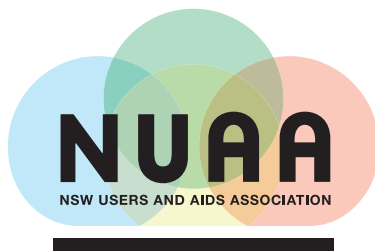




ANNUAL REPORT

2020 – 2021

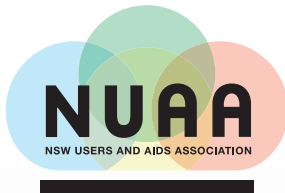


Acknowledgement of Country

NUAA would like to acknowledge the Gadigal people of the Eora Nation as the traditional custodians of the land on which we operate; sovereignty was never ceded. We pay our respects to their elders past and present. NUAA would also like to extend this respect to all First Nations Peoples upon whose land NUAA may work.

Community Acknowledgement

NUAA is a peer based, community-controlled drug user organisation. We represent the voices and needs of drug-using communities in NSW. NUAA and the community of people who inject drugs were instrumental in averting the HIV epidemic and we remain central to improving the health and human rights of all People Who Use Drugs in NSW. We would like to take this opportunity to acknowledge the legacy of the peers who went before us and reaffirm our commitment to fighting the effects of stigma and criminalisation in all their manifestations.



**Advancing the health, human rights and dignity of
people who use or have used illicit drugs.**

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NUAA’s Strategic Plan 2020–2024

Strategic Priorities and key focus areas:

Strategic Priority 1: INNOVATIVE SERVICE DELIVERY

- Develop state-wide peers’ and consumers’ network
- Increase our reach to diverse communities
- Reduce stigma and discrimination through peer and workforce development

Strategic Priority 2: COMMUNITY SUPPORT AND DEVELOPMENT

- Trial new harm reduction and treatment access projects
- Initiate and evaluate peer-led research, and promote an evidence-based approach to service delivery

Strategic Priority 3: SYSTEM CHANGE

- Develop strategic partnerships
- Influence public policy and research agenda
- Support the development of harm reduction and AoD peer workforces

Strategic Priority 4: ORGANISATIONAL DEVELOPMENT

- Increase diversity in staff profile
- Continue to support and increase professional development
- Continue to increase funding and diversify revenue streams
- Support the development of research capacity within the organisation


NUAA’s Board of Governance

- | | |
|------------------------------------|---|
| • Fiona Poeder (Chair) | • Dr Robert Page |
| • Dan Burns (Vice Chair) | • Timothy Parsons |
| • Jennifer Debenham
(Secretary) | • Carolyn Stublely |
| • Larry Pierce (Treasurer) | • Richard Sulovsky |
| • Brian Doyle | • Dr Mary Ellen Harrod
(CEO, ex officio) |




NUAA Staff

1 July 2020 – 30 June 2021

Executive

- Dr Mary Ellen Harrod, Chief Executive Officer
- Charles Henderson, Deputy Chief Executive Officer
- Kylie Fegan, Director of Programs 

Blood Borne Virus (BBV) Team

- Lucy Pepolim, Peer Support Program Lead
- Andrew Heslop, BBV Outreach Lead
- Nikkas Skelley, NSP Specialist
- Adam Beres, Outreach Specialist 
- Rochelle Aylmer, Outreach Specialist
- Louise Aquilina, NSP Worker
- Shannen Rose, NSP Worker 
- Nicole Skelley, NSP Specialist
- Tony McNaughton, NSP and Primary Care Health Clinic (HCV) Peer Support Specialist
- Jade Christian, Aboriginal Peer Educator and Support Worker
- Cheryl Woods, NSP Worker
- Felicity Pobje, NSP Worker
- Alain Jenart, Peer Worker
- Louisa Jansen, HCV Peer Worker 
- Rodney Hinton, HCV Peer Worker
- Hope Everingham, HCV Worker
- Anne Sweeney, HCV Peer Worker

Executive & Leadership Team



Dr Mary Ellen
Harrod

Charles
Henderson

Lucy
Pepolim

Leah
McLeod



Andrew
Heslop

Alice
Pierce




Georgina
Bell

Anntonia
Golovataia


Communications and Community Engagement Team


- Leah McLeod, Communications and Community Engagement Program Lead
- Alice Pierce, Community Engagement Project Lead
- Thomas Capell-Hattam, Communications Specialist / Short term projects and advocacy specialist 
- Justin McKee, Community Engagement and Advocacy Specialist
- Gulliver McLean, Communications Specialist
- Kareem Soliman, Special Projects and Advocacy Specialist 
- Kali Karnivale, Special Projects and Advocacy Specialist 
- Veronica Ganora, Community Engagement Specialist
- Hela Caward, Communications Worker 
- Antony Iltis, Communications Worker
- Kylie Hull, PeerLine and Administration Worker
- William-Marshall Hodges, PeerLine and Administration Worker

DanceWize NSW (DWNSW) Team

- Georgina Bell, DWNSW Lead
- Erica Franklin, DWNSW Coordinator
- Adam Smith, DWNSW Coordinator 
- Clancy Beckers, DWNSW Casual Coordinator
- Tarek Zein, DWNSW Casual Coordinator
- Jane Lo, DWNSW Casual Administration
- Jason Gregory-Jones, DWNSW Casual Coordinator
- Timothy Powell, DWNSW Casual Coordinator
- William Swann, DWNSW Casual Administration 
- Hannah Foster, DWNSW Casual Administration
- Laura Purcell, DWNSW Casual Administration
- Jacinta Bourne, DWNSW Casual Coordinator 

Organisational Services Team

- Anntonia Golovataia, Organisational Services Lead (new staff)
- Lisa Andreyeva, Organisational Services Lead 
- Stuart Munchton, Administration Worker and Workplace Safety Officer

 = Departed the organisation

From the Chair of NUAA's Board of Governance

It's difficult to know where to start in writing this year's Board Chair report: Where does one start in summarising the 2020–21 year. The first terms which come to mind are: difficult, heartbreaking – yet a showcasing of the NUAA family's resilience. This year also reflects for me at least, the reminder that our community is so representative of the issues which the broader community face. Let me start with the difficult to address and finish with the promising and positive.

Sadly, we lost Jude Byrne; former NUAA Chair, inspiration, mentor of peers, mother, community representative and world-admired peer activist. We must follow through on our thoughts, feelings and commitment to support Jude's uniquely inspired work in addressing the challenges, including but not limited to addressing stigma and discrimination, access to harm reduction, peer support/education and, latterly, the issues of ageing. Let's all heed this call to action to continue Jude's work in her name.

Secondly, let me acknowledge the personal pain and challenges which the Board, NUAA staff and our membership have contended with during these unprecedented times.

We recognise the movement of long-term employee Lisa Andreyeva, Organisational Services Lead (who has moved on to greater things) – a loss for NUAA but a gain for Lisa who takes off on new adventures. More recently, the announcement that Andy Heslop has been 'poached' by Positive Life. He has been a big asset for NUAA and will be sadly missed – but we know he will go on to further professional and personal growth. Good luck Andy – see you in the lift!

I personally wish to thank the Board for their support and dedication to 'the cause': Dan Burns, Jennifer Debenham, Brian Doyle, Dr Rob Page, Tim Parsons, Larry Pierce, Carolyn Stublely and Richard Sulovsky. I want to particularly acknowledge Dan and Rob's work on issues related to governance and constitutional issues and Larry for his continued support. For those Board members who are stepping down this year – many thanks and good luck with future endeavours.

NUAA's Executive and Leadership Team have continued to demonstrate their commitment and dedication. The NUAA NSP has continued to operate through these difficult times and conditions. Our innovative and inspired operations are world class – thank you. DanceWise NSW staff and volunteers have endured a difficult year, but remain engaged, and thankfully will soon be back to business. The Board wish to particularly showcase the positives coming from the PaC Forum, thanks to our peers, supporters, volunteers, sponsors and staff.

Lastly, the Board acknowledges our new Hall of Fame nominees: Owen Westcott and Brian Doyle. These are two well-deserved acknowledgements to join our past inductees who have supported the NUAA community.

Onward and upward all.

Many thanks,

**Fiona Poeder
NUAA Board Chair**

From NUAA's Chief Executive Officer

We all know that change is hard, and slow. Except during the global pandemic when it comes at a sometimes bewildering pace. At the tail end of the 2020–2021 Financial Year, Sydney and then NSW entered into a protracted lockdown with NSW Health requesting that everyone who could possibly work from home do so. Fortunately, many of the adaptations we made starting in February 2020 carried us through this gruelling period in our organisation's history. I am confident that our members and supporters reading this report will feel that the NUAA team once again adapted and excelled, proving their devotion to the community and harm reduction.

Looking at the broad range of work recorded in this report it is clear that this year was about partnerships – not only with our primary funders the NSW Ministry of Health, but with Local Health Districts across the state working in BBV and AOD settings. Our collaboration with Justice Health grows stronger each year thanks to the excellent leadership of Leah McLeod and Andy Heslop. Our close relationship with Kirketon Road

Centre who we partner with on the Open Clinic on Crown continues to flourish. The continuing work with our closest research partner, the Kirby Institute with Jason Grebely and his team continues to support innovation and bring hep C treatment to people across NSW. We are working closely with new partners such as SafeScript NSW to improve outcomes for people who use drugs in NSW. Throughout the pandemic and the second lockdown we have worked closely with a range of organisations to keep our community COVID safe and support access to vaccination.

These partnerships reveal another incredible advance the organisation has made this year and the one I am most proud of – leadership. It would be impossible to develop and sustain the network of close relationships with peers and other stakeholders across NSW without the group of emerging leaders in the organisation. Charles Henderson, my partner in the executive team, has been crucial in leading our work in the BBV space. His work with his team has supported what I can only



describe as the flowering of NUAA stalwarts like Lucy Papolim and Andy Heslop and new recruit Nikkas Skelley who brought her incredible positive energy to the NSP. Team members such as Tony McNaughton and Louise Aquilina are taking on new roles and responsibilities within the organisation. Alice Pierce and Georgina Bell have stepped up this year into leadership positions while Leah McLeod, the beating heart of NUAA, is taking NUAA into new territory in our communication and engagement with the community. There are many more I could and probably should name but my admiration for the whole team is immense.

Not all change in the pandemic has been rapid. As I am writing this report we have come out of lockdown and signs look hopeful that whatever 'COVID normal' will be is here. We are looking forward to a relatively free summer with (hooray) the return of festivals on the cards. But we are still waiting for a response to the Ice Inquiry. It seems astounding that we can mobilise to counter a deadly pandemic in less than two years but cannot respond to the compelling

work of the Special Commission in that time. The amount of effort that NUAA put into the initial Inquiry and in subsequent meetings to advocate for our community cannot be underestimated. It has been a huge and sustained campaign by many people and organisations including NUAA. There have been some telling tweets and interviews by key members of the government and I scan the papers every day, waiting for the announcement ever hopeful that we will hear positive news. When the announcement comes, we will be ready to continue to collaborate in order to ensure that our community continues to be front and centre in the planning and delivery of services to our community.

To all our staff, volunteers, members and supporters and our wonderful community, thank you for your support. It is a privilege to serve this community and work with this team. I hope we are all able to enjoy a safe and relaxing summer,

Mary x

Blood Borne Virus (BBV) Team

NSP – Needle and Syringe Program

Last year has brought many challenges, but NUAA was prepared to meet our community's needs by keeping our fixed site NSP open while improving statewide delivery of NSP equipment via mail.

Fixed Site

The fixed site NSP at 345 Crown St, Surry Hills remained open, led by Lucy Pepolim (Peer Support Program Lead) with NSP Specialist Nikkas Skelley supervising the on-the-ground peer team of NSP Worker Louise Aquilina, hepatitis C Virus (HCV) Specialist Peer Worker Tony McNaughton and casual staff Cheryl Woods, Alain Jenart and Kylie Hull.



Tony, Louise, Nikkas, Alain promoting NUAA's NSP.

NSP at a glance:

- Our NSP Distributed 466,212 units (this is just 1ml fixed syringes, tips and barrels).
- Occasions of service: 7,508.
- Take Home Naloxone became available in February, and our NSP distributed 57 units.
- 84 Fentanyl test strip kit units were distributed via NSP.

Feedback

“This is such a great service. I have learnt so much by coming here and being able to access fits and naloxone. You’re total life savers!” – Jenny

“Word on the street is that this is the place to come to learn about vein care. Well, I now understand why. You guys are amazing” – Phil

HCV Specialist

Our HCV specialist Peer Worker Tony McNaughton continued to deliver HCV services, working with Kirketon Road Centre (KRC) staff around testing and treatment. Tony supported all peers through HCV testing and on HCV treatment. He created a treatment plan to meet each person’s needs, whether it be NUAA holding their medication or NUAA organising their pills to be dispensed at their Opioid Treatment Program (OTP). He also made weekly calls and check-ins with all people on HCV treatment.

HCV testing and treatment at a glance:

- Our HCV specialist engaged with 1054 NSP service users to discuss a range of health needs including HCV testing and treatment.
- 298 people agreed to be tested for HCV.
- 42 people underwent HCV treatment with NUAA’s support.

Feedback

“I was put off treatment because of interferon and how sick it made people but when you guys told us about the new meds ... I believed you, I’m cured now and other things are better now too. Thank you.”
– Frank

.....

OCOC

KRC continued to support our health clinic, Open Clinic on Crown (OCOC) – with some reductions due to COVID-19 priorities.

OCOC at a glance:

- There were 434 visits to 181 clinic days, with 434 tests of various types performed.

Feedback

“This is like science fiction. It’s innovative technology and you can do it here? With me? Now? For me? ... I can’t believe you’re doing this with us! Yes please. Let’s do it.” – *Jake*



Postal Service

Our postal service is great for people who work while NSP's are open, live far from the NSP, or have mobility issues. Our discreet postal packages include the ordered equipment and a range of other goodies, including harm reduction resources, the latest drug alerts and a leaflet encouraging them to ask for an NSP worker to contact them if they need help. We can also include copies of *User's News* and NUAA-branded hand sanitiser and wipes, as available.

Last year we surveyed people who used the postal service.

- 60% of postal service users said their closest NSP was a 30-minute drive.
- 20% said their closest NSP was more than a 1-hour drive away.
- Postal users rated the service 4.5/5 stars for service delivery, ease of use for ordering, educational resources supplied, and equipment supplied.

Postal Service at a glance:

- Service users are predominantly from regional areas (57%) with 43% of services users in metro areas.
- Total Orders: 376.
- Total Distribution: 67,455.
- 270 naloxone kit units distributed via postal service (utilising Commonwealth provision).
- 303 fentanyl test strip kit units distributed via postal service.
- Estimated % Rural/Regional: 47–57%.
- Estimated % Metro: 53–43%.
- Our online shop landing page (nuaa.org.au/nsp-equipment-1) got 9,646 views.

Feedback

“I want to thank you all for the great job you do and for providing us equipment through postals. I cannot tell you how many friends' lives I have saved by the access to fentanyl strips and naloxone. I live in a small town and the hospital is some distance away, this has been lifesaving for my community to get the process started before the ambos arrive.”

– Geoff

“Thank you, I don't know what I would do if I didn't have access to equipment via postals, I can't get this stuff where I live.”

– Jayne

Our postal service was successfully promoted via social media and word-of-mouth.

**No equipment?
No worries!**



Mail order NSP available NOW

If you're self isolated or quarantined and need injecting equipment, don't put yourself at risk by reusing or sharing equipment. Instead, contact NUAA — we will mail you out however much you need of all sorts of injecting equipment (including speciality gear like wheel filters). Visit our website for more info about how COVID-19 might affect you as a person who uses drugs.



Ph: (02) 8354 7300 or freecall 1800 644 413 | visit nuaa.org.au

Peer Participation Program

The BBV team runs the Peer Participation Program (PPP) at NUAA. The PPP is a community development program that offers people with lived experience the opportunity to develop and expand their skills and gain work experience through volunteer work and training at NUAA. The program has been running for over 10 years with great success with members moving on to paid work within NUAA and other organisations in the health and community sector.

COVID-19 brought some challenges to NUAA and our community, but we managed to keep our Primary NSP open and expanded our NSP Postal Service and PPPs have been essential to keeping these services open over the last 12 months.

The BBV team is responsible for running Peer Connect Training that all interested Peers can undertake. NUAA runs Peer Connect Training (PCP Training) for all our prospective PPPs. Over the last 12 months, face-to-face training has been difficult, but we ran 3 PCP sessions. Not everyone who attends PCP training joins the PPP team but we did recruit some great PPPs who have continued to come in and help our frontline staff deliver direct services to the community.

Due to COVID-19 and space restrictions we have had to reduce the number of people in the NSP which has led to a reduced number of PPP shifts a week. At present NUAA has 15 active PPPs who assist in the NSP and help with a range of tasks including *User's News* (UN) mail outs, clerical work at the office and assisting with dried blood spot (DBS) testing in the community.

Our NSP Postal service would also not have been able to operate without volunteers. Every week, to keep our community safe, our volunteers worked over 9 hours a week packing and posting orders from all over the state. That equals 450 hours over the year, or donations worth over \$15,300.

NUAA would like to thank and recognise our volunteers and members of our Peer Participation Program who have continued to support NUAA and our community through difficult times.

Peer Participation Program at a glance:

- Over the past 12 months our PPPs have contributed 28 hours week assisting with NSP tasks alone - that is over 2,800 hours a year.
- If we put a dollar value on the hours donated to help the community, our volunteers donated over \$92,000.

Feedback

“Through being a PPP I've learnt to believe in myself, and I'm proud I'm making a real difference for my community. I used to be the quiet person in the background, now I'm the one stepping up and loudly leading. NUAA's staff really helped me step up and feel seen.” – Lindy

Regional Outreach

Even during the pandemic, NUAA was able to effectively provide front line service to people who inject drugs throughout NSW. With the relaxation of public health orders in July 2020, the BBV Outreach Team led by Andy Heslop with Adam Beres, and then Rochelle Aylmer as Outreach Specialists, travelled in support of our Peer Distributors, and on recruitment and scoping exercises in a variety of towns in regional NSW, providing NSP equipment, peer support as well as naloxone, overdose awareness and HCV education.

Hope Everingham, Peer Worker, undertook NSP outreach in the Hunter Region.

Western NSW Service Level Agreement

We provided scoping, recruitment, and consultation under our agreement with WNSWLHD and Far West Local Health District (FWLHD). This involved providing comprehensive service enhancement information about regional services to the HARP (HIV/AIDS Related Programs) units of WNSWLHD and FWLHD.

We visited and interacted with people in these towns:

Wagga Wagga, Queanbeyan, Orange, Dubbo, Wellington, Mudgee, Parkes, Forbes, Cowra, Blackheath, Blaxland, Leura/ Katoomba, Lithgow, Byron Bay, Broken Hill, Dareton, Wentworth, Newcastle, Cessnock, Maitland, Taree.

Outreach Highlight: Broken Hill

At the invitation of Western NSW Local Health District (WNSWLHD), Andy Heslop travelled to Broken Hill, Dareton and Wentworth in April on a scoping exercise. This is furthest NUAA has travelled west in NSW in recent memory, and we were able to engage with community members in Broken Hill, including recruiting a volunteer to continue our work there into the future.



Adam Beres, showing that through rain, sleet or snow, outreach delivers!

Peer Distribution

Our peer distributor volunteers (KPEs) numbers continue to grow, with 9 Peer Distribution volunteers across three regional LHDs. Every day, our volunteers provide their networks with sterile equipment, health information and peer education. The Outreach Team continues to enhance the delivery of Peer Distribution with training, peer support, education and resources.

Peer Distribution at a glance:

- **9 Peer Distributors across the state distributed 18,334 pieces of injecting equipment and collected 22,397 returns.**
 - ▶ Murrumbidgee
3 Peer Distributors
501 Occasions of Service (OOS)
 - ▶ Nepean Blue Mountains
5 Peer Distributors
346 OOS
 - ▶ Western NSW (April 2021–June 2021)
1 Peer Distributor
51 OOS.

Feedback

“The peer distribution program has really benefited our community here in Cowra. The only place to get equipment is at the hospital emergency department, but the machine is out in the open and its often empty anyway. The commute to Bathurst or Orange is about an hour, and public transport is limited. But people know now that they can come to me when they need to. It’s been really well received here.” – Nathan

Peer Connect Program (PCP) Training

We adapted our training to suit the ever-changing COVID-19 environment without losing the quality of the peer education that NUAA is famous for.

At a glance:

- We ran 5 training sessions and trained 51 peers.
- 8 peers from Regional NSW have continued to volunteer with NUAA and 5 peers from Sydney have worked across multiple LHDs.

LHD-based Peer Support Workers

Jade Christian, NUAA's Aboriginal Peer Educator and Support Worker has been central to the success of the Deadly Liver Mob (DLM), now called 'The Project', an initiative of the Western Sydney Local Health District (WSLHD) harm reduction team that is run out of the South Court NSP. The Project's aim is to encourage Aboriginal and Torres Strait Islander people to engage with HCV testing and treatment, using peer-driven intervention alongside incentives to encourage education around blood borne viruses.



Jade (right) working alongside Aboriginal health workers.

Clearing the Path and HepCured

NUAA also worked closely with Hepatitis NSW on The NSW Ministry of Health's (MoH) state-wide HCV campaigns, Clearing the Path and HepCured. Our peer promotion work with the campaigns helped focused on using peer workers to get the message out to people who inject drugs that HCV treatment has changed and now is a good time to get treated.

The BBV team contributed significantly to HepCured planning and development, particularly around the role of peers in promoting the campaign across the Local Health Districts (LHDs).

NUAA peer workers travelled all over NSW, talking to over 1366 people about HCV testing and treatment, and dispelling myths and misconceptions.

Clearing the Path and HepCured at a glance:

- Engaged with 1,366 people.
- 504 of those were referred to another service or given health promotion material.
- 351 people were tested.
- **36 people were referred to treatment.**

Feedback

“I had hep C for years before getting treated. The effects on my health weren’t immediate – it took years to develop symptoms. But I started feeling better almost immediately after starting treatment. By the end, I felt 20 years younger – it was better than any high.” – Melinda

Prison Harm Reduction in the Yard

The groundbreaking Prison Harm Reduction in the Yard (PHRY) project was piloted from September – December in partnership with Justice Health and Forensic Mental Health Network (the Network). NUAA provided peer education, information and consultation through 2 workshop series and 2 events.

PHRY has been developed as a series of workshops that run over 4 weeks, with modules related to harm reduction and peer education, delivered to people in custody. These workshops include: overdose, HCV and BBVs, sexual health, stigma and discrimination, injecting injuries and more. The aim is to empower people in custody to continue the conversation in the yard.

NUAA and the Network piloted two programs of workshops which were attended by 20 people. Our success has enabled us to look forward to expanding this program into the future with agreement to provide a further six workshops.

In early September, we began our PHRY project in partnership with Justice Health and Forensic Mental Health Network with an Overdose Awareness event ‘in the yard’ at Long Bay Correctional Centre.

The PHRY project was included as a poster presentation in the The Australasian Viral Hepatitis Elimination Conference.



Viral Hep Conference poster presenting the success of the PHRY project pilot.

PHRY at a glance:

- 40 people attended PHRY overdose awareness event at Long Bay Correctional Centre and learnt about overdose in custodial settings across 2 sessions.
- At a peer-organised event, 50 people in custody at Long Bay Correctional Centre attended to engage in HCV education with 43 Dried Blood Spot (DBS) tests undertaken.

Feedback

“I thought PHRY was great, there was heaps of info, some things I hadn’t heard before, and it was good to talk about all the problems and better ways to do things ... we have to get really good at the stuff we can control. I think we have to pass all that info on, because the guys will listen to me more than they’ll listen to people who work here. It’s all about trust and respect.” – Rex

The ADMIT study

The ADMIT study was undertaken to link people who use automatic needle/syringe dispensing machines (ADMs) with hep C care. NUAA peer workers joined staff from Sydney LHD to see if people who access ADMs (specifically the ADM at Royal Prince Alfred Hospital [RPAH] Camperdown) are linked to HCV treatment.

The project aimed to:

- Describe the population using the RPAH ADM.
- Determine whether people using the ADM are linked with HCV care.
- Determine gender differences in patterns of ADM use or uptake of HCV testing or treatment.
- Provide access to HCV testing and treatment.
- Explore drug use patterns, HCV prevention, testing and treatment and engagement with health services.

During the study, NUAA peer workers asked ADM users if they had time to complete a brief survey.

From the survey, the LHD learnt:

- ADM users were diverse in age, gender, sexuality, culture and socio-economic status.
- Most OOS were by males (74%) aged 40+ years (60%).
- 40% in total and 42% women were aged in 20s and 30s.
- The study highlighted that a number of potentially vulnerable groups use ADMs to avoid engaging with health services regarding their drug use or for HCV testing. These included young people, especially women; pregnant women and mothers; homeless people; people with mental health problems; and hospital patients.

Of the ADM users who participated in the ADMIT study, most described their risk of HCV infection as low.

- 60% of interviewees reported they had never had HCV.
- Some people were unclear whether HCV testing is part of routine blood testing by GPs.
- In the last 12 months 40% had been tested.
- Only one person had never been tested for HCV.

Only 35% of people using ADMs agreed to be do the survey, a total of 70 surveys. From this, 7 people (10%) agreed to be tested but no-one was treated. More work needs to be done in this area to support people using ADMs. An important part of the study was around the significant value of using peers to do research with people who use drugs, with peer workers integral to establishing trust in the project.

The Justice Health and Forensic Mental Health Network Drug and Alcohol Nurse Training session

The session was facilitated by Lucy Pepolim, NUAA Peer Program Lead, with NUAA Peer Workers Tony McNaughton and Jamie Williams sharing their lived experiences about accessing health services behind bars.

The Training Session at a glance

- The full complement of Network nurses attended the session.

Feedback

“Thanks, NUAA – particularly Jamie & Tony. Wow! A great session. Your time taken to give us an insight from your personal experience was very much appreciated. I always like to grab opportunities to see how we can do better.” – Amanda

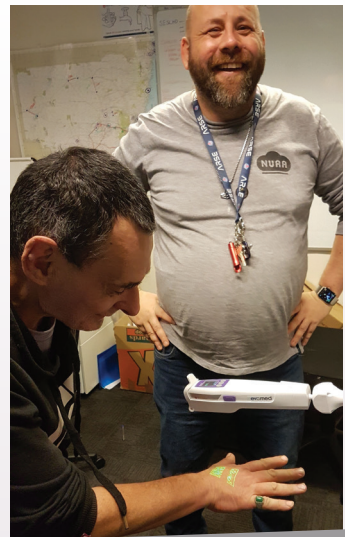
Workforce Development

In April, Andy Heslop provided a 2-hour Stigma and Discrimination workshop for front line clinical staff in South Eastern Sydney Local Health District (SESLHD) as part of the Play Your Part series of HCV related seminars, with over 60 people in attendance.

Data Systems and Equipment

We improved our data systems throughout the year and have developed robust reporting tools that enable us to more effectively track our engagements, HCV work, service provision and equipment distribution across all work areas of the BBV Team.

We updated our service provision at Crown Street to include the new Accuvein AV500 device. NUAA now has two Accuvein devices and this greatly extends our ability to help promote safer using and vein care at our very own Crown Street NSP, and out and about on outreach.



Tony McNaughton (left) and Andy Heslop (right) try out the new and improved Vein-O-Scope, available at our Crown Street NSP. The Accuvein AV500 is a magical device that can find veins!

Communications & Community Engagement

The NUAA Communications and Community Engagement Program team led by Leah McLeod and Alice Pierce with oversight by Mary Harrod have continued to work with the broad community of people who use drugs to meet their needs through a range of focused products. The full amazing team can be found on the NUAA Staff list at the beginning of this report.

Resources

The team created a range of resources, big and small. Each resource is developed in careful consultation with all stakeholders, including peers, consumers and clinical experts. During these unprecedented times of COVID-19 and lockdown restrictions, our resources helped our peers feel a sense of connection to their community and stay as COVID-safe and drug-safe as possible.

Resources at a glance:

- **Benzo & Fake Benzo A4 Factsheet 1-pager and 3 social media memes to assist promotion.**
- **Mob Overdose Harm Reduction Posters, promoting naloxone. The art was done by Stephen Morgan, First Nations artist, which really resonated with the audience.**
- **OTP child safety poster & card set: ‘Where are your meds?’ and ‘Do you know the signs of overdose in a child?’**
- **Series of three overdose posters with Corrective Services and the Network to be put into wings of NSW Correctional Centres.**
- **Consumer consultations undertaken to input the MoH review of the Substance User in Pregnancy and Parenting Service SUPPS.**
- **A range of COVID-19 safety resources:**
 - ▶ Poster: ‘This Ain’t Our First Rodeo’.
 - ▶ Poster set and handout: ‘You are not alone’ (How to access harm reduction services during COVID-19).
 - ▶ Poster and pamphlet: ‘COVID-19 and your Opioid Treatment Program’.
 - ▶ Poster and pamphlet: ‘COVID-19 is now active in our community’.
 - ▶ Poster and pamphlet: ‘Feel Sick? Get Tested’.
 - ▶ Pamphlet: ‘COVID-19 and Harm Reduction’.
 - ▶ Social Media Tile: ‘COVID-420’ Cannabis Harm Reduction.

'Fake benzos' are now widespread. What do you need to know?

What your doctor calls:

- "benzos" / benzodiazepines
- "axetas" / Xanax / Kanax / Mysol / alprazolam
- "valiums" / Valium / diazepam (is not a "fake benzo")
- ...may actually be dangerous 'fake benzos'.

Fake benzos = higher risk of overdosing.

If your benzos are not from the doctor or pharmacist, they're probably counterfeit. The doctor or your pharmacist is your best source for a prescription.

• Dangers include falls, pills, bars, bottles and pills lost, but they can also be fatal.

• Other dangers include: confusion, drowsiness, and dizziness. In severe cases, they can be fatal.

• Pills may be made from other ingredients, such as sugar, or alcohol. These could be dangerous if you're allergic to any of them.

• Fake benzos are not safe for use in children or young people.

Taking high doses and/or mixing benzos with other drugs is risky.

• Even low doses can lead to things going wrong and blackouts.

• Risk of overdose is increased when mixing benzos with depressants such as alcohol, opiates and opi.

• Be careful mixing with alcohol, depressants, and opiates or opi-depressants.

• For more information, see [http://www.nuaa.com.au/medication](#)

Benzos are easy to become dependent on. Help is available to withdraw safely. Don't rely on fake benzos.

• Physical and psychological dependence can happen quickly.

• Being regular in how you take benzos can lead to dependence and, in some cases, physical or death.

• Fake benzos may be stronger, so increasing and gradually lowering your dose is difficult.

• If you are dependent on benzos and need help withdrawing safely, a doctor can prescribe you real benzos.

• If you need more professional support from an experienced team of the drug using community, contact our Helpline 1800 644 413 or call our 24/7 phone service and Web Chat offering medication and withdrawal support, advice and information for individuals and carers only.

• Alcohol and Drug Information Service (ADIS) 1800 250 011 run a 24/7 phone service and Web Chat offering medication and withdrawal support, advice and information for individuals and carers only.

To find out more about staying safe while using benzos visit: [http://www.nuaa.com.au/medication](#)

© NUA 2021

'Benzos and Fake Benzos: What do you need to know?' Factsheet.

This ain't our first rodeo...

Nearly 40 years ago, our community stepped up to fight HIV/AIDS. Then we did it again with hep C. Now it's Corona time.

Another decade, another deadly virus. Let's lead the way again and keep ourselves and our community safe.

Practice good hygiene: Regularly wash hands or use hand sanitiser | Keep 1.5 metres apart | Cough/sneeze into your elbow.

Get tested if you have symptoms: New tests are painless – just one swab for your nose and one for your throat | Results back within 48 hours | Testing now free for NSW residents.

NUA

An example of one of our popular COVID-19 safety resources.



Artwork used on overdose posters by artist Stephen Morgan.

Opioid overdose looks different in kids

Even a tiny bit can kill a kid.

You know these signs ...

- Drowsy or unconscious – unable to be woken up
- Blue or greyish lips and fingertips
- Pinpoint 'pinned' pupils
- Unusual snoring, gurgling noises, breathing with difficulty

But do you know these?

- Unsteady walking
- Seizure/Fit
- Confusion
- Vomiting

ACT FAST!

Think a kid has taken your meds? Act straight away: Call 000

NUA
PeerLine 1800 644 413

'Opioid overdose looks different in kids' OTP Child Safety Poster.

Stop and think

Where are your meds?

Even a tiny bit can kill a kid.

Store your medicine out of sight and out of reach.

- Keep in the original container.
- Lock in a box and/or cabinet.
- If in a bottle, put lid back on then dispose.
- Get naloxone – a full dose is safe for a kid overdosing on opioids.
- Don't store unlocked in the fridge.
- Don't keep in the car.
- Don't leave in a bag or pocket.
- Don't put in bottles or containers that could be mistaken for something else.

ACT FAST!

Think a kid has taken your meds? Act straight away: Call 000

NUA
PeerLine 1800 644 413

'Where are your meds' OTP Child Safety Poster.

Learn how to save a life.

Do you know what an opioid (heroin, methadone, bupre, oxyc, fentanyl) overdose looks like?

- Slow, shallow, strange or no breathing.
- Unusual snoring sounds (gurgling, choking).
- Lips and fingertips turn blue (if light-skinned) or greyish (if dark-skinned) or greish.
- Can't be woken or can't stay awake if you pinch their ear and call their name.

HEY!

Learn how to spot an overdose.

Saving lives is something we can all agree on.

NUA

Posters using NUA characters for NSW Correctional Centres.



Various recent covers from User's News and Insider's News.

Magazines

NUAA produces two peer-based harm reduction magazines with focused circulation: *User's News* (UN) and *Insider's News* (IN). They continue to take a strengths-based approach, featuring peer stories, evidence-based peer-informed resources and information of interest to people who use drugs. Particular attention is given to building community; combatting stigma and discrimination; managing risk; testing and treating BBVs; accessing drug treatment; accessing physical and mental health care; promoting innovative services; and informing around drug laws and policies.

The flagship magazine UN, still vibrant after 30 years, is mailed out to members and subscribers, and distributed in bulk through our partners in Alcohol and Other Drug (AOD) and other health services including NSPs, Opioid Treatment Program (OTP) services and some medical practices. As well as production of a print version, the magazine is available on its dedicated website: usersnews.com.au. As COVID-19 made more people comfortable with using QR codes, we have been able to introduce them throughout the print magazine to link people to key information on our websites and social media.

Three UN editions were published throughout the year:

- #95 'Not Our First Rodeo! The COVID-19 Harm Reduction Issue'
- #96 'It's all rock & roll: Old Drugs, New Drugs'
- #97 'Celebrate Difference!'; the Culturally and Linguistically Diverse (CALD) issue.
- IN, launched in 2018, is produced solely for circulation in NSW Corrective Centres. The A5 sized magazine is published in partnership with the Justice Health and Forensic Mental Health Network (the Network) and Corrective Services NSW and continues to go from strength to strength. This year has seen printing and distribution via the 'buy-up' successfully undertaken by Corrective Services Industries, with digital copies available to Justice Health staff for use in harm reduction conversations with their patients.



Continued next page 

Two issues of IN were produced, #8 and #9. Unfortunately, COVID-19 reduced the capacity for interviews inside centres, however this was compensated by including mail received from people in custody over this period. We supported this with the inclusion of a pull-out addressed postage-paid lettergram in the magazines that people could write on directly, tape to seal and send. We also interviewed people post-release and relevant professionals. All IN covers are painted by people while in custody and are primarily sourced through Boom Gate Gallery, Long Bay Correctional Complex.

Magazines at a glance:

- Over 30,000 print copies of UN were distributed.
- Over 338,000 people visited the UN website.
 - ▶ Over 42,000 were from NSW.
 - ▶ About 106,000 were from Australia.
 - ▶ The remaining traffic comes 99 countries representing every continent, with 41% from the United States and 13% from the region of England / Ireland / Scotland.

Popular User's News website content at a glance:

- ▶ What causes a comedown (coping with post-party blues): 135,587 views.
- ▶ Supplements guide: 73,223 views.
- ▶ Injecting your dose tips: 36,975 views.
- ▶ Mobile drug testing explainer 34,688 views.
- ▶ Nangs harm reduction tips 25,970 views.
- Nearly 10,000 copies of IN were distributed to a population of some 12,500 people in custody.
- The editions of IN were informed by over 150 letters, poems, drawings and recipes received from people in custody in the period.

Feedback

“Thank you, *User’s News*, for your years of service and useful information for drug users. You have changed the way I use drugs for the better.” – *Stephen*

“THANK YOU! You made my day! I mean it. It is because I got a copy of *Insider’s News* in my buy-up!” – *Tom*

Websites

NUAA websites (usersnews.com.au, nuaa.org.au and dancewizensw.org.au) had a combined total of 611,000 page views (up from 198,000 in the previous year). (All stats are from July 1st 2020 – June 30th 2021).

Websites at a glance:

- **nuaa.org.au**
 - ▶ 26k unique visitors.
 - ▶ 91k page views.
 - ▶ 145% traffic increase from previous year.
- **usersnews.org.au**
 - ▶ 338K unique visitors.
 - ▶ 443k page views.
 - ▶ 510% traffic increase from previous year.
- **dancewizensw.org.au**
 - ▶ 50K unique visitors.
 - ▶ 77k page views.
 - ▶ 482% traffic increase from previous year.



Social Media

Hela Caward continued to expand our social media presence, until handing over to Gulliver McLean in late May. Gulliver continues to work with MoH to produce the very important and well subscribed Drug Alerts. We have 2 active Facebook pages and 1 active Instagram page.

Social Media at a glance:

- **NUAA NSW Facebook page:**
 - ▶ Likes: 3,102 (+392 since July 1, 2020) (37.4% Sydney, 73% Aus).
 - ▶ Total of 220 posts in 2020–2021 with a total reach of 142,935 (up 82% from previous year).
- **DanceWize NSW Facebook page:**
 - ▶ Likes: 5,906 (+326) (46.7% Sydney, 87.5% Aus).
 - ▶ Total of 200 posts in 2020/21 with a total reach of 177,319 (Down 34.8% from previous year).
- **DanceWize NSW Instagram:**
 - ▶ Followers: 2,361 (+158) (36% Sydney, 62% Aus).
 - ▶ Total of 130 posts in 2020–2021 with a total reach of 54,099 (up 108.5% from previous year).

Popular content at a glance:

- **NUAA FB:**
 - ▶ ‘Drug alert (cocaine and ketamine containing fentanyl / opioids)’ post got 102.7k reach and 979 reacts.
 - ▶ ‘Jude Byrne’s obituary promoting UN article’ post got 12.9k reach and 920 reacts.
 - ▶ ‘Drug warning about fake benzos’ post got 5.5k reach and 65 reacts.
- **DW FB:**
 - ▶ ‘Drug alert (cocaine and ketamine containing fentanyl / opioids)’ post got 41.1k reach and 326 reacts. (Boosted).
 - ▶ ‘Heroin Drug Alert’ post got 21.9k reach and 514 reactions. (Boosted).
 - ▶ ‘Tips for using drugs at home during COVID-19’ post got 18k reach and 52 reacts. (Boosted).
- **DW Instagram:**
 - ▶ ‘Drug alert (cocaine and ketamine containing fentanyl / opioids)’ post got 11.3k reach and 1.4k reacts.
 - ▶ ‘DanceWize NSW PeerLine promo’ got 10.2k reach and 67 reacts. (Boosted).
 - ▶ ‘Polydrug use (coke and ketamine)’ post got 7.7k reach and 253 reacts.



Hela (left), Leah (right) and Billie the dog sharing a heartfelt goodbye.

Gulliver taking over the social media baton – with approval from team mascot Billie! – from Hela.

Drug Alerts

In partnership with MoH and the Standing Panel on Toxicity Risk (SPaTOR), NUAA continued to help design and promote timely and culturally appropriate drug alerts and warnings. We consulted on MoH’s warnings, and also worked with the MoH to produce our own alerts which were distributed through various channels, including NUAA and DanceWize NSW’s social media, as well as in *User’s News*, and on flyers for the NSP.

We published 7 drug alerts this year, with huge reach and engagement across all our social media channels.

Drug alerts at a glance:

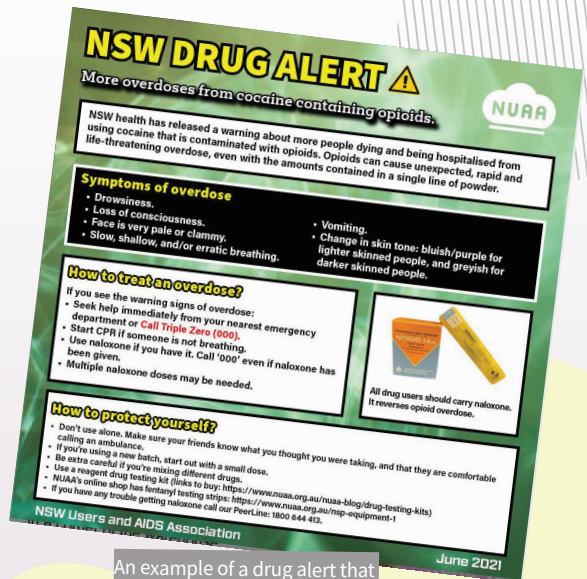
- June 2021: cocaine containing opioids (causing further hospitalisations).
- May 2021: cocaine containing opioids.
- Nov 2020: heroin containing fentanyl.
- Oct 2020: cocaine containing ketamine.
- July 2020: fake benzodiazepines (new batch).
- July 2020: high dose MDMA pills.
- July 2020: fake benzodiazepines.

Feedback

“Thanks for looking after our communities.”

– Joe

“I’ll be testing my cocaine and ketamine for opioids from now on.” – Sarah



An example of a drug alert that went viral on social media.

Advocacy: Inquiries, Consultations, Submissions and Policy Committees

Post-market Review of Opiate Dependence Treatment Program Medicines

In June 2021, NUAA provided comments to the Australian Department of Health about the Draft Terms of Reference (ToR) for the Post-market Review of Opiate Dependence Treatment Program Medicines.

Our involvement resulted in positive changes to the ToR. Our submission sought to have the ToR more clearly defined to ensure that all community stakeholders were clearly considered in the process and that the consumer experience was better considered through a human rights, stigma and discrimination lens.

Real Time Prescription Monitoring (RTPM) or SafeScript

After providing an exceptional consultation to NSW Health on the proposed implementation of their SafeScript (RTPM) System, NUAA, with the support of Alice Pierce, is now playing a central role in advocating for our community's needs and advising NSW Health on the implementation of the SafeScript program. An advisory group has been established to ensure that multiple community voices are heard throughout the

consultative aspects of the project. To date, NUAA has had their feedback incorporated into a variety of SafeScript materials including Key Messages and GP education modules. From here, the focus will be on educating and promoting information about the role of the SafeScript program to NUAA's various communities.

National Peer Network/ AIVL Delegate

NUAA has attended all National Peer Network meetings run by AIVL, providing updates on our jurisdiction to our national peak body, including the challenges faced by the community throughout the pandemic. AIVL Delegates, Andy Heslop (staff) and Timothy Parsons (Board of Governance) provided input into AIVL's constitutional changes.

EC Australia: Eliminate Hepatitis C

Lucy and Andy have attended all Eliminate Hep C Australia (Burnet Institute) co-design meetings aimed at preparing and producing a national HCV campaign which will focus strongly on peer promotion and education, as well as testing and treatment.

Nitrous Oxide ‘Nangs’ Rescheduling

NUAA made a submission to the Therapeutic Goods Administration (TGA) urging against scheduling nangs more strictly. We are concerned that people who use nangs will be put at risk of criminal penalties. This means users may be less likely to ask for medical help if something goes wrong. NUAA expressed concern that a ban on nitrous oxide may push its use underground and exacerbate any potential harms. The submission emphasised that the adverse impacts of its recreational use are best mitigated through raising awareness, peer education and harm reduction.

Ice Inquiry: NUAA responds to government’s lack of response

NUAA made submissions to the NSW Government’s ‘Special Commission of Inquiry into Crystal Methamphetamine’, sharing our expertise and experience. At the time this report was written, the Government has still not responded to the Commission’s findings. NUAA’s CEO, Mary Harrod, sent a letter to the *Sydney Morning Herald*, calling on the Government to respond.

‘Testing Bodily Fluids’ – Mandatory Disease Testing (MDT) legislation

NUAA advocated against the MDT legislation that was recently passed by both houses of NSW parliament. This harsh new law allows for anyone 14 or older to be detained, have their blood forcibly drawn and be tested for BBVs if a ‘senior officer’ believes that they have deliberately exposed a health, emergency or public sector worker to their bodily fluids. Unfortunately, the advocacy work by NUAA, ACON and others was not able to counteract lobbying by the Police Association. The legislation was supported by both the Liberal-National and Labor parties, with virtually none of the amendments suggested by medical, research and community experts incorporated into the final version.

PeerLine

PeerLine is a confidential peer-run telephone service providing support to people who use drugs, who are on the opioid treatment program or who are seeking treatment across NSW. It is staffed by Will Hodges and Kylie Hull, a non-judgmental team of peer workers who are overseen by Alice and Leah and trained to listen and offer advice, referrals, support and individual advocacy.

Peerline at a glance:

- Our dedicated Community Engagement staff have received over 506 support requests since the service's launch in August 2020.

PeerLine Case Study:

■ Issue:

Frank (not his real name) called PeerLine to discuss a range of issues he was having with his OTP clinic, including that some staff had been acting in quite stigmatising ways. He had already written an official complaint to the service but wanted to discuss his issues with a peer and see if he had any other options.

■ Intervention:

PeerLine staff discussed Frank's concerns and discussed strategies for making official complaints and ensuring that you are heard as a person who uses drugs. Frank called later that day to advise that he had managed to secure an appointment with the clinic manager for the following day and to ask if a PeerLine worker would be able to act as a support person in that meeting. PeerLine then attended via teleconference.

■ Outcome:

After supporting Frank at the meeting, PeerLine conducted a debrief with him to ensure he was happy with the outcome and felt like his issues had been resolved. Frank felt he was able to successfully have his complaints heard and work out strategies for managing future issues at the clinic. PeerLine staff also discussed strategies for dealing with issues should they continue to occur and offered to provide ongoing support as required.

Later, NUAA received a call about the case from the service manager praising PeerLine's phenomenal job supporting this individual.

Peers and Consumers (PaC) Online Support Network

In the early stages of development, the Peer and Consumer (PaC) Online Support Network is an innovative digital platform providing support, learning and development opportunities to AOD peer workers across NSW. Spearheaded by Veronica Ganora, Community Engagement Specialist, with the support of Alice and Mary this is an exciting opportunity for NUAA to become a leader in supporting and empowering the peer workforce.

The aim of the project is to empower the peer workforce and increase peers' access to evidence-based training, including HCV treatment access, public speaking and stigma and discrimination training. Central to the project has been the scoping and consultation phase, where peer workers participated in consultations to guide the development of the support network.

Peers and Consumers Forum (PaC Forum)

NUAA's PaC Forum is a unique space for drug users, peers and consumers to connect and learn. Service providers are also able to gain unique insights into the peer experience at the forum. The theme chosen for the 2021 Forum was 'Peers as Leaders'. NUAA chose this theme because we want to highlight the way people who use drugs can step up to support each other to improve the health, dignity and human rights of our community.

Due to COVID-19 and lockdown restrictions, the PaC Forum needed to be postponed. After resetting the dates on two occasions, the decision was made to go ahead with the Forum regardless of the conditions, which meant investigating digital options. We also decided to partner with International Network on Health and Hepatitis in Substance Users (INHSU) to deliver Day 2 of NUAA's Forum as a 'Community Day' for the first day of INHSU's 2021 International Conference which committed NUAA to 11 and 12 October 2021. Justin McKee, Community Engagement and Advocacy Specialist, came on board in May 2021 to spearhead organising NUAA's first Forum to go online.



DanceWize NSW (DWNSW)

Despite COVID-19, it was a big year for DWNSW, and coordinators Georgina Bell, Erica Franklin and Adam Smith did a great job supervising the team through unprecedented times. Big shout out to DWNSW’s casual staff: Jason Gregory-Jones, Tim Powell, Jane Lo, Clancy Beckers, Hannah Foster, Laura Purcell and Tarek Zein. They all rose to the challenge and DWNSW continued to receive praise from our community for our online and physical presence.

Online Education & Peer Support

Social media & website

We focused on reaching our community through social media this year, given the health restrictions on events. Our reach and engagement increased across all platforms. (See ‘Communications’ section for stats).

Video content creation

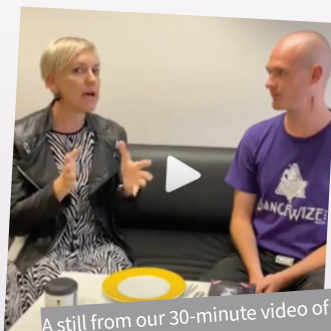
We produced a number of videos with harm reduction information, and resource information, filming our dedicated volunteer Key Peer Educators (KPEs). This was a great achievement, involving our volunteers in a different way of delivering education by digitally sharing the skills and resources we have as a team.

Video creation at a glance:

- A ‘drugs at home’ harm reduction tips video, was viewed over 10.4k times.
- Our resource video was viewed 1.3k times.
- A drug testing demo with NSW Greens MP Cate Faerhmann got over 2.2k views.

“I’m sure you get a buttload of messages reiterating the same thing, but what you guys do is insanely important. I just found your page through an ad on social media, and I wish I had you guys a couple years ago! Your feed is the perfect mix of showing drugs can be fun, but also really dangerous. I was always berated about how bad drugs are – and to simply “not touch them” – but that’s not the case most of the time, most people I know either regularly use or have tried at least once.” – Anon

“Love your page and everything you guys do to end the taboo on drugs and instead try make drug use safer.” – Anon



A still from our 30-minute video of Cate Faerhmann (left) and DWNSW KPE Clancy Beckers (right) instructing people how to use reagent drug checking / pill testing kits.

Digital resource creation

We collaborated with DanceWize Victoria on a social media campaign aimed at our community ‘re-entering partying’ following months of lockdown. We developed high-quality resources on MDMA, GHB and Ketamine and Cocaine. These resources had a combined reach of over 25,000, and got great feedback, such as one reader saying: **“It is super dope to see harm reduction content rather than the demonisation of drug use. If you are curious, do it safely!”**

Livestreams

We ran two successful livestreams this year. These were well received from our community and gave our amazing volunteers opportunities to share their peer knowledge outside our usual festival service delivery.

At a glance:

- Sex, drugs and consent: 3.5k views.
- Booze, darts and legal drugs: Harm reduction: 2k views.

Podcast

We launched a new podcast! *“The Sesh: lighting up the conversation on drugs”* We released a trailer and 4 episodes – reaching hundreds of people for a more in depth, and intimate sharing of our harm reduction education.



An example of an engaging social media resource about GHB harm reduction.



An image promoting DWNSW's podcast series, 'The Sesh'.

Feedback

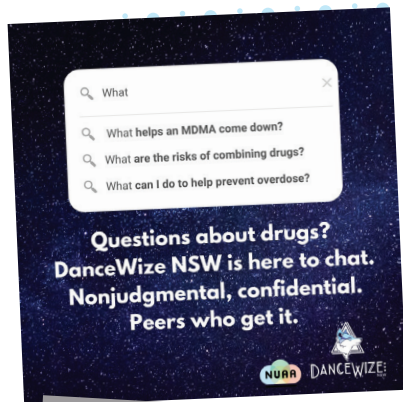
"Absolutely loved this podcast team! Your cause is fantastic to be taking harm reduction seriously yet in a casual and comfortable way! I can't wait for more and hoping one day you're able to expand out here to Qld! Keep up the good work! I'll do my part by sharing the message. Stay safe!" – Anon

DWNSW & PeerLine

We responded to 126 support requests from the DWNSW community through our social media channels – this service only ran for the last 5 months of the year, so this is a huge achievement! Our KPEs assisted with the responses, providing peer expertise and harm reduction information on a range of issues. Common topics included MDMA, benzos, cocaine, GHB and psychedelics, and mental health.

Feedback

“You guys are (literally) life savers” – Anon



An image promoting NUAAs PeerLine to the DWNSW community.



Festivals looked a lot different in the COVID-19 era. Patrons were required to sit instead of dance, but DWNSW adapted!

Offline Education & Peer Support

NSW Festival event attendance

Six festival days were attended. COVID-19 was a huge interruption to our service provision, and any attendance at festivals was a big win for us! We provided our usual roving, education, and care services at these events, meeting new community members. We saw an increase in the number of people accessing our support service for mental health reasons.

DanceWize Pilot in NT at 'BASS IN THE GRASS' festival

In collaboration with HRVic/DanceWize Victoria, DWNSW, led by Erica, worked with NT Department of Health, NT Major Events, Top End Health Services, and the Northern Territory AIDS and Hepatitis Council in piloting a DanceWize service at BASS IN THE GRASS festival. This pilot was funded by the National Critical Care and Trauma Response Centre. It was a fantastic opportunity to work interstate with like-minded harm reduction advocates and to demonstrate the transferability of peer-based festival harm reduction to another Australian jurisdiction.

School outreach

Georgina accompanied two KPEs to Northholm Grammar School in November 2020, to distribute drug harm reduction information and resources as part of their health expo day. This was a great opportunity for us to interact with younger people and engage in early intervention around drug use with high school students.



DWNSW helped to pilot a service at a festival in the Northern Territory.

Volunteer Recruitment and Upskilling

Inductions and trainings

We recruited and trained 18 new KPEs this year, delivering two in-person induction training workshops, in preparation for Yours and Owls festivals.

We delivered 6 other training workshops for our KPEs and Team Leaders, including: Psychological First Aid for harm reduction frontline workers, handwashing training, drug psychopharmacology training, paperwork training, and radio etiquette.

At a glance:

- Inducted 18 new KPEs.
- Ran 6 training sessions for our KPEs.

Hiring casual staff

We recruited 7 new casual staff members: 3 new administration staff, and 4 onsite coordinator staff.

Upskilling staff

Two of DWNSW's coordinators, Georgina and Adam, completed a Cert IV in Training and Assessment. This was an intensive two-week face-to-face course, followed by months of assessment work. This equips the team with an accredited course in training provision.

Volunteer Retainment

Through several social initiatives, and robust digital and in-person communication tools, we managed to retain many of our volunteers! These retainment numbers are amazing given the COVID-19 climate of this FY.

Volunteer engagement at a glance:

- 30 KPEs attended our first post-lockdown in-person social event at end of 2020.
- We had activity on Slack, our team's online communication platform.
- 60 KPEs did a shift either at an event, or as part of our alternative service delivery options (video creation, high schools etc.).
- Our 30 Team Leaders were extremely involved throughout the year, attending meetings and consultations, bringing invaluable input to the program, and keeping it grounded in meeting our community's needs.

Organisational Services

This year as Sydney went into a COVID-19 lockdown, Organisational Services, was in the midst of a major personnel change and handover. Long-serving Organisational Services Lead Lisa Andreyeva made the decision to leave NUAA, reducing her hours while onboarding new Lead Anntonia Golovataia. Stuart Munckton took on the bookkeeping responsibilities as well as adopting the Workplace Safety Officer role. Our part-time PeerLine Workers, Kylie Hull and Will Hodges, adopted additional administrative responsibilities, including registering new members.

The NUAA staff worked as a team to ensure that the PeerLine phone would continue to operate effectively, while providing the opportunity for all Elizabeth Street Staff to work from home. Stuart performed superbly in his new role and ensured business continuity under lockdown conditions.

The Organisational Services team's roles include:

- Processing membership applications.
- Ensuring infrastructure, including technology, is fit for purpose.
- Providing secretariat support for the NUAA Board.
- Steering a renewal of accreditation in June 202.
- Ensuring safety and quality systems are in place, including:
 - ▶ all employees at NUAA have regular supervision and yearly review of performance.
 - ▶ reports on risk management are regularly updated by Leads.
 - ▶ incidents are managed and recorded as per procedure.

The Administration team also oversees a number of committees including the Joint Consultative Committee (JCC), Policy Committee and Organisational Wellness Workgroup.

- Policies and procedures shape and reflect organisational culture. At NUAA we acknowledge how important language and processes are. All policies and procedures at NUAA were codesigned and thoroughly assessed by staff on the Policy Committee prior to being forwarded for approval to the Executive team and/or members of the Board.
- The Joint Consultative Committee originated from the NUAA Enterprise Agreement. It provides a mechanism for the regular exchange of information and ideas between management and employees and to address queries around policies and procedures.
- The Organisational Wellness Workgroup was formed this year to facilitate continuous improvement of processes and staff engagement. The workgroup meets every month to identify opportunities to improve employee wellbeing at NUAA. Innovations have included the implementation of a project management software; an increase of EAP access throughout COVID-19; informal weekly staff check-ins throughout COVID-19; a roll-out of the mindfulness app; and an informal all staff teams chat thread.

Events

With our partners, KRC and Surry Hills Neighbourhood Centre (SHNC), we participated in a number of ‘COVID-19 appropriate’ outreach events in 2020.

■ World Hepatitis Day 2020 (July 28th)

At the Northcott Housing Estate, we provided 11 DBS tests in just over 2 hours and reached a total of 58 peers, providing important HCV peer education.

■ International Overdose Awareness Day 2020 (August 31st)

We supplied 60 naloxone kits to 30 members of our community at Northcott Housing in just over 90 minutes! We were able to provide lifesaving peer education about overdose to the Surry Hills community.

■ International Drug Users Day 2020 (November 1st)

NUAA provided HCV DBS screening and peer education at Woolloomooloo for 9 community members.

■ Seniors Morning Tea (May 26th)

NUAA provided information about prescription medications to people aged over 50 by working with ACON, KRC and Surry Hills CDAT to run a panel discussion at SHNC.

■ Livestream of Jude Byrne’s Funeral (March 16th)

NUAA brought our community together at Teachers Federation Building to watch a livestream of Jude Byrne’s Canberra Funeral.



To commemorate International Overdose Awareness Day, and promote harm reduction in the Surry Hills community, Andy (middle) organised an event with KRC and SHNC.

FINANCIAL STATEMENTS

July 1st 2020 – June 30th 2021



NSW USERS & AIDS ASSOCIATION INC

A.B.N. 99 709 346 020

GENERAL PURPOSE TIER 2 FINANCIAL REPORT (Reduced Disclosure Requirements)

For the year ended 30 June 2021

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Statement by Members of the Committee

Independent Audit Report

NSW USERS & AIDS ASSOCIATION INC.

COMMITTEE’S REPORT

Your committee members submit the financial report of NSW Users & AIDS Association Inc for the financial year ended 30 June 2021.

COMMITTEE MEMBERS

The names of committee members throughout the year and at the date of this report were:

Current Members

- President – Fiona Poeder
- Vice President – Daniel Burns
- Secretary – Jennifer Debenham
- Treasurer – Larry Pierce
- Member – Richard Sulovsky
- Member – Brian Doyle
- Member – Carolyn Stubbley
- Member – Robert Page
- Member – Timothy Parsons (app 26/11/2020)
- Public Officer & Ex Officio – Dr Mary Harrod

Ceased Members

- Jude Byrne (ceased 26/11/2020)
- Nicholas Lintzeris (ceased 26/11/2020)

PRINCIPAL ACTIVITIES

The principal activities of the association during the financial year were to conduct health promotion, support and referral services for people who use drugs illicitly in NSW affected by HIV and Hepatitis C.

SIGNIFICANT CHANGES

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

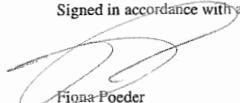
OPERATING RESULT

The surplus from ordinary activities amounted to \$30,099 (2020 surplus: \$103,978).

EVENTS SUBSEQUENT TO REPORTING DATE

Apart from the matter identified in note 14, there has not arisen in the interval between the end of the financial year and the date of this report any item, transaction or event of a material and unusual nature likely, in the opinion of the Members of the Committee of the association, to affect significantly the operations of the association, the results of those operations, or the state of affairs of the association, in future financial years.

Signed in accordance with a resolution of the Members of the Committee.



Fiona Poeder
President

Dated: 23 October 2021

NSW USERS & AIDS ASSOCIATION INC.

INCOME AND EXPENDITURE STATEMENT FOR THE YEAR ENDED 30 JUNE 2021

	2021	2020
	\$	\$
INCOME		
Government grants	1,756,500	1,734,300
Project fees	667,796	620,589
Donations	2,015	82,475
Interest received	1,830	4,194
Sundry income	229,226	192,574
	<u>2,657,367</u>	<u>2,634,132</u>
EXPENDITURE		
Accounting, Audit & Legal	52,182	43,342
Advertising	4,503	22,838
Bank fees	2,533	2,173
Board expenses	5,060	10,180
Catering	4,584	20,006
Consultancy expense	29,814	25,388
Depreciation	79,672	74,604
Design	35,689	6,890
Equipment & consumables	145,286	218,939
Insurance	48,711	38,670
Motor vehicle expenses	27,814	31,042
Peer payments	48,966	50,236
Printing, postage & stationary	86,018	93,384
Provision for employee entitlements	34,052	24,454
Rent	53,720	51,523
Repairs & maintenance	9,415	11,236
Staff training & conferences	38,990	34,991
Staff amenities & support services	21,174	44,017
Salaries & wages	1,652,734	1,488,964
Superannuation expense	151,125	137,442
Sundry expenses	10,777	12,497
Telephone, Computer & IT	55,498	57,637
Travelling expenses	28,950	29,699
	<u>2,627,267</u>	<u>2,530,154</u>
Surplus / (Deficit) from ordinary activities	<u>30,099</u>	<u>103,978</u>
Retained Surplus at the beginning of the year	<u>372,265</u>	<u>268,287</u>
Retained Surplus at the end of the year	<u>402,364</u>	<u>372,265</u>

The accompanying notes form part of this financial report.

NSW USERS & AIDS ASSOCIATION INC.

**ASSETS AND LIABILITIES STATEMENT
AS AT 30 JUNE 2021**

	Note	2021 \$	2020 \$
CURRENT ASSETS			
Cash and cash equivalents	3	1,003,597	621,258
Trade and other receivables	4	19,159	35,392
Other assets	5	18,379	34,474
TOTAL CURRENT ASSETS		<u>1,041,135</u>	<u>691,124</u>
NON-CURRENT ASSETS			
Property, plant and equipment	6	143,144	202,905
TOTAL NON-CURRENT ASSETS		<u>143,144</u>	<u>202,905</u>
TOTAL ASSETS		<u>1,184,279</u>	<u>894,029</u>
CURRENT LIABILITIES			
Trade and other payables	7	150,169	107,269
Deferred income	8	349,394	135,235
Employee entitlements	9	204,561	190,169
Interest bearing liabilities	10	35,677	32,056
TOTAL CURRENT LIABILITIES		<u>739,801</u>	<u>464,729</u>
NON-CURRENT LIABILITIES			
Employee entitlements	9	36,193	16,533
Interest bearing liabilities	10	5,921	40,502
TOTAL NON-CURRENT LIABILITIES		<u>42,114</u>	<u>57,035</u>
TOTAL LIABILITIES		<u>781,915</u>	<u>521,764</u>
NET ASSETS		<u>402,364</u>	<u>372,265</u>
MEMBERS' FUNDS			
Retained surplus		402,364	372,265
TOTAL MEMBERS' FUNDS		<u>402,364</u>	<u>372,265</u>

The accompanying notes form part of this financial report.

NSW USERS & AIDS ASSOCIATION INC.

STATEMENT OF CHANGES IN MEMBERS FUNDS FOR THE YEAR ENDED 30 JUNE 2021

	Retained Surplus \$	Total \$
Opening Balance at 1 July 2019	268,287	268,287
Surplus for the year	103,978	103,979
Closing Balance at 30 June 2020	<u>372,265</u>	<u>372,265</u>
Surplus for the year	30,099	30,099
Closing Balance at 30 June 2021	<u>402,364</u>	<u>402,364</u>

The accompanying notes form part of this financial report.

NSW USERS & AIDS ASSOCIATION INC.

**CASH FLOW STATEMENT
FOR THE YEAR ENDED 30 JUNE 2021**

	Note	2021 \$	2020 \$
CASHFLOW FROM OPERATING ACTIVITIES			
Cash receipts from operating activities		3,172,305	2,859,409
Donation income received		2,015	82,475
Interest income received		1,830	4,194
Interest paid		(1,952)	(2,439)
Payments to suppliers and employees		<u>(2,740,988)</u>	<u>(2,747,664)</u>
	12(b)	<u>433,210</u>	<u>195,975</u>
CASHFLOW FROM INVESTING ACTIVITIES			
Acquisition of assets		(19,911)	(152,818)
Receipt from sale of assets		-	36,363
		<u>(19,911)</u>	<u>(116,455)</u>
CASHFLOW FROM FINANCING ACTIVITIES			
Lease principal repayments		<u>(30,960)</u>	<u>(24,971)</u>
		<u>(30,960)</u>	<u>(24,971)</u>
Net increase (decrease) in cash		382,339	54,549
Opening cash at beginning of year		621,258	566,709
CLOSING CASH AT END OF YEAR	12 (a)	<u>1,003,597</u>	<u>621,258</u>

The accompanying notes form part of this financial report.

NSW USERS & AIDS ASSOCIATION INC.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2021

NOTE 1: STATEMENT OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Preparation

The financial statements are Tier 2 general purpose financial statements which have been prepared in accordance with the *Australian Charities and Not-for-profits Commission Act 2012*, *Associations Incorporations Act NSW 2009* and the Australian Accounting Standards – Reduced Disclosure Requirements (AASBs). The entity is a not-for-profit entity for financial reporting purposes under Australian Accounting Standards. Material accounting policies adopted in the preparation of these financial statements are presented below and have been consistently applied unless otherwise stated.

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.

Accounting Policies

The significant accounting policies that have been used in the preparation of these financial statements are summarised below.

(a) Revenue

Grant revenue is recognised in the income and expenditure statement when the Association obtains control of the grant and it is probable that the economic benefits gained from the grant will flow to the Association 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 Association 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.

Donations and bequests are recognised as revenue when received.

Revenue from the rendering of a service is recognised upon the delivery of the service to the customers.

Interest revenue is recognised using the effective interest rate method, which for floating rate financial assets is the rate inherent in the instrument.

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

NSW USERS & AIDS ASSOCIATION INC.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2021

NOTE 1: STATEMENT OF SIGNIFICANT ACCOUNTING POLICIES

(b) Property, Plant and Equipment

Recognition and measurement

Each class of property, plant and equipment is carried at cost or fair value as indicated, less, where applicable, accumulated depreciation and impairment losses.

Cost includes expenditure that is directly attributable to the acquisition of the asset. Purchased software that is integral to the functionality of the related equipment is capitalised as part of that equipment.

The carrying amount of plant and equipment is reviewed annually by the Committee to ensure it is not recorded above the recoverable amount from these assets.

Plant and equipment that have been contributed at no cost or for nominal cost are valued and recognised at the fair value of the asset at the date it is acquired.

Gains and losses on disposals of property, plant and equipment are determined by comparing the proceeds from disposal with the carrying amount of property, plant and equipment. These gains or losses are included in the statement of income and expenditure. When revalued assets are sold, amounts included in the revaluation reserve relating to that asset are transferred to retained earnings.

Subsequent costs

The cost of replacing part of an item of property, plant and equipment is recognised in the carrying amount of the item if it is probable that the future economic benefits embodied within the part will flow to the Association and its cost can be measured reliably. The carrying amount of the replaced part is derecognised. The costs of the day-to-day servicing of property, plant and equipment are recognised in the statement of comprehensive income as incurred.

Depreciation

Depreciation is recognised in the statement of comprehensive income on a straight-line basis over the estimated useful lives of each part of an item of property, plant and equipment. Leasehold improvements are depreciated over the shorter of either the unexpired period of the lease or the estimated useful lives of the improvements. Land is not depreciated.

The depreciation policy for each class of depreciable assets are:

<i>Class of Fixed Asset</i>	<i>Depreciation Rate</i>
IT and equipment	33% – 100%
Leasehold improvements	20 - 33%
Motor vehicles	10 - 20%

Depreciation methods, useful lives and residual values are reviewed at each reporting date.

NSW USERS & AIDS ASSOCIATION INC.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2021

NOTE 1: STATEMENT OF SIGNIFICANT ACCOUNTING POLICIES

(c) Cash and Cash Equivalents

Cash and cash equivalents in the statement of financial position comprise cash at bank and in hand and short-term deposits with an original maturity of three months or less that are readily convertible to known amounts of cash and which are subject to an insignificant risk of changes in value.

For the purposes of the statement of cash flows, cash and cash equivalents consist of cash and cash equivalents defined above, net of outstanding bank overdrafts. Bank overdrafts are included within interest-bearing loans and borrowings in current liabilities on the statement of financial position.

(d) Goods and Services Tax

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 (ATO). In these circumstances the GST is recognised as part of the cost of acquisition of the asset or as part of an item of expense.

Receivables and payables are stated with the amount of GST included. The net amount of GST recoverable from, or payable to, the ATO is included as a current asset or liability in the statement of financial position.

Cash flows are included in the statement of cash flows on a gross basis. The GST components of cash flows arising from investing and financing activities which are recoverable from, or payable to, the ATO are classified as operating cash flows.

(e) Income Tax

No income tax is payable by the Association for the financial year and subsequent years due to the ATO endorsement as a Public Benevolent Institution and income tax exempt status.

(f) Critical Accounting Estimates and Judgments

The committee 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.

It has not been necessary for the committee members to make any key estimates or judgements in the report.

NSW USERS & AIDS ASSOCIATION INC.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2021

NOTE 1: STATEMENT OF SIGNIFICANT ACCOUNTING POLICIES

(g) Economic Dependence & Going Concern

NUAA is dependent on the NSW Ministry of Health for the majority of its revenue used to operate the business. On 19 November 2019, a 3year funding agreement for the period 1 July 2019 to 30 June 2022 was executed.

Based upon this secured funding agreement, at the date of this report the Committee Members believe NUAA satisfies going concern and will continue operations in the normal manner accordingly.

(h) Impairment of Assets

At each reporting date, the Association reviews the carrying values of its tangible and intangible 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 asset's fair value less costs to sell and value in use, is compared to the asset's carrying value. Any excess of the asset's carrying value over its recoverable amount is expensed to the statement of income and expenditure.

Where the future economic benefits of the asset are not primarily dependent upon on the asset's ability to generate net cash inflows and when the Association would, if deprived of the asset, replace its remaining future economic benefits, value in use is determined as the depreciated replacement cost of an asset.

Where it is not possible to estimate the recoverable amount of an assets class, the Association estimates the recoverable amount of the cash-generating unit to which the class of assets belong.

Where an impairment loss on a revalued asset is identified, this is debited against the revaluation reserve in respect of the same class of asset to the extent that the impairment loss does not exceed the amount in the revaluation reserve for that same class of asset.

(i) Provisions, Contingent Liabilities and Contingent Assets

Provisions are measured at the estimated expenditure required to settle the present obligation, based on the most reliable evidence available at the reporting date, including the risks and uncertainties associated with the present obligations. Where their similar obligations, the likelihood that an outflow will be required on settlement is determined by considering the class of obligations as a whole. Provisions are discounted at their present values, where the time value of the money is material.

Any reimbursement that the Association can be virtually certain to collect from a third party with respect to the obligation is recognised as a separate asset. However, this asset may not exceed the amount of the related provision.

No liability is recognised if an outflow of economic resources is a result of present obligation is not probable. Such situations are disclosed as contingent liabilities unless the outflow of resources is remote in which case no liability is recognised.

NSW USERS & AIDS ASSOCIATION INC.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2021

NOTE 1: STATEMENT OF SIGNIFICANT ACCOUNTING POLICIES

(j) Post-Employment Benefits and Short-term Employee Benefits

The Association provides post-employment benefits through defined contribution plans.

Defined Contribution Plans

The Association pays fixed contributions into independent entities for individual employees. The Association has no legal or constructive obligations to pay contributions in addition to its fixed contributions, which are recognised as an expense in the period that relevant employee services are received.

Short-Term Employee Benefits

Short-term employee benefits are current liabilities included in employee benefits, measured at the undiscounted amount that the Association expects to pay as a result of the unused entitlement. Annual leave is included in 'other long-term benefit' and discounted when calculating the leave liability as the Association does not expect all annual leave for all employees to be used wholly within 12 months of the end of reporting period. Annual leave liability is still presented as current liability for presentation purposes under *AASB 101 Presentation of Financial Statements*.

(k) Leases

Leases in terms of which the Association assumes substantially all the risks and rewards of ownership are classified as finance leases. Upon initial recognition the leased asset is measured at an amount equal to the lower of its fair value and the present value of the minimum lease payments. Subsequent to initial recognition the asset is accounted for in accordance with the accounting policy applicable to that asset.

Leased assets are depreciated on a straight-line basis over their estimated useful lives where it is likely that the Association will obtain ownership of the asset. Lease payments are allocated between the reduction of the lease liability and the lease interest expense for the period.

Lease payments and incentives for operating leases, are now either treated similar to finance leases and are recorded in accordance with AASB 16 Leases as described in Note 1(m), or where substantially all the risks and benefits remain with the lessor, are charged as expenses on a straight-line basis over the lease term where AASB 16 Leases practical expedients have been applied.

NSW USERS & AIDS ASSOCIATION INC.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2021

NOTE 1: STATEMENT OF SIGNIFICANT ACCOUNTING POLICIES

(I) Financial Instruments

Initial Recognition and Measurement

Financial assets and financial liabilities are recognised when the Association becomes a party to the contractual provisions to the instrument. For financial assets, this is equivalent to the date that the Association commits itself to either purchase or sell the asset (i.e. trade date accounting is adopted).

Financial instruments are initially measured at fair value plus transactions costs except where the instrument is classified as at fair value through profit or loss in which case transaction costs are expensed to profit or loss immediately.

Classification and Subsequent Measurement

Finance instruments are subsequently measured at either fair value or amortised cost using the effective interest rate method or cost. Fair value represents the amount for which an asset could be exchanged or a liability settled, between knowledgeable, willing parties. Quoted prices in an active market are used to determine fair value, where available. In other circumstances, valuation techniques are adopted.

Amortised cost is calculated as:

- (i) the amount at which the financial asset or financial liability is measured at initial recognition;
- (ii) less principal repayments;
- (iii) plus or minus the cumulative amortisation of the difference, if any, between the amount initially recognised and the maturity amount calculated using the effective interest method; and
- (iv) less any reduction for impairment.

The effective interest method is used to allocate interest income or interest expense over the relevant period and is equivalent to the rate that exactly discounts estimated future cash payments or receipts (including fees, transaction costs and other premiums or discounts) through the expected life (or when this cannot be reliably predicted, the contractual term) of the financial instrument to the net carrying amount of the financial asset or financial liability.

Revisions to expected future net cash flows will necessitate an adjustment to the carrying value with a consequential recognition of an income or expense in the statement of comprehensive income.

(i) *Financial assets at fair value through profit or loss*

Financial assets are classified at 'fair value through profit or loss' when they are either held for trading for the purpose of short term profit taking, derivatives not held for hedging purposes, or when they are designated as such to avoid an accounting mismatch or to enable performance evaluation where a group of financial assets is managed by key management personnel on a fair value basis in accordance with a documented risk management or investment strategy. Such assets are subsequently measured at fair value with changes in carrying value being included in profit or loss.

NSW USERS & AIDS ASSOCIATION INC.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2021

NOTE 1: STATEMENT OF SIGNIFICANT ACCOUNTING POLICIES

(I) Financial Instruments (continued)

(i) *Loans and receivables*

Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active market and are subsequently measured at amortised cost.

(ii) *Held-to-maturity investments*

Held-to-maturity investments are non-derivative financial assets that have fixed maturities and fixed or determinable payments, and it is the Association's intention to hold these investments to maturity. They are subsequently measured at amortised cost.

(iii) *Available-for-sale financial assets*

Available-for-sale financial assets are non-derivative financial assets that are either not capable of being classified into other categories of financial assets due to their nature, or they are designated as such by management. They comprise investments in the equity of other entities where there is neither a fixed maturity nor fixed or determinable payments.

Available-for-sale financial assets are included in non-current assets, except for those which are expected to be disposed of within 12 months after the end of the reporting period.

(iv) *Financial liabilities*

Non-derivative financial liabilities (excluding financial guarantees) are subsequently measured at amortised cost.

Fair Value

Fair value is determined based on current bid prices for all quoted investments. Valuation techniques are applied to determine the fair value for all unlisted securities, including recent arm's length transactions, reference to similar instruments and option pricing models.

Impairment

At the end of each reporting period, the Association assesses whether there is objective evidence that a financial instrument has been impaired. In the case of available-for-sale financial instruments, a prolonged decline in the value of the instrument is considered to determine whether impairment has arisen. Impairment losses are recognised in the statement of comprehensive income.

De-recognition

Financial assets are derecognised where the contractual rights to receipt of cash flows expires or the asset is transferred to another party whereby the entity no longer has any significant continuing involvement in the risks and benefits associated with the asset. Financial liabilities are derecognised where the related obligations are discharged, cancelled or expired. The difference between the carrying value of the financial liability, which is extinguished or transferred to another party and the fair value of consideration paid, including the transfer of non-cash assets or liabilities assumed, is recognised in profit or loss.

NSW USERS & AIDS ASSOCIATION INC.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2021

NOTE 1: STATEMENT OF SIGNIFICANT ACCOUNTING POLICIES

(m) Initial application of Australian Accounting Standards

When initial application of an Australian Accounting Standard has an effect on the current period or any prior period, or might have effect on future periods, an entity shall disclose the following:

- (a) the nature of the change in accounting policy;
- (b) for the current period and each prior period presented, to the extent practicable, the amount of the adjustment for each financial statement line item affected;
- (c) the amount of the adjustment relating to periods before those presented, to the extent practicable; and
- (d) an explanation if it is impracticable to determine the amounts to be disclosed in (b) or (c).

Financial statements of subsequent periods need not repeat these disclosures.

There has not been any new Australian Accounting Standard initially applied this year.

NSW USERS & AIDS ASSOCIATION INC.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2021

	2021	2020
	\$	\$
NOTE 2: AUDITORS' REMUNERATION		
Auditing or reviewing the financial report & acquittal	12,000	12,000
Other services	-	-
	12,000	12,000
NOTE 3: CASH AND CASH EQUIVALENTS		
Cash at bank	737,280	357,478
Cash on deposit	265,670	263,133
Cash on hand	647	647
	1,003,597	621,258
NOTE 4: TRADE AND OTHER RECEIVABLES		
Trade Receivable	16,500	8,494
Security Deposit	2,282	1,895
Other Receivables	377	25,003
	19,159	35,392
NOTE 5: OTHER ASSETS		
Prepayments	18,379	34,474
	18,379	34,474
NOTE 6: PLANT & EQUIPMENT		
Office Equipment	121,628	109,545
Motor Vehicles	93,699	93,699
Computer & IT	128,862	121,033
Leasehold Improvements	37,709	37,709
Right of Use – property lease	97,529	97,529
Less accumulated depreciation & amortisation	(336,283)	(256,610)
	143,144	202,905
Movements in Carrying Amounts		
Balance at the beginning of the year	202,905	59,255
Additions	19,911	250,347
Disposals – net of writeback	-	(32,093)
Depreciation & amortisation	(79,672)	(74,604)
Carrying amount at the end of the year	143,144	202,905

NSW USERS & AIDS ASSOCIATION INC.

**NOTES TO THE FINANCIAL STATEMENTS FOR THE
YEAR ENDED 30 JUNE 2021**

	2021 \$	2020 \$
NOTE 7: TRADE AND OTHER PAYABLES		
Trade and Sundry Creditors	59,470	30,002
Staff Advances	272	40
Credit Card	(2,424)	1,037
Superannuation Accrual	40,765	38,386
Goods and Services Tax - net	19,291	(6,466)
PAYG Withholding Accrual	32,795	44,270
	<u>150,169</u>	<u>107,269</u>
NOTE 8: DEFERRED INCOME		
Service Fees	243,618	40,000
Kirby Institute - Ethos	-	2,393
PAC Forum	22,000	-
Kirby Institute - Tempo	-	6,780
Nepean Blue Mountains LHD	53,100	-
MOH – Evaluation Report	30,676	-
MOH - DanceWize	-	86,062
	<u>349,394</u>	<u>135,235</u>
NOTE 9: EMPLOYEE ENTITLEMENTS		
CURRENT		
Provision for Annual Leave	117,878	108,450
Provision for Long Service Leave	81,742	74,776
Provision for RDO & TIL	4,941	6,943
	<u>204,561</u>	<u>190,169</u>
NON-CURRENT		
Provision for Long Service Leave	36,193	16,533
	<u>36,193</u>	<u>16,533</u>
NOTE 10: INTEREST BEARING LIABILITIES		
CURRENT		
Right of use – property lease	35,677	32,056
	<u>35,677</u>	<u>32,056</u>
NON-CURRENT		
Right of use – property lease	5,921	40,502
	<u>5,921</u>	<u>40,502</u>

NSW USERS & AIDS ASSOCIATION INC.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2021

	2021	2020
	\$	\$
NOTE 11: LEASING COMMITMENTS		
a. Operating Lease Commitments		
Non-cancellable operating leases contracted for but not capitalised in the financial statements		
Payable:		
— not later than 1 year	75,390	76,131
— later than 1 year but not later than 5 years	131,524	157,610
— later than 5 years	-	-
	<u>206,914</u>	<u>233,741</u>

The association has elected not to recognise a lease liability for short-term (leases with a term of 12 months or less) or for leases of low value assets.

Elizabeth Street premises lease can be terminated with 60-day notice. For commitment note assumed 3 year as no intention to vacate.

Photocopier lease included for period 8/4/19 to 7/4/24.

Assumed 1 year terms for two car space rentals and storage space given outside lease terms and can vacate at short notice.

NOTE 12: CASH FLOW INFORMATION

(a) Reconciliation of cash

Cash on hand	647	647
Cash on deposit	265,670	263,133
Cash at bank	737,280	357,478
	<u>1,003,597</u>	<u>621,258</u>

(b) Reconciliation of cash flow from operating activities

Surplus for the year	30,099	103,978
Adjustments for:		
Depreciation and amortisation	79,672	74,604
Loss (profit) on disposal of assets	-	(4,270)
Changes in assets and liabilities:		
Changes in trade and other receivables	16,233	(5,554)
Changes in prepayments	16,095	(25,496)
Changes in trade and other payables	42,900	(35,365)
Changes in employee benefits	34,052	24,454
Changes in grant income in advance	214,159	63,622
	<u>433,210</u>	<u>195,975</u>

NSW USERS & AIDS ASSOCIATION INC.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2021

NOTE 13 – RELATED PARTY TRANSACTIONS

The Association's related parties include its Committee Members and key management personnel described below.

Unless otherwise stated, none of the transactions incorporate special terms and conditions and no guarantees were given or received. Outstanding balances are usually settled in cash.

During the year ended 30 June 2021:

- The association paid \$nil (2020: \$1,200) to Mr Ivan Albert Rule. Mr Rule provided design services as a contractor.
- The association paid \$20,264 (2020: \$12,593) to 2SQpegs. 2SQpegs provides training and consulting services. This supply relationship with NUAA existed prior to becoming a related party.

(a) Committee compensation

The Committee members act in an honorary capacity and receive no compensation for their services. During the year the committee members are reimbursed for expense incurred fulfilling their duties as a committee member and provide receipts for the reimbursement, or NUAA pays for expense directly to the supplier. The committee members are reimbursed at face value only.

(b) Key management personnel

The names and positions of those having authority for planning, directing and controlling the Association's activities, directly or indirectly (other than Directors), are:

Dr Mary Harrod, Chief Executive Officer

Charles Henderson - Deputy Chief Executive Officer

During the year key management personnel remuneration totalled \$348,933 (2020: \$317,259).

NOTE 14: CONTINGENT LIABILITIES

Apart from the matter below, there are no known contingent liabilities enforceable, or likely to become enforceable, within the next 12 months which may substantially affect the association's ability to meet its obligations as and when they fall due.

A potential exposure has arisen after year end whereby a former employee has instigated a Fair Work General Protection Action complaint against the Association. The action has recently commenced. The Court has ordered the applicant to provide more information on the nature of the claim and disadvantage. Given the ambiguity at this time, the Association is unable to quantify any potential exposure.

Nevertheless, the Association is intending to defend its position with confidence.

NOTE 15 – EVENTS AFTER THE REPORTING PERIOD

With the exception of the matter referred to in Note 14, there has not arisen in the interval between the end of the financial year and the date of this report any item, transaction or event of a material and unusual nature likely, in the opinion of the Committee of the Association, to affect significantly the operations of the Association, the results of those operations, or the state of affairs of the Association, in future financial years.

NSW USERS & AIDS ASSOCIATION INC.

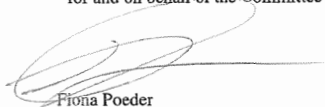
STATEMENT BY MEMBERS OF THE COMMITTEE

The committee has determined that the association is a reporting entity and that this general purpose financial report has been prepared in accordance with the accounting policies outlined in Note 1 to the financial statements.

In the opinion of the committee the financial report incorporating the Income and Expenditure Statement, Assets and Liabilities Statement and Notes to the Financial Statements:

1. Presents a true and fair view of the financial position of NSW Users & AIDS Association Inc as at 30 June 2021 and its performance for the year ended on that date; and.
2. At the date of this statement, there are reasonable grounds to believe that NSW Users & AIDS Association Inc will be able to pay its debts as and when they fall due.

This statement is made in accordance with a resolution of the Committee and is signed for and on behalf of the Committee by:



Fiona Poeder
President

Dated: 23 October 2021



ASHBY & Co.
CHARTERED
ACCOUNTANTS

INDEPENDENT AUDIT REPORT TO THE MEMBERS OF NSW USERS & AIDS ASSOCIATION INC

Opinion

We have audited the financial report of NSW USERS & AIDS ASSOCIATION INC ("Entity"), which comprises the assets and liabilities statement as at 30 June 2021, the income and expenditure statement for the year then ended, statement of changes in members funds, cash flow statement, and notes to the financial statements, including a summary of significant accounting policies, and the declaration by those charged with governance.

In our opinion, the accompanying financial report of NSW USERS & AIDS ASSOCIATION INC is prepared in accordance with Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012*, the *Associations Incorporation Act NSW 2009* and *Associations Incorporation Regulations NSW 2010*, including:

- (a) giving a true and fair view of the Association's financial position as at 30 June 2021 and of its financial performance for the year then ended, and
- (b) complying with Australian Accounting Standards and Division 60 of the *Australian Charities and Not-for-profits Commission 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 Entity 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 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 has been prepared for the purpose of fulfilling the responsible entities' financial reporting responsibilities under the *Australian Charities and Not-for-profits Commission Act 2012*, the *Associations Incorporation Act NSW 2009* and *Associations Incorporation Regulations NSW 2010*. As a result, the financial report may not be suitable for another purpose. Our opinion is not modified in respect of this matter.

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

Those charged with governance are responsible for the other information. The other information comprises the information included in the Entity's annual report for the year ended 30 June 2021, 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.

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CONTACT
T: +61 2 9894 0591
E: mail@ashbyandco.com.au
W: www.ashbyandco.com.au

STREET
Suite 6/31 Terminus Street
Castle Hill, NSW 2154

POST
PO Box 1200 Castle Hill, NSW 1765

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INDEPENDENT AUDIT REPORT TO THE MEMBERS OF NSW USERS & AIDS ASSOCIATION INC

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 Those Charged with Governance for the Financial Report

Directors are responsible for the preparation of the financial report in accordance with the *Australian Charities and Not-for-profits Commission Act 2012*, *Associations Incorporation Act NSW 2009* and *Associations Incorporation Regulations NSW 2010*, and for such internal control as they determine is necessary to enable the preparation of the financial report that is free from material misstatement, whether due to fraud or error.

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

The directors are responsible for overseeing the Entity'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 the financial report.

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 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 Entity's internal control.

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CONTACT

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STREET

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INDEPENDENT AUDIT REPORT TO THE MEMBERS OF NSW USERS & AIDS ASSOCIATION INC

- 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 Entity'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 Entity 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.

Report on Other Legal and Regulatory Requirements

In accordance with the requirements of section 60-45(3)(b) of the *Australian Charities and Not-for-profits Commission Act 2012* we are required to describe any deficiency, failure or shortcoming in respect of the matters referred to in paragraph 60-30(3)(b), (c) or (d) of the *Australian Charities and Not-for-profits Commission Act 2012*. We have nothing to report in this regard.

ASHBY & CO. Chartered Accountants

Anthony Ashby

Anthony Ashby
Partner
Registered Company Auditor # 287837

Sydney, NSW
29th October 2021



ASHBY & Co.
CHARTERED
ACCOUNTANTS

**AUDITOR'S INDEPENDENCE DECLARATION TO THE MEMBERS OF
NSW USERS & AIDS ASSOCIATION INC**

In accordance with section 60-40 of the *Australian Charities and Not-for-profits Commission Act 2012*, as auditor for the audit of NSW USERS & AIDS ASSOCIATION INC for the year ended 30 June 2021, I declare that, to the best of my knowledge and belief, during the period ended 30 June 2021 there has been:

- (i) no contraventions of the auditor independence requirements as set out in section 60-40 of the *Australian Charities and Not-for-profits Commission Act 2012*; and
- (ii) no contraventions of any applicable code of professional conduct in relation to the audit.

ASHBY & CO. Chartered Accountants

Anthony Ashby

Anthony Ashby
Partner
Registered Auditor # 287837

Sydney, NSW
29th October 2021

CONTACT

T: +61 2 9894 0591
E: mail@ashbyandco.com.au
W: www.ashbyandco.com.au

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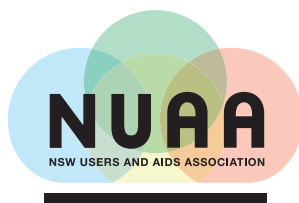
Suite 6/31 Terminus Street
Castle Hill, NSW 2154

POST

PO Box 1200 Castle Hill, NSW 1765

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NSW USERS AND AIDS ASSOCIATION

Street address: Level 5, 414 Elizabeth St, Surry Hills

Postal address: P.O. Box 350, Strawberry Hills, 2012

Ph: (02) 8354 7300 or 1800 644 413 (free call)

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