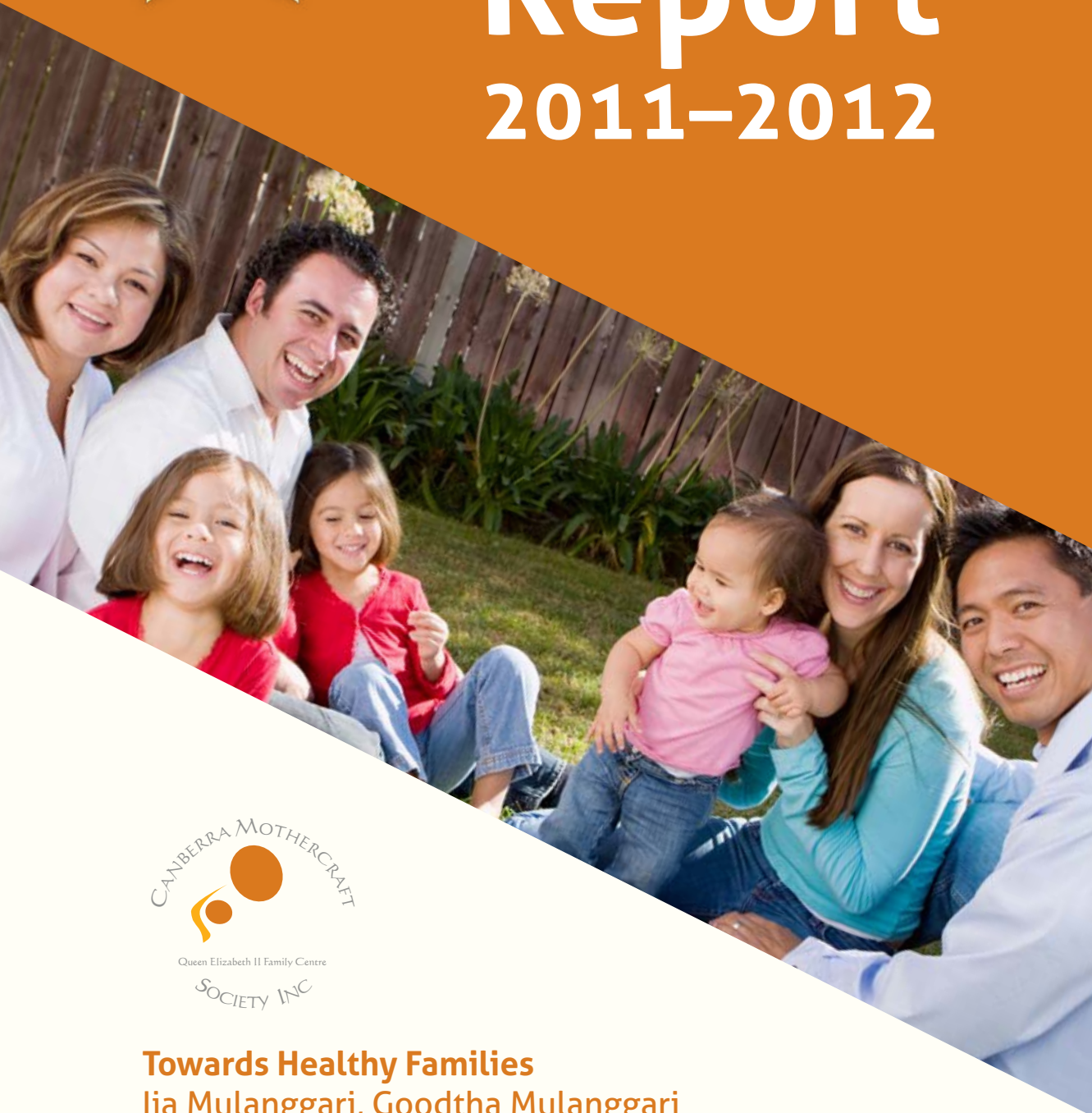


Quality
Improvement
Council
Accredited

Annual Report 2011–2012



Queen Elizabeth II Family Centre

Towards Healthy Families
Ija Mulanggari, Goodtha Mulanggari
Thriving Mothers, Thriving Babies



Canberra Mothercraft Society Inc.
129 Carruthers Street
(PO Box 126)
Curtin ACT 2605
Australia
Ph: 02 6205 2333
Fax: 02 6205 2344
www.cmsinc.org.au
email: cms@cmsinc.org.au

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The Canberra Mothercraft Society Inc

The Canberra Mothercraft Society Inc (CMS) is a principal health service provider to families of young children in the Australian Capital Territory (ACT) and surrounding region of New South Wales (NSW). CMS works with ACT and NSW government and non-government health and social service agencies in meeting the evolving primary health and social service needs of our community. We strive to provide primary health care service, at the Queen Elizabeth II Family Centre (QEII) and community development programs to families of young children that are contemporary, flexible, effective and responsive.

Since 1927 the Society has provided professional health and social services to families of young children in the ACT and surrounding regions of NSW. Since 1963 it has provided residential services currently provided at the Queen Elizabeth II Family Centre in Canberra. The distinction of the Society lies in the fact that it demonstrated very early in the history of the new capital, and ever since, its capacity to administer and deliver complex community services with economy, responsiveness to community needs and with warm humanity.

Organisational Governance

CMS has a policies model of governance. CMS establishes the strategic directions and monitors, through its Board and Committees, the achievement of the Strategic Plan. CMS employs a Director of Nursing and Midwifery/Executive Officer to manage the operationalising of the Strategic Plan.

The CMS Board is made up of eleven members—ten members from the community and one Honorary Medical Officer position. The Board consists of:

- the President and four office bearers;
- six ordinary Board Members; and
- one Honorary Member.

**"I'm a new woman, I'm
happy my son's happy.
I just can't put into
words how special
this place is."
-Sally**

Vision

Towards Healthy Families

Ija Mulanggari, Goodtha Mulanggari

Thriving Mothers, Thriving Babies
Ngunnawal meaning

Mission

- The ACT community knows, values and supports CMS
- Expand programs
- Maintain and develop existing programs
- Strengthen links with government/ non-government sectors

In relation to service provision we place a high value on providing a safe, caring and supportive environment that:

- respects individual and cultural differences;
- promotes equity, access and empowerment;
- enables staff to achieve the highest professional standards that reflect best practice and research;
- promotes cooperation and collaboration with other service providers; and
- advises government on health needs of families with young children.

Values

In relation to children and families we place a high value on:

- promoting the physical, emotional and psychosocial wellbeing of children and their families and strengthening family resilience;
- enhancing parenting confidence and infant health, whilst supporting new parents and carers; and
- achieving effective outcomes.

2010 – 2015 Strategic Directions

To achieve our mission CMS aims for results in these strategic directions:

Capacity Building
Community Development
Service Expansion

Each of our strategies is implemented utilising the principles and practices of continuous improvement and from the perspectives of: service delivery; education; research; and clinical and corporate governance.

We are committed to developing actions to deliver outcomes. Specific actions are incorporated into our: Business Plan, Risk Management Plan; and Quality Improvement Plan.

Capacity Building

At CMS capacity building is the process of building the potential for CMS to respond effectively to the needs of our community. Capacity building is through a coordinated process of deliberate strategies to:

- upgrade skills; improve clinical and corporate governance; and
- strengthen the organisation.

Specific strategies:

- build upon the capacity of our people; and
- enhance our clinical programs and develop new programs.

By 2015 we will have:

- developed and implemented a program specific to the needs of parents and infants with disabilities;
- expanded our residential program follow up;
- continued to build the CMS Scholarship Fund and disseminate scholarships;
- demonstrated consistently high quality services and resources through good clinical and corporate governance; and
- confirmed that we are a high performing team.

Community Development

At CMS community development is both a process embarked upon and an outcome of many and varied processes and strategies that are purposefully initiated—and sometimes occur spontaneously—towards enhancing the experience of children and their families in our community.

"The staff gave me the self confidence that I lacked. I also think their attitude of another settling period and a fresh start was critical."
-Nester



Specific strategies include:

- building upon our community development programs; and
- focusing on the needs of vulnerable families.

By 2015 we will have:

- developed and implemented programs that meet the specific needs of fathers based upon research recommendations;
- undertaken a literature review, service scoping and developed a community development strategy for vulnerable families;
- completed a scoping of services for young parent families and implemented strategies to meet identified gaps;
- enhanced programs to ensure families experiencing grief are met; and
- ensured the Relaxing Into Parenting Program is enhanced.

Service Expansion

At CMS service expansion is the activity, systems and processes for creating, communicating, delivering and expanding upon services and ideas that have value for our clients, customers, partners, other stakeholders and society at large.

Specific strategies include:

- developing and continually improving our business and clinical systems; and
- grow as a service.

By 2015 we will have:

- continued to demonstrate that our clinical and corporate governance systems are of the highest standards;
- developed a self directed learning parenting program for use by health professionals in our region; and
- expanded our residential program follow up.

Canberra Mothercraft Society Board

Jane Smyth (President)	Dip SKTC, BEd (Early Childhood)
Viola Kalokerinos (Vice President)	
Julien French (Secretary)	B Arts; Grad Dip Ed (Secondary), MEd
Chin Kui Foon Wong (Treasurer)	General Nursing Cert; Midwifery Cert; Perinatal Intensive Care Certificate; BApp Sci (Nursing Sc.), MEd(Professional Development)
Lynne Johnson (Public Officer)	MEd (Counselling); BA Speech Pathology
Louise Allison	BEd (Teacher Librarian)
Peter Black	MBBS (Syd), FRACGP, DRCOG
Rose Mason	PhD
Philippa Lynch	BA LLB (Hons)
Dr Sue Packer (Hon Medical Officer)	MBBS AM FRACP
Wendy Saclier	BA Speech Pathology

President

Perhaps it is a mark of success that the Queen Elizabeth II Family Centre at Curtin is better known than its parent organisation, the Canberra Mothercraft Society (CMS). There is great satisfaction in this: CMS has always responded to community needs and in 2013 its 'offshoot', better known as 'QEII', will mark fifty years as a key health service provider to families of young children in Canberra and district. Thousands of families have been helped—mention QEII and you will be rewarded with stories and anecdotes. Many people recall help they and their family have received; others describe support given to them and their babies in the former Civic

or present Curtin premises. I particularly enjoy the positive acknowledgement of robust adults who claim proudly to have been at QEII as a baby.

CMS promotes the physical, emotional and psychosocial wellbeing of children and their families and the strengthening of family resilience. QEII is the manifestation of the high value CMS places on providing a safe, caring and supportive environment. Led by the visionary Mary Kirk, Director of Nursing and Midwifery and Executive Officer, the QEII staff team have continued in the past year to maintain the highest professional standards.

The most significant acknowledgment of this in 2012 has been reaccreditation with the Quality Improvement Council in July. Thanks are due to QEII staff and

**"The support
staff have been
fabulous!"
-Gayle**

CMS Board Members who participated throughout this important process. We are fortunate in having, in Mark Kirk, a leader who welcomes the work undertaken for accreditation as an opportunity to take a close look at all aspects of the organisation with a view to making the service the best it can be. Congratulations to Mary and her team for full accreditation for a further three years.

At the 2011 Annual General Meeting we honoured and thanked Chin Wong for her three year presidency of the Society. Chin showed us how to lead with 'a light hand and a firm touch' and we thank her for her work in the role since 2008. Now Chin remains on the CMS Board as CMS Treasurer and joins Past Presidents Lynne Johnson and Wendy Saclier. The continuing contribution of all three is highly valued.

Our 2011 AGM Guest Speaker was Mary Kirk who delivered an inspiring address, *'Taking Stock of a Quality Organisation'*. We were invited to look back at CMS from a perspective fifteen years into the future—a useful exercise for those involved in an organisation which is currently functioning well. Mary drew on the results of a series of evaluations of CMS and its services and asked 'Is our way the right way?' and 'How do we become innovative while staying focused on what we do?'.

Taking up this challenge and recognising the need to refresh our understanding of

roles and responsibilities, Board members decided, in 2012, on governance training for all. Committees of the CMS Board have now been re-organised and are working effectively to help CMS achieve its mission of expanding programs, developing existing programs, strengthening links with government and non-government sectors as well as working to ensure that the ACT community 'knows, values and supports CMS'. A valuable opportunity to achieve the last mentioned will present itself in 2013 when QEII reaches fifty years as a health service organisation. The Community and Public Relations Committee is designing events for the anniversary. A gala dinner is planned as the main celebration; art work is envisaged as a momento and an active group, led by Lynne Johnson, is collecting archival material and undertaking historical research.

The CMS patron is Annette Ellis, former federal Member of the House of Representatives and we look forward to enhancing our association with Annette. The Board has farewelled Marg Braithwaite who shared her skills and served CMS enthusiastically for



many years. Louise Allison has joined the Board and has quickly become an energetic contributor. A most sincere thank you to Margi; a warm welcome Louise.

Community involvement of CMS is demonstrated at several levels. We appreciate our links with the *National Council of Women* where we are most ably represented at Branch level by Wendy Saclier. Our *Wednesday Knitters*, whose meeting place is QEII, continue

generous support of the Scholarship Scheme and Grand Jugglers Program—we thank them for their generous and continuing support. The *Thursday Friendship Group* engages with CMS in a creative and collaborative endeavour. Jenny Adams of *Addicted to Fabric* in Woden gives generous support with materials and space and a hard-working and talented group of women design and make unique and beautiful quilts for distribution by our staff to Canberra families—a truly generous activity especially considering the makers never know the recipients of their beautiful work.

At monthly Board meetings regular reports are a highlight. We hear results of the overall activities of QEII from

**"Our 4 night stay at QEII has been amazing.
Not only has our daughter started to
turn the corner with settling and
sleeping patterns, I personally
have been listened to
and guided by the
amazing staff."
-Clare**

Mary Kirk and of the work of the professional team of committed midwives and nurses led by Clinical Manager Nursing and Midwifery, Liz Gardiner. We appreciate learning of the important and responsive CMS Community Development Programs delivered by Emma Baldock, Counsellor and Community Development Officer. The Board recognises the importance of all these services to QEII and to the wider community. The smooth running of the organisation is maintained by Robyn Steele, Operations Manager and the regular financial 'green paper' is ably prepared by Kathryn Forster. The high standard of the work of all staff—clinical, administrative and support—is recognised and greatly appreciated by all Board members. Mary's dictum of 'truth, trust and transparency' is practiced with great results. The organisation runs well and happily thanks to these highly skilled and capable women. We are indeed a fortunate organisation. Our sincere thanks to all of our committed staff who, as well as making a difference for young families, help to make Board membership such a privilege.

The CMS Board has been pleased to support Mary Kirk in her role as Professional Member of the Nursing and Midwifery Board of Australia, President of the Australian Association of Parenting and Child Health and Asia Pacific Board Member of the International Confederation of Midwives. Emma Baldock has been appointed to Chair the Nursing and Midwifery Board of Australia ACT. The Board recognises these wider contributions and the value of professional relationships with local, national and international organisations.

It gives me pleasure to report that CMS continues to be actively guided by its vision 'Towards Healthy Families'. The Society has achieved results in its three Strategic Directions: Performance and Capacity Building, Community Development and Marketing and Promotion. We have an integrated

governance model that addresses both corporate governance and clinical governance of CMS and QEII. The Board Committees have successfully fulfilled their responsibilities; we can report compliance with all statutory, legal and contractual obligations for the period. The Board and staff of CMS have ensured the continuation of a safe, responsive and efficient service. We aim to continue to improve all aspects of our operation.

My personal thanks go to Board members and staff for their individual contributions, their energy and their commitment as well as for their support and friendship. In particular I thank Mary Kirk for her generous, professional and untiring assistance and for all that I have learnt by working with her. To Viola Kalokerinos, my special appreciation for being such an active Vice President and for her warm support in so many ways.

The CMS Board can now look forward to 2013 when the Canberra Mothercraft Society and the Queen Elizabeth Family Centre will joyously celebrate its first

half century. This great achievement is the result of responsive and ongoing attention to the needs of families of young children—something which will continue. At a time when our organisation is functioning well we are mindful that, for many families, life is anything but easy.

For what we hope will be another fifty years, we will aim to provide the very best of care and to work at the highest level *Towards Healthy Families* .

Jane Smyth
President



**"I would like to express the greatest of gratitude that such an organisation exists for all families in this region. To be given an opportunity to focus solely on our daughter's needs, with the vast knowledge imparted to me by your registered nurses and midwives, has boosted our confidence as parents."
-Alysha and Mark**



Director of Nursing & Midwifery/ Executive Officer

2011/2012 has been another busy and rewarding year for everyone involved in supporting the Canberra Mothercraft Society to demonstrate sound governance of the Society and the excellent services provided at the Queen Elizabeth II Family Centre. Our approach in integrating our clinical governance, corporate governance, risk management and continuous improvement frameworks for the delivery of services has served us well. The Board and staff collaborated to successfully achieve another three years accreditation with the Quality Improvement Council. With the support and guidance of our quality manager, Ellen O'Keefe, we were able to achieve this outcome while maintaining our high level of service.

From a clinical services perspective QEII delivered beyond all agreed contracted outputs with the ACT Government Health Directorate. Under the leadership of Liz Gardiner, Clinical Manager Nursing

and Midwifery we continued to lay claim to being responsive and effective and this was exemplified through the accreditation process as well as through external evaluations and internal quality improvement projects. An external consultant, Ms Jan O'Connell, completed the C-Frame Evaluation which showed QEII surpassed expected outcomes of the platform for the delivery of care. Ms Barbara Chevalier's comparative qualitative analysis of our client feedback also demonstrated excellent client satisfaction. At the same time both reports were valuable in that they also provided opportunities for improvement.

An important project that was completed during the period was the Clinical Handover Project. The comprehensive nature of this evidence based best practice project and the achievement of significant change to practice resulted in it being a finalist in the ACT Quality in Healthcare Awards. Jenny McLoughlin, Chris Patterson and Annie Schofield are congratulated for this leading practice project.

**"Staff offered direct and practical suggestions based on my and my baby's needs. My experience was very gentle and supported."
-Marian**

Our community development programs continued to grow and develop. The partnership with Relationships Australia Canberra and Region (RAC&R) enhanced the Relaxing Into Parenting Program with the inclusion of the RAC&R Baby Makes Three Program. Evaluations of this joint program were outstanding and it is a credit to all involved that they were held in all Canberra regions. Our work in relation to Grandparents continued and the Grand Jugglers program has been extended to include children in care.

Over the period the Canberra Mothercraft Society can be proud of its achievements against the goal to have an appropriately qualified workforce available to meet the complex needs of our client population. In striving to achieve this goal staff have been supported, through the QEII budget and the CMS Scholarship Fund, to study, research, attend training, conferences and seminars as well as a comprehensive in house professional development program for all staff. Shane Parisotto's Masters

by Research project provided us with valuable insight into the development and successful implementation of clinical practice guidelines. The importance of this work cannot be overstated and she is congratulated for this achievement. This year CMS saw its first staff member graduate from a Bachelor of Midwifery program. Our warmest congratulations are extended to Julianne Nissen. We also extend our congratulations to the University of Canberra for establishing this important program in Canberra for women and their families.

CMS and QEII have once again come in on budget with all liabilities covered and achieved a positive audit report. The audit also reflected sound business practices which were also confirmed in the accreditation process.



The Scholarship fund has continued to grow through donations and fees from staff undertaking consultancies with one staff member allocated a scholarship to undertake formal qualifications in infant massage.

The opportunity to engage beyond our own service brought invaluable experience and provided opportunity for us to promote our work in wider forums. CMS demonstrated its capacity to contribute beyond its own borders with staff involved on national regulatory boards and local and international professional boards as well as local health and social service committees. Our membership of the Australian Association of Parenting and Child Health, through collaboration and sharing,

has continued to enhance our service from both clinical and administrative perspectives. These opportunities exposed us to other ways of knowing and doing and we are most grateful to CMS for their encouragement and support.

I especially recognise the contribution volunteers made to our service. They added a joy to our work and made a difference for families which they did so generously without seeing first hand the results of this giving. I especially acknowledge the Wednesday Knitters, the Thursday Friendship Group and Jenny Adams at Addicted to Fabric. Without their donations our community development programs would not reflect such high quality and the families would not have been enriched by unexpected and very welcome gifts of quilts at a time when they so often feel isolated, alone and not valued by society.

**"We are going away much stronger than when we arrived, with tools that will help us both."
-Andrew and Fran**

As the year progressed we farewelled two long and faithful CMS staff members. Jill McCormack served CMS as a member of the support staff for over 20 years and Lucy Malysiak for over 30 years nursed challenged and overwhelmed families back to health and confidence. We thank them both for their contribution and wish them the very best for the future.

No service can achieve what we have this year without good people. At CMS and QEII I believe our people are 'simply the best'. I take this opportunity to thank the Board for its unwavering support over the past twelve months. While respecting the delegation for us to achieve the strategic directions they were always available with sage guidance and support as required. I extend my special thanks to Jane Smyth and the Chairs of the Committees. Finally my special thanks and congratulations to the staff and the team of leaders Robyn Steele (Operations Manager), Liz Gardiner (Clinical Manager Nursing & Midwifery), Judy Lamond (Professional Development Officer), Emma Baldock (Client Counsellor & Community Development Officer) and

Ellen O'Keeffe (Quality Manager) for their outstanding performance in a year of high demand and high achievements.

Mary Kirk

Director of Nursing & Midwifery/
Executive Officer



Clinical Services

QEII supports families by taking a family centred and strengths based approach to build positive relationships to support our clients, to make joint decisions and negotiate future decisions together.

When clients become more involved in their care, they gain a greater sense of control, are more able to contribute and commit to change, and have increased satisfaction with their care.

The admission criteria to QEII for families with children under three years of age included:

- Lactation and feeding problems
- Failure to thrive
- Unsettled babies
- Child at risk
- Mood disorders
- Special needs families
- Parenting support
- Behavioural problems

All clients admitted to the Centre during the year met the admission criteria.

Client feedback

In the 2011/12 qualitative analysis and comparative study on client feedback, an overwhelming number of clients (80%) were highly complimentary of the care and support they received at QEII. From a clinical perspective clients also highlighted the need for us to address consistency of carer and advice. Our Handover Project and allocation process has gone part way to ameliorating these issues and we also commenced a clinical documentation project.

C-Frame Review

C-Frame is the platform for the delivery of primary health care services at QEII. Underpinned by a primary health care philosophy, which ensures informed decisions by the client within a collaborative relationship and declares the role of the health care providers, C-Frame is based on a thorough knowledge and understanding of each family's situation, values, strengths, problems, goals and aspirations. Independent Consultant, Ms Jan O'Connell, evaluated our C-Frame's effectiveness as the platform for the delivery of clinical programs at QEII. The report showed that we accurately reflected C-Frame and the principles and practices of working in partnership with families utilising a strengths-based approach. Ms O'Connell made recommendations in her final report, including QI projects providing education to all staff on group facilitation, and reviewing appropriate topics for groups and the educational prompts/formats for each group session.

"We've sorted out the causes of our issues and got lots of advice—it's been great and we are now really positive about the likely outcomes."

-Jason and Rebekah

C-Frame Features	Achieved
Collaborative and engaging	✓
Sensitive	✓
Comprehensive approach	✓
Flexible	✓
Continuous	✓
Future orientated	✓
Evidence-based	✓
Multidisciplinary	✓
Wide utility	✓

In January 2012 the project was evaluated and deemed a success.

The project is a finalist in the 2012 ACT Quality in Healthcare Awards.

The improvements observed as a result of the project included:

- spread of leadership responsibilities;
- changes to staff allocation;
- development and implementation of a monthly audit tool to monitor the adherence to the new policy (which has been anchored in culture through all QEII policies);
- time saving resulting in twice weekly professional development sessions; and
- handover model and methodology included in staff orientation and for re-orientation on return to work.

I especially congratulate the project team of Jenny McLoughlin, Annie Schofield and Chris Patterson. I also thank Dr Carmel McQuellin from the University of Canberra for sharing her research and clinical governance skills with the team.

Clinical documentation

QEII has commenced an extensive review of its clinical documentation to ensure that its continued application reflects best practice and promotes consistency in care and advice as well as accountability and responsibility for professional practice.

Clinical Handover

Our main quality research activity for the year was the Clinical Handover Project. The new handover was researched, piloted, implemented and evaluated. The goal was that clinical handover at QEII would be consistent with the World Health Organisation's "Action on Patient Safety" and use the Six Key Principles for clinical handover set out by Australian Commission on Safety and Quality in Healthcare. There were champions elected to work with staff, and it was implemented over a four month period.



Emergency and risk audits

One of the Safety and Quality projects commenced following accreditation was the review of emergency audits making staff more confident and aware of emergency procedures and increasing their awareness of safety, risk factors and infectious control.

Risk factors identified from incident forms have seen all infant equipment (high chairs, bouncinettes and booster seats), fitted with 5 point safety harnesses.

We have seen less early client discharges because of illness compared to same time last year following the introduction of client and infant hand washing project.

Promoting best practice

Throughout the year we aimed to have effective collegial relationships with other health professionals and promote a culture that supports the needs of the workforce that serves our client population. Dr Sue Vickers and Jenny McLoughlin RN, RM gave two outreach workshops to GP practice nurses through ACT Medicare Locum. These workshops aimed to encourage and increase the nurses' knowledge and awareness of the role they can play in promoting and protecting breast feeding with clients in their practice. Jenny is also a member of the Baby Friendly Hospital Initiative (BFHI) and acted as an advisor and assessor for their training and assessment. She also participated as a committee member of the ACT Breast Feeding Strategic Plan.

Our relationship has grown over the period with similar services throughout Australia through clinical meetings of the Australian Association of Parenting and Child Health. Policies and operating procedures have been shared and common projects undertaken.

An appropriately qualified workforce

Congratulations are extended to staff who gained further qualifications this year including a Masters of Child and Family Health, Graduate Diploma in Midwifery, Bachelor Degree in Midwifery, two Graduate Certificates in Child and Family Health, and a Certificate IV in Workplace Training and Assessment.

Four staff completed a 10 week breast feeding course sponsored by the ACT Breast Feeding Strategy, and two staff attended a six day Family Partnership level one training.



Through the Professional Development and Evaluation Program process staff have been supported to identify their goals and demonstrate continuing professional development (CPD) and competence. In the event of being audited by the Nursing and Midwifery Board of Australia I am confident all staff will be well able to demonstrate CPD, competence and currency of practice.

We were very sad to see one of our nurses Lucy Malysiak retire after 30 years of devotion and care to our organisation and the families that passed through our service. Lucy was also a Workplace Safety officer and fulfilled this role with the same enthusiasm and diligence that she applied in her clinical role.

I thank the dynamic clinical staff who have demonstrated a high level of confidence, competence and caring for our clients and for supporting me in my role. I also thank our medical officer Dr Sue Vickers and client counsellor Emma Baldock for their role in the provision of services at QEII. The retention of such a skilled workforce allows QEII to be an exemplar of excellence that has risen to the challenge of meeting the ever changing needs of our community over the past year.

Elizabeth Gardiner

Clinical Manager Nursing and Midwifery



Counselling at QEII

The birth of a child has been identified as one of the biggest challenges couples will meet and many parents struggle with their transition to parenting. Primary health counselling services were offered to

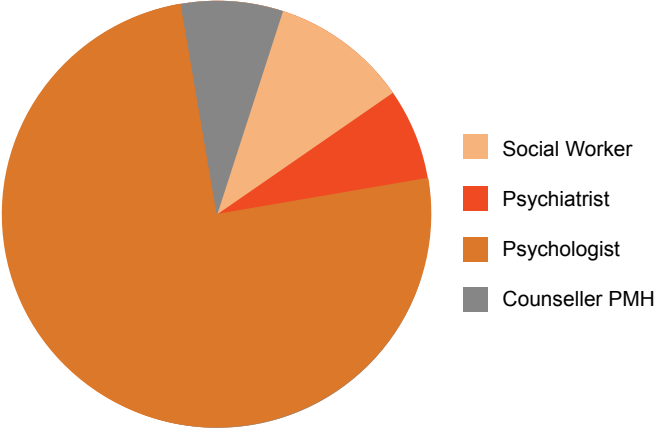
resident primary carers, including couples during their admission to QEII's residential program who were not currently accessing psycho-social or mental health providers in the community.

Seen by Counsellor

2011/12	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June
	14	12	10	7	14	13	22	22	23	12	21	23
	21%	16%	13%	12%	19%	23%	47%	32%	29%	20%	28%	30%

The most common issues identified by families included: stress and anxiety; sleep deprivation; loss of energy and motivation; increased irritability and arguing; difficulty negotiating roles and responsibilities; loss of career and contact with work colleagues; a sense of incompetence; isolation; and loneliness. All of these factors can lead to postnatal anxiety and depression.

QEII Client referrals



Counselling interventions utilised at QEII included validating and normalising parents’ experiences of the transition to parenting and providing education, information and support to regain equilibrium and enhance their capacity through family, social and professional supports. Education and skills development included supporting families through relaxation and mindfulness practices, relationship skills and attachment parenting skills.

In addition to the counselling assessment, and skills development, a critical aspect of our work was to ensure our clients receive appropriate referral for continuing care following discharge from QEII. Referrals were made to secondary services within CY&WH Program, child & family counselling and mental health

services, the client’s general practitioner, psychologists, counsellors and social workers. In doing this important aspect of our work we maintained a comprehensive professional data base of services and providers in the ACT and surrounding regions of NSW.

In addition to attending my own clinical supervision sessions, I provided clinical supervision to women’s health nurses and midwives to support and strengthen professional practice.

Emma Baldock
Client Counsellor

Community Development

Relaxing into Parenting Program

We strengthened our capacity to deliver the program through partnerships with ACT Government Community Services Directorate and Relationships Australia, Canberra & Region (RAC&R). A grant from the *ACT Health Directorate Health Promotion Funding* supported CMS to achieve expansion and sustainability of the program over the past twelve months and into the future. Achievements included:

- Programs conducted at West Belconnen, Gungahlin and Tuggeranong Child and Family Centres;
- Facilitator training for nineteen facilitators
- Student Evaluation Report of 2010-2012 Health Promotion Fund Grant;
- Presentation of papers at three conferences:
 - ◇ International Confederation of Midwives Asia Pacific Conference;
 - ◇ Women's Healthcare Australasia Postnatal Care Forum;
 - ◇ Australian Association of Infant Mental Health National Conference;

- Inclusion of Baby Makes Three (Relationships Australia Canberra and Region); and
- Development of new promotional materials increasing program visibility and access for all expectant families in the ACT and surrounding region.

Grandparents ACT & Region

Grandparents ACT & Region continued to grow with support and education groups still being conducted each month at Marymead Child and Family Centre. CMS worked with Marymead and Relationships Australia to work in partnership with ACT Community Services Directorate to ensure Grandparents ACT & Region support and education groups meet the needs of grandparents parenting grandchildren. CMS was also represented on the Kinship Advocacy and Support Service Reference Group for Grandparents parenting grandchildren who have Orders.

Grand Jugglers

Grand Jugglers Circus Program provided through Warehouse Circus grew with the generous support from *CMS Wednesday Knitters* and the *Canberra Southern Cross Club Community Grants Program*. The program has been expanded to include children in kinship care, from the age of three to seventeen.

**"They made me feel supported and important in the hard role I have of being a mum dealing with a child with sleep issues."
-Michelle**



Quilts

The *Thursday Friendship Group* with generous sponsorship of *Addicted to Fabric* owner Jenny Adams provided beautiful quilts which we have the joy of distributing to: kinship care families; Karinya House for women who are pregnant or parenting newborns; and Companion House for newly arrived people who have sought refuge in Australia from persecution, torture and war related trauma. This year we were also able to distribute on behalf of the *Thursday Friendship Group* comforting quilts to Abbeyfield House Curtin as well as residents at L'arche.

Growing our Capacity

CMS also undertook advisory roles to professional, government and non-government peak bodies through representation on federal and territory advisory committees. A recent appointment is the ACT Health Senate.

Emma Baldock

Community Development officer

Professional Development

CMS identified and ensured that the professional development program throughout the year provided a commitment to an appropriately qualified and competent workforce that demonstrated the traits of a learning organisation with positive outcomes.

The organisation wide approach to professional development is framed upon the learning needs of all staff being determined by their individual Professional Development Evaluation Plan. Achievable goals and time frames were outlined, based on individual and service needs, all of which went on to inform the organisation's development plan for the year. Implementation of the plan with ongoing review and evaluation outcomes were achieved.

The fundamental aim of the professional development program is to challenge and support all staff to meet the evolving needs

of our clients and also, for our professional staff to demonstrate competence and continuing professional development. As a result of this approach there were a number of related activities designed to contribute to the strengthening of our staff profile.

Striving to achieve a collective knowledge in relation to core areas of service provided our team with opportunities to strive together for excellence and continually work towards the improvement of services for our clients. All staff have demonstrated competence with basic life support and mandatory child protection education.

The knowledge and expertise required in our professional practice has significantly increased and continued to evolve as a consequence of research, evidence and subsequent changes to policy and practice. Professional Practice Symposiums that were held quarterly

"Assistance while settling my baby has made me much more confident and reduced my anxiety." -Di



provided all staff with the opportunity to transfer, develop and utilize the knowledge gained at conferences, seminars and other professional development activities. The symposiums encouraged open communication, shared learning, collegiality, team work and supportive relationships between staff. Some of the topics explored included:

- Working together with Culturally and Linguistically Diverse families;
- Picky Eaters and Problem Feeders;
- Infant Massage; and
- Infant Attachment and Safe Sleep Space.

The Professional Practice Symposium evaluation reports identified positive outcomes relating to staff skill development and staff satisfaction relating to ways to improve client care based on the latest research to support best practice.

Reflective Practice involves critical examination of our practice through a systematic self-reflection in developing critical thinking and problem solving skills. By reflecting upon our practice, clinical education sessions, journal reviews, case conferences and client feedback, innovative changes are made to enhance our professional practice and our delivery of care to ensure positive client outcomes.

A number of staff completed further undergraduate and postgraduate studies in:

- Bachelor of Midwifery;
- Graduate Certificate in Child & Family Health;
- Master of Nursing (Research);
- Master of Child & Family Health; and
- Comprehensive Medical Terminology ICD-10-AM



The regular review and evaluation of our clinical practice guidelines by the Education, Practice and Standards Committee ensured that changes in legislation and changes within the research literature inform our policy development and current practice. Through clinical placements our commitment to professional development was evidenced by our facilitation of many medical, nursing, midwifery and counselling students with positive evaluation feedback from students and also from staff mentoring students.

The clinical placements included students from the following:

University of Canberra:

- Graduate Diploma of Midwifery;
- Bachelor of Midwifery;
- Undergraduate nursing; and
- Bachelor of Counselling.

Australian Catholic University:

- General Nursing

Australian National University:

- Medical

Judy Lamond

Professional Development Officer

**"I learnt a lot. It built up my confidence with feeding, and being able to focus on my baby and myself was really important."
-Kylie**

Professional Development Statistics

	Staff	Hours
Mandatory		
CPR	43	86
Child Protection	40	73
Staff Induction	6	36
Training & Development		
Conferences, seminars and training	89	1563
Study bank	13	228
Student placements	34	860
Reflective practice	120	120
In-service	117	212
Committees		
Education, Practice & Standards	77	98
Safety & Quality	74	100
Year to date	616	3376

Administration and Support Service

The team of Administration and Support staff has continued to be committed to achieving excellence in the workplace and upholding CMS' vision of *Towards Healthy Families*. This has been another year of administration and support services staff working cohesively to maintain an efficient, competent and streamlined service to CMS, staff, stakeholders and especially our clients. Staff participation in the accreditation process assisted QEII to be accredited for 3 years, and they continue to be engaged in internal evaluation and improvement.

Reception services

As our front line service, our receptionists maintained a professional approach together with a warm welcome to all clients and their families, and visitors. Their positive attitude towards continuous improvement and collaboration with colleagues ensured that clients and others experienced the best first impression of QEII and services provided by CMS. The efficient admission and discharge processes also managed by our receptionists, has contributed significantly to client satisfaction as well as the efficient recovery of funds.

Facility and asset management

Facility and asset management continued to be managed proficiently. The diligent and positive relationships with contractors and suppliers ensured that the facility continued to be an efficient, safe and comfortable environment for staff, clients and visitors. Projects achieved this year include:

- Improved shelving for storage;
- Built-in storage cupboard to accommodate clinical equipment;
- Loft ladders to facilitate access to the ceiling for trades people;
- Environmental enhancement through repairs to the brass water fountain;
- Reupholstering of indoor/outdoor vinyl foam play equipment;
- CMS branded marquee tent to be used for CMS and staff activities;
- Enhanced stationary equipment; and
- Grounds refurbishment.

Support Services

Support services continued to run like a well oiled machine, ensuring that the welfare of clients is maintained with high standards of cleanliness, safety and comfort. The positive relationship and collaboration with our caterers have

Service data — Admission data

	11/12	10/11	09/10	08/09	07/08
Total admissions	1665	1692	1733	1694	1670
Readmissions	0%	0%	0%	0%	0%
Length of stay	3.6 days	3.6 days	3.5 days	3.5 days	3.4 days
Protective services admissions	26	34	30	30	27
Occupancy rate	90%	94%	93%	92%	89%
Cross border admissions	38%	37%	40%	44%	44%

resulted in significant improvements in client feedback in relation to meals. Support services received many compliments through our client feedback process in relation to hospitality services.

During the year we farewelled a much loved long time employee Jill McCormack, and also Wendy Pearce. We were fortunate to welcome Marissa Eldridge, Kerrie Brennan and Kaylene Murray who have capably filled gaps in the roster.

Data Management

Data collection was enhanced with trending analysis improved in relation to client satisfaction and incidents and accidents. Data management that relates to professional development activities of staff was also improved. The use of enhanced data has served to advance the work of the Safety and Quality Committee. Bi-annual Service Reports (including activity data) and Establishment Reports to the ACT Health Directorate were provided and the annual quality data cleansing audit was completed to ensure all information was accurate for the financial year.

Financial and human resource management

Our established systems ensure sound financial management practices are in place. The auditors have again expressed satisfaction and CMS's sound financial status means they remain a going concern. The funding grant through the contract with the ACT Health Directorate for the services provided at QEII remains our principal source of funding. We could not however have remained viable without ensuring accounts sent to private health funds on behalf of our private clients were recovered.

All obligations in relation to human resource management were met. Pay rises were paid immediately they were ratified, and we continued to meet service demands as contracted.

Robyn Steele
Operations Manager

Kathryn Forster
Finance Officer



QEII Staff Social Club

The Social Club is supported by a committee of staff representing each area within the Centre. The focus of its work is to enhance staff morale by: organising gifts of love to colleagues in our work family who have resigned, suffered illness or the loss of a loved one; funding Christmas celebrations; funding special events; and providing gifts to community groups such as Richmond Fellowship and Abbeyfield House at Christmas and Easter.

This year our Christmas celebrations included an afternoon tea with a gift certificate for all staff at a local restaurant. Staff enjoyed this gift from December 2011 until June 2012.

We again enjoyed the privilege of providing Easter eggs and Christmas stockings loaded with gifts, provided by staff, Board and other friends of QEII, for the young people at the Richmond Fellowship Houses in Curtin & O'Connor and gifts of hampers for the folk at the Abbeyfield houses in Garran and Curtin.

We thank the Board and Administration for their support of our giving scheme. Their encouragement and participation not only enhances the giving, it also adds to our sense of family and helps us demonstrate good corporate citizenship.

**“Each of you show a distinct passion for your work. Please know that you have made such a difference to my wife. I have learnt skills and gained knowledge that will be with me for the rest of my life.”
-Adam**



Safety and Quality

"Quality is not an act it is a habit" - Aristotle

Governance is the system used to ensure organisations are accountable for providing good, safe care through the management of risks and continuous practice improvement. This year CMS reviewed the governance arrangements as well as revised our interlocking set of plans aimed at improving health outcomes for clients. This provided the foundation for a committed approach to Safety and Quality that encompassed staff and client values, identified clear priorities, allocated resources, provided for education, addressed risk, and outlined the supporting committee and reporting structures, promulgated a culture wherein openness, mutual respect and teamwork were encouraged and rewarded.

We continued to work hard to deliver on quality and safety for everything we do—drawing on the best research and initiatives to deliver clinical outcomes that impacted positively on client care, in areas of parental/carers wellbeing, infant nutrition, child safety, attachment parenting and infection control. Research continued to be a key element of our activities and CMS remained committed to supporting research-driven clinical outcomes that impacted positively on patient care.

Accreditation

In July 2011, CMS and QEII, completed a three year accreditation cycle of self-assessments and reviews, culminating in an external review conducted by Quality Management Services Inc. (QMS), against the Quality Improvement Council (QIC) 6th Edition Standards. CMS was one of the first organisations to be reviewed against the 6th Edition Standards, and by meeting all the Standards, CMS attained Accreditation. By undertaking accreditation, CMS demonstrated a strong and unwavering commitment to safety and quality that resulted in demonstrable benefits, for clients, staff and the organisation.

This year we are in year one of a new cycle. We have developed and are progressing the CMS Quality Plan 2011–2014. We are using a governance-based model for safety & quality as documented in our Safety and Quality Framework.

Risk management

Risk management aims to reduce the chance of things going wrong, and when they do, to make sure lessons are learnt from incidents so that we can identify any problems we need to fix. The Risk Management Plan was reviewed and all controls were in place and monitored throughout the year.



CMS is committed to delivering care to our clients in the safest possible way. By identifying and managing incidents throughout the year we measured and monitored our standard of care to ensure it was appropriate and effective. We recorded and tracked incidents. All reported incidents were analysed and rated as to their severity classification and the type of review that may be required. Any incident that required investigation was further scrutinised. Recommendations were made, by the investigating team to reduce the chance of incidents happening again and to create improvement strategies. Recommendations were considered by the Safety and Quality Committee prior to implementation.

Client feedback

QEII is appreciative of the client feedback received. We continuously explored ways to encourage consumers, families

and carers to provide feedback—be it a comment, compliment, complaint, or suggestion. This was an important way to help us identify service improvements. The feedback throughout the year let us know what we are doing well and the suggestions helped with service planning and improvement. In response to client feedback received, we have added dimmer switches to the bedroom lighting and we have remodelled the infant examination area.

A comparative qualitative analysis project was repeated in relation to client feedback. An external qualitative analysis researcher was engaged to undertake analysis of 2011/12 client feedback data and then compared this with findings from the same exercise undertaken in 2010/2011. Clients were very satisfied with the services received, were more satisfied about hospitality services and led us to explore ways to improve continuity of care and consistent advice.



Our culturally diverse community

The community served by QEII is culturally, linguistically and socially diverse. CMS has a strong commitment to meeting the needs of all clients, including cultural, linguistic and religious needs. We demonstrated this commitment through the whole-of-organisation approach to cultural responsiveness:

- The leadership team's commitment to staff development and monitoring the community profile to ensure relevant services are provided;
- Staff were provided with development opportunities both internally and externally, with regular staff education sessions scheduled;
- Providing and using cultural diversity resources;

- Accredited interpreters are provided to clients and they are also asked to inform the client how to provide feedback and to identify any assistance required in providing feedback.

Significant projects

The quality improvement process that we utilised identified strengths and addressed areas for improvement. CMS is justifiably proud of the depth and breadth of quality activities undertaken. We are particularly pleased with the:

- Review of our clinical and operational policy framework and the enhancement of the model;
- Bedding down of the Clinical Handover Project resulting in a timely and effective handover that ensures safer handover of care at shift changes, this project is a finalist in the *ACT Quality in Healthcare Awards*;
- Efficient and effective handover there is increased time for opportunistic education, case review and networking;

**"Thank you so much for your help,
advice and amazing tips for settling
our little girl. Our stay was
amazing and we're getting
along famously!"
-Meg and Steve**

- Enhanced program of clinical and facility audits, including the introduction of a clinical handover audit and an enhanced hand washing audit;
- Repeating of the client outcomes post discharge review with clients reflecting that they were able to sustain the changes implemented while they were at QEII once they are home. It was particularly evident that if a client stayed for the full length of stay, they were more likely to sustain change into the future;
- Collaborative arrangement with Relationships Australia to deliver the Relaxing into Parenting Program and Baby Makes Three, as an integrated approach to prepare new parents for parenting;
- Completion of the research into the needs of the nutritionally compromised infant and reflecting the findings in our practice;
- Dissemination to like health care facilities, the findings of the external evaluation of the C-Frame platform for the delivery of care;
- Commencement of a project to review the documentation supporting the C-Frame platform for the delivery of care;
- Preparation for and the implementation of the Commonwealth Workplace Health & Safety Legislation;
- New infection control procedures for client and staff hand washing with a significant reduction of early discharge due to viral illnesses; and
- The ongoing longitudinal analysis of client feedback and incident monitoring.

All staff contributed significantly to the activities undertaken, resulting in the successful completion of multiple complex quality projects. Their dedication and commitment is reflected in the fact that so much has been enhanced by a small team of dedicated people working together for the families in our care.

Ellen O'Keeffe,
Quality Improvement Officer



Board Committees

Community and Public Relations

Julien French (Chair)

Viola Kalokerinos

Lynne Johnson

Louise Allison

Mary Kirk

Throughout the year the Community and Public Relations Committee has been involved in promoting the role of CMS in the community as well as focussing on enhancing contact between government and non government agencies. The Committee members were active participants in the Quality Improvement Council accreditation process and valued working with the staff as this comprehensive process unfolded. For some of us it was the first time to

be involved in accreditation and the opportunity to undertake a comprehensive self assessment process was invaluable.

The Committee reviewed its terms of reference and reached a decision to adjust the role of this committee to reflect a History and Archives Sub Committee. The committee sought funding to commence activities for the forthcoming celebration of QEII's 50th anniversary in 2013.

The Committee acknowledges with appreciation the Hellenic Club of Canberra's donation towards the refurbishment of the Centre's play areas along with a donation of a function room in which to hold a Gala Dinner in May 2013 as part of QEII celebrations.

**"I am sure that what I have learnt
I will be using not just with
Mark but with all my
future children."
-Kate**



The Committee has been active in supporting the National Council of Women and, as endorsed by the Board, made an offer of sponsorship for their annual conference to be held in Canberra in October 2012.

The services of CMS and QEII have been promoted through the Mother's Day and Christmas stalls held annually at the Curtin shopping centre. The Committee wishes to thank the Wednesday Knitters who stock these stalls with their knitted products. We also acknowledge the Thursday Friendship Group at Addicted to Fabric and thank Jenny Adams for her generous support. The quilts made by this group have been distributed to families and others facing challenging and difficult times.

Our in-house giving program continued to grow this year. At Christmas and Easter the staff of QEII and the Committee have continued to distribute gifts and hampers donated by staff, Board members and others, to the appreciative residents of Richmond Fellowship House at Curtin and O'Connor and the Abbeyfield House at Curtin and Garran.

The Community and Public Relations Committee members especially thank the staff of QEII for the support they provided to enhance the activities of this committee.

Executive Officer Compliance

Jane Smyth (Chair)
Philippa Lynch

The Executive Officer Compliance Committee monitored the Director of Nursing & Midwifery/Executive Officer's performance. This process is synonymous with monitoring organisational performance against the Board's Strategic Plan for the period. The Committee was pleased to report to the Board their satisfaction in relation to the completion of operational activities for the period. Compliance with the Limitation Policies had been met.

The Committee acknowledges the exemplary contribution of the Director of Nursing & Midwifery/Executive Officer to the success of CMS and its operations at QEII.



Finance and Audit

Chin Wong (Chair)
Peter Black
Philippa Lynch
Kathryn Forster
Mary Kirk

The Finance and Audit Committee is responsible for overseeing the management of CMS funds and the financial governance of the Society operating through its business entity the Queen Elizabeth II Family Centre. Over the past twelve months the Committee has reviewed its terms of reference to explicitly include monitoring of the annual Risk Management Plan. It has undertaken internal auditing processes and was satisfied that all controls were in place as identified in the Risk Management Plan. The external audit by Kothés also reflects sound financial controls and good business practices.

The Committee reports growth in the Scholarship fund and has recommended continuance of ethical and socially responsible investment with short, medium and long-term investment options. The Committee advised the Board that funds should continue to be expended on education and research scholarships.

We acknowledge the work of the Executive Officer, Operations Manager and Finance Officer for their ongoing implementation of financial strategies to support achievements against the CMS Strategic Plan and their sound management of our business.

**"I have learnt valuable skills that will aid me in caring for little Bella. Also, staff work as a great team here—it's lovely to see this happening."
-Agneta**

Governance

Louise Allison (Chair)
Julien French
Chin Wong
Mary Kirk

Throughout the year the Society and its Board remained committed to demonstrating sound corporate governance responsibility to members, clients and the community, staff and stakeholders.

The Board exemplified sound governance through legislative compliance and through a board culture that encouraged diversity, that represented our community, as well as safeguarded policies and governance processes. The Board remained committed to a leadership and management team that shares a sense of purpose and direction to enable CMS' vision, values and service priorities to be achieved. This was done by constant reflection and by actions that ensured the needs of our clients, the community and staff are met.

The Society used an internal continuous quality improvement system that reviewed our policies, processes and people to ensure the needs of our members and other stakeholders were met. Management activities were deemed to be conducive to good business processes, objectivity and integrity. The Committee is pleased to report achievement of accreditation with the

Quality Improvement Council for another three years and a clear audit report as clear indicators of sound governance.

To enable our good governance processes to be built upon and improved, a grant from the ACT Government was applied for and was successful. To this end, a training session for the Board members and senior staff is planned for July 2012. The Board's reflective component of the board training process has been completed.



Program Development

Wendy Saclier (Chair)

Sue Packer

Rose Mason

Emma Baldock

Mary Kirk

The Program Development Committee is pleased to report the clinical and community development programs have continued to reflect best clinical and community development practices. The programs managed by the Canberra Mothercraft Society for the period are:

- Clinical programs that relate to our admission criteria;
- *Grand Jugglers* relationship building program for grandchildren and grandparents who are the primary carers of their grandchildren; and
- *Relaxing Into Parenting Program & Baby Makes Three* (in partnership with Relationships Australia Canberra and Region) for parents experiencing anxiety in the antenatal period.

The Canberra Mothercraft Society also collaborated with Marymead and Relationships Australia Canberra and Region in relation to *GrandParents ACT & Region*. We especially acknowledge our partnership with Relationships Australia Canberra and Region for generously collaborating to enhance the Relaxing Into Parenting Program with Baby Makes Three. The research evaluation of these programs has proven they made a positive difference for families.



**“My life has been turned around in
4 days! With Amelia sleeping so
well today I have had enough
spare time to bake!”
-Julie**

Scholarship Fund

Rose Mason (Chair)
Julien French
Emma Baldock

In undertaking its responsibilities for the disbursement of the CMS Scholarship Fund, the Committee has reviewed the criteria for scholarships and the terms of reference for the Committee which have been endorsed by the Board. One scholarship was awarded for the period.



Staff Qualifications

Director of Nursing & Midwifery/Executive Officer

Mary Kirk RN, RM	General Nursing Certificate; Paediatric Nursing Certificate; Midwifery Certificate; Bachelor Applied Science (Nursing Science); Master Arts (Women's Studies)
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Clinical Manager Nursing & Midwifery

Liz Gardiner RN, RM	General Nursing Certificate; Midwifery Certificate; Infant Welfare Certificate; Diploma in Applied Science (Maternal & Child Health), Certificate IV Workplace Training and Assessment; Certificate IV Frontline Management
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Counsellor/Community Development Officer

Emma Baldock RN, RM	General Nursing Certificate; Midwifery Certificate; Infant Welfare Certificate; Bachelor Applied Science (Health Education); Master Education (Counselling Research); Graduate Certificate in Professional Studies (Counselling Supervision)
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Finance Officer

Kathryn Forster B.Ec, CA	Bachelor of Economics (Accountancy); Chartered Accountant
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Professional Staff

Liz Aedy EN	Enrolled Nursing Certificate; Bachelor Education (primary)
Karen Ashleigh RN	Bachelor of Health Science (Nursing); Graduate Certificate in Health Science (Midwifery); Child & Family Health Nursing Certificate
Sally Atkins RN	(resigned) General Nursing Certificate; Certificate in Welfare Studies; Certificate in Family Planning & Sexual Health; Certificate in Relationship Counselling
Wendy Bagwell EN	Enrolled Nursing Certificate
Vanessa Bakker RN, RM	(resigned) Bachelor Applied Science (Nursing); Graduate Diploma Midwifery
Jane Barnett RN, RM	General Nursing Certificate; Midwifery Certificate; Post Graduate Diploma in Child & Family Health, Child & Family Health Certificate
Jenny Bushby RN, RM	General Nursing Certificate; Midwifery Certificate; Child & Family Health Certificate; IBCLC
Anneli Cadman EN	Diploma of Mental Nurses; Diploma in Counselling & Family Therapy; Bachelor of Social Sciences (Psychology)

Ginny Davies, RN, RM	General Nursing Certificate; Graduate Certificate Midwifery
Libby Elm RN, RM	General Nursing Certificate; Graduate Diploma in Midwifery; Bachelor of Applied Science in Health Education; Associate Diploma in Community Health Nursing; NSW Mothercraft Nurse Certificate; Psychiatric Nurse Certificate
Di Fernando EN	Mothercraft Nurse Certificate
Helen Flaherty RN, RM	General Nursing Certificate; Midwifery Certificate; Bachelor of Science (Nursing); Diploma Community Health
Mary-Ellen Hirst RN, RM	General Nursing Certificate; Midwifery Certificate; Paediatric Nursing Certificate; Child & Family Health Certificate
Sally-Anne Hutcheson RN, RM	(LWOP) General Nursing Certificate; Midwifery Certificate
Carmel Jarvis RN, RM	General Nursing Certificate; Midwifery Certificate; Neonatal ICU Certificate, Child & Family Health Certificate; IBCLC
Heather Krause RN, RM	General Nursing Certificate; Midwifery Certificate; Certificate of Child and Family Health Nursing; Bachelor of Health Science (Nursing)
Judy Lamond RN, RM	General Nursing Certificate; Midwifery Certificate; Bachelor of Nursing; Graduate Certificate in Professional Development in Education; Master of Educational Leadership; Graduate Certificate in Child & Family Health
Cara Lukins RN	Bachelor of Nursing; Endorsed Enrolled Nursing Certificate; Certificate IV Parentcraft Nursing,
Lucy Malysiak EN	(resigned) Mothercraft Certificate; Child Care Certificate
Jenny McLoughlin RN, RM	General Nursing Certificate; Midwifery Certificate; Perinatal Intensive Care Certificate; Advanced Midwifery Certificate; Bachelor of Nursing Science; Masters Degree (Primary Health Care); Graduate Certificate Paediatrics; IBCLC
Adrienne Morrison RN, RM	General Nursing Certificate; Midwifery Certificate; Bachelor of Nursing; Graduate Diploma Child & Adolescent Health
Julianne Nissen RM	Enrolled Nursing Certificate, Bachelor of Midwifery
O'Keeffe Ellen RN, RM	General Nursing Certificate; Midwifery Certificate; Bachelor Applied Science (Nursing), Graduate Certificate PSM, FACHSM
Ann Pabst EN	Mothercraft Certificate

Staff Qualifications Continued

Shane Parisotto RN, RM	General Nursing Certificate; Midwifery Certificate; Master of Nursing (Research); Degree of Health Education; Degree of Child Health Nursing; Sexual Health Certificate & Cert IV Training & Assessment
Chris Patterson RN, RM	General Nursing Certificate; Midwifery Certificate; Bachelor of Health Science; Graduate Certificate Child & Family Health; Family Planning Certificate
Liz Pedley RN, RM	Bachelor of Arts. Bachelor of Nursing; Graduate Diploma Midwifery
Carolyn Pettit RN, RM	General Nursing Certificate; Graduate Diploma (Midwifery); Diploma of Community Health; Family Planning Certificate; Sexual Health Certificate; Graduate Certificate Child and Family Health
Margie Raymond EN	Parentcraft Certificate; Mothercraft Certificate; Certificate of Applied Science (Child Care Studies); Associate Diploma of Social Science (Child Care Studies); Graduate Certificate in Child Care Management; Certificate in Medical Terminology
Helen Richards RN, RM	General Nursing Certificate; Midwifery Certificate; Graduate Diploma of Health Education; Child Health Nursing Certificate; Certificate IV Training & Assessment
Annie Schofield RN	General Nursing Certificate; Children's Nursing Certificate; Certificate in Sexual Health & Reproduction; Graduate Certificate Child & Family Health; Master of Nursing
Edwina Smith RN, RM	General Nursing Certificate; Midwifery Certificate; Graduate Certificate Child & Family Health; Family Planning Certificate, IBCLC
Nancy Smith RN, RM,	General Nursing Certificate; Midwifery Certificate; Mothercraft Certificate; Diploma in Teaching (Nursing); Bachelor of Education (Nursing); Maternal & Infant Welfare Certificate
Niki Warren RN, RM	Bachelor of Nursing; Graduate Diploma Midwifery
Lorrie Whitfeld RN	General Nursing Certificate; Paediatric Nursing Certificate
Mary-Ellen Youseman RN	General Nursing Certificate; Paediatric Certificate; Maternal & Child Health Certificate; Neonate/Care of Newborn Certificate; IBCLC; Certified Infant Massage Instructor (IAIM), Masters Child & Family Health

General Practitioners

Dr Sue Vickers MBBS (Hons); FRACGP

Dr Kate McCallum MBBS; DRACOG



**"The cleanliness of the Centre
is outstanding. Kitchen staff
are wonderful, made my
whole family feel
welcome."
-Ingela**

Administration

DJ Gosper Secretarial Certificate

Chris Laven

Carol Kyle

Robyn Steele Advanced Secretarial Studies Certificate; Certificate IV
in Business Administration

Debbie Tibbles Secretarial Certificate; Justice of the Peace

Support Services

Rebecca Barney Bachelor of Applied Science, Nurse Management
Certificate, Graduate Certificate in Counselling

Carla Bellamy-Kyle

Kerrie Brennan Bachelor of Arts, Post Graduate Certificate in
Careers Counselling

Pam Close

Carmel Delfino

Marissa Eldridge

Angela Hulford

Pauline Kildea

Jill McCormack (resigned)

Kaylene Murray

Elisha Nissen

Frosso Papadogiannis

Wendy Pearce (resigned)

Kath Potter

Sponsors and Donations

Major Sponsors

Bakers Delight Coolamon Court
Canberra Southern Cross Club
CMS Wednesday Knitters
Thursday Friendship group at
Addicted to Fabric

Donations

B Adams	A Gintings	V Patel
J Adams	V Kalokerinos	M Rath
L Allison	I Lazareff	W Saclier
J Barnett	G Mangan	V Smith
H Bryl	R Mason	C Thompson
J Evans	M McKinnon	
T Howie	V Parker	

Donations CMS Scholarship Scheme

CMS Knitters	C Jarvis	H Richards
Canberra Antique & Classic Motor Club	M Kirk	A Schofield
E Baldock	J Lamond	E Smith
E Gardiner	R Lipsett	N Smith
V Kalokerinos	J McLoughlin	J Smyth
	QEII Family Centre	

**"We have had a really positive experience and have been able to learn and consolidate some valuable skills. It's great to have such support."
-Alyson and Hugo**



Relationships with other Agencies

Audio Visual equipment	ElectroBoard
Auditor	Kothes Chartered Accountants
Carpentry	Balydon Joinery, Duratech Industries Pty Ltd
Cleaning Services	Rolfe Property Services
Community Development	ACT Health Child Youth & Women's Health, DHCS Program & ACT Child & Family Centres, Relationships Australia Canberra and Region
Computer Maintenance	Canberra Home Computer Support & Service (CHCSS)
Computer software	Attache Software Australia
Contaminated waste disposal	SteriCorp Limited
Electrician	PAES Group
Fire Safety	First Five Minutes (managed by ACT Health)
Food services	Alliance Catering
Food supplies	Campbells, Capitol Chilled Foods, Coles
Garden maintenance	Territory Turf & Horticulture, Coochie Hydro-green Lawn Services
GrandParents ACT & Region	Marymead Child & Family Centre, Relationships Australia Canberra & Region
Information Technology	InTACT
Insurers	Guild Insurance
Linen supply and laundering	Capital Linen Service
Massage	Massage Moments — Sue McCarthy
Medical Gases	BOC Gases
Nursery products	Kid Essentials
Office Furniture	Recon, McNally's, Dexion
Pathology	ACT Pathology
Pest control	3 Rivers Pest Control

**"I'd really like to thank staff for their emotional support in addition to their practical help and really appreciated the opportunity to 'just talk'."
-Denise**

Pharmacy	Capital Chemist Curtin, Pharmasave Woden Pharmacy, Canberra Hospital
Photocopier/Printer	CSG Services, Ricoh
Plumber	Don't Panic Plumbing
Preventative maintenance	Property Management and Maintenance, Territory and Municipal Services (managed by ACT Health)
Printing	Elect Printing
Print/Graphic Design	Garrard Graphic Design Services, Voodoo Creative
Recycling	Battery World (batteries) Australian Post Recycle Bin (printer cartridges) Recall (secure paper waste) SITA Environmental Solutions (cans, glass, plastic, cardboard & paper)
Sanitation services	Pink
Security	SNP Security (managed by ACT Health)
Service Agreement	ACT Government Health Directorate
Stationery	Corporate Express
Sub Lease & Operating Agreement	ACT Government
Uniforms	House of Mo Shen, Aussie Clobber, Neat n Trim, Badgelink
Waste disposal	SITA Environmental Solutions
Web	Peter Atkins

Financial Statements

Canberra Mothercraft Society Incorporated ABN: 27 358 139 470
Financial Statements for the year ended 30 June 2012

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Canberra Mothercraft Society Incorporated ABN: 27 358 139 470
Financial Statements for the year ended 30 June 2012

BOARD MEMBER'S REPORT

The members of the Board of the Canberra Mothercraft Society Incorporated present their report for the year ended 30 June 2012.

Directors:

The names of persons who were members of the Board at any time of the year and at the date of this report are as follows:

Ms L Allison
Dr P Black
Mrs P Lynch
Mrs W Saclier

Ms M Braithwaite
Mrs L Johnson
Mrs R Mason
Ms J Smyth

Mrs J French
Mrs V Kalokerinos
Dr S Packer
Mrs C Wong

Principal Activity:

The principal activity of the Society during the year was the operation and maintenance of the Queen Elizabeth II Family Centre, and there was no significant change in the nature of this activity during that period.

Significant Changes:

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

Results:

The net operating surplus of the Society was \$80,929 (2011 \$68,771 surplus).

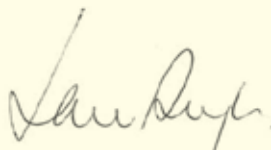
Signed in accordance with a resolution of the Members of the Board.

C. Wong
Treasurer



CANBERRA, 17 October 2012

J. Smyth
President



Canberra Mothercraft Society Incorporated ABN: 27 358 139 470
Financial Statements

**INCOME STATEMENT
FOR THE YEAR ENDED 30 JUNE 2012**

	2012 CMS Inc.	2011 CMS Inc.	2012 Consolidated	2011 Consolidated
INCOME				
Bank Interest	7	4	66,239	65,515
Distributions	0	0	6,247	6,869
Donations	3,029	4,263	14,734	11,685
Fundraising income	2,308	9,647	2,308	9,647
Subscriptions	366	429	366	429
Government funding	0	0	2,340,094	2,265,730
Residential clients	0	0	767,039	836,946
Miscellaneous	0	0	1,393	3,775
	5,710	14,343	3,198,420	3,200,596
EXPENDITURE				
Administration	177	1,622	166,707	212,838
Donations	1,000	3,372	1,000	3,372
Conferences	776	146	776	146
Fundraising expenses	--	6,358	0	6,358
Domestic	0	0	116,164	111,825
Employee entitlements	0	0	(8,780)	98,314
Medical	0	0	157,743	96,610
Miscellaneous	0	0	25,142	28,387
Personnel	0	0	2,468,542	2,391,404
Property	0	0	180,007	173,567
Unrealised losses on investments	0	0	10,190	9,004
	1,953	11,498	3,117,491	3,131,825
OPERATING SURPLUS FOR THE YEAR	3,757	2,845	80,929	68,771

Canberra Mothercraft Society Incorporated ABN: 27 358 139 470
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**BALANCE SHEET
AS AT 30 JUNE 2012**

	2012 CMS Inc.	2011 CMS Inc.	2012 Consolidated	2011 Consolidated
Current Assets				
Cash	21,337	17,178	1,338,562	1,273,215
Investments	0	0	233,633	187,576
Income receivable	0	0	326,678	360,231
Prepayments	0	0	4,246	11,185
TOTAL ASSETS	21,337	17,178	1,903,119	1,832,207
Current Liabilities				
Creditors and accruals	4,702	4,299	209,134	204,960
GST Liability	138	139	48,079	50,640
Funding in advance – Relaxing into Parenting	0	0	12,646	32,111
Funding in advance – Board Building	0	0	5,000	5,000
Provisions – Employee Entitlements	0	0	596,389	605,169
Provisions – Other (Note 3)	0	0	413,836	397,221
TOTAL LIABILITIES	4,840	4,438	1,285,084	1,295,101
NET ASSETS	16,497	12,740	618,035	537,106
Equity				
Opening balance	12,740	9,895	537,106	468,335
Net surplus / (deficit) for the year	3,757	2,845	80,929	68,771
TOTAL EQUITY	16,497	12,740	618,035	537,106

**STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 30 JUNE 2012**

CASH FLOWS FROM OPERATING ACTIVITIES

Receipts from customers				
– inclusive of GST	5,489	9,777	3,363,342	3,433,227
Payments to suppliers & employees				
– inclusive of GST	(1,337)	(2,142)	(3,314,234)	(3,426,308)
	4,152	7,635	49,108	6,919
Interest received	7	4	66,239	65,515
Net cash inflow from operating activities	4,159	7,639	115,347	72,434

CASH FLOWS FROM INVESTING ACTIVITIES

Purchase of investments	0	0	(50,000)	0
Net increase in cash	4,159	7,639	65,347	72,434
CASH AT 30 JUNE 2011	17,178	9,539	1,273,215	1,200,781
CASH AT 30 JUNE 2012	21,337	17,178	1,338,562	1,273,215

Canberra Mothercraft Society Incorporated ABN: 27 358 139 470
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QUEEN ELIZABETH II FAMILY CENTRE

INCOME STATEMENT
FOR THE YEAR ENDED 30 JUNE 2012

	2012	2011
INCOME		
Government funding	2,340,094	2,265,730
Residential clients	767,039	836,946
Miscellaneous	63,852	66,233
	<u>3,170,985</u>	<u>3,168,909</u>
EXPENDITURE		
Administration	164,943	200,757
Domestic	116,164	111,825
Employee entitlements	(8,780)	98,314
Medical	157,743	96,610
Miscellaneous	75,142	78,387
Personnel	2,468,542	2,391,404
Property	180,007	173,567
	<u>3,153,761</u>	<u>3,150,864</u>
OPERATING SURPLUS FOR THE YEAR	<u>17,224</u>	<u>18,045</u>

BALANCE SHEET
AS AT 30 JUNE 2012

Current Assets		
Cash	1,144,761	1,097,465
Income receivable	331,380	364,530
Prepayments	4,246	11,185
TOTAL ASSETS	<u>1,480,387</u>	<u>1,473,180</u>
Current Liabilities		
Creditors and accruals	209,134	204,960
Funding in advance – Relaxing into Parenting	12,646	32,111
Funding in advance – Board Building	5,000	5,000
GST Liability	47,941	50,502
Provisions	1,010,225	1,002,390
TOTAL LIABILITIES	<u>1,284,946</u>	<u>1,294,963</u>
NET ASSETS	<u>195,441</u>	<u>178,217</u>
Equity		
Opening balance	178,217	160,172
Net surplus for the year	17,224	18,045
TOTAL EQUITY	<u>195,441</u>	<u>178,217</u>

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CANBERRA MOTHERCRAFT SOCIETY SCHOLARSHIP SCHEME

**INCOME STATEMENT
FOR THE YEAR ENDED 30 JUNE 2012**

	2012	2011
INCOME		
Bank interest	3,774	3,052
Distributions	6,247	6,869
Donations	61,705	57,423
	<u>71,726</u>	<u>67,344</u>
EXPENDITURE		
Bank charges	61	60
Scholarships awarded	1,526	10,400
Unrealised losses on investments	10,190	9,004
	<u>11,777</u>	<u>19,464</u>
OPERATING SURPLUS FOR THE YEAR	<u>59,949</u>	<u>47,880</u>

**BALANCE SHEET
AS AT 30 JUNE 2012**

Current Assets		
Cash	172,464	158,572
Investments	233,633	187,576
TOTAL ASSETS	<u>406,097</u>	<u>346,148</u>
NET ASSETS	<u>406,097</u>	<u>346,148</u>
Equity		
Opening balance	346,148	298,268
Net surplus for the year	59,949	47,880
TOTAL EQUITY	<u>406,097</u>	<u>346,148</u>

**NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2012**

1. Summary of Significant Accounting Policies

The Society was formed in 1927 and is incorporated under the Associations Incorporation Act, 1991, ACT. It is registered with the Australian Business Register - Australian Business Number 27 358 139 470. The Society is registered for Goods & Services Tax purposes - GST Registration Number 27 358 139 470 and accounts for GST on a quarterly accruals basis. The Society is registered as an income tax exempt charity and as a deductible gift recipient.

This financial report is a special purpose financial report prepared in order to satisfy the financial reporting requirements of the *Associations Incorporation Act, 1991*, ACT. The Board has determined that the association is not a reporting entity.

The financial report has been prepared on an accruals basis and is based on historic costs and does not take into account changing money values or, except where specifically stated, current valuations of non-current assets.

The following material accounting policies, which are consistent with the previous period unless otherwise stated, have been adopted in the preparation of this financial report.

(a) Income Tax

The Association is registered as an income tax exempt charity with the Australian Tax Office. Consequently, no provision for taxation has been made in the financial statements.

(b) Leases

Leases in which a significant portion of the risks and rewards of ownership are retained by the lessor are classified as operating leases. Payments made under operating leases (net of any incentives received from the lessor) are charged to the income statement on a straight line basis over the period of the lease.

(c) Fixed Assets

As Canberra Mothercraft Society Incorporated leases the premises and its' contents from the Government, they do not hold any capital items.

(d) Cash and Cash Equivalents

Cash and cash equivalents includes cash on hand, deposits held at call with financial institutions, other short term, highly liquid investments with original maturities of three months or less that are readily convertible to known amounts of cash and which are subject to an insignificant risk of changes in value, and bank overdrafts.

(e) Trade and Other Creditors

These amounts represent liabilities for goods and services provided to the economic entity prior to the end of the financial year and which are unpaid. The amounts are unsecured and are usually paid within 30 days of recognition.

(f) Investments

Investments are measured at fair value. Fair value is the market value of the investments as at the balance date.

**NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2012**

1. Summary of Significant Accounting Policies (continued)

(g) Revenue Recognition

Revenue is measured at the fair value of the consideration received or receivable. Amounts disclosed as revenue and are net of taxes paid. Revenue is recognised for the major business activities as follows:

Grants

Grants are recognised at their fair value. Income is recognised when the Association receives the grant or the right to receive the grant and there is a reasonable assurance that the grant will be received and the Association will comply with all attached conditions.

Sale of Goods

Revenue is taken to account when the control of the goods has passed to the buyer.

Interest

Interest revenue is recognised as it accrues using the effective interest method. The effective interest method is the rate that exactly discounts estimated future cash receipts over the expected life of the financial instrument to the net carrying amount of the financial asset.

(h) Income Receivable

Income receivable is recognised initially at fair value and subsequently measured at amortised cost, less provision for doubtful debts. Collectability of income receivable is reviewed on an on-going basis. Debts which are known to be uncollectible are written off. A provision for doubtful receivables is established when there is objective evidence that the Association will not be able to collect all amounts due according to the original terms of the receivables. The amount of the provision is the difference between the carrying amount and the present value of estimated future cash flows, discounted at the effective interest rate. The amount of the provision is recognised in the income statement.

(i) Employee Entitlements

(i) Wages and Salaries and Annual and Sick Leave

Liabilities for wages and salaries, and annual leave are recognised, and are measured as the amount unpaid at balance date at current pay rates in respect of employees' services up to that date. A liability for sick leave owed is recognised and is measured as an average of amounts paid to employees for sick leave over current and prior financial years and expected sick leave to be taken over future financial periods.

(ii) Long Service Leave

Liabilities for long service leave have been booked by the Society as the Society is responsible for payments of long service leave each year up until the Society is placed into a negative financial operating position from the payment of long service leave payments. Long service leave payments will be made by ACT Health before the Society is placed into a negative financial operating position from making long service leave payments. The Society expects to meet all long service payments as they become due and without the Society being placed into a negative financial operating position. The Board believes that due to the agreement with ACT Health that the provision for long service leave is fairly stated.

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2012

	2012 CMS Inc.	2011 CMS Inc.	2012 Consolidated	2011 Consolidated
2. Notes to the Statement of Cash Flows				
Reconciliation of net cash provided by operating activities to operating surplus:-				
Operating surplus after income tax	3,757	2,845	80,929	68,771
<i>Non-Cash items:</i>				
Changes to provisions	0	0	7,835	80,439
Unrealised (gains) / losses in investments	0	0	10,190	9,003
Distributions	0	0	(6,247)	(6,869)
<i>Changes in assets and liabilities:</i>				
(Increase)/decrease in prepayments	0	0	6,939	3,960
(Increase)/decrease in income receivable	0	558	33,553	(150,506)
Increase/(decrease) in creditors & accruals	403	4,235	4,174	23,717
Increase/(decrease) in GST liability	(1)	1	(2,561)	6,808
Increase/(decrease) in funding in advance	0	0	(19,465)	37,111
	4,159	7,639	115,347	72,434
	=====	=====	=====	=====
3. Provisions - Other				
Provision for Evaluations	0	0	5,000	20,000
Provision for Staff Art Project	0	0	4,507	4,507
Provision for Capital Replacement	0	0	131,019	131,019
Provision for Insurance Run Off	0	0	108,310	101,695
Provision for Severance Pays	0	0	140,000	140,000
Provision for 50 th Anniversary Expenses	0	0	25,000	0
	0	0	413,836	397,221
	=====	=====	=====	=====

Provision for Evaluations

A provision has been raised for expenses to be set aside from the 30 June 2013 budget for outside evaluations of various operations of the Queen Elizabeth II Family Centre.

Provision for Staff Art Project

A provision has been raised for expenses to be set aside from the 30 June 2013 budget for a Staff Art Project.

Provision for Capital Replacement

A provision has been raised for maintenance and capital requirements of the Queen Elizabeth II Family Centre in the future.

Provision for Separation and Redundancy

Provision has commenced to be made for separation and redundancy expenses and is calculated on the basis of two weeks' pay for every year of service, up to a maximum of forty eight weeks, by employees whose employment is terminated in the event their service is redundant to business requirements or CMS ceases trading.

Provision for Insurance Run Off

In the event that CMS may choose to cease trading provision is made for insurance run off and refers to meeting liabilities for closed insurance portfolios where the applicable claims liabilities are being progressively extinguished to their final liquidation.

STATEMENT BY THE BOARD


The Board has determined that the association is not a reporting entity and that this special purpose financial report should be prepared in accordance with the accounting policies outlined in Note 1 to the financial statements.

In the opinion of the Board the financial report:

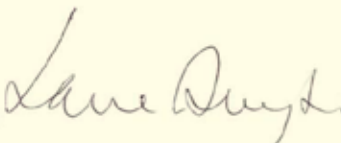
1. Presents a true and fair view of the financial position of Canberra Mothercraft Society Incorporated as at 30 June 2012 and its performance for the year ended on that date.
2. At the date of this statement, there are reasonable grounds to believe that Canberra Mothercraft Society Incorporated will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

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

C. Wong
Treasurer



J. Smyth
President



CANBERRA, 17 October 2012

Canberra Mothercraft Society Incorporated ABN: 27 358 139 470

Financial Statements



ABN 36 472 755 795

INDEPENDENT AUDIT REPORT TO THE MEMBERS OF CANBERRA MOTHERCRAFT SOCIETY INCORPORATED (NON-REPORTING)

Report on the Financial Report

We have audited the accompanying financial report, being a special purpose financial report, of Canberra Mothercraft Society Incorporated (Non-reporting) (the association), which comprises the balance sheet as at 30 June 2012, the income statement and statement of cash flows for the year ended, a summary of significant accounting policies, other explanatory notes and the statement by members of the Board.

Board's Responsibility for the Financial Report

The Board of the association is 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 consistent with the financial reporting requirements of the *Associations Incorporation Act 1991* ACT and are appropriate to meet the needs of the members. The Board's responsibilities also include 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 entity'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 entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the Board, 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 Board's financial reporting under the *Associations Incorporation Act 1991*. 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.

Independence

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


Audit Report

In our opinion the financial report of Canberra Mothercraft Society Incorporated (Non-reporting) presents fairly, in all material aspects the financial position of Canberra Mothercraft Society Incorporated (Non-reporting) as at 30 June 2012 and of its financial performance for the year then ended in accordance with the accounting policies described in Note 1 to the financial statements.

Basis of Accounting and Restriction on Distribution

Without modifying our opinion, we draw attention to Note 1 to the financial report, which describes the basis of accounting. The financial report has been prepared to assist the association to meet the requirements of the *Associations Incorporation Act, ACT, 1991*. As a result, the financial report may not be suitable for another purpose.

KOTHES
Chartered Accountants


SIMON BYRNE
Partner
CANBERRA, 17 October 2012

Offices located at:

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Our web site is <http://www.kothes.com.au>

BEGA 106 Auckland St BEGA NSW 2550 Ph (02) 6491 6491 Fax (02) 6491 6400
BERMAGUI Shop 4/2 Wallage St BERMAGUI NSW 2546 Ph (02) 6493 4150
BOMBALA 75 Cavat St BOMBALA NSW 2632 Ph (02) 6458 3798
COOMA 57 Main St COOMA NSW 2550 Ph (02) 6452 1797 Fax (02) 6452 1664
EDEN Suite 2, 161 Inlay St EDEN NSW 2551 Ph (02) 6496 8500 Fax (02) 6496 3250
JINDABYNE Nuggets Crossing JINDABYNE NSW 2627 Ph (02) 6456 2477
MERIMBULA 77 Main St MERIMBULA NSW 2548 Ph (02) 6499 8300 Fax (02) 6495 3388



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**"The support staff have been just beautiful
and the nursing staff are second to none!
Their knowledge, skills and empathy were
simply amazing, they have changed
our lives. They have enabled us to
feel supported whilst we worked
to change our routines."
-Kayla and Baz**



"We came in with a depressed mum, an overtired baby and a dad who wasn't sure how he could help. The nurses and midwives listened to us, gave us confidence and helped us learn to help our baby get better sleep day and night. We feel confident that we'll be able to use the techniques we've learned at QEII to make our home a happier place for all of us."

-Hugh and Katrina



129 Carruthers Street

(PO Box 126)

Curtin ACT 2605

Ph: (02) 6205 2333

email cms@cmsinc.org.au

www.cmsinc.org.au