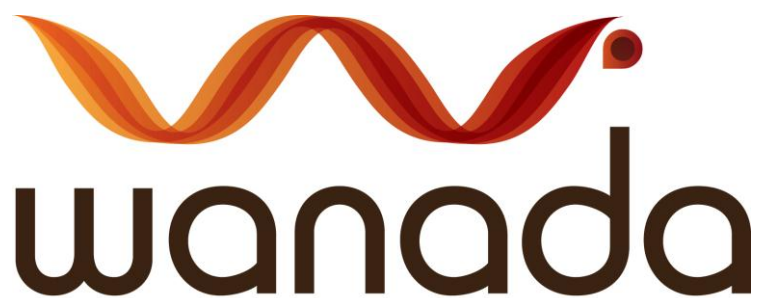




# Annual Review 2010/2011



Western Australian Network of  
Alcohol & other Drug Agencies

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For more information on all WANADA's projects, how they are informed by the sector and the ways to get involved look at the WANADA website: [www.wanada.org.au](http://www.wanada.org.au)

# About WANADA

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The Western Australian Network of Alcohol and other Drug Agencies was established in 1984 as the peak body for the alcohol and other drug (AOD) prevention, education, treatment and support sector in Western Australia. WANADA is an independent, membership driven, not-for-profit organisation.

WANADA operates in an environment influenced by Federal and State Government, and has seen significant growth in funding and personnel in the past three years.

## Vision

To be an effective voice on policy, quality and sustainability for the alcohol and other drug sector in Western Australia

## Purpose

To lead and support development of the alcohol and other drug sector to deliver best possible outcomes for the community of Western Australia

## Values

The work of WANADA is guided by our:

- Belief in the invaluable contribution that the non-government sector can make in both service delivery and policy development;
- Valuing and promoting the importance of a diversity of service and service options, highlighting the equal opportunity rights of all people affected by AOD use;
- Commitment to evidence based approaches and practice wisdom input to policy and practice to advance service delivery to the community;
- Commitment to support agencies striving for improvement and enhancement of service delivery;
- Commitment to supporting the needs for workers and volunteers in the alcohol and other drugs sector; and
- The need to support the development and enhancement of mutual respect between organisations to enhance partnership development and integration in order to ensure best outcomes for people accessing the services.

## Objectives

1. To effectively represent and lead the WA AOD service sector
2. To support development and improvement of the sector service capacity and effectiveness
3. To position WANADA, and therefore the WA AOD service sector, through networks and collaboration to ensure effective outcomes for individuals and the community
4. To develop WANADA as a sustainable peak body

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# Chairperson's Report

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The year in review, 2010 -2011, has been an incredibly busy, challenging and rewarding time for WANADA – its membership, Board and dedicated staff. Every opportunity to advocate for the alcohol and other drug (AOD) sector and to ensure its voice is heard has been taken. It has been a year of review, planning and achievement.

WANADA's Strategic Plan 2010 – 2013 commenced formally in January. The new plan sees a focus on both communication and Aboriginal and Torres Strait Islander cultural security.

WANADA and the AOD sector in Western Australia has long-recognised that culturally secure services are essential to ensuring that Aboriginal people and communities have access to prevention, treatment and rehabilitation. WANADA has developed a Reconciliation Action Plan that is expected to be approved by Reconciliation Australia before the end of the year, and with which the staff and Cheryl Davenport as chairperson have been engaged.

In the last year, WANADA has also worked to develop the culturally secure Accreditation Framework that will allow AOD services across the state and nationally to work towards accreditation. The Accreditation Framework has grown out of the WA AOD Sector Quality Framework and is an indication that the sector is strengthening and developing to meet the future needs of our community. The Framework's development has involved considerable consultation, testing, reviewing and piloting with services across Australia.

WANADA expects the Accreditation Framework to be registered as an accreditation tool by the Joint Accreditation System of Australia and New Zealand in September/early October 2011. The achievement of this is significant, and would not have been possible without the dedication of the WANADA team, the reference group guiding the process, the Drug and Alcohol Office (DAO) and the Commonwealth Department of Health and Ageing (DoHA) funding bodies and the feedback and contribution from AOD services from across Australia. It will undoubtedly support the continual improvement of the AOD sector and enable all of our organisations to better demonstrate the quality of the services we provide and the consumer outcomes we strive to achieve.

Our focus on strategy and communications sharpened with the employment of Strategy and Communications Manager Nerida Bowden in February 2011 and commencing the establishment of a stakeholder engagement framework. This is intended to result in a more structured approach to our valued stakeholder relationships. Given the State and Commonwealth reforms promoting cross-sector collaborations and partnerships WANADA is conscious of the need to expand its key stakeholder base to enable it to better promote the values and principles of the WA AOD sector.

WANADA has met with relevant Ministers and opposition members in this report period. We have continued to meet regularly with key funding bodies for the sector, DAO, DoHA and the Office for Aboriginal and Torres Strait Islander Health. WANADA has also engaged significantly with stakeholders driving much of the relevant reforms that will impact on the AOD sector, including the state Department of Finance and the Funding and Contracting Services Unit as the agencies overseeing much of the procurement reform in WA, and DoHA and the WA GP Network to ensure the AOD sector issues are considered in the national health reform agenda.

WANADA has worked in partnership with the Western Australian Council of Social Service (WACOSS) and the other WA sector peak bodies to support a united and strategic approach to

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state reforms, and likewise with the Alcohol and other Drugs Council of Australia (ADCA) and AOD peak bodies from the other jurisdictions for a united voice on national reforms processes.

At this point it is appropriate to acknowledge and thank the State Government for its recognition of the value of the services provided by the WA not-for-profit sector, as demonstrated by the significant budget increase. Our next challenge is to secure a similar recognition by the Federal Government in regard to the Fair Work Australia pay equity case.

WANADA continues to inform the sector of national and state developments that are likely to impact on their work, however with so many policy and reform changes coming into effect communicating a strategic way forward for the sector has not been an easy task. What stands out is that this is a sector passionate about achieving the best possible outcomes for consumers. WANADA has continued to draw on this focus by its members to inform its leadership role.

In July WANADA farewelled our independent chairperson, Cheryl Davenport, when she accepted a position as Chief of Staff to the administration of Norfolk Island. Cheryl contributed significantly to the development of WANADA over the year with her persistence to follow through on key sector issues and applying her political savvy and sound processes. On behalf of WANADA and the Board I would like to take this opportunity to thank Cheryl for her contribution, direction and guidance.

WANADA is soon to go through its own ISO accreditation review for the first time. Over the past year the WANADA Board has looked at refining and improving its governance processes and overseen systems improvements across the organisation. I would like to thank and congratulate the WANADA Board and staff for the many improvements achieved over the year.

The Board extends our thanks to Jill Rundle and the WANADA staff for their leadership and outstanding commitment to continuous improvement of WANADA and evident and tireless dedication to the AOD sector in WA.

**Sheila McHale**  
**Acting Chairperson**

**September 2011**

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# Chief Executive Officer's Report

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WANADA celebrated in May 2011 with the announcement that the State Budget 2011/12 included a 15% funding increase for service agreements for not-for-profit community services.

The funding comes as part of the State Government's *Delivering Community Services in Partnership (DCSP)* policy and the procurement reform, with the intention that it will contribute to the sustainability of community services in our state.

For many years, WANADA and our member agencies have worked in collaboration with other peak bodies to advocate for the adequate remuneration of our staff. Alcohol and other drug work is essential to the community and rewarding for those who choose to work in the field. However, our not-for-profit services have struggled to offer adequate salaries that are comparable to other industries or to related government services. The alcohol and other drug sector's support for our advocacy work in relation to adequate remuneration has played an important role in achieving this funding increase and we thank you again for your efforts.

While the funding boost is a fantastic opportunity for the community services, it is also a time for careful financial planning and consideration of our future needs. The funding, as mentioned, comes as part of wider reform which will also have an impact on the way that community services in Western Australia operate.

In addition to State Government reform, Western Australia has also agreed to the National Health Reform. WANADA will continue to inform the sector about changes that we believe will have an impact on the sector.

WANADA continues to support workforce development in the sector and this year has facilitated student placements at several residential rehabilitation centres through the Health and Wellbeing Project. While students from UWA and Edith Cowan University have shared their knowledge and skills with staff and residents, they have broadened their understanding of people who have problems related to alcohol and other drug use and can now consider the alcohol and other drug field when planning their careers. The project is successful thanks to the participation of our member agencies and the universities.

The Health and Wellbeing Project is managed by our Cross-Sectorial Support and Strategic Partnerships Project (CSSSPP), which coordinates the Improved Services Initiative in Western Australia. The Department of Health and Ageing recently re-funded this project and our staff remain committed to the project. We are grateful to DoHA and other funders including the Drug and Alcohol Office and the Office for Aboriginal and Torres Strait Islander Health for their continued support of both the sector and WANADA.

WANADA is strongly committed to supporting Aboriginal people to address alcohol and other drug issues in the community. In last year's report I said that recruitment and retention of Aboriginal workers would be a focus in the year ahead. During NAIDOC Week in July, WANADA was pleased to launch the *Aboriginal and Torres Strait Islander Culturally Secure Recruitment and Retention Guide* for the alcohol and other drug sector.

We continue to host network gatherings with Aboriginal alcohol and other drug workers, have supported Aboriginal services to achieve accreditation in partnership with the Aboriginal Health

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Council of WA, worked on alcohol prevention projects in the Meekatharra and Roebourne areas, and will soon finalise our Reconciliation Action Plan.

WANADA's staff are enthusiastic about their work and are passionate advocates for our member agencies, alcohol and other drug workers and consumers. Over 2010/11 we settled into our new office and we have grown as a team, continually seeking new ways to improve our work and to make a greater impact on behalf of the sector. I would like to thank the staff of WANADA for making all that we have achieved possible, and doing so professionally and with commitment.

WANADA's Board continues to guide our work to support and develop the alcohol and other drug sector in WA and to offer their collective wisdom and knowledge. On behalf of our members, I would like to thank the Board for their contribution to WANADA during 2010/11, and acknowledge their support and commitment to sector development during a very busy year, not just for WANADA but for their own organisations.

WANADA is fortunate to have active members who contribute in many ways to our success. Our members participate by committing to the Board, by offering considered feedback to consultations, by providing their knowledge to reference groups and committees on behalf of the sector, and through their collaboration and participation in projects as diverse as Indigenous Youth Against Grog and the Accreditation Framework. Thank you to all of our members for your continued support.

**Jill Rundle**  
**Chief Executive Officer**

**September 2011**

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# Treasurer's Statement

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This is my seventh year as treasurer for WANADA and it has been yet another extremely successful year with increased funding through a number of projects and stable core and recurrent funding.

There have been a number of different funding bodies contributing to WANADA in the 2010-11 year, including the Office for Aboriginal and Torres Strait Islander Health (OATSIH), the Drug and Alcohol Office, LotteryWest, the Department of Health & Ageing, the Alcohol and Education and Rehabilitation Foundation (AERF).

As you can see from the financial statement at the back of the Annual Review 2010-11, the WANADA finances are in an excellent position. The following notes apply to the Statement of Receipts in the Income and Expenditure Statement

- **Project Funding Current Year** is approximately \$1,000,000 higher than the previous year due to funds from projects including the DAO/OATSIH jointly funded Accreditation Framework, DAO Aboriginal Forum, DAO Leadership Project and DAO Management Program. The DAO Prevention Project continued to be funded via new funds and from Unexpended Grant Brought Forward.
- **Unexpended Grant Carried Forward** is \$559,000 higher this financial year due to advanced funding for the DAO Prevention, Making It Happen 2012, DAO Management, DAO Aboriginal Forum, Binge Drinking and AHCWA projects.
- **Bank** is higher than the previous year due to the Unexpended Grant Carried Forward and higher than expected interest earned on funds deposited.
- **Membership:** Membership income is showing as significantly higher, this is due to memberships being switched from a calendar year to a financial year basis (the Membership year is from 1 July to 30 June each year). Membership numbers are expected to remain stable over the next financial year.
- **Project Management Fees.** WANADA receives a management fee from a number of the projects. Along with membership fees and bank interest. Although accounted for separately as Association funds, this money is put back into the everyday running of WANADA and to add value to the projects.
- **Advertising.** This expense is primarily for prevention campaign expenses, which has increased from the previous year.
- **Consultancy.** This expense is primarily for the Institute of Healthy Communities (Peer Review Project) and the Presenters of the DAO Leadership training courses.
- **Net Income.** The end of year result was a deficit of-\$29,957. This deficit was planned and approved by the Board. The expenditure was to fund additional resources as a result of the staff review, including a Strategy and Communications Manager. The benefits of the additional resources are expected to be reflected in the 2011-2012 financial year results.

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MGI Business Solutions Worldwide has been appointed as our Auditors. They have indicated that they are more than satisfied with the way that the accounting procedures are being dealt with.

It is therefore with pleasure that I present to the Members the 2010/2011 audited accounts.

On behalf of the board I would like to thank Mary-Louise Davies for the high standard of accounts she has presented over the past financial year, and the professionalism she brings to WANADA.

Thank you

**Carol Daws**  
**Treasurer**

**September 2011**

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# 1. Effectively represent and lead the WA AOD service sector

Representation of the WA AOD service sector remained at the core of WANADA's work in 2010/11. Through active participation at meetings and contribution to policy submissions and responses, the specific interests of the WA AOD service sector have been represented by WANADA at local, state and national level.

Reform changes have been a focus for many of the activities and events supported or coordinated by WANADA in this report period. WANADA has attended many events outlining reform changes with the view that many sector representatives may not be in a position to attend or be aware of the importance of these events.

The opportunity to raise awareness of reform changes has also occurred in dedicated events or at ongoing networking events focused on project development and sector capacity building.

## Effective Advocacy

WANADA has continued to consult with the AOD service sector to ensure representativeness when speaking on sector issues in policy and planning processes. WANADA has also reinvigorated and revamped the Sector Issues Register to allow a systems approach to advocacy.

Two significant ongoing advocacy issues that WANADA is engaged in are:

- Continuing to lobby for funding to support the existing, growing and potential demand from corrective services' consumers
- Working in partnership with other key lobby groups and processes for wage parity for the staff in the NGO AOD sector.

Significant progress has been made on this issue with the state government providing a

15% funding increase to service agreements to support service sustainability.

WANADA has:

- Coordinated a forum from Chamber of Commerce and Industry – to support sector services prepare for the modern award changes
- Coordinated, in partnership with DAO, updates for the WANADA Board on the state procurement reform
- Invited representatives from the GP Network WA to present to the sector to support improved awareness of the Medicare Locals and national health reform for the primary health sector
- Coordinated a working group of representatives from diverse services to feed into the national population planning (DA-CCP) process
- Coordinated a Sector Forum – update on State Procurement processes with Kylie Towie (DT&F)
- Coordinated a Sector Forum – update on National Processes with David Templeman (ADCA)
- Launched the WA AOD Knowledgebase (Digital Library)
- Launched the Aboriginal Recruitment and Retention Guide
- Represented the sector on a range of policy and planning committees and working groups, including the WA AOD Symposium Reference Group

## Cultural Security

WANADA has continued to develop its Reconciliation Action Plan (RAP) in this report period, based on extensive staff input and discussions and the involvement of the Chairperson Cheryl Davenport. An external advisory group has been identified and the group has come together in this report period to provide advice and direction.

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WANADA has worked to secure Aboriginal participation on the WANADA Board; Accreditation Framework Reference Group; Aboriginal Network Reference Group (all Aboriginal participation); and all relevant project reference groups. For cultural partnership development WANADA has had meetings with;

- The Office of Aboriginal and Torres Strait Islander Health (OATSIH)
- The Aboriginal Health Council of Western Australia (AHCWA)

- The Statewide Indigenous Mental Health Services

A majority of the 32 Aboriginal services are also supported through the Quality Framework.

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## 2. To support development and improvement of the sector service capacity and effectiveness

Supporting the maintenance of capacity and sustainability of the sector with increased funding pressures and state and national reforms has remained at the forefront of WANADA's work. The importance of demonstrating the quality of the work achieved by the sector and the continued strength of cross sector initiatives are key elements to securing the future of the WA AOD sector.

WANADA has continued to support and promote service sector capacity building and continuous quality improvement through all its work.

### Quality Improvement

In this report period WANADA received funding from DAO and OATSIH via the Establishing Quality Health Services (EQHS) within the Department of Health and Ageing to review the Quality Framework (QF) and develop an accreditation system. This will result in the development of the Culturally Secure Accreditation Framework (CSAF – until a formal name has been established). As such, much of the implementation support offered to the sector has been to ensure the incorporation of key elements such as cultural security, diversion and comorbidity into the CSAF. Further implementation has also resulted in supporting the transition of services from applying the QF to being ready to apply the CSAF.

This transition has been further supported with the continuation of the Peer Review with a review program seeing service reviews being more intensive, and trialling the CSAF interpretive guide.

Transition support has continued, including agency visits and intensive support as needed, e-mails and telephone communication, supporting cross-agency networks and mentoring.

The Quality Framework Implementation & Development committee (overlooking the development and then the implementation of the QF) met once in this period to, in effect pass responsibility over to the Accreditation Framework Reference Group (AFRG). Senior DAO and OATSIH staff are represented on the AFRG, as are representatives from the WA AOD Sector, and a representative from the Aboriginal Health Council WA (AHCWA).

### Sector Capacity Building Initiatives

WANADA has a continued focus on sector capacity building.

Ongoing work with agencies involved in the Improved Services Initiative across the state has moved towards implementing capacity building strategies by:

- Supporting core competency training in the sector
- Linking the Dual Diagnosis Capability in Addiction Treatment Programs (DDCAT) tool to the Culturally Secure Accreditation Standard for the AOD sector (CSAF).
- Development of a sector-wide culturally secure co-morbidity resource
- Supporting and facilitating cross-sectorial partnership development.

The Health and Well-being project has expanded to recruit students from more universities and place students into more

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AOD services. Ten students have been placed in 7 different services providing either Nutrition or exercise programs. The success of the student placements have relied upon good partnerships with the AOD services and tertiary institutions.

WANADA has supported DAO in the review of the Evidence Based Practice Guidelines, consulting and seeking feedback from the sector of the review. Reviewed evidence based practice requirements/considerations can also been incorporated into the support resources available with the CSAF.

### **Culturally Secure Recruitment & Retention Guide**



WANADA produced the Culturally Secure Recruitment and Retention Guide during this period and launched it for the AOD Sector on Wednesday 6 July 2011. The guide is designed to support managers and CEOs in the alcohol and other drug sector to attract and retain Aboriginal workers, using an approach that involves the whole organisation. The guide includes information on how to advertise positions in a culturally secure way and offers information about cultural considerations when employing people who are Aboriginal or Torres Strait Islander.

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### 3. To position WANADA, and therefore the WA AOD service sector, through networks and collaboration to ensure effective outcomes for individuals and the community

To inform this objective WANADA proposed a set of WA AOD sector values and principles. The values and principles can then inform the basis of WANADA's responses on behalf of the sector to policy and planning initiative, its approach to advocacy and representation of the sector services.

Expectations of services and the sector were established through discussion with services re the pressures they feel from pending reform changes and their community, and also through monitoring media and community comments. WANADA continued to conduct informal and formal consultation with service providers re realistic expectations of service delivery considering resources allocated. The result of the consultation with the sector is the identification of realistically achievable key values and principles of the sector to strategically promote to the community, including funding bodies, intersectoral partners and the broader community.

These include:

- The sector values a **diversity of services**. This diversity contributes to a collective specialised approach informed by best practice, practice wisdom and local and regional contexts
- The sector is committed to **working collaboratively and in partnership** to enhance the service delivery outcomes to and impact on Western Australia people and communities
- The sector actively **participates in continuous quality improvement** : of

the sector as a whole; of organisation processes and services to individuals and the community; and the workforce

A range of relevant state and federal policy documents, including those related to reform processes, have required consideration and responses by WANADA.

WANADA has concerns that AOD dedicated strategy structures have recently been reduced, including the wind up of the Ministerial Council on Drug Strategy. With this comes a potential reduction of intersectoral strategy groups informing and monitoring the National Drug Strategy (NDS) directions. This will require increased vigilance by relevant peak bodies across Australia to ensure supply, demand and harm reduction initiatives receive equitable and across-government consideration.

WANADA has welcomed the opportunity to contribute to the WA Education and Health Standing Committee consultations, which have been extensive throughout the state. The findings and recommendations coming from these consultations clearly verify the approach and perspective of the diverse sector

There has been some concern with the removal of a dedicated titled AOD state ministerial portfolio, and yet welcome the opportunity to have the Minister for Mental Health, the Hon. Helen Morton, responsible also for AOD. The concern from the AOD

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sector is a long standing one that any merging of the mental health and AOD sectors would result in the specialised AOD sector being subsumed and overlooked. The Minister has assured WANADA that any merge is not on the agenda, however a collective strategic approach to addressing co-occurring issues is welcomed and broadly supported by the sector.

While AOD issues impact on many sectors, including mental health, housing/homelessness, primary health, Aboriginal health, corrective services and child protection there is a need to contribute to across-government policy processes.

WANADA works at keeping the sector informed of relevant state and federal policy and planning, and consults wherever possible to inform responses or submission to policy documents to support a representative perspective. With limited resources maintaining a “big picture” and linked view of these processes is becoming increasingly difficult. This is at a time when state and federal reform processes promote increased integration, and consequently it is more important than ever for the WA AOD sector services to contribute to policy and planning.

In view of the recognised importance of effective partnerships, WANADA commenced a new project this reporting period, the Stakeholder Engagement Framework Project. The key focus of this project is to explore and develop partnerships and working relationships with key stakeholders with a view to develop a systematic approach to managing these relationships. An anticipated outcome of this project is effective communication with

stakeholders, enabling effective representation and leadership

WANADA’s e-newsletter *FYI* has a fresh new look and continues to provide relevant information to anyone with a genuine interest in the alcohol and other drug sector in WA. Each week WANADA shares information about training and workforce development, new resources, job opportunities, grants and funding, research, new developments in the sector, and agency updates. Member agencies, funding bodies and other health and community service organisations contribute regularly.

The WANADA website has been updated and further modernised. The website now includes our Twitter feed (@WANADAFYI) and continues to be updated with current events, news and resources of relevance to the sector. The Service Directory and AOD Jobs sections remain the most popular features.

WANADA continues its support of the Drug Aware campaigns through our partnership with the Drug and Alcohol Office. Campaigns in 2010/11 have included an ecstasy prevention campaign that coincided with summer music festivals and a campaign to raise awareness about the effects of cannabis use on mental health. Drug Aware campaigns are significant in terms of informing community attitudes and behaviours related to drug use. WANADA hopes to support increased service sector input into these campaigns wherever possible, for a sense of collective ownership and a unified prevention voice.

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## 4. To develop WANADA as a sustainable peak body

WANADA's role as the WA AOD peak body is strengthened through the involvement of its members, sound governance, quality practice and a skilled and passionate workforce.

### Members Involvement

Membership of WANADA has remained consistent during this period, all-be-it with some organisations consolidating a single full membership for the range of their services. WANADA membership continues to represent the diversity of the sector. Appendix C gives a full membership list.

WANADA continues to maintain a member focus as a core value and has reinforced this through revision of the WANADA Principles of Practice and Strategic Plan.

WANADA continues to actively consult both formally and informally on the range of issues and concerns experienced by its members. This is seen as a core role for WANADA, and seeks input from its members in all decision making processes.

### Funding

WANADA has continued to attract funding from a diverse range of sources during this year. New funding from OATSIH and DAO

has supported the Accreditation Framework development, and from DoHA's Establishing Quality Health Standards (EQHS) has allowed WANADA to prepare for its own ISO accreditation. DoHA have also funded WANADA's Indigenous Youth Against Grog Binge Drinking Project.

Appendix D gives a full list of funders Appendix E provides a list of WANADA projects for the 2010/11 year.

### The WANADA Board

A new Strategic Plan 2010 – 13 informs the direction of WANADA. Complementary documents to the Strategic Plan, including an Operations Plan; Business Plan; Reconciliation Action Plan; Communications Plan; and the CEO's Work Plan.

Operational policies and procedures have been reviewed in this report period, including review of systems that support the compliance with policies and procedure. This review has supported WANADA's preparation for achieving ISO accreditation.

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## **Appendix A**

### **WANADA Executive Committee 2010/11**

<b>Chairperson:</b>	Dr Cheryl Davenport (Resigned 22 June 2011)
<b>Vice Chairperson:</b>	Sheila McHale Chief Executive Officer at Palmerston Association
<b>Treasurer:</b>	Carol Daws Chief Executive Director at Cyrenian House
<b>Secretary:</b>	Angela Paskevicius Chief Executive Officer at the Holyoake Institute
<b>Committee members:</b>	Ann Deanus Chief Executive Officer at Womens Health & Family Services  Carmen Acosta Operations Manager (Community Services) at Mission Australia  Mitchell Dobbie Manager at the Midwest Community Drug Service Team  Mark Lowery (Resigned 25 <sup>th</sup> May 2011) Manager at WA Substance Users' Association  Sally Malone (Resigned October 2010) Manager at Kimberley Community Drug Service Team  Andrew Amor (Appointed 22 <sup>nd</sup> December 2010) Chief Executive Officer Milliya Rumurra Aboriginal Corporation  Daniel Morrison (Appointed 25 <sup>th</sup> August 2010) Executive Director at Aboriginal Alcohol and Drug Service  Debra Zanella (Appointed 22 <sup>nd</sup> December 2010) Chief Executive Officer at DrugARM WA

## Appendix B

### WANADA Staff 2010/11

<b>Chief Executive Officer:</b>	Jill Rundle	F/T (from June 2000)
<b>Aboriginal Services Manager:</b>	Wayne Flugge	F/T (from October 2005)
<b>Sector Development Manager:</b>	Angela Corry	F/T to P/T (from October 2007)
<b>Operations Manager:</b>	Jane Harwood	F/T to P/T (from August 2007) Maternity leave from May 2011
<b>Strategy &amp; Communications Manager:</b>	Nerida Bowden	F/T (from January 2011)
<b>Finance &amp; Administration Manager:</b>	Mary-Louise Davies	F/T (from March 2008)
<b>Administration:</b>	Janna Di-Lallo	P/T (from March 2010 – Nov 2010)
	Bronwyn Claughton	F/T (from January 2011)
<b>Communications Officer:</b>	Deanne Ferris	F/T (from January 2007)
<b>Project Team:</b>	Bettina Hayden	P/T to F/T (from November 2010)
	Bianca Lovi	P/T (from January 2010)
	Keith Bodman	P/T (from November 2009)
	Kim Ziapur	P/T (from August 2008)
	Maree Stallard	P/T (from October 2009)
	Mary Ford	F/T (from October 2006 – Aug 2010)
	Merilyn Wigley	F/T (from July 2008 – April 2011)
	Rebecca MacBean	F/T (from July 2010)
	Timothy Ward	F/T (from May 2011)
	Yvonne Sargeant	P/T (October 2010 – Feb 2011)

# Appendix C

## WANADA Members 2010/11

### Full Members

- ◆ Aboriginal Alcohol and Drug Service
- ◆ Cyrenian House
- ◆ Drug and Alcohol Withdrawal Network
- ◆ Drug ARM WA & Rosella House
- ◆ Fresh Start Recovery Programme
- ◆ Garl Garl Walbu Alcohol Association Aboriginal Corporation
- ◆ Goldfields CDST
- ◆ Halls Creek People's Church Sobering Up Shelter
- ◆ Holyoake
- ◆ Jungarni-Jutiya Indigenous Corporation
- ◆ Kimberley CDST
- ◆ Kununurra Sobering Up Centre
- ◆ Local Drug Action Groups Incorporated
- ◆ Mental Illness Fellowship of WA
- ◆ Mercy Addiction Support Team
- ◆ Midwest CDST
- ◆ Milliya Rumurra Aboriginal Corporation
- ◆ Mission Australia
- ◆ Next Step Drug & Alcohol Services
- ◆ Ngnowar-Aerwah Aboriginal Corporation
- ◆ Nindilingarri Cultural Health Service
- ◆ Outcare
- ◆ Ord Valley Aboriginal Health Service
- ◆ Palmerston Association Inc.
- ◆ Pilbara CDST
- ◆ Prospect Lodge
- ◆ Yaandina Family Centre Sobering Up Shelter
- ◆ Salvation Army Bridge House
- ◆ Southwest CDST
- ◆ St Patrick's Community Support Centre
- ◆ Teen Challenge
- ◆ WA Substance Users' Association
- ◆ Warmun Local Drug Action Group
- ◆ Women's Health & Family Services

### Associate Members

- ◆ 55 Central Inc
- ◆ Acacia Prison Drug & Alcohol Department
- ◆ Armadale Youth Accommodation Services
- ◆ ASWA - Substance
- ◆ Broome Sobering Up Centre (Walangari)
- ◆ Cross Roads Community
- ◆ Derbarl Yerrigan Health Service
- ◆ Fremantle CDST
- ◆ Geraldton Regional Aboriginal Medical Service
- ◆ Goldfields Esperance GP Network
- ◆ Great Southern CDST
- ◆ Hepatitis WA
- ◆ Katanning CDST
- ◆ Kalgoorlie LDAG
- ◆ Mandurah CDST
- ◆ National Drug Research Institute
- ◆ North Metropolitan CDS
- ◆ Northeast Metropolitan CDS
- ◆ Population Health - Goldfields
- ◆ Palmerston Association Inc - Palmerston Farm
- ◆ Perth Primary Care Network
- ◆ Cyrenian House Therapeutic Community
- ◆ Ruah Community Services
- ◆ Salvation Army Harry Hunter's Rehabilitation Centre
- ◆ Serenity Lodge
- ◆ South Metropolitan CDS
- ◆ Southeast Metropolitan CDS
- ◆ St Bartholomew's House
- ◆ Swan City Youth Service Inc.
- ◆ Swan Emergency Accommodation Inc.
- ◆ UnitingCare West Attach
- ◆ WA AIDS Council
- ◆ Wanslea Family Services
- ◆ Wheatbelt CDST
- ◆ Women's Healthworks
- ◆ Youth Futures WA
- ◆ Youth Reach South
- ◆ Youthlink
- ◆ Zonta House Refuge Association

Additional Aboriginal specific services are members of WANADA through the Aboriginal Network.

### Individual Members

- ◆ Vannee Manikkam
- ◆ Chris McDonald
- ◆ Jeff Moss
- ◆ Caroline Power
- ◆ Etza Peers
- ◆ Gio Terni

## Appendix D Acknowledgment of Funders 2010/11

We gratefully acknowledge the assistance and support of the following funding bodies:

Western Australian Drug and Alcohol Office	DAO
Commonwealth Department of Health and Ageing Office for Aboriginal and Torres Strait Islander Health	DoHA - OATSIH
Commonwealth Department of Health and Ageing - Improved Services Initiative	DoHA - ISI
Commonwealth Department of Health and Ageing - National Binge Drinking Strategy Community Partnerships Initiative	DoHA - CPI
Lotterywest	
Alcohol Education and Rehabilitation Foundation	AERF
Council of Australian Governments	COAG



Government of **Western Australia**  
Drug and Alcohol Office



**Australian Government**  
Department of Health and Ageing



## **Appendix E**

### **WANADA Projects in 2010 /11**

**Leadership and Management Program:** The Leadership and Management Program provides leaders and managers in the alcohol and other drug sector with training and networking opportunities tailored to meet current and future needs.

**Aboriginal Alcohol and other Drug Forum:** WANADA has been preparing to host the Aboriginal Alcohol and Other Drug Forum in early 2012, bringing delegates together from across the state to talk about Aboriginal AOD work.

**Aboriginal Network:** The Aboriginal Network provides Aboriginal organisations and workers with opportunities to network, to share knowledge and current needs, to offer peer support, and contribute to strategic planning on Aboriginal alcohol and other drug issues. In this report period WANADA has progressed an initiative identified as needed by the Network – the development of the Recruitment and Retention resource.

**Indigenous Youth Against Grog (IYAG):** IYAG, in partnership with the relevant CDSTs and the local communities is developing Aboriginal culturally secure education and prevention materials on the risks of binge drinking for 12 - 24 year olds in the Meekatharra and Roebourne areas. WANADA's role is to support community and service collaboration.

**Comorbidity Project (Cross Sector Support and Strategic Partnerships Project):** The Comorbidity Project coordinates work to improve outcomes for people with co-occurring alcohol and other drug and mental health issues across the state. This WANADA project works with alcohol and other drug agencies that participate in the Improved Services Initiative (ISI). This project now includes facilitating the placement of tertiary Allied health students within agencies in the alcohol and other drug sector to bring further focus to the general health and wellbeing needs of consumers and to increase the capacity of services to better meet these needs.

**Childcare Access Program:** The Childcare Access Program covers the cost of occasional childcare for parents of under school aged children who access member agencies' services.

**Interpreter Access Program:** The Interpreter Access Program covers the cost of interpreters and carers for clients who access member agencies' services.

**Employee Assistance Program:** WANADA offers members an umbrella Employee Assistance Program (EAP) which provides an independent, confidential, and professional counselling service to all employees of participating agencies and their immediate families.

**Umbrella Insurance (Community Sector Services):** WANADA's member agencies are able to access reduced insurance premiums (with savings of up to 30% - 40%) as a result of WANADA's membership of Community Sector Services.

**Quality Framework Implementation Project:** WANADA supports alcohol and other drug agencies with continuous quality improvement through the use of the WA Alcohol and Other Drug Sector Quality Framework. With the registration of the Culturally Secure Accreditation

Framework the project will continue, starting with support to sector services transitioning from the Quality Framework to the Accreditation Framework

**Quality Improvement Project:** The Quality Improvement Project promotes and raises awareness with specific Aboriginal-controlled AOD services of the need for accreditation and the value of quality improvement, and provides practical support with accreditation achievement for four Aboriginal specific AOD services in WA

**Accreditation Framework:** WANADA has reviewed the Quality Framework, developing a national culturally secure accreditation framework. Consultation to inform the Accreditation Framework has involved the WA AOD sector and Aboriginal AOD sector nationally. The Framework includes a revised set of standards and a user friendly interpretive guide to assist participation from a range of AOD service types.

**Quality Framework Peer Review:** WANADA manages a contract with the Institute for Healthy Communities Australia (IHCA), who successfully tendered to develop and deliver a peer review system to support reviews against the Quality Framework performance expectations. WANADA supports agencies to prepare for peer reviews and has supported the majority of agencies to complete reviews to date. WANADA hopes this support will continue with reviews against the Accreditation Framework standards.

**AOD Knowledgebase:** WANADA hosts AOD Knowledgebase on our website and offers administrative support to agencies who access it. The AOD Knowledgebase holds a range of documents shared by the sector and relevant literature to support continuous quality improvement processes.

**Conference and Travel Bursaries:** In 2010 /11 WANADA supported workers from member agencies to attend professional development opportunities such as conferences, networking events and training through conference bursaries.

**Drug Aware Prevention Partnership:** WANADA works in partnership with the Drug and Alcohol Office (DAO) to undertake illicit drug prevention campaigns under the Drug Aware brand name. WANADA's role is to manage the funds and to provide feedback on campaigns. For more information, visit: [www.drugaware.com.au](http://www.drugaware.com.au)

**Drug Action Week:** Drug Action Week is coordinated nationally by the Alcohol and Other Drugs Council of Australia (ADCA). WANADA works to encourage participation in Drug Action Week here in Western Australia and hosts relevant events itself. This year WANADA held a forum with youth talking about the culture of drinking.

<b>ACTIVITY / PROJECT 2010/11</b>	<b>FUNDING SOURCE</b>
Core Business	DAO
	WANADA Members
Childcare Access	DAO
Interpreter Access	DAO
Leadership and Management Program	DAO
Drug Action Week	DAO
	OATSIH
Conferences and Training	DAO
Quality Framework Implementation Support	OATSIH
Accreditation Framework	DAO & OATSIH
Quality Improvement	OATSIH – AHCWA
Quality Framework Peer Review	OATSIH
	DAO
Aboriginal Network	OATSIH
Diversion Policy and Support	DAO
Diversion Regional Networking	DAO/COAG
Diversion Quality Framework Implementation Support	DAO
Indigenous Youth Against Grog	DoHA - CPI
Cross Sectorial Support and Strategic Partnerships Initiatives (as part of the Improved Services Initiative)	DoHA - ISI
Aboriginal Forum	DAO
Consumer Health Initiative (previously funded as GP Access)	SJOG
Employee Assistance Program	Participating WANADA Members
Drug Aware Prevention	DAO
General health Student Placements	AERF
Leadership & Management	DAO

As well as the members and funding bodies already listed WANADA would also like to acknowledge the many key stakeholders for their support and contribution during 2010/11.

## **Appendix F**

### **WANADA Audited Financial Report 2010/11**

#### **Contents:**

- ◆ Independent Audit Report page 1
- ◆ Statement by the Members of the Board of Management page 3
- ◆ Statement of Income and Expenditure page 4
- ◆ Balance Sheet page 6
- ◆ Notes to the Financial Statement page 7

Independent Audit Report  
To the Members of WA Network of Alcohol & Other Drug Agencies Inc

We have audited the accompanying financial report, being a special purpose financial report, of WA Network of Alcohol & Other Drug Agencies Inc ('the Association'), which comprises the balance sheet as at 30 June 2011, and the statement of income and expenditure, statement of changes in equity and statement of cash flows for the year ended on that date, a summary of significant accounting policies and other explanatory notes.

Board's responsibility for the financial report

The Board of the Association is responsible for the preparation of the financial report and have determined that the basis of preparation described in Note 1 to the financial statements, is appropriate to meet the requirements of the Associations Incorporation Act (WA) 1987 and is appropriate to meet the needs of the members.

The Board's responsibility also includes such internal control as the Board determine is necessary to enable the preparation of a financial report that is free from material misstatement, whether due to fraud or error.

Auditors Responsibility

Our responsibility is to express an opinion on the financial report based on our audit. We conducted our audit in accordance with Australian Auditing Standards. Those Standards require that we comply with relevant ethical requirements relating and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial report in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control.

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

*Independence*

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

*Auditor's Opinion*

In our opinion the financial report presents fairly, in all material respects, the financial position of WA Network of Alcohol & Other Drug Agencies Inc as of 30 June 2011 and of its financial performance for the year then ended in accordance with the accounting policies described in Note 1 to the financial statements.

*Basis of Accounting*

Without modifying our opinion, we draw attention to Note 1 to the financial report which describes the basis of accounting. The financial report has been prepared to assist the Association to meet the requirements of Associations Incorporation Act (WA) 1987 and to meet the needs of the members. As a result, the financial report may not be suitable for another purpose.

MGI IPAS

**MGI Perth Audit Services Pty Ltd**

Amar Nathwani

**Amar Nathwani CA, B.Eng  
Director**

**Perth**  
6 September 2011

# WA Network of Alcohol & Other Drug Agencies Inc

ABN: 22 106 585 976

## Statement by the Members of the Board of Management For the year ending 30 June 2011

The Members of the Board of Management have determined that the Association is not a reporting entity.

The Members of the Board of Management have determined that this Special Purpose Financial Report should be prepared in accordance with the accounting policies outlined in Note 1 to the Financial Statements.

In the opinion of the Members of the Board of Management, the Financial Statements:

1. Present fairly the position of WA Network of Alcohol & Other Drug Agencies Inc as at 30 June 2011 and its performance for the year ended on that date;
2. At the date of this statement, there are reasonable grounds to believe that WA Network of Alcohol & Other Drug Agencies Inc will be able to pay its debts as and when they fall due.

This statement is made and signed for and on behalf of the Members of the Board of Management.

President:

Shirley McAule

Treasurer:

G. Davis

Date:

6/9/2011

# WA Network of Alcohol & Other Drug Agencies Inc

ABN: 22 106 585 976

## Statement of Income & Expenditure

For year ended 30 June 2011

	Notes	2011	2010
<b>Income</b>		<b>\$</b>	<b>\$</b>
Grant Funding-Current Year	8	3,947,392	2,910,577
Interest		69,496	45,735
Members' Subscriptions		25,505	13,031
Volunteer Payments		0	560
Miscellaneous Income		8,989	13,281
Conference Fees		0	2,300
Capital Grant Income		55,185	53,989
<b>Total Ordinary Income</b>		<b>4,106,568</b>	<b>3,039,473</b>
<b>Expenditure</b>			
Advertising/Promotion		909,197	480,156
Audit Fees		24,450	8,000
Awards & Prizes		0	1,017
Bank Charges		829	684
Childcare		3,928	8,334
Computer		9,487	13,259
Hardware		8,085	1,059
Software		5,912	3,242
Internet		1,843	1,676
Consultancy		161,766	198,634
Freight		125	1,832
Depreciation		36,714	13,749
Focus Groups		0	1,050
Employee Assistance Program		18,698	0
Insurance		7,420	7,490
Workers Compensation Insurance		4,765	5,161
Interpreter Access Project		2,596	3,131
Loss on sale of Assets		0	8,392
Lotterywest Computer & IT		20,040	0
Lotterywest Relocation and Refurbish Grant		3,327	2,641
Building Alterations		0	138
Legal Fees		0	1,976
Library Material		305	533
Miscellaneous		309	736
Motor Vehicle		12,661	10,707
Newspapers		255	346
Parking		842	209
Photocopying		0	5

# WA Network of Alcohol & Other Drug Agencies Inc

ABN: 22 106 585 976

## Statement of Income & Expenditure (continued)

For year ended 30 June 2011

	Notes	\$ 2011	\$ 2010
Postage, Printing & Stationery		24,012	11,242
Dues & Subscriptions		1,926	391
Rental, Lease and Hire		60,851	35,850
Salaries, Benefits, Associated Expenses		879,511	671,590
Superannuation		77,488	63,287
Provision for Annual Leave		6,593	57,425
Provision for Long Service Leave		15,816	3,803
Telephone, Fax and Mobile Phones		7,217	10,265
Training and Supervision		15,072	18,380
Travel		94,439	96,207
Venue Hire/Equipment		11,596	21,032
Catering		19,207	17,671
<b>Total Ordinary Expenditure</b>		<b>2,447,280</b>	<b>1,781,301</b>
<b>Other Expense</b>			
Transfer to Income in Advance		-	-
Grant Balance Carried Forward	9	1,689,245	1,130,878
<b>Total Other Expenses</b>		<b>1,689,245</b>	<b>1,130,878</b>
<b>Net Income</b>		<b>-29,957</b>	<b>127,294</b>

The accompanying notes form part of these financial statements.

# WA Network of Alcohol & Other Drug Agencies Inc

ABN: 22 106 585 976

## Balance Sheet For year ended 30 June 2011

	Notes	2011 \$	2010 \$
<b>Current Assets</b>			
Cash	5	2,028,014	1,416,456
Deposits Paid		200	200
Prepayments		25,157	12,888
Account Receivable		166,259	203,589
LotteryWest Accrued Grant		17,421	53,989
Accrued Income		0	25,700
<b>Total Current Assets</b>		<b>2,237,051</b>	<b>1,712,823</b>
<b>Non Current Assets</b>			
Fixed Assets	6	56,257	61,112
<b>Total Non Current Assets</b>		<b>56,257</b>	<b>61,112</b>
<b>Total Assets</b>		<b>2,293,308</b>	<b>1,773,934</b>
<b>Current Liabilities</b>			
Master Card Bendigo Bank		5,179	1,718
Accrued Expenses	11	56,927	48,603
Amounts Due To ATO	12	57,789	108,391
Unexpended Grant Funds	9	1,689,245	1,130,878
Provision	13	101,028	65,428
Income in Advance	10	7,213	13,031
<b>Total Current Liabilities</b>		<b>1,917,379</b>	<b>1,368,049</b>
<b>Total Liabilities</b>		<b>1,917,379</b>	<b>1,368,049</b>
<b>Net Assets</b>		<b>375,929</b>	<b>405,886</b>
<b>Represented by:</b>			
<b>Members Funds</b>			
Retained Earnings		405,886	278,592
Net Surplus for the year		-29,957	127,294
<b>Total Equity</b>		<b>375,929</b>	<b>405,886</b>

The accompanying notes form part of these financial statements.