



Western Australian Network of  
Alcohol & other Drug Agencies

# ANNUAL REPORT

2020 - 2021

## QUALITY

WANADA members include a diverse range of quality services that are culturally safe and responsive.

## INTEGRITY

WANADA's focus is on enhancing consumer and community outcomes. Our advocacy gives voice to sector expertise and is evidence informed.

## SUSTAINABILITY

WANADA promotes sector service expansion to ensure there are enough services to sustainably meet community demand.



WANADA is a not-for-profit organisation incorporated under the *Associations Incorporation Act 2015 (WA)*.

ABN 22 106 585 976

Annual Report

Published in November 2021

#### Contact us

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## Acknowledgement

We acknowledge the traditional custodians of the land on which we live and work, and recognise their strength in connection to the land, sea, and community. We pay our respect to their elders past and present.

We acknowledge the widespread and intergenerational effects of colonisation. The policy and actions of dispossession established long-lasting barriers between peoples, land and their culture. Furthermore, we acknowledge that this trauma has a systemic presence in Western Australian society, policy and the alcohol and other drug system. We acknowledge the need to address this issue by re-evaluating the systems in place which affect the cultural, social and economic matters of Aboriginal people.

WANADA is committed to advancing conciliation/reconciliation and fostering the valuable contributions that Aboriginal people make in the alcohol and other drug service sector, to deliver meaningful, lasting outcomes for Aboriginal people, families, and communities.

## About WANADA

The Western Australian Network of Alcohol and other Drug Agencies (WANADA) is the peak body for the alcohol and other drug education, prevention, treatment, and support sector in Western Australia.

Established in 1984, WANADA is a proudly independent not-for-profit organisation, driven by the passion and hard work of its member services.

WANADA's **aim** is to enhance health and well-being of all Western Australians by

- reducing the harms associated with alcohol and other drug use; and
- enabling a strong and viable alcohol and other drug service system.

Our **purpose** is to lead a shared voice within the specialist alcohol and other drug sector that drives positive change needed to achieve best community outcomes.

Our work is guided by our Strategic Priorities, to:

Provide an informed voice to influence effective alcohol and other drug service planning.

Advance effective approaches to minimise the impact of stigma and discrimination.

Drive sector implementation of, and policy support for, the principles of self-determination.

Lead a coordinated approach to sector-wide development that enhances best practice and equitable access.

***WANADA has met the requirements for certification against the ISO 9001:2015 (Quality Management Systems) Standard***

## WANADA Board of Directors



**Prof. Steve Allsop**  
**Chairperson**  
Professor, National Drug  
Research Institute



**Daniel Morrison**  
**Vice Chairperson**  
CEO, Wungening Aboriginal  
Corporation



**Carol Daws**  
**Treasurer**  
CEO, Cyrenian House



**Ken Smith, Captain**  
**Secretary**  
State Manager, The Salvation  
Army WA



**Andrea Rennals**  
Area Manager, Youth Services,  
Mission Australia

**Andrew Amor**  
Milliya Rumurra Aboriginal  
Corporation



**Angela Corry**  
CEO, Peer Based Harm Reduction  
WA



**Angie Paskevicius**  
CEO, Holyoake



**Emma Jarvis**  
CEO, Palmerston Association Inc



**Jo Sadler**  
WA State Director, Mission Australia  
**(resigned March 2021)**

## Chairperson's Statement

The Western Australian alcohol and other drug sector is operating within an increasingly complex and uncertain environment. Over the past twelve months, the sector has skilfully navigated a range of issues exacerbated by the COVID-19 pandemic, including challenges to service continuity, increasingly complex community needs, and workforce pressures. These circumstances, while presenting many immediate concerns, have brought into sharp focus the long-term needs of the sector. They have also illustrated to me the incredible dedication, commitment to quality and innovation of the sector, ensuring we deliver high quality services to all those who seek to access them. A big well done to all our members.

Government reform has continued to gather pace, with a combination of initiatives that are alcohol and other drug sector specific and cross-sector initiatives that include co-occurring considerations. The increased recognition of alcohol and other drug harms across multiple sectors has been a positive development. These initiatives do, however, highlight the importance of systems reform to support specialist service pathways and cross-sector co-occurring capability building. For example, we cannot simply improve treatment services in the absence of housing policy that supports access to safe and secure housing; we cannot address drug related harm outside of equitable access to health services.

This year has required WANADA to balance competing strategic pressures, respond to immediate concerns, and establish sound sector-driven approaches to address long-term issues. Reflecting on the year, I am particularly happy to see WANADA's increasing engagement in prevention. While there remains much to do in this important area, WANADA's efforts clearly acknowledge the need for evidence-based community-wide and more targeted, rather than just populist or politically palatable, responses.

The WANADA Board, recognising that the alcohol and other drug sector system arrangements and systemic advocacy are at a critical point, gathered for a planning day in mid-2021. Through this process the WANADA Board established a set of priorities for WANADA to progress over the next two years:

- **Voice and relationships:** the development of a broad sector voice and profile to present a powerful and collective position, with an enhanced Aboriginal voice guided by WANADA's Aboriginal Sector Leadership Reference Group, and a continued focus on relationships and partnerships.
- **Stigma and discrimination:** the development of a revised alcohol and other drug stigma and discrimination strategy to support systemic change.
- **Workforce planning and development:** an increased focus on improving workforce planning, pathways and education institution partnerships, alongside capability building to better address co-occurring needs.
- **Prevention:** a targeted and nuanced approach to prevention, community development and harm reduction, inclusive of a life-course approach.

I am confident that these key priorities will contribute to the sustainability of the alcohol and other drug sector, support an improved environment for service delivery, encourage a more inclusive society and contribute to the wellbeing of all West Australians.

Over the past year, WANADA has placed significant emphasis on enhancing strategic relationships with key decision makers, to grow a shared appreciation of both the sector and of potential system reforms. Following the State Election in March 2021 we welcomed the opportunity to re-establish our relationship with the Hon. Stephen Dawson MLC. Similarly, we have appreciated our continued relationship and partnerships with Mental Health Commissioner Jennifer McGrath.

I take this opportunity to thank the Hon. Alanna Clohesy MLC and the Hon. Roger Cook MLA for their support for the sector over the past four years. They have been active listeners and partners in building a more vibrant and effective system of prevention, harm reduction and treatment.

I also thank Jill Rundle and the WANADA team for their efforts in implementing several significant and essential sector development projects, while also remaining responsive to a broad range of policy reform opportunities. The sector is well-supported by incredibly dedicated and responsive staff at WANADA. I have witnessed this first-hand in terms of work on behalf of the sector and in the support offered to me as Chair.

And thank you to all Board members for their strategic direction and continued dedication to both the organisation and the sector. Their efforts have enabled WANADA to maintain a positive strategic direction in what is a dynamic environment. All work incredibly hard for their agencies and for the sector as a whole. Throughout my term as Chair I have been privileged to work with a team who are solution focused, collegiate and whose first thought is for those we serve.

Professor Steve Allsop  
WANADA Chairperson

## **CEO's Statement**

A particular focus for WANADA in 2020-2021 has been the coordination of sector input into national and state policy, planning and implementation activities. The significant range of policy and planning developments in Western Australia, and across the nation, has highlighted the absence of a national governance framework for alcohol and other drugs. The loss of the Ministerial Drug and Alcohol Forum has been keenly felt, however, it has also presented the opportunity to explore and promote an alternative governance framework that is inclusive of alcohol and other drug sector subject matter expertise, that can drive suitable, feasible and acceptable reform.

The need for a reinvigorated and inclusive national governance structure will be an issue that WANADA, alongside other state and territory alcohol and other drug peak bodies, will continue to advocate for in the coming year.

In considering the important role that the alcohol and other drug sector plays within the broader human services system, this has been a year focused on strengthening foundations. Examples of project activities with this focus include:

- exploring ways to enhance sector Aboriginal leadership. WANADA is coordinating a project aimed at identifying key elements needed to embed the elements of self-determination into systems policy, planning, procurement as well as within organisations and the workforce. The project will guide culturally responsive capability building initiatives over the coming years.
- supporting the development of a data and outcomes system to replace the Service Information Management System (SIMS). The new system places control of service data and outcomes directly in the hands of the eleven participating alcohol and other drug

organisations across the state. This initiative will have far-reaching potential into the future, including sector input into sector policy and planning.

- developing resources to support cross-sector capability building. WANADA continues to support sector quality certification readiness. Complementary resources have been developed to enhance responsiveness to co-occurring concerns. One resource supports alcohol and other drug and mental health capability building within both sectors. A further resource focused on building the capability of alcohol and other drug services to support streamlined access to hepatitis C assessment and treatment. A third resource, recently commenced, will support capability building in the alcohol and other drug services and family and domestic violence sector to strengthen responsiveness to these significant interesting concerns.

WANADA has seen some great results from focused capability building, which you will see in this report.

As a sector, we have continued to respond to the urgencies related to the pandemic, while also beginning to see some of the longer-term impacts on our communities and our services. Amongst other things the pandemic has highlighted the essential need to focus on building this specialist service sectors' workforce to meet current and future demand.

It was a great privilege to coordinate the Western Australian AOD Conference 2021: Shifting Perspective. While delayed 12 months due to concerns around restrictions, the in-person conference was welcomed by many sector representatives as a significant networking event. The conference attracted about 350 delegates from across the sector, including interested consumer and community members. For me personally, it was great to hear some of the many sector achievements.

The extent to which WANADA has been called upon to represent the sector on the state and federal government initiatives and reforms seems to ever increase. WANADA could not do the work we do without the support of our members. I thank member organisations for their ongoing willingness to engage with WANADA, to support sector enhancement and improved community outcomes.

I acknowledge the WANADA team for their professionalism and dedication to supporting the sector through a range of activities. I am also very appreciative of the guidance and expertise provided by the WANADA Board, in particular Steve Allsop as WANADA's Chairperson. Their input ensures WANADA priorities are well aligned to the values and priorities of the sector.

Jill Rundle  
Chief Executive Officer  
WANADA

## Treasurer's Statement

I am pleased to present WANADA's finances for the year ending 30 June 2021. Copies of the full Auditor's Report will be made available to attendees of the 2021 WANADA AGM, funding bodies as required, and on request.

WANADA's continued strong financial position reflects sound financial management and an ongoing commitment to sustainability.

I would like to take this opportunity to acknowledge the various funding bodies supporting WANADA's activities in 2020-2021. During this financial year, WANADA received funding from a range of sources including the Western Australian Mental Health Commission, Australian Government Department of Health, WA Primary Health Alliance, Lotterywest, and Macfarlane Burnet Institute for Medical Research and Public Health Ltd.

WANADA's income for the year was \$2,272,801 and total expenditure was \$1,984,023 - resulting in an operating surplus of \$287,778. WANADA's equity as at 30 June 2021 was \$1,354,062.

In summary:

- Service agreement funding from Mental Health Commission and Department of Health made up approx. 43% of WANADA's total income.
- One-off grant funding from MHC, WAPHA, Burnet Institute, and Lotterywest for the 2021 Alcohol and other Drug Conference, contributed approx. 51% of WANADA's income.
- Membership fees and contributions for direct support services and other independent funding made up 7% of WANADA's income.

WANADA has again achieved an unqualified audit opinion for the 2020-2021 financial year. I am confident that the organisation's financial planning and financial controls are sound, demonstrating responsible financial management and processes.

The Board has been provided with clear and concise financial information by WANADA's Finance Manager, Mary-Louise Davies. Mary-Louise's integrity and professionalism are valued and acknowledged by the WANADA Board.

Armada Audit and Assurance Pty Ltd carried out WANADA's financial audit for 2020-2021. On behalf of the Board, I propose a resolution at the 2021 Annual General Meeting for their continued appointment as WANADA's financial auditors.

Carol Daws  
WANADA Treasurer

## Diverse Membership

WANADA represents the specialist alcohol and other drug service sector to the community and key decision makers, to effect positive change to the health and wellbeing of all Western Australians. WANADA is driven by the expertise and commitment of its members

Our diverse membership includes: community based non-residential; therapeutic communities; residential rehabilitation; intoxication management; withdrawal management; harm reduction; outreach; patrols; prevention; and community development services.

WANADA's annual survey measures our members' satisfaction and the effectiveness of our services. Feedback and recommendations inform WANADA's continual service improvements and help identify sector needs and priorities.

The 2020-2021 Annual Member Survey indicated overall satisfaction of 4.5 on a 5-point rating scale, with 100% of respondents reporting they were very satisfied or satisfied with WANADA's work over the past 12 months.

Other key findings from the 2020-2021 Survey include:

**100%** of respondents believe that WANADA was very effective or effective at promoting the sector, and supporting sector development.

**88%** of respondents believe that WANADA effectively or very effectively advocated for and represented the alcohol and other drug service sector.

**88%** of respondents believe that the not-for-profit alcohol and other drug sector is better off as a result of WANADA's activities and initiatives during the last 12 months.

**100%** of respondents believe that WANADA was very effective or effective at raising awareness of alcohol and other drug related stigma and discrimination.

## WANADA Membership

**95** MEMBER SERVICES ACROSS WESTERN AUSTRALIA

**37%** OF SERVICES LOCATED IN REGIONAL, RURAL AND REMOTE AREAS

**20%** PROVIDE ABORIGINAL SPECIFIC SERVICES

**90%** ARE NOT-FOR-PROFIT

## Shifting Perspective – 2021 Western Australian Alcohol and Other Drug Conference

The *Western Australian Alcohol and other Drug Conference – Shifting Perspective, Alcohol and other drugs: everybody's story* brought alcohol and other drug workers and consumers together with researchers, policy makers and other stakeholders at the Perth Convention and Exhibition Centre over 7 and 8 October 2021.

WANADA hosted the conference with sector partners and our presenting partner the Mental Health Commission. Thanks to Lotterywest consumer and family delegates were able to attend the conference, and regional, rural and remote workers were supported with equitable access.

- ❖ 334 registered attendees
- ❖ 32 bursaries offered to subsidise travel and accommodation for regional, rural, and remote non-government alcohol and other drug sector workers.
- ❖ 65 registration bursaries offered to consumers, family members, significant others, and engaged community members (including students who aspire to careers in the alcohol and other drug sector). Nine of these consumer bursaries were offered to people living outside of metropolitan Perth and included fully subsidised travel and accommodation.

A partnership with the National Drug Research Institute also allowed attendees to access the 2021 NDRI Symposium, held on 6 October 2021 with reduced rates.

Keynote speakers Mark Chenery from Common Cause and former WA Premier Emeritus Professor Geoff Gallop encouraged participants to consider how we can reduce the stigma and discrimination experienced by people impacted by alcohol and other drug use and build community support for reform. The Conference also explored health and law reform, justice reinvestment, cultural diversity, and co-occurring issues. Participants appreciated the chance to hear directly from their peers and the opportunity to network despite the continuing COVID-19 pandemic.

WANADA sincerely thanks all participants and our presenting partner: the Mental Health Commission; sector partners: Cyrenian House, Holyoake, Hope Community Services, Mission Australia, The Salvation Army, Tenacious House, WA Primary Health Alliance; lanyard sponsor: Palmerston Association; and the seven award sponsors Aboriginal Health Council of WA, Cyrenian House, Hope Community Services, Mission Australia, Tango IT, WA Primary Health Alliance, and Women's Health and Family Services. Thanks also to professional conference organiser Loaded Communications for ensuring the smooth delivery of this major event for the alcohol and other drug sector.

## 2021 WA Alcohol and Other Drug Excellence Awards

WANADA congratulates winners of the 2021 Western Australian Alcohol and other Drug Excellence Awards: recognising outstanding Alcohol and other Drug Practice, which were announced at a breakfast event held during the conference. WANADA CEO Jill Rundle and WA Chief Medical Officer for Mental Health Dr Sophie Davidson presented winners in ten categories with their awards.

AWARD CATEGORY	WINNER
Excellence in Capacity Building Sponsored by Hope Community Services	<i>Next Step – Drug and Alcohol Clinical Advisory Service (DACAS)</i>
Excellence in Consumer Engagement	<i>Peer Based Harm Reduction – Consumer engagement to increase access to HCV testing and treatment</i>
Excellence in Improving AOD Outcomes for Aboriginal Peoples Sponsored by Cyrenian House	<i>Bloodwood Tree Association</i>
Excellence in Partnerships Sponsored by Mission Australia	<i>Cyrenian House (with Richmond Wellbeing) – Residential Low Medical Withdrawal Units</i>
Excellence in Preventing and Reducing AOD Harms in Young People Sponsored by Women's Health and Family Services	<i>Mission Australia – Drug and Alcohol Youth Service (DAYS)</i>
Excellence in Prevention and Community Development Sponsored by the Aboriginal Health Council of Western Australia	<i>Kimberley Community Alcohol and Drug Service (KCADS)</i>
Excellence in Reducing the Risk of AOD -Related Harms	<i>Peer Based Harm Reduction – More than Just Fits</i>
Excellence in Treatment	<i>Cyrenian House (in partnership with the Department of Justice) – Wandoo Rehabilitation Prison Therapeutic community</i>
Excellence in Working with Families and Significant Others Sponsored by Tango IT	<i>Drug and Alcohol Youth Service (DAYS) – Behaviour Exchange Systems Therapy (BEST)</i>
Translating Research into Practice for Improved AOD Outcomes	<i>Women's Health and Family Services – Nurturing Families</i>

# Self-Determination

*Drive sector implementation of, and policy support for, the principles of self-determination.*

## Aboriginal Alcohol and other Drug Sector Leadership

WANADA was pleased to receive funding from the Mental Health Commission to address sector identified needs related to supporting Aboriginal leadership voice in the alcohol and other drug policy, planning and procurement, as well as to enhance the Aboriginal workforce capacity.

An Aboriginal Alcohol and other Drug Sector Leadership Reference Group was established, with members including:

- Aunty Oriel Green and Aunty Moya Newman – WANADA’s assigned Elders through the Looking Forward Moving Forward program.
- Stanley Nangala, CEO – Ngnowar-Aerwah Aboriginal Corporation (Chair appointed by peers)
- Cliff Collard, Program Manager – Mental Health Commission’s Strong Spirit Strong Mind Aboriginal Programs
- Professor Colleen Hayward – Chair of Mental Health Commission’s Alcohol and Other Drug Advisory Board
- Andrew Amor, CEO – Milliya Rumurra Aboriginal Corporation
- Daniel Morrison, CEO – Wungening Aboriginal Corporation

This project has incorporated a considered culturally respectful process.

A face-to-face planning day enabled enhanced discussion to identify and refine what is needed to support Aboriginal leadership voice and the system-wide implementation of elements of self-determination.

Planned consultations for the next report period with service CEOs, Aboriginal sector workers and community members, guided by the reference group, will further refine the determination of priority activities to achieve the intent of the project.

Aboriginal organisations and their workers have an essential role in supporting community cohesion, connectivity, inclusion and healing. Services work to build community trust by supporting local activities and guiding mainstream service providers in culturally safe engagement.

*There are AOD services out there working on the ground in the community and working together with people. We need agencies that really want to work with our people – to help everyone. (Elder)*

## Looking Forward Moving Forward

WANADA’s engagement with the Looking Forward Moving Forward project (Telethon Kids Institute) began in 2013. We are very fortunate to have Elders, Aunty Oriel Green and Aunty Moya Newman, assigned to guide WANADA’s work as a part of this engagement. WANADA’s work with the Aboriginal Elders and the Looking Forward Moving Forward team continues to inform our approach to cultural security. The Elders also provide guidance and support to the Coordinator for Aboriginal Alcohol and other Drug Sector Leadership through regular cultural supervision meetings.

# Stigma and Discrimination

*Advance effective approaches to minimise the impact of stigma and discrimination.*

## Peer Workforce and Leadership

Nationally, approximately 65% of people working in the alcohol and other drug sector have relevant personal alcohol and other drug experience (lived experience). The sector historically has supported people with personal experience to access appropriate training and qualifications with pathways into support, clinical and leadership roles. The WA alcohol and other drug sector employs a growing number of people as peer workers who support, amongst other things, systems navigation.

WANADA is aware that consumer engagement at the sector service/organisation level is high, with many services offering structured consumer engagement working groups to contribute to service planning and development. Despite this significant engagement, however, systemic participation to inform government policy and planning has been identified as minimal in WA.

In collaboration with the Alcohol and other Drug Consumer and Community Coalition, WANADA has initiated a scoping project to identify: current peer worker and consumer engagement practices; peer development and support needs; barriers and enablers for consumer and peer participation in systemic policy strategy and planning. The desired outcome of this collaborative project is to clearly identify processes needed to enable safe peer and consumer systemic leadership.

## Childcare Access

WANADA continues to support parents and carers of young children to access alcohol and other drug treatment services with this longstanding and valuable program. The Childcare Access Program supports access to WANADA member services by covering the cost of casual childcare bookings while parents and carers attend alcohol and other drug specific appointments and programs. Treatment outcomes are maximised because parents and caregivers can focus on treatment, with benefits for the whole family.

WANADA is pleased to report a renewed interest and uptake of the Childcare Access Program with an increase in support provided to parents and caregivers accessing member alcohol and other drug services this financial year.

WANADA has covered the cost of 32 casual childcare bookings, totalling 265 hours of care. This is an increase from the previous year, which was impacted by the pandemic. The Childcare Access Program was suspended for several months when the Australian Government offered fee-free childcare through the “Early Childhood Education and Care Relief Package” as part of its pandemic response.

## Interpreter Access

WANADA is pleased to be able to support our member services with access to interpreting for clients from culturally and linguistically diverse backgrounds, as we have done since 2002. WANADA’s Interpreter Access Program continues to provide access to first language interpreting, helping to overcome language and cultural barriers to alcohol and other drug treatment and support. The cost of telephone and face to face interpreting services, delivered by recognised interpreter services, is covered by WANADA.

The Western Australian Government introduced the WA Language Services Policy and Guidelines in the second half of 2020. This policy is aimed at supporting public sector agencies to provide equal access to, and support the rights of, individuals from various culturally and linguistically diverse backgrounds when accessing services and supports within WA.

People who have benefitted from an interpreting service while accessing alcohol and other drug treatment have included Aboriginal and Torres Strait Islander people, people for whom English is an additional language, and people who are Deaf and Hard of Hearing.

This year, WANADA funded 119 interpreting services totalling 88 hours. These services covered 13 different languages, significantly including: S'gaw Karen, Myanmar, Dari, Hakah Chin, Somali, Thai, Punjabi, Arabic, Farsi, Mongolian, Mandarin, Cantonese and Vietnamese.

## Sector Development

*Lead a coordinated approach to sector-wide development that enhances best practice and equitable access.*

### Co-occurring Capability Review Tool

WANADA has long called for the implementation of an evidenced approach to building the co-occurring capabilities of alcohol and other drug as well as the mental health services, enhancing the outcomes of people accessing services from either sector.

WANADA in partnership with the mental health peak body (WAAMH) developed a single Co-occurring Capability Review Tool (CCRT) to assist services from both sectors to identify opportunities for improved capability to better meet the needs of people with co-occurring conditions. The tool was informed by validated American tools: the Dual Diagnosis Capability on Addiction Treatment (DDCAT) and the Dual Diagnosis Capability in Mental Health Treatment (DDCMHT) index toolkits.

The tool was developed through a trial implementation at a diverse range of alcohol and other drug and mental health services across the health regions of WA. Further consultation with sector leaders, research bodies, workers, service users and advisory bodies provided valuable input into the refinement of the tool.

The tool has since been piloted at selected alcohol and other drug services. Feedback from services that participated in the CCRT trial and pilot indicated that the tool both supports opportunities for improved capability building and is easy to apply.

WANADA is advocating for the tool to be applied across all government and non-government alcohol and other drug and mental health services in order to establish a benchmark of capability across the sectors – and to enable collective capability building initiatives to be identified.

### Eliminating Hepatitis C Sector Capability Review

With funding from the Burnet Institute WANADA has developed and implemented a hepatitis C capability building tool (the HCVCAT). The tool supports alcohol and other drug services to consider ways with which they can support increased access by service users to hepatitis C information, screening and testing, and treatment where relevant.

Five not-for-profit alcohol and other drug organisations across eight sites and 12 distinct and diverse services/programs based in metropolitan Perth participated in HCVCAT pre and post reviews. Peer Based Harm Reduction WA were engaged to deliver training by a peer to the participating services' workforce (including peer workers).

All participating services/programs identified opportunities for improvement, working towards becoming hepatitis C responsive across a range of dimensions within the services (from culture and context through to workforce).

Feedback from all participating services was glowing of the process, the training provided and the relevance of this project to support improved outcomes for their service users.

WANADA hopes to secure future funding to support the roll-out of this process across the sector, and hopefully some key sector partners that are also seeing people who have ever injected drugs e.g. homeless and domestic and family violence services.

## Pharos – Data and Outcomes Sector Needs Scoping and System Implementation

2020-2021 saw the continued development of the Pharos data system, which was prompted by the planned decommissioning of the Mental Health Commission's Service Information Management System (SIMS). With the Mental Health Commission's funding support, sector scoping was undertaken – completed in this report period. Implementation of the sector data template progressed at 11 sector organisations, with further funding from the Mental Health Commission and Lotterywest.

The scoping project steering committee and working group have continued to guide the development of this project. WANADA, in partnership with an IT consultancy and participating organisations, coordinated a planned approach to implementing the Pharos system across the 11 organisations, with customisation of the core system to meet the needs of each organisation's service delivery models. Pharos is a cloud-based, client management system and is built on a well-established commercial off the shelf platform. Rollout commenced on a staggered basis for each organisation, including workshops, user acceptance testing, training, data migration, before going live.

WANADA and the IT consultant supported organisations with tailored training sessions delivered to services via a combination of online, metropolitan sessions and regional visits.

The project is nearing completion, with all organisations fully transitioned to the Pharos data system. WANADA would like to express our gratitude for the time and contributions that made the project success possible. Thank you to the working group at each organisation and to everyone involved.

The next stage in this project will be to establish the WANADAdata repository. The repository will consist of deidentified aggregated data from participating member organisations.

As a sector, it is envisaged this data analysis will support data-informed sector policy and planning.

## Employee Assistance Program

WANADA has offered an umbrella Employee Assistance Program for over 20 years. This program supports the wellbeing of employees and volunteers in the alcohol and other drug sector and their immediate family members.

This financial year, the program covered 28 WANADA member organisations, with a total of 1,814 staff and volunteers across 46 sites. 718 counselling sessions were provided this year through the service, which was a further increase from last year. There was a marked increase of face-to-face sessions, in line with the easing of WA COVID-19 restrictions.

## Sector Quality Support

WANADA continued to provide member assistance in relation to quality matters, supporting services to build their confidence and preparedness for certification against WANADA's Alcohol and other Drug and Human Services Standard (AODHSS).

## Student Placement Program

WANADA's student placement program provides allied and generalist health students with experience in the alcohol and other drug services sector. The aims of the program are to address stigma and discrimination associated with alcohol and other drug use among future

health professionals, and to support students to practically apply their learning at alcohol and other drug services – contributing to improved consumer outcomes.

The student placement model relies on a collaboration between tertiary institutions and WANADA's member services. Tertiary institutions involved over the year include: University of Western Australia; Edith Cowan University; and Curtin University.

Twenty students from three universities across seven disciplines were placed in five alcohol and other drug service sites (including two regional sites) in 2020-2021. Two of the student placements were completed remotely using digital technologies.

Eight pharmacy students undertook experiential learning placements designed to address stigma and discrimination associated with alcohol and other drug use. Students from Public Health, Biomedical Science, Commerce and Management, Sports Science, Health Science, Global and Population Health, and Nutrition and Dietetics, gained experience applying their speciality knowledge in an alcohol and other drug context. Projects were diverse, ranging from developing a service model for vulnerable women, to delivering nutrition education sessions and accompanying resources at a regional Aboriginal alcohol and other drug service. Thirteen of the 20 placements were master students.

*The placement was a transformational experience for me...I'm glad I did the placement or I would have gone on to be a paramedic and judgemental of the people with injecting drug use. Paramedicine student*

# Informed Service Planning

*Provide an informed voice to influence effective alcohol and other drug service planning*

## WANADA Advocacy – Policy, Strategy and Reform

There have been several significant policy and strategy developments over the past year at both a state and national level. These included the State Government's election platform for increased alcohol and other drug investment in both specialist alcohol and other drug services, and co-occurring capable cross-sector initiatives.

The implementation of State Government reform has required WANADA to increasingly focus on ensuring processes incorporate appropriate consideration of sector subject matter and practice expertise. This has been a complex and challenging area, given the speed and extent of implementation activities, and varied engagement processes that are on a spectrum from urgent priorities through to long term governance arrangements.

Nationally, a shift in government focus to preventive health in early 2021 has presented an opportunity for an increased focus on alcohol and other drug related harms across the entire system, capturing primordial, primary, secondary, tertiary and quaternary levels of preventive health.

The absence of national governance arrangements (with the dissolution of the Council of Australian Governments and the Ministerial Drug and Alcohol Forum) present a key challenge to coordinating the system improvements required across all jurisdictions. WANADA, as part of the State and Territory Alcohol and Other Drug Peaks Network, have recently increased advocacy in this important area, and will continue to present potential governance framework options in 2022.

Overall, WANADA has been involved in over 28 discrete State and Commonwealth policy and reform processes. These have included, but are not limited to:

- Implementation of the Sustainable Health Review
- National Preventative Health Strategy
- The design of multiple service models relevant to alcohol and other drug service provision
- Inquiry into the Availability of Packaged Liquor in the Kimberley and Pilbara Regions
- Young People Priorities for Action
- State Commissioning Strategy
- National Treatment Framework
- Pandemic responses and cross-sector/jurisdiction coordination
- Walk with Me
- Work and Development Permit Scheme
- Review of the National Ice Action Strategy

Notable achievements over the year have included, but are not limited to:

- Release of the WANADA report *Western Australian Alcohol and Other Drug Service Sector: Impact of the Pandemic and Sector Response in 2020*
- MHC funding to support Aboriginal sector leadership, workforce planning, and an expansion of the Volunteer Alcohol and Other Drug Counsellors' Training Program
- Consideration of quality standards for alcohol and other drug services in the Work and Development Permit Scheme.

## Communications and Events

Over the past year WANADA continued to coordinate sector service networking events and enable discussion on sector-identified priorities.

WANADA continues to provide e-newsletters including FYI and Aboriginal Alcohol and other Drug Worker News, sharing research and resources, workforce development and career opportunities, as well as relevant campaigns and sector news. WANADA's Member Update e-bulletin allowed information to be shared with senior staff at our member services as needed, providing information impacting the sector.

Thank you to members and other stakeholders who continue to share news and updates with WANADA and the broader sector.

- 65 Member Update eBulletins - 130 recipients
- 20 e-newsletter issues - 800 recipients
- 59,675 views of the WANADA website

## Alcohol and Other Drug Sector Hub Development

In 2020-2021 WANADA progressed the planning and development of a central online hub. The Western Australian alcohol and other drug online resource hub will work towards being the go-to place for alcohol and other drug information and resources, including:

- service awareness and access pathways
- evidence-informed information and resources
- sector development opportunities and network coordination.

The hub will also address an identified need for timely access to relevant Government and health information about the pandemic and early warning notices tailored to the needs of alcohol and other drug sector managers, workers, and consumers..

In August 2020 WANADA received a capacity building grant from Lotterywest through WACOSS to undertake sector and community scoping for the proposed hub. WANADA consultation with alcohol and other drug services and their workers, service users, and cross sector stakeholders gathered sufficient input to inform the development of a roadmap for the hub.

In May 2021 WANADA received funding from Lotterywest to implement this initiative. WANADA is currently working on the development of the hub, with the live version scheduled for completion in mid-2022.

The hub will support increased connectivity of the sector and community awareness of sector expertise.

# Our Certification and Quality

## Surveillance Audit ISO 9001:2015

WANADA underwent its Surveillance Audit against the ISO 9001:2015 Quality Management Systems Standard in August 2021. Highlights from the Audit Report conducted by the Institute for Healthy Communities Australia Certification Pty Ltd include:

*The organisation's management systems are clearly defined, documented, monitored and (where appropriate) communicated including finance and risk. Processes are in place for identifying, assessing and managing risk in order to ensure continuous, safe, responsive and effective services.*

*WANADA demonstrated a strong commitment to quality in its internal processes, the [Quality Management System] QMS, dealing with stakeholders and the outcomes achieved.*

*WANADA has a strong customer focus and actively encourages feedback.*

*There is evidence that WANADA analyses and evaluates appropriate data and information arising from monitoring and measurement for each of the programs in scope of the audit.*

*The organisation has processes to determine and select opportunities for improvement and implement any necessary actions to meet customer requirements and enhance customer satisfaction, as well as improve the QMS.*

### Statement on the overall conformity and effectiveness of the management system

This maintenance assessment identifies that the organisation continues to meet the intent of the ISO 9001:2015 - Quality Management System. This conclusion is supported by evidence obtained from a review of the relevant clauses and criteria and a review of documents and records relating to these international standards as well as interviews with management and staff.

The organisation has undertaken numerous audits against ISO 9001; 2015. There continues to be a mature Quality Management System in place based upon risk-based thinking, Plan Do Check Act and the process approach. Operational control processes are being well implemented with the use of compliance registers, evaluation, performance monitoring, management review and internal audit.

Policies and procedures are evidence based, detailed and comprehensive. They can be accessed by staff across the organisation as relevant. Formal processes are implemented to ensure service delivery meets requirements, monitoring and evaluation is undertaken and there is a clear commitment to quality and continuous improvement.

### Recommendation to Certification Body

WANADA continues to be certified against ISO 9001:2015 with the next Surveillance Audit to be conducted prior to the end of September 2022.



ISO 9001:2015  
QUALITY CERTIFIED  
ORGANISATION

## Membership List

### Full Members

- 55 Central
- Adult and Teen Challenge WA
- B-Attitudes
- Bega Garnbirringu Health Services
- Bloodwood Tree Association Inc.
- Breakaway Aboriginal Corporation
- Cyrenian House
- Doors Wide Open
- Fresh Start Recovery Programme
- Garl Garl Walbu Alcohol Association Aboriginal Corporation
- Goldfields Rehabilitation Services Inc
- HepatitisWA Inc.
- Holyoake
- Hope Community Services
- Kimberley Mental Health and Drug Service Kimberley CADS
- Kununurra Waringarri Aboriginal Corporation
- Local Drug Action Groups Inc.
- Milliya Rumurra Aboriginal Corporation
- Mission Australia WA
- National Drug Research Institute
- Next Step Drug and Alcohol Services
- Ngnowar Aerwah Aboriginal Corporation
- Nyoongar Outreach Services
- Outcare
- Palmerston Association Inc.
- Peer Based Harm Reduction WA
- St John of God Social Outreach
- St Patrick's Community Support Centre
- Swan City Youth Service Inc.
- Tenacious House
- The Esther Foundation Incorporated
- The Salvation Army WA
- UnitingWA
- WA Country Health Service – Midwest CADS
- Womens Health and Family Services
- Wungening Aboriginal Corporation
- Yaandina Community Services

### Associate Members

- Armadale Youth Accommodation Service
- Cancer Council WA
- Centre for Women's Safety and Wellbeing Inc
- Consumers of Mental Health WA

### Associate Members (continued)

- Fremantle Women's Health Centre
- Geraldton Regional Aboriginal Medical Service (GRAMS)
- Health Consumers' Council (WA) Inc.
- HelpingMinds Limited
- Indigo Junction
- Jungarni-Jutiya Indigenous Corporation
- Langford Aboriginal Association Inc
- Mental Illness Fellowship of WA
- MercyCare
- Multicultural Futures
- Nindilingarri Cultural Health Services
- North Metropolitan TAFE
- Orana House
- Perth Inner City Youth Service
- Ruah Community Services
- South Coastal Health and Community Services
- St Bartholomew's House
- Wanslea Family Services
- WA AIDS Council
- Youth Affairs Council of Western Australia
- Youth Futures Ltd
- YouthLink
- YouthReach South
- Zonta House Refuge Association Inc.

### Individual Members (Associate)

- Hon. Alison Xamon
- Rev George Davies
- Sarah Parkin
- Sheila McHale
- Tania O'Dea
- Terry Murphy

### Individual Members (Student)

- Cassandra Murphy
- Carol Goodmanson
- Cynthia Chhoa Jia Wen
- Danae Eldridge
- Danika Marchenko
- Kiyari Hijjawi
- Mackenzie Bougoure
- Matthew Ryan
- Melanie Holland
- Rebecca Black
- Kayla Palmer

## Member Benefits

Benefits	Full Organisation Members	Associate Organisation Members	Associate Individual
<b>Stay informed</b>			
E-newsletters	✓	✓	✓
E-bulletins (Member Update)	✓	✓	
<b>Policy and advocacy</b>			
Opportunities to contribute to sector development and policyplanning through WANADA led consultations	✓	✓	✓
<b>Sector, organisation and workforce development</b>			
Job listings on the WANADA website	✓	✓	✓
Alcohol and other drug sector specific management development training opportunities	✓	✓	
Quality and certification readiness support	✓		
Supported student placements	✓	✓	
Participation in the WANADA Regional, Rural and Remote Managers Forum	✓		
Participation in the WANADA Residential Services Forum	✓		
<b>Member programs</b>			
Employee Assistance Program (at discounted rates)	✓	✓	
Childcare Access Program	✓		
Interpreter Access Program	✓		
<b>Member contribution</b>			
Eligibility for nomination to WANADA Board	✓		
Voting rights at Board elections and general meetings for appointed delegate	✓		
<b>Networking</b>			
Conferences and events (member discount where available)	✓	✓	✓
Invitations to member and sector forums	✓	✓	

## WANADA Staff



**Jill Rundle**  
Chief Executive Officer



**Mary-Louise Davies**  
Finance Manager



**Ethan James**  
Manager Advocacy and Systems



**Karina Clarkson**  
Aboriginal Leadership Coordinator



**Stefanie Palmer**  
Organisation Coordinator



**Deanne Ferris**  
Communications Officer



**Susan Holt**  
System Support Coordinator



**Kimberley Wilde**  
Member and Peer Engagement  
Coordinator



**Kim Ziapur**  
Sector Development Coordinator



**Tilly Lloyd-Poole**  
Sector Engagement and Support  
Officer

We wish to acknowledge and extend our gratitude to valued staff members leaving in this report period: **Vanessa Vidler, Jill Nesbitt, Caroline Henson, Amy Lampard, Charli Peasley and Carol Child** for their significant contribution to the sector.

We have recently welcomed two new staff members to the team: **Carlia McCallum** and **Matthew Ryan**.

## **Appreciation and Acknowledgement Funders and Support**

WANADA acknowledges our 2020-2021 funders and thank them for their support: WA Mental Health Commission, Australian Government Department of Health, WA Primary Health Alliance, Lotterywest, and Macfarlane Burnet Institute for Medical Research and Public Health Ltd.

We thank our members, whose input and engagement enables us to continue to meaningfully represent and support the sector and community.

We thank our many partners and collaborators for their willingness to share their expertise in support of the alcohol and other drug sector.



