



ALL HEARTS

ANNUAL REVIEW **2016**

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Dr Jennifer Johns AM
National President

2016 Foreword

“ In 2016, the Heart Foundation expanded its critical work with several initiatives that embody our goals of Healthy Hearts, Heart Care, Health Equity and Research. A key initiative was the launch of our Australian Heart Maps, which brought together statistics about heart-related hospitalisations and risk-factor rates at national, state, regional and local government level.

The Australian Heart Maps have allowed us to identify areas of greater disadvantage where people experience less education and poorer health services, along with higher rates of smoking and obesity. Heart health is an equity issue.

For Indigenous Australians this has long been the case. Cardiovascular disease is the leading contributor to the life expectancy gap between Indigenous and non-Indigenous Australians. Our Lighthouse Hospitals Project encourages hospitals to provide a medically and culturally safe hospital environment, and our advocacy team was successful in securing \$8 million in funding for Phase 3 of that project in 2016.

Our Heart Attack Survivor Support program is under development. It is designed to help minimise future heart attacks in survivors of an initial event, improving not only the quality of their lives, but the burden on the health system.

In 2016, we invested more than \$12 million into our Research program, funding more than 200 projects addressing the causes, diagnosis, management and prevention of cardiovascular disease.



Above Adj Prof John G Kelly and Professor Garry Jennings AO in attendance at the 2016 NSW Cardiovascular Research Network conference.

We continued our important work to keep clinicians informed of the latest evidence. We reviewed and updated the Hypertension Guidelines. With the Cardiac Society of Australia and New Zealand, we also launched Guidelines for the Management of Acute Coronary Syndromes.

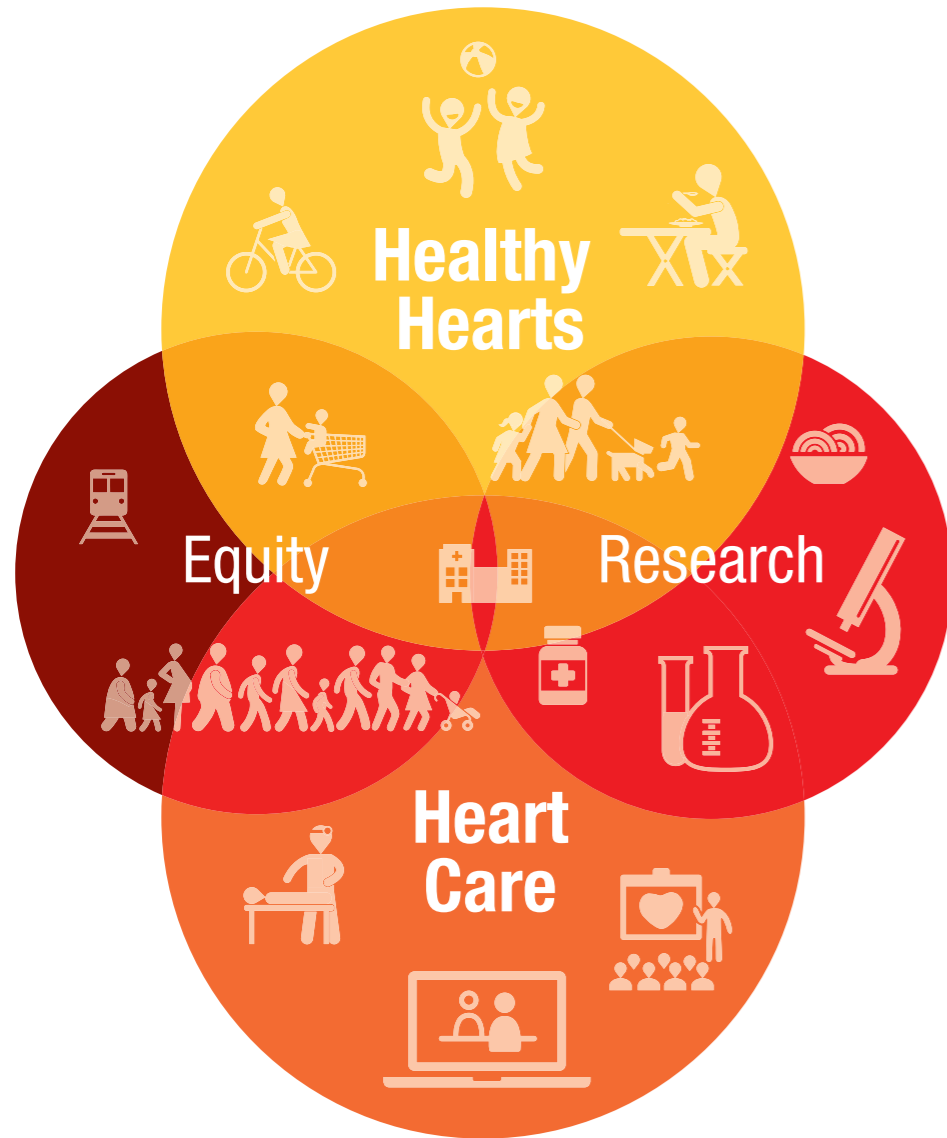
A special note of appreciation to Professor Garry Jennings AO, our Chief Medical Advisor, for filling the role of CEO – National from January 2016 to August 2016.

We also thank our Honorary Directors, leadership teams, and all our staff and volunteers, whose commitment to our Purpose makes such a difference to improving the heart health of the community. And of course, none of our work would be possible without the generosity of our donors and supporters. ”

Adj Prof John G Kelly AM
Chief Executive Officer – National



Our For All Hearts strategic goals

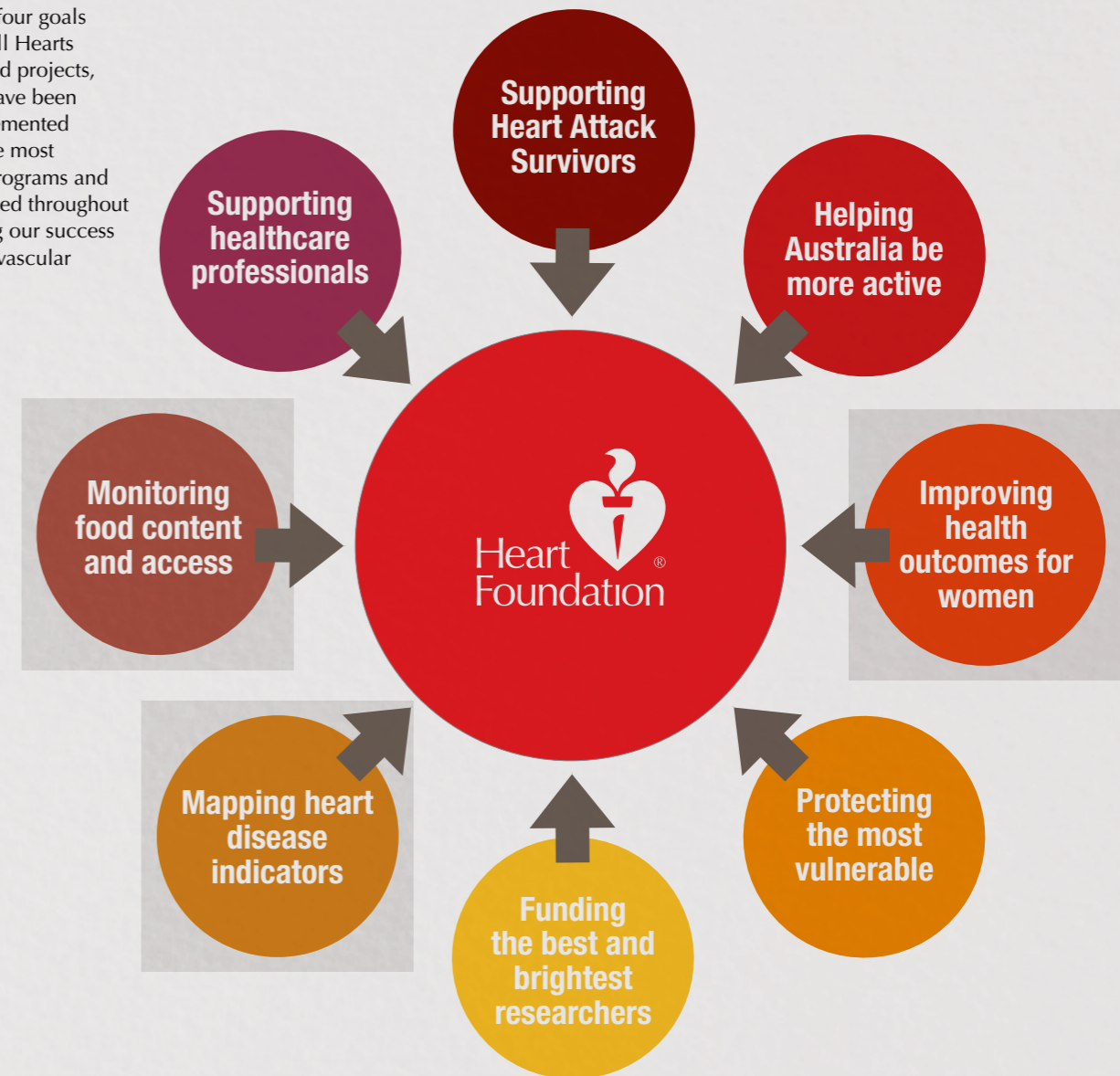


Our four goals of Healthy Hearts, Heart Care, Health Equity and Heart Foundation Research are the Heart Foundation's current response to our mission. In achieving these goals we will seek to ensure Australians have:

- healthy options, information and support to promote their heart health
- access to quality healthcare that ensures risk factors are well managed and cardiovascular disease is well treated
- access to heart health care and support regardless of location or social status
- a Heart Foundation Research program that generates and translates research evidence that leads to better heart health for all Australians.

Our 2016 program areas of focus

In responding to the four goals outlined in our For All Hearts strategy, programs and projects, both big and small have been developed and implemented throughout 2016. The most significant of these programs and projects are highlighted throughout this Review reflecting our success in minimising cardiovascular disease in Australia.



Supporting heart attack survivors



50% of all **HEART ATTACK SURVIVORS** did not return to the **same level of paid work or physical activity as before** their heart attack¹

More than ever, heart attack remains a significant health matter for Australians. It is estimated that 430,000 Australians have had a heart attack at some point in their lives.²

Each year, 54,000 Australians will experience a heart attack.³ For one third of those 54,000 Australians, this is not their first heart attack and more than 30 per cent of hospital admissions for heart attacks are repeat events.⁵

The high number of repeat heart attacks demonstrates further action is required to improve the support and care of those who have had a heart attack.

For many years, the Heart Foundation has provided support to survivors and their carers. However, research we conducted found there is a lack of support available to survivors and their carers following a hospital stay. Many survivors also lack general knowledge about how to recover and get back on their feet after their heart attack.

Throughout 2016, we undertook a comprehensive review and redesign of our support services, information, resources and programs aimed at supporting survivors and their families.



We worked closely with survivors and their families to understand the difficulties they face on a day-to-day basis, and what would make the biggest difference in getting survivors back on their feet. We have also focused on supporting family members and carers, helping them take care of the survivor, as well as themselves.

While many survivors and their carers have suffered in silence, the Heart Foundation will be launching an all-embracing support program in 2017.


A comprehensive response, its aim is to improve the quality of life of heart attack survivors and reduce the burden on our health system.

“ The program's aim is to **improve the quality of life** of heart **attack survivors** and reduce the burden on our health system.”

This will include:

- a revised 'My heart, my life', our flagship publication for heart attack survivors
- use of technology to provide personalised support and information to the survivor and family/carer
- Direct one-on-one access to our Helpline, which is staffed by skilled cardiac health professionals who can provide tailored advice and information.

This program is designed and offered with survivors and their family/carers at its centre. It seeks to ensure survivors feel empowered to take control of their lives, are supported in their recovery and are connected and understood on their recovery.

45% of **SURVIVORS** were **NOT** able to 

LOOK AFTER or **PLAY WITH** their **CHILDREN** or **GRANDCHILDREN** at the same level or at all⁶

To find out more visit heartfoundation.org.au

Our critical role in clinical guideline development



Clinical guidelines inform and guide health professionals to optimise patient care. Health professionals rely on Heart Foundation guidelines to help guide them on best practice heart care. In 2016 we released two significant guideline documents.

Acute Coronary Syndrome guidelines 2016

Acute Coronary Syndrome (ACS) is associated with sudden reduced blood flow to the heart, often causing severe chest pain or discomfort and possible heart attack.

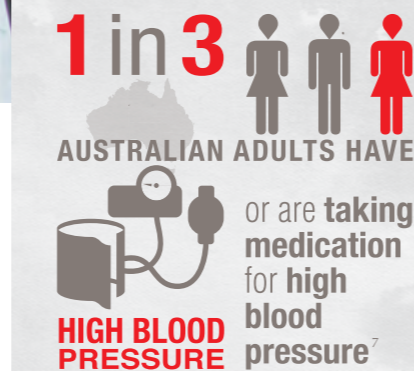
It is estimated that over 500,000 patients present in Australia each year with chest pain.⁸

These guidelines provide practice advice and recommendations to guide health professionals caring for patients with ACS in Australia, based on current evidence, to help patients get the best possible care.

Guidelines for the diagnosis and management of hypertension in adults 2016

Our new hypertension guidelines provide healthcare professionals, particularly those working in primary care and community services, access to the latest evidence for controlling blood pressure.

They build on the previous guidelines, published in 2010, with new evidence and new blood pressure targets.



Work will continue in 2017 to ensure both guidelines are embedded into clinical practice.

Acute Coronary Syndrome guidelines are produced with the Cardiac Society of Australia and New Zealand.

Supporting healthcare professionals



The Heart Foundation's Ambassador programs educate and support healthcare professionals. These programs increase the health professionals' knowledge of Heart Foundation guidelines and programs and help them to improve the management and care of patients with cardiovascular disease.

In 2016, the Heart Foundation expanded its Ambassador programs from the Australian Capital Territory, South Australia and Victoria to Queensland, the Northern Territory and Western Australia.

- in the Australian Capital Territory, participants completed a four-day workshop covering the prevention of cardiovascular disease, risk factors,

managing patients at risk, cardiac rehabilitation and heart failure

- in Queensland, health professionals from Brisbane and regional Queensland participated in the first year of the program. They attended two workshops, completed a workplace project and received accreditation towards their Continuing Professional Development
- running for 12 years, the South Australian program focused on improving nurses' knowledge of Heart Foundation clinical practice guidelines through networking and professional development opportunities, workplace activity projects and developing knowledge and skills

- in Victoria, participants developed several key resources to improve the education provided to cardiac patients in (or across) 17 hospitals
- the Northern Territory program was developed to address the gap experienced by health professionals working in rural and remote locations, who have limited opportunities for networking and professional development (see page 26)
- in Western Australia, primary care nurses were targeted, and participants were required to attend three workshops and develop a workplace activity plan.

In 2017 all programs will continue.

Helping Australians be more active



17%
OF
AUSTRALIAN
ADULTS
ARE INACTIVE⁹

Almost half of Australians don't meet physical activity guidelines¹⁰ and people who are not physically active are almost twice as likely to die from coronary heart diseases as those who are.¹¹ Regular physical activity, on the other hand, can reduce key risk factors for cardiovascular disease such as hypertension and high cholesterol.

Heart Foundation Walking is Australia's largest free walking network, providing community based and workplace walking groups that are led by volunteers.



The aim is to make regular physical activity enjoyable and easy, especially for those who aren't used to being active.

In 2016, we launched new technology that allows participants to track their walking activity online by syncing their activity trackers with their Heart Foundation Walking profile. This creates a virtual walking community.

In 2016, we also identified 38 new priority regions, with high rates of physical inactivity and cardiovascular disease. These were identified using our Australian Heart Map data (see page 14 for more on Australian Heart Maps). Our current aim is to increase participation in these regions by 50 per cent (from 3,326 to 4,989) by the end of 2017.

In 2016, we exceeded our national recruitment target by 27 per cent; 130 new walking groups; and 4,824 new members, bringing the total to over 27,000 active participants.

Lack of physical activity

is a major contributor to cardiovascular disease – Australia's leading cause of death.”

We also trained 51 new Host Organisations increasing the total number of host organisations who deliver Heart Foundation Walking programs in their communities to 271. This included Rumbalara Aboriginal Co-operative, located in Shepparton, meaning we are now engaging the largest Aboriginal community in regional Victoria.

2 in 3 AUSTRALIANS



WOULD LIKE TO WALK REGULARLY

In 2016, **Heart Foundation Walking** was delivered in partnership with the Queensland Government and Fitbit.

To learn more about Heart Foundation Walking or find a local walking group visit walking.heartfoundation.org.au

Encouraging our children to be more active



“ Only **19 per cent** of Australian children are meeting the national daily **physical activity** guidelines.”¹²

Young Australians, aged 5–17 years, should be getting at least 60 minutes of moderate to vigorous physical activity every day. Unfortunately most don't get this. Low levels of physical activity are linked to an increased risk of blocked arteries, high blood pressure and overweight and obesity among children as young as 12 years of age.

Importantly, high levels of school aged physical activity are a predictor for high levels of physical activity into adulthood.¹³ This is significant as close to half (47 per cent) of Australian adults do not currently meet the recommended Australian physical activity guidelines.

Our Jump Rope for Heart program is a national, school-based skipping program that contributes to children meeting the recommended daily physical activity levels.

Over a three to nine-week period, children collect donations for the Heart Foundation and participate in healthy activities and lessons, organised at their school. This might involve skipping during lesson breaks or as part of physical activity education sessions, or discussions about what healthy food is or how to create a nutritious lunch box.

In this way, the program supports a whole-of-school approach to encouraging physical activity and healthy eating.

In 2016, 1,380 schools across the country registered and an estimated 330,000 children participated in Jump Rope for Heart and Jump Rope for Heart Outreach programs.

Since its inception in 1983, more than 90 per cent of Australian schools and 8 million children have taken part in Jump Rope for Heart.

Jump Rope for Heart was proudly supported by HART Sport.

To find a school in your area visit heartfoundation.org.au/jumpropeforheart

Keeping track of the content of our food



FoodTrack™ product is a food and nutrient database containing nutrition and product data for more than 80 fresh and packaged food and beverage categories available in major Australian supermarkets.

“ In 2016, FoodTrack™ was awarded the **INFOODS Success Stories Award** for significant food composition achievements by the Food and Agriculture Organisation of the United Nations.”

FoodTrack™ contains highly accurate data, including product information, manufacturers, pack sizes, nutrition panel information, ingredients lists, pack labels, product images and other relevant information.

FoodTrack™ began in 2014, with data for approximately 14,000 products collected and updated annually. Within the supermarkets visited, FoodTrack™ data represents more than 90 per cent of the retail market within each category.

Together with the CSIRO, the Heart Foundation is using FoodTrack™ to independently monitor the implementation of the Health Star Rating system for the Federal Government. This is a front-of-pack labelling system that rates the overall nutritional profile of packaged food, and assigns a rating from half a star to five stars.

FoodTrack™ is a collaboration between the Heart Foundation and the Commonwealth Scientific and Industrial Research Organisation (CSIRO).

Mapping heart disease indicators Australia-wide



While mortality rates for cardiovascular disease have declined in recent years, the gains have not been equally distributed. The burden of cardiovascular disease is disproportionately felt by Aboriginal and Torres Strait Islander peoples, people of lower socio-economic status, and those living in regional and remote areas.

Launched in August 2016, the Australian Heart Maps bring together for the first time heart-related hospitalisations and risk factor rates at a national, state, regional and, where possible, local government level.

Hospital Admission rate for **HEART DISEASE** is **5x** higher in the **Northern Territory Outback** than in **Sydney's NORTHERN BEACHES** ▼

The maps are a national online platform for comparing heart disease indicators across states, territories, regions and local government areas.

The Australian Heart Maps clearly show that where you live influences your health. For example, remote Australia has twice the rate of heart disease hospitalisations compared to Australia's major cities.

Disadvantaged communities are also significantly more likely to experience higher hospital admissions for heart disease than advantaged communities.

Heart disease hotspots tend to be areas of:

- greater disadvantage
- lower educational attainment
- poorer health 'infrastructure' (public transport, footpaths, accessible food, health services)
- higher smoking rates
- higher obesity rates.

The maps are being used extensively by planners, policy-makers, and governments to expose heart disease hotspots and advocate for better health infrastructure. Health services are using the maps to identify service gaps and better plan cardiovascular programs and services according to need.



People living in **VERY REMOTE AREAS** are nearly **2X** as likely to be **ADMITTED TO HOSPITAL** for a **HEART EVENT**



Likewise, the Heart Foundation is using the maps to finely hone our existing policies and programs, such as Heart Foundation Walking, to ensure we focus our effort and resources where they are needed most. Importantly, we will now be able to monitor heart disease trends at a local level to see how our work is making a difference.

The maps will be periodically updated with new features and data. You can find out more at heartfoundation.org.au/heartmaps

Improving hospital outcomes for Aboriginal and Torres Strait Islanders



INDIGENOUS AUSTRALIANS EXPERIENCE
2.5X THE RATE OF ACUTE
CORONARY EVENTS
 (such as heart attacks)
 COMPARED TO
**NON-INDIGENOUS
 AUSTRALIANS**¹⁴

Indigenous Australians experience 2.5 times the number of acute coronary events, such as heart attacks, compared to non-Indigenous Australians¹⁵. Death as a result of these events is 1.8 times more likely if you are Aboriginal or Torres Strait Islander.¹⁵ For these Australians, cardiovascular disease also happens earlier, progresses faster, requires more frequent hospital admission and is associated with more comorbidities.¹⁶ In fact, cardiovascular disease is the single leading contributor to the life expectancy gap between Indigenous and non-Indigenous Australians.

The Lighthouse Hospital Project aims to improve the care and health of Aboriginal and Torres Strait Islander peoples experiencing acute coronary syndrome. It does this by using a quality improvement approach to provide a medically and culturally safe hospital environment. Examples of this have ranged from including Indigenous artwork in hospitals, changing policies, providing cultural awareness e-learning for care providers, improving care pathways and embedding new ways of patient care in clinical practice and quality systems.

Between 2013–2016, Phase 2 of the project took this approach to eight public hospitals across Australia. Key achievements included:

- improved relationships between care providers and Aboriginal and Torres Strait Islander patients
- greater connections between hospitals, the Aboriginal and Torres Strait Islander community and Aboriginal medical services
- the creation of a culturally safe environment for Aboriginal and Torres Strait Islander patients
- an increase in the number of people identifying themselves as Aboriginal or Torres Strait Islander
- more streamlined processes relating to the cultural and clinical care of Aboriginal and Torres Strait Islander patients
- improvements in the ability of staff to respond to the needs of Aboriginal and Torres Strait Islander patients.

In late 2016, the Heart Foundation was awarded funding for Phase 3. From 2017-2019, Phase 3 of the project will be implemented in 18 hospitals with the aim of reducing the incidence and impact of Discharge Against Medical Advice.

“Close collaboration between service providers, those in the not-for-profit sector such as the Heart Foundation and AHHA, hospitals and other health practitioners and of course, Government, is vitally important if we’re to effectively improve hospital outcomes. This approach is embodied by the Lighthouse Project.”
CEO – National, Adj Prof John G Kelly

Phase 3 will focus on enhancing relationships between hospitals, local Aboriginal community controlled health organisations and primary health networks, to improve the integration of health services and care coordination.

The Lighthouse Hospital Project is funded by the Australian Government Department of Health and delivered by the Heart Foundation in conjunction with the Australian Healthcare and Hospitals Association (AHHA).

Over half a billion dollars and counting



“ Since 1959, the Heart Foundation has invested **\$557 million** (in today's dollars) towards cardiovascular research.”

Since 1959, the Heart Foundation has invested \$557 million (in today's dollars) towards cardiovascular research.

However, we do more than simply fund research. As part of our aim to be a national leader in cardiovascular research, we work with others and advocate strongly with governments to increase cardiovascular research funding.

We develop and support collaborative research networks; and we develop, implement and improve our own research program.

Our research funding portfolio is designed to support and develop excellent cardiovascular research in Australia. Each year we fund the best and brightest researchers, exploring a wide range of issues relating to cardiovascular disease in the areas of biomedical, clinical, public health and health services.

We provide opportunities for individual researchers (Fellowships and Scholarships) and for projects (Grants).

The Heart Foundation is the **LARGEST NON-GOVERNMENT FUNDER** of **HEART DISEASE RESEARCH** in Australia



Funding the best and brightest

2016 Heart Foundation Research Awards

In 2016, we invested more than \$12 million into our research program. This allowed us to fund more than 200 research awards investigating the causes, diagnosis, management and prevention of cardiovascular disease and related disorders.

In 2016, we received 430 applications and offered funding to 90 new awards (20.9 per cent or 1 in 5 applications). Of these, 36 were for Fellowships, 11 for Scholarships and 43 for Grants. In addition to these awards, the following special prizes were also offered.

Ross Hohnen Award for Research Excellence

The Ross Hohnen Award for Research Excellence for the most outstanding and innovative Vanguard Grant application (providing \$10,000 on top of the grant):

- Dr Maxine Bonham, Monash University.

Heart Foundation Paul Korner Innovation Award

The Heart Foundation Paul Korner Innovation Award for the most innovative successful Future Leader Fellowship and Postdoctoral Fellowship applications (providing a single payment of \$20,000 on top of the Fellowship):

Future Leader Fellowships

- Dr James Hudson, The University of Queensland
- Associate Professor Andrew Steer, Murdoch Childrens Research Institute

Postdoctoral Fellowships

- Dr Lining Ju, University of Sydney
- Dr Michael Wong, University of Melbourne.

Heart Foundation Research Medal for Lifetime Contribution to Cardiovascular Research

In 2016, we awarded the '2015 Heart Foundation Research Medal for Lifetime Contribution to Cardiovascular Research' to Professors Andrew Tonkin and Gregory Dusting, who have each been renowned leaders in their respective fields for decades. This award recognises outstanding, lifetime contributions made to the important field of cardiovascular research.

Professor Andrew Tonkin began working with the Heart Foundation in 1963, when he won a six-week vacation scholarship, at the age of 18. He has since been awarded a Medal of the Order of Australia for services to medical research. Professor Tonkin is internationally acknowledged for his work on lipid management and has been at the forefront of a number of breakthrough developments in cardiovascular research over his career. He is currently Head of the Cardiovascular Research Unit at Monash University and a Consultant Cardiologist at Austin Health.

“ We offered **\$16.9 million** for new awards to commence in 2017, thanks to our donors.”



Heart Foundation Research Medal for Lifetime Contribution awardees: Professor Andrew Tonkin, left, and Professor Gregory Dusting, right.

Professor Gregory Dusting, who has been working with the Heart Foundation for 35 years, has contributed significantly in the fields of prostaglandin and nitric oxide research. This has improved our understanding of the causes and treatment of vascular disease.

Currently, he is head of Cytoprotection Pharmacology Research and Executive Director of Research at the Centre for Eye Research Australia. Professor Dusting also received funding from the Heart Foundation early on in his career.

“As a young researcher, it is always difficult to get funding because you don't have sufficient credentials to call yourself an independent research person”, he said. “The Heart Foundation was and is still really good with supporting young researchers and new ideas that other institutions are not ready to support,” he said.

Our research program in action: Intelligent Microbubbles

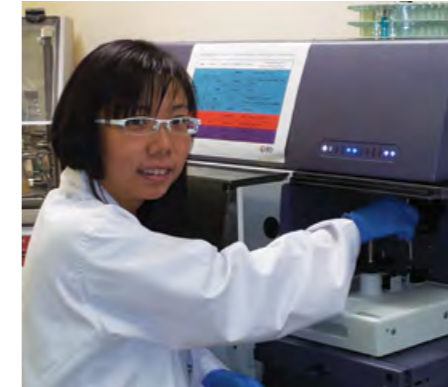


Each year around 54,000 Australians have a heart attack and another 35,000 experience a stroke.¹⁷ The majority of these are caused by blood clots, which block arteries supplying blood and oxygen to the heart or brain. Currently, blood clots that cause heart attack or stroke can only be diagnosed using catheters – tubes which are inserted into arteries. This procedure is only available in larger hospitals, meaning many patients experience a delay in diagnosis which can lead to heart or brain damage. Additionally, the current main treatment for clots carries with it a high risk of bleeding complications for some patients.

“\$170,000 of research funding assisted to help drive this medical innovation.”

Thanks to research we funded, ‘intelligent microbubbles’ are now able to detect and destroy blood clots in minutes. These microbubbles are injected into patients’ veins. They then find and attach themselves to clots and release a drug which breaks the clot down. Microbubble technology also allows doctors to see clots, and to monitor the progress of the clot breakdown, using ultrasound.

Ultrasound machines are widely available in hospitals and outpatient clinics across the country, making this new technology far more accessible than traditional methods of clot diagnosis and management.



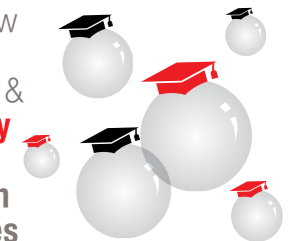
Left Dr Xiaowei Wang from the Baker IDI Heart and Diabetes Institute in Melbourne, helped create particles that can detect clots and break them down within minutes.

It’s hoped that microbubble technology will be life-changing and life-saving for many people. This important research has already received national and international acclaim among cardiovascular clinical and research groups.

This revolutionary new treatment was developed by Professor Karlheinz Peter and Dr Xiaowei Wang at the Baker IDI Heart and Diabetes Institute, Melbourne. Dr Wang says microbubble technology has several advantages. It’s not invasive and doesn’t expose patients to radiation. Ultrasound scanners are also widely available, providing a safe, fast and cost-effective way to detect and treat blood clots.

Dr Xiaowei Wang was the recipient of a Heart Foundation Postdoctoral Fellowship from 2015 to 2016. She was also a recipient of the Paul Korner Innovation Award in 2015 for this project, receiving a total of \$170,000 of funding from the Heart Foundation.

Thanks to research we funded, **‘INTELLIGENT MICROBUBBLES’** are now able to **detect & destroy blood clots in minutes**



To find out more about more about Heart Foundation Research and view case studies of our research, please visit heartfoundation.org.au/research

A spring in your step



Half of all adults in the Australian Capital Territory (ACT) are not active enough to maintain good health. As the 2016 charity partner for Canberra's flower festival, Floriade – and in line with our 'Healthy Hearts' goal – the Heart Foundation organised a 'Walk of Nations' to encourage people to be physically active and to be heart-health conscious.

“ The Walk of Nations was the **best way to see Floriade** and also build **heart health.**”

Local Canberra organisations and the diplomatic community led the early bird walks through the Floriade displays each morning before they were opened to the public. A group led by the Embassy of Qatar was first to do the walk. Charge d'Affaires Mr Mohammed Al-Jabir, said that the Embassy was keen to be involved in the initiative and delighted to be the first to kick off the event. "The Walk of Nations is the best way to see Floriade and also build heart health, and the Embassy of Qatar is proud to participate," he said.

The Floriade walks were free, and were attended by local organisations, Embassy staff and their families and members of the public who registered to walk through our Heart Foundation Walking program.



Over the 24 days of Floriade, Heart Foundation Walking saw 992 walkers participate. This included 20 Embassies/High commissions, 16 volunteer organisations and members of the public from throughout Australia and overseas.

Australian Capital Territory

Absolute Cardiovascular Risk workshop for general practitioners

In August 2016, the Heart Foundation ran an Absolute Cardiovascular Risk workshop for general practitioners, which was attended by around 20 GPs. The workshop was run in collaboration with Capital Health Network (CHN) and Professor Emily Banks and team from the Australian National University (ANU). All participants gave positive feedback.



The Heart Foundation is now planning to run a series of workshops with category 1 Continuing Professional Development accreditation for general practitioners and nurse practitioners in 2017; also in collaboration with CHN and ANU. This will encourage and support general practitioners and nurse practitioners to better identify and manage people at risk.

LiveLighter

In 2012, Australians bought 1.28 billion litres of carbonated or still drinks containing sugar, with cola being the most popular, at 447 million litres.¹⁸



Alarming, 47 per cent of children aged 2–16 years consume sugary drinks, including energy drinks, every day; and a 600mL bottle of regular soft drink contains 16 teaspoons of sugar (64 grams in total).¹⁹ These are just a few of the facts being promoted to the public as part of our 2016 ACT LiveLighter campaign.

The campaign, originally developed by the Heart Foundation's Western Australian division, for State Government WA, focuses on avoiding sugary drinks, and targets adults aged 25–64 years.

Initial results show 52 per cent of people said they had made at least one dietary or physical activity change since seeing the campaign, while more than one in three said they'd either stopped drinking sugary drinks, or had reduced the amount they drank.

ACT LiveLighter campaign advertising is planned to run until 31 March 2017, with final results available from April 2017, and was made possible through the support of the ACT Government.

You can find out more at livelighter.com.au

2nd Cardiovascular Health Research Symposium

On 5 May, the Heart Foundation brought together Canberra's brightest minds at the 2nd Cardiovascular Health Research Symposium. The symposium gathered over 100 people from a range of disciplines including researchers from several universities, health professionals, and policy makers all working together in translating research into new health policies and practices. The Symposium showcased the ACT cardiovascular research community, created opportunities for local collaboration and highlighted key areas for future research initiatives in the ACT.

Improving heart health outcomes for women



“**Heart disease** is the leading cause of death of Australian women, with **24 lives lost every day.**”²⁰

Unfortunately, heart disease in women is under-recognised, under-treated and under-researched. While it's true that more men have heart attacks each year, the number of deaths following a heart attack are similar between men and women.

In NSW, our women and heart disease program aims to build community awareness; engage with communities and workplaces to spread the message; build knowledge and engagement with health professionals; improve the system to respond better to women's needs; and address the research imbalance.

In 2016, we founded a Cardiology Roundtable for female cardiologists. We worked with Breastscreen NSW and the media to promote heart health through their channels. We awarded our inaugural \$150,000 'Women and Heart Disease Research Grant' to Professor Elizabeth Sullivan from the University of Technology Sydney, for a longitudinal study of heart disease among pregnant women. A second round of Women and Heart Disease community grants were also awarded to seven community collaborations across NSW.

We also launched our 'Making the invisible visible' awareness campaign in 2016, reaching more than seven million people during the month of June alone.



In 2017, we will build on the many successes of 2016, and continue to raise awareness of heart disease as the leading health concern for Australian women.

To find out more visit invisiblevisible.org.au

New South Wales



NSW Cardiovascular Research Network State of the Heart Showcase

The Heart Foundation's NSW Cardiovascular Research Network continued to foster collaboration between researchers, optimising the research capabilities in NSW by pooling knowledge, resources and nurturing and retaining talent, particularly rising talent.

The annual Showcase event, the pinnacle of the year, provided the opportunity to throw a spotlight on some standout researchers. In 2016, the winners, presented by The Hon. Pru Goward, MP, were:

- the 2016 Ministerial Award for Cardiovascular Research Excellence went to Professor Robert Graham - Victor Chang Cardiac Research Institute
- the 2016 Ministerial Award for Rising Stars in Cardiovascular Research went to Dr. John O'Sullivan - Heart Research Institute
- 2016 Collaborative Project Grant winners were Dr. Melody Ding from the University of Sydney and Associate Professor Mitch Duncan - University of Newcastle.

Continuous quality improvement of cardiac rehabilitation services

Cardiac rehabilitation is the first step to recovery following a heart attack. Unfortunately, not enough people are completing their rehabilitation programs. In 2016, the first phase of the minimum dataset pilot was completed. This project will assist in providing accurate and timely data for monitoring cardiac rehabilitation services, and will form the basis for developing key performance indicators for cardiac rehabilitation in NSW, and potentially Australia.

Data collection will be repeated in 2017 with an increased number of sites in NSW, along with sites from the ACT and Tasmania. The Heart Foundation will use the dataset to provide insights to help improve and monitor the quality of cardiac rehabilitation services.

Healthier Oils Program

Our Healthier Oils Program partnered with the Penrith Panthers Leagues Club in 2016, to effectively remove one tonne of saturated fat from its menu each year, just by switching to a healthier cooking oil.

The Healthier Oils Program aims to reduce community exposure to saturated and trans fats by encouraging food outlets and operators to replace cooking oils that are high in saturated fats with healthy polyunsaturated fat alternatives. The program operates at both the local government level and with large independent meal providers, like Panthers, who supply hundreds of thousands of meals each year.

Find out more about the program at heartfoundation.org.au/healthieroils

Jump Rope for Heart Outreach

Jump Rope for Heart Outreach is typically offered in small rural, remote and disadvantaged communities where the risk of developing heart disease is high.

In 2016, the program included 75 schools, taking it to its maximum capacity. A total of 4,739 students participated, 72 school workshops were completed and our Outreach Officer Kane Radford travelled an impressive 35,657 km. Special guest, His Excellency General The Honourable David Hurley AC DSC (Ret'd), Governor of New South Wales, also travelled more than 1,000 kilometres to visit White Cliffs Public School, as part of this year's program.

Jump Rope for Heart Outreach was made possible thanks in part to major funder Ian Sharp. Ian Sharp is a philanthropist, and retired engineer, with an interest in children's health and education, particularly Aboriginal children.



Northern Territory Health Professional Ambassador program



In 2016, the Heart Foundation identified that health professionals working across the Northern Territory were experiencing a gap in professional support. Many Northern Territory health professionals work in rural, remote or very remote locations, often with limited opportunities for networking or professional development.

To help address this issue, the Northern Territory Health Professional Ambassador program was initiated in 2016 with 23 participants. The program enabled health professionals from across the Territory to network and gain additional knowledge and practical skills around heart health.

The Health Professional Ambassador program has both expanded participants' knowledge of current heart health issues and increased the dissemination of Heart Foundation information and resources in the Northern Territory.

Topics covered during the program included patient heart health, risk factors, warning signs of a heart attack, nutritional information and the importance of cardiac rehabilitation.

The 2016 program was delivered in Darwin and Alice Springs, with two workshops in each location.

“The Northern Territory Health Professional Ambassador program provided excellent information, peer support and a great network with other Northern Territory health professionals.” – Participant

Graduates from the program took part in a recognition dinner and were presented with a certificate by Doctor Marcus Ilton, Chair of the Heart Foundation Northern Territory Board. The 2016 intake saw the first Aboriginal Health Practitioner graduate from the program in Australia.

Building on the success of 2016, we will again offer the Health Professional Ambassador program in 2017.

Cardiac Care in the NT workshop

The Northern Territory has some of the highest rates of heart-related hospital admissions in Australia. In 2016, we delivered a two-day workshop for remote area nurses and health professionals to increase their understanding of cardiac care in the Northern Territory. The Darwin workshop followed the patient journey and provided information on prevention, acute care and secondary prevention. Fifty participants attended – many from remote locations across the Territory. The workshop was fully funded by the Heart Foundation and delivered in partnership with Top End Health Service and NT Cardiac.

Given the support for this workshop in 2016, it will run again in 2017 with workshops in both Darwin and Alice Springs.

Smoke-free NT advocacy

Over one in five people aged 15 and over in the Northern Territory smoke.²¹ The Northern Territory has the highest smoking rate of all the states in Australia. In 2016, we worked closely with the City of Darwin to make Darwin's Smith Street Mall smoke-free. We advocated strongly throughout a six-month trial period and conducted a survey of mall users regarding attitudes and support for a smoke-free mall. The survey found the majority of people supported a smoke-free mall. This advocacy saw Darwin's Smith Street Mall become smoke-free permanently in November 2016 – the last capital city CBD pedestrian mall in Australia to become a smoke-free space.

In 2017, the Heart Foundation will continue to work closely with the Northern Territory Government to reduce smoking rates in the Northern Territory with a focus on the tightening of the Tobacco Control Act and working with local governments to improve smoke-free spaces.

Warning Signs of Heart Attack augmented-reality app

In 2016, we have been working on developing a 'Warning signs of heart attack' app, available in at least six of the main Aboriginal languages spoken in the Northern Territory.



The app is being developed from a component of an existing resource developed for Aboriginal health practitioners, 'The Heart Story Flip Chart'. This technology is likely to reach more people and have greater accessibility and sustainability than printed materials.

The new app will be launched in 2017 and will be free to users. The Heart Foundation will provide training for health professionals on how to use it. In the future we hope to develop more resources into the augmented-reality app format to improve health messaging to Aboriginal and Torres Strait Island peoples across the Northern Territory and potentially the rest of Australia.

Shining a light on rheumatic heart disease



Rheumatic heart disease (RHD) involves chronic damage to the valves of the heart, and strongly increases a person's chances of early death. It is caused by repeated cases of acute rheumatic fever (ARF), which is caused by bacterial infection with group A streptococcus.

While RHD is rare among non-Indigenous populations of Australia, rates in our Indigenous communities are among the highest in the world.

Aboriginal and Torres Strait Islander peoples are up to eight times more likely than other groups to be hospitalised for ARF and RHD, and nearly 20 times more likely to die.²²

“Aboriginal and Torres Strait Islander peoples are up to **eight times more likely** than other groups to be **hospitalised** for ARF and RHD, and nearly **20 times more likely to die.**”

Sadly, around 58 per cent of cases of ARF are in children aged 5–14 years (2010, Northern Territory data)²³ and RHD is most common in people aged 35–39 years.²⁴ Almost all cases of RHD and associated deaths are preventable.²⁵

In 2016, we partnered with RHD Australia to host an advocacy breakfast and two-day workshop for health professionals, highlighting the need for early detection in Indigenous populations. These events were attended by health professionals from around the country who are involved in the diagnosis and management of people who have ARF and RHD.

The William Jolly Bridge in Brisbane also featured the Heart Foundation's Reconciliation Action Plan artwork, which was developed by local Indigenous Creative Agency, Gilimbaa. The artwork light up happened on 29 September, International World Heart Day.

Queensland

Each year around **54,000 people** experience a **heart attack**, and repeat attacks are all too common.¹⁷

Improving cardiac rehabilitation and heart failure services toolkit

Cardiac rehabilitation saves both lives and money, with research showing that it leads to improved patient outcomes, including fewer deaths and hospital readmissions.²⁶ However cardiac rehabilitation programs are only effective if people attend.

“We know that **less than a third** of heart attack survivors currently **complete cardiac rehabilitation.**”

If this increased to just 65 per cent it would mean 500 fewer hospital admissions for heart attacks in Queensland each year and, with each heart attack costing our health system \$30,700, it would create huge cost savings to the health system.²⁷

In 2016, we developed a toolkit for health professionals to help them get support for greater access to rehabilitation services in their communities.

The toolkit has been a popular resource with health professionals across Queensland and will form part of the resource kit for our Health Ambassadors in 2017.

In addition to this, in 2016, we focussed on getting more people to attend rehabilitation by working with the State Government to continue a quality incentive payment (QIP) for referrals to cardiac rehabilitation.



Heart Foundation Walking program

The Heart Foundation Walking program continued to grow in Queensland in 2016 under the national sponsorship of the Queensland Government as part of our 'Healthy Hearts' goal.

Queensland Members of Parliament participated in a parliamentary breakfast to celebrate the program, with many of them joining the walking groups in their constituency. Health Minister Cameron Dick presented the National Golden Shoe Award to Woodridge walker, Sandra Franklin, with Rio Olympic walker, Dane Bird-Smith handing over the trophy.



Local Government Awards

Torres Shire Council and the Ipswich City Council both received highly commended in the Heart Foundation's 2016 Local Government Awards. It was the first time the Torres Shire Council had participated in the program and they were commended for developing physical activity programs in Anzac Park and for the development of a sports oval and stadium.



In-hospital disparities between South Australians



“Aboriginal and Torres Strait Islander peoples have **36 per cent lower rates of angiogram**, compared to non-Indigenous patients.”²⁸

An angiogram is the test which allows doctors to diagnose narrowing of a patient’s coronary arteries – the cause of heart attacks.

To find out why these inequities exist, we funded research in 2016, led by Dr Rosanna Tavella from Adelaide University.

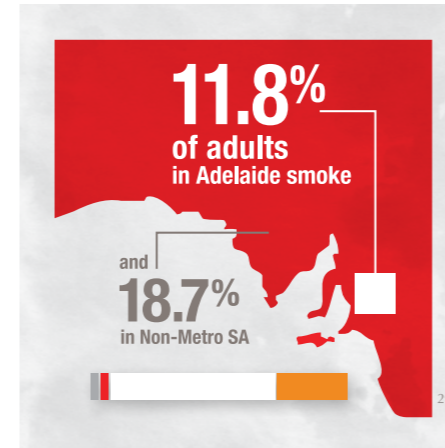
The study found significant differences in how Indigenous and non-Indigenous patients with suspected heart disease or heart attacks are assessed leading up to an angiogram test. For Indigenous patients who did receive an angiogram, the rates of treatment were the same as non-Indigenous patients. Improvements in the assessment of Indigenous patients with suspected heart attack, which ensure they receive an angiogram as soon as possible, have the potential to save hundreds of lives each year.

Top Dr Rosanna Tavella from Adelaide University – *Photo Courtesy of The Hospital Research Foundation*
Right SALHN Aboriginal Liaison Unit – *Karpa Ngarrattendi.*

The study involved collaboration between the Heart Foundation, SA Health’s State-wide Cardiac Clinical Network, South Australian Health and Medical Research Institute (SAHMRI) and Aboriginal health professionals.



South Australia



Smoke-free outdoor dining areas

While the number of smokers in Australia has dropped significantly over the past 10 years, in South Australia, one in eight people are current daily smokers.³⁰

As a result of our continued alliance with the Asthma Foundation SA, Cancer Council SA and the Australian Medical Association SA and our strong long-term advocacy to the SA Government, smoking was banned in all alfresco dining areas across the state, from 1 July 2016.

This significant step forward means South Australians are finally protected from exposure to harmful tobacco smoke in outdoor areas where food is served. We are pleased with this result and will continue to push hard for more smoke-free areas and reduce the daily smoking prevalence in SA to 8 per cent by 2020, and across Australia to less than 5 per cent by 2025.

Heart of the Matter campaign

In 2016, we continued to work to raise awareness of heart disease as the single biggest killer of women in Australia and encourage women to have a Heart Health Check. Our ‘Heart of the Matter’ activation saw 228 guests attend a corporate breakfast facilitated by Dr Niki Vincent, CEO of Leaders Institute of South Australia. Dr Bill Griggs AM ASM and Professor Maja-Lisa Lochen, from Arctic University of Norway also attended as guest speakers. Following the breakfast, a Heart of the Matter media campaign encouraged women to get a Heart Health Check throughout May.

Art for your Heart campaign

Half of all South Australians are inactive³¹ and physical inactivity is a major risk factor for heart disease. One of the easiest ways to get the recommended 30 minutes of physical activity each day is to build it into your daily routines. Using stairs can contribute to the incidental physical activity of people in public spaces.

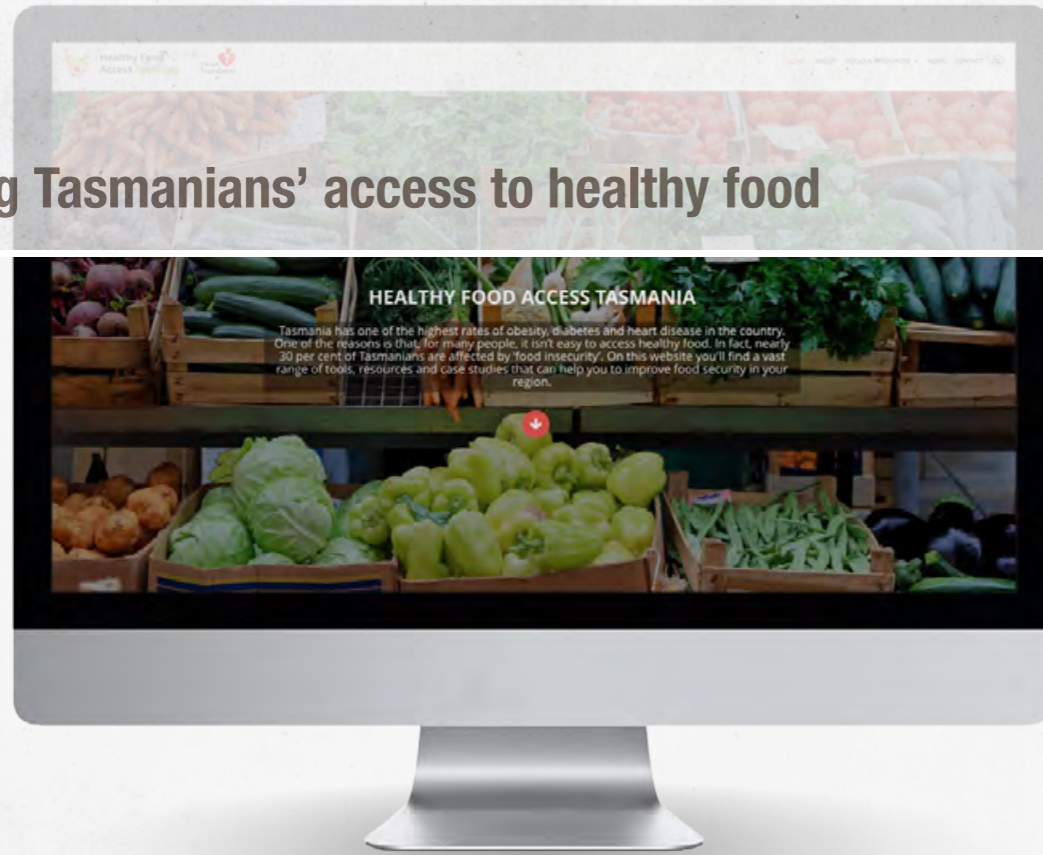
Initiated by the Heart Foundation, the innovative ‘Art for your Heart’ installation on the Adelaide Railway Station’s main staircase aimed to inspire the 30,000 daily commuters to take the stairs instead of the escalator. The project involved installing a vibrant, painted artwork with inspirational messaging on the stairs over six weeks during the Adelaide Fringe.

The artwork consisted of a colourful patchwork of pixels that when viewed from a distance created an image of the South Australian outback. This modern twist on an iconic scene was striking, and generated positive responses from commuters in the station and on social media. The installation resulted in a 19 per cent increase in use of the stairs during morning peak times.



Above ‘Art for your Heart’ – Photograph by Dan Schulz.

Securing Tasmanians' access to healthy food



'Food insecurity' is estimated to cost the Tasmanian healthcare system \$60 million each year.³² Findings from the 2014–15 National Health Survey show that only 11.6 per cent of Tasmanian adults consume the recommended daily amount of vegetables.

The Heart Foundation's three-year Healthy Food Access Tasmania project found that food distribution across Tasmania is uneven. The project found that food insecurity is more common among people living in regional and low-socioeconomic areas. For example, of the 353 shops that sell healthy food in Tasmania, only 19 are located in poorer neighbourhoods, and often healthy food is more expensive in these areas.

In some areas, sourcing healthy food could cost up to \$5,000 more each year than in areas with better access to healthy food.

In an Australian-first, the 'Healthy Food Access Tasmania' web portal was launched. This web portal connects local and state government with key community participants such as growers, businesses, community members and local decision-makers to help improve access to fresh, affordable (preferably locally sourced) food.³³

It includes interactive local food access maps, community profiles, videos and a wealth of resources to assist business, government and the community in their quest for food security.

The **Healthy Food Access Tasmania website** was developed in collaboration with the University of Tasmania and Primary Health Tasmania.

Everyone can access the portal at healthyfoodaccess.tasmania.org.au

Tasmania



State Policy for Healthy Spaces and Places

Our advocacy for a State Policy for Healthy Spaces and Places made considerable headway in 2016, with 12 submissions published and delivered to policy-makers at all levels of government.

The aim is to reduce premature death and suffering from chronic diseases such as heart disease, stroke, kidney disease, obesity, type 2 diabetes and some cancers; and to provide equitable access in Tasmanian cities and towns. This would be achieved by embedding principles that promote incidental physical activity into the activities of State agencies and councils.

These principles include active living, active travel, open space provision, mixed-density housing, mixed land use, access to healthy food and accessible buildings and site design. Our submissions are part of a growing body of literature that supports a whole-of-government, primary prevention approach to the built environment.

We will continue to promote the role that a State Policy for Healthy Spaces and Places could have in improving the health of Tasmanians to both local and state governments throughout 2017.

Tasmanian Heart Failure Program

An estimated **3,200 Tasmanians** are currently **living with heart failure**.³⁴

Our new Tasmanian Heart Failure program aims to improve the management of people with heart failure in the community, so they can avoid going to hospital.

The program supports GPs, practice nurses, specialist heart failure nurses, pharmacists and allied health professionals to improve the management of people with heart failure. It does this by providing professional education, best practice management and training resources for healthcare professionals.



People with heart failure and their families also receive new user-friendly educational materials about the condition.

The planning and development of these resources was completed in 2016 and they will be launched in early 2017, with continuing education to occur throughout 2017.

This initiative was made possible thanks to a partnership between the Heart Foundation, Primary Health Tasmania, the Tasmanian Department of Health and Human Services, the Australian Healthcare and Hospitals Association and Novartis Australia.

Heart Foundation Research Profiled

Having diabetes increases the risk of developing heart disease. Tasmanian Honours Scholarship recipient Valentina Ho's research project aims to determine whether you can predict if someone is more likely to develop diabetes as an adult depending on their body fat and body size as a child. Using data from the Childhood Determinants of Adult Health study, Valentina hopes to help us better understand how the risk factor of being overweight during childhood can lead to diabetes as an adult, so that we are better able to prevent it.

Left Collaborating partners of the Heart Failure project from the Heart Foundation, Australian Healthcare and Hospitals Association, Novartis Australia and Primary Health Tasmania.

Free Heart Health Checks in Ballarat



The Ballarat region of Victoria was identified as having the state's highest rate of cardiovascular disease. Data mapped by the Heart Foundation revealed nearly one third of residents have cardiovascular disease, which causes heart attacks and strokes.

In 2016, the Heart Foundation's mobile clinic returned to Ballarat as part of Heart Week to provide free 15-minute Heart Health Checks to the community. The checks involved blood tests, a blood pressure check and questions about lifestyle and family history. After the heart check, people were told their risk of developing heart disease, and what they could do to prevent it.

“ Heart Foundation research identified **Ballarat** as having **Victoria's highest rate of cardiovascular disease.**”

We again partnered with Ballarat Community Health, but expanded our efforts in 2016 by working closely with health services in surrounding areas to allow more people to understand their risk of developing heart disease.

Our heart health checks helped nearly 900 people in the Ballarat region.

A follow-up survey showed an overwhelmingly positive response from participants of the program, with most people making the move to healthier lifestyles by acting on the eating, exercise and quit smoking advice they had received during their Heart Health Check. In 2017 we're continuing to work with several health and community networks in the Ballarat region to further support the heart health of the Ballarat community.

The work that identified Ballarat as a high risk community for cardiovascular disease was a result of the Australia-wide mapping undertaken as part of the **Heart Maps** project featured on page 14.

'Living well with heart failure' low literacy resource

“ Those who read at lower levels are generally **1.5 to 3 times more likely** to have an **adverse health outcome** than people who read at higher levels.”³⁵

They are also more likely to be hospitalised and to lose their life.³⁶

Around 60 per cent of Australians have less than adequate levels of literacy and health literacy.³⁷ In 2016, the Heart Foundation developed 'Living well with heart failure: Information to help you feel better', an easy to read book for people with low literacy levels. The book aims to give more heart failure patients the knowledge, skills and confidence to better manage their condition and improve their quality of life.

We distributed more than 4,500 copies of 'Living well with heart failure' throughout Victoria in 2016, with an additional 2,000 copies going to other states and territories. The Heart Foundation visited 19 hospitals across the state and gave presentations on this resource and the important issue of health literacy to over 220 staff working with heart failure patients. Feedback showed an increased confidence among hospital staff in their ability to support patients to better manage their heart failure, to improve patient health outcomes and reduce hospital readmissions.

Victoria

“ **Salt is linked to one in 20 deaths** in Victoria.”

The 'Take Action' and 'Emergency' plans from the booklet have now been translated into 16 languages.

Supporting Young Hearts

Each year, more than 1,000 people aged between 20 and 40 years are hospitalised for a heart attack, while 2,000 more are hospitalised due to heart disease.

In 2016, we launched the Supporting Young Hearts program to improve the physical and emotional health of young people under 40 years of age who are living with a heart condition or recovering from a heart event or surgery. Supporting Young Hearts allows young people to connect with one another by sharing their experiences, challenges and support. We held a forum for people under 40 to learn more about heart health. We also set up a Supporting Young Hearts Advisory Group, produced an online information kit, and developed a dedicated e-newsletter for Supporting Young Heart members. More face-to-face events, resources and initiatives are planned for 2017.

Don't trust your tastebuds

Victorians eat a combined total of more than 15,000 tonnes of salt every year.³⁸ This means the average Victorian is eating twice the recommended upper limit of salt intake. The sodium in salt is linked to one in 20 deaths in Victoria.³⁹ It's estimated that salt reduction could save up to 800 Victorian lives a year from stroke and heart disease.⁴⁰

The Heart Foundation and VicHealth joined forces in 2016 to develop a campaign called 'Don't trust your taste buds', aimed at raising awareness and educating people about the negative health risks of consuming too much salt. The campaign involved a dedicated website and social and traditional media activity. The campaign was shown to increase awareness, and also demonstrated strong engagement with digital audiences with more than 74,000 people engaged via Facebook and other social media platforms.

In late 2016, VicHealth and the Heart Foundation agreed to extend the partnership for a further 18 months.

To find out more about the campaign visit donttrustyourtastebuds.com.au

Sons of the West – Western Walking program

In 2016, the Heart Foundation developed a tailored walking program in partnership with the Western Bulldogs community health initiative, 'Sons of the West', to support men living and working in Melbourne's western suburbs to lead healthier lives.

A total of 14 walking groups were established, with 10 nominees presented with a most valuable walker award and over 20 community leaders committed to the 2017 Western Walking program.

Pilbara Aboriginal Heart Health Program



Indigenous Australians experience 2.5 times the number of acute coronary events, such as heart attacks, than of non-Indigenous Australians.⁴¹ Cardiovascular disease also happens earlier and progresses faster for these Australians. In fact, cardiovascular disease is the leading contributor to the life expectancy gap between Indigenous and non-Indigenous Australians.⁴⁴

Two out of three Aboriginal and Torres Strait Islander peoples have at least **one risk factor for cardiovascular disease.**

In WA's Pilbara region, 12 per cent of people identify as Aboriginal and Torres Strait Islander.⁴² In 2016, the groundbreaking 'Pilbara Aboriginal Heart Health Program' was rolled out in the Aboriginal and Torres Strait Islander communities of Karratha, Roebourne and Onslow. The program takes health education into the community, and focuses on things like physical activity, nutrition, healthy cooking and food label reading.

It also teaches the warning signs of a heart attack, along with heart disease, treatments, risk factors and accessing health services.

When developing the program, the Heart Foundation spent 10 months visiting the West Pilbara, building genuine relationships with the local Aboriginal and Torres Strait Islander people, their families and the broader community.

The program is now locally led, with a program coordinator based in Karratha, and project officers in Roebourne and Onslow. The Pilbara Aboriginal Heart Health program will continue in 2017.

The **Pilbara Aboriginal Heart Health Program** was delivered in partnership with Chevron Australia.

Western Australia

Healthier Workplace WA

Chronic diseases such as heart disease and diabetes have a tremendous impact on the health of our economy. Healthier Workplace WA is a health-promotion program offering free advice, information and support to help make workplaces healthier. Advice focuses on workplace improvements surrounding smoking, nutrition, alcohol and physical activity (SNAP).

Since it commenced in 2012, Healthier Workplace WA has helped more than 2,000 workplaces. Also, more than 2,600 individuals have participated in workshops, online training sessions, one-to-one support, workplace health audits or requested general advice.

This program will be expanded in 2017 to offer:

- one-on-one support and advice (via 1300 telephone, email and meetings)
- training and workforce development (Online Coordinator Training, Lunch n Learn Series, webinar and face-to-face coordinator training)
- recognised Healthy Workplace Program
- Healthier Workplace WA website with information, tools, resources and templates.

Healthier Workplace WA is provided by the Heart Foundation in conjunction with the Cancer Council WA in partnership with the State Government of Western Australia through the Western Australia Department of Health.

LiveLighter

Among Australians over 18 years of age, 63.4 per cent are either overweight or obese.⁴³ Too often, junk food is a major cause for this. The Heart Foundation's LiveLighter campaign began in 2012 to encourage Australians to live healthier lives by making changes to what they eat, drink and do. Along with powerful advertising campaigns, LiveLighter offers a number of valuable resources including a meal and activity planner, together with hundreds of simple and healthy recipes.

Our LiveLighter campaign has successfully educated Western Australians about the link between being overweight and fatty liver disease. People who are most at risk of weight-related health problems reported the campaign motivated them to avoid purchasing food from specific retail outlets depicted in the campaign.



63.4 per cent of Australians over 18 years of age are either **overweight or obese.**

In 2017, along with continuing the campaign, we'll be advocating for the introduction of kilojoule labelling on all junk food. The Heart Foundation has also recently been awarded more than \$18 million by the State Government of Western Australia to deliver the program over the next 4.5 years, bringing the total budget for this world-leading initiative to \$38 million over 10 years.

Find out more about LiveLighter at livelighter.com.au



LiveLighter is run in partnership with the Cancer Council WA and funded by the Western Australia Department of Health.

Financials

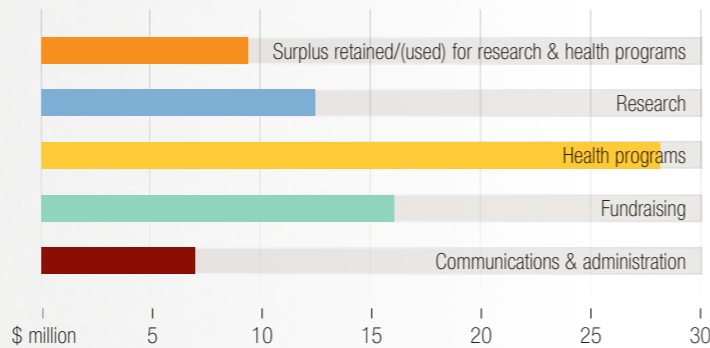
The Heart Foundation outperformed its financial expectations in 2016, with a reported surplus for the year of \$23.25 million. This result was largely driven by a record level of bequest income and prudent management of all other business areas. 2016 highlights are:

- an unprecedented year for receipts from bequeathed estates
- the Board remain satisfied with the cost-to-income ratio for our revenue-raising activities, which improved in 2016
- rigorous strategic management of the investment portfolio produced a return above the market
- we committed \$12,339,000 to research activities in 2016 and \$50 million will be allocated over the next three years
- total expenditure decreased by \$651,000 in 2016, with no compromise to the delivery of the For All Hearts strategic plan.

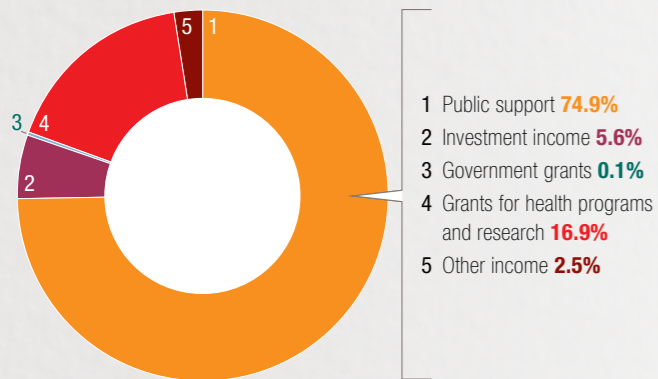
Although the fundraising environment remains competitive, the Heart Foundation has a strong platform to support an increase into health programs and research well into the future.

“ In 2015, we raised \$81.5 million thanks to Australians' generosity, investing \$63.16 million to help make a difference to Australia's heart health.”

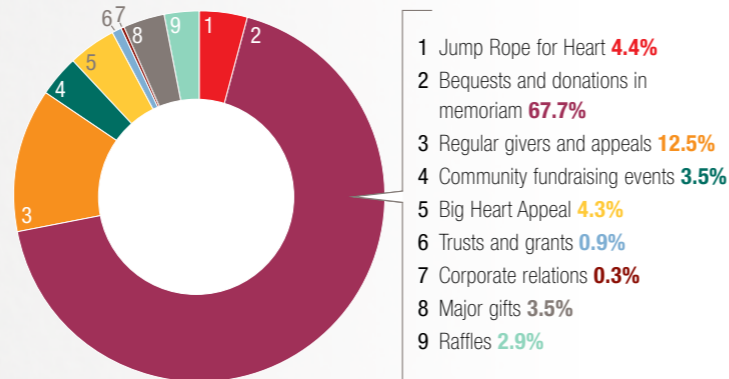
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Sources of income 2016



How you've helped us in 2016



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Thank you

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Heart Foundation is a registered charity and accredited to carry the ACNC Tick.

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