

ANNUALREPORT



CONTENTS

02 Support

03 Introduction

04 Committee of Management

04 WRAD Staff

05 WRAD Agency Report

08 Operations Manager's Report

09 Office Manager's Report

10 Clinical Team Report

11 Sliding Doors Report

12 WRAD Operational Plan 18/19

13 WRAD Strategic Plan 16/19

14 Statistics

16 About WRAD

17 Financials and Treasurer's Report





The artworks on the front cover 'Speak before your mind explodes' submitted by Brauer College student Zoe Murphy was the winner of the 2017-18 WRAD Art in School competition.

The Western Region Alcohol and Drug Centre Inc (WRAD) is funded by the Victorian Government Department of Health. Other sources of funding include fee-for-services, support from the Western Victorian Primary Health Network and various fund-raising activities.

SUPPORT

WRAD acknowledges the significant support from the local community, the Department of Health & Human Services Victoria, the Western Victoria Primary Health Network and many individuals who have contributed generously to WRAD and the Lookout Residential Rehabilitation appeal.

THE WESTERN REGION ALCOHOL & DRUG CENTRE INC.

ANNUAL REPORT 17/18

172 Merri Street,
 Warrnambool VIC 3280
 Phone 1300 009 723 / 5564 5777

mww.wrad.org.au



INTRODUCTION

WRAD began as a community steering group more than 35 years ago, determined to provide better services for people with alcohol and drug (AOD) problems in southwest Victoria. Since the centre opened 32 years ago, WRAD has broadened its base to provide diverse services to meet the multiple needs of people with AOD problems and has expanded to become part of the Handbury Medical Suites which now offers a full range of general bulk billing medical services that are available to everyone.

The WRAD Centre is a not-for-profit organisation that operates within a community-based management model. An elected Committee of Management is responsible for providing services in accordance with relevant legislation, service guidelines and funding agreements.

The philosophy of harm minimisation underpins the delivery of all programs offered by WRAD. People and their problems are viewed holistically, and WRAD staff work collaboratively with other health-related professionals and organisations to best meet the needs of clients and their families.



COMMITTEE OF MANAGEMENT

Helen Taylor	Chairperson, Assistant-principal Brauer College (retired)
Robert Coffey	Vice-Chairperson and Secretary, Abalone Diver (retired)
Scott Dickie	Treasurer, Partner Sinclair Wilson Chartered Accountants
Glenys Phillpot	Warrnambool City Mayor (retired)
Tracey Kol	Sales Manager, Ace Radio
Luke Taylor	Lawyer, Taits Legal
Shane Keogh	Senior Sergeant, Victoria Police, Warrnambool
Carolyn Monaghan	Pharmacist (retired)

WRAD STAFF

Geoff Soma	Director
Daryl Fitzgibbon	Operations Manager
Dawn Bermingham	Office Manager
Sally Aitken	Brief Intervention & Care Recovery Clinician
Angela Alexander	Sliding Doors Non-Residential Rehabilitation Co-ordinator
Rick Bayne	Media Consultant/Project Worker
Alana Beasley	Assertive Youth Outreach Clinician
Lynda Berends	Service Development Consultant (finished March, 2018)
Michelle Cameron	Receptionist/Administration – ISI Project
Kim Collins	Sliding Doors Non-Residential Rehabilitation Program Facilitator
Sue Dawson	Medical Administration (finished February 2018)
Kevin Fitzgerald	AOD Care, Recovery & Co-ordination Clinician
April Hately	Dual Diagnosis Clinician (started November, 2017)
Annie Henry	Sliding Doors Non-Residential Rehabilitation Program Facilitator (finished April 2018)
Nilanthi Kanapathipillai	Medical Practitioner (finished February, 2018)
Chris Kendall	Senior Clinical Co-ordinator
Rob Kenna	Practice Nurse
Debbie Maguire	Finance Officer
Carol Main	Medical Administrator
Jessica Moloney	DARE AOD Clinician
Dr Clare Mooney	Medical Practitioner
Kerri Neave	Sliding Doors Non-Residential Rehabilitation Day Program Group Facilitator (finished April 2017)
Karen O'Donnell	Receptionist/Medical Administration
Dr Dev Ramu	Medical Practitioner
Dr Sue Richardson	Medical Practitioner
Margaret Skene	Project Worker
Kerry-Leigh Walmsley-Sims	AOD Clinician
Robert Duynhoven	Assistance Finance Manager
Darren Williams	Koori Diversion Program Clinician
June Williams	Family Reunification Peer Worker (started February 2018)

WRAD AGENCY REPORT

The WRAD Chairperson and Director are pleased to report on the performance of the agency for the 2017/18 financial period.

There have been significant achievements across the following platforms throughout the year in review:

- 1. Client Service Delivery
- 2. Quality/Risk
- 3. Community Public Profile
- 4. Financial Management
- 5. Partnership /Collaboration

There were more than 600 client contacts through WRAD Clinical Services and over 10,000 consultations through WRAD bulk billing Medical Services.

Funding was provided by the State Department of Health and Human Services, the Western Victorian Primary Health Network, and fee for services, rental income and fundraising.

WRAD has had a very busy year with all the services and programs it continues to provide. However, the reporting period has been even busier than usual with the challenges and work required to set up and establish a residential rehabilitation centre. Known as the 'Lookout', a local steering committee has worked tirelessly to plan, develop and also raise more than \$600,000 toward the project. The steering committee has been ably led by Glenys Phillpot and has achieved much towards the goal of helping community members with addiction difficulties who require this much-needed treatment response. WRAD has received strong support from the community, local politicians and government for the Lookout project.

This year marks the 20-year anniversary for two Committee of Management members, Glenys Phillpot and Helen Taylor. Our community is richer for volunteerism and we thank these committed committee members for their service to WRAD.

WRAD has exhibited strong financial performance with a healthy surplus produced to help support WRAD client service delivery. WRAD Medical Services continue to provide a bulk billing practice and associated health services to the local community. There was a growth in

service delivery to clients through increased State Government funding.

During this year, a Committee of Management review was successfully completed. The Executive Risk Committee provided responsible governance across the organisation. We also continued to have a strong media presence with a focus on a range of alcohol and other drug issues facing our community.

WRAD held another successful Art in Schools Competition. The competition provided support to young local artists and created conversations about alcohol, drugs and Mental Health. The competition night was very well attended with work displayed from artists attending many local secondary schools.

CLIENT SERVICE DELIVERY:

The Brief Intervention Project working with local GP practices continued to develop throughout the year. Clients with problems with substance misuse were assisted by GPs, practice nurses and a dedicated WRAD clinician who attended South West Medical and Cambourne clinics.

The Peer Family Reunification Project was introduced during the reporting period and supports families who face issues around alcohol and other drugs.

The Peer Overdose Project also provided important information and support to clients engaged in the service. I acknowledge the important role played by peer workers in engaging and helping clients. This work was further enhanced through the provision of the Warrnambool Active Recovery Peer support (WARP) client support group.

Australian Community Support Organisation (ACSO) provided intake services to WRAD clients and the assessment function was provided by our agency during 2017/18. This process seems to be providing important access for clients seeking treatment.

The Sliding Doors day program and the DARE Early Intervention service met targets for the year. Both of these programs provided important engagement and support for adult and youth clients. The Koori Diversion service, the Youth Outreach service and the Dual Diagnosis project provided specialised treatment responses for our client group.

WRAD as the lead Consortium agency in the great South coast Alcohol and other Drug treatment consortium and project partners Brophy Family and Youth Services, Portland District Health and South West Healthcare met targets through the Department of Health and Human Services. Our other consortium partner, the Western Victoria Primary Health Network, updated the Great South Coast catchment-based planning document which involved a client survey process.

Medical Services and a psychiatric consultant provided important support for clients with medical and mental health issues.

The Western Victoria Primary Health Network (WVPHN) contracted Brophy Family and Youth Services on behalf of the Great South Coast Alcohol and Drug Treatment Service to review WVPHN funded project and to identify gaps in service provision.

QUALITY/RISK:

The three yearly accreditation self-assessment process was completed as part of preparations for the QIP accreditation site visit later in the year.

The VMIA (Victorian Managed Insurance agency) risk management database was updated and reviewed as part of the governance and quality assurance process.

The Department of Health and Human Service compliance standards were met during the period.

Policy procedures, complaints and risk were managed through internal control processes.

The WRAD 2018/19 strategic plan was further developed and strategies addressed and reviewed and the 2017/18 operation plan was implemented.

PARTNERSHIP/ COLLABORATION:

WRAD worked closely with the Department of Health and Human Services Metropolitan and its regional office throughout the reporting period.

The Great South Coast Alcohol and Other Drug Consortium continued to produce good results

and these collaborations added value to the overall service provision.

WRAD continued to liaise with the peak body, Victorian Alcohol and Other Drug Advisory Organisation (VAADA) and WRAD had an opportunity to have input into a number of areas around advocacy for the region.

The colocation of ACSO continued to build on a strong partnership that provided important services to clients.

WRAD maintained membership on the Community South West Alliance and continued to forge strong strategic relationships to support service provision.

WRAD maintained a significant relationship with Self Help Addiction Recovery Centre (SHARC) to support peer workers employed within our organisation.

In general, WRAD worked closely with a broad range of services to enhance the important work carried out across Warrnambool and surrounding districts.

COMMUNITY PUBLIC PROFILE:

WRAD provided effective media coverage and promoted the organisation across the wider community.

WRAD regularly updated its website and launched a new Lookout Residential Rehabilitation Centre website during the reporting period.

WRAD provided alcohol and other drug information and offered opinions on issues around substance misuse and their impact on the community.

Service brochures were updated and WRAD advertised programs on local radio.

Staff attended training and conferences and network meeting to promote the service profile.

WRAD made presentations to local government, politicians, community groups and regional advisory committees.

CONCLUSION:

The Western Region Alcohol and Drug Centre produced some pleasing outputs during 2017/18. These included a strong financial performance, effective partnerships and strategic alliances and increased services and quality programs for clients.

Medical Services continue to provide affordable and accessible health services and added value to the multiple support services provided on site.

The Lookout Residential Rehabilitation Centre project developed significantly with excellent community support and fundraising initiatives. We are optimistic that this centre will become a reality and address a significant gap in service provision for clients who desperately need this structured treatment response.

The organisation has been supported by a strong staff team with leadership from Dawn Bermingham (Finance Manager) and Daryl Fitzgibbon (Operations Manager). We are grateful to the WRAD staff team for their efforts throughout the year.

The Committee of Management, which is made up of committed and skilled community volunteers, provided good governance throughout the period and we appreciate their support.



GEOFF SOMA
DIRECTOR



HELEN TAYLOR CHAIRPERSON, WRAD COMMITTEE OF MANAGEMENT

PICTURED: LEFT: Geoff Soma opens the WRAD Art in Schools exhibition. RIGHT: Auctioneer Bruce Ludeman and Steve Callaghan from Callaghan Motors with a sign for the Lookout fundraiser auction.



OPERATIONS MANAGER'S REPORT

When a system is in the throes of transformation, the turbulence generated externally needs to be mitigated by being aware of the anxiety caused by the perceived lack of control that change brings.

Filtering the messages in the blueprints for change, confining the confusion and developing an organisational strategy within a broader reform platform all come with challenges.

In the past five years, WRAD has become a partner in a treatment consortium, implemented service provision change, adjusted the implementation process and embedded a new data system.

Clinicians have had to adapt, learn new service models and become more trauma informed, domestic violence savvy, culturally aware, gender sensitive and competent in areas of forensic service and mental health service provision. All this has happened while achieving service targets and endeavouring to keep focus on the main thing – alcohol and other drug service provision - and not mutating into a generalist service that dabbles in everything but loses its integrity and identity in the process.

In the face of all these challenges we have managed to make the changes required within the allotted time frame while keeping our focus on the end goal.

I am very proud of the staff at WRAD. They have toiled away at the coal face of care; they have adjusted, shown resilience and never lost sight of the simple fact that all other things are peripheral to needs of a client/person who asks for help.



DARYL FITZGIBBON OPERATIONS MANAGER

PICTURED: LEFT: Brauer College student, Zoe Murphy, winner of the 2017-18 WRAD Art in School competition. RIGHT: Members of the Warrnambool & District Historical Vehicle Club. Their vehicles are on show to support the Lookout residential rehabilitation centre. Each year, the club chooses a charity to be the recipient of the profits from the event. Club members recognised the value of having a facility like the Lookout residential rehabilitation centre locally and wanted to support the Lookout appeal.



OFFICE MANAGER'S REPORT

Every year seems to bring another challenge for the delivery of alcohol and drug services in the Great South Coast region. WRAD continues to be the lead agency in the Great South Coast Alcohol and Other Drug Treatment Consortium and together with Portland District Health, South West Healthcare, Western Victoria Primary Health Network and Brophy Family and Youth Services each agency works together to bring new developments and hopes for people and families who strive to improve their health and wellbeing.

A lot of planning has been done by the WRAD Committee of Management, the Director and the Lookout Committee to make one of these dreams come to fruition. They have been working through the process to establish a residential rehabilitation program to serve the region. There is still work to be done but I look to the future and hope this necessary program is not too far away.

During the year, the assessment process was returned to alcohol and drug agencies, and WRAD's services were updated by the development of a new database required to be functional by October 2018. The operations manager, senior clinical co-ordinator and all the clinical team have been working hard to get through this process. On top of these changes, the staff continue to deliver counselling and support services together with a non-residential day program with compassion, dignity and respect to all who have come through the clinical services. Some roles have changed, people have moved on or to other programs and new programs have been developed within WRAD, but they all strive to bring the best outcomes for their clients.

Any agency needs a welcoming and friendly vibe to all who enter their doors, at WRAD the reception/medical administration staff are there to welcome all to our agency. I express my gratitude to Carol Main, Karen O'Donnell and Michelle Cameron who work in these roles; they do an amazing job to assist people who come to WRAD, the medical staff, the clinical staff, the management team and ACSO, the

co-located agency also providing the intake for delivery into alcohol and drug services. Thanks to the finance team who support me in my roles, Debbie Maguire and the newest member Robert Duynhoven who do an amazing job and are a great support. Rob's skills in accounting have seen some financial services brought back into WRAD, which has been an asset to the Director and the finance team.

It is always sad to see one of the family leave the agency, this year the administration team said goodbye to Sue Dawson after more than nine years with WRAD. Sue assisted the reception and medical teams and kept a tight rein on the asset register and many other administrations tasks. Sue decided to make the big jump to retirement and will be missed at WRAD.

Our general medical practice, Handbury Medical Suites, continues to support the community with Dr Sue Richardson, Dr Clare Mooney and Dr Dev Ramu providing a bulk billing service. This year we said goodbye to Dr Nilanthi Kanapathapillia who had been with us for 18 months, we wish Nilanthi all the best. The doctors are supported by our practice nurse Rob Kenna and the medical administration team. The medical team also support medical students and interns from the Deakin Medical School on placement at the Handbury Medical Suites.

I work closely with Director Geoff Soma and operations manager Daryl Fitzgibbon, who provide the heart and soul of WRAD. They work hard to establish and implement new programs at the centre and to support and establish staff within these roles. They are a great support to me and I appreciate their friendship and loyalty.

In conclusion, WRAD will continue to work hard to grow our services, to establish pathways for people to access our programs to help them to develop and grow as we will develop and grow with them side by side.



DAWN BERMIGNHAM OFFICE MANAGER

CLINICAL TEAM REPORT

The clinical team has had an eventful year. Overall, we saw a decrease in numbers for general alcohol and other drug counselling services, but specialised clinical services achieved their targets.

In the clinical programs for 2017/18 there were 2704 appointments completed, leading to an attendance rate of 69.07 per cent. The industry average for client attendance is 60 per cent, but unfortunately, we fell just short of our benchmark of 70 per cent.

The Koori Alcohol and Other Drug Program (KADW), enjoyed a successful year and reached its funded targets. Clinician Darren Williams was very pro-active in cementing and increasing his networks which ultimately led to better pathways for the clients of this program.

Dual Diagnosis welcomed a new and old staff member. April Hately who left WRAD the previous year to work in the Northern Territory has returned and taken up the position of Dual Diagnosis Clinician. April has taken on board a number of clients with complexities in both alcohol and drugs and mental health. April has also consulted other mental health agencies to offer her services. April, in conjunction with Mark Powell from St John of God Hospital Mental Health Service, has been providing the SMART program from the Salvation Army Hall most Wednesday nights and we thank the Salvation Army for their assistance.

Youth Outreach continues to offer a positive service to youth across the district. Alana Beasley maintains a high standard for her program and works closely with schools and Brophy Youth & Family Services. Alana also achieved her targets for the financial year.

PICTURED: Lookout fundraiser auction.

Brief Interventions was a new program funded by PHN. WRAD has negotiated with two medical clinics in Warrnambool to provide alcohol and other drug services to patients on site at the clinics. Although there were a number of hurdles in the past year, the program is now enjoying success. A change in medical clinics was required, but it appears that the issues have now been overcome.

The WRAD Supported Accommodation Program remains strong with demand often outstripping supply. A number of clients have utilised the program and the housing for both youth and adults remains full.

The WRAD Addiction Recovery Program (WARP) group, originally facilitated by Kayleigh Walmsley-Sims, still operates on a Monday morning. The group is principally designed to assist those clients that are substance free and provide a meeting place for them to continue to work on their recovery as they move back into mainstream life. The other staff member in general counselling is Kevin Fitzgerald, who has been with WRAD a number of years and has performed a number of roles.

The next 12 months will include recruiting new staff, further networking with other organisations and improving overall client attendance. Staff are keen to see the Lookout Residential Rehabilitation Centre become a reality which would save clients having to travel to Melbourne or Benella to engage in residential rehabilitation, placing them miles away from their families and friends and support networks.



CHRIS KENDALL
CLINICAL COORDINATOR



SLIDING DOORS REPORT

The WRAD Sliding Door therapeutic day program has continued to run successfully throughout the past year and has now completed three years of funded service. The program is delivered throughout the year in ongoing, seven-week blocks and eligible referrals are accepted at any time.

Participants arrive at 9.30am to the dedicated group room in the WRAD building and have a brief settling-in period where they can enjoy a hot drink and biscuits and greet each other or discuss issues with staff before the formal program begins. The daily program follows a routine process which engages staff and client alike in a welcoming, inclusive ritual of sharing gratitude, recovery actions for the day and exploration of feelings.

Sliding Doors participants are immersed in a cognitive-behavioural-therapy (CBT) based program which embraces a culture of 'working together as a team' to build and nurture a supportive safe environment. The program provides daily richly educative sessions which develop social skills, communication and camaraderie; amongst interesting interactive skill-based sessions designed to identify, challenge, dispute and change negative or problematic thought patterns.

As thinking changes, emotions are managed more effectively and people are empowered to take responsibility for their actions. Clients rapidly develop confidence and skills as they learn, share and develop together. Although the group can experience difficult emotions and situations as members work through their triggers and issues; everyone benefits from insights and struggles alike and the power of narrative. The raw beauty of a story shared, enriches everyone present and the strength drawn from allowing and accepting feelings teaches skills that transform lives.

The in-house group sessions are complemented by a range of life-skill activities, which further support and enhance the growth and changes participants typically enjoy. Sliding Doors staff transport the group to various external community activities and organisations. Learning includes cooking and nutrition as well as art therapy, gardening and job readiness development.

Throughout the year, many past clients took advantage of the post-program support opportunity to join the group in Friday afternoon art or music sessions. Hope and inspiration are shared as these visitors share their enjoyment of new studies, return to work, better health and improved family relationships.



ANGELA ALEXANDER
SLIDING DOORS
COORDINATOR

PICTURED: LEFT: WRAD 2017 AGM — guest speaker and Lookout steering committee member John Rantall with Bill Phillpot RIGHT: Long-serving medical administration staff member Carol Main with Helen Taylor at AGM

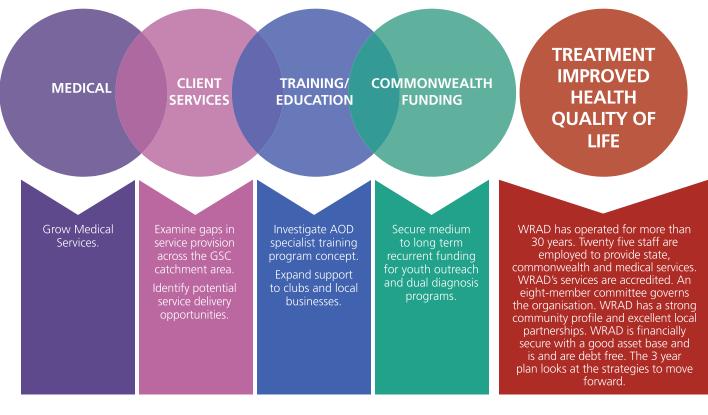


WRAD OPERATIONAL PLAN 18/19

CLIENT SERVICE DELIVER	QUALITY RISK	COMMUNITY PUBLIC PROFILE	FINANCIAL MANAGEMENT	PARTNERSHIP COLLABORATION
Develop Lookout service delivery model	Provide effective governance to support WRAD services	Promote WRAD services in the wider community	Maintain finance reporting requirements Implement effective financial controls	Provide effective Leadership of the Great South Coast AOD Consortium • Governance • Financial • Service delivery
Achieve 95% average targets across counselling, care recovery, non residential withdrawal, DARE and Sliding Doors program Implement Redicase data management system and monitor performance	Implement risk management data base Manage OHS process Implement DHHS CIMS process	Implement social marketing and advertising strategy	Maximise lease rental income	Maintain links with DHHS regional and head office Develop relationship with WVPHN
Participate in GSC Co-Design project to identify gaps in service provision	Complete QIP clinical services accreditation	Provide relevant service information	Maximise Medical Services income	Maintain strategic alliances with headspace, Brophy, Portland District Health, South West Healthcare, Ice Challenge executive Community South West Alliance
Participate in review of Sliding Doors day program and lobby for ongoing funding of service Enhance dual diagnosis role Develop assertive youth outreach role	Complete Department compliance process Implement and monitor Department service agreement	Promote positive media image	Maximise funding opportunities Identify key strategic partnerships	Develop partnerships with AOD peak body, Turning Point Odyssey House and Youth Support and Advocacy Service
Develop medical services and support SWH Addiction Medicine, Psychiatric Registrar, Training Post Develop risk of overdose project Develop family reunification project Employ family violence coordinator Develop peer lead WARP support group	Implement staff development and training program Complete policy reviews Maintain and monitor HR standards Provide EAP service for staff	Provide secondary consultation to health agencies and related services	Meet budget forecast figures	Develop partnerships with the Self Help Addiction Recovery Centre and the Australian Community Support organisation

WRAD IS THE LEAD AGENCY IN THE GREAT SOUTH COAST ALCOHOL AND OTHER DRUG TREATMENT SERVICES

WRAD STRATEGIC PLAN 16/19





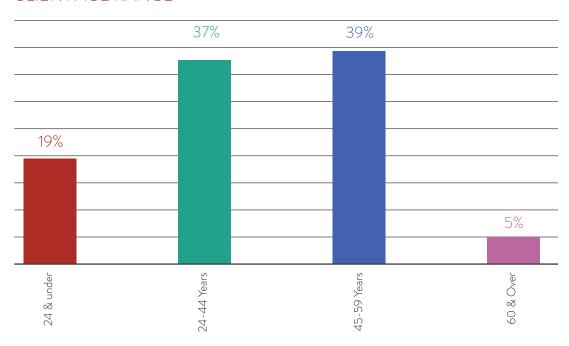
WRAD has achieved a number of goals over the years and some of these are as follows:

- **1.** WRAD is the lead agency in the Great South Coast (GSC) Alcohol and Drug Treatment services.
- **2.** Operationalised the first funded day treatment program for the GSC catchment area.
- **3.** Developed an accredited general practice which generates significant income as well as providing bulk billing care for the local community.
- **4.** Operates a successful art in schools competition for secondary schools in the region.
- **5.** Operates a debt free business with recurrent state funding and support.
- **6.** Provides multidisciplinary services for people with a range of health problems on one site.
- WRAD is situated in the Great South Coast planning region.
- As lead agency of the Great South Coast Drug and Alcohol Treatment Services, its focus is on services in the Glenelg, Southern Grampians, Corangamite, Moyne Shires and the City of Warrnambool.
- WRAD is situated in Warrnambool and provides services to residents of Warrnambool and surrounding towns.

STATISTICS

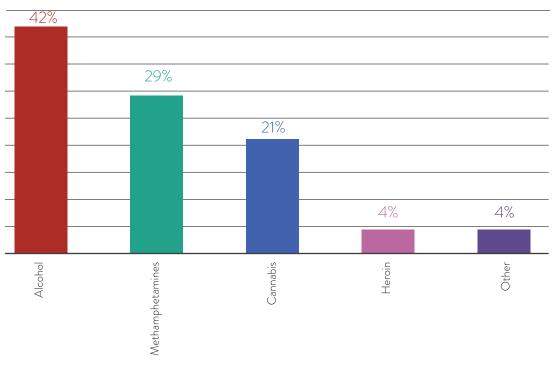
DEPARTMENT OF HEALTH DATA BY CONTACTS FOR 2017/18 REPORTING PERIOD.

CLIENT AGE RANGE



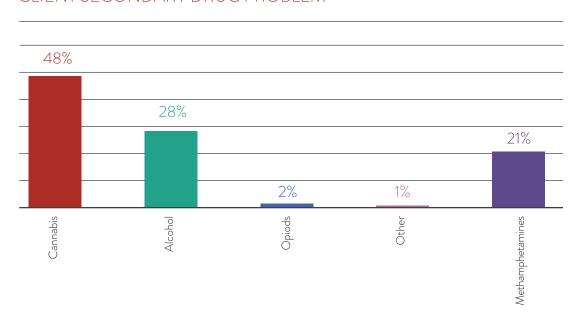
There has been an increased percentage of clients 45 and over presenting for treatment.

CLIENT PRIMARY DRUG PROBLEM



Alcohol remains the most problematic drug followed by methamphetamine-like substances and cannabis.

CLIENT SECONDARY DRUG PROBLEM



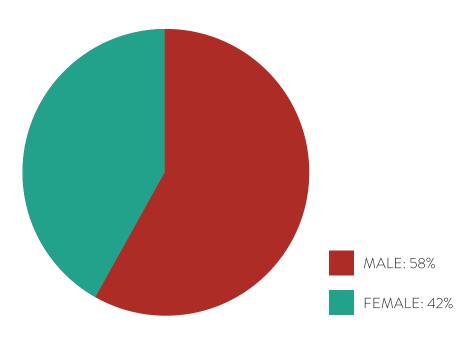
Cannabis was the most problematic secondary drug identified by clients followed by alcohol and methamphetamine substances.

CLIENT SOURCE OF REFERRAL



Significant self-referrals were recorded across the service.

CLIENT GENDER



This is consistent with the previous year.

ABOUT WRAD

OUR VISION

The WRAD Centre's vision is to advance the health and wellbeing of those in the south western region of Victoria affected by addictive behaviours and to promote optimal quality of life.

OUR MISSION

The WRAD Centre seeks to provide comprehensive support and treatment for those affected by addictive behaviours.

OUR AIM

To reduce the harm that results from addictive behaviours.

OUR PHILOSOPHY

The philosophy of harm minimisation underpins the delivery of all programs offered by WRAD. WRAD operates on a social model of health.

FINANCES

WESTERN REGION ALCOHOL AND DRUG CENTRE INC.

COMMITTEE'S REPORT

Your Committee members submit the Financial Report of Western Region Alcohol and Drug Centre Inc. for the financial year ended 30 June, 2018.

Committee Members

The names of Committee members throughout the year and at the date of this Report are:

- Helen Taylor [Chairperson]
- Scott Dickie [Treasurer]
- Robert Coffey [Secretary & Public Officer]
- Glenys Phillpot
- Luke Taylor
- Carolyn Monaghan
- Tracey Kol
- Shane Keogh

Principal Activities

The principal activities of the Association during the financial year were to advance the health and wellbeing of those in the South Western Region of Victoria affected by addictive behaviours and to promote optimal enjoyment of life.

Significant Changes

No significant change in the nature of these activities occurred during the year.

Operational Result

The operating surplus for the year amounted to \$340,298 (2017 \$36,334 surplus).

Helen Taylor, Chairperson

Dated this 23 day of October, 2018.

TREASURER'S REPORT

It has been another successful year for WRAD realising an operating surplus of \$340,298 for the year ending 30 June, 2018.

The realised surplus represents an increase of \$303,960 on the previous year, as shown in the Income Statement. This was due to an overall increase in income of \$760,302 while total expenditure rose by \$456,338.

The result follows Funding and Grants increasing by \$677,594 and Donations and Gifts increasing by \$190,609. Fee for Service funding dropped by \$95,752 and Rental Income dropped by \$23,000. The total increase in expenditure was mainly in project and consortium costs, represented by the increase in work from funding increases.

The additional funding and grants income is a credit to the hard work undertaken by the WRAD team in tendering submissions on various projects and contracts. This includes projects and services continuing from prior years, such as the Brief Intervention Program, Dare Early Intervention Service and the Great South Coast consortium-led Sliding Doors non-residential day program. Well done to the WRAD team and partners involved in these.

Once again, the continuance of Commonwealth project funding added to WRAD's overall service provision and assisted with covering some operational expenditure costs.

The increase in Donations and Gifts mainly related to the donations received for the proposed Lookout Residential Rehabilitation Centre. This project has seen more than \$600,000 committed by the community, a fantastic achievement. As always, we extend our thanks to all supporters during the year.

Fee for Service income from our medical services practice showed a decline because of a decrease in the level of consultation hours available after a doctor left the clinic. This was budgeted for with

appropriate corrective action in place to ensure there was minimal impact on the WRAD group. Our clinic and doctors have continued to provide a high standard of service to patients and our community throughout the year. Thank you to all doctors and staff involved with the clinic.

Increases in expenditure were mainly due to GSC Consortium (sub-contracting expense) increasing by \$166,382 and Project Expenditure increasing by \$158,289. This followed an increase in work requirements in programs and service and have been covered by additional funding and grants income. Payroll costs for the year increased by \$72,026 (3.4%). The WRAD team continually monitors expenditure, ensuring outgoings are appropriately applied for the growth and continuance of services.

The overall result for the year is an indication of the dedication and high standard of work undertaken by our WRAD team. This was provided in a year when many of the team were also heavily involved in fundraising for the Lookout project. Thank you to all our team and consortium partners for their hard work and endeavours.

The WRAD balance sheet continues to remain strong with net assets valued at \$3,238,660, up from \$2,898,362. The strength in our balance sheet provides a strong equity position for our support of The Lookout Residential Rehabilitation Centre in future years.

I would finish with thanking the WRAD administration and finance team for their dedication and continued high level of support provided to WRAD, its committee and its partners.



SCOTT DICKIE
TREASURER

COMPREHENSIVE INCOME STATEMENT FOR THE YEAR ENDED 30TH JUNE, 2018

	2018	2017
	\$	\$
	-	
Income		
Funding and Grants	2,831,315	2,153,721
Interest	810	861
Donations and Gifts	206,504	15,895
Fee for Service Income	918,661	1,014,413
Reimbursements, Recoveries and Sundries	51,385	55,418
Profit/(Loss) on Sale of Plant and Equipment	0	(14,935)
Rental Income	27,009	50,009
Total Income	4,035,684	3,275,382
Expenditure		
Bad Debts	243	2,210
Depreciation	83,211	83,730
Finance Costs	4,178	946
Medical Costs	10,058	12,405
Motor Vehicle Costs	21,288	27,375
Office Costs	158,960	114,553
Payroll Costs	2,090,041	2,018,015
Professional and Consultancy Costs	18,105	14,450
Project Expenditure	260,357	102,068
Property Costs	62,130	48,092
Public Relations/Marketing	14,476	12,845
GSC Consortium (Sub-Contracting Expenses)	954,405	788,023
Utilities	17,934	14,336
Total Expenditure	3,695,386	3,239,048
NET SURPLUS/(DEFICIT)	340,298	36,334
OTHER COMPREHENSIVE INCOME	-	
TOTAL COMPREHENSIVE INCOME FOR THE YEAR	340,298	36,334

STATEMENT OF FINANCIAL POSITION AS AT 30TH JUNE, 2018

	Notes	2018	2017
		\$	\$
REPRESENTED BY:			
CURRENT ASSETS			
Cash and Cash Equivalents	2	1,006,517	598,568
Receivables	3	181,431	75,823
TOTAL CURRENT ASSETS		1,187,948	674,391
		H	
NON CURRENT ASSETS			
Property, Plant and Equipment	4	2,665,742	2,691,100
TOTAL NON CURRENT ASSETS		2,665,742	2,691,100
TOTAL ASSETS		3,853,690	3,365,491
CURRENT LIABILITIES			
Trade and Other Payables	5	227,531	145,295
Finance Leases	6	13,089	-
Provisions	7	309,948	309,064
TOTAL CURRENT LIABILITIES		550,568	454,359
NON CURRENT LIABILITIES			
Finance Leases	6	34,330	-
Provisions	7	30,132	12,770
TOTAL NON CURRENT LIABILITIES		64,462	12,770
TOTAL LIABILITIES		615,030	467,129
NET ASSETS		3,238,660	2,898,362
EQUITY			
Retained Earnings		3,238,660	2,898,362
TOTAL EQUITY		3,238,660	2,898,362

STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDED 30TH JUNE, 2018

	Retained Earnings \$	Asset Revaluation Reserve \$	Total \$
Balance at 1 July 2016	2,456,501	405,527	2,862,028
Surplus/(Deficit) Attributable to Members Other Comprehensive Income for the Year	36,334	·	36,334
Balance at 30 June 2017	2,492,835	405,527	2,898,362
Surplus/(Deficit) Attributable to Members Other Comprehensive Income for the Year	340,298		340,298
Balance 30 June 2018	2,833,133	405,527	3,238,660

STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30TH JUNE, 2018

	Notes	2018	2017
		\$	\$
OPERATING ACTIVITIES			
Receipts from Government Funding		2,790,368	2,153,721
Other Receipts		1,139,708	1,106,056
Interest Expense		(4,178)	-
Payments for Operating Activities		(3,507,515)	(3,126,299)
Net Cash Flow from/(used in) Operating Activities	8	418,383	133,478
INVESTING ACTIVITIES			
Payment for Property, Plant and Equipment		(57,853)	(24,661)
Net Cash Flow used in Investing Activities		(57,853)	(24,661)
FINANCING ACTIVITIES			
Net Borrowings Sources/(Repayment of Borrowings)		47,419	-
Net Cash Flows from Financing Activities		47,419	
Net Increase/(Decrease) in Cash and Cash Equivalents		407,949	108,817
Cash and Cash Equivalents at Start of Year	6	598,568	489,751
Cash and Cash Equivalents at End of Year	2	1,006,517	598,568

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE, 2018.

Note 1. Statement of Accounting Policies

This financial report is a special purpose financial report prepared in order to satisfy the financial reporting requirements of the Associations Incorporation Reform Act 2012 and the Australian Charities and Not-for-profits Commission Act 2012. The Committee has determined that the Association is not reporting entity.

The financial statements have been prepared on an accruals basis and is based on historical costs and does not take into account changing money values or, except where specifically stated, current valuations of non current assets.

The following material accounting policies, which are consistent with the previous period unless otherwise stated, have been adopted in the preparation of this financial report.

Note 1. Statement of Accounting Policies

a) Buildings, Plant and Equipment

Plant, Equipment, Furniture and Motor Vehicles are included at cost, less where applicable any accumulated depreciation. Depreciation is calculated based on the expected useful life of the asset.

Land and Buildings are carried at independent market valuation. The Committee revalued the organisations' properties as at 30 June, 2016 on the basis of an external independent valuation by Roger Cussen, Registered Valuer, with the treatment of the revaluation being in accordance with AASB 116 Property, Plant and Equipment.

The carrying amount of property, plant and equipment is reviewed annually by the Committee to ensure it is not in excess of the recoverable amount of those assets.

b) Cash and Cash Equivalents

For the purpose of the Cash Flow Statement, cash includes cash on hand, at banks and on deposit.

c) Goods and Services Tax (GST)

Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Taxation Office. In these circumstances the GST is recognised as part of the cost of acquisition of the asset or as part of the expense. Receivables and payables in the Statement of Financial Position are shown inclusive of GST.

d) Revenue

Government grants are recognised as revenue when the organisation gains control of the underlying assets. Where grants are reciprocal, revenue is recognised as performance occurs under that grant. Non - Reciprocal grants are recognised as revenue when the grant is received or receivable.

e) Income Tax

The Association's Committee has determined that the Association is exempt from income tax under Section 50-10 of the Income Tax Assessment Act.

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE, 2018.

Note 1 Statement of Accounting Policies (cont.)

f) Leases

Lease payments for operating leases where substantially all the risks and benefits remain with the lessor, are charged as expenses in the periods in which they are incurred.

g) Employee Benefits

Provision is made for the entity's liability for employee benefits arising from services rendered by employees to the entity. Employee benefits that are expected to be settled within one year have been measured at the amounts expected to be paid when the liability is settled, plus related on costs. Employee 'benefits payable later than one year have been measured at the present value of the estimated cash outflows to be made for these benefits.

h) Accounts Receivable and Other Debtors

Accounts receivable and other debtors include amounts due from customers for goods sold in the ordinary course of business. Receivables expected to be collected within 12 months of the end of the reporting period are classified as current assets. All other receivables are classified as non-current assets.

Accounts receivable are initially recognised at fair value and subsequently measured at amortised cost using the effective interest rate method, less any provision for impairment.

i) Accounts payable and other payables

Accounts payable and other payables represent the liability outstanding at the end of the reporting period for goods and services received by the association during the reporting period that remain unpaid. The balance is recognised as a current liability with the amounts normally paid within 30 days of recognition of the liability.

j) Critical Accounting Estimates and Judgements

The committee evaluates estimates and judgements incorporated into the financial statements based on historical knowledge and best available current information. Estimates assume a reasonable expectation of future events and are based on current trends and economic data, obtained both externally and within the association.

Key estimates - Impairment

The association assesses impairment at the end of each reporting period by evaluating the conditions and events specific to the association that may be indicative of impairment triggers. Recoverable amounts of relevant assets are reassessed using value-in-use calculations which incorporate various key assumptions.

k) New Accounting Standards for Application in Future Periods

Accounting Standards issued by the AASB that are not yet mandatorily applicable to the association, together with an assessment of the potential impact of such pronouncements on the association when adopted in future periods, are discussed below:

As at 30 June 2018, the following standards and interpretations had been issued by the AASB but were not yet effective, They become effective for the first financial statements for the reporting periods commencing after the stated operative dates as detailed in the table below. WRAD has not and does not intend to adopt these standards early.

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE, 2018.

k) New Accounting Standards for Application in Future Periods (cont.)

Standard / Interpretation	Summary	Applicable for reporting periods beginning on	Impact on association's Annual Statements
AASB 16 - Leases	The key changes introduced by AASB 16 include the recognition of most operating leases (which are currently not recognised) on balance sheet	1 January 2019	The assessment has indicated that as most operating leases will come on balance sheet, recognition of lease assets and lease liabilities will cause net debt to increase. Depreciation of lease assets and interest on lease liabilities will be recognised in the income statement with marginal impact on the operating surplus. The amounts of cash paid for the principal portion of the lease liability will be presented within financing activities and the amounts paid for the interest portion will be presented within operating activities in the cashflow statement. No change for lessors.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE, 2018

		2018 \$	2017 \$
Note 2.	Cash and Cash Equivalents		
	Main Account	725,841	595,755
391	WRAMSAP Account	5,688	2,642
	Commonwealth Project	60,116	
	Lookout Appeal	214,701	
	Online Savers	171	171
		1,006,517	598,568
Note 3.	Receivables		
4	Trade Debtors	181,431	75,823
Note 4.	Property, Plant and Equipment per Valuation		
	Land - at fair value	1,052,450	1,052,450
	Buildings - at fair value	1,561,100	1,561,100
	Less: Accumulated Depreciation	(81,355)	(40,677)
		2,532,195	2,572,873
	Plant and Equipment at Cost	172,766	346,072
	Less: Accumulated Depreciation	(132,703)	(292,966)
		40,063	53,106
	Motor Vehicles at Costs	175,502	124,860
	Less: Accumulated Depreciation	(82,018)	(59,739)
		93,484	65,121
		2,665,742	2,691,100

[#] Land and buildings were revalued to fair value by Roger Cussen, independent registered valuer as at 30th June, 2016.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE, 2018

		2018 \$	2017 \$
Note 5.	Trade and Other payables		
note si	Trade Payables	112,967	55,804
	Other Payables	114,564	89,491
		227,531	145,295
Note 6.	Finance Leases		
	(a) Current		
	Motor Vehicle Leases	13,089	-
	(b) Non Current		
	Motor Vehicle Leases	34,330	-
Note 7.	Provisions		
	(a) Current		
	Annual Leave	131,328	115,813
	Long Service Leave	151,120	165,751
	Other Employee Entitlements	27,500	27,500
		309,948	309,064
	(b) Non Current		
	Long Service Leave	30,132	12,770
Note 8.	Cash Flow Information		
	Reconciliation of Cash Flow from Operations with Net Surplus		
	Net Surplus/(Deficit)	340,298	36,334
	Add back Non-Cash Flows in Operating Profit:		
	Depreciation	83,211	83,730
	(Profit)/Loss on Sale of Property, Plant and Equipment	-	55
	Write Down of Assets		14,990
	Movement in Assets and Liabilities		
	Increase/(Decrease) in Trade and Other Payables	82,236	9,290
	Increase/(Decrease) in Employee Provisions	18,246	19,674
	(Increase)/Decrease in Receivables	(105,608)	(30,595)
	Cash Flows from Operations	418,383	133,478

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE, 2018

Note 9. Contingent Assets

Contingent assets are possible assets that arise from past events, whose existence will be confirmed only by the occurrence or non-occurrence of one or more uncertain future events not wholly within the control of the entity.

Since 2017 WRAD have been actively fundraising for donations to contribute towards the construction of the Lookout Facility. During the year management have received pledges amounting to \$377,000, which would become receivable to WRAD upon the Department of Health and Human Services confirming their grant towards operational funding to enable the project to commence. As a result these pledges have been recognised as a contingent asset.

Contingent Liabilities

Contingent liabilities are possible obligations that arise from past events,

- whose existence will be confirmed only by the occurrence or non-occurrence of one or more uncertain future vents not wholly within the control of the entity; or
- present obligations that arise from past events but are not recognised because it
 is not probable that an outflow of resources embodying economic benefits will be
 required to settle the obligations; or the amount of the obligations cannot be
 measured with sufficient reliability.

As at 30th June, 2018, WRAD had received donations towards the establishment of the Lookout Facility amounting to \$214,701 which have been recognised as income during the past two years. The Board have appropriate controls in place to manage these donations. These donations will be utilised upon the Department of Health and Human Services confirming their grant towards operational funding to enable the project to commence.

Western Region Alcohol and Drug Centre Inc. has lodged titles for property held in Warrnambool with the Australia and New Zealand Banking Group Limited, who in turn have provided an overdraft facility (undrawn as at 30/6/18).

Security against specific chattels is held for interest bearing liabilities.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE, 2018

		2018 \$	\$
Note 10.	Leasing Commitments		
	(a) Finance Leases		
	The organisation has no finance lease commitments at		
	30th June , 2018		
	(a) Operating Lease Commitment		
	The organisation has one operating lease commitment at		
	30th June, 2018.		
	Minimum lease payments due:		
	Within 1 year	4,189	4,189
	1 to 5 years	10,472	14,661
	After 5 years		
	Total	14,661	18,850

Note 11. EVENTS AFTER THE BALANCE SHEET DATE

The Committee is not aware of any events which have occurred subsequent to balance date which would materially affect the financial statements as at 30 June, 2018.



INDEPENDENT AUDIT REPORT TO THE MEMBERS OF WESTERN REGION ALCOHOL AND DRUG CENTRE INC.

Opinion

We have audited the financial report of Western Region Alcohol and Drug Centre Inc., which comprises the statement of financial position as at 30 June 2018, comprehensive income statement, statement of changes in equity, and the statement cash flows for year then ended, and notes to the financial statements, including a summary of significant accounting policies and statement by the members of the committee.

In our opinion, the accompanying financial report presents fairly, in all material respects, the financial position of the Western Region Alcohol and Drug Centre Inc. as at 30 June 2018, and its financial performance and its cash flows for the year then ended in accordance with the financial reporting requirements of the Associations Incorporation Reform Act (VIC) 2012 and the Australian Charities and Not-For-Profits Commission Act 2012.

Basis of Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Report section of our report. We are independent of the Western Region Alcohol and Drug Centre Inc. in accordance with the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 Code of Ethics for Professional Accountants (the Code) that are relevant to our audit of the financial report in Australia, and we have fulfilled our other ethical responsibilities in accordance with the Code.

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

Emphasis of Matter - Basis of Accounting

We draw attention to Note 1 to the financial report, which describes the basis of accounting. The financial report is prepared to assist Western Region Alcohol and Drug Centre Inc. in complying with the to meet the requirements of the Associations Incorporation Reform Act (Vic) 2012 and the Australian Charities and Not-For-Profits Commission Act 2012. As a result, the financial report may not be suitable for another purpose. Our opinion is not modified in respect of this matter.

Responsibilities of Management and Those Charged with Governance for the Financial Report

Management is responsible for the preparation of the financial report in accordance with the requirements of the Associations Incorporation Reform Act (Vic) 2012 and the Australian Charities and Not-For-Profits Commission Act 2012 and for such internal control as management determines is necessary to enable the preparation of a financial report that is free from material misstatement, whether due to fraud or error.

In preparing the financial report, management is responsible for assessing the Western Region Alcohol and Drug Centre Inc.'s ability to continue as a going concern, disclosing, as applicable, matters relating to going concern and using the going concern basis of accounting unless management either intends to liquidate the Western Region Alcohol and Drug Centre Inc. or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Western Region Alcohol and Drug Centre Inc.'s financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Report

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

199 Koroit Street | PO Box 677 | Warrnambool VIC 3280

P: (03) 5562 3544 | F: (03) 5562 0689 | E: admin@mhfg.com.au







As part of an audit in accordance with Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or
 error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is
 sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material
 misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve
 collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to audit 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 Western Region Alcohol and Drug Centre Inc.'s internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Western Region Alcohol and Drug Centre Inc.'s ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Western Region Alcohol and Drug Centre Inc. to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Independence

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

MCLAYEN HUNT MCLAREN HUNT AUDIT & ASSURANCE

N.L. MCLEAN PARTNER

Dated at Warrnambool 23 October 2018.





THE WESTERN REGION ALCOHOL & DRUG CENTRE INC.

ANNUAL REPORT 17/18



172 Merri Street, Warrnambool VIC 3280



Phone 1300 009 723 / 5564 5777



www.wrad.org.au

LEAD AGENCY GREAT SOUTH COAST ALCOHOL AND OTHER DRUGS TREATMENT SERVICES HANDBURY MEDICAL SUITES