



2016 – 2017
ATDC Annual Report

www.atdc.org.au

atdc

Alcohol, Tobacco and other
Drugs Council Tasmania Inc.

Our Vision

A Tasmania without drug or alcohol related harm or discrimination.

Our Mission

To provide independent leadership and advocacy; strengthen partnerships through inclusion, and support consumer participation in the promotion of holistic alcohol, tobacco and other drug (ATOD) services for all Tasmanians.

Our Values

The staff and Board of the ATDC strive to uphold the following values when working with members, stakeholders, consumers and drug users as well as each other:

- demonstrate empathy and compassion
- be respectful and treat others with dignity
- be inclusive
- be innovative and creative
- provide high-quality, professional and accessible services and support
- work in partnership.

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President's Report

Well, what an amazing year it has been for the ATDC - it has been exciting to see a number of changes and I believe the organisation is in a prime position moving forward to provide effective leadership in the sector, which is vital when we consider the challenges we still face.

Internally, it was exciting to see the quality accreditation assessment undertaken this year and the success gained. This has been a goal for some time. From a governance perspective, we had the passing of the new constitution and the commitment of the Board to strengthening our governance processes and moving to a skills-based Board. Significant progress has been made implementing these changes.

On behalf of the Board I would like to say a HUGE thank you to our CEO Debra Rabe. You have been amazing, initially stepping into the role in an interim capacity and then coming back to take the role on permanently. The work you have undertaken, the team you are leading and the culture within the ATDC is as strong as it has ever been and I not only thank you, but applaud you.

To all the staff, you are a great group and I appreciate you, the outcomes you achieve are exceptional. I want to make special mention to Dr Jackie Hallam. There has been significant change over the past couple of years and

Jackie has been such an asset stepping in doing extra and representing the ATDC with such passion, thank you Jackie.

I would like to take this opportunity to also thank my fellow Board members: Ros Atkinson, Stephen Brown (Treasurer), Sarah Charlton (Policy Committee Chair), Dr Brian Morris, Grant Herring, Shirleyann Varney, and Michael Voumard. I would also like to acknowledge Jules Carroll who resigned from the Board during the year. Jules made a strong and amazing contribution during challenging times.

This is my last report as President and Board member of the ATDC. It has been a privilege to lead an amazing Board. I will remain passionate for the ATDC and the ATOD sector. Thank you for the opportunities and I will continue to be supporting and barracking us all on into the future.

Stuart Smith
President
ATDC Board



CEO's Report

How lucky am I to work with such an amazing team at the ATDC?

Together we have been able to review the operations of the ATDC, make decisions around what works really well, what needs to change and how we can do things better. We want to work more closely with our members and hear how we can better meet your needs.

The ATDC is represented on multiple State Government committees and working groups to ensure the Tasmanian Government is informed on issues affecting the community sector, knows the huge contribution the community sector makes to alcohol, tobacco and other drugs (ATOD) services in Tasmania and that the community sector ATOD services are aware of, and work towards, the priorities of the government. It is important that the community sector and the government work together. Together we can achieve great things.

It was impressive to see the ATOD community sector cooperate wholeheartedly with the Department of Health and Human Services in the provision of valuable information in consultations that will lead to the development of an AOD Service System Framework. The framework will provide a valuable source of information in reviewing our services, ensuring the needs of our consumers are met and strengthening our services into the future.

Discussions with the State Government on its BluePrint and how it will work with the community sector have also been valuable.

Work with the national ATOD peak organisations has been rewarding, and their collective knowledge and readiness to share information greatly appreciated.

Moving towards our new constitution has seen some exciting changes in the way the ATDC Board works. It is now able to

give its attention to the make-up of the Board and the strategic direction of the organisation.

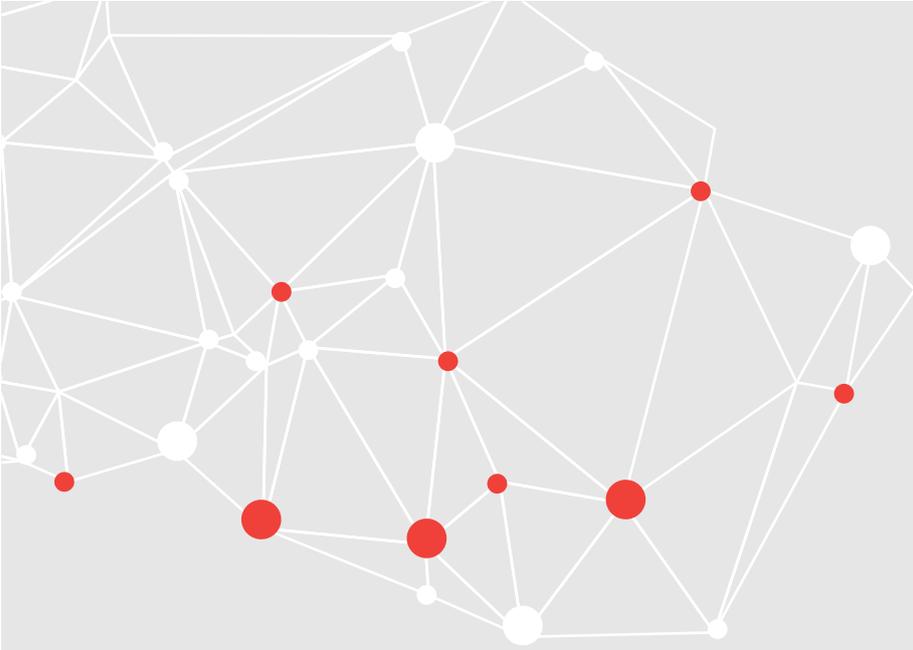
The ATDC has been successful in gaining accreditation with Quality Innovation Performance, pending a couple of documents yet to be provided. This is a big win for the organisation and again has allowed us to look at what we do and how best to do it.

I would like to sincerely thank Jackie Hallam, Olivia Montgomery, Madelyn Derrick, Nick Merklin, Lena Lashin, Tamara McDonald and Megan Smith - the ATDC team - for being so great to work with, for doing what you do so well, and for having the passion and commitment to continue to work with the ATDC and the ATOD sector to ensure we meet the challenges ahead.

Thanks also to those who previously worked with the ATDC for your contribution.

2017-2018 will be another exciting year for the ATDC. We look forward to continuing our work with the ATOD sector to ensure together we deliver the types of services our consumers are looking for and exceptional services that suit their needs. We want to make certain everyone is aware of the amazing services available in the ATOD sector together with the dedication and commitment of those working in it.

Debra Rabe
Chief Executive Officer



About the ATDC

The Alcohol, Tobacco and other Drugs Council Tas Inc. (ATDC) is the peak body representing the interests of community sector organisations that provide services to people with substance misuse issues in Tasmania.

The ATDC is a membership-based, independent, not-for-profit and incorporated organisation which is the key body advocating for adequate systemic support and funding for the delivery of evidence-based alcohol, tobacco and other drug (ATOD) initiatives.

The ATDC:

- supports workforce planning and development through training, policy and development projects with, and on behalf of, the sector,
- represents a broad range of service providers and individuals working in prevention, promotion, early intervention, treatment, case management, research and harm reduction,
- plays a vital role in assisting the Tasmanian Government to achieve its aims of preventing and reducing harms associated with the use of alcohol, tobacco and other drugs in the Tasmanian community.

ATDC Strategic Plan 2015-2018

Throughout 2016-2017, the ATDC continued to achieve the goals contained in the Strategic Plan 2015-2018.

The plan outlines the ATDC's vision, mission and values as well as three broad goals. The organisation refers to the plan frequently, and its success in achieving the goals is measured through the annual Stakeholder Survey. We are on track to update our Strategic Plan in 2018 to ensure we are responding to sector need and currency of approach.

Goal 1	Strategies
To provide effective leadership and representation for the alcohol, tobacco and other drugs sector	1.1 Maintain a broad and engaged membership base for the ATDC
	1.2 Gather member, consumer and stakeholder views to represent and advocate for the interests of the ATOD sector in a range of statewide forums
	1.3 Establish and maintain relationships with all levels of government and their representatives
	1.4 Develop and maintain effective partnerships with a range of stakeholders and organisations
	1.5 Promote evidence-based best practice within the ATOD sector
	1.6 Support the adoption of promotion, prevention and early intervention strategies across the ATOD sector and within other relevant organisations
	1.7 Use all appropriate communication channels to maximise the promotion of the ATDC and the ATOD sector
	1.8 Develop policy and position statements on issues affecting the ATOD sector

Goal 2	Strategies
To build sustainability of the ATDC and the alcohol, tobacco and other drugs sector	2.1 Support workforce planning and development across the ATOD sector
	2.2 Facilitate access to a range of professional development opportunities for ATOD sector staff
	2.3 Support ATDC members to embed continuous quality improvement and participate in accreditation cycles
	2.4 Attain accreditation for the ATDC
	2.5 Ensure that the ATDC is a well governed organisation
	2.6 Seek alternative sources of funding for the ATDC and the ATOD sector

Goal 3	Strategies
To maximise consumer engagement in service planning and delivery	3.1 Support effective consumer representation in the ATOD sector
	3.2 Research and promote policy and position papers regarding models of engagement with consumers, users, families and friends
	3.3 Promote the collection and analysis of consumer feedback within the ATDC and across the ATOD sector
	3.4 Tackle stigma and discrimination within the health and human services sector and broader community
	3.5 Support the creation and maintenance of drug user organisations within Tasmania

ATDC Governance

This year the Board has been transitioning to a 'skills based' Board that oversees governance related matters with day-to-day functions placed more in the hands of executives and other employees.

ATDC Board

Name	Most recent date appointed/elected	Year term expires	Current position	Status	Notes
Stuart Smith	28 October 2015	2017	President	North	Elected President 2015
Stephen Brown	26 October 2016	2018	Treasurer	North	
Grant Herring	26 October 2016	2018	Ordinary	South	
Sarah Charlton	26 October 2016	2018	Ordinary	South	
Ros Atkinson	26 October 2016	2018	Ordinary	North-West	
Shirleyann Varney	26 October 2016	2018	Ordinary	South	
Michael Voumard	26 October 2016	2018	Ordinary	South	
Jules Carroll	26 October 2016	2018	Vice President	South	Resigned March 2017
Brian Morris	28 October 2015	2017	Consumer	South	

As at June 30 2017, the ATDC Board has eight members. The ATDC Board is supported by a new constitution that was passed at the 2016 Annual General Meeting. This year the Board has been transitioning to a 'skills-based' Board that oversees governance related matters with day-to-day functions placed more in the hands of executives and other employees. The changes see the number of directors reduced from 12 to seven.

Previously, all directors were elected by members and quotas dictated that directors were drawn from certain regions and that some positions were held by consumers. Following the new reforms, these quotas were removed and there is now provision for three directors to be appointed by the Board, with four positions still elected by members. These new changes mean that the Board is equipped with all the skills it needs to function.

ATDC Staff



The ATDC team supporting the International Overdose Awareness Day campaign

Debra Rabe

Chief Executive Officer

Debra served as interim CEO for the ATDC, before taking on the role permanently in October 2016. Previously, she had been running her own business, mainly case managing with the National Disability Insurance Scheme and conducting training and mediation for organisations. She has also assisted not-for-profit organisations with funding submissions and governance issues. Prior to that, Debra worked with the Sexual Assault Support Service and the Royal Commission into Childhood Sexual Assault. She also spent 22 years in the Tasmanian Government with many achievements along the way.

Dr Jackie Hallam

Policy and Research Officer

Dr Jackie Hallam has been the Policy and Research Officer at the ATDC since May 2016. Jackie has been employed in a variety of roles within the ATOD sector since 2000, such as a frontline worker in a needle and syringe program, a researcher with UTAS and in workforce development roles with the ATDC. Jackie's research included a Doctorate at the University of Tasmania that looked at policy change in our sector at a national level in Australia from 1980 to 2000.

Olivia Montgomery

Sector Capacity Building Officer

Olivia Montgomery originally joined the ATDC in August 2014 as the Promotion, Prevention and Early Intervention (PPEI) Project Officer and moved into the role of Sector Capacity Building Project Officer in July 2015. After a short stint away in 2016, Olivia re-joined the team in January 2017. Olivia came to the ATDC after a decade of working with the Department of Justice. She is a graduate of the University of Tasmania with a Bachelor of Law and a Graduate Certificate of Legal Practice.



The ATDC's Project Officer Megan Smith

Dr Madelyn Derrick
Facilitating Collaboration in Local Neighbourhoods Project Officer

Dr Madelyn Derrick has been involved in the ATOD sector since 2008 and is a registered Clinical Psychologist. She holds a Bachelor of Psychology with Honours and a Doctorate of Psychology (Clinical), and has conducted research at the University of Tasmania on a variety of substances and their effects on functioning. Madelyn has held clinical and project management roles in the ATOD sector, and has provided clinical supervision and training to ATOD workers. Madelyn joined the ATDC in March 2016.

Nick Merklin
Sector Analyst

Nick Merklin joined the ATDC as a Project Officer in February 2017, and moved into the role of Sector Analyst around April. Nick holds undergraduate and postgraduate qualifications in psychology, and was previously a volunteer counsellor for drug, alcohol and relationship related issues. Nick comes from a research consultancy background, having worked in Melbourne for the last six years in senior management positions, and more recently in Hobart. Nick has experience in developing, managing and running large scale research projects in a range of areas including social services, workplace management, customer satisfaction and service delivery.



The ATDC's Jackie Hallam and Olivia Montgomery at the North-West Bus Tour

Lena Lashin
Administration Officer

Lena started with the ATDC in March 2017. She holds a Bachelor of Arts and a Master of Teaching degree from the University of Tasmania. She has experience in administration and has worked in various administrative government departments and non-government sectors in Tasmania.

Tamara McDonald
Member Relations Officer

Tamara McDonald joined the ATDC as Member Relations Officer at the start of May 2017. She graduated from RMIT in Melbourne with a Bachelor of Journalism in 2015, and then moved to Tasmania to begin her career in communications. She has worked in print and online journalism roles, researching and writing about general news and health.

Megan Smith
Project Officer

Megan joined the ATDC in May 2017 as a Project Officer to assist with the QIP Accreditation Process. As a social worker with over two decades of direct service experience she has worked with individuals, groups, teams and communities from within Commonwealth, state and peak body roles in five Australian states and three countries. She operates primarily from a systems perspective and a narrative therapy framework. Currently undertaking a Masters of Economic and Regional Development, she is also interested in frameworks that engage and empower communities to utilise collective wisdom in seeking innovative solutions to chronic and complex problems.

ATDC Membership

In accordance with the ATDC constitution there are two classes of membership.

Full Membership for:

- representatives of non-government, not-for-profit organisations that are able to demonstrate an interest in, and involvement with, the prevention and reduction of harms associated with alcohol or other drug use,
- past or present consumers of alcohol, tobacco or other drug services in Tasmania,
- other individuals committed to, and able to, contribute to the purpose and objects of the ATDC,
- life members, who are individuals acknowledged by the council to have rendered outstanding service to the council and/or the ATOD sector over a long period of time.

Associate Membership for:

- nominated representatives of State and Commonwealth agencies and other for-profit or not-for-profit groups that have an interest in the provision of ATOD services.

The ATDC has maintained a solid member base throughout its history and as at the end of June 2017 had:

- Twenty-seven full organisational members
- Six individual full members
- Three life members
- Five associate members

Full Membership

Advocacy Tasmania
Anglicare Tasmania
Bethlehem House Tasmania
Brain Injury Association of Tasmania
Circular Head Aboriginal Corporation
Colony 47
Drug Education Network
Family Drug Support
Headspace/ Cornerstone Youth Services
Holyoake Tasmania
Launceston City Mission
Mental Health Carers Tasmania
Mission Australia
Pathways Tasmania
Quit Services Tasmania
Relationships Australia Tasmania
Rural Alive and Well
St Helens Private Hospital
Tasmanian Aboriginal Centre
Tasmanian Council on AIDS, Hepatitis and Related Diseases
Tasmanian Users Health and Support League
Teen Challenge Tasmania
The Hobart Clinic
The Link Youth Health Service
The Salvation Army
Wyndarra Centre
Youth, Family & Community Connections

Associate Membership

Alcohol and Drug Service North
Alcohol and Drug Service South
Hobart City Council
North West Private Hospital
Red Cross Tasmania



Consumer Engagement

Engaging consumers in decision making processes, service planning and delivery, and organisational policy is essential for improving the effectiveness and efficacy of ATOD services.



The ATDC staff join the Support. Don't Punish. photo campaign

The rights of consumers have come a long way in recent years, and it is now well recognised that consumers have an ethical right to be involved in decisions which impact on their health and wellbeing.

The ATDC is committed to supporting the principles of consumer engagement and participation within the ATOD sector. We are actively involved with both Advocacy Tasmania's Consumer Reference Group (CRG) and with the Tasmanian Users Health and Support League (TUHSL). TUHSL was incorporated back in September 2014, but as at June 30 2017, it remains unfunded. Unfortunately, Tasmania is the only jurisdiction nationally that does not have a funded organisation to represent consumers.

Members of both TUHSL and the CRG are voluntary which poses difficulties in terms of their capacity to be fully engaged in the sector as much as they should be, and would like to be. The ATDC and many of its member organisations support these two groups and all believe that consumer representation is an essential element of an effective health service.

Despite the lack of funding, members of these two groups are making great progress in the consumer space and the ATDC will continue to work collaboratively with them in the future.

Policy and Research

A key challenge is representing the views of a very diverse membership around the often controversial topic of drug use.

Providing leadership and representation for the ATOD sector is a core function for the ATDC. We act as an independent, evidence-based voice on key issues as they arise and work collaboratively with the sector to articulate our interests, and most importantly, the interests of Tasmanians who experience harm from alcohol and other drug use. In the last financial year, the ATDC has produced six submissions, all of which can be accessed on the ATDC website.

How does the ATDC formulate submissions?

With each call for a submission or development of a policy paper, the ATDC combines evidence-based, contemporary best practice information and approaches with the views of our community sector organisations (CSOs). The Policy and Research Officer has a research background and is connected to research institutes. Complementing this, the ATDC gathers member views through a variety of mechanisms including face-to-face meetings with members, specially convened groups around a particular topic area, previous submissions as well as other mechanisms where appropriate.

Federal Inquiry into Crystal Methamphetamine

The ATDC provided a written submission to the Inquiry into Crystal Methamphetamine for the Parliamentary Joint Committee on Law Enforcement with the following key points highlighted:

- service users must be involved in policy, process and program design, evaluation and decision making around interventions. Evidence shows that to do so, increases the likelihood of greater responsiveness of programs to consumer need thus leading to positive program outcomes,
- treatment and education approaches must be evidence-based and evaluated,
- we need better regional data to make responsible decision with public budgets,
- it would make sense to broaden focus from crystal methamphetamine to encompass all forms of methamphetamine so to stay ahead of changes in drug purity and types,
- there is an opportunity to rebalance three pillars of Australia's drug approach. Specifically, critically evaluate the unintended impact of law enforcement on health budgets, asking are governments chasing their tails?
- ensure funding arrangements support not impede outcomes, longer funding periods are critical to program fidelity,
- considering people around the drug user is critical, family and friends of drug users need assistance and capacity raising.

Key achievement: following the written submission, the ATDC was invited to speak to the Joint Parliamentary Committee on Law Enforcement.

CSO response to ATOD Service System Framework

In response to consultations regarding the development of a Tasmanian AOD Service System Framework, the ATDC compiled a paper summarising key issues on behalf of the community sector. Key messages included:

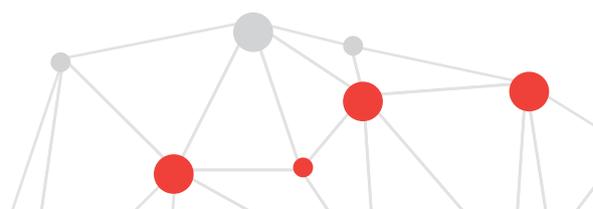
- the lack of an ATOD service user voice across our sector,
- a persistent gap in our service system is the lack of Tasmanian specific data,
- a priority for our sector is further streamlined referral pathways to other services connected to the ATOD sector,
- there needs to be an equal and significant policy focus on preventative health and early intervention, alongside regular and acute treatment programs for alcohol, tobacco and other drugs,
- many of our CSOs have wait lists - this indicates a level of demand that is not being met,
- our CSOs report ongoing issues with access to withdrawal and detoxification services (on the basis of geographical location and number of spaces available),
- ATOD service users have reported issues with access to, and responsiveness of, pharmacotherapy services,
- our CSOs are concerned about availability of needle and syringe provision; specifically lack of access in rural and remote areas and wanting expanded opening hours in metropolitan areas for primary outlets.

Key achievement: consultants reported receiving many copies of the ATDC paper that was distributed to members prior to consultations.

Submission to draft paper on Mandatory Sentencing for ATOD Affected Offenders

In late 2015 the Tasmanian Attorney-General requested an expansion of the terms of reference for the mandatory treatment for sex offenders project to include consideration of mandatory treatment for offenders with alcohol and other drug issues. The ATDC's key points included:

- an individual's drug use is primarily a health issue, and therefore any extension in access to treatment is supported, however, the ATDC has concerns around the adequacy and effectiveness of mandatory treatment,
- people with ATOD issues who have come into contact with the criminal justice system usually present with complex issues that require access to an array of services including: mental health, income support, housing among others. For this group, ATOD treatment must be anchored in 'whole of person' approaches,
- the complexity of 'offender' presentations encompasses depth of a particular issue (such as degree of dependency) alongside interconnectedness to other issues mentioned above,
- investment in existing structures (expansion of counselling, pharmacotherapy to name two) that address ATOD issues may be a better investment of resources,
- CSOs have distinct advantages when providing ATOD treatment. CSOs are more connected to the communities that they serve, usually provide a 'less siloed' type of service delivery and have greater flexibility to be innovative.





The ATDC's Policy and Research Officer Dr Jackie Hallam

Response to National Code of Conduct for health care workers

The Australian Health Ministers' Advisory Council (AHMAC) carried out a national consultation about options around the regulation of unregistered health practitioners. Tasmania's DHHS sought submissions on the issues identified in the draft consultation paper in March 2017. The ATDC reviewed the relevant documents and drafted a submission, the main points of which follow:

- the ATDC supported the definition of health service in the National Code on the basis that it reflected and was inclusive of our CSO workforce characteristics, which we defined carefully,
- the ATDC strongly suggested that the privacy of ATOD clients must be particularly guarded around issues where laws and stigma intersect with health such as found in ATOD issues,
- the ATDC suggested further strengthening of the grounds for making a complaint where health workers understand the effect of disclosure of a client's ATOD status to other workers.

Inquiry into Tasmanian Child and Family Centres

The ATDC provided a written response to the Inquiry and Report into Tasmanian Child and Family Centres (CFCs). The submission largely echoed the many aspects of the service model that underpins CFCs and also identified opportunities for further collaboration.

The ATDC made two points:

- **intervening early:** Tasmanian Child and Family Centres are a vital part of Promotion, Prevention and Early Intervention (PPEI) services, and
- **a holistic model is best:** integrated collaborative health and wellbeing services are critical to addressing health and social issues.

ATDC Budget Priority Statement 2017-2018

One of the most critical submissions is the annual Budget Priority Statement (BPS), completed at the end of each calendar year. Such a document summarises the key issues experienced by our sector and provides direction for future priorities.

The content of each BPS is borne from systematic collaborative processes between the ATDC and member CSOs, as well as subject to contextual factors such as the wider alcohol and other drugs sector, allied health sectors, and justice and political structures. The ATDC's 2017-2018 BPS to the State Government included the following recommendations:

1. That the government provides recurrent funding for a consumer voice (organisation or individual) for people who use alcohol, tobacco and other drugs. Key functions/discrete projects of this group could include:
 - providing policy advice (e.g. input into reform processes and policy forums),
 - facilitating a feedback process,
 - scope innovative methods of Needle and Syringe Program (NSP) provision, e.g. outreach, mail order models with the outcome of recommending responsive service approaches to the Tasmanian context,
 - work with TasCAHRD to identify ways to address barriers to Hepatitis C virus (HCV) treatment from the perspective of people who inject drugs.
2. That the government identifies discrete capacity within the Mental Health, Alcohol and Drug Directorate/Alcohol and Drug Service and the community sector to support the outcomes of the ATOD Service System Review to enable reconfiguration of the entire ATOD sector.
3. That the government invests in a consistent data collection and analysis system across the entire ATOD sector (government, private and community sector organisations) to enable activity and performance reporting obligations to be met and to inform research and planning priorities.
4. That the government negotiates the development of a sustainable grant indexation formula which is applied to all community sector organisations.
5. That the government commences a time-limited project to prevent overdose and to identify and address the barriers to accessing naloxone within Tasmania.
6. A review of access and equipment provision in the NSP according to public health imperatives is conducted. The Tasmanian Government must increase access to sterile injecting equipment across Tasmania, focusing on the following:
 - in rural and remote areas by working in partnership with community pharmacists,
 - by increasing the availability of NSP equipment by location and opening hours,
 - by providing education and support to peers,
 - examining outreach models to supplement fixed site provision.
7. That the government invest in the further development and incorporation of YourCall into frontline health and community services.
8. That the government places an equal and significant policy focus on preventative health and early intervention, alongside regular and acute treatment programs for alcohol, tobacco and other drugs.

Sector Capacity Building Project

The ATDC's Sector Capacity Building Project has continued to achieve great results and outcomes during the 2016-2017 financial year.

The four main objectives of the project are:

- strategic partnerships and linkages,
- service improvement,
- workforce development and capacity building, and
- dissemination of targeted and relevant information.

The project is in its fifth year of funding and continues to successfully provide the ATOD sector with opportunities to network, collaborate, build individual and organisational capacity in identifying and responding to changing and/or challenging needs and provide professional development opportunities.

This year, the project highlights included:

Statewide Cross Sector Bus Tours

These incredibly popular annual cross sector bus tours were held for the sixth consecutive year in April and May 2017. The 54 people attending the tours across the state represented 31 non-ATOD service organisations from the housing, justice, employment and disability sectors. The tours visited 30 ATDC members statewide and showcased the ATOD services available. Evaluation data showed the tours facilitated networking opportunities and participants rated the tours highly, and increased their knowledge of, and their ability to refer to, the ATOD sector.

Overdose Awareness Training

The ATDC was pleased to offer Overdose Awareness training to the ATOD sector this year. The sessions, facilitated by the Penington Institute of Victoria, were run in Hobart and Devonport and were attended by 48 ATOD workers from 23 organisations statewide. Participants learnt to recognise and respond to overdose, how to identify risk and how to administer naloxone in the event of an overdose. Evaluation data showed participants' skills and knowledge of overdose improved dramatically and they would be able to use these skills in their workplaces.

"The training was really beneficial and informative. Found it really valuable"

"All the information was extremely relevant and helpful"

"Great speaker who knew what he was talking about"

"This was a great networking opportunity – met some other service providers who we are now collaborating with about an event"

"I found the number of services visited was very beneficial and improved my knowledge of what each service did"

"It was great getting an overview of all the different services available and meeting the people we will be referring to – good to put a face to a name"

Motivational Interviewing Workshop

In March 2017 the ATDC ran its second Motivational Interviewing workshop, this time on the North-West Coast (Hobart had this workshop in March 2016). Facilitated by Dr Joel Porter from Queensland, this one day practice based workshop for ATOD clinicians explored the depths of MI, planning for change and fidelity coding. Twenty-six ATOD clinicians representing 11 organisations attended, and reported excellent feedback on improved skills, knowledge and confidence in using MI in their treatment.

“The training was relaxed and hands on. I liked that we were able to practise the skills in a supportive environment”

“Dr Joel Porter was a great presenter with valuable experience to share”

“It was well presented and interesting”

Vicarious Trauma Training

In response to member interest, the ATDC ran a Vicarious Trauma workshop in Hobart in June 2017. Facilitated by the Blue Knot Foundation, this one day interactive professional development training explored the nature of vicarious trauma, compassion fatigue and burnout, and provided strategies to stay healthy and safe in the workplace. This training was attended by 25 ATOD workers who rated the training very highly, and noted the usefulness, relevance and importance of the information.

“An amazing training – I gained so much from it and have already used the training in my work”

“Informative – great info on vicarious trauma”

“Excellent training, and excellent organisation by ATDC staff, thank you so much”

Peaks Capacity Building Network (PCBN)

There was continued collaboration with the other state and territory peak bodies through nine teleconferences and three face-to-face meetings in the 2016-2017 period. The focus this year has been on finalising the national online repository of ATOD resources and developing associated position papers, securing future Substance Misuse Service Delivery Grants Fund

(SMSDGF) funding and navigating the new Primary Health Network tender processes in each state. The ATDC has received funding to continue to provide the capacity building needs to the ATOD sector in Tasmania for 2017-2019 and significant time has been spent planning future national sector capacity building projects to be undertaken.

The Project Officer represented the ATDC at a range of sector meetings, events and committees during 2016-2017, including Advocacy Tasmania’s Consumer Reference Group, PPEI Brief Intervention Group, Statewide Youth Collaboration, Tasmanian Suicide Prevention Community Network, Youth Action Network of Glenorchy and the Peaks Capacity Building Network.

Experts, Trainers and Consultants

During 2016-2017, the ATDC engaged a number of experts, trainers and consultants to share their knowledge, expertise and skills with our ATOD workforce.

Associate Professor Raimondo Bruno is an Associate Professor in the School of Medicine at the University of Tasmania, and has been involved in the alcohol and drug sector for over a decade, in numerous research, evaluation and consultancy roles. His main research interests include the cognitive consequences of use of medications and illicit drugs; illicit drug market trends; and the approaches to reduce the harms associated with substance use. The ATDC invited Raimondo to present the latest data on drug markets and health matters for consumers in Tasmania from the Illicit Drug Reporting System, Ecstasy and Related Drug Reporting System and waste water epidemiology studies.

Sandra Simpson is a Workforce Development Project Lead at the Penington Institute in Victoria. She has worked in the health sector for the last 15 years and has extensive experience in the alcohol and other drugs field. Sandra consults with organisations on their learning needs and provides consultation and sector knowledge to organisations looking to implement change and risk management systems. The ATDC invited Sandra to present Overdose Awareness training to our Southern members.

Crios O'Mahony is also a Workforce Development Project Lead at the Penington Institute in Victoria. He has worked in the alcohol and drug sector for over 20 years in both the UK and Australia, working with the homeless, those involved in the justice system and with needle and syringe programs. In his role with the Penington Institute, Crios conducts community forums and capacity building activities across Victoria in the area of methamphetamines and provides training and support for agencies working with drug users. The ATDC invited Crios to present Overdose Awareness training to our North and North-West membership.

Dr Joel Porter is a senior Motivational Interviewing trainer in Queensland and came recommended to the ATDC by Dr Bill Miller, the founder of Motivational Interviewing. Dr Porter has over 25 years' clinical and consulting experience in areas of mental health and addictions. In recent years, Dr Porter has been providing motivational interviewing, relapse prevention, professional ethics and basic counselling skills training events throughout New Zealand, Australia and South East Asia to a wide range of professionals from corrections to behavioural health. Following a very successful session in Hobart in March 2016, the ATDC engaged Dr Porter to run a second Motivational Interviewing workshop to our North and North-West members.



The Penington Institute's Sandra Simpson



Associate Professor Raimondo Bruno presents at the ATDC 2016 AGM

Jai Friend is a trainer with the Blue Knot Foundation, who has a Bachelor of Social Work and a Masters in Clinical Family Therapy. Jai had her first lessons in trauma work on the job, learning from clients in the domestic violence and child protection fields. Wanting to offer more, Jai moved into the child and adolescent mental health sector. This led to training in Dyadic Developmental Psychotherapy, the Conversational Model and other relational based therapies. After 12 years in the mental health field, Jai now works as a trauma/attachment therapist in private practice as well as a trainer with Blue Knot Foundation. The ATDC engaged the Blue Knot Foundation to facilitate Vicarious Trauma training to our ATOD workforce.

Sector Analysis

A key focus of the ATDC remains working with the ATOD sector to identify and address the challenges that face our workforce.

This includes providing access to high quality training, development and networking opportunities around a range of topics, aimed at increasing the skill set of the workforce both professionally and personally. The ATDC also supports the ATOD workforce by gathering and creating research and statistics to guide and inform workforce development strategies, events and initiatives.

The scope of the ATOD Sector Analyst role has changed slightly from the Workforce Development Officer position, however largely remains supporting the workforce by identifying key issues and facilitating activities to address workforce needs. The role also focuses on data analysis and interpretation, feeding into strategic ATOD workforce planning at a state-wide, sector level. Consultation with, and feedback from, member organisations is always welcomed to inform the workforce development process further. The Sector Analyst can be contacted on (03) 6231 5002 or wfd@atdc.org.au.

Workforce Survey

A key continual activity for the ATDC's workforce activity planning is the biennial Workforce Survey. This survey provides a profile of our CSO workforce that provide ATOD services, and is used to guide the workforce development activities the ATDC undertakes.

The 2016 Workforce Survey is in the later stages of completion, with a range of interesting results that will be valuable to both the ATDC and wider ATOD sectors response to workforce development.

So what does the 'typical' Tasmanian ATOD worker look like?

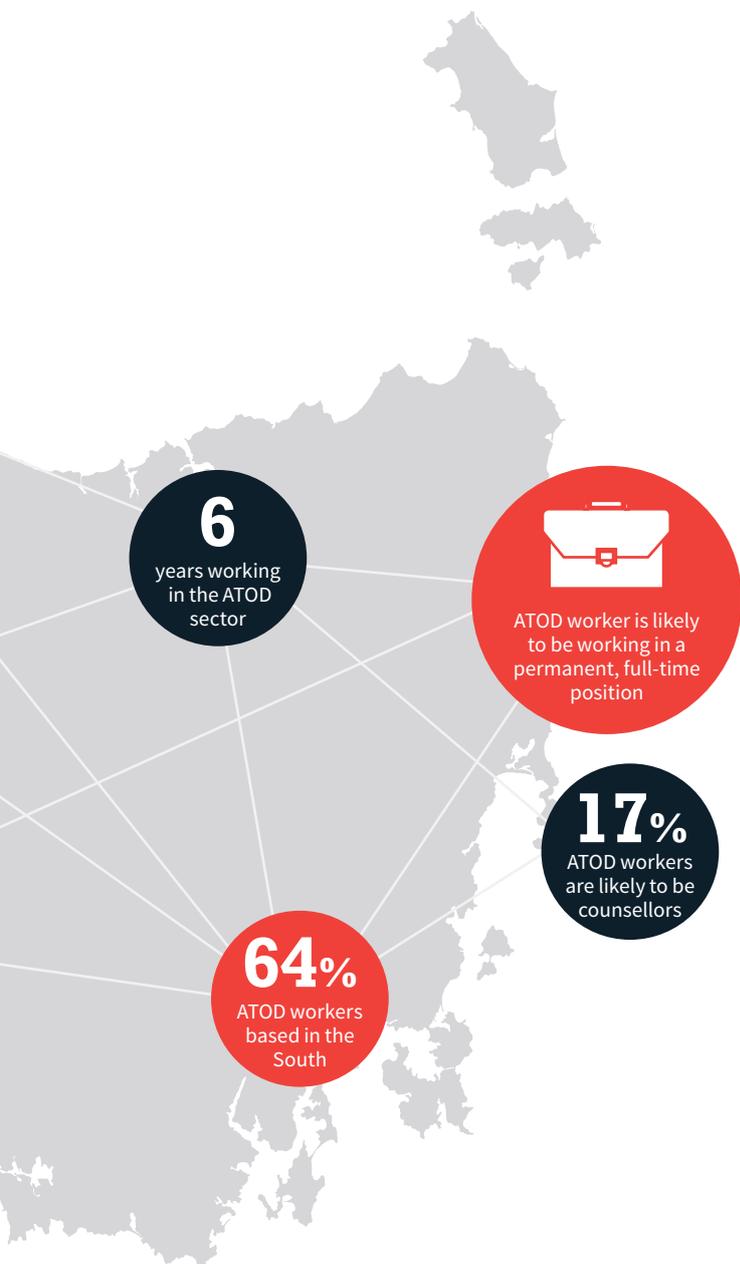
While only indicative of the people who responded (n=111), the ATDC Workforce Survey suggests that the 'typical' Tasmanian ATOD worker:

- is female (68 percent, compared to 27 percent male),
- is aged 55–59 years (21 percent of respondents),
- is based in the South of the state (64 percent of respondents),



- has been working in the ATOD sector for an average of six years,
- is likely to be a Counsellor (17 percent) or Social Worker (12 percent),
- is likely to be working in a permanent, full-time position,
- is likely to hold a bachelor degree qualification in a non-ATOD health, social or behavioural sciences field.

Planning for the 2018 survey will begin in the 2017-2018 financial year, and involve consultation with member organisations to ensure that the data captured reflects the needs of the workforce, and assists in workforce planning for the entire sector.



Stakeholder Survey 2016

The ATDC has conducted its annual Stakeholder Survey for the last five years. Results from the survey are analysed and influence the council's ongoing activities. The survey is integral to the ATDC in improving its efficacy as Tasmania's peak ATOD body. It is sent to both members and non-members via the council's eNews distribution list. The survey included questions on rating support received from the ATDC and areas of interest for future events hosted by the ATDC. Seventy-two people completed the 2016 survey. If you would like to know more about the survey, you can contact the Sector Analyst by emailing wfd@atdc.org.au

Workforce Development Strategy

Sector consultation is a key activity for identifying the needs of the workforce. During 2017-2018, consultations with the sector will commence around the development of a statewide workforce development strategy for community sector organisations. The aim of this strategy is to develop systems and structures to ensure the Tasmanian ATOD workforce remains skilled, viable and able to deal with the demand for services both now and into the future.

The workforce strategy will look at initiatives such as:

- promoting and encouraging new worker entry into the sector to address the ageing workforce,
- structures to promote and enhance the wellbeing and self-care of the ATOD workforce,
- promoting a culture of continued learning and development across the sector,
- facilitating access to minimum skills training (core skill set),
- promoting evidence-based best practice in the treatment of ATOD issues,
- utilising existing structures to better understand and engage the ATOD workforce.

Sector Training and Events

Utilising results from the Workforce Survey and anecdotal evidence from member consultation, the Sector Analyst is continuing to analyse the scope of professional development topics relevant to the ATOD workforce. This information was used to facilitate training events across a range of complex topics throughout the 2016-2017 financial year including personality disorders, vicarious trauma, overdose response training and cross-sector bus tours. Outcome evaluations, with the aim of measuring change, are completed at the end of all ATDC facilitated training and events. Attendees are encouraged to participate to ensure that we continue to deliver high quality, meaningful events for members, that result in improved outcomes for Tasmanians with ATOD issues.

This process will be used moving forward to generate useful and informative professional development topics for future ATDC facilitated events. If you have any thoughts or comments on future professional development topics, please contact the ATDC.

ATDC Strategies

The ATDC started the process of formulating a number of strategies towards the end of 2016-2017 to set direction, and help us move further towards the targets set out in our Strategic Plan.

Our new strategies helped define the new roles introduced in the financial year and are aimed at improving outcomes for the council, its members and the wider community. A meeting of ATDC staff saw the foundations laid for the Communications, Event Management and Member Relations strategies, which will be finalised in 2017-2018.

Communications

The ATDC's Communication Strategy outlines target audiences and the best methods of communication for the ATDC. The strategy lists members, the community and potential members, ATOD stakeholders and the ATOD allied sector workforce as groups the ATDC wishes to communicate with. Following the strategy's formulation, the ATDC worked to improve its implementation of methods outlined in the strategy, and the plan will continue to be used and progress assessed.

Event Management

In order to ensure the ATDC facilitates relevant, informative and successful events, the council developed its Event Management Strategy. The strategy focuses on the 'who, what, why and when' of ATDC events. It is intended to influence and assist how ATDC staff choose topics and plan events, in order to achieve the best outcome for attendees and ensure the strategy and direction aligns with the ATDC Strategic Plan.

Member Relations

The Member Relations Strategy was formulated for all staff, following the implementation of the new Member Relations Officer role. The strategy contains a number of exciting new initiatives to be carried out by the ATDC to maintain and strengthen relationships with members, and boost engagement between the council and its members. A number of aims, goals and activities are listed, and the progress of activities outlined in the strategy will be reviewed in line with the ATDC's Strategic Plan.

Policy and Research

A Policy and Research Strategy was developed in order to set aims around the ATDC's policy development, and included member and stakeholder views being represented and policy papers using contemporary, evidence-based material. The strategy details goals and activities as well as aims.

Workforce Development

A Workforce Development Strategy has been discussed and will be formulated in the 2017-2018 financial year.



Facilitating Collaboration in Local Neighbourhoods project

This past financial year has been a busy time for the Facilitating Collaboration in Local Neighbourhoods project, with some significant initiatives having been implemented.

The project is a collaboration between the ATDC and Neighbourhood Houses Tasmania (NHT), the peak body representing the interests of Neighbourhood Houses. The project has the following objectives:

- build networks and linkages to improve responsiveness and integration of local community services,
- build capacity across Tasmania's Neighbourhood Houses to deliver appropriate support to community members with alcohol and other drug related health and social needs,
- continuous quality improvement across the ATDC, and the member organisations of the ATDC and Neighbourhood Houses Tasmania,
- reduction of alcohol and other drug related stigma across the community,
- development and implementation of a project evaluation framework.

Highlights of the project for 2016-2017 include the following:

Be the Change Program Pilot

Be the Change is an eight-session group program aimed at supporting family members and partners of people with addiction issues. The program took place in ten Neighbourhood Houses around the state, and was facilitated by workers from four ATOD service providers.

An evaluation of the program suggests that the program was very well received, with 100 percent of clients reporting that the content covered in the program was helpful, and 100 percent reporting that they would recommend a Neighbourhood House to a friend.

The pilot assisted ATOD services to gain trust in the Neighbourhood Houses' communities, and to build relationships and exchange knowledge with Neighbourhood House workers. This has resulted in ongoing collaborative efforts between some of the ATOD services and Neighbourhood Houses, with some exciting initiatives being planned. The Be the Change program materials (Facilitator's Manual and Client Workbooks) are available. Please contact the ATDC to access them.



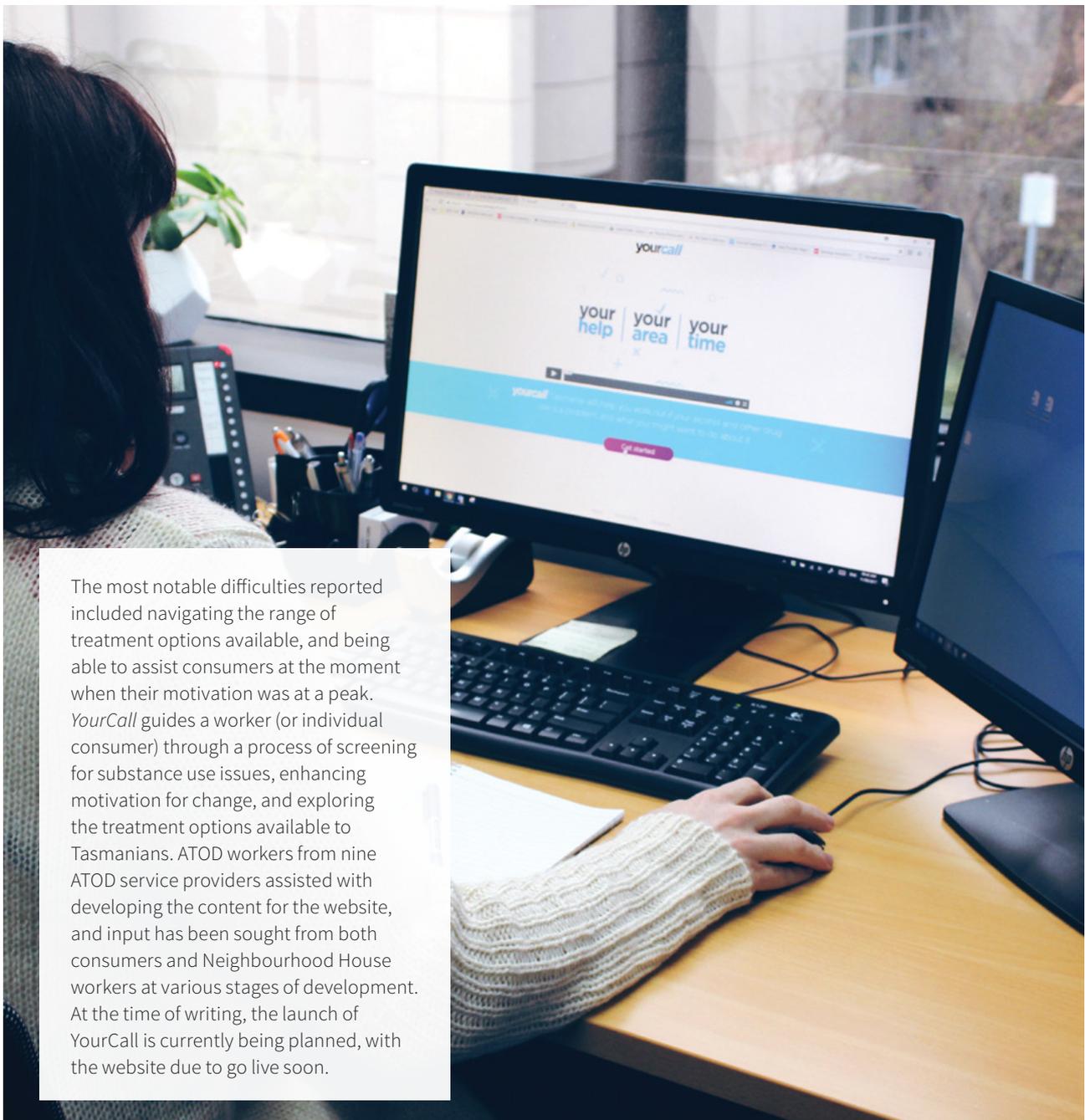
Workforce Development

Neighbourhood House workers and volunteers have been presented with a range of options for expanding their understanding of substance use problems and intervention options, and for developing skills in responding to individuals experiencing substance use issues. The Project Officer facilitated workshops at several NHT member meetings and, in collaboration with the Drug Education Network, exhibited and presented at the annual NHT conference. A selection of ATOD-related resources have also been made available to Neighbourhood House workers via the NHT website.

ATOD sector workers have been presented with a number of opportunities to familiarise themselves with the offerings of Neighbourhood Houses. Bus tours of Neighbourhood Houses in all three regions of the state were arranged, and a worker from NHT has been visiting ATOD services to talk to workers about the role that Neighbourhood Houses can play in the 'after care' phase of addiction recovery.

YourCall Website

The *YourCall* website is near completion. *YourCall* was developed in response to the difficulties that Neighbourhood Houses reported in responding to people experiencing substance use issues.



The most notable difficulties reported included navigating the range of treatment options available, and being able to assist consumers at the moment when their motivation was at a peak. *YourCall* guides a worker (or individual consumer) through a process of screening for substance use issues, enhancing motivation for change, and exploring the treatment options available to Tasmanians. ATOD workers from nine ATOD service providers assisted with developing the content for the website, and input has been sought from both consumers and Neighbourhood House workers at various stages of development. At the time of writing, the launch of *YourCall* is currently being planned, with the website due to go live soon.

Communications

Clear and consistent communication allows the ATDC to relay evidence-based information to a variety of stakeholders and the community.



The ATDC's CEO Debra Rabe speaks to the media



The ATDC's Policy and Research Officer Jackie Hallam and YFCC Team Leader – Health Promotion Damian Collins are photographed at the North-West Bus Tour

The council's communications reflect its values and strategic goals. The ATDC communicated in a diverse array of methods in 2016-2017, engaging with a broad audience via channels including social media, its website, the media and eNews.

eNews

eNews has continued to be a key channel for the ATDC to communicate with both its members and other interested parties. The monthly editions were sent to a list of almost 700 subscribers, and feature sector news, job vacancies within the sector, alerts about key documents (academic and grey literature and national frameworks), comprehensive listings of training information and other professional development opportunities, and updates on ATDC activities.

Website

Training updates, coverage of events and publication of policy and research documents continue to be key features of the ATDC website. Updating content was also a priority, with an emphasis on ensuring the most up-to-date training and events information was posted. Work developing features and improving the website will continue in the 2017-2018 financial year.

Social Media

Facebook and Twitter audiences continued to grow for the ATDC. The ATDC uses Facebook to share news about both Tasmania's and the wider ATOD sectors. Training opportunities, member news and eNews editions are also broadcast on the ATDC Facebook, which had grown to 386 followers at the end of 2016-2017. Twitter is used to share 'bite-size' statuses quickly and consistently, and is great way for the council to share a broad and interesting range of content and news. The ATDC's account had reached 334 followers at the end of the financial year. LinkedIn, a platform targeted at professionals, is used less frequently but with more tailored content. The council's LinkedIn profile features job vacancies, and items including links to eNews and updated ATDC website content. The ATDC takes photographs at various events, which are posted to its website and social media channels, and used in documents and reports.

Media Engagement

The ATDC was interviewed by multiple media outlets on issues ranging from reports to its bus tours in 2016-2017. Interviews undertaken by the CEO and Policy and Research Officer offered the public insight into the great work of ATOD sector in Tasmania and the issues facing CSOs. Advocating for adequate resources for the sector, highlighting events and promoting evidence-based best practice will continue to be among the council's priorities when communicating with the media.

Member Relations

The Member Relations Officer role was created in order to facilitate members accessing the council more easily.

Regional ATDC Member Meetings

The ATDC continued to hold its popular RAMMS meetings on a tri-annual basis in the state's three regions. In 2016-2017, RAMMs were held in July, October and March. Attended by the ATDC staff, including the Policy and Research Officer and CEO, the meetings provide an avenue for:

- regional members to discuss topical issues in the ATOD sector and influence the ATDC's priorities,
- informing the peak body of what is unfolding at the coalface of the sector,
- promotion of improved coordination of ATOD programs and services,
- facilitating a meeting point for government and community ATOD services.

There were nine RAMMs meetings in total in the 2016-2017 period. Across all meetings there were 76 attendees, excluding ATDC staff. Fifty-four percent of member organisations attended RAMMS, and attendance rates were consistent across 2016-2017, although there was increased attendance when a guest speaker presented about funding processes and timelines. Summary of Outcomes from the meetings are available on the ATDC website. The ATDC thanks its members for their attendance at the informative meetings and looks forward to their continuation throughout the 2017-2018 financial year.

In addition to RAMMs, the ATDC undertook a number of initiatives in 2016-2017 to improve member engagement:

- the ATDC engaged with its broad and diverse membership in an array of ways including training sessions, member consultations, specially convened meetings to discuss policy positions, and its annual bus tours,
- the Member Relations Officer role was created in order to facilitate members accessing the council more easily. The officer acts as a gateway for member organisation staff, who can direct questions about the sector or the ATDC to the officer. The officer can then draw on the expertise at the ATDC to provide knowledge and send them in the right direction. Member meetings allow members a chance to raise potential issues, consequently informing the ATDC's priorities, discussion and long-term strategies and actions,
- increased ATDC support, through presence at member events and promotions of achievements and opportunities including job vacancies, is a focus going forward,
- a Member Relations Strategy was in development as at the end of 2016-2017 to assist all ATDC staff to guide their interactions and enhance relations with members.



Financial Statements

Alcohol Tobacco And Other Drugs Council
(TAS) Inc Trading as ATDC

ABN 91 912 070 942

Financial Statements
For the year ended 30 June 2017

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Auditor's Report

Darko + Partners

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Hobart Tasmania 7000
Phone: 03 6236 9911 Fax: 03 6234 1571

Alcohol Tobacco And Other Drugs Council (TAS) Inc

Trading as ATDC

ABN 91 912 070 942

Income and Expenditure Statement

For the year ended 30 June 2017

	2017	2016
	\$	\$
INCOME		
Grants Commonwealth – Recurrent	351,673	193,499
Grants State - Recurrent	509,060	484,229
Grants State - Non-Recurrent		41,129
Donations & Sponsorship		7,727
Event Income	4,407	57,819
Membership Fees	8,975	8,490
Other income	11,073	22,901
Total income	<u>885,188</u>	<u>815,794</u>
EXPENSES		
Accountancy	4,083	610
Advertising & promotion	1,384	3,009
Assets Purchased < \$5000	6,647	13,247
Audit fees	9,471	2,230
Bank fees & charges	185	226
Board & Governance Expenses	12,253	4,488
Planning / Reporting / Evaluation	10,253	8,183
Cleaning & Pest Control	2,798	1,200
Client Support Services	5,822	82,485
Computer Expenses	80,566	8,450
Consultants fees	785	53,117
Electricity	2,199	2,114
Employment Support / Supervision	5,199	1,442
Hire/Rent of plant & equipment	2,888	2,340
Insurance	7,630	3,671
Interest - Australia	169	
Legal fees	620	4,126
Meeting Expenses	1,000	749
Memberships & Subscriptions	91	817
Member Training & Costs	32,652	
M/V car - Depreciation	4,703	4,211
M/V car - Fuel & oil	2,532	1,793
M/V car - Registration/Ins	264	1,100
M/V car - Repairs	544	721
Postage	359	414
Printing & stationery	4,599	2,474
Publications & Info Resources	3,067	1,468
Rent on land & buildings	39,442	33,152
Staff amenities	2,408	1,397
Staff training	7,444	8,864
Sundry expenses	1,124	262
Telephone	5,338	5,108
Travel, accommodation & conference	16,212	10,738
Venue Hire		24,687
Wages	533,533	485,709
Total expenses	<u>808,263</u>	<u>774,603</u>
Profit from ordinary activities before income tax	76,926	41,191
Income tax revenue relating to ordinary activities		
Net profit attributable to the association	76,926	41,191
Total changes in equity of the association	<u>76,926</u>	<u>41,191</u>
Opening retained profits	310,050	268,859
Net profit attributable to the association	76,926	41,191
Closing retained profits	<u>386,975</u>	<u>310,050</u>

Alcohol Tobacco And Other Drugs Council (TAS) Inc
Trading as ATDC
ABN 91 912 070 942
Detailed Balance Sheet as at 30 June 2017

	2017	2016
	\$	\$
CURRENT ASSETS		
Cash Assets		
Bendigo Cash Management 9683	186,138	127,821
Strategic Reserve Account	122,619	119,604
Future Projects Account 7430	115,044	112,308
Bendigo Cash Management 1461	30,224	30,001
Petty Cash	200	400
	<u>454,225</u>	<u>390,133</u>
Receivables		
Trade debtors	1,930	1,020
	1,930	1,020
Total Current Assets	<u>456,155</u>	<u>391,153</u>
NON-CURRENT ASSETS		
Property, Plant and Equipment		
Plant & equipment - At cost	35,651	35,651
Less: Accumulated depreciation	(35,651)	(35,651)
Motor vehicles - At cost	34,830	33,690
Less: Accumulated depreciation	(930)	(8,422)
	33,900	25,268
Total Non-Current Assets	<u>33,900</u>	<u>25,268</u>
Total Assets	<u>490,055</u>	<u>416,421</u>
CURRENT LIABILITIES		
Payables		
Secured:		
Trade creditors	301	4,904
	301	4,904
Financial Liabilities		
Unsecured:		
Bendigo - Credit Card 6087	4,958	
	4,958	
Current Tax Liabilities		
GST payable control account	22,128	16,529
Input tax credit control account	(18,376)	(13,375)
Payroll Liabilities: Payg	8,498	5,708
Payroll Liabilities: SGC	4,063	
	16,313	8,862
Provisions		
Annual Leave Provision	19,082	11,461
Annual Long Service Leave Provision	6,700	9,545
Payroll Liabilities: Salary Packaging	(11)	
	25,771	21,006
Other		
Unspent DOH Project Funds		15,862
Unspent DSS Project Funds	55,586	55,586
Unspent TUHSL Project Funds	151	151
	55,737	71,599
Total Current Liabilities	103,079	106,371
Total Liabilities	<u>103,079</u>	<u>106,371</u>
NET ASSETS	<u>386,975</u>	<u>310,050</u>
MEMBERS' FUNDS		
Accumulated surplus (deficit)	386,975	310,050
Total Members' Funds	<u>386,975</u>	<u>310,050</u>

Alcohol Tobacco And Other Drugs Council (TAS) Inc

Trading as ATDC

ABN 91 912 070 942

Notes to the Financial Statements

For the year ended 30 June 2017

Note 1: Summary of Significant Accounting Policies

This financial report is a special purpose financial report prepared in order to satisfy the financial reporting requirements of the Associations Incorporations Act of Tasmania. The committee has determined that the association is not a reporting entity. The financial report has been prepared on an accruals basis and is based on historical costs and does not take into account changing money values or, except where specifically stated, current valuations of non-current assets. The following significant accounting policies, which are consistent with the previous period unless otherwise stated, have been adopted in the preparation of this financial report.

(a) Property, Plant and Equipment (PPE)

Leasehold improvements and office equipment are carried at cost less, where applicable, any accumulated depreciation. The depreciable amount of all PPE is depreciated over the useful lives of the assets to the association commencing from the time the asset is held ready for use. Leasehold improvements are amortised over the shorter of either the unexpired period of the lease or the estimated useful lives of the improvements.

(b) Impairment of Assets

At the end of each reporting period, the entity 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 income statement.

(c) Employee Benefits

Provision is made for the association's liability for employee benefits arising from services rendered by employees to the end of the reporting period. Employee benefits have been measured at the amounts expected to be paid when the liability is settled.

(d) Cash and Cash Equivalents

Cash and cash equivalents include cash on hand, deposits held at call with banks, and other short-term highly liquid investments with original maturities of three months or less.

(e) Revenue and Other Income

Revenue is measured at the fair value of the consideration received or receivable after taking into account any trade discounts and volume rebates allowed. For this purpose, deferred consideration is not discounted to present values when recognising revenue. Interest revenue is recognised using the effective interest rate method, which for floating rate financial assets is the rate inherent in the instrument. Dividend revenue is recognised when the right to receive a dividend has been established.

Grant and donation income is recognised when the entity obtains control over the funds, which is generally at the time of receipt. All revenue is stated net of the amount of goods and services tax (GST).

(f) Goods and Services Tax (GST)

Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Tax Office. In these circumstances, the GST is recognised as part of the cost of acquisition of the asset or as part of an item of the expense. Receivables and payables in the assets and liabilities statement are shown inclusive of GST.

(g) Trade and Other Payables

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

Alcohol Tobacco And Other Drugs Council (TAS) Inc

Trading as ATDC

ABN 91 912 070 942

Statement by Members of the Committee

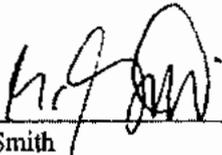
For the year ended 30 June 2017

The Committee has determined that the association is not a reporting entity and that this special purpose financial report should be prepared in accordance with the accounting policies outlined in Note 1 to the financial statements.

In the opinion of the Committee the Income and Expenditure Statement, Statement of Financial Position, and Notes to the Financial Statements:

1. Presents fairly the financial position of Alcohol Tobacco And Other Drugs Council (TAS) Inc as at 30 June 2017 and its performance for the year ended on that date.
2. At the date of this statement, there are reasonable grounds to believe that the association 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:



Stuart Smith
President



Stephen Brown
Treasurer

31-8-17

These financial statements are unaudited. They must be read in conjunction with the attached Accountant's Compilation Report and Notes which form part of these financial statements.

Independent Auditor's Report

To the members of The Alcohol Tobacco and Other Drugs Council (Tas) Inc

Opinion

We have audited the financial report of The Alcohol Tobacco and Other Drugs Council (Tas) Inc (the Entity), which comprises the statement of financial position as at 30 June 2017, the statement comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies and other explanatory information, and the declaration by those charged with governance.

In our opinion, the accompanying financial report presents fairly, in all material respects, the financial position of the Entity as at 30 June 2017 and of its financial performance and its cash flows for the year then ended in accordance with the *Australian Charities and Not-for-profits Commission Act 2012* (ACNC Act).

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 Standard Board's APES 110 *Code of Ethics for Professional Accountants* (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

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 to assist The Alcohol Tobacco and Other Drugs Council (Tas) Inc to meet the requirements of the ACNC Act. As a result, the financial report may not be suitable for another purpose.

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

Management is responsible for the preparation of the financial report in accordance with the ACNC Act, and for such internal control as management determines 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, Management is 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 Management either intends to liquidate the Entity or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Entity's financial reporting process.

Auditor's Responsibility 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.

A further description of our responsibilities for the audit of the financial report is located at the Auditing and Assurance Standards Board website at: <http://www.auasb.gov.au/Home.aspx>. This description forms part of our auditor's report.



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Michael J Burnett B.Com. FCA
Registered Company Auditor
Partner, Accru⁺ Hobart
Lvl 1, 18 Ross Avenue
ROSNY PARK TAS 7018

1-9-17
.....
Date



The ATDC acknowledges the funding provided by the Tasmanian Department of Health and Human Services, the Australian Government Department of Social Services and the Australian Government Department of Health.

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