetes or mental illness and it is the single biggest cause of disability in Australia. In addition, nearly half of all Australians living with cancer, diabetes and heart disease are also living with arthritis. Yet, arthritis continues to be a blind spot for policy makers and funders. Arthritis Tasmania recently defined its strategic directions for the next three years 2010 to 2013, identifying the following four main areas where we need to focus our attention and efforts – identify and profile; relationships; organizational improvement; and services and programs.

The facts and figures of the services provided by Arthritis Tasmania appear elsewhere in this report however I wish to highlight the enormous commitment of the people in this organization. Every one of the staff Arthritis Tasmania employs gives far more time, energy, imagination and commitment to their tasks than we are entitled to expect. I express profound gratitude and respect for their professionalism and generosity. Arthritis Tasmania's dedicated volunteers are without doubt the backbone and lifeblood of the organization, not only providing a warm and friendly face to people who contact us, but fulfilling a range of essential tasks and making our continued existence possible.

Rhys Jones
President



Services and Programs

Information Services Program

Providing high quality, up-to-date and relevant information in a range of accessible formats to people affected by arthritis, osteoporosis and related musculoskeletal conditions remained the major priority for Arthritis Tasmania in 2009/2010.

Telephone Information Service

The Telephone Information Service operates from 9.00am to 5.00pm on a Monday to Friday, and is effectively the 'doorway' to all Arthritis Tasmania's services and programs. The service is supported by a dedicated team of 13 trained volunteers who respond to enquiries, and who between them provide approximately 1,900 volunteer hours per year. All volunteers have successfully completed the national competency ARTHRITAS01 *Deliver health care information on musculoskeletal conditions*. Just over 1,770 calls were responded to during 2009/2010, a 1% increase on the previous year. Calls were received from every postcode area within Tasmania with the exception of a couple of isolated and remote areas (eg Macquarie Island). The majority of referrals to the service (60%) continue to be generated as a result of self-referrals and/or referral by friend/family.

46% of callers requested information on specific types of arthritis, followed by requests for information on general management of arthritis (22%).

Community Education Services

During the reporting period Arthritis Tasmania's Community Educators delivered a total of 210 information sessions across all areas of the State, and these were attended by just over 4,794 people.

Topics for the sessions focussed primarily on increasing community knowledge and understanding of arthritis, osteoporosis and related musculoskeletal conditions. However, some sessions focussed on specific musculoskeletal conditions (eg osteoporosis, rheumatoid arthritis, gout) whilst others focussed on issues such as pain management, falls prevention and joint replacement. Arthritis Tasmania also delivered sessions as part of Seniors Week and Rural Health Week.

'Smoother Movers' – Warm Water Exercise Program

During the reporting year Arthritis Tasmania's 'Smoother Movers' warm water exercise program expanded from 8 sessions to 12 weekly sessions, enabling an estimated 200 people to enjoy the benefits of warm water exercise each week through this program. The program is entirely dependent upon a dedicated team of 26 trained volunteers who coordinate, lead and support the sessions at the hydrotherapy pools at New Town and Clarence. The program continues to be extremely popular and highly valued by participants. Arthritis Tasmania's *Smoother Movers* warm water exercise program is now available under license through the Wynyard Hydrotherapy Centre on the North West Coast. The Centre has a 15 metre long hydrotherapy pool, ranging in depth from 1.0-1.8 metres and is heated to a warm 33-34 degrees. Four Arthritis Tasmania trained instructors offer two sessions each week.

Tai Chi for Arthritis Classes

Tai Chi with its gentle, flowing movements performed at a relaxed and slow pace, has been shown to improve balance, posture and mobility, promote flexibility of joints, and provides an overall sense of wellbeing. Arthritis Tasmania has a dedicated team of 7 trained volunteers who lead *Tai Chi for Arthritis* classes in Wynyard, Burnie, Rosny, Huonville and Bridgewater.

Bone Density Testing in Rural Communities

Arthritis Tasmania continued to offer combined osteoporosis education and bone density testing sessions in rural and remote communities during the reporting period, testing a total of 316 people in 19 sessions. The service is offered in consultation with rural GPs and/or local health service providers and has been extremely well received in all areas. Communities visited included Oatlands, Ouse, St Helens, Bicheno, Nubeena, Campbell Town and Scottsdale. Services were also provided as part of a 6 week 'Chat and Check' Project in the

Huon Valley with sessions conducted in Cygnet, Dover, Geeveston and Huonville. Arthritis Tasmania gratefully acknowledges the support of Professor Graeme Jones and the Menzies Research Institute for the long term loan of the Sahara portable bone density testing machine.

Camp Footloose (NSW) & Camp Limber-Up (VIC)

Arthritis Tasmania supported two young adults with JIA to attend Camp Footloose at Lake Burrendong in NSW in October 2009 and three Tasmanian families to attend Camp Limber-Up, held at Phillip Island on the Mornington Peninsula in March 2010. Camp Footloose, run by Arthritis NSW, is a fun environment for older children and teenagers with arthritis to learn about arthritis and ways of coping with it, meet other teenagers with arthritis, increase confidence and self-esteem, and gain control over their arthritis and their lives. Camp Limber-Up, run by Arthritis Victoria, is for families with young children with arthritis. Arthritis Tasmania gratefully acknowledges the funding support received from the Myer Community Fund and the Australian Government (through Arthritis Australia) to support this program.

Training Services Program

Arthritis Tasmania, a Registered Training Organisation (RTO), specialises in training for delivery of information about musculoskeletal conditions and physical activity groups for people with low or compromised activity levels, developing a short course in *Management of Musculoskeletal Conditions* (69835) for this purpose. The Course consists of three units. The first two units are mandatory to gaining competency in the Course and one of the two 'elective' units completes the Course. For participants wishing to lead activity groups, competency in all three units must be achieved.

However, for participants who wish to undertake training for giving of information in the community, the first unit may be undertaken and achieved as a separate entity.

The units of competency are as follows:-

1. **ARTHRTAS01** *Deliver health care information on musculoskeletal conditions*
2. **SRFCFP001A** *Deliver an approved community fitness program to promote wellbeing* (this is a unit of competency from the SRF04 Fitness Industry package)
3. **ARTHRTAS02A** *Lead a chair based exercise class for people with musculoskeletal conditions*
4. **ARTHRTAS03A** *Lead a warm water exercise class for people with musculoskeletal conditions*

Units 3 and 4 are the elective units and one of these is chosen according to the activity type required by participants or their organisation.

Arthritis Tasmania's systems and procedures for quality training services were upgraded during the year with a new version of iQual software installed. The new iQual version is more closely aligned to the new standards for the Australian Quality Training Framework (AQTF) under which Arthritis Tasmania delivers its accredited training services.

RTO Training Services

A total of 35 people achieved competency during the year in the unit ARTHRITAS01 *'Deliver healthcare information on musculoskeletal conditions'*. Arthritis Tasmania directly trained 6 participants, whilst Arthritis NT trained 21; Arthritis SA trained 6; and Arthritis QLD trained 2. Arthritis Tasmania, as the Registered Training Organisation (RTO) provided quality assured training and assessment services for the interstate training services.

A further 4 new warm water exercise leaders successfully completed the full Course in Management of Musculoskeletal Conditions.

Tai Chi for Arthritis Leader Training

Tai Chi for Arthritis Part 1	3	(36 participants)
Tai Chi for Arthritis Part 2	1	(7 participants)
Tai Chi for Arthritis Update	1	(11 participants)
Seated Tai Chi	1	(19 participants)

1 in 5
Australians
suffer from
arthritis



Recognising Volunteers

Volunteers are the lifeblood of Arthritis Tasmania providing support in areas such as leading tai chi and warm water exercise programs; responding to enquiries received on the telephone information line; assisting with administrative tasks such as mailing and reception services; providing governance and strategic direction on the Committee of Management; ensuring our website is up-to-date; and our library resources catalogued and borrowings recorded. All volunteers are provided with training in the nationally accredited unit ARTHRITAS01 Deliver health care information on musculoskeletal conditions.

Arthritis Tasmania would simply be unable to deliver the breadth of services it does without the capable and loyal support of our volunteers. In 2009-10, the volunteer effort in support of Arthritis Tasmania amounted to over 4,100 hours. We would like to thank the following volunteers for their commitment and dedication during the past twelve months:-

Telephone Information Service

Ingrid Alomes, Shirley Crisp, Elaine Eyers, Kath Ferguson, Rob McQuilkin, Elaine Owen, Alison Park, Lieni Poulton, Carolyn Price, Lisa Rimes, Jennifer Schwarz, Julie Taylor, Margaret Yoong

Warm Water Exercise

COORDINATOR Elaine Owen
 LEADERS Pauline Armstrong, Catherine Ayesha, Trish Bridge, Helen Cole, Jean Dale, Marg Eagling, Katie Ennis, Barbara Gardam, Denise Geeves, Lucy Jones, Jessica Kelly, Amanda McAully, Win McGuinness, Val Michalowski, Wayne Oldham, Alison Park, Lieni Poulton, Margaret Stafford, Margaret Stokman, Julie Taylor
 ASSISTANTS Wendy Balmer, Shirley Brown, Mary Davison, Sylvia Parr, Liz Pyett

Special Tasks Maria Grist (Website), Jill Macarthur (Library)

Tai Chi for Arthritis

LEADERS Elton Cleary, Maxine Ebdon, Heather Gayfer, Sue Miles, Sylvia Parr, Carolyn Price, Maureen Worthen

Self Help / Friendship Groups

CONVENORS Edie Cure (Smithton), Bev Gardner (Wynyard), Beryl Marshall (Burnie), Helene Sankey (Devonport), Margaret Stagg (Deloraine).

Community Events / Community Speakers

Denise Hoggan, Jan Fleming, Rob McQuilkin, Carolyn Price, Megan Ayliffe



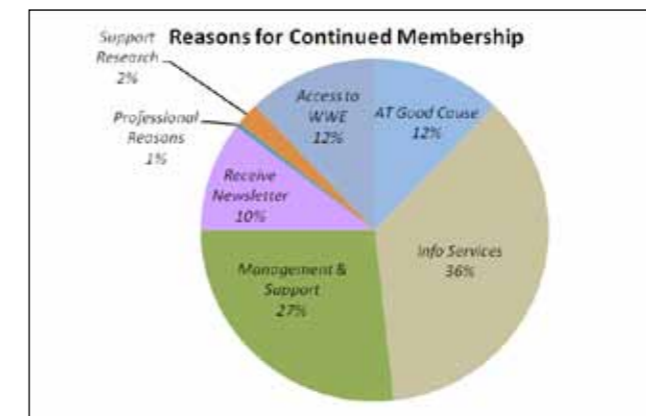
One of Arthritis Tasmania's greatest assets is its membership of just over 1,000. Revenue from membership subscriptions remained stable at just over \$11,500 for the year ended 30 June 2010. In December 2009 members were surveyed to seek feedback on our performance and to inform Arthritis Tasmania's strategic planning.

The majority of respondents (40%) reported that their length of membership of Arthritis Tasmania was between 1-5 years. A further 25% reported a membership length of between 6-10 years. A variety of reasons were given as the reason for continuing membership, with the majority of respondents (36%) indicating they maintained their membership in order to receive information and to keep up-to-date with new and emerging treatment options. A further 10% of respondents cited the information received via newsletter as being an important factor in continuing membership. Comments received included "hope to learn more about my condition", "like to keep in touch to learn more as information is introduced", "newsletter interesting, info useful" and "to receive information on what's new". Other reasons provided for continuing membership included being able to access warm water classes, and to support Arthritis Tasmania. Typical comments relating to support for the organization included: "a worthwhile cause", "you will be there when I need you", "I enjoy the services of the association and the good company, also my fee helps our work", "my way of supporting the organisation after receiving help in past", and "I feel I should support the only lobby group available for people with arthritis".

Members were asked to indicate their degree of satisfaction (or otherwise) with a range of Arthritis Tasmania's services, including the response to their queries; access to the organization (that is, are we easy to find); the quality of information provided; and satisfaction with their interactions with Arthritis Tasmania in general.

HONORARY LIFE MEMBERS

Prof Peter Brooks	Betty Davies
Eileen Digney	Dr Hilton Francis
Bev Gardner	Irene Lewis
Bruce McCormick	Robert McKenzie
Benjamin Marris	Beryl Marshall
Margaret Moy	Kath Reid
Helene Sankey	Margaret Stagg
Dr Francis Townsend	Dorothy Young



Maintaining our Memberships



Fundraising and Support

Arthritis Tasmania is grateful to the many individuals, corporations, clubs and organizations whose generous support enables the Foundation to lead the fight against arthritis — the most common cause of disability in Australia. Arthritis Tasmania is committed to being efficient, effective and responsible stewards of your contributions.

Community Fundraising Activities

Earlier this year Arthritis Tasmania was approached by Sam Randall a year 10 student at Rose Bay High School with a fundraising idea after seeing the challenges faced by family members affected by arthritis. "I saw how badly my grandmother suffers with arthritis. I just wanted to help out in any way I could" said Sam. By shaving his long red hair during school assembly a total of \$1,430 was raised to support Arthritis Tasmania's community based programs and services. Sam's fundraising efforts were supported by his team mates from the Clarence United Soccer Club, and by the Rose Bay High School SRC and student body.

Door-to-Door Fundraising

Arthritis Tasmania's Community Fundraising Program was an important source of funds for Arthritis Tasmania during the reporting year. We are extremely grateful to Christine Etherington who braves all weathers to carry out our door-to-door fundraising activities across the Greater Hobart Area.

Raffles and Donor Appeals

Arthritis Tasmania has continued its streamlined and low cost approach choosing to conduct its own raffles and donor appeals independent of expensive telemarketing services in order to reduce administrative and fundraising overheads. The response from the community has been very positive with many people contacting Arthritis Tasmania to say how much they preferred this low cost, less intrusive method of fundraising, which takes the pressure off having to on-sell books of raffle tickets and avoids those often bothersome telephone calls. Lucky raffle winners during the year received \$5,000 in cash, IGA grocery vouchers to the value of \$2,000 and petrol vouchers to the value of \$1,000. Arthritis Tasmania is extremely grateful to Tasmanian Independent Retailers who continue to support our fundraising efforts through their provision of a generous discount on the grocery vouchers.

DONATIONS

Major Donors \$1,000+

Mrs V D'Emden

Major Donors \$500+

Mrs C Munnings



Donations \$50+

Dr C Ash, Mr R Bamford, Mrs B Baxter, Miss L Billing, Mrs B Black, Mr D Bowling, Mrs F Brodie, Mrs R Brown, Mr K Burgess, Ms C Byrne, Mrs F Carrick, Mr T Challen, Mrs J Chilcott, Mrs A C Clarke, Mrs L Cox, Mrs V D'Antoine, Mr N Deane, Mrs J Delpero, Mrs R Denne, Mr D Dilger, Mr R Downie, Mr L Edwards, Mrs R Elliot, Mr C Elphinstone, Mr W Erikson, Mr D Fairfield, Mr K Felton, Mrs J Ferguson, Mrs J Fitzpatrick, Mrs R Floyd, Mrs H Franken, Mr B Furmage, Mr I Gatensby, Mrs J Greig, Mr F R Groom, Mrs R Guidici, Mrs J E Hearps, Mrs N Heaven, Mr S Heron, Mrs M Hickey, Mrs J Hodgman, Mr W Holmes, Mr A Hookway, Mrs K Hudson, Mr C Ireland, Mrs S Jantzen, Ms L Jones, Mr A Karas, Mrs R Knox, Miss J Laing, Mr P Laing, Mrs E Lange, Mr P Lawler, Mr S Levett, Mrs S Lewin, Miss M Lewis, Mrs M Lockhart, Mrs J Lockwood, Mr & Mrs R Lord, Mrs S McGushin, Mr I McIntosh, Mr M McKee, Mrs A McRedmond, Ms S Macri, Mrs KW Manning, Mr R Martin, Mrs J Mathason, Mrs J Mathews, Mrs J Millen, Mr T Molton, Mrs A Murray, Dr M Nelson, Mrs R Norman, Mrs B Nuttall, Miss H B Parsons, Mr I Phillips, Mrs E Ponting, Mr A Purves, Miss B Rainbow, Mr D Ratkowsky, Mr K Rees, Mr M Reeve, Mrs H Rigby, Mrs D Roberts, Mr D Roberts, Ald E Ruzicka, Mrs W Schoenmaker, Mrs G Seppelt, Mrs G Seymour, Mrs J Slyp, Miss E Smith, Mrs A Stacey, Mrs J Stewart, Mr A Walker, Mr J Walker, Mrs D Walters, Ms P Ward, Mrs S Watson, J B Whitehead and Family, Mrs B Wood, Mrs G Woods, Mrs C Wyatt, Mrs E Yates, Mrs A Young, Mr K Young,

Clubs & Associations

Civilian Widows Tasmania, Clarence United Soccer Club, CWA Magra Branch, Hobart Ladies Badminton Club, Rose Bay High School SRC.

Corporate Donors & Supporters

Consumer Affairs & Fair Trading, Myer Community Fund Launceston, State Fire Commission, Strategic Data Pty Ltd, Tasmanian Independent Retailers, Tilfords Hobart.

Gifts in Memory

Late Jean Lois Jack, Late Clifford Harold Laycock, Late Mrs Rosa Proks, Late Glen Rollins, Late Mrs Tamara Rundle.

Bequests

Arthritis Tasmania welcomes and greatly values the gifts made by donors on their deaths. These gifts are a crucial part of our overall funding and Arthritis Tasmania holds the following individual's decision to benefit our charity in the highest regard:-

Late Margaret G Connor, Late Ethel Stokes, Late Maxwell K Tims, Late Francis A Williams.

Pro bono Supporters

Arthritis Tasmania is grateful for the expert advice and assistance provided pro bono by the following organizations and individuals:-

Brian Claridge and LC Consultants, Dobson Mitchell & Allport Lawyers.



Financial Statements

Arthritis Foundation of Tasmania Inc BALANCE SHEET for the year ended 30 June 2010

	2010	2009
	\$	\$
ASSETS		
CURRENT ASSETS		
Cash at Bank	48,756	45,814
Stock on Hand	8,674	9,679
Accounts Receivable	4,813	8,695
Total Current Assets	\$62,243	\$64,188
FIXED ASSETS		
Furniture & Equipment	13,811	38,002
Less: Accumulated Depreciation	(9,313)	(29,162)
	4,498	8,840
Motor Vehicles	61,201	85,887
Less: Accumulated Depreciation	(12,109)	(27,184)
	49,092	58,703
Resource Unit	58,930	28,436
Less: Accumulated Depreciation	(43,954)	(20,634)
	14,976	7,803
Total Fixed Assets	\$68,566	\$75,346
NON-CURRENT ASSETS		
General Investments	39,233	45,210
Research Investments 4	47,510	47,024
Total Non-Current Assets	86,743	92,234
Total Assets	\$217,552	\$231,768
LIABILITIES		
CURRENT LIABILITIES		
Accounts Payable	76,496	26,006
Accrued Expenses	3000	0
Total GST Liabilities	(2,937)	1,253
Payroll Liabilities	7,947	11,283
Grants Received in Advance	0	53,325
Training Fees in Advance	982	
Provision for Annual Leave	10,646	7,154
Total Current Liabilities	\$96,134	\$99,020
NON-CURRENT LIABILITIES		
Loan Esanda	36,860	24,800
Loan Toyota	0	14,377
Provision for Long Service Leave	14,980	13,327
Total Non-Current Liabilities	51,840	52,503
Total Liabilities	\$147,973	\$151,523
Net Assets	\$69,579	\$80,245
MEMBERS' FUNDS		
Opening Balance	82,327	171,771
Operating Surplus/(Deficit)	(12,748)	(87,362)
Total Members' Funds	\$69,579	\$84,409

Arthritis Foundation of Tasmania Inc INCOME STATEMENT for the year ended 30 June 2010

	2010	2009
	\$	\$
INCOME		
Activity Income	68,131	55,344
Bequests	15,250	60,551
Donations	71,272	56,725
Fundraising	27,047	70,513
Grants	269,801	191,920
Investments	3,915	9,352
Member Subscriptions	11,543	11,334
Other Income	150	788
Gain/(Loss) from Sale of Assets	382	0
Product Sales	6,401	4,580
Sponsorship	3,000	0
Unrealised Gain/(Loss) on Investments	7,562	(38,985)
Total Income	\$484,454	\$422,123
Less EXPENDITURE		
Administration Costs	85,926	82,476
Cost of Sales	7,728	7,305
Employment Costs	252,174	307,922
Motor Vehicle Expenses	21,451	22,541
Programs	129,924	89,240
Total Expenses	\$497,203	\$509,485
Operating Surplus/(Deficit)	(12,748)	(87,362)

Copies of full financial statements are available on request from Arthritis Tasmania, GPO Box 1843 Hobart TAS 7001 or email info@arthritistasmania.com.au

Arthritis Foundation of Tasmania Inc NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2010

NOTE 1: Statement of Accounting Policies

This financial report is a special purpose financial report prepared in order to satisfy the financial reporting requirements of the Associations Incorporation Act (Tas) 1964 and the requirements of the Association's Constitution. The Committee has determined that the Association is not a reporting entity as defined in Statement of Accounting Concepts 1: Definition of the Reporting Entity, and therefore there is no requirement to apply Accounting Standards and other mandatory professional reporting requirements in the preparation and presentation of these statements and none have been intentionally adopted.

The financial statements have been prepared on an accruals basis and are based on historic costs and do not take into account the changing values of money. Cost is based on the fair values of the consideration given in exchange for assets. The accounting policies have been consistently applied, unless otherwise stated.

The following is a summary of the significant accounting policies adopted by the Association in the preparation of the financial statements.

(a) Property, Plant & Equipment

Each class of property plant and equipment are carried at cost less, where applicable, accumulated depreciation.

The depreciable amount of all fixed assets are depreciated over the useful lives of the assets to the Association commencing from the time the asset is held ready for use.

The depreciation rates used for each class of depreciable assets are:

CLASS OF FIXED ASSET	DEPRECIATION RATE
Furniture & Equipment	3-100% diminishing value
Motor Vehicles	18-22.5% diminishing value
Resource Unit	10-100% diminishing value

(b) Income Tax

The Association's income is exempt from income tax pursuant to the Income Tax Assessment Act 1997 (as amended).

(c) Inventories

Inventories consist of books and aids and are valued at the lower cost and net realisable value.

(d) GST Liability

Revenues and expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Taxation Office. In these circumstances the GST is recognised as part of the cost of acquisition of the asset or as part of an item of the expense. Receivables and payables in the Balance Sheet are shown inclusive of GST.

(e) Employee Benefits

Provision is made for the Association's liability for employee benefits arising from services rendered by employees to balance date. Employees benefits expected to be settled within one year together with entitlements arising from wages and salaries, annual leave and sick leave which will be settled after one year, have been measured at their nominal amount.

Contributions are made by the association to an employee superannuation fund and are charged as expenses when incurred.

(f) Revenue

Grant revenues are recognised over the period to which the grant agreements relate. Interest revenue is recognised over the period for which the funds are invested. Fundraising income and donations are recognised when received by the Association.

(g) Investments

Investments are recorded at market value, movements in market value are recognised as unrealised gains or losses as accrued. Distributions from investments are recognised when received by the Association.

(h) Comparatives

Where applicable comparative figures have been adjusted to conform to changes in presentation for the current financial year.

NOTE 2: Reliance on Funding

The ongoing viability of the Association as a going concern is dependent on the receipt of fundraising, bequests, donations, sponsorship and grant funds.

NOTE 3: Commitments

OPERATING LEASES

Non-Cancellable Operating Lease Commitments

Contracted for but not capitalised in the financial statements

	2010	2009
PAYABLE	\$	\$
Not later than 1 year	32,366	33,599
Later than 1 year but not later than 5 years	44,800	50,000
Later than 5 years	77,166	83,599

NOTE 4: Restricted Funds

BEQUESTS

During the 2002/03 year, the Association received a bequest of \$100,496 from the Estate of the Late Winifred May Dunn, to be used for research. During the 2007/08 year, the Association received a bequest of \$28,094 from the Estate of the Late Valerie Willis, to be used for research.

	2010	2009
BALANCE	\$	\$
Balance held as at beginning of year	47,024	56,170
Less: Research during year	-	14,000
Plus: Change in market value of investment	486	4,854
Plus: Bequest funds received during year	-	-
Balance Held as at end of year	47,510	47,024

