

# **ANNUAL REPORT 2016-17**

**NUAA**  
NSW USERS  
AND AIDS ASSOCIATION

# CEO & CHAIRPERSON'S MESSAGE

## Mary Ellen Harrod Chief Executive Officer, NUAA

This year at NUAA has been one of consolidation of our existing programs and growth into new areas. We are working in an exciting era for people who use drugs in NSW. Accessible hepatitis C treatment has resulted in a focus on equitable access and how to address systemic stigma and discrimination in the health industry that has seen many people who use drugs excluded from life saving health care. The multiple agencies that impact our lives are starting to work together. As well as providing consultation and advice, NUAA's "Buddy Program" referred and supported more than 34 peers from the NUAA NSP to receive hepatitis C treatment.

We are extremely proud of our achievements including:

- Three successive NSP surveys demonstrated that people accessing the peer-led NUAA Needle and Syringe Program have safer injecting practices and are twice as likely to have had hepatitis C treatment that comparable programs
- Our publications broke new ground including the production of innovative User's News Treatment and Poster editions and new publication, Insider's News produced in partnership with the Justice Health and Forensic Mental Health Network and Corrective Services NSW
- A new Peer Link model was designed and delivered with local partners including the Moree Shire Council, Pius X Aboriginal Corporation and Hunter New England Local Health District (LHD)
- Our volunteer program expanded support for NUAA volunteers including Workforce Development Orders, Food Bank and a range of training by experienced NUAA trainers and external partners

We've also secured funding to work in new areas including DanceWize – a festival harm reduction intervention that will work in partnership with Harm Reduction Victoria, ACON, DPMP and NSW Health. Other exciting partnership projects see us working in new ways with Central and Eastern Sydney Primary Health Network (PHN), the Western Sydney PHN, Nepean Blue Mountains LHD, the Kirby Institute, South Western Sydney LHD, South Eastern Sydney LHD and the Network of Alcohol and other Drug Agencies (NADA).

We've said good bye to some long-term and treasured staff members including Andrew Trist and Fiona Poeder and welcomed new faces including Andy Heslop, Derek Nicholls, Jade Christian, Melanie Joyce, Sally Cushing, Dan Burns and Jessie Murray into our growing, vibrant team.



## Chris Gough Chair, NUAA Board of Governance

As a member of the community which NUAA serves it has been an amazing privilege to serve as President of the NUAA Board of Directors for the 2016-2017 year. This year has been one of growth and change for NUAA. We have seen big increases in the number of people undergoing volunteer training and donating their time to the NSP and other NUAA projects, increases in the number of staff employed at NUAA and an expansion of the number and type of programs and projects delivered by NUAA to the community. There has also been, as will be discussed in the financial section of this report, a large increase in the overall budget that NUAA has to deliver its services.

These expansions have been made possible by the dedication of the community, the staff and volunteers that make up NUAA and I would like to take a moment to acknowledge that dedication and to congratulate everyone who has made this possible. In particular I would like to thank the members of the Board of Directors who ensure that the governance of NUAA runs smoothly, all the volunteers whose countless volunteer hours make the NUAA NSP and PPP programs possible, the wonderful staff of NUAA especially those who have left this year (Andrew Trist, Brian Doyle, Margie Randel, Fiona Poeder, Megan Stapleton, Ryan Cole), those staff that have joined us this year (Andy Heslop, Derek Nicholls, Jade Christian, Melanie Joyce, Sally Cushing, Dan Burns and Jessie Murray) and of course our fearless CEO Mary Ellen Harrod for all of her resolve, energy and expertise in making NUAA what it is today. I also want to take a moment to thank our funding bodies who have seen the advantages of NUAA as a key player in the BBV and AOD sectors and have increased their commitment to NUAA as the NSW organisation that speaks for people who use drugs.

This year has seen a number of exciting advances. For the first time this year NUAA has been funded to provide peer education at dance festivals. Using the DanceWize model that has been so successful in Victoria NUAA will provide peer support and education to festival goers to keep them safe as they enjoy themselves. Our expanded peer HCV treatment workforce and consumer training in Western and Central Sydney are just two of our new partnerships and program. These programs have been made possible by the excellent representation and networking of Mary Harrod and backed up by the dedication and expertise of the peer workforce that makes NUAA a well-respected force in NSW Health service delivery.

Of course it is not possible to report back on NUAA without mentioning User's News – NUAA's voice in print; PeerLink – NUAA's voice through-out the community and NUAA's NSP – which still shines bright as an example of best practice in the field. Through the needle-prick survey results the NUAA NSP has shown a statistically significant decline in receptive sharing amongst people who use the service, proving what we have always known about community controlled peer based programs – that they work effectively through empowering the community through peer education. On top of all of this NUAA has found time to build a fantastic new website and launch its Faces of NUAA Art Project – which shows the depth of experience that makes the organisation what it is.

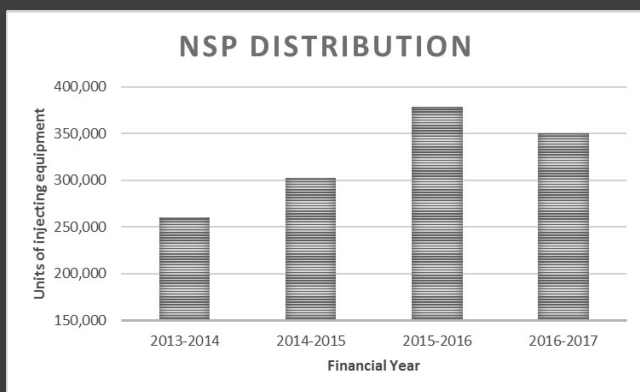
This year has truly been one of expansion and change for NUAA and it has been a pleasure to see the organisation grow and blossom. Please join me in looking back on the year that was as you read through this Annual Report, and look forward with me to the next year to be.



# NEEDLE & SYRINGE PROGRAM

## Primary NSP - 345 Crown Street Andrew Trist, Paul Giblin, Louise Aquilina

This year at the Needle & Syringe Program (NSP) has been a year of change. We updated our space to better accommodate our partnership clinic with KRC and added extra work space. The renovation allowed us to move forward into providing confidential programs to operate from the Crown St. premises. NUAA took the opportunity to expand the available equipment to promote safer injecting practices and we now stock four different brands of combined syringes that come in a range of gauges and barrel sizes.



Our increased hours from 8am till 8pm, Monday to Friday mean that we are continuing to deliver a large volume of equipment and seeing more people than ever. In 2016-2017 we distributed just over 350,000 units of equipment, 12,305 people accessed the service and 6,241 people received a referral from the NSP to other support and health services. Distribution decreased somewhat this financial year as people found the equipment that worked for them after the decrease in quality in Terumo stock.

The NSP has been proved effective with three successive surveys showing our rate of receptive sharing is significantly lower than the national and NSW average.

## Webinar on Consumer Engagement for NSP Leadership Team Andrew Trist

On the 19th of January NUAA presented a webinar to the Needle and Syringe Program (NSP) Leadership Group on Consumer Engagement. The Needle and Syringe Program Leadership Group is made up of NSP Managers from Local Area Health Districts (LHDS), NUAA and ACON. This was part of a NSW Department of Health initiative, designed to coordinate outcomes and share information across the state NSPs. The Webinar promoted the ethos of consumer and community engagement in service planning, delivery, evaluation and support.

*The Peer Participation Program has grown to 32 volunteers this year and continues to expand. Thank you to all that give their time, knowledge and skills to make NUAA NSP a great NSP.*

# PEERLINK

## Andy Heslop, Derek Nicholls & Yvonne Samuel

PeerLink has been all about community empowerment, education and harm-reduction from its inception over a decade ago. The model has constantly evolved, most recently as the Service Improvement Project carried out in partnership with the Ministry of Health, LHDs and other statewide and local partners. In 2017 we welcomed new PeerLink Officers who made Peer Link models their own.

## Central Coast LHD – Gosford Andy Heslop

PeerLink Gosford began in May 2017 and had met all its key performance indicators by October. The challenges of being new “PeerLink Officers” setting up in a new area have been far outweighed by the fantastic response we have had on the Central Coast. Working closely with our partnership site; the Gosford Primary NSP on Holden Street, and the HIV and Related Programs (HARP) team at the Central Coast Local Health District, NUAA has run 4 PeerLink workshops at the COAST Community Shelter. We have been able to interact meaningfully with 91 local peers.

The PeerLink method revolves around building and developing trust within the community, and the steady increase of peers who have attended the full 2-day PeerLink Workshop now stands at 19. The PeerLink workshop model has benefited by the tremendous support of the Liver Clinic at Gosford Hospital, and we acknowledge the support of local health services at workshops to help ‘make sense’ of Hepatitis C and the testing and treatment paradigm.

The response from local Central Coast peers has been unequivocal; they love the program and have benefited immensely. The COAST Shelter (where we run PeerLink) are grateful that we are working with their consumers to build up a more resilient and most importantly, safe, harm-reduction savvy community.

Challenges ahead will see NUAA integrate into the testing/treatment of HCV in the Gosford Community with the Buddy Program rollout into the area, and increasing our post-workshop engagement with peers.

Photo: Derek Nicholls, Nurse Practitioner Helen Blacklaws and Andy Heslop



## Hunter New England Local Health District - Moree

PeerLink Moree kicked off with service partners including the LHD, HARP and Drug Health units, PIUS X Aboriginal Corporation, the Moree Shire Council. The Moree project included training in sharps clean up in response to local needs and concerns about discarded injecting equipment. We now have a Volunteer Community Sharps Clean-up Team with five regular members who have collected more than 270 litres of discarded equipment as well as training 28 peers from the local community in harm reduction and hepatitis C treatment and prevention! Amazing success in a short period of time!

NUAA employed Derek Nicholls to be the lead on this project. Derek is a Gamilaroi man from within the community – these close ties have been fundamental to the success of the program. To date, 28 peers have been trained in Blood Borne Virus (BBV) transmission, prevention, testing and treatment and Overdose prevention. Ten peers have been trained in community sharps clean up, five peers are engaged in ongoing sharps clean-up and 273.5 litres of discarded equipment have been picked up over 4 months.

Peer Link snapshot: 2016-2017

**I enjoy giving back to the community and find (the clean up) enriching and rewarding. People stop you as you are cleaning and say stuff like “good on you mates”...”we need it here, this is excellent” - I really enjoy the feedback I get from the community and I feel respected**

Sites	No. of Peer Educators Trained	No. of Education Sessions Delivered	Events & Attendees
Moree	28	5	5 training events 4 Community Follow-up 28 participants
Central Coast	19	4	4 training events 1 Community Follow-up 19 participants

# Peer Support and Consultation

## HEPATITIS C TREATMENT SUPPORT

**Hope Everingham, Tony McNaughton, Sara Adey, Yvonne Samuel**

Australia has made a commitment to the elimination of hepatitis C by 2026 – meeting this target will require community mobilisation. Over the course of 2016-2017, direct-acting antivirals became more widely accessible to people who inject drugs, with a range of innovative strategies being trialed across the harm reduction sector.

NUAA has worked incredibly hard within a variety of partnership arrangements to support the community accessing treatment.

We worked with the Kirketon Road Centre in our weekly clinic at NUAA's NSP. This program's success has been supported by NUAA's Peer Buddy Program who mentor people who are interested in accessing testing and treatment.

Twenty-two volunteers undertook capacity building training in hepatitis prevention, assessment and treatment to support the clinic at NUAA's NSP. With the support of Sara Adey and Tony McNaughton 97 people were tested for chronic hepatitis C, 34 commenced treatment and 34 were vaccinated for hepatitis B.

We have had a number of peer support workers based at Opioid Treatment Services and NSPs in LHD funded programs, including Rankin Court St Vincent's Hospital, Hunter Pharmacotherapy and the Deadly Liver Mob/Positively Hep Project at Nepean Blue Mountains South Court NSP.

## Hunter New England Peer Support Officer Hope Everingham

I have worked the last year as Peer support specialising in hepatitis C at two of Hunter New England's Opiate Treatment Services. It has been amazing helping so many people access hepatitis c treatment

As a result of this work, more than 100 people have engaged in testing and the majority who have had chronic hepatitis C have gone on to have treatment. All but one person has cleared the virus. This is very different from the work I was doing as a Peer Support Worker for people living with hepatitis C before the new medications became available on 30 March 2016.

One person I work with has gone from struggling with lack of energy, issues with his appetite and feeling sick for the past 10 years to feeling healthy and energized. He has become one of the biggest advocates for the treatment, and now his girlfriend has decided to undertake treatment. He is actively supporting NUAA's work at the clinic, chatting to people about his experiences.

I also started work with Dr Julian Keats at Cessnock Opiate Treatment Service in March 2017. It is a rural clinic with a very different demographic. The people who use the service are excited to have a NUAA Peer Support Worker coming to their clinic twice a month. We take the Fibroscan machine up and have a backlog of peers wanting to get a scan and improve their health.

I have learnt a lot and as a Peer Worker I find it important to keep learning and upskilling. The work I do is very important, and more diverse than mentoring people around hepatitis C testing, results and treatment. I also refer people to services for support with; domestic violence, police issues, court, vein care, Needle and Syringe Program, Family and Community Services, family counselling and mental health.

I believe Peer Workers should be part of every clinic in every town in Australia.

## **Rankin Court Peer Support Worker Tony McNaughton**

I spent a very happy and productive two years working at Rankin Court, first as a consumer engagement worker and then doing hepatitis C treatment support. In my time the atmosphere in the clinic improved with service users finding the support invaluable.

Just before my work at Rankin Court finished, a survey was conducted with consumers in the waiting room. I was pretty chuffed with the results which showed that more people got information or were referred into the new hepatitis C treatment through Rankin Court's Consumer Engagement program than the more formal channels available at the Centre.

I began working with St Vincent's Hospital Hep C Clinic and found the consumer engagement work I undertook to be an extremely user-friendly way to chat to people about hep C testing and treatment.

Word got around very quickly about length of treatment, relative lack of side effects and the all-powerful Cure word. The stigma that had kept people silent on hepatitis C was disappearing at Rankin Court due to the work I was undertaking alongside medical staff.

People were getting cured and terms like "PCR negative" worked their way into everyday conversations. Seeing people being able to tick such a huge thing off their list of ALMOST TOO HARD was a huge source of collective pride.

Unfortunately, this project wrapped up at the beginning of 2017, and my time at Rankin Court came to an end but the good news is that St Vincent's found the work valuable enough to advertise and engage a consumer worker and keep working on improving services through participation and engagement.

**Seeing people being able to tick such a huge thing off their list of ALMOST TOO HARD was a huge source of collective pride.**

## **South Western Sydney Consumer Engagement Project Andrew Trist, Fiona Poeder and Jeff Wegener**

South West Sydney (SWS) LHD Drug Health Services (DHS) employed NUAA to engage a Consumer Engagement Worker to work more closely with people who inject drugs and their networks.

Jeff chatted with consumers and undertook surveys to help inform the development of a SWS Consumer Engagement Framework. In total 89 individuals responded to the question of whether they liked the concept of consumer engagement or not. This response saw 83% of individuals answering in the positive. This and more detailed information has been used to inform better practice at Fairfield Inpatient Withdrawal Management Unit (Corella) and the Liverpool Opiate Treatment Program (OTP) (Jacaranda).



# PUBLICATIONS

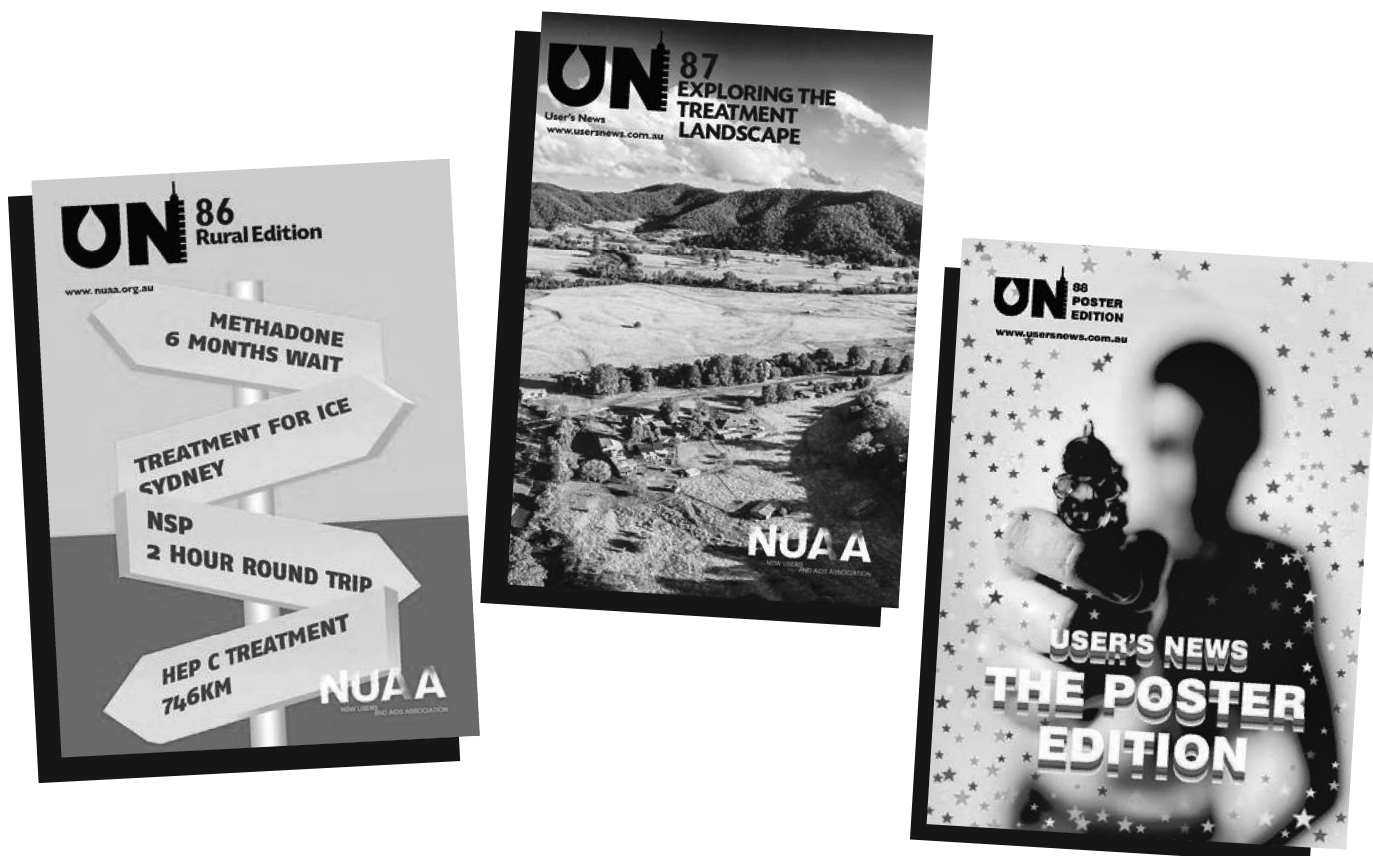
Leah McLeod, Mary Ellen Harrod

## User's News

It has been an innovative year for NUAA publications. Not only have we introduced new products, formats and subject matter, we are proud that the magazines are reaching a broader audience in terms of age, drug type and literacy level. We are also pleased that this year's publications reflect NUAA's strengthened partnerships with a wider variety of organisations working with people who use drugs. UN is now produced tri-annually and this year has seen editions spotlighting rural issues (#86), treatment goals (#87) and basic harm reduction (#88).

In supporting readers with personal goals to modify their drug use, helping them embrace all sorts of treatment and services, Edition #87 grew into a bumper issue almost twice the pages of previous issues. This was made possible with financial support from NADA and the magazine has proven a very popular "sell out" edition requiring a reprint. Readers – both users and workers alike – commented that the issue filled a much-needed gap.

Edition #88 was our first ever health promotion poster issue printed tabloid size to make it easier for readers with lower literacy levels to receive important basic harm reduction messages. Some of the content from the edition will also be printed as standalone resources including posters, stickers and fitpack inserts.

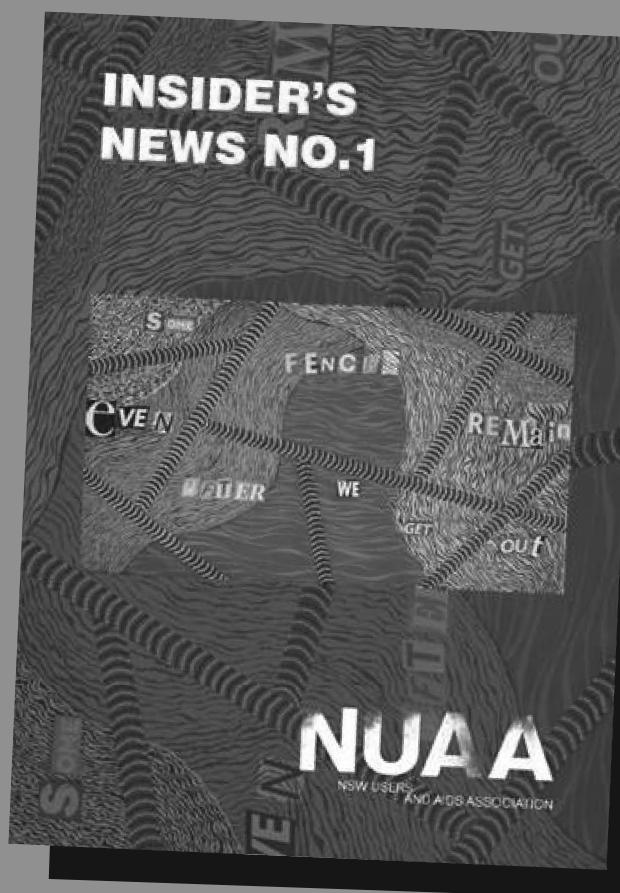


## Insider's News

This year NUAA also successfully launched a new biannual publication, Insider's News (IN). The full colour, note-book sized magazine brings a wealth of useful information to people who use drugs and are in a NSW jail. Like UN, IN is the voice of users sharing their lived experience to support and guide each other through the jail and release process, focusing on harm reduction, blood borne viruses and drug treatment.

IN represents newly crystallised partnership between NUAA, Corrective Services NSW and the Justice Health and Forensic Mental Health Network, based on our shared goal for an improved quality of life for NSW inmates. The first two editions of IN were distributed into NSW jails at the rate of one copy per 2.5 inmates and is available both in formal settings and recreational spaces.

The magazine features cover artwork by inmates, as well as a new comic, The Inside Story: The Harm Reduction Adventures of Fibble and Steely. This koala and possum inmate duo find ways to be safer in their drug use in jail. Fibble has already made a guest appearance in UN and there are plans to extend the popular pair into more NUAA products.



## Our magazines on the web

We continue to support our magazine by posting articles on the net. Our newly refurbished website [www.usersnews.org.au](http://www.usersnews.org.au) remains popular with younger UN readers and there are plans to post IN on the in-jail intranet. The Users News website was accessed over 2,700 times last year with 1,806 unique visitors and since the launch of the poster edition, we've had 354 visitors and 1,100 page views.



# TRAINING

## Volunteer Team Lucy Pepolim

The NSP Peer Participation Program continued to grow to 32 people this year. The program trains volunteers in topics including the history of drug user organisation and NUAA, principles of volunteering, BBV prevention and treatment, advocacy and brief interventions. Volunteers also complete four training shifts in the NSP and work across the organisation building work skills. The program offers volunteers the chance to reduce their fines through Workforce Development Orders, participate in a Food Bank program and attend team meetings.

Training this year included:

- 22 volunteers undertook capacity building training in Hepatitis prevention and treatment
- 18 volunteers completed NUAA PeerLink training that covers safer using including vein care, BBV prevention, treatment options and support, Overdose Management including Naloxone training and introduction to peer based organizations.
- Six volunteers attended NUAA anti-stigma and discrimination training.

## NUAA Knows How + Stigma APSAD

NUAA peers led two pre-conference training sessions at the APSAD Conference in Sydney – NUAA Knows How and Stigma and Discrimination Training. The sessions were well attended and had great feedback.

## Stigma and Discrimination Fiona Poeder

NUAA has spent 2016-2017 working towards accreditation of the 'NUAA Stigma and Discrimination Training Module' for GPs through The Royal Australian College of General Practitioners (RACGP). This included the establishment of the Advisory Committee and approval to participate in Education Activity Representative (EAR) Training through the RACGP.

NUAA has also been working closely with NADA on the 'Language Matters' resource which led to sponsorship at the Contemporary Drugs Conference (CDP) later in the financial year.

NUAA was engaged by AIVL to assist with the development of the 'Podcast Series – A Normal Day', a resource targeting GPs, with a 5-part series of interviews that focus on the premise that for all people who use drugs a doctor visit can be a "normal day"

# RESOURCES & OTHER PROJECTS

## OVERDOSE AWARENESS DAY

**Andy Heslop, Andrew Trist, Yvonne Samuel, Lucy Pepolim**  
**Overdose Awareness Day, 31st August, 2017**

International Overdose Awareness Day aims to raise awareness on the preventable tragedy of overdose.

NUAA's has a strong history in building and supporting strategies to reduce the incidence of overdose from drugs. Our challenge this year was to create a meaningful campaign that sent out the universal message "We fight for those we love". With the help of some tireless peer workers, we were privileged to be allowed to film some members of our community and produce short, personal videos on overdose, covering a broad base of experiences that were encapsulated into three main topics "Overdose Is Preventable" "Every Life Matters" and "Save a Mate".

Overdose Awareness Day 2017 was a great success with NUAA's partner event on the day being held in ACON's Café space. Partner Organisations included; International Overdose Awareness Day Organisation, Family Drug Support, ACON, Students for Sensible Drug Policy Australia, Kirketon Road Centre and The Noffs Foundation.

There were a number of powerful presentations which took attendees to the heart of the matter of overdose, loss and grief. These included Tony Trimmingham's personal experiences of losing his son to overdose and Terry's personal story of overdose (also shared on video through our web and Facebook pages) which provided insight into how preventable opiate overdose is and just how much every life matters

The event attracted over 100 people and included demonstrations and free-samples of drug-testing kits, Naloxone training and distribution to people at risk of opiate overdose.

- How to Recognise an Overdose was viewed on Facebook 4,674 and shared 59 times, – a new record for NUAA.
- How to Respond to an Overdose was viewed 1,900 times on Facebook and shared 13 times.
- The Party Safe video was posted on Facebook and the website and this was viewed 8,185 times and shared 21 times.
- Terry's Story Heroin Overdose is Preventable was viewed by 8,350 people on Facebook and was shared 3 times

*We fight  
for Those we love*

**Every Life Counts**

**NUAA**  
NSW USERS  
AND AIDS ASSOCIATION

**X**  
**International Overdose  
Awareness Day**

## HOW TO RECOGNISE AN OVERDOSE

Signs of an opioid (heroin, fentanyl, oxys) overdose

Shallow breathing, breathing not regular, not breathing

Unusual snoring sounds (gurgling, choking)

Blue lips and fingertips (if light skinned)

Grayish or ashen lips and fingertips (if dark skinned)

Can't be woken up

It's not always easy to tell the difference between an overdose and sleeping - make sure your friends and family are safe - don't leave them to sleep it off

## HOW TO RESPOND TO AN OVERDOSE

If your friend or family member is overdosing

Call an Ambulance

Put them the recovery position

Administer naloxone if they've had opioids

Stay with them until you're sure they're safe

## Support Don't Punish Day of Action

On 26 June, NUAA joined the "Support Don't Punish Day of Action". Support Don't Punish is a global advocacy campaign calling for better drug policy. The Day of Action highlights the fact that fear of punishment, stigma and secrecy surrounding drug use stands in the way of access to healthcare and services

NUAA used the occasion to launch the Faces of NUAA project and our new Website.

The "Faces of NUAA" project aims to breakdown stereotypes by telling rich and complex stories from the NUAA family with portraits by acclaimed Sydney photographer Chris Peken.

NUAA's new website includes a wealth of peer-developed and approved health resources for people who use drugs.

Since launching the Website on 26 June, the Website has been well received with 60% of users accessing the Website being aged between 18-34 and visitors spending on average at least 5 minutes. The Website has also been a great way to recruit new volunteers for DanceWize and Consumer Academy and collect Membership renewals and payments.

NUAA has launched a web-based membership platform, Member Planet, which will support timely renewals and communication.. Member planet allows NUAA to keep members informed about NUAA latest work and campaigns. Over the past 12 months NUAA has 23 emails campaigns to our members keeping them informed of upcoming events at NUAA.



## NUAA Memorial: March 2

People who use drugs are too familiar with untimely deaths of friends and lovers. Over a period of just a few short months, we sadly lost a number of peers associated with NUAA's PeerLink and PPP from overdose. In order to celebrate the lives of these members of our community, NUAA hosted an event in a local hotel that was attended by NUAA staff, peers and friends of the deceased. People talked about and toast lost friends, writing their names on pebbles and taking home pot plants to commemorate the ongoing influence those friendships. It was a very moving ceremony that bonded the community of people who use drugs. All who attended felt that this kind of event helped the grief process, connected us in important ways and increased our resolution to look after each other.

# REPRESENTATION

The community of people who use drugs in NSW was represented by NUAA across multiple forums.

## Research

- BRISE (Kirby Institute)
- STOP-C (Kirby)
- Liver Life (Kirby)
- Naloxone TRGS (SES LHD)
- Consumer Led Research Network (NADA)
- DARLO C
- ETHOS II (Kirby)
- Couples Project (CSRH)
- Patient Recorded Experience Measure Project (SES LHD)
- NSP Minimum Data Set Reference Group (Kirby)

## BBV and STI

- NSW Hepatitis B & C Communications Strategy Advisory Committee (Hepatitis NSW)
- South East Sydney Local Health District Hepatitis Implementation Committee
- Hepatitis Implementation Committee (NSW MoH)
- NSW Health Needle and Syringe Program Advisory Group (NSW MoH)
- Ministerial Advisory Committee on Blood Borne Viruses and Sexually Transmissible Infections (Commonwealth DOHA) (Mary Ellen Harrod as individual representative on behalf of AIVL)
- Data Advisory Group Hepatitis B and C Strategies (NSW MoH)
- NSW Needle and Syringe Program Planning Network (NSW MoH)
- JH&FMHN
- HIV Implementation Committee
- Sydney LHD Service Redesign Project
- HealthNet Pathology Program: Defining a list of sensitive results - community groups consultation – STIs
- Blood Borne Viruses and Sexually Transmissible Infections Standing Committee (MEH on behalf of AIVL)
- Corrective Services NSW & JH&FMHN (Insider's News Advisory Committee)

## AOD

- Drug and Alcohol Program Council (NSW MoH)
- Partnerships in Health Drug and Alcohol Reference Group (NSW MoH)
- Quality in Treatment (NSW MoH)
- Treatment Services Specification Project (NADA)
- Agency for Clinical Innovation Drug and Alcohol Executive (ACI)
- Clinical Outcome Quality Indicators Project (SES LHD)
- APSAD Scientific Programming Committee
- Went West PHN AOD Advisory Council
- CES PHN AOD Advisory Council
- Illicit Drugs Adaptive Co-Design Project

# Public Speaking/Presentations

## **July 2016**

Illawara Shoalhaven Viral Hepatitis Planning Workshop

## **August 2016**

Cross-Party Parliamentary Harm Minimisation Summit, Sydney (MEH)

## **September 2016**

Australasian Viral Hepatitis Conference: Prevalence of Hepatitis C among Aboriginal and Torres Strait Islander Australians: A meta-analysis (MEH)

Australasian Viral Hepatitis Conference: Peer Support Increases Access to Hepatitis C Treatment in Drug and Alcohol Settings (YS)

Australasian Viral Hepatitis Conference: Community & Social Research - Good community responses to priority populations (YS)

## **October 2016**

National Indigenous Drug and Alcohol Conference: Emerging and Continuing Issues Needing Urgent Consideration if Closing the Gap is to be Achieved by 2030 (MEH Panelist)

HIV and Related Programs Forum: Consumer's role in the roll out of hepatitis C treatment in NSW (MEH Panelist)

## **November 2016**

APSAD Conference: Peer Support Improves Treatment Outcomes and Treatment Access in Opioid Substitution Settings (Oral presentation – MEH and TM)

Sydney Community Health Network Annual General Meeting: Equal access to better health outcomes for people who use drugs in Central and Eastern Sydney (MEH)

11th National Harm Reduction Conference: Harnessing the Expertise of Peer Educators in Health Promotion and Disease Prevention. San Diego, USA (MS)

## **December 2016**

UNSW Practical Justice Initiative Conference: Doing prevention and service provision differently for vulnerable young people (RC YS)

Rotary Club of Turramurra: Invited speaker (MEH)

## **February 2017**

NSW Health HIV and Crystal Methamphetamine User Panel (MEH)

## **March 2017**

South West Sydney LHD NSP Planning Workshop (MEH)

Launch of the Australia 21 Report (MEH)

AFAO BBV STI Research Roundtable (MEH Panelist as AIVL ACEO)

## **April 2017**

Kirketon Road Symposium: Promoting Integrated Care Models to Achieve "Health for All" (MEH Panelist)

## **May 2017**

Harm Reduction International: Elimination of hepatitis C: Don't dream it, be it – a service provider's update on the Sydney experience, Montreal (MEH)

Harm Reduction International: Reaching the so-called hard-to-reach: the efficacy of peer education in isolated communities in New South Wales, Australia, Montreal (YS)

## **June 2017**

Country Mayors Association: Moree Project, Sydney (MEH)

## **SUBMISSION/ OTHER KEY EVENTS**

Public Health Act Review (submission)

Medically Supervised Injecting Centre Review (submission)

Opioid Treatment Guidelines Review (LM, FB, MEH)



# AUDITOR'S REPORT

**NEW SOUTH WALES USERS AND AIDS ASSOCIATION INC**  
ABN 99 709 346 020  
**STATEMENT OF PROFIT OR LOSS AND OTHER COMPREHENSIVE INCOME**  
**FOR THE YEAR ENDED 30 JUNE 2017**

	Note	2017 \$	2016 \$
Revenue	2	1,664,858	1,664,415
Employee benefits expense		(1,105,313) ✓	(1,128,575)
Depreciation and amortisation expenses	3	(13,956)	(11,674)
Project consumable equipment expenses		(124,102)	(116,581)
Rent		(65,764)	(60,715)
Travel and accommodation expenses		(45,264)	(29,382)
Other expenses		(293,281)	(295,991)
<b>Current year surplus / (deficit) before income tax</b>		<u>17,178</u>	<u>21,497</u>
Income tax expense	1	-	-
<b>Net current year surplus / (deficit)</b>		<u>17,178</u>	<u>21,497</u>
Other comprehensive income		-	-
<b>Net current year surplus/ (deficit) attributable to members of the entity</b>		<u>17,178</u>	<u>21,497</u>

The accompanying notes form part of these financial statements.

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# AUDITOR'S REPORT

**NEW SOUTH WALES USERS AND AIDS ASSOCIATION INC**  
**ABN 99 709 346 020**

**STATEMENT OF FINANCIAL POSITION**  
**AS AT 30 JUNE 2017**

	Note	2017 \$	2016 \$
<b>CURRENT ASSETS</b>			
Cash and cash equivalents	5	607,805	326,081
Trade and other receivables	6	27,343	25,580
Other current assets	7	2,246	2,420
<b>TOTAL CURRENT ASSETS</b>		<u>637,394</u>	<u>354,081</u>
<b>NON-CURRENT ASSETS</b>			
Property, plant and equipment	8	39,044	53,000
<b>TOTAL NON-CURRENT ASSETS</b>		<u>39,044</u>	<u>53,000</u>
<b>TOTAL ASSETS</b>		<u>676,438</u>	<u>407,081</u>
<b>CURRENT LIABILITIES</b>			
Trade and other payables	9	371,259	148,295
Provisions	10	122,432	93,217
<b>TOTAL CURRENT LIABILITIES</b>		<u>493,691</u>	<u>241,512</u>
<b>TOTAL LIABILITIES</b>		<u>493,691</u>	<u>241,512</u>
<b>NET ASSETS</b>		<u>182,747</u>	<u>165,569</u>
<b>EQUITY</b>			
Retained Earnings		182,747	165,569
<b>TOTAL EQUITY</b>		<u>182,747</u>	<u>165,569</u>

The accompanying notes form part of these financial statements.

# AUDITOR'S REPORT

**NEW SOUTH WALES USERS AND AIDS ASSOCIATION INC**  
**ABN 99 709 346 020**

**STATEMENT OF CASH FLOWS**  
**FOR THE YEAR ENDED 30 JUNE 2017**

	Note	2017 \$	2016 \$
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>			
Cash Receipts from operating activities		1,825,825	1,829,605
Payments to suppliers and employees		(1,547,673)	(1,870,152)
Interest received		3,572	7,125
<b>NET CASH PROVIDED BY (USED IN) OPERATING ACTIVITIES</b>	<b>13</b>	<b><u>281,724</u></b>	<b><u>(33,422)</u></b>
Proceeds from disposal of property, plant and equipment		-	11,364
Purchase of property, plant and equipment		-	(31,455)
<b>NET CASH PROVIDED BY (USED IN) INVESTING ACTIVITIES</b>		<b><u>-</u></b>	<b><u>(20,091)</u></b>
<b>NET INCREASE/(DECREASE) IN CASH HELD</b>		<b>281,724</b>	<b>(53,513)</b>
CASH AT THE BEGINNING OF THE FINANCIAL YEAR		326,081	379,594
<b>CASH AT THE END OF THE FINANCIAL YEAR</b>	<b>5</b>	<b><u>607,805</u></b>	<b><u>326,081</u></b>

The accompanying notes form part of these financial statements.

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# AUDITOR'S REPORT

NEW SOUTH WALES USERS AND AIDS ASSOCIATION INC  
ABN 99 709 346 020

STATEMENT OF CHANGES IN EQUITY  
FOR THE YEAR ENDED 30 JUNE 2017

	RETAINED EARNINGS	TOTAL
	\$	\$
Balance at 1 July 2015	144,072	144,072
Net surplus for the year	21,497	21,497
Balance at 30 June 2016	<u>165,569</u>	<u>165,569</u>
Net surplus for the year	17,178	17,178
Balance at 30 June 2017	<u>182,747</u>	<u>182,747</u>

The accompanying notes form part of these financial statements.

# AUDITOR'S REPORT

**NEW SOUTH WALES USERS AND AIDS ASSOCIATION INC**  
**ABN 99 709 346 020**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 30 JUNE 2017**

**NOTE 1- STATEMENT OF SIGNIFICANT ACCOUNTING POLICIES**

**Basis of Preparation**

New South Wales Users and Aids Association Inc. (the association) applies Australian Accounting Standards – Reduced Disclosure Requirements as set out in AASB 1053 : Application of Tiers of Australian Accounting Standards . The financial statements are general purpose financial statements that have been prepared in accordance with Australian Accounting Standards – Reduced Disclosure Requirements of the Australian Accounting Standards Board (AASB) and the Associations Incorporation Act New South Wales 2009. The association is a not-for-profit entity for financial reporting purposes under Australian Accounting Standards. Australian Accounting Standards set out accounting policies that the AASB has concluded would result in financial statements containing relevant and reliable information about transactions, events and conditions. Material accounting policies adopted in the preparation of the financial statements are presented below and have been consistently applied unless stated otherwise.

The financial statements, except for the cash flow information, have been prepared on an accrual basis and are based on historical costs, modified, where applicable, by the measurement at fair value of selected non-current assets, financial assets and financial liabilities. The amounts presented in the financial statements have been rounded to the nearest dollar.

**Income Tax**

The association has been advised by the Australian Taxation Office that it is exempt from income tax.

**Property, Plant and Equipment**

Each class of property, plant and equipment is carried at cost less, where applicable, any accumulated depreciation and impairment losses.

Property, plant and equipment are measured on the cost basis less depreciation and impairment losses. The carrying amount of property, plant and equipment is reviewed annually by the Association to ensure it is not in excess of the recoverable amount from those assets. The recoverable amount is assessed on the basis of the expected net cash flows that will be received from the assets' employment and subsequent disposal. The expected net cash flows have not been discounted to their present values in determining recoverable amounts.

**Depreciation**

The depreciable amount of all fixed assets, including buildings and capitalised lease assets, but excluding freehold land, is depreciated on a diminishing value and straight line basis over their useful lives to the Association commencing from the time the asset is held ready for use.

The depreciation rates used for each class of depreciable asset are:

<b>CLASS OF FIXED ASSET</b>	<b>DEPRECIATION RATE</b>
Plant and Equipment	10% - 20%

**Impairment of Assets**

At each reporting date, the Association reviews the carrying values of its tangible assets to determine whether there is any indication that those assets have been impaired. If such an indication exists, the recoverable amount of the asset, being the higher of the to the asset's carrying value. Any excess of the asset's carrying value over its recoverable amount is expensed as an impairment loss. The asset's fair value less costs to sell and value in use, is compared in the statement of comprehensive income.

# AUDITOR'S REPORT

**NEW SOUTH WALES USERS AND AIDS ASSOCIATION INC**  
**ABN 99 709 346 020**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 30 JUNE 2017**

**NOTE 1- STATEMENT OF SIGNIFICANT ACCOUNTING POLICIES (CONT'D)**

**Employee Benefits**

Provision is made for the Association's liability for employee benefits arising from services rendered by employees to balance date. Employee benefits arising from annual leave and long service leave have been measured at their nominal amount.

Contributions are made by the Association to employee superannuation funds and are charged as expenses when incurred.

**Revenue**

Non-reciprocal grant revenue is recognised in the statement of comprehensive income when the entity obtains control of the grant and it is probable that the economic benefits gained from the grant will flow to the entity and the amount of the grant can be measured reliably.

If conditions are attached to the grant which must be satisfied before it is eligible to receive the contribution, the recognition of the grant as revenue will be deferred until those conditions are satisfied.

When grant revenue is received whereby the entity incurs an obligation to deliver economic value directly back to the contributor, this is considered a reciprocal transaction and the grant revenue is recognised in the statement of financial position as a liability until the service has been delivered to the contributor, otherwise the grant is recognised as income on receipt.

The association receives non-reciprocal contributions of assets from the government and other parties for zero or a nominal value. These assets are recognised at fair value on the date of acquisition in the statement of financial position, with a corresponding amount of income recognised in the statement of comprehensive income.

Revenue from the sale of goods is recognised upon the delivery of the goods to customers. Interest revenue is recognised on a proportional basis taking into account the interest rates applicable to the financial assets. Revenue from the rendering of a service is recognised upon the delivery of the service to the customers.

All revenue is stated net of the amount of goods and services tax (GST).

**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 tax office. In these circumstances the GST is recognised as part of the cost acquisition of the asset or as part of an item of the expense. Receivables and payables in the statement of financial position are shown inclusive of GST.

**Cash and Cash Equivalents**

For the purpose of the statement of cash flows, cash includes:

- (i) cash on hand and at call deposits with banks or financial institutions, net of bank overdrafts; and
- (ii) investments in money market instruments.

Cash and cash equivalents include cash on hand, deposits held at-call with banks, other short-term highly liquid investments with original maturities of three months or less, and bank overdrafts. Bank overdrafts are shown within borrowings in current liabilities on the balance sheet.

# AUDITOR'S REPORT

**NEW SOUTH WALES USERS AND AIDS ASSOCIATION INC**  
**ABN 99 709 346 020**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 30 JUNE 2017**

**NOTE 1- STATEMENT OF SIGNIFICANT ACCOUNTING POLICIES (CONT'D)**

**Critical Accounting Estimates and Judgments**

The committee's members evaluate estimates and judgments incorporated into the financial report 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 each reporting date by evaluating conditions specific to the Association that may lead to impairment of assets. Where an impairment trigger exists, the recoverable amount of the asset is determined. Value-in-use calculations performed in assessing recoverable amounts incorporate a number of

**Comparative Figures**

Where required by Accounting Standards comparative figures have been adjusted to conform with changes in presentation for the current financial year.

**Australian Accounting Standards Not Yet Effective**

The Association has not yet applied any Australian Accounting Standards or Interpretations that have been issued at balance date, but are not yet operative for the year ended 30 June 2017. (the "Inoperative Standards"). The impact of the Inoperative Standards has been assessed and identified as not being material. The Association intends to adopt Inoperative Standards at the date which their adoption becomes mandatory.

**NOTE 2- REVENUE**

	2017	2016
	\$	\$
<b>Operating Activities:</b>		
Grant Income	1,459,903	1,559,577
Gain on disposal	-	4,081
Sundry Income	36,481	15,540
Interest received	3,572	7,125
Project fee income	164,902	78,092
Total Revenue	1,664,858	1,664,415

**NOTE 3- PROFIT / (LOSS) FROM ORDINARY ACTIVITIES**

Profit from ordinary activities before income tax has been determined after:

**(a) Expenses**

Depreciation of Non-Current Assets:	13,956	11,674
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**(b) Revenue and Net Gains**

Net Gain / (loss) on Disposal of Non-Current Assets		
Property, plant and equipment:	-	4,081
	-	4,081

# AUDITOR'S REPORT

**NEW SOUTH WALES USERS AND AIDS ASSOCIATION INC**  
**ABN 99 709 346 020**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 30 JUNE 2017**

**NOTE 4- REMUNERATION OF AUDITORS**

Remuneration of the Auditor of the Association for: Auditing the Financial Report	10,400	9,900
	<u>10,400</u>	<u>9,900</u>

**NOTE 5- CASH AND CASH EQUIVALENTS**

Cash at bank	606,684	325,080
Cash on deposit	640	520
Cash on hand	481	481
	<u>607,805</u>	<u>326,081</u>

**NOTE 6- TRADE AND OTHER RECEIVABLES**

Trade Receivable	27,343	25,580
Other Debtors	-	-
	<u>27,343</u>	<u>25,580</u>

**NOTE 7- OTHER CURRENT ASSETS**

Prepayments	2,246	2,420
	<u>2,246</u>	<u>2,420</u>

**NOTE 8 -PROPERTY PLANT AND EQUIPMENT**

Plant & Equipment - at cost	228,358	228,358
Less: Accumulated Depreciation	(189,314)	(175,358)
	<u>39,044</u>	<u>53,000</u>

**Movements in Carrying Amounts**

Movement in the carrying amounts for each class of property, plant and equipment between the beginning and the end of the current financial year:

	<b>Plant &amp; Equipment</b>	<b>Total</b>
	<b>\$</b>	<b>\$</b>
Balance at the beginning of year	53,000	53,000
Additions	-	-
Disposals	-	-
Depreciation / Amortisation	(13,956)	(13,956)
Carrying amount at the end of year	<u>39,044</u>	<u>39,044</u>

**NOTE 9 -TRADE AND OTHER PAYABLES**

**Unsecured Liabilities**

Trade Creditors & Accrued Charges	145,553	88,503
Grants in Advance	225,706	59,792
	<u>371,259</u>	<u>148,295</u>

**NOTE 10 -PROVISIONS**

Employee Benefits	122,432	93,217
	<u>122,432</u>	<u>93,217</u>



# AUDITOR'S REPORT

**NEW SOUTH WALES USERS AND AIDS ASSOCIATION INC**  
**ABN 99 709 346 020**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 30 JUNE 2017**

**NOTE 11 - SEGMENT REPORTING**

The association's activities are the conduct of health promotion, support and referral services for people who use drugs illicitly in New South Wales affected by HIV and Hepatitis C.

**NOTE 12 - ASSOCIATION DETAILS**

The principal place of business of the association is:

New South Wales Users and Aids Association Inc  
Level 5, 414- 418 Elizabeth Street  
Surry Hills NSW 2010

**NOTE 13 - RECONCILIATION OF CASH FLOW FROM OPERATIONS WITH PROFIT/(LOSS)  
AFTER INCOME TAX.**

	2017 \$	2016 \$
Profit/(loss)	17,178	21,497
<b>Non-cash flows in profit/(loss)</b>		
Depreciation/Amortisation	13,956	11,674
Profit on disposal	-	(4,081)
<b>Changes in Assets and Liabilities</b>		
(Increase)/Decrease in Trade Receivables	(1,589)	9,175
Increase/(Decrease) in Trade & other payables	222,964	(66,540)
Increase/(Decrease) in Provisions	29,215	(5,147)
<b>CASH FLOW FROM OPERATIONS</b>	<u>281,724</u>	<u>(33,422)</u>

**NOTE 14 - RELATED PARTY TRANSACTIONS**

Related parties include close family members of key management personnel and entities that are controlled or jointly controlled by those key management personnel individually or collectively with their close family members.

Transactions between related parties are on normal commercial terms and conditions no more favourable than those available to other persons unless otherwise stated.

During the year ended 30 June 2017, The association paid \$17,805 to Mr. Ivan Rhule for the association's website and publication graphic design.

# AUDITOR'S REPORT


NEW SOUTH WALES USERS AND AIDS ASSOCIATION INC  
ABN 99 709 346 020

## STATEMENT BY MEMBERS OF THE COMMITTEE

In the opinion of the members of the committee the financial report:

1. Presents a true and fair view of the financial position of New South Wales Users and Aids Association Inc. as at 30 June 2017 and its performance for the year ended on that date in accordance with Australian Accounting Standards – Reduced Disclosure Requirements of the Australian Accounting Standards Board and the requirements of the Associations Incorporation Act New South Wales 2009.
2. At the date of this statement, there are reasonable grounds to believe that New South Wales Users and Aids Association Inc. will be able to pay its debts as and when they fall due.

Signed in accordance with subsection 60.15(2) of the Australian Charities and Not-for-profit Commission Regulation 2013.

  
\_\_\_\_\_  
President  
\_\_\_\_\_  
Treasurer

Sydney  
Date:

22/9/17

# AUDITOR'S REPORT

**INDEPENDENT AUDITOR'S REPORT  
TO THE MEMBERS OF  
NEW SOUTH WALES  
USERS AND AIDS ASSOCIATION INC.**



**ABN 99 709 346 020**

**Report on the Financial Report**

Opinion:

We have audited the accompanying financial report of New South Wales Users and Aids Association Inc. which comprises the statement of financial position as at 30 June 2017, the statement of profit or loss, statement of comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, notes comprising a summary of significant accounting policies and other explanatory information, and the statement by members of the committee on the annual statements giving a true and fair view of the financial position and performance of the association.

In our opinion, the accompanying financial report of New South Wales Users and Aids Association Inc is in accordance with the Associations Incorporation Act New South Wales 2009, including:

- i. giving a true and fair view of the association's financial position as at 30 June 2017 and of its financial performance for the year then ended;
- ii. that the financial records kept by the association are such as to enable financial statements to be prepared in accordance with Australian Accounting Standards – Reduced Disclosure Requirements;
- iii. complying with the funding and performance agreement with the NSW Ministry of Health; and
- iv. complying with Div 60 of the ACNC Act 2012.

**Basis for 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 association 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. We have also 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.

**Information Other than the Financial Report and Auditor's Report Thereon**

The Board of Governance of the association is responsible for the other information. The other information comprises the information included in the association's annual report for the year ended 30 June 2017, but does not include the financial report and our auditor's report thereon. Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon. In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

**Responsibilities of The Board of Governance for the Financial Report**

The Board of Governance of the association is responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards – Reduced Disclosure Requirements and the Associations Incorporation Act New South Wales 2009 and for such internal control as the committee determines is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

Principal: David Conroy FCA

Address:  
Level 2, 154 Elizabeth Street  
Sydney NSW 2000

Telephone: 02 9267 9227  
Fax: 02 9261 3384

Email:  
admin@bryanrush.com.au  
ABN: 95 373 401 379

# AUDITOR'S REPORT

In preparing the financial report, the Board is responsible for assessing the ability of the association to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Board either intends to liquidate the association or to cease operations, or has no realistic alternative but to do so.

## ***Auditor's Responsibilities for the Audit of the Financial Report***

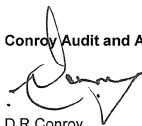
Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the 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.

As part of an audit in accordance with the 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 the 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 association's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the committee.
- Conclude on the appropriateness of the committee'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 association'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 association 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 the Board 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.

**Conroy Audit and Advisory**



D R Conroy  
Principal

Sydney  
Date : 22-Sep-17


# AUDITOR'S REPORT

**NEW SOUTH WALES USERS AND AIDS ASSOCIATION INC  
ABN 99 709 346 020**

**DISCLAIMER**

The additional financial data – Statement of Income and Expenditure as presented on the following page is in accordance with the books and records of New South Wales Users and Aids Association Inc. Which have been subjected to the auditing procedures applied in our statutory audit of the Association for the year ended 30 June 2017. It will be appreciated that our statutory audit did not cover all details of the additional data. Accordingly, we do not express an opinion on such financial data and no warranty of accuracy or reliability is given. Neither the firm nor any member or employee of the firm undertakes responsibility in any way whatsoever to any person, other than the Association, in respect of such data, including any errors or omissions therein however caused.

**Conroy Audit and Advisory**



D R Conroy  
Principal

Sydney  
Date : 22-Sep-17

# AUDITOR'S REPORT

**NEW SOUTH WALES USERS AND AIDS ASSOCIATION INC**  
**ABN 99 709 346 020**  
**STATEMENT OF INCOME AND EXPENDITURE**  
**FOR THE YEAR ENDED 30 JUNE 2017**

	Note	2017 \$	2016 \$
<b>INCOME</b>			
Interest Received		3,572	7,125
Grants - Department of health		1,459,903	1,559,577
Grants - Unexpended funds		-	-
Gain on Disposal of Assets		-	4,081
Project fee income		164,902	78,092
Sundry Income		36,481	15,540
		<u>1,664,858</u>	<u>1,664,415</u>
<b>Less: EXPENSES</b>			
Advertising		4,477	9,211
Auditor's remuneration		10,400	9,900
Bank Charges		1,746	1,539
Consultancy Fees		57,460	52,613
Computer Expenses		20,452	35,562
Depreciation		13,956	11,674
Insurance		14,216	14,750
Motor Vehicle Expenses		18,188	16,412
Printing, Postage and Stationery		49,781	44,503
Provision for Holiday pay		8,672	(8,509)
Provision for Long Service Leave		20,543	3,363
Program Support Services		174,577	173,831
Rent (including Lessors Costs)		65,764	60,715
Repairs and maintenance		1,194	1,941
Staff Training & Conference		8,037	13,129
Staff Amenities		7,565	4,655
Subscriptions/Reference Materials		3,719	3,559
Salaries & Wages		984,049	1,033,112
Superannuation contributions		92,049	95,584
Sundry Expenses		2,058	679
Telephone		23,650	17,076
Travelling expenses		45,264	29,382
Workers' Compensation		19,863	18,237
		<u>1,647,680</u>	<u>1,642,918</u>
<b>OPERATING SURPLUS/(DEFICIT)</b>		<u>17,178</u>	<u>21,497</u>

The accompanying notes form part of these financial statements.

