

ABN 26 521 960 054

# LIONS CANCER INSTITUTE INC ANNUAL REPORT 2011 - 2012



SAVING LIVES IN YOUR COMMUNITY THROUGH RESEARCH  
AND SKIN CANCER SCREENING SINCE 1990



## COVER PHOTOS

Top right

Female Patient (Sublingual Melanoma level 3 )

Bottom right

Female patient (Between toes Melanoma level 4 )

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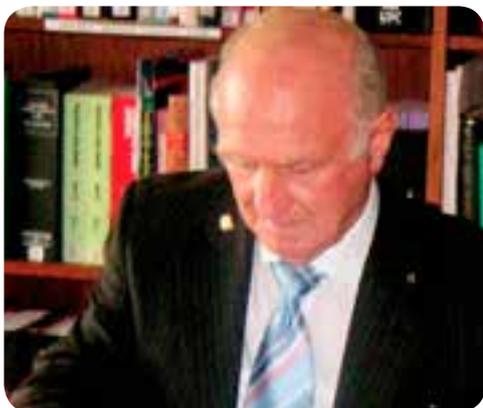
## **BOARD OF DIRECTORS**

<b>PDG Colin C. Beauchamp AM JP</b>	Chairman
<b>PDG Arthur Bushe-Jones</b>	Vice Chairman
<b>PDG Neil Saunders</b>	Secretary
<b>PDG Neil Saunders</b>	Treasurer
<b>PDG Darrel Mainard</b>	Screening Administrator
<b>PDG Dora Bushe-Jones</b>	Director
<b>Lion Judy Forsyth</b>	Director
<b>Lion Don Wheeler</b>	Director
<b>DC Lion Mary Gregg</b>	District Chairman 201 W2
<b>DC Lion Mary Austin</b>	District Chairman 210 W1
<b>DG Peter Lamb</b>	Ex Officio Director
<b>DG Stuart MacFadyen</b>	Ex Officio Director
<b>PDG Pam Baird</b>	Director
<b>Lion Tony Turner</b>	Director - Resigned September 2011
<b>PDG Garry Irvine</b>	Director
<b>Paul Katris</b>	Psychologist Chair Medical & Scientific Advisory Committee, CEO WACOG

The Lions Cancer Institute is a 'Not for Profit' medical research institution. The Institute holds endorsement from the Australian taxation Office as an income tax exempt charitable entity (ITEC) and is a deductible gift recipient (DGR).

The Institute holds a license issued under the provisions of the Charitable Collections Act 19

**Auditors** : Owen & Plaistowe



PDG Colin C. Beauchamp AM JP  
CHAIRMAN

## CHAIRMAN'S REPORT

It has been a successful and exciting year for the Institute with changes to the management structure, our screening operations, research support and our continuing association with the RFDS 'On the Road' teams.

I must thank PDG Garry Irvine for his leadership as Chairman for the past year, thank those retiring board members, a special thank you to CEO of The West Australian Clinical Oncology Group Paul Katris, Chair of our Medical and Scientific Advisory Board, who will continue on next year and the Cancer Council of Western Australia who have allowed us to use their board room for meetings.

This year we have been able to finalise the arrangements with Flinders University, School of Nursing, headed by Dr. Clare Harvey to manage the course for Assessment and Diagnosis of skin cancer lesions. This course will be available in August 2012 and is available to anyone who is interested, there are no pre-requisites. The Institute has two nurses ready to undertake the course and will be providing some financial support once they have contracted to assist with the screening when qualified.

Most Lions Clubs should now be aware of the fact that the Institute has purchased a second hand coach which is currently being fitted out as a screening unit to be used mainly in remote areas. It was the board's intention to have the caravan towed by the truck limited to around 500 kms. from the city but as most will have heard the unit decided to retire early snapping the chassis rails and rolling over south of Fitzroy Crossing. The Assessors have indicated that the unit is not repairable and we await an insurance payout.



Hon. Bill Marmion Chairman Colin and Secretary/Treasurer Neil



The new coach arriving in WA

We can now report that funding is in place to complete the conversion of the coach. The Institute received a grant from Lions Clubs International Foundation and was successful in gaining a grant from Lottery West, those added to the generous donations from Lions Clubs, CWA Boyanup and Olympia Diaries & Calendars will mean that the unit will be on the road much earlier than first anticipated.

All members of the Board would like to express their appreciation to all Lions of Western Australia who made special donations towards the appeal to help with the replacement unit.

It has been part of the Institutes future programming to have two units operating in Western Australia which would then allow the screening teams to more than double the number of patients seen each year. At a recent board meeting a motion was passed to have the new caravan built to similar specifications as the old unit. The truck is reasonably new having done only 80,000 kms.

Both units should be in operation before the end of the year, units can then be staffed with the nurses who are undertaking the Flinders University course and two who have already completed a similar course reducing the strain on our limited current screeners.

One of the many benefits that will flow on from the completion of the coach will be the number of additional drivers available. To drive the truck and caravan combination requires a MC license the coach will only need an HR, however because of its size it will still need drivers with a lot of experience.

The addition of a second screening unit will allow the board to consider some of the numerous requests we get for corporate screenings. We anticipate that those screenings will be carried out only if we receive what the board considers to be a suitable donation.

Screening Administrator PDG Darrel Mainard has included some screening statistics especially for the recent trip to the Kimberley Region, funded by Kimberley Development Corporation and Woodside Energy, The referral rate is exceptionally high but when it is considered that over 60% of the persons attending the Lions facility had never been screened before. These figures have been supplied to every Politician regarding the lack of such a service in remote locations

The Institutes most recently funded PhD student, Terry Boyle who has provided a report for this brochure has completed his PhD and has had a paper published, been interviewed by the radio and had had interviews with several media personnel.

Paul Katris is currently investigating the possibility of finding another suitable student whose work must be cancer related to become our next 'top up' funded student. By providing only this type of funding we are sure that the student chosen has been selected to receive a University grant.



Chris Lowings, a Nurse Practitioner Student who was funded by the Institute in 2008 continues to assist with the skin screening program. Both Chris and his wife Siva who have completed advanced Dermoscopy training, attended and assisted with the screening at the Perth MD convention and have recently spent two weeks working with the mobile unit in the Kimberley

My personal thanks to District Chairman W2 Mary Gregg and W1 District Chairman Mary Austin for their hard work during the past year and the PDG Neil Saunders who handled the roles of both Secretary and Treasurer

**Colin C. Beauchamp AM JP  
CHAIRMAN**



PDG Darrel Mainard  
SCREENING ADMINISTRATOR

## SCREENING ADMINISTRATOR'S REPORT

During the last twelve months the Institute has travelled many kilometres screening members of the public who would not normally have the opportunity to be screened. We are very lucky to have had the services of two wonderful people in Chris & Siva Lowings who travel from South Australia to help out with the screenings along with numerous volunteers within the Lions organisation and Doctors who give their precious time to the Institute for no reward.

Once again we have been inundated with requests from Lions clubs from all over WA. The Institute is becoming so well known for its work we are being asked to screen some of WA's largest companies, for example one had over 3000 employees, but unfortunately we were unable to cope with this type of request at this point in time. As Chairman Colin has probably stated in his report we already carry out a lot of work for the Westrac organisation both in the outer city area and country towns when we are nearby.

Our screening programme has been put back quite a bit with the early demise of our long standing screening unit when it came to an untimely stop. I will not dwell on this, I would think Chairman Colin will go into it with a little more detail. We hope to have the two new units up and going again by the middle of October/November 2012. In the mean time I ask all Lions to be patient and we will endeavour to conduct the screening in your community as planned.

The screening team in conjunction with the RFDS on the Road programme, spent time in the Kimberley and this proved to be the success story of the year. The following figures give you a basic idea as to how it went with just stage one, stage two hasn't been completed at the time of writing this report.

Location	No Screened	No Lesions	No Referred	No Considered Life Threatening
Derby	319	115	72	8
Fitzroy	71	15	13	9
Halls Creek	57	8	5	5 (only one screener)
Wyndham	39	21	13	9
Kununurra	641	129	92	73
Broome	745	242	156	175
<b>Total</b>	<b>1872</b>	<b>530</b>	<b>351</b>	<b>331</b>

**17.25%** of the population screened having life threatening lesions, of this total screened some 879 or 47% had never been screened before.

In the words of Dr Clare Harvey RN, BA (Cur), MA, PhD Lecturer in Nursing and Program Co-ordinator Master of Advanced Clinical Practise School of Nursing & Midwifery Flinders University of South Australia "Good heavens those are significant numbers! It is such a needed service, it makes our study really important to get the message out there!"



*Lions Clubs International Cheque presentation  
DG Peter Lamb & Chairman PDG Colin*

During the year we also conducted several screenings in the South of the State. The Institute was invited to the Narrogin Relay for Life, something the institute doesn't normally do, however the fact that the Narrogin Lions made such a large donation towards the new van of \$25,000 dollars, allowances were made, and 108 people were screened 14 referrals and 4 life threatening lesions were found. Screenings were carried out in Donnybrook, Augusta, Millbridge & Wollaston. The Institute screened 436 people averaging over the four (4) towns, a referral rate of 19%. The biggest problem the screening team has is that people have trouble understanding what the risk criteria mean. The Institute also carried out a screening on the South Perth Foreshore in conjunction with the Melanoma Society of Western Australia. 74 people were screened, 14 were referred for further investigation and 7 were found to have possible life threatening lesions, this means 18.9% of those screened needed further investigation.



*Screening Team in Broome L/R Chris Lowings, Monika Cowell, Siva Lowings, Norm Crane, Sandy Slee, Colin Beauchamp*

The screening team will be putting together next year's screening programme in late September to early October. Although it has numerous requests already if your club hasn't had a visit for some time, then consider it, most requests come from country clubs, and what would be handy in its deliberations would be the time of year that is available for the farmers and the ability to fly a plane into the town or close by without any bad or possibly bad weather.

Something to think about and refer to the work your Lions Cancer Institute is trying to prevent, is, the chance of getting melanoma in Western Australia is 25% of males in the 15-39 age group, the same age group for females is 19%.

The mortality rate in Western Australia is 12% of males in the above age group, in females it is very low in fact it is not recorded individually.

In the 40-64 age group it is quite surprising to see the incidence of Melanoma Cancer in males is a lot less at 11%, in females in the same age group it is also down to 10% The mortality for males in this age group is down considerably as well, with only 4% actually dying from Melanoma Cancer. Once again females are so low they are not recorded individually.

I take this opportunity to thank all who volunteered during the year. Without your help and because of the donations of the clubs these screenings could never be held and as has been said on numerous occasions if one life is saved then all the hard work has been worthwhile.

**PDG Darrel Mainard  
Screening Administrator**



*Dr Clare Harvey RN, BA (Cur), MA, PhD  
LECTURER IN NURSING*

## **A NURSE LED SKIN SCREENING PROGRAM CONTRIBUTING TO HEALTH REFORM**

**Researchers:** Dr Clare Harvey, Mr Christopher Lowings, Mr Colin Beauchamp, Mr Paul Katris

This year has seen some exciting expansion to the research program. We have finalised an agreement with Lions MD201 C2 District SA/NT through Marilyn Millar and this side of the project has got off to a brisk start, with skin screening completed in Victor Harbour and Barmera, and further screenings scheduled this year in McLaren Vale and Darwin.

Western Australia has also been steaming along with screenings occurring in the Pilbara and Kimberly regions this year.

We are now beginning to see some definite trends in the data collected thus far. This data supports the Lions Cancer Institute's previous findings which show that between 25% and 34% of all people screened are referred to medical examination for further investigation for possible life threatening lesions.

On average, the Nurse Practitioner (NP) candidate, Mr Chris Lowings has been screening one third of the screenings he has been involved with. Chris is currently following up on all his medical referrals as part of the quality assurance requirements for NP sustainability in this population based screening.

Potential financial sustainability of the NP role for screening is tracking along at a break even cost benefit based on NP screenings to Medicare rebate potential for NP consultations.

It is anticipated that the analysis and reporting of this financial data, together with the high incidence of life threatening lesions detected in population based screening, will attract national attention in terms of developing a sustainable model for the continuance of this very important population based screening program. We are currently developing our first publication for this research, based on data collected so far. Chris and I have also presented the study at the 6th Conference of the Australian College of Nurse Practitioners in Adelaide, entitled "A nurse led skin cancer screening program - contributing to health reform".

Currently the data collection is being developed into a web based database so that Lions Cancer Institute can have access to all reports and trends from this research over the life of the project.

**Dr Clare Harvey RN, BA (Cur), MA, PhD**  
**Lecturer in Nursing**  
**Program Coordinator Master of Advanced Clinical Practice**  
School of Nursing & Midwifery  
Flinders University of South Australia



Paul Katris  
CEO WACOG

## **CHAIR MEDICAL & SCIENTIFIC ADVISORY COMMITTEE PAUL KATRIS**

Cancer Australia is the peak federal government cancer control agency. It is charged with improving cancer outcomes through:

- Prevention of cancer
- Improving screening programs
- Early detection of cancer
- The application of emerging new treatments and/ or technologies
- Coordination, integration or delivery of treatment and care using a multidisciplinary approach

Cancer Australia's research priorities aim to reduce the burden of cancer on all Australians. Research undertaken should have a specific emphasis on populations with poorer cancer outcomes, such as Aboriginal and Torres Strait Islander peoples and particular consideration will be given to health service and health economic research, and the translation or implementation of research.

Given their burden of disease and mortality across the community, research addressing cancers of the colon and rectum, lung, pancreas, stomach, cancer of unknown primary, and lymphoma are strongly encouraged.

In light of the above statements it is important to note that the activities of the Lions Cancer Institute are closely aligned with these nationally endorsed priorities and that we continue to do so in the future.

In our skin cancer screening program we encourage cancer prevention messages, we undertake screening and early detection of skin cancers and we apply new lesion diagnostic imaging and recording technologies. An organisation such as ours with modest funds to dedicate to research needs to also maintain it's close links with university research centres and other cancer funding agencies and peer review processes for selecting successful grants . Over the next twelve months we will continue to forge these relationships so that we ensure the best investment of our research funding contributions.

**Paul Katris  
CEO WACOG**



Chris Lowings  
SPECIALIST NURSE

## (GRANT RECIPIENT) CHRIS LOWINGS SPECIALIST NURSE

The report to the Board provides a good opportunity to speak of events of the past year and to reflect on where we have been and where we are going. Well, firstly and most importantly, both I and my wife Siva are now officially Lions after recently being inducted to the Binningup Waters Lions Club. Also in the past year I have completed the Master of Nursing (Nurse Practitioner) program through Flinders University in Adelaide having received the generous support through the Lions Board and PDG Colin Beauchamp without which I could not have done this. The program was demanding of time and focus and in particular the pharmacology units were tough, being delivered from the Flinders University School of Medicine, and so demanding the same academic requirements of the medical degree. I am proud to say that I achieved academic recognition with membership of the Golden Key International Society for achieving results in the top 15% of the University for the year.

My next task is to apply for authorisation as a Nurse Practitioner and transfer what benefits I can from this more autonomous role back to Lions Cancer Institute through the Skin Cancer screening program. I very much appreciate the support provided by Colin and Lions, and too, for the opportunity to give back through the Skin Cancer screening program.

Additionally, Colin and I are engaged in a research program, again with Flinders University and Lions Clubs in Western Australia (WA), South Australia (SA) and Northern Territory (NT) to demonstrate that the 'volunteer' screeners, and in this case the nurses working with the Institute on the skin screening program, can carry out a safe, efficacious and cost effective public health screening program. In addition to the usual screening activity in WA this year Colin, Siva and I have conducted skin screenings in Goolwa and Barmera in SA with further screenings planned for McLaren Vale in SA and Darwin in NT under the banner of the Lions Cancer Institute of WA.

In January 2012 I had the absolute pleasure of spending four weeks at the Dermatology Department of the Arcispedale Santa Maria Nuova, a tertiary hospital in Reggio Emilia, Italy, with Prof Giuseppe Argenziano and Prof Iris Zalaudek who are two of the most eminent and respected dermatologists in the world. They are prolific researchers, and they are also the authors of the simple '3 Point Check' algorithm for assessing lesions skin for signs of skin cancer which the basic teaching tool in the Flinders University program. It was a fantastic privilege to work directly with them, observe their practice and learn from them. They were both very generous in their willingness to teach and I gained an enormous amount from just being there. Oh, by the way learning a little Italian is a good idea as it took me a week to learn how to order lunch.

The program is vitally important and to help provide a pool of people into the future who have both the interest in skin screening program both Colin and I have been instrumental in setting up, in association with Flinders University of South Australia, a 'Skin Screening' professional

development program which is able to be delivered on-line to anyone on the planet, but which is aimed at securing a pool of qualified and motivated people who can assist with the screening program into the future.

It is my aim to continue to assist in both the delivery of the current program of skin cancer screenings with Lions and to hopefully build the program under the auspices of Lions so that it can be offered into the future in other areas of need such as SA and NT and beyond.

**Chris Lowings**

**RGN, RMHN, BNg, GradDip (Rural and Remote Mental Health Nursing) Master of Specialist Nursing, Certificate in Dermoscopy and Skin Cancer Medicine (UQ) Advanced Certificate in Dermoscopy (UQ).**

**Results from our first Screening in South Australia**

Date of screening  
Screening Staff Colin, Chris & Siva

**Victor Harbour**

**18 & 19 February 2012**

Results of Screening	Number	% of total screenings
Total Population of town (2006 census)	<b>10380</b>	
Total screenings	<b>174</b>	1.7
Male	<b>72</b>	41
Female	<b>101</b>	58
Met criteria	<b>53</b>	30
Total suspect life threatening lesions	<b>74</b>	43
Total lesions	<b>171</b>	
Total people referred	<b>59</b>	34



PDG Terry Gray en-route to the Pilbara with the mobile screening facility



Terry Boyle  
PHD STUDENT

## (GRANT RECIPIENT) PHD STUDENT TERRY BOYLE

As the recipient of the Karen & Joshua Chinnery Top-Up Scholarship from 2009 to 2012, I would like express my sincere gratitude to the Lions Cancer Institute for the financial support and encouragement that you have given me throughout my PhD, and also for your interest in my research.

Receiving the scholarship allowed me to really concentrate on my research, and as a result I was able to published seven articles in scientific journals based on my PhD research. And thanks to the travel component of the scholarship, I was also able to go to conferences in Minneapolis and Seattle to talk about my research with expert scientists.

During my PhD I investigated the effect that physical activity has on the risk of developing bowel cancer. The results of my PhD research strongly indicated that being physically active at any age reduces the risk of bowel cancer. I also found that people who work in a sedentary job (in other words, a job that involves mostly sitting) for more than ten years may have an increased risk of bowel cancer. As someone who sits in front of a desk all day this was a bit of wake-up call for me. Luckily Australian research has shown that breaking up sitting time helps to counteract the negative health effects of too much sitting, so if you're in a sedentary job you can do simple things like standing up for a couple of minutes every half an hour or so, and standing up during phone calls. ***The simple message from my PhD research is to sit less and move more!***

I submitted my PhD thesis in early May and, after an anxious 10 week wait during the examination process, have just found out that it has been passed! Please feel free to contact me by email ([terry.boyle@uwa.edu.au](mailto:terry.boyle@uwa.edu.au)) if you would like more information about my research.

**Terry Boyle**



Mary Austin  
201 W1 DISTRICT CHAIRMAN

## 201 W1 DISTRICT CHAIRMAN MARY AUSTIN

It has been another busy year for the W1 District Chairperson for Cancer. It is with great pride that I can say W1 District is a major supporter, financially, of the Lions Cancer Institute. Many donations have been made to ensure we have our new coach. Since the demise of our beloved van, even more W1 clubs donated money to help finance a new van. Both will be ready within weeks and hopefully we will see them on the road soon after. Please remember that over the coming year we will still need funding to support the two vehicles.

This was our first year in the Kimberley. Once again too many people had never been screened and too many needed referral back to their GP for further management. Everywhere we go we see young people unprotected from the sun, wearing short sleeves, no hat and no sunscreen. These are not only teenagers but includes primary school children. What do we have to do to get the message across to the community.

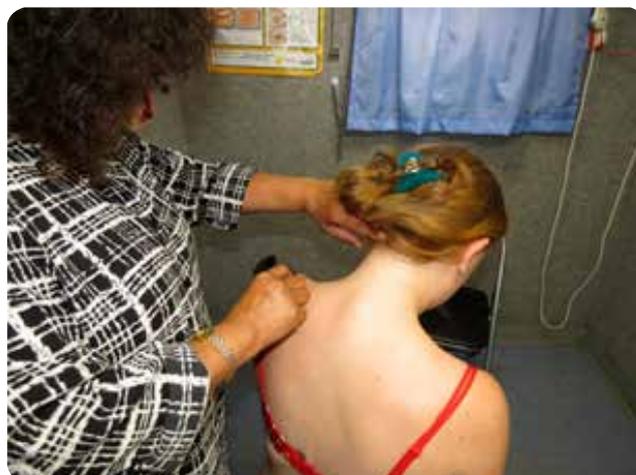
I have sent to all W1 secretaries, the skin cancer risk sheets, but when I ask Lions if they have a copy they generally have no idea what I am talking about. It is the responsibility of all Lions to ensure their family and friends understand the risk of skin cancer. My goal was to have a copy of the sheet on every fridge in WA, and eventually in Australia. Feeling like a failure at the moment. I will be sending the sheet out again in November. If you do not receive it please ask you're your secretary about it. If a secretary doesn't receive it please contact me and I will email one out to you.

While W1 Lions Clubs are fabulous as financial supporters of the Institute, we are not so great at coming forward to nominate to be a Board member. There are still a number of vacancies on the Board for W1 Lions to be elected to. Please consider making the commitment to increasing our presence on the board.

### DC Mary Austin



Lyn and Dan, volunteers for the Saint John's Ambulance had a free screening while visiting the area for the Ord Valley Muster period



Siva Lowings Checking Client with a Dermalite



Mary Gregg  
201 W2 DISTRICT CHAIRMAN

## 201 W2 DISTRICT CHAIRMAN MARY GREGG

Fellow Lions, once again you can be very proud of your Lions cancer Institute and the valuable service it provides with the Skin Screening program. Results achieved are proving a high need for such a screening facilities by staff specially trained in assessment and diagnosis of skin lesions. Elsewhere in this report you will read about the ongoing progress of building a new mobile caravan and outfitting the coach. We are all concerned at the high number of people who are attending the facility to be screened for the first time, even in areas which have adequate screening facilities. People seem to neglect their own skin and the possibility of getting skin cancer, why? Is it the cost? I doubt it. Is it the thought that it won't happen to me? Maybe, or is it a combination of both plus the fear of the outcome.

One of our roles as Lions should be to inform everyone we know about our screening program and to convince those we know to 'Get Screened regularly'.

We already know how valuable your Lions Skin Screening program is and 'yes' it will be needed for some distance in the future. This will mean that the Institute will need funds to continue this valuable work. Many Clubs have been generous in their support of the program and we hope that they will continue, on behalf of the board I thank you most sincerely.

Again may I emphasise the need for all Lions to make sure that everyone is aware of the risks involved in too much sun exposure. Talk loudly at every opportunity about the program, our new van and the coach, obtain a copy of the photos of the units when finished and show them around, you may be surprised at the questions and comments particularly if you have contacts with the media

### DC Mary Gregg



Colin accepting cheque from Olympia Diaries



Screening in the Pilbara

## THE MYTHS ABOUT SKIN CANCER

5 common reasons why people don't think they will have Skin Cancer

### 1. Cancer only appears where you get the sun.

**'WRONG'** it can appear anywhere including the mouth, tongue, head, between the toes, under the nails, in or behind your eyes, inside the nose and the most intrusive and most aggressive skin cancer is under the soles of your feet.

### 2. Only those people who spend time in the sun can get melanoma.

**'WRONG'** It certainly increases the risk but you do not need direct sun exposure to have UV damage.

### 3. Only older people get melanoma.

**'WRONG'** The life time risk factors for 20-40 year old in Australia is 1 in 18.

### 4. I was checked recently and given the all clear, I don't need another check.

**'WRONG'** Skin cancer is dynamic it can evolve rapidly, you need to have regular ongoing checks and if you have had even a BCC (a minor non life threatening cancer) then you are at risk of getting more and possibly more dangerous cancers

### 5. Melanoma lesions are always black & raised

**'WRONG'** They can be any colour, Red, White, Blue, Grey or a combination of colours and most start flat



Tricia Slee  
PROGRAM MANAGER

## PROGRAM MANAGER TRICIA SLEE RFDS ON THE ROAD



*Working in Partnership to Promote Healthier  
Regional Communities*

The RFDS on the Road Program seeks opportunities to fill gaps in the provision of essential health services for residents of regional and remote WA communities by facilitating partnership projects to deliver disease screening and health promotion initiatives. We were delighted that the Lions Cancer Institute agreed to work with us to provide an inaugural free skin cancer preventative education and screening service to communities across the Kimberley region in 2012 – similar to the skin screening projects we've delivered together in the Pilbara and Goldfields regions over the past five years. But nothing could be achieved without first gaining a substantial funding investment and engagement with the local communities.

I'm pleased to report that we were successful on both counts. Sincere appreciation is extended to our generous funding partners, the Kimberley Regional Grants Scheme (\$98,000) and Woodside Energy (\$52,000). We were also very appreciative of the 'on the ground' and 'in kind' support we received from the Kimberley Regional Development Commission, Woodside Energy, the Broome Lions Club, ABC Radio, local print media and community radio, Kimberley businesses and the Shires of Derby-West Kimberley, Halls Creek, Wyndham-East Kimberley and Broome.

The partnership RFDS / Lions Cancer Institute screening team visited the towns of Derby, Fitzroy Crossing, Halls Creek, Wyndham, Kununurra and Broome. We delivered skin screening clinics over 23.5 days and provided 1,902 people with a free, full body screening. The referral rate for suspicious lesions averaged 18.45 percent across the region.

It is important to note that 58 percent of participants surveyed had never had their skin professionally screened before. This figure highlights the inequalities in provision of health services for the Kimberley region when compared to the metropolitan area of Perth. Without this free community health service there was a limited likelihood that many of these people would have been screened for potential skin lesions.

RFDS health promotion nurse Sandy Slee coordinated this year's Kimberley screening project. One of the key messages the RFDS aimed to share with patients following their screening was to increase their awareness of the dangers of sun damage and to promote the message that precaution should be taken to protect the skin from the sun all year round, not just in the summer months.

You will have heard of the unfortunate 'demise' of the Lions Cancer mobile screening unit en-route to Broome from Kununurra. This meant we had to make some significant changes to our screening plans and venue at very short notice – thanks to our sponsors and the Shire of Broome for finding us a new home so quickly.

True to form, a few months on, it seems Colin and his team have negotiated for not one, but two new mobile screening units to be available to provide the service across a growing footprint in regional WA. Well done!

Again, for the sixth year of working in partnership, we extend our thanks to the great team of Lions volunteers working with our RFDS staff. And a hearty thanks to Colin and Sue Beauchamp who continue to be the driving force behind this remarkable Lions mobile community skin screening service.

To the Lions Cancer Institute we extend our sincere thanks for the opportunity to work together to improve the health and wellbeing of people living in the remote regions of Western Australia.

**Tricia Slee  
Program Manager RFDS on the Road**



*The RFDS on the Road Coordinator for the Kimberley Skin Screening Project, Sandy Slee, with some locals signing up for a free screening in Kununurra.*



*The RFDS on the Road and Lions Cancer Institute screening team in Broome: Monika Cowell, Norm Crane, Chris Lowings, Sandy Slee, Colin Beauchamp and Siva Lowings.*



*Project partner Woodside Energy hosted a celebration function*

# A BRIEF HISTORY OF THE LIONS CANCER INSTITUTE

The Lions Cancer Institute is a project of the Lions Clubs of Western Australia and was formed in 1989. Incorporated in 1990, became affiliated with the University of Western Australia in 1994 and in 1996 in association with The Cancer Research Institute formed the Centre for Applied Cancer Studies at the University of Western Australia.

The Lions Cancer Institute laboratories were initially located in the Infectious Diseases Transportable located off Moore Street.

The Institute later moved to the Medical Research Foundation building at 50 Murray Street Perth on completion of the building.

Then to Park Lane, part of the original University of Western Australia campus. The Institute's offices then relocated to Oasis lotteries House Unit 7, 37 Hampden Road Nedlands. Laboratories are housed in the department of Pharmacology on the UWA Nedlands campus.

Initial funding came through Lions Clubs and from a group named The Friends. The Friends were formed to raise funds, which was dedicated to cancer research through the Lions Cancer Institute.

In 1994 the Friends changed their name to The Cancer research Institute with funds being directed to support the targeted therapy project being conducted by the then Professor of Surgery at UWA Prof. Bruce Gray. More recently The Institute has been wholly funded by the Lions of Western Australia supported by small donations from the public sector, two (2) minor grants from the Cancer Foundation and an annual donation of around \$6,500 from one corporate sponsor Olympia Diaries & Calendars.

The Lions Cancer Institute is now involved in two projects one is the Skin Cancer the core of which is our state wide Skin Screening Program. These free screenings are carried out by Institute staff, who are all volunteers, headed up by Institute Chairman PDG Colin Beauchamp and supported by members of the West

Australian Society of Plastic Surgeons and The Australian Society of Dermatologists, Doctors, Dermographers, Nurses, Science Graduates and Board Members

## Current status of the Screening program

The program first started with an ad-hoc screening in Muckinbuddin in 1990 where a team screened two hundred persons with approximately 5% referral rate. The screening has continued operating for 22 years and has screened 35,000 persons with an average referral rate of 29.7%.

Current volunteer staffing levels only allow us to operate 12 screenings per year 5 of these are in the metro area the rest are country based. The area covered to date runs from Geraldton in the North to Albany in the South and Esperance in the East.

We receive requests for up to 30 screenings per year many of which are from locations previously visited, and on most occasions appointments available (i.e. 100 per day) screenings are filled well ahead of time. The early part of the program was targeted at developing an 'at risk' criteria. The criteria is continually tested and where the patient does not meet the criteria the referral rate is less than 5%.

Use of the 'at risk criteria', if applied correctly has continually produced referral rates of 35 % plus.

In 1994 a study looking at the future of this program and the direction in which future screenings should be going, based on the number of persons referred it was decided the we had a real need to increase the number of persons screened. The current mobile screening unit operating without using the selection criteria providing 'ad-hoc screenings' only would achieve that best results. The unit would screen areas around a central major town with referrals being made to a central location. Based on the results from the ad-hoc screening it is anticipated that a referral rate of 5% would be achieved, a team of specialist could then be transported into that central location looking at specific areas of skin rather than a full body check.

In order to achieve this it was necessary to review the staffing requirements. It was considered that suitably trained Nurses/Dermoglyphers, diagnosing suspect areas of skin rather than specific lesions could achieve the required results without using the at risk criteria, achieving referral rates of 5 % and referring those persons to a central point for checking by a specialist as detailed previous paragraph.

The next stage of the program was to develop a self-screening kit, two trials have been conducted where kits were delivered to every household in the postal region of the shire concerned. The referral rates were 54%+ and 57%+ for those who had self diagnosed using the card, further trials are planned.

We are now receiving requests for the kits from a specialist Australia wide and have recently shipped cards to Queensland and South Australia. The Institute also supports cancer research through University students and advanced research facilities

### **Mobile Screening Unit**

The original mobile screening unit was launched in August 2005.

The unit caravan consists of three fully equipped screening booths offering both audio and visual privacy equipped with magnified lights a small office area and an annex for reception. The unit is towed by a light truck and is completely self contained with its own power and heated water supply.

A major portion of the funding for this unit was originally obtained from a Lions Clubs International Foundation and the balance from Lions Clubs however that unit is now no longer in operation, a coach is under construction and as new van is already in use.

Funding for the new coach has been supported by a \$100,000-00 grant from Lottery West and a further \$75,000-00 grant from Lions Clubs International Foundation plus top up funds from major sponsor CWA Boyanup and generous donations from Lions Clubs,

including a donation of \$25000m from the Lions Club of Narrogin.

Funding for the replacement van has been fully covered after a special appeal by the Lions of Western Australia. The coach should be operational by the end of 2012.

At the time of writing this report the unit has been operating for 13 years not only screening but as an educational tool at field days and shows. The unit is still staffed by some of the original volunteer team.

Since inception the Lions Cancer Institute Board has been involved in the 'Top up' financial support of students involved in cancer studies financially, to date five PhD and three Honours Students have successfully complete their studies and the Institute has recently funded WA's senior Liver Cancer researcher with a grant of \$70,000-00.

In 2006 the Institute was approached by the Royal flying Doctor Service in WA to run a joint venture program with their 'On the Road' service teams providing skin cancer screening to more remote areas. Since that date the mobile unit has visited remote areas in the Goldfields twice, Pilbara three time and in 2012 the Kimberley region. Results in all of these areas show a need for such a screening service. Funding for those extended trips has been provided by Regional Development Commissions, Royalties for Region and Mining Companies.

The Institute is now involved with Flinders University in South Australia, School of Midwifery and Nursing in a providing an online program that teaches a course on the diagnosis and assessment of skin cancer lesions, this will have a flow on effect in providing staffing for our extended screening program.

The Institute has recently launched the skin screening program in South Australia with the assistance of Lion Marilyn Millar

LIONS CANCER INSTITUTE INC  
A.B.N. 49 158 959 834

DIRECTOR'S REPORT

Your directors submit this report on the entity for the financial year ended 30 June 2012.

**Directors**

The names of directors throughout the year and at the date of this report are:

Mr G Irvine  
Mr C Beachamp JP  
Mrs D Bushe-Jones  
Mr D Mainard  
Mr D Wheeler  
Ms J Forsyth  
Ms M Gregg  
Mr N Saunders  
Mr P Katris  
Mr T Turner (Resigned September 2011)  
Mr A Bushe-Jones  
Mr P Lamb  
Mr S MacFayden  
Ms M Austin  
Mrs P Baird  
Ms A Keppel (Resigned August 2011)

Directors have been in office since the start of the financial year to the date of this report unless otherwise stated.

**Principal Activities**

The principal activities of the association during the financial year were to provide social facilities to members of the association.

**Significant Changes**

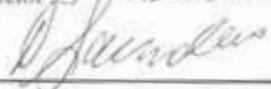
No significant change in the nature of these activities occurred during the year.

**Operating Results**

The net profit of the entity is \$162,666.

Signed in accordance with a resolution of the Board of Directors.

  
\_\_\_\_\_  
Director

  
\_\_\_\_\_  
Director

Dated: 29/10/12.

Perth, Western Australia

## **Annual Financial Report**

**For the year ending 30<sup>th</sup> June 2012.**

Again there are significant changes in this year's results compared to last year.

- Following the announcement of the decision to purchase a second screening unit Clubs again showed their generosity by not only donating in excess of \$27,500.00 for the annual operating costs of the existing screening unit, they also contributed over \$37,000.00 towards the new unit.
- The Profit and Loss report for this Financial Year needs careful study to avoid making the assumption the Institute is ahead of last year with both income and expenditure. Although income for 2012 shows an increase of \$70,646.52 over 2011 we need to be aware that this figure includes a \$70,500.00 grant from LCIF.
- The 2012 expenses are up by \$74,451.54 on last year. This includes the \$70,000.00 for the new coach and \$22,670.00 for the Photofinder to be used in the new coach.
- If it had not been for the \$29,432.90 received in Bank Interest, the LCIF grant and donations from clubs towards the new coach, the Institute would have been very close to showing a loss for 2012.

**PDG NEIL SAUNDERS, TREASURER.**

**August 2012.**

LIONS CANCER INSTITUTE INC  
A.B.N. 49 158 959 834

STATEMENT OF COMPERHENSIVE INCOME  
AS AT 30 JUNE 2012

	Note	2012 \$	2011 \$
<b>INCOME</b>			
Donations			
- Lions clubs		28,283	45,555
- Screening unit		4,731	19,914
- Private		1,836	9,989
- Corporate		7,620	15,074
- New screening Van		72,050	-
Grants - private		70,000	-
Karen & Joshua Chinnery Scholarship		5,500	1,050
Fund raising raffle		3,168	27,540
Interest		29,456	25,627
Miscellaneous		1,146	2,426
		<hr/>	<hr/>
<b>TOTAL INCOME</b>		<b>223,790</b>	<b>147,175</b>
<b>EXPENDITURE</b>			
Administration		17,024	14,609
Fundraising		-	5,000
Screening		12,502	9,567
Skin cancer screening unit		23,460	20,289
Scholarship awards		3,500	10,000
Research grant		-	5,000
Public relations		1,324	-
Depreciation		2,727	22,006
Training		587	-
		<hr/>	<hr/>
<b>TOTAL EXPENDITURE</b>		<b>61,124</b>	<b>86,471</b>
<b>TOTAL COMPREHENSIVE INCOME (LOSS) FOR THE YEAR</b>		<hr/> <b>162,666</b> <hr/>	<hr/> <b>60,704</b> <hr/>

**LIONS CANCER INSTITUTE INC**  
A.B.N. 49 158 959 834

**STATEMENT OF FINANCIAL POSITION**  
AS AT 30 JUNE 2012

	Note	2012 \$	2011 \$
<b>CURRENT ASSETS</b>			
Cash at bank		80,288	60,152
Term deposit		535,460	480,256
Interest accrued		7,128	7,105
GST recoverable		2,028	914
Amounts recoverable		-	268
<b>TOTAL CURRENT ASSETS</b>		<u>624,904</u>	<u>548,695</u>
<b>NON-CURRENT ASSETS</b>			
Property and equipment at cost	2	216,913	187,430
Less accumulated depreciation	2	(122,207)	(178,256)
<b>TOTAL NON-CURRENT ASSETS</b>		<u>94,706</u>	<u>9,174</u>
<b>TOTAL ASSETS</b>		<u><u>719,610</u></u>	<u><u>557,869</u></u>
<b>CURRENT LIABILITIES</b>			
Trade Creditors		-	925
<b>TOTAL CURRENT LIABILITIES</b>		<u>-</u>	<u>925</u>
<b>NON CURRENT LIABILITIES</b>			
		-	-
<b>TOTAL LIABILITIES</b>		<u>-</u>	<u>925</u>
<b>NET ASSETS</b>		<u><u>719,610</u></u>	<u><u>556,944</u></u>
<b>EQUITY</b>			
Accumulated surplus at 1 July 2011		556,944	496,240
Add/(less) surplus (deficit) for the year		162,666	60,704
<b>TOTAL EQUITY</b>		<u><u>719,610</u></u>	<u><u>556,944</u></u>

LIONS CANCER INSTITUTE INC  
A.B.N. 49 158 959 834

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 JUNE 2012

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

The directors have prepared these financial statements as a special purpose financial report as they have determined that the Lions Cancer Institute Inc. ("Institute") is not a reporting entity. Accordingly they are not required to apply Accounting Standards and other mandatory professional reporting requirements in the preparation and presentation of these financial statements.

The special purpose financial statements are prepared to satisfy the reporting requirements of the Associations Incorporation Act (WA), Charitable Collections Act (1946) and the Charitable Collections Regulations (1947).

The financial statements have been prepared on the accruals basis using historical costs. They do not take into account changing in money values.

The following specific accounting policies have been adopted in the preparation of these financial statements.

**(a) Income tax**

The Institute, an incorporated body, is an exempt body for income tax purposes and accordingly the financial statements do not account for income tax.

**(b) Plant and equipment**

Property plant and equipment are included at cost. All items of property and equipment are depreciated over their useful lives, as determined by the directors, commencing from the time the item is held ready for use.

**(c) Interest received**

Interest is brought to account when received or credited to the related bank/investment account. Interest earned but not received at balance date has not been brought to account at that date.

**(d) Donations and other fund raising activities**

The Directors have determined that it is not practicable to establish adequate and effective control over monies received from these sources. Accordingly, income from these sources is brought to account on the basis of amounts actually recorded in the Institute's books.

LIONS CANCER INSTITUTE INC  
A.B.N. 49 158 959 834

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 JUNE 2012

Note 2: Property and equipment

	2012	2011
	\$	\$
Mobile screening unit at cost	-	58,776
Less accumulated depreciation	-	58,776
	<hr/>	<hr/>
	-	-
Generator at cost	10,000	10,000
Less accumulated depreciation	5,000	4,500
	<hr/>	<hr/>
	5,000	5,500
Video project and laptop at cost	6,102	6,102
Less accumulated depreciation	6,102	5,557
	<hr/>	<hr/>
	-	545
Toucan display system at cost	1,980	1,980
Less accumulated depreciation	1,980	1,980
	<hr/>	<hr/>
	-	-
Hino truck at cost	79,535	79,535
Less accumulated depreciation	79,535	79,535
	<hr/>	<hr/>
	-	-
Dermalite11 multispectral at cost	1,975	1,975
Less accumulated depreciation	1,975	1,975
	<hr/>	<hr/>
	-	-
Computer equipment at cost	4,850	4,850
Less accumulated depreciation	3,815	2,839
	<hr/>	<hr/>
	1,035	2,011
Screen equipment at cost	22,095	22,095
Less accumulated depreciation	22,095	22,095
	<hr/>	<hr/>
	-	-
	<hr/>	<hr/>

LIONS CANCER INSTITUTE INC  
A.B.N. 49 158 959 834

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 JUNE 2012

Note 2: Property and equipment (continued)

	2012 \$	2011 \$
Dermalite	2,117	2,117
Less accumulated depreciation	1,705	999
	<u>412</u>	<u>1,118</u>
Van – Screening	63,636	-
Less accumulated depreciation	-	-
	<u>63,636</u>	<u>-</u>
UHF Radio	453	-
Less accumulated depreciation	-	-
	<u>453</u>	<u>-</u>
Photo finder	22,670	-
Less accumulated depreciation	-	-
	<u>22,670</u>	<u>-</u>
	<u>94,706</u>	<u>9,174</u>

LIONS CANCER INSTITUTE INC  
A.B.N. 49 158 959 834

STATEMENT BY THE BOARD OF DIRECTORS  
FOR THE YEAR ENDED 30 JUNE 2012

The directors have determined that the Association is not a reporting entity and that this special purpose financial statements should be prepared in accordance with the accounting policies described in Note 1 to the financial statements, solely for the use of the Board of Directors in accordance with the Association's constitution, so as to comply with the provisions of the Charitable Collections Act 1946.

In the directors opinion the financial report set out from page 3 to page 8:

1. Presents a true and fair view of the financial position of Lions Cancer Institute Inc. as at 30 June 2012 and its performance for the year ended on that date.
2. At the date of this statement, there are reasonable grounds to believe that Lions Cancer Institute Inc. will be able to pay its debts as and when they fall due.

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



Director



Director

Dated: 29-10-2012

Perth, Western Australia

LIONS CANCER INSTITUTE INC  
A.B.N. 49 158 959 834

INDEPENDENT AUDIT REPORT  
TO THE MEMBERS OF  
LIONS CANCER INSTITUTE INC

**Report on the Financial Report**

We have audited the accompanying financial report, being a special purpose financial report, of Lions Cancer Institute Inc, which comprises the statement of financial position as at 30 June 2012, and the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, a summary of significant accounting policies, other explanatory notes and the Directors declaration.

*The Responsibility of Directors for the Financial Report*

The Directors of the association are responsible for the preparation and fair presentation of the financial report and have determined that the accounting policies described in Note 1 to the financial statements which form part of the financial report are appropriate to meet the financial reporting requirements of the Institute and are appropriate to meet the needs of the members. The Directors responsibility also includes establishing and maintaining internal control relevant to the preparation and fair presentation of the financial report that is free from material misstatement, whether due to fraud or error; 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 financial report based on our audit. No opinion is expressed as to whether the accounting policies used, as described in Note 1, are appropriate to meet the needs of the members. We conducted our audit in accordance with Australian Auditing Standards. These Auditing Standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the association's preparation and fair presentation of the financial report in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the association's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by Directors, as well as evaluating the overall presentation of the financial report.

The financial report has been prepared for distribution to members for the purpose of fulfilling the Directors financial reporting under the Institute. We disclaim any assumption of responsibility for any reliance on this report or on the financial report to which it relates to any person other than the members, or for any purpose other than that for which it was prepared.

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

LIONS CANCER INSTITUTE INC  
A.B.N. 49 158 959 834

INDEPENDENT AUDIT REPORT  
TO THE MEMBERS OF  
LIONS CANCER INSTITUTE INC

**Independence**

In conducting our audit, we have complied with the independence requirements of Australian professional accounting bodies.

**Qualification**

The directors have determined that it is not practicable to establish satisfactory control over monies received from donations and other fund raising activities prior to recording in the Institute's financial records. Hence my audit procedures relating to income from those sources have been restricted to the amounts recorded in the Institute's financial records. I am therefore unable to express an opinion whether revenue from donations and other fund raising activities, included in the accompanying financial report, is complete.

**Auditor's Opinion**

In my opinion, except for the effect on the financial statements of the matter referred to in the qualification paragraph, the attached financial report presents fairly, in all material respects the financial position of the Institute at 30 June 2012 and of the financial performance for the year then ended, in accordance with the accounting policies described in Note 1 to the financial statements.

**Owen & Plaistowe**  
Certified Practising Accountants



Hugh M E Plaistowe  
Partner

Dated: 8 November 2012

Perth, Western Australia

## APPENDIX A

### Source(s) of Voluntary Revenue

The sources of voluntary revenue received by the licence holder during the financial year were as follows:

- Cash donations received directly from people (including street and door-to-door collections, postal collections, collection boxes and organised fundraising appeals).

## APPENDIX B

### Significant Control Requirements

The financial management and fundraising activities of the licence holder should be conducted in accordance with, but not limited to, the following provisions of the Regulations:

#### *Financial Management*

- Monies received should be banked within seven (7) days of receipt in accordance with regulation 11(a);
- An asset register should be maintained in accordance with regulation 11(c);
- Every bank account should be operated by two (2) officers of the organisation in accordance with regulation 11(d);
- Investments should be in accordance with regulation 16 of the Charitable Collections Amendment Regulations (1998).

#### *Fundraising*

- Monies received from collectors and fundraisers should be paid to the licence holder within fourteen (14) days of receipt in accordance with regulation 11(b) of the Regulations;
- Receipts should be completed for all monies received;
- The Statement of comprehensive income should be sufficiently detailed to enable identification of all charitable collections received and the manner in which the collections have been dealt with;
- Fundraising expenses (i.e. salaries, wages, commissions and any professional fundraising fees) should be disclosed separately in the accounts;
- The licence holder should be collecting monies and goods, and should be disbursing those monies and goods, in accordance with the organisation's objectives.

**LIFE FELLOWS  
of the  
LIONS CANCER INSTITUTE INC**

**Mr. ALISTER TURNER MBBS FRCS FRACS** PLASTIC SURGEON

**Mr. ROBERT FITZPATRICK MBBS FRCS FRACS** PLASTIC SURGEON

**Mr. BARRIE LYKKE MBBS FRCS FRACS (RETIRED)** PLASTIC SURGEON

**Dr. KURT GEBAUER MBBS FACD** ASS. PROFESSOR

**Dr. LESTER COWELL MBBS** PRIMARY CARE SKIN CANCER PRACTITIONER

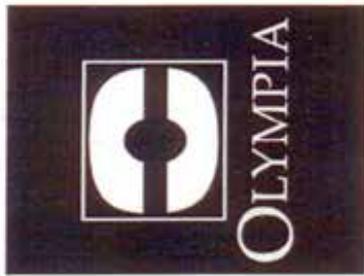
**Mrs. MONIKA COWELL** DERMোগRAPHER

**Ms. SUSAN GODDARD BA App. Sc FRCNA (retired)** REGISTERED NURSE

**PDG COLIN BEAUCHAMP AM JP**

**PDG RON VAUGHAN (deceased)**

**Mr. DON PHILLIPS**



# Olympia Diaries & Calendars

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## FREECALL: 0417 187 780

website: [www.olympiapublishing.com.au](http://www.olympiapublishing.com.au)

**Lions Cancer Institute Inc**  
HEALTHY PREVENTERS  
*Saving Lives in our Communities through Research*

**LCF**  
LIONS CLUBS INTERNATIONAL FOUNDATION

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Lions Clubs of Western Australia  
Private & Corporate Sponsorship  
Olympia Diaries & Calendars 0417 187 780

T.S.E. (Transport Spares & Equipment) Ph: 9451 4288  
Allight Pty. Ltd. Ph: 9302 1622  
J R H Signs Pty. Ltd. Ph: 9359 4067

DO NOT OVERTAKE TURNING VEHICLE

Olympia is a wholly Australian owned company that helps the community through supporting cancer research. Part proceeds from the sale of all Olympia's calendars are donated to the Lions Cancer Institute (Inc.) to help in the fight against cancer. Calendar customers receive a Certificate of Appreciation in acknowledgment of their support of a very valuable cause.

## SKIN CANCER RISKS

### A persons risk of skin cancer can increase with these following factors:

- 5 or more moles are present on your arms, not including freckles.
- If skin cancer or a non malignant mole has been previously removed
- If they have an inflamed sore that doesn't heal or a mole or freckle that is changing colour
- If they have a family history of melanoma
- If as a child they has blistering sunburn, bad enough to keep them out of school
- Skin damage caused from UVR (Ultra violet radiation) exposure. Accumulated skin damage can become skin cancer
- If they are an indoor worker who enjoys bursts of sun at the weekends or when on holidays

### Skin cancer can be prevented:

- Avoid direct sunlight between the hours of 10 am and 3pm
- Use shade where possible
- Wear a broad brimmed hat
- Wear suitable clothing that covers most of the skin
- Use water resistant SPF 30 sunscreen to cover all areas not covered by clothes. Apply regularly.
- Use Australian Standard sun glasses to protect eyes
- Have between your toes, and the soles of your feet, checked. Mutant damages cells can travel and damaged upper body skin may show as skin cancer anywhere

## **WARNING:**

**Skin damage can not be reversed;  
only further damage can be prevented**









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YORK WA 6302