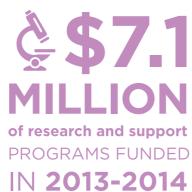


## 2013-14 Highlights





OF RESEARCH & SUPPORT **PROGRAMS** FUNDED AND MANAGED THROUGH THE CRN







**300 ADVOCATES** CONNECTED WITH THEIR MPS

#### **1897 KIDSAC** packs and T1D kits distributed

200 FUNDRAISERS \$871K RAISED

230 JUMPERS \$370K **RAISED** 





#### \$2.7 MILLION CONTRIBUTED THROUGH **OUR DONORS AND PARTNERS**

**INSULIN PUMPS** ALLOCATED TO FAMILIES THROUGH THE **INSULIN PUMP PROGRAMME** 





1500 GALA ATTENDEES \$1.2 MILLION RAISED



**OVER 500 VOLUNTEERS** INVOLVED WITH JDRF

6 PEER SUPPORT CONNECTIONS







### **Contents**

About JDRF and Type 1 Diabetes	
Messages from the Chairman and CEO	2
2014 Charity of the Year	۷
Mission: Improving Lives, Curing Type 1 Diabetes	5
Research Progress: Curing, Treating, Preventing Type 1 Diabetes	6
Funding the Most Impactful Research	S
Increasing the Quality and Volume of Clinical Research	10
Changing the Future with Clinical Trials	12
Supporting Early Career Researchers	13
Australian JDRF Funded Research in 2013-14	14
Improving Access to Diabetes Technology	16
Changing Lives with Insulin Pumps	17
Advocating and Meeting with Decision Makers	18
Supporting the Community	19
Teaming Up to Make a Difference	20
Appreciating our Supporters' Contributions	22
Fundraising: Dance to Cure Diabetes	24
Connecting the Online Community	25
Awarding Volunteers and Health Care Professionals	26
JDRF Governance	27
JDRF Leadership	28
Farewelling Long-Serving Board Members	30
Financials	3
Thank You	34
Contact JDRF	35

### **About**

#### **About JDRF**

JDRF is working to create a future without type 1 diabetes. Find out more at jdrf.org.au JDRF is changing the future for people with type 1 diabetes by funding and managing the world's best and most promising type 1 diabetes research.

As an organisation with a global view on type 1 diabetes research, we are uniquely positioned to lead and manage a united research strategy that brings faster and more substantial results.

We collaborate with industry partners, commercial partners and governments to bring our research results into the lives of people living with type 1 diabetes through facilitating the commercialisation of new technologies and therapies.

As we work towards a cure for type 1 diabetes, we also support the type 1 diabetes community with information, resources, personal connection, and hope for the future.

#### About Type 1 Diabetes

Type 1 diabetes is an autoimmune disease that is diagnosed in both children and adults, unrelated to diet or other lifestyle choices.

Less than a century ago, the prognosis for people diagnosed with type 1 diabetes was grim. While there is no cure for type 1 diabetes yet, technological and therapeutic advances allow people who now live with type 1 diabetes to have a better life and a brighter future.

However, people with type 1 diabetes are still insulin-dependent using either needles or an insulin pump, and do up to ten finger prick blood sugar tests a day.

Type 1 diabetes can also be a financial burden, and comes with the constant worry of diabetes-related health complications in the future.

A brighter future without type 1 diabetes is possible, and JDRF is here to make it happen.

## **Chairman's**

Message



As the new Chair of the JDRF Board, I thank our staff, volunteers, expert panels, supporters, sponsors, community and researchers who have made the past twelve months a remarkable year for type 1 diabetes research in Australia.

We are proud of our achievements in securing Australian Government funding of \$35m over five years for the JDRF Australian Type 1 Diabetes Clinical Research Network. Being named as the 2014 Charity of the Year in The Australian Charity Awards (read more on page 4) is well deserved recognition for the many staff, volunteers, community advocates and researchers whose work over many years has made this achievement possible.

JDRF continues to lead and set the direction and strategy of type 1 diabetes research. As announced in the Global Type 1 Diabetes Research Impact Analysis (read more on page 9), the research that JDRF funds in Australia has been recognised as being amongst the most important and respected research published. We are not only a research funder, but also a research leader.

As part of our research leadership, we are working to ensure that the best research is turned as quickly as possible into positive changes to the everyday life of people with type 1 diabetes. This means working with Governments, regulators, pharmaceutical companies, and clinicians, as well as the broader research community. In this way, we are playing our part in making sure the benefits of research flow to those who need them.

This evolution of JDRF's activities would not have been possible without great leadership. In particular, I want to thank our departing board members who have played such a large part in shaping the organisation that JDRF is today. We recognise them on page 30 of this report. In particular I would like to thank my predecessor, Stephen Higgs, who served for 13 years as Chair and who remains passionately committed to JDRF.

As the father of a child with type 1 diabetes, I live in hope for better treatments and therapies for my daughter and others like her, a more carefree life, and eventually a cure for type 1 diabetes. As the Chair of JDRF, I can see that there are exciting times ahead with a large-scale increase of Australian type 1 diabetes clinical trials soon to come that will help to deliver on the hopes of the more than 122,300 Australians living with type 1 diabetes.

Paul Heath

Chairman of the Board

CEO's

Message



In FY2013-14,
JDRF continued
to fund the
best and most
promising
Australian
type 1 diabetes
research as well
as setting the
foundations for
further progress.

#### Research Investment

This year, JDRF invested \$7.1m directly in Australian research and support programs, including direct funding for Australian research projects, management of Government-funded research and support initiatives, fellowships, conference grants, postgraduate scholarships, and travel grants for young scientists, and a range of other support programs.

A highlight of the year was the execution of a contract with the Australian Government for a grant of \$35m over five years for the expansion of the JDRF Australian Type 1 Diabetes Clinical Research Network (CRN). It was also a validation of the hard work of many of our government advocates over a number of years.

This expansion builds on the exceptional foundation delivered by the activities of the CRN to date. We have established a portfolio of grants and awards, supported by a network of collaborating sites and researchers nationally, that is unique in Australia and is outlined further in this document on page 10.

#### Financial Performance

JDRF's total revenue for the year was \$12.2m compared with \$11.2m in FY13. This increase was driven predominantly by the growth of the CRN and the increased funding provided for the Insulin Pump Programme. Fundraising revenue was down slightly on last year, although we continue to refresh and rebalance our fundraising portfolio towards higher growth and higher margin activities.

#### Community Engagement

JDRF extended its engagement with those newly diagnosed with type 1 diabetes or who have lived with the disease for a long time already by reaching out through the Resources Program with the provision of 2478 KIDSAC packs, t1d kits or *Straight to the Point* guides, and with ongoing support offered through our Peer Support Program. Supporters were then kept informed of key developments at JDRF and in the type 1 diabetes world through the monthly *Path to a Cure* newsletter, delivering relevant stories and up-to-date information on research progress each month.

#### Volunteers and other supporters

Fundamental to JDRF's advocacy, fundraising, and research success is the passion and commitment of volunteers and supporters across all levels of the organisation from the Board to front line fundraisers. We thank them for their efforts and engagement, alongside the many other stakeholders who will ultimately help deliver on our mission to find a cure for type 1 diabetes and its complications.

like Wilson

Chief Executive Officer and Managing Director



# **Charity of the Year**

Australian Charity Awards

In 2014, JDRF
was named
the Charity
of the Year in
The Australian
Charity Awards.

This prestigious award was granted in recognition of JDRF's commitment towards the Australian type 1 diabetes community, and the measurable impact of our many campaigns and initiatives.

Charities were judged on a number of categories including:

- 1. Planning
- 2. Research & development
- 3. Execution & implementation
- 4. Impact & outcomes
- 5. Performance management

In particular, the Australian Charity Awards program highlighted the success and long-term real-world benefits of JDRF's efforts towards securing \$35m of increased funding of type 1 diabetes clinical research through the JDRF Australian Type 1 Diabetes Clinical Research Network. As the largest ever single commitment to type 1 diabetes research in Australia, the positive impact of these five years' worth of funding will be felt for many years to come.

This award is a real tribute to JDRF staff, volunteers, advocates, the JDRF Board, our partners and supporters whose passion and dedication allow JDRF to advocate and fundraise for type 1 diabetes research funding, to fund and manage the world's best type 1 diabetes research projects, and to support the Australian type 1 diabetes community.

Accelerating Research and Health Outcomes

## Mission

Improving Lives, Curing Type 1 Diabetes

focused on bringing life-changing therapies from the laboratory to the community by impacting every stage of the research pipeline.

#### **FUNDED \$7.1M OF AUSTRALIAN**

TYPE 1 DIABETES RESEARCH AND SUPPORT PROGRAMS

MANAGED \$2.2M OF CLINICAL RESEARCH AND SUPPORT PROGRAMS THROUGH THE JDRF AUSTRALIAN TYPE 1 DIABETES CLINICAL RESEARCH NETWORK,

WITH **\$35M** of Further

GOVERNMENT FUNDING SECURED FOR THE NEXT FIVE YEARS

INSULIN PUMP PROGRAMME, ALLOCATING SUBSIDISED INSULIN PUMPS TO 204 CHILDREN

WHO WOULD OTHERWISE NOT BE ABLE TO ACCESS THE TECHNOLOGY

SUPPORTED 16 EARLY CAREER RESEARCHERS THROUGH AWARDING TARGETED GRANTS

TO AWARD AND FACILITATE
INTERNATIONAL RESEARCH COLLABORATION
AND MEASURE RESEARCH IMPACT



Goal: halt the autoimmune process and restore normal insulin production

Australian JDRF-funded researchers have discovered an important molecule that suppresses the immune cells that destroy beta cells. They found that helper cells of the immune system produce a molecule called CD52 that suppresses activation of killer immune cells, preventing them from attacking pancreatic beta cells. They also found that helper cells in people with type 1 diabetes produced much lower amounts of CD52 that didn't work as well, which could explain why killer cells are overactive in type 1 diabetes and destroy the body's own tissue.

**Next steps** – design and develop a drug that works like CD52 and suppresses killer immune cells.

JDRF-funded researchers in Europe have found further proof that coating islets with a seaweed extract called alginate increases the success of islet transplantation. In the study, human islet cells coated with alginate were implanted into non-obese diabetic mice. The results showed that the coated islets survived for a significantly longer period of time in the mice when compared to uncoated islets and that the islets secreted insulin in response to glucose. Similar results were seen in a person with type 1 diabetes who also received the coated islets.

**Next steps** – further testing in humans of the use of alginate in coating islet cells for transplantation to help them survive longer.

JDRF-funded researchers in the US have succeeded in generating large quantities of fully-functioning, insulin-producing, mature pancreatic beta cells from human stem cells. These researchers were able to turn matured human cells back into stem cells, which were then reprogrammed to develop into insulin-producing beta cells. When these created beta cells were transplanted into diabetic mice, blood glucose levels in the mice remained stable even after repeated testing and glucose injections. The ability to easily produce hundreds of millions of functioning pancreatic islet cells means that islet transplantation could become available to more people with type 1 diabetes in the future.

**Next steps** - develop a capsule that would protect these created beta cells from the immune system, while allowing the insulin produced to be released into the body.

Researchers in the US have successfully taught gut cells to produce insulin by switching off a single gene. Using a miniature model of the human intestine, scientists disabled the FOXO1 gene which is found in some gut cells. When this gene was turned off, gut cells began to act like pancreatic beta cells and produced insulin in response to rising blood glucose levels. The three benefits of this procedure are:

- 1. Retraining gut cells to produce insulin should be easier than creating new beta cells from stem cells and transplanting them.
- 2. Using the body's own existing cells rather than transplanting foreign tissue reduces the need for lifelong immune-suppressing drugs.
- 3. The gut is partly protected from the immune system, meaning that gut cells are less susceptible to the autoimmune destruction that is characteristic of type 1 diabetes.

**Next steps** – design and develop a drug to switch off the FOXO1 gene specifically in gut cells and activate their ability to produce insulin.

Accelerating Research and Health Outcomes

## **Treating**

Type 1 Diabetes

Goal: optimise blood sugar control and prevent or treat T1D complications Australian JDRF-funded researchers have shown the safety and efficacy of an insulin pump that switches off insulin supply predictively when blood glucose levels fall too low. They conducted a clinical trial in people with type 1 diabetes who wore an insulin pump connected to a continuous glucose monitor for six months. In the patients who had the pumps with the automatic low-glucose shut-off feature, the number of potentially dangerous hypoglycaemic episodes was reduced by 80%. There was no increase in HbA1c or hyperglycaemia in these people. This is an important step in the development of a closed-loop Artificial Pancreas for managing type 1 diabetes.

**Next steps -** further development of a more sophisticated system to deliver next generation Artificial Pancreas technology.

US-based researchers have developed a next-generation Artificial Pancreas which secretes both insulin and glucagon, like a normally functioning pancreas. Unlike first-generation Artificial Pancreas systems that only release insulin, this two-hormone Artificial Pancreas can mimic the body's natural response to low blood glucose by infusing glucagon. In a clinical trial, 52 participants maintained blood glucose within near-normal levels for five days with fewer hypoglycaemic episodes than a control group. This development is another strategy for managing low blood glucose levels in a closed-loop Artificial Pancreas system.

Next steps - further Phase II and III clinical trials of the two-hormone Artificial Pancreas.

A study co-funded by JDRF and the Helmsley Charitable Trust has discovered an immune therapy "cocktail" that may help people with type 1 diabetes make insulin again. Neulasta, an existing approved immunosuppressive drug, was given to people with type 1 diabetes to try and suppress the immune attack on beta cells. When taken in combination with Thymoglobulin, a drug used to suppress immune rejection of organ transplants, beta cell function was preserved in study participants. The study showed that Thymoglobulin killed the immune cells that attack pancreatic beta cells, and Neulasta helped to stimulate the growth of new beta cells.

Next steps - further testing of the efficacy of this drug combination in larger groups.

American JDRF-funded researchers have created a new 'nano-network' to deliver glucose-responsive insulin. This 'nano-network' is made of insulin, glucose specific enzymes and nano-particles. When glucose is present, the enzymes convert the glucose to gluconic acid which makes the 'network' acidic, and leads to insulin being released into the blood stream. When tested in diabetic mice, this 'network' was able to successfully release insulin and control blood glucose levels.

**Next steps** – ongoing development and potential future clinical trials to optimise the sensitivity of this nano-network under dynamic and 'real-life' conditions.

## **Preventing**

Type 1 Diabetes

Accelerating Research and Health Outcomes



Goal: Prevent T1D in people at risk Australian researchers have found an interesting quality in GAD65, a protein in the pancreas and brain linked to the development of type 1 diabetes. They found that GAD65 changes shape when it switches on and off. When the protein is "on", it is rigid and immobile, and creates neurotransmitters in the brain. When it is "off", it becomes mobile and is constantly 'shape-shifting'. Antibodies connect to particular shapes of the "off" version of GAD65 in the pancreas, and create the immune response that leads to beta cell destruction.

**Next steps** – map the structures of the different forms of GAD65 as it interacts with antibodies to understand what triggers the autoimmune response.

JDRF-funded US researchers have shown that the molecular fingerprint in people with type 1 diabetes and their families is distinctively different to unrelated individuals without type 1 diabetes. This distinct molecular "fingerprint" was marked by an increase in some immune system cells and lower activity of certain genes when compared to people without type 1 diabetes. The same fingerprint was still there even when the family member had none of the antibodies normally associated with type 1 diabetes, indicating that even though they may not have the usual predictive 'markers' for developing type 1 diabetes, they are still at greater risk than others with no family connection.

**Next steps -** mapping this molecular fingerprint to pinpoint likelihood of developing type 1 diabetes before the autoimmune response even begins.

The JDRF-funded TRIGR clinical trial has found that weaning babies on cow's milk based formula compared with hydrolysed formula makes no difference to the development of type 1 diabetes antibodies. In this international trial, over 2,000 infants with a first-degree connection to type 1 diabetes were randomised to receive either conventional cow's milk-based formula or hydrolysed formula which does not contain intact proteins. After seven years of follow-up, the infants fed the hydrolysed formula still developed type 1 diabetes antibodies at the same rate as those fed cow's milk formula, showing that cow's milk proteins are not affecting the inflammatory processes in the pancreas.

**Next steps** – the continued clinical trial study concludes in 2017 and aims to establish whether the development of type 1 diabetes itself is affected by formula choice.

JDRF-funded researchers in Australia have shown that molecules secreted by the parasite Fasciola hepatica (liver fluke) can prevent type 1 diabetes in a mouse model. As parasites are able to hide from the immune system, the researchers tested an extract of molecules secreted by the parasite in non-obese diabetic mice. The results showed that 84% of these mice remained free of diabetes compared with only 19% of non-injected mice. This protection against type 1 diabetes was due to the suppression of inflammatory molecules and increase of regulatory molecules from the T cells of the immune system.

**Next steps** – further study into how these parasitic proteins interact with the immune system to shed light on potential new prevention therapies.

The 2013 Global Type 1 Diabetes Research Impact Analysis demonstrated that Australia is a leading force in the world of type 1 diabetes research, with our contribution to the global diabetes research landscape doubling in the last ten years.

#### Key findings:

GLOBALLY **OVER 22,000 ARTICLES** ABOUT TYPE 1 DIABETES WERE PUBLISHED DURING THE FIVE YEARS OF THE REVIEW (2008 - 2012)

THE VOLUME OF PUBLICATIONS ABOUT TYPE 1 DIABETES GREW BY 30%

JDRF FUNDS OVER **8% OF ALL TYPE 1 DIABETES PUBLICATIONS** GLOBALLY AND 15%
OF TYPE 1 DIABETES PUBLICATIONS IN AUSTRALIA

In Australia:

OUR CONTRIBUTION TO THE VOLUME OF GLOBAL SCIENTIFIC LITERATURE IN TYPE 1 DIABETES HAS ALMOST DOUBLED IN THE LAST TEN YEARS

WE HAVE THE **6TH LARGEST PROPORTION**OF TYPE 1 DIABETES PUBLICATIONS FOCUSED ON CLINICAL RESEARCH

WE RANK IN THE **TOP 10 COUNTRIES IN THE WORLD** IN THE QUALITY OF
TYPE 1 DIABETES RESEARCH PUBLISHED

CITED ALMOST TWICE AS MANY
TIMES AS OTHER PUBLICATIONS

The Research Impact Analysis was conducted as a part of the Global Diabetes Research Innovation Partnership between the Macquarie Group Foundation and JDRF Australia.

## Clinical Research Network

Australian Type 1 Diabetes Clinical Research Network

Accelerating Research and Health Outcomes





The Australian Type 1 Diabetes Clinical Research Network (CRN) is a national collaborative network that supports and promotes the most promising emerging researchers and research projects in type 1 diabetes clinical research in Australia. Led by Australia's brightest minds in type 1 diabetes, it is built around an innovative model that facilitates national and international collaboration on cutting edge research projects.

#### The objectives of the CRN are to:

- 1. Increase the volume and impact of clinical research
- 2. Support the more efficient and effective delivery and adoption of clinical research
- 3. Build long-term clinical research capacity in Australia
- 4. Nurture the next generation of clinical research leaders
- 5. Create a more connected and cohesive clinical research system

Originally launched by JDRF in 2010 through a \$5m grant from the Australian Government, it currently funds twelve projects and five career development awards across Australia. It brings together and builds research teams from multiple research disciplines to answer the most important type 1 diabetes research questions, and brings us closer to finding a cure for type 1 diabetes and its complications.

"I believe that the CRN is the best way that we as researchers can bridge the gap between laboratory-based basic research and deliverable changes in type 1 diabetes management."

Professor James Best, Chair of the Steering Committee, Australian Type 1 Diabetes Clinical Research Network

The CRN has already laid a solid foundation for future Australian clinical research in type 1 diabetes. From the Pilot & Feasibility Grants that move research up the pipeline to clinical stage, the Fellowships to encourage clinicians to work in type 1 diabetes research, and the building of research infrastructure such as a data network and a biobank to support research, there are many proud achievements.

The recent award of \$35m over five years by the Australian Government for the continuation and expansion of the CRN will help to build upon the existing robust foundation, further increasing the excellence of clinical research that will positively impact the lives of people with type 1 diabetes.

Moving forward, the CRN will continue to support the more efficient and effective delivery and adoption of research outcomes, build long-term research capacity in Australia, and nurture the next generation of research leaders. It will also create a more connected and cohesive research system, and position our researchers for national and international collaboration, delivery, adoption and investment.

50 RESEARCHERS
37 INSTITUTIONS
12 PROJECTS FUNDED

**3 LARGE-SCALE CLINICAL INITIATIVES** 

9 PILOT & FEASIBILITY GRANTS

2 MENTORED CLINICAL RESEARCHER FELLOWSHIPS

37 KEY OPINION LEADERS CONTRIBUTED TO THE CRN

# **Changing the Future**

With Clinical Trials



30-year-old Trevor has been living with type 1 diabetes for twenty years. Type 1 diabetes isn't just about planning around food and insulin. It's also about making sure you're never too far from your supply kit, and ensuring that people around you know what to do when things go wrong. It's a lot of extra responsibility that never goes away.

When I found out about the CRN-funded Telehealth trial, I put my hand up to participate. It's very easy to fall out of touch with your diabetes especially if you're an adult in regional NSW, as I am. I hadn't seen an endocrinologist since I was 18-years-old so being able to connect with an endocrinologist through the Telehealth system was such a great opportunity and experience.

Telehealth has the ability to open up opportunities for all people with type 1 diabetes to see an endocrinologist or other specialist, no matter where they live. I can't always travel to the city to see a specialist, but I can connect with them via a Telehealth system.

If my participation in this trial has helped other rural people like me, there's no better reward!

The JDRF CRN-funded Telehealth project is led by Dr Lin Perry of the University of Technology Sydney. Dr Perry and her team are piloting a telehealth service to provide specialist consultations and follow up for rural and regional adults using insulin pumps who would otherwise not see an endocrinologist regularly.

Accelerating Research and Health Outcomes

## Supporting Early Career Researchers

Consultations with Australia's best and most talented type 1 diabetes researchers highlighted a need to support and facilitate career paths for young aspiring researchers, in order to attract and keep the brightest scientific minds in this research field.

To support this need, JDRF invests in the next generation of Australian type 1 diabetes research talent through our Travel Grants program and Mentored Clinical Research Fellowships (managed through the CRN).

#### Mentored Clinical Researcher Fellowship

Clinicians who are in the process of establishing a research career are supported by the CRN's Mentored Clinical Researcher Fellowship. Recipients are funded one day per week for a clinical research project, which allows them to take time from their day-to-day work seeing patients, to dedicate time solely to clinical research. This helps to increase the number of clinical research projects and the potential for bringing new therapies and treatments to people with type 1 diabetes.

#### 2014 Mentored Clinical Researcher Fellowship Recipients

Dr Martin De Bock	Dr Bala Krishnamurthy

#### **Travel Grants**

Researchers and allied health and nursing professionals are supported in the early stages of their career by the JDRF Travel Grants Program. With a focus on increasing opportunities for scientific visits or exchanges, grant recipients get the opportunity to collaborate and connect with established researchers and broaden their experience and knowledge in the field of type 1 diabetes.

#### **2014 Travel Grant Recipients**

Kirstine Bell	Gavin Higgins	Sybil McAuley
Jonathan Chee	Mugdha Joglekar	Jessica Pane
Matthew Cooper	David Liuwantara	Dimeng Pang
Martin De Bock	Elizabeth Malle	Anna Pham-Short
Aveni Haynes	Eliana Marino	Helen Phelan

## Australian JDRF Funded Research in 2013-14

#### JDRF Grants

Investigator	Institution	State	Title
Dr Vicki Bonke	Baker IDI Heart & Diabetes Institute	VIC	Synergistic actions of NADPH oxidase and PKC in diabetic nephropathy
Prof Peter Colman	Walter & Eliza Hall Institute of Medical Research	VIC	Type 1 Diabetes TrialNet International Site - Australia/New Zealand
Dr Melinda Coughlan	Baker IDI Heart & Diabetes Institute	VIC	Targeting the C5a-CD88 axis in diabetic nephropathy
Prof Jennifer Couper	University of Adelaide	SA	Early environmental determinants of pancreatic islet autoimmunity (ENDIA)
Dr Karen Dwyer	University of Melbourne	VIC	VCP746, a novel adenosinergic therapeutic, promotes beta-cell regeneration
Dr Katie Edwards	Queensland University of Technology	QLD	Novel corneal nerve tests in diabetic neuropathy; growth rate and mapping
Prof Nathan Efron	Queensland University of Technology	QLD	A longitudinal study of ophthalmic markers of neuropathy in Type 1 diabetes
Dr Esteban Gurzov	St Vincent's Institute of Medical Research	VIC	The role of PTPN2 & PTPN22 in pancreatic ß-cell function and survival
Dr Emma Hamilton-Williams	University of Queensland	QLD	A genetic link between gut microbial flora and T1D susceptibility
Prof Len Harrison	Walter & Eliza Hall Institute of Medical Research	VIC	CD52hi T cells as biomarkers in type 1 diabetes
Prof Len Harrison	Walter & Eliza Hall Institute of Medical Research	VIC	Methylation and miRNA expression as biomarkers in type 1 diabetes
Dr Gavin Higgins	Baker IDI Heart & Diabetes Institute	VIC	Impaired MnSOD causes dysregulation of mitophagy and accumulation of dysfunctional mitochondria in diabetic nephropathy
Prof Karin Jandeleit-Dahm	Baker IDI Heart & Diabetes Institute	VIC	Nox5 is a new target for diabetic nephropathy
Dr Mugdha Joglekar	University of Sydney	NSW	Inhibition of cytotoxic T lymphocyte-mediated beta cell killing
Prof Tim Jones	University of Western Australia	WA	Adolescent diabetes intervention trial: Australia
Prof Tim Jones	University of Western Australia	WA	Low Glucose Suspend Study
Prof Tom Kay	St Vincent's Institute of Medical Research	VIC	Identifying islet factors that stimulate effector capacity in CTLs
Dr Bala Krishnamurthy	Walter & Eliza Hall Institute of Medical Research	VIC	Type 1 Diabetes TrialNet International Site - Australia/New Zealand
Dr Jinhua Li	Monash University	VIC	Targeting Smad3 acetylation in the treatment of diabetic nephropathy
Dr Trang Ly	The University of Western Australia	WA	Low Glucose Suspend Study
Dr Stuart Mannering	St Vincent's Institute of Medical Research	VIC	Molecular and functional analysis of human islet- infiltrating T cells
Dr Eliana Marino	Monash University	VIC	Gut permiability, inflammation and microbiota modulate type 1 diabetes
Dr Jane Mullaney	University of Queensland	QLD	A link between the gut microbiome and type 1 diabetes

#### JDRF Grants cont.

Investigator	Institution	State	Title
Dr David O'Neal	University of Melbourne	VIC	Overnight Closed-Loop in the Home: Metabolic Control
Prof Carol Pollock	Northern Clinical School, University of Sydney	NSW	KCa3.1 as a therapeutic target in diabetic nephropathy
Prof Anthony Purcell	Monash University	VIC	Presentation of post-translationally modified antigenic peptides in T1D
Dr Helen Thomas	St Vincent's Institute of Medical Research	VIC	Preventing beta cell-T cell interactions with Jak inhibitors
Dr Chris Tikellis	Baker IDI Heart & Diabetes Institute	VIC	ACE2 in the vascular complications of type 1 diabetes
Dr Michael Ward	Mater Medical Research Institute	QLD	Mitochondrial dysfunction in diabetic kidney disease
Dr Anna Watson	Baker IDI Heart & Diabetes Institute	VIC	The effects of novel GPx1-mimetics in diabetic nephropathy

#### Clinical Research Network Grants

Investigator	Institution	State	Title
A/Prof Maria Craig	The Children's Hospital at Westmead	NSW	The Australasian Diabetes Data Network (ADDN)
Prof Alicia Jenkins	NHMRC Clinical Trials Centre	NSW	Reducing with Metformin vascular adverse legions in Type 1 diabetes (REMOVAL)
Prof Timothy Jones	The University of Western Australia	WA	Hypoglycaemia prevention with predictive suspension of insulin delivery
Dr Paul Benitez-Aguirre	The Children's Hospital at Westmead	NSW	Retinal vascular geometry as a predictor of long term microvascular complications in young people with type 1 diabetes – A 25 year follow-up study from the Oxford Regional Prospective Study (ORPS).
Dr John Wentworth	St Vincent's Institute of Medical Research	VIC	Dissecting the heterogeneity of type 1 diabetes as an aid to risk prediction and trial design
Prof Anand Hardikar	NHMRC Clinical Trials Centre	NSW	A clinical study for validating beta cell death in type 1 diabetes
Prof Lin Perry	University of Technology Sydney	NSW	Telehealth to support insulin pump users in regional and rural Australia
Dr Michelle O'Connell	Murdoch Children's Research Institute	VIC	Exploring the acute impact of hypo-& hyperglycaemia on brain function in T1D
Prof Shane Grey	Garvan Institute of Medical Research	NSW	Islet epigenetic programming and reprogramming during transplantation
Prof Eccosse Lamoureux	Centre for Eye Research Australia	VIC	Retinal vascular function during hyperglycaemia and the role of vitamin C
Prof Jenny Gunton	Garvan Institute of Medical Research	NSW	Machine-Intelligent Artificial Pancreas System
Dr Melinda Coughlan	Baker IDI Heart & Diabetes Institute	VIC	Elucidating mitochondrial defects in human diabetic nephropathy
Prof Stephen Twigg	University of Sydney	NSW	Type 1 Diabetes and Exercise RCT of an On-Line Educational Tool
A/Prof Maria Craig, Prof Tim Jones, Prof Ranjeny Thomas, Prof Grant Morahan	Jointly: The Australasian Paediatric Endocrine Group, The University of Queensland Diamantina Institute, and The University of Western Australia		Collaborative Biospecimen Data Linkage Project

## **Improving**

Access to Diabetes Technology

The Insulin Pump
Programme
improves short
and long-term
health outcomes
for hundreds
of Australian
families, and
provides more
freedom and
flexibility in dayto-day life with
type 1 diabetes.

The Government-funded Australian Type 1 Diabetes Insulin Pump Programme focuses on providing access to insulin pump therapy for families with young children who would otherwise not be able to afford the technology.

Thanks to the efforts of our government advocates, this year the Insulin Pump Programme has supported 204 families with young children through the allocation of an insulin pump, the highest number in the history of the Programme.

#### Since 2008, this programme has allocated a total of 643 pumps to families across Australia.

Pump manufacturers voluntarily provide a copayment to bridge the financial gap between the Government-provided subsidy of a maximum of 80% of the cost of insulin pump technology, allowing 99% of subsidy recipients to have no out-of-pocket costs.

Recipients of the insulin pump subsidy consistently report improved quality of life since going on insulin pump technology. In particular they report improvements to the child's level of independence and confidence, increased freedom in lifestyle and more flexibility at meal times.

Moving forward, funding has been confirmed for a further 68 subsidised insulin pumps for the families of young children with type 1 diabetes who would otherwise not be able to access this life-changing technology.

Accelerating Research and Health Outcomes

## **Changing Lives**

With Insulin Pumps



Thank you
to JDRF and
the Australian
Government
for supporting
us through an
Insulin Pump
Programme
grant - you've
made a massive
difference to
Mia and
our family!

Our daughter Mia was diagnosed with type 1 diabetes in May 2013. The diagnosis was devastating, and the months afterwards were difficult as Mia's blood sugar levels were wildly erratic. She even had her first diabetic seizure within a year of diagnosis.

After advice from our doctor to consider an insulin pump, I found out about the JDRF Government-funded Insulin Pump Programme, so I added Mia's name to the waiting list. When we received the phone call to say that we had been approved for the Insulin Pump Programme grant, it was a real relief. We wouldn't have been able to afford an insulin pump if not for this grant.

Choosing to go on an insulin pump is a very personal decision, but it was the right one for our family. We saw the benefits for Mia's health and wellbeing after only weeks on the insulin pump.

Mia now has more consistent blood glucose levels, more consistent moods, and more flexibility in what she eats and when. Before the pump, she could be happy one minute then angry the next – it was hard to tell if her moods were that of a typical five-year-old, or whether it was due to having type 1 diabetes. She is now a much happier child, and our family is much happier too.

Natasha and Aaron, parents of Mia Insulin Pump Programme recipient

## Advocating

and Meeting with Decision Makers



JDRF advocate Emma (age 12) and Fiona Scott MP

12-year-old
Emma was
diagnosed with
type 1 diabetes at
the age of seven.
Since then, she
has dedicated
herself to being a
JDRF advocate.

Emma says "My aim is to raise both funds and awareness for type 1 diabetes so one day there will be a cure for me and for the people in Australia suffering from type 1 diabetes. I've met regularly with my local MP, Fiona Scott, to talk to her about life with type 1 diabetes".

Fiona Scott MP says "Emma is a trailblazer in her work to get the message out about type 1 diabetes. What impresses me most about Emma is how effective she is at raising awareness of type 1 diabetes, particularly across her school communities. I am also impressed at how she has worked and engaged with our local media."

She continues, "Through Emma's positivity and determination, I too have become extremely passionate about finding a cure for diabetes. As such, it gives me great pleasure to acknowledge the Government's commitment to ongoing diabetes research, with a \$35m contribution to the Australian Type 1 Diabetes Clinical Research Network and, further, for providing \$1.4m for the Diabetes Insulin Pump Programme in 2013."

Through the efforts of advocates around Australia like Emma who are dedicated to speaking with decision-makers on behalf of all people with type 1 diabetes, JDRF was able to secure research funding and deliver existing therapies to people living with type 1 diabetes.

Empowering our Community

## Supporting the Community

Diabetes health care professionals have an important role to play in the lives of people with type 1 diabetes. JDRF supports these health care professionals in delivering resources like our KIDSAC and t1d kit resource packs, and our *Straight to the Point* guide to life with type 1 diabetes.

#### Supporting Newly Diagnosed Children & Adults

JDRF supports the type 1 diabetes community from the very start of their diabetes journey. Our KIDSAC and t1d kit informational resource packs were distributed to 537 diabetes clinics and hospitals in 2013-14, with a total of 1,219 KIDSAC packs and 678 t1d kits given to children and adults newly diagnosed with type 1 diabetes.

Our Peer Support Program offers further one-on-one support from an experienced volunteer who has lived with type 1 diabetes and who can offer practical advice. In 2013-14, our 98 Peer Support volunteers from around Australia connected with 366 newly diagnosed families and adults and offered support to a further 1042 people.

"My daughter was recently diagnosed with type 1 diabetes.
The care and support we have received has been amazing.
I just wanted to say thank you for Ruby Bear and the KIDSAC,
and also a big thank you to a lovely volunteer for her phone call.
She called out of the blue and offered her time and support
and listened to my concerns giving helpful advice." - Asta K

#### Getting Straight to the Point

The second edition of our *Straight to the Point* guide to type 1 diabetes was launched at the ADS/ADEA Annual Conference. Since the launch of the new edition of the *Straight to the Point* guide, 514 guides have been distributed to health care professionals for their patients, with a further 67 guides distributed directly to adults who requested the resource from JDRF.

## **Teaming Up**

to Make A Difference



The 40,000 people around Australia who joined the 2013 Walk to Cure Diabetes in 30 different locations are part of a great team of individuals who are determined to make a difference and change the future for type 1 diabetes.

The Walk to Cure Diabetes has been an integral part of the research advances of the past twenty years, raising \$30m in twenty years with over \$1.5m in 2013 alone. These funds have gone towards research that has brought more efficient changes in diabetes technologies and therapies to the lives of people with type 1 diabetes.

To all the Walkers who ran regional events, created teams, fundraised, and who worked so hard to help us make great progress to our goal of curing type 1 diabetes - thank you.

#### **335** Ride to Cure Diabetes

Raising over \$1.2m in 2014, the Ride to Cure Diabetes is an incredible event that sees people from all over Australia meet for the weekend or just the day, to commemorate their extraordinary fundraising and cycling efforts. Held in the scenic Barossa Valley, RAISED 335 Riders got together to make a million dollar impact on type 1 diabetes research.

> Daniel Rosato, Team Captain of Team VelosUnitas, won the Day Rider Spirit Award, and the Rossi brothers Enio and Eric won the Weekend Spirit Award for their long-time commitment to the Ride to Cure Diabetes. The Cubed Communications Teamwork Award was awarded to Gerard Yorston of Team Telstra for leading the biggest corporate team ever to join the Ride to Cure Diabetes.

Thank you to Bernie Jones Cycles, Motorola, and the Rotary and Kiwani Clubs of the Barossa Valley for their many years of support.

**RAISED** 

#### **Team Cure Diabetes**

It takes an especially dedicated person to have a great fundraising idea, and then to follow through and make it happen. These people become part of Team Cure Diabetes, a strong and passionate team dedicated to raising money for research into a cure for type 1 diabetes.

In 2014, over 200 people did exactly that and raised nearly \$871k through a variety of different fundraising activities that included setting up a running foundation that held a week-long ultramarathon event in the desert, donating proceeds from their own business, organising a dress-down day in the office, or even simply running a bake sale.

Tillie Stephen is one example of these self-motivated and dedicated fundraisers. To read more about her dance and music fundraising evening, turn to page 24.

**ATTENDEES** \$1.2 MILLION RAISED

#### 1500 GALA JDRF Gala Ball

The 2014 Gala Ball was held in Sydney, Brisbane, Perth and for the first time in Melbourne in May 2014. With a theme of New York, New York, the Gala Balls were spectacular nights of live entertainment and music, with fantastic New York graffiti and pop art themed décor that set a glamourous background.

Raising over \$1.2m in 2014, the Gala Balls offered the opportunity to contribute to JDRF and type 1 diabetes research through live and silent auctions, a Wine Wall, Treasure Chest, raffles, and direct donations on the night during our "Fund A Cure" segment.

As guests leave the Gala Ball late in the night, they know that they have contributed to JDRF and helped to change the future for type 1 diabetes.

230 **JUMPERS** RAISED

#### Jump to Cure Diabetes

In February and March 2014, over 230 brave individuals in 13 different locations overcame their fears to take on the JDRF Jump to Cure Diabetes skydiving challenge, raising a combined \$370k.

Many of our Jumpers are friends and families of people with type 1 diabetes who embrace this challenge in recognition of the daily challenges that people with type 1 diabetes face. They sign up to show their support of their loved ones by raising funds for research to create a better and brighter future.

PARTICIPANTS

#### **Jelly Babies**

Jelly Babies are a symbol of type 1 diabetes and JDRF for many people. As a fun and easy way to raise awareness and funds for type 1 diabetes research, over 1000 people chose to get involved with Jelly Babies in 2014 to help deliver a better future for children and adults with type 1 diabetes.

By selling Jelly Babies Iollies and merchandise, or getting a school involved for awareness and fundraising activities, these people helped to raise over \$255k in 2014.

We send a special thank you to our distribution partner TOLL IPEC who helps ensure that our Jelly Babies Iollies and merchandise reach our dedicated volunteers around the country.

## Appreciating Our Supporters' Contributions

With the **generous support** of our donors and corporate and industry partners, **JDRF** is able to **fund** the best and most promising **Australian type** 1 **diabetes research** and create a **brighter future** for people with type 1 diabetes.

#### Major Supporters

Peter and Rosemary Appleton
Tim and Vanessa Bednall
Peter and Wendy Bot
Helen Bunning
Phil Chronican
lan and Wendy Coghill
Joanne Crosby and Carey Lyon
Shaun and Trudy Davison
Dennis and Cynthia Di Bartolo
Roy Edwards
Richard and Janine Goyder
Jill and Brian Harrisberg
Michael Harrison

Paul and Linda Heath
Rosanna and John Hindmarsh
Blanka Kosak
Gabrielle Krohn
Natasha and Laurence Mandie
Miss Maud
Carole and Malcolm McIntyre
Paul Montauban
The Nestor Family
Andrew Penn & Kallie Blauhorn
Ryan Perry
Craig Pinn
Matthew Rady

Belinda Ray	
Guy Russo	
Jonathan and Lee-arne Salm	on
Jason and Jenette Simpson	
Геат 4040	
Cathryn and Phillip Urquhart	
Brian and Maureen White	
Tom and Rebecca Wiley	
Peter and Glenda Wilson	
Alexander Woolley	
Ted and Mandy Yencken	
YLC Victoria	

#### Organisations

Abbott Diabetes Care	Groundwork Plus	QBD Bookstores
Amcal	Guthy-Renker	Queensland Government
AMSL (Animas)	Handeye Productions	Roche Diagnostics Care
Atomic Search	Herbert Smith Freehills	Salon Express
Australian Football League	IBM Global Services	Sanofi Diabetes
Australian Government	ISIS	Telstra
Benz Industries Pty Ltd	King and Wood Mallesons	Toll Group
Boral Ltd	Lilly Diabetes	TSD (Top Spots Digital)
Brick Pitt Charity Golf Challenge	Macquarie Group	Viatek Technology
BUPA Health Australia	Malouf Group Pharmacies	Wesfarmers Limited
City Beach Australia	Medtronic Australasia	Westpac Group
Commonwealth Bank	Minter Ellison	Woodend Pty Ltd
Dance to Cure Diabetes	Motorola Solutions Pty Ltd	Woolworths Limited
Direct Connect	Novo Nordisk	Wynnum Golf Club
Ford Motor Company	NSW Government	
Gold Coast Brisbane Club / Chain Reaction Foundation	Pinnacle Hospitality and Travel People	

#### **Trusts & Foundations**

Bowen Foundation Inc	IOOF Foundation	
Emorgo Foundation	John T Reid Charitable Trusts	
The G W Vowell Foundation Limited  Hacket Foundation The Helpful Foundation	Macquarie Group Foundation	
	Maple-Brown Family	
	Charitable Foundation	
	The Pace Foundation	

Peta Seymour Foundation
Shirley W Greathead Foundation

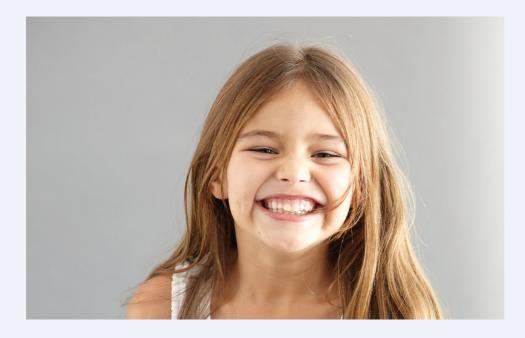
#### Bequests

The Estate of G M Cooper	The Estate of M E Huon

For more information about our supporters and corporate and industry partners, please visit www.jdrf.org.au

## **Fundraising**

Dance to Cure Diabetes



Tillie is mother
to 8-year-old
India who has
type 1 diabetes.
Motivated to
help find a
cure for India,
Tillie organised
"Dance to Cure
Diabetes",
a fundraising
event that
raised over
\$14k for JDRF.

I wanted to do something for India to show that we truly want a cure to be found, so that one day she could live a life without the constant worries. I started off with a small but successful fundraising event at India's school. My next thought was how to do something on a larger scale to raise more money for research, and also awareness of type 1 diabetes in the wider community through a public event.

Dance to Cure Diabetes was my next big idea. As my eldest daughter attends Brent Street Performing Arts, I was able to get their support. They introduced me to Jordan Turner (a BSA student with type 1 diabetes) who was on Season 4 of So You Think You Can Dance, other fellow students who won SYTYCD, as well as Jacinta and Jordan from X Factor 2013. With this line up of talent, I had the makings of an evening family event.

I also called on my contacts who donated their skills in creating advertising and printing brochures. I got sponsors who helped to cover costs of the event as well, which meant that more of the money I raised could go to JDRF.

Organising this event was a lot of work, but when I had nights when I was up four times trying to get India's blood sugar levels down or preventing her from having a hypo, I knew that I was doing my bit to help JDRF raise funds for a cure and improve India's life

After the event, knowing that I managed to raise awareness of type 1 diabetes in the local community was satisfying. Many people who attended commented on how little they knew about type 1 diabetes before the event – so raising awareness was a real bonus here as well.

Only through the support of determined and motivated people like Tillie, can JDRF fund the best type 1 diabetes research and make the future brighter for India and all people living with type 1 diabetes.

Empowering our Community

## Connecting

the Online Community

JDRF's online network is a hub of information for the type 1 diabetes community. No matter where our community members are located, whether it is in a city or in the country, people with type 1 diabetes can feel connected to us through our online communication channels.

Our Facebook community of over 15,000 dedicated followers engages with JDRF daily about the news and stories that most interest them. From research updates straight from the source and stories from others in the community, the JDRF Australia Facebook page is the centre of online discussions about research and life with type 1 diabetes.

Our monthly e-newsletter *Path to a Cure* goes out to over 30,000 recipients who click through to in-depth articles and stories about the issues that mean the most to them.

Our newly redesigned website is usable across all browsers and platforms, allowing our community to access the most up-to-date JDRF and type 1 diabetes information no matter what device they are using.

Moving forward as technologies change in the future, JDRF will be adopting new communication channels such as mobile apps to ensure that we continue to speak to our community in the best and most appropriate way for them.

#### Connect to JDRF:



www.jdrf.org.au



www.facebook.com/jdrfoz



www.twitter.com/JDRFAus

## Awarding

Volunteers and Health Care Professionals

#### JDRF Volunteer Recognition Awards

JDRF was founded in 1982 by the efforts of Australian volunteers and parents of children with type 1 diabetes hoping for a better future for their children. Today, we are still driven by the passion and dedication of our many volunteers who help us towards our mission to deliver a better life for people with type 1 diabetes, and one day a cure.

In acknowledgement of the great gift of time, skills and advice that our many volunteers around the country contribute, JDRF runs the Volunteer Recognition Awards every year. Our National Award winners in 2014 were:

- National Volunteer of the Year Gres and Christy Vukman
- National Young Volunteer of the Year Annaliesse Silva

For a full list of State Volunteer Award winners, please visit www.jdrf.org.au

#### JDRF Diabetes Educator Awards

More than just devoted providers of diabetes care and education, Diabetes Educators are also trusted emotional supporters who provide a shoulder to lean on and help families get through some of the most difficult times of life with type 1 diabetes.

JDRF recognises the achievements of Diabetes Educators around Australia through the annual Diabetes Educator Awards, supported by Abbott Diabetes Care.

In 2014, three Awards were presented:

- Excellence and Innovation Gael Holters, Bankstown-Lidcombe Diabetes Clinic
- Impact and Relationships Dianne Roberts, ACT Health Paediatric and Adolescent Diabetes Service
- People's Choice Michelle Kuerschner, Port Augusta Hospital

Congratulations to the winners, and thank you for your passionate commitment to delivering high quality type 1 diabetes education, care, and support.

Strengthening our Organisation



JDRF and its
Board are
committed to
achieving and
demonstrating
high standards
of corporate
governance.

#### The Board of Directors

The Board operates in accordance with the broad principles set out in its Constitution as adopted by the company on 8 April 2000 and updated from time to time.

A Board Charter has been approved by the Directors and aids in guiding the operation and activities of the Board. Board members are responsible to the members for the performance of the company and seek to work in the best interests of the company. For a full list of board members, please refer to page 28.

#### Finance & Audit Committee

The aim of the Finance & Audit Committee is to provide oversight and advice on the financial activities of JDRF. It is responsible for working with the senior management team on developing and tracking budgets, monitoring forecasts, and reviewing management and statutory accounts.

The Finance & Audit Committee includes the following directors:

Trevor Allen	Treasurer and Chairperson	
Stephen Higgs	Jul - Nov 2013	
Peter Wilson	Jul - Nov 2013	
Paul Heath	From Nov 2013	
Stuart Green	From Nov 2013	

The Committee also includes three independent non-director members:

Boris Musa	
Fiona Hindmarsh	
Peter Whyntie	Jul - Sep 2013

#### Risk assessment and management

The Board is responsible for ensuring there are adequate policies in relation to risk management, compliance and internal control systems. Considerable importance is placed on maintaining a sufficiently strong control environment. Company policies are designed to ensure strategic, operational, legal, reputation and financial risks are identified, assessed, effectively and efficiently managed and monitored to enable achievement of the organisation's objectives.

A risk management plan has been developed and is being implemented. Where risks have been identified, mitigating strategies and actions have been put in place or are being put in place. Regular reporting will be provided to the Finance and Audit Committee in the 2015 Financial Year.

#### Strengthening our Organisation



Some of Australia's best regarded business and research leaders sit on JDRF's Board of Directors, Advisory Board, and Research Review Panels. With their advice and guidance, JDRF continues to build a bright future for people with type 1 diabetes.

#### **Board of Directors**

#### Paul Heath (Chair)

Chair of Remuneration and Nominations Committee Member of the Finance and Audit Committee

#### Natasha Mandie (Vice-Chair)

B Comms (Hons), LLB (Hons), GAICD

Member of Remuneration and Nominations Committee

#### Trevor Allen (Treasurer)

B Coms (Hons), CA, FF, MAICD Chair of the Finance Committee

#### Mike Wilson (Company Secretary and CEO)

BSc, BEc (Hons), GAICD

#### **Robert Antulov**

BE, MBA, MAICD

Member of the Remuneration and Nominations Committee

#### Mike Chuter

Chairman of Victorian Corporate Committee

#### **Rebecca Davies**

LLB (Hons), BEc, FAICD

Member of the Board of JDRF International Chair of the JDRFI International Affairs Committee Member of the JDRFI Research Council

#### Stuart Green

BA (Hons), MBA, FCA, ACMT

Member of the Finance and Audit Committee

#### Kristen Mason

#### BA, MBA

Chair of the NSW Ball Committee

Member of the Remuneration and Nominations Committee

#### **Timothy Morphy**

BA, LLB, Grad. Dip. Legal Prac., MBA

#### Jonathan Salmon

MAICD

Member of the Remuneration and Nominations Committee

#### **Cathryn Urquhart**

BJuris, LLB

#### Michael L. White

BA in History, MBA

Member of the JDRFI Board of Chancellors

#### For more information and full biographies, please visit www.jdrf.org.au

#### **Advisory Board**

#### Richard Goyder AO (co-chair)

CEO & Managing Director, Wesfarmers

#### Ian Narev (co-chair)

CEO, Commonwealth Bank

#### Tim Bednall

Partner and Ex-Chairman, King & Wood Mallesons

#### Rebecca Davies

Ex-Partner and Board Member, Freehills

#### Professor Ian Frazer AC

Director, Diamantina Institute, University of Queensland

#### **Matthew Grounds**

CEO, UBS Australia

#### Paul Heath

Chair, JDRF

#### Steve Higgs

Ex-Chairman, JDRF

#### Belinda Hutchinson AM

Chancellor, University of Sydney

#### Sean Larkin

Managing Director, HCF

#### Peter Mason AO

Ex-Chairman, AMP

#### Howard McDonald

Chairman, Rodd & Gunn

#### Simon McKeon AO

Chairman, AMP and CSIRO

#### Jeff Browne

Ex-Managing Director, Nine Network Australia

#### **Phil Chronican**

CEO, ANZ Bank (Australia)

#### **Christopher Corrigan**

Former Managing Director, Patrick Corporation

#### **Nicholas Moore**

CEO, Macquarie Group

#### **Sir Ralph Norris**

Ex-CEO, Commonwealth Bank

#### Rod Pearse OAM

Ex-CEO & Managing Director, Boral

#### Andy Penn

CFO and Group Executive International, Telstra

#### Brendan Riley COO, Telstra

\_\_\_\_\_

#### Professor John Shine AO

Chair, CSL

#### Mark van Dyck

Managing Director, Compass Group Australia

29

#### Bill Wavish

Former Executive Chair, Myer

#### Mike Wilson

CEO & Managing Director, JDRF

#### Peter Wilson

Ex-CEO, Spotless Group

#### Professional Advisory Panel

Prof Phillip O'Connell (Chair)	A/Prof Josephine Forbes	Dr Cecile King
A/Prof Trevor Biden	A/Prof Jenny Gunton	Dr Stuart Mannering
Dr Tom Brodnicki	Prof Timothy Jones	Prof Ranjeny Thomas

#### Lay Review Panel

Christine Garberg (Chair)	Dr John Males	Jo Crosby
Gerard Cudmore	Dianne Kerr	Dr Jan Walker
Dr Naomi Harris	Dr Tim Porter	Trevor Stuart
Stephen Higgs	Natasha Mandio	

#### Allied Health and Nursing Professionals Advisory Panel

Dr Jane Overland (Chair)	Deborah Foote	Erica Wright



In this time of growth and renewal, JDRF thanks our former board members who retired from the board during this year.

#### Stephen Higgs, Ex-Chair (Director from November 1993 - November 2013, Chair from 2000 - 2013)

"The impact of Steve's guidance as board member and then Chairman of JDRF over the past twenty years cannot be underestimated. With his support, JDRF has grown and developed into a charity that not only funds more research than ever before, but takes a leadership role in also directing and managing research strategy."

Mike Wilson Chief Executive Officer, JDRF

#### Dr Sue Alberti AO (August 1988 - November 2013)

"Sue has always had a great passion for diabetes research. Her significant contributions as a fundraiser and advocate for over twenty years have helped to change the landscape of type 1 diabetes research and inspired me, my child, and my family."

Helene Brunker Fundraiser, volunteer, mother of a child with type 1 diabetes

#### Ross Kennan (November 2004 - November 2013)

"Ross is an amazingly genuine and inspirational mentor who has been hugely supportive of me in my role, and of our South Australian T1D community. Ross was instrumental in setting up the first Walk to Cure Diabetes in Adelaide nearly twenty years ago, and the constant dedication to JDRF that he has shown since then is truly remarkable."

Tamara Aitchison Development Manager - South Australia, JDRF

#### Helen McCombie (September 2004 - November 2013)

"I felt lucky to be able to call on Helen as an expert sounding board for all matters communications and public relations over many years. In addition to her Board duties, a remarkable contribution to JDRF that spanned nearly a decade, Helen made time to share her knowledge in practical ways, which is always so helpful for an NFP."

Lyndal Howison National Marketing Manager, JDRF

#### Peter Wilson, Ex-Vice-Chair (November 2004 - November 2013)

"Peter is a dynamo. I have worked with Peter for over ten years as fellow long-standing board members on both the JDRF Australia and JDRF International Board of Directors. He has given so much of himself to make a difference to the T1D community. His ability to make insightful and perceptive comments on many teleconferences when for him it was the middle of the night is awe inspiring."

Rebecca Davies Board Member, JDRF Australia and JDRF International

#### Mark van Dyck (March 2012 - February 2014)

"In his time as a board member, Mark has been incredibly generous in opening up his extensive corporate networks to support JDRF in a range of activities. While Mark has stepped down from the Board due to other commitments, we look forward to working with him on our Advisory Board for many years to come."

Angela McKay Chief Operating Officer, JDRF

The support and guidance of board members past and present has helped to build JDRF into the strong organisation it is today - thank you.





### Statement of Profit or Loss and other Comprehensive Income for Year Ended 30 June 2014

	2014 (\$)	2013 (\$)
Revenue		
Fundraising revenue	8,625,787	9,326,518
Government grants	3,205,206	1,357,830
Other revenue	398,687	497,614
Total Revenue	12,229,680	11,181,962
Expenses		
Advertising, promotion and printing expenses	(256,603)	(193,875)
Communication and technology expenses	(191,029)	(233,739)
Employee benefits expense	(2,626,883)	(2,643,896)
Education and support expenses	(142,092)	(317,447)
Fundraising expenses	(644,090)	(751,704)
Research, travel and pump grants expenses	(6,873,405)	(5,482,890)
Venue expenses	(523,530)	(597,323)
Other expenses	(842,975)	(694,446)
Total Expenses	(12,100,607)	(10,915,320)
Surplus before income tax	129,073	266,642
Income tax expense	-	-
Surplus for the year	129,073	266,642
Other comprehensive income	-	-
Total comprehensive income for the year	129,073	266,642

31



#### Statement of Financial Position as at 30 June 2014

	2014 (\$)	2013 (\$)
ASSETS		
Current Assets		
Cash and cash equivalents	14,007,532*	7,669,976
Trade and other receivables	447,271	827,254
Inventories	96,326	154,160
Total Current Assets	14,551,129	8,651,390
Non-Current Assets		
Property, plant and equipment	38,026	118,013
Intangible assets	57,616	9,160
Total non-current assets	95,642	127,173
Total Assets	14,646,771	8,778,563
LIABILITIES		
Current Liabilities		
Trade and other payables	10,240,951	3,320,212
Provisions	43,435	37,890
Total current liabilities	10,284,386	3,358,102
Non-Current Liabilities		
Trade and other payables	-	1,203,680
Provisions	103,654	87,123
Total non-current liabilities	102,654	1,290,803
Total Liabilities	10,388,040	4,648,905
Net Assets	4,258,731	4,129,658
EQUITY		
Retained earnings	4,258,731	4,129,658
Total Equity	4,258,731	4,129,658

\*Note: This increase in cash reserves reflects the receipt in June 2014 of the first instalment of \$7m received from the Federal Government towards the extension of the CRN. All these additional funds are allocated to future research investment.

#### Strengthening our Organisation



#### Statement of Cash Flows for Year Ended 30 June 2014

	2014	2013
	(\$)	(\$)
Cash flows from operating activities		
Receipts from fundraising activities	8,469,185	8,715,067
Government grants received	8,381,465	1,357,830
Interest received	477,285	409,826
Other revenue	30,522	106,629
Payments to suppliers and employees	(3,913,830)	(5,215,444)
Grants and travel awards paid	(7,015,497)	(5,800,337)
Net cash flows from operating activities	6,429,130	(426,429)
Cash flows from investing activities		
Purchase of property, plant and equipment	(7,548)	(83,765)
Purchase of intangible assets	(84,026)	-
Net cash flows from investing activities	(91,574)	(83,765)
Net increase (decrease) in cash and cash equivalents	6,337,556	(510,194)
Cash and cash equivalents at the beginning of the financial year	7,669,976	8,180,170
Cash and cash equivalents at the end of the financial year	14,007,532	7,669,976

#### Statement of Changes of Equity for Year Ended 30 June 2014

	2014 (\$)	2013
Retained surplus at the beginning of the financial year	4,129,658	3,863,016
Profit for the year	129,073	266,642
Retained surplus at the end of the financial year	4,258,731	4,129,658

33

Strengthening our Organisation

### **Thank You**

Thank you to the many supporters who help JDRF achieve its mission of improving lives and curing type 1 diabetes.

THE COMMUNITY MEMBERS AND ADVOCATES WHO SPEAK UP ON BEHALF OF JDRF AND ALL PEOPLE WITH TYPE 1 DIABETES

JDRF-LED FUNDRAISING EVENTS
OR TAKE THE INITIATIVE TO RUN
THEIR OWN FUNDRAISING EVENTS

THE DONORS WHO GIVE TO US THROUGH A DIRECT GIFT, A REGULAR MONTHLY GIFT, PAYROLL GIVING, OR LEAVING A BEQUEST

THE **DEDICATED VOLUNTEERS,**STAFF, BOARD, COMMITTEES AND
PANEL MEMBERS WHO GIVE OF THEIR **TIME, SKILLS AND KNOWLEDGE** 

THE CORPORATE AND INDUSTRY PARTNERS WHO SUPPORT US THROUGH DONATIONS, EMPLOYEE ENGAGEMENT PROGRAMS, AND LENDING OF THEIR SKILLS, KNOWLEDGE AND RESOURCES

THE TRUSTS AND FOUNDATIONS
THAT SUPPORT JDRF RESEARCH PROJECTS
THROUGH THE AWARD OF GRANTS

With their support, JDRF is influencing and progressing research for improved health outcomes and better technologies for people with type 1 diabetes into the future.

### **Contact JDRF**

Phone: 1300 136 126

Email: info@jdrf.org.au

Website: jdrf.org.au

Facebook: facebook.com/jdrfoz

Twitter: twitter.com/JDRFAus

#### **Our Offices**

#### **Australian Capital Territory**

16 Thesiger Court Deakin ACT 2600

#### New South Wales

Level 4, 80-84 Chandos Street St Leonards NSW 2065

#### Queensland

Level 5, Wickham House 155-157 Wickham Terrace Spring Hill QLD 4000

#### South Australia

Unit 3, 497 Marion Road South Plympton SA 5038

#### Victoria

Whitten Oval Level 1, 417 Barkly Street Footscray West VIC 3012

#### Western Australia

Unit 3, 181 Main Street Osborne Park WA 6017

