

2015 Annual Report





About the John James Foundation

The John James Foundation is a not-for-profit organisation. It built what is now the Calvary John James Hospital in Canberra in 1970 and operated it until 2006 when the hospital business was sold to Calvary Private Healthcare. Following the sale of the business, the Foundation retained ownership of all the hospital land and buildings which form the John James Healthcare Campus, Deakin.

The Foundation is now an independent broad based healthcare charity providing a range of programs and assistance to the people of Canberra and beyond. The Foundation is grateful for the support of large numbers of Canberra based medical specialists who are members of the Foundation.

Our Mission

To be recognised as a leading charitable healthcare organisation through the provision of specialist medical facilities, support and services to those in need.

Contact Us

John James Memorial Foundation Ltd
ABN: 25 008 453 469

Suite 1, Level 2
Peter Yorke Building
John James Healthcare Campus
173 Strickland Crescent
DEAKIN ACT 2600

PO Box 23
DEAKIN WEST ACT 2600

Tel: 02 6281 6695
Email: info@jjf.org.au
Web: www.jjf.org.au

Our Patron

His Excellency General
The Honourable Sir Peter Cosgrove AK MC (Retd)

Staff

Mr Phil Greenwood (CEO)
Mrs Stephanie Burgess (Finance Manager)
Mr Andrew Blencowe (Project and Facilities Manager)
Ms Helen Carter (Program Manager)
Ms Jane Smith (Writer)

Our Cover

Our cover shows how the Foundation moved from sod turning to the start of construction of the John James Village signature project during 2015.



From the Chairman Prof Paul N. Smith

After another busy year, it's useful to pause to consider just how much the profile - and the contribution - of the John James Foundation has grown over the past few years.

In 2015, it's fair to say Foundation activities reached a new high point with the start of building work on our signature project, John James Village at Garran. The launch of this stage of the project, no small undertaking for a local charity, received excellent media coverage and will provide even more opportunities to showcase just how much we are giving back to the Canberra community as construction continues into 2016.

It's also been interesting to look back and see how quickly John James Village has moved from being an ambitious idea towards bricks and mortar reality. The project received its first mention in an annual report in 2012 with a rather ambiguous reference to a search for a signature program, though the form that program would take was not specified, indeed was not known at that stage. Fast forward to the 2013 report which showed planning for what was initially called John James House had just begun. Then the 2014 report indicated the design stage for John James Village was underway.

Now, in 2015, to be reporting that we have partnered with the Leukaemia Foundation and committed more than \$5 million to start building the region's first purpose built accommodation complex for blood cancer patients, their families and carers, underlines our increasing role as Canberra's largest medical charity.

The project will have such a positive impact that the ACT Government has provided the land at no cost to the Foundation and even funded site preparation works.

I'm confident that in the not too distant future John James Village will become synonymous with the John James Foundation. It will highlight not only the Community Health program, one of our core activities, but also our role as separate from (while retaining valued links with) the Hospital. John James Village will also showcase in no small way our commitment to make a lasting contribution to healthcare in the

region. These are goals outlined in our Strategic Plan 2014-2019 and we are well on our way to achieving our targets.

While much of the focus in the first half of the calendar year was on the Village, the Hospital Partnership too is coming under the spotlight as

we near the end of our first 10-year lease period with current leaseholders, Calvary Healthcare. The challenge now is to ensure a facility built during the 1960s can enter a new phase and continue to meet the demands of medical practice that has in many ways been dramatically transformed over this period.

Whether to sign up is ultimately a matter for Calvary to decide. The Foundation's role is to ensure the infrastructure is in place to support the continuing growth and development of the Hospital so it can retain and build on its status as Canberra's preeminent stand-alone private facility. We are drawing closely on the Campus Master Plan to guide us in this, but at the very least it's likely a further 100 beds or more will need to be added to the Hospital's overall capacity.

In 2015, it's fair to say Foundation activities reached a new high point

Operating theatres, patient and visitor amenities and other facilities will continue to need upgrading during the next lease period. These are considerable (and expensive!) challenges and I'm sure there will be robust negotiations around how these demands will be met.

I know many Members are taking a keen interest in the lease negotiations - and rightly so given how important the result will be for the future of the Foundation.

At the same time, the Foundation's commitment to the Hospital Partnership continued in 2015. This included a donation of \$450,000 to support the Curtin Ward upgrade. The Community Energy Efficiency grant the Foundation was awarded in 2013 was also finalised recently after some procurement delays. This is already resulting in lower energy bills and better heating and air-conditioning on the campus. I'm confident the Hospital partnership will continue to be an important part of the Foundation's activities into the future.

I've reported before that opportunities to contribute to the care of Indigenous people in the NT, a focus of our Volunteer Specialist Program for many years, have become difficult to pursue although there was one visit by an ophthalmology team in 2015. This has been due to a combination of better access to local specialist care in the Katherine region, as well as bureaucratic requirements that have grown over the years.

Given these issues, the Board welcomed Dr Dylan Hyam's suggestion in late 2014 to consider opportunities to contribute to specialist medical care in the Solomon Islands. This was the start of what has now become the Pacific Health pilot program.

Three exploratory visits have been undertaken to the National Referral Hospital in the capital, Honiara, while a planned visit by a dental team was cancelled due to unforeseen circumstances. Several Foundation Members and other interested specialists have participated generously and much has been achieved for both patients and local medical staff during this time. More information about this new venture appears later in this report.

From the outset, the Foundation was aware of the limitations of Honiara hospital and the challenges this would present visiting teams. It was clear there was a lack of even basic medical equipment and facilities, as well as significant demand from patients who rarely have access to the sort of medical expertise that most Australians take for granted.

The Foundation committed a lot of resources to planning these trips, carefully considering everything from visa requirements to car hire to the best way to transport medical items (in the latter case, deciding eventually to use sea freight rather than air freight). Of course, not everything went to plan - hire cars broke down, essential medical equipment shipped from Australia went astray for brief periods - but we have now learnt a lot more about what to do to ensure these visits are a success for both our Members and our Solomon partners.

Nevertheless, it is clear that any ongoing commitment to the Pacific Program will remain resource intensive and require a level of support that cannot always be accurately anticipated. Part of our response to this has been a request that accompanied the August Newsletter asking if

Members would consider making a donation to support any aspect of this work (you can still do this by going to the website www.jjf.org.au).

I want to thank my fellow Board Members and Foundation staff for their support as we tested this new program during 2015. The challenges that arose along the way required innovation and agility to overcome and the success of this initial phase is testament to the depth of skills and commitment we have been able to draw upon.

The collective insights we have gained from 2015 may also lead to options such as including some of our Solomons' colleagues in clinical training opportunities in Australia.

The Board will need to consider all these issues when deciding the future of the Pacific Program. I welcome the views of Members.

I'm confident the Hospital partnership will continue to be an important part of the Foundation's activities into the future

Members will be aware of the parking difficulties that have existed throughout the Deakin Healthcare Campus for several years. The introduction of paid parking by Calvary Healthcare within the campus in July was therefore inevitable, if unpopular. Anecdotally, however, it does seem to have resulted in improved parking availability for patients, staff and visitors. Plans for further development of the campus will include further parking improvements to keep pace with these changes.

Members will also be aware the Board approved an increase to Foundation membership fees for the coming year – the first since the establishment of the Foundation in 2006. The decision was made after careful consideration of the costs and benefits of membership, acknowledging the contribution that many Members make by participating in volunteer services and supporting students undertaking clinical placements in Canberra. The Foundation continues to rely on all Members, old and new, to support these programs.

Another issue to come before the Board was the future shape of the Specialist Elective (Clinical Placements) Program. We know from feedback that this provides final year medical students with valuable opportunities to understand

and explore specialities and to gain insights into private practice they would otherwise find difficult to access. The program has been running for more than 10 years and it is now timely to review it in conjunction with our partners at James Cook University. One option likely to come up is how we could include colleagues from the Solomon Islands who have limited access to other mentoring and training opportunities and who may benefit from a similar program.

As you will see from the more extensive report elsewhere, the financial situation of the Foundation has strengthened during the year through careful management of our assets and investments. This provides a firm basis for the work of the Foundation as it continues to expand its activities as Canberra's largest medical charity.

I commend the work of the Foundation and look forward to the support of our Members and stakeholders in our ongoing development.

Professor Paul N Smith FRACS

Chairman

John James Foundation



The National Referral Hospital in Honiara, Solomon Islands, hosted visits by Foundation specialist teams as part of the new Pacific Health pilot program.

John James Village – Signature program underway

After months of preliminary site works and an official sod-turning, the Foundation's \$5 million signature program, John James Village, moved steadily towards the start of the construction phase in 2015.

John James Village will provide purpose-built accommodation in one, two and three bedroom units, for regional blood cancer patients, their families and carers. When completed in the latter part of 2016, John James Village will demonstrate the Foundation's clear commitment to providing substantial long term healthcare services to people in the Canberra region.

The project is being developed in association with the Leukaemia Foundation.

The ACT Government's mandatory preliminary site work on the 8,000 sq m site that will become John James Village in Rusden St, Garran, was completed in September 2015. The work was needed to address flood mitigation and other safety issues. The land was donated by the ACT Government.

The official sod-turning event in June 2015 saw more than 100 people, including project representatives and Garran residents, gather to hear ACT Deputy Chief Minister and Minister for Health Simon Corbell mark the occasion.

The site has since been handed over to the builder and construction work is now underway.

The prime location, close to Canberra Hospital, will be a building site until late 2016 as the first of the six accommodation units begins to take shape.

Office facilities for the Leukaemia Foundation and patient amenities, including a small gym and library, are part of the building program.

The start of construction also means that regular Project Control Group meetings will be held on site at least monthly for the duration of the build to guide and oversee the process.

The group includes builders, engineers, architects and other key project representatives who will consider a broad range of issues, including financial and program management, building design

and workplace health and safety. Foundation Board Members Dr Prue Martin and Mr Mark Sullivan are a key part of the group.

Efforts continued throughout 2015 to gain broad community support for the many elements of John James Village that will rely on donations or in-kind contributions.

A Project Contributions Committee has identified sponsorship opportunities

including landscaping items such as trees, garden bench seats, garden beds and the BBQ area. Marketing will begin when construction has progressed. The project builder has already been successful in gaining support from the construction industry and will continue these efforts as the Village takes shape.

The ACT Branch of the Order of Australia Association has committed \$10,000 to support furnishings within the Village and will hold a fund-raising function later in the year to provide further assistance. Foundation Board Member Brian Acworth AM is a committee member of the ACT Branch of the Order of Australia Association.

**John James Village
will demonstrate
the Foundation's
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Palliative Care ACT representatives John Hanks and Penny Farnsworth were delighted to receive a new vehicle in January 2015 as part of the Foundation's Community Health Program.

Community Health Program – Supporting regional people in need

In 2015 the Foundation's Community Health Program has again supported a diverse range of smaller regional organisations helping people in need.

With a focus on healthcare related activities, the Community Healthcare Program has funded groups ranging from the high profile Snowy SouthCare Helicopter and Pegasus Riding for Disabled to less well known grass roots organisations such as the ACT Deafness Resource Centre (which provides hearing assistance services in 23 ACT aged care facilities and has recently expanded to Queanbeyan as well) and Friends of Brain Injured Children (which offers assessment and treatment for children with brain injury).

These donations totalled more than \$200,000.

The Foundation's \$5 million+ commitment to its signature project, John James Village at Garran, now a separate program, originally developed from a Community Health Program application to support the first Lifecycle community event in 2012.

Local healthcare organisations are encouraged to apply for funding early in the year. Applications are considered by the Board before a decision is made. Information about applying for funding is available on the website jjf.org.au or by contacting the Foundation office on 02 6281 6695.

Community Health Program 2015

AFFIRM- The Australian Foundation for Mental Health Research

\$15,000

Development of online treatment for people with Obsessive Compulsive Disorder

Asthma Foundation ACT

\$10,000

Translation of asthma book into five community languages (second part of project)

Brain Tumour Alliance Australia

\$5,250

Advocacy, support and information for parents of children diagnosed with brain tumour.

Cerebral Palsy Alliance

\$10,000

Purchase new specialised equipment including classroom chairs for loan pool.

Cystic Fibrosis Association

\$10,000

Self-managed exercise program for 20 people with cystic fibrosis.

Darryl's Den

\$16,000

Woodwork workshop for people with disability.

Deafness Resource Centre

\$20,000

'Hearing Aiders' program to assist people with hearing loss in 17 aged care facilities in ACT.

Friends of Brain Injured Children ACT

\$6,240

Assessment and treatment of children with brain injury.

Hartley Lifecare

\$15,000

Recreation program including holidays and outings.

Indigenous Medical Student Scholarship

\$18,000

ANU medical student –support for four years.

John Curtin School of Medical Research

\$35,000

PhD program – scholarship for student in neuroscience program.

Make-a-Wish

\$10,000

Grant the wishes of three children with life threatening illnesses.

Multiple Sclerosis Society

\$25,000

Assistive equipment including wheelchairs, walking frames for local people with MS.

Palliative Care ACT

\$10,000

Review of service delivery and future of the service.

Pegasus Riding for the Disabled

\$10,000

Resurfacing of outdoor riding arena to improve safety.

Snowy Hydro Southcare Helicopter

\$27,500

Road retrieval equipment.

Tony Ayers Prize for Excellence in Translational Medicine Research, John Curtin School of Medical Research, ANU

\$5,000

Human immunodeficiency researcher Dr Anselm Enders.

Deafness, dragonflies and bogong moths...

The John James Foundation's Community Health Program provided \$20,000 to support the work of the ACT Deafness Resource Centre (DRC) in 2015.

The DRC supports people with hearing loss through a range of services and programs, including the recently renamed John James Foundation Hearing Aiders Program which recognises the Foundation as the major sponsor. The program supports hearing impaired aged-care residents by providing hearing-aid maintenance and also provides training for volunteers and on-site aged-care workers to provide hearing-aid care.

The DRC works in 23 ACT aged care facilities and has also begun working in Queanbeyan.

The DRC recently launched an innovative approach to welcome Aboriginal and Torres Strait Islanders to the service, commissioning an original painting from an Indigenous artist to provide a contemporary message on hearing health.

The painting, *Bogong Moth*, was created by Aboriginal artist and advocate Norma Chidanpee Bengier.

"We wanted a symbol that would send a very clear message to Aboriginal & Torres Strait Islander peoples that there really was a welcome at DRC if they came along to talk about hearing support," said DRC CEO Pete Halsey.

"We also wanted to pay respect to the Ngannawal people who are the first inhabitants of the region and to acknowledge the challenges facing Indigenous leaders and families to overcome high levels of ear health issues in their communities.

"This is a uniquely Australian symbol for all people in the region living with hearing loss or ear disorders and their families."

The artist told a gathering to unveil the painting that the neither the bogong moth nor the dragonfly can hear - an analogy for the everyday experiences of one in six people in the community who live with hearing loss. Dragonflies use sight, vibration and other senses to communicate with each other and are connected to Aboriginal people as a food source and a living resource.

The Ngumumma the Dragonfly story, which comes from the far north of



The *Bogong Moth* painting commissioned for the Deafness Resource Centre which is supported by the John James Foundation.

Australia from the Ngunkikurrunku people of the Daly River region, was told at the unveiling of the painting:

"When babies are born in the dry season, this is also the time of the birth of the dragonfly which hums and buzzes around the air, excited about the birth of the new season."

"The grandmothers catch the dragonflies to test babies' hearing, making them buzz near the babies' ears. When a baby responds we know that they have good hearing. If not, the old ladies bring the dragonfly closer so the baby can feel the vibration and sound of its wings, then they sing to the spirits and the dragonfly, 'We must all look after this child together to help him grow and be able to communicate.'"

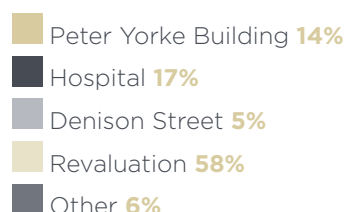
"So if you see a dragonfly buzzing around a baby it is just looking and checking the baby's response because that's what they do. In the past, everyone worked together - dragonflies, grandmothers and the spirits."

A Foundation for the Future Through Growth & Investment

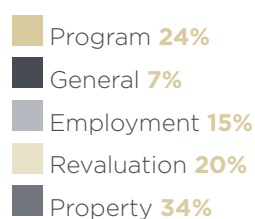
Financial Summary for the Year Ended 30 June 2015

- The result from operations was an increase in equity of \$1.39m (2014: \$1.90m) prior to the application of property valuation adjustments. The impact of property valuations brought to account was an increase in equity of \$6.19m. Gross revenues including revaluations for the year were \$12.17m (2014: \$5.05m) and operating expenses were \$4.59m (2014: \$3.15m).
- \$331,468 was applied directly to the charitable programs of the Foundation, with an additional \$320,322 invested in the planning stages of the John James village. A total of \$433,636 was provided to facilitate continual improvement of the Healthcare Campus via the Hospital Partnership.
- The Foundation closed the year with net assets of \$50.3m (2014: \$42.8m) comprised of total assets of \$50.7m (2014: \$44.8m) and liabilities of \$0.4m (2014: \$2.0m).
- Cash assets at 30 June 2015 were \$3.7m (2014: \$4.8m). Total borrowings reduced to \$0.2m (2014: \$1.7m). Invested funds held in tradable securities at the end of the year totalled \$3.2m.

Income



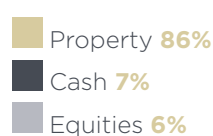
Expenses



Charitable Programs



Investment Portfolio





Improvements to Curtin Ward



Hospital Partnership Program – Building better facilities

The Foundation continued to develop its already strong relationship with Calvary John James Hospital throughout 2015.

As the former owners of the hospital business and current owners of the land and buildings that form the Deakin Healthcare Campus, the Foundation is committed to ensuring the Hospital remains the preeminent private facility in Canberra, providing excellent services and facilities to all patients.

The Foundation contributed to a range of capital works and upgrades to facilities over the past 12 months, adding considerably to the \$3 million for refurbishment, works and specialist purchases it has previously provided.

A total of \$450,000 was donated for refurbishment of the 24-bed general surgical Curtin Ward, along with funding from Calvary Healthcare of more than \$700,000. The ward is now lighter and brighter with new window treatments and large screen TVs in all rooms, together with renovated and enlarged bathrooms and modern electronic call systems.

The Foundation also contributed \$8,000 to upgrade the Hospital's 15 year old Building Management System during the year. The Building Management System is part of the Hospital's critical infrastructure, controlling a range of essential equipment. A new central processing unit was installed to bring the system up to modern standards and minimise the risk of failure.

Volunteer Specialist Program – Changing focus, changing lives

The Foundation's Volunteer Specialist Program changed focus during 2014-15 to explore the potential for providing these valuable services to our near neighbours in the Solomon Islands.

The program has previously seen a wide range of specialist teams (including orthopaedics, ophthalmology, ear, nose and throat, dental, obstetrics and gynaecology) work from Katherine Hospital and in remote Indigenous communities in the NT. Demand for these teams has declined over the past 12-18 months. As a result the Foundation's Board agreed to consider similar opportunities to give much needed support to regions outside Australia where specialist services are limited.

Foundation Members have made clear their desire to 'give back' through participation in programs such as the Volunteer Specialists. Ensuring these opportunities continue to be available remains a priority.

Following a scoping study and discussion with in-country senior medical leaders, the Foundation initially agreed to support four pilot visits in 2015 to better understand need in the Solomon Islands. The Solomons has a history of national disasters including cyclones and tsunamis and recently suffered a measles epidemic.

Specialist visits are aimed at contributing to improvements in the health of the Solomon Islands community and building the capacity and capability of local health professionals through sharing knowledge and skillsets.

The pilot visits also helped the Foundation better understand some of the complex logistics of taking specialists – and their equipment – to a location which presents its own unique

challenges. The Foundation funded the purchase of some equipment required by visiting teams and also sought donations from individuals and enterprises.

The first visit was conducted over two weeks in April 2015 and was based at the main National Referral Hospital in the capital, Honiara. The paediatric surgical team consisted of Foundation Members Associate Professor David Croaker, Dr Nick Gemmell-Smith and Board Member Dr Prue Martin. A paediatric registrar from Campbelltown Hospital Dr Liam Quinn was also part of the team. While there were some teething issues, the team was assisted by the hospital and local medical specialists and the visit declared a success.

At the same time the Foundation assisted a team organised through a Canberra paediatric charity, Sophie's Gifts.

This was quickly followed by a second trip in May 2015. A maxillofacial/ENT team consisting of Foundation Members Dr Dylan Hyam, Dr Peter Chapman and Dr Prue Martin, as well as Ms Claudia MacIntyre RN were based at the National Referral Hospital for one week. This was an extremely busy time with 80 patients seen at the clinic in the first two days.

The third visit, a dental team due to go to Gizo, the second largest town on the island of Ghizo in the north-west of the Solomon Islands, was cancelled due to unforeseen circumstances.

The final pilot visit, an obstetrics and gynaecology team, will take place in late October for two weeks. The team will consist of Foundation Members Dr Elizabeth Gallagher, Dr Tween Low, Dr Nicola Meares and Ms Lesley Stewart RN RM. This team has secured



Foundation team members Associate Professor David Croaker (left) and Dr Liam Quinn outside the paediatric unit at the National Referral Hospital, Honiara.

donations for additional equipment for the maternity unit at the National Referral Hospital including mattresses for delivery beds. The Foundation has provided a mobile ultrasound machine that had been used by the Foundation's teams in the Northern Territory for a number of years.

Regular reports on the visits undertaken to date will form part of deliberations about the future of the program. The reports have highlighted the clear need for these specialist services – one team conducted 48 procedures in one week which limited planned teaching activities. It was also reported that it seemed there had been a dearth of recent ENT services given the high patient workload facing the team.

At the same time, the logistical and resource challenges faced by the teams – from difficulties storing and transporting medical equipment in-country – also became increasingly apparent during these visits. The Foundation purchased and packaged many boxes of basic theatre supplies (the scoping visit had reported that basic hospital supplies were sometimes unavailable) and donors assisted in securely transporting cargo to Honiara. In particular, Aspen's advice and assistance, other donors and supporters and in-country liaison, has been appreciated.

The process of preparing for the Solomon Islands visits has required more input and time from the Foundation's volunteer specialists and staff than for those undertaken to the Northern Territory. Suggestions for managing future volunteer visits to the Solomon Islands will be considered as part of the overall evaluation of the 2015 pilot visits.

Focus on eye health help

While demand has fallen, the Foundation's Volunteer Specialist Program maintained a valuable presence in NT communities during 2015 with an ophthalmologist trip successfully completed in August 2015.

Dr Christiane Lawin-Bruessel and orthoptist Pat Helsing visited communities in Lajamanu, Kalkarindji, Timber Creek and Yarralin with the assistance of staff from Specialist Outreach NT. The team treated a total of 78 patients and conducted three in-service training sessions for nurses and health care staff.

A further nine patients were referred for treatment and 36 people were supplied with basic reading glasses donated through a Rotary project.

The team was pleased to receive a letter of thanks from Darwin Hospital after the visit, acknowledging their role in delivering efficient, equitable and effective eye health services to these remote communities. Further visits are already being planned to help fill the gap caused by difficulties finding permanent doctors for outreach positions. These roles cover 32 communities in the Top End and the Gove and Katherine outpatients departments that are serviced by Specialist Outreach NT.



Dr Anselm Enders, the 2015 Tony Ayers Prize for Excellence in Translational Research recipient.

Medical Education Program

The Foundation's Medical Education program provides a range of opportunities for medical students, post-graduate and PhD students, registrars and health professionals.

The program aims to support experience and training for those already providing, or those aiming to provide, health services in remote and rural areas of Australia and in countries outside Australia with a clear need for medical specialist assistance.

Given its recent expansion to trial volunteer specialist services in the Solomon Islands, the Board will consider opportunities to include these colleagues in future medical education activities.

Clinical placements for final year students

The JCU Specialist Elective (Clinical Placements) program offers medical students at James Cook University in Queensland the opportunity to spend their final term elective in their sixth year with a number of Canberra's top medical specialists.

Feedback consistently shows the program provides insights and experiences that would otherwise be difficult for students to obtain in operating theatres, laboratories, consulting rooms and private practice. Students are also given an introduction to medico-legal issues and have the opportunity to attend classes in anatomy.

In 2015 the four students selected to take part in the program are Scott Alford, Jessica Sia, Franziska von Canning and Delara Javat.

Support for Indigenous students

The Foundation provides a scholarship for an Indigenous Medical Student at the ANU Medical School. The scholarship was first awarded in 2012 and the recipient Sean Barrett is nearing completion of his post graduate medical degree.

The Foundation will consider providing a further scholarship for an ANU Indigenous student if there are suitable applicants.

The Tony Ayers Prize for research

Introduced in 2014, the \$5,000 Tony Ayers Prize for Excellence in Translational Research is awarded annually to an academic at ANU's College of Medicine, Biology and Environment.

In 2015 the award was made to Dr Anselm Enders for his work in researching primary human immunodeficiencies, a diverse group of diseases caused by mutations in more than 200 different genes. While each disease is relatively rare, collectively these diseases affect up to 1 in 5,000 people and because of their chronic nature they can have a significant effect on individuals, families and the health system as a whole.

The award is named in honour of former longtime John James Hospital and Foundation Board Member Tony Ayers. It recognises a scientist who has made a significant contribution to translational research during their career which makes the jump 'from bench to bedside', transforming science breakthroughs into clinical applications.

Supporting the John James Foundation through bequests and donations

- The John James Foundation supports medical, educational and related philanthropic activities. Much of the Foundation's income comes from land holdings within the John James Healthcare Campus, Deakin, ACT.
- The Foundation is a charity and has tax free and deductible gift recipient (DGR) status from the Australian Tax Office.
- The Foundation also welcomes individual and corporate donors and benefactors who want to support its programs and activities.
- Donations or bequests can be for any purpose consistent with the Foundation's Objectives. These include the promotion, prevention and control of diseases and the relief of suffering. The scope of activity includes the practice and study of, and education and training in, medical and dental sciences and the provision of healthcare equipment and facilities.
- The Foundation also welcomes gifts of property. If desired, donors may choose to retain use of the property during their lifetime. All gifts will be acknowledged with or without an identifying name as desired by the donor or benefactor. Activities supported by gifts are recorded in our Newsletter. Substantial gifts may be associated in some conspicuous manner with the name of the benefactor.
- The Foundation can also establish a special purpose fund with any donation or benefactors may wish to establish an independent trust specifying the Foundation as the beneficiary. Such funds can be established in instalments during the donor's lifetime. Non-testamentary payments into special purpose funds established by the Foundation are tax deductible.
- The Foundation can provide general advice about how to express a simple bequest or a bequest for a particular purpose or activity. Depending on the kind and size of donation, donors should consider taking advice from their solicitor, accountant or financial adviser.
- One-off or recurring donations can also be made online at the Foundation's website **www.jjf.org.au**.
- The Foundation's elected officers and staff can answer questions and Members with appropriate expertise can help define a useful purpose for any gift. The Chief Executive can be contacted on **(02) 6281 6695** or by e-mail at **info@jjf.org.au**

The John James Foundation Board of Directors



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