



**Turning hope
into reality...**

Lives Lived Well
Annual Report 2015-16


Lives Lived Well
Passionate about the possibilities

Turning hope into reality

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A scenic view of a paved path winding through a lush green landscape. The path is made of light-colored gravel or concrete and curves gently through the scene. On the left, there's a grassy area with some small trees and a fence. On the right, there's a row of tall, dark trees. The background shows a clear blue sky with some light clouds. The overall atmosphere is peaceful and natural.

1.

Chairman's report

We believe our refreshed strategic plan will give the direction, flexibility and inspiration to achieve continued development.

Lives Lived Well ended the year well positioned to continue to grow and expand its reach to maximise the impact we have on people and the community at large.

We are in a financially secure position, due in part to our strong fiscal discipline and our commitment to exploring opportunities to diversify our funding base.

Given this secure outlook, the Board has continued a positive and innovative approach in its recent renewal of Lives Lived Well's long-term strategic plan.

The Board identified that excellence and effectiveness, partnerships and co-operation, growth and sustainability, were essential to driving the organisation's future forward and navigating a sector experiencing high demand for services and in an environment of fierce competition.

We believe our refreshed strategic plan will give the organisation the direction, flexibility and inspiration to achieve continued development.

This last year has seen a strong focus on putting our clients front and centre – seeking to engage with them, listen and receive feedback towards improving our service delivery. An example of this is our move towards offering a 28 Day Treatment Program at Mirikai to meet our clients' demonstrated needs for a shorter, more intensive style treatment option in the residential care environment.

We have also improved our systems of measuring outcomes as we seek to assure our clients, stakeholders and Government of our effectiveness through our use of evidence-based programs. We look forward to working more closely with the University of Queensland after entering into a research-based partnership and appointing a Lives Lived Well Professor.

More than ever, we can provide comprehensive support for people from their first contact with us through our dedicated 1300 number to when they are ready to leave our programs through improved aftercare and transitional housing options. Our programs are continuously seeking to provide holistic support to people to live their best lives, indeed that they might be "lived well".

Our stories of support where lives are changed for the better are inspiring – some of them are featured within this report. These stories couldn't happen without the dedicated staff, who I thank sincerely for their passion and commitment. And I thank the strong leadership team who continue to ensure our delivery of services across the state remain professional and of a high standard.

I thank my fellow Board members for their contributions from all areas of expertise.

It has been an honour and a privilege to sit as Chairman of this Board for as long as I have. I am pleased to be continuing as a Board Member and continue to support the work of Lives Lived Well.

Thank you.

Barry Scott
Chairman of the Board

2.

CEO's report

The world does not stand still.

I heard a question posed recently, how far back in history would you need to go, that if you brought someone from the past to 2016, that person would just about die of fright because of all the changes. The answer suggested was you would need to bring someone from the year 1650.

If you did the same thing in 1650, how far back would you need to go before a person brought to 1650 might die – the answer offered was 12,000 years previously.

Going back 12,000 years how far back would you need to go to bring someone to that time and have the risk of them dying - 100,000 years.

The next question becomes, how far forward in time would we need to travel before we might die seeking to accommodate change. The suggestion is that we would only need to journey 30 years into the future to be so shocked that we might “die of fright.”

The world is changing rapidly.

Our world is changing rapidly too.

Significant amongst recent changes has been to “shift service delivery to local communities through the 31 Primary Health Networks (PHN) across the country”. PHNs will take carriage of commissioning the mental health services that they consider necessary and appropriate to the needs of their local communities.

Another key element of this “reform agenda” is stepped care. Stepped care is about people receiving varying levels of primary care treatment and support depending on their level of need, whether that be mild, moderate or severe/complex.

Commonwealth funding for all mental health services, including for headspace and hYEPP, moved to PHNs from July 1, 2016. Something similar may occur with Commonwealth alcohol and other drug (AOD) funding in 2017.

Other elements of the reform agenda included suicide prevention and increased access to services for Aboriginal and Torres Strait Islander peoples.

For any organisation to be successful in this context it needs to provide services that clients and funders ultimately value above others – there are sizable and smaller not-for-profits scrambling to find sustainability in an environment where resources, principally money, is increasingly scarce.

As an organisation, we seek to begin to accommodate such changes and challenges through a considered strategic plan.

Key elements of our approach are:

1. An outcomes mindset
2. Best evidence-based clinical practices
3. An emphasis on staff capability
4. Building recognition of our brand
5. Broadening our reach and impact on individuals and the community.

Key elements of that plan in the past year have been:

- ▶ Standardised outcomes measures, including a consistent measure across all services AOD and mental health
- ▶ Establishing a significant and enduring research partnership with the University of Queensland, including the appointment of the Lives Lived Well Professor
- ▶ The development of a shorter evidence-informed residential program at Mirikai
- ▶ State of the art mental services for young people through headspace Southport, including early intervention for those at risk of mental illness
- ▶ Increased transitional housing opportunities for clients leaving residential services
- ▶ increased emphasis on preventive (Act on Alcohol) and less intensive interventions (day programs)
- ▶ Heightened Clinical Governance
- ▶ Enhanced staff training, supervision and support
- ▶ Increase Consumer and Carer participation and involvement, including engaging “Care Opinion” (an online client feedback forum)
- ▶ Pursued partnerships and alliances with like-minded organisations

- ▶ Giving greater attention to ICT-enabled modalities and options
- ▶ ISO 9001:2008 post-certification surveillance assessment
- ▶ Implementing a digital marketing strategy
- ▶ A revamped website

At the same time, our capability as an organisation has been acknowledged, and we will offer some new programs that commence in the 2016/17 financial year – a five-year contract with Queensland Corrective Services in central and far north Queensland; as well as a gambling project (screening and training pilot) and also work with Brisbane North PHN in Strathpine, Caboolture, Deception Bay and Redcliffe.

It has been a year where Lives Lived Well has continued to flourish in a challenging environment. The future holds in prospect many opportunities for all organisations that will stretch us to be more inclusive, demonstrate our worth and strive for continual improvement.

This report outlines our suite of statewide services that span a continuum of care in AOD, including for Aboriginal and Torres Strait Islander people and young people. The early psychosis program has had an “interesting” first full year of service with threats to funding while at the same time maintaining leading edge service delivery; the coming challenge will be to capture data that supports that proposition.

I feel sure that you find this report informative.

Mitchell Giles
CEO

3.

At a glance - our 2015-16 highlights



Lives Lived Well supported

***7161**

people through all our services and programs throughout Queensland.

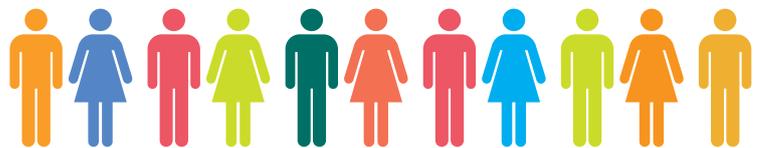
(*this figure excludes our Banjara Medical Centre clients)

We presented a professional development workshop in a new series for the alcohol and other drug sector.

Held over two day, it had

61 attendees

from **42** organisations



Our teams worked tirelessly to provide more than

***39,182**

episodes of care

making a difference to many lives

(* figure reported excludes our Banjara Medical Centre clients)

We provided out-client drug and alcohol counselling to

2852 people



We loved hearing your stories through Care Opinion, an online feedback platform

67%

more young people than the previous year (3669) young people were supported by our **headspace** Southport centre, providing



21,000

episodes of care – almost twice as many episodes as the year before



Everyone fell in love with our new pet therapy dog Jymbi at **headspace** Southport



Our residential services offered **5%** more bed nights than the previous year, with people spending a total of

31,500

bed nights with us, across our 97 beds

We adopted a new long-term Strategic Plan which sets out an exciting future of continued compassion and innovation for Lives Lived Well

Brighter Futures commenced providing support to Aboriginal and Torres Strait Island people and their families in the Murgon and Cherbourg communities

We were awarded a tender to commence providing community re-entry services to men leaving correctional centres in Central and Far North Queensland



About us

We believe in lives lived well

A Queensland-based service, Lives Lived Well supports people to overcome obstacles to living their lives well – particularly those impacted by alcohol and drugs, and problems related to mental health.

We are a non-government, not-for-profit organisation with a belief in harm minimisation and a shared vision of promoting and supporting health and wellbeing and recovery.

Our professional and passionate team, of 176 staff, works together to see thousands of Queenslanders each year supported across 16 locations state-wide.

We do this by providing a range of services including live-in rehabilitation programs and alcohol and drug counselling and support for adults, young people, families and Aboriginal and Torres Strait Islander communities.

We also have programs involving prevention & health promotion, youth outreach, diversion and specialist support for people with a dual diagnosis and complex needs.

Lives Lived Well proudly leads headspace Southport, Banjara Medical Centre, Act on Alcohol and presents professional training and

development workshops for people working in the alcohol and drug support sector.

We believe passionately that people can change and that every individual has the right to live with dignity. We are honoured to have the opportunity to work closely with people to help them lead healthier and happier lives.

We strongly believe that...any day is a good day to tackle addiction.

Our clients and stakeholders

The people who use our services are at the heart of everything we do. They come from urban, regional and rural locations and from a range of backgrounds, ages and cultures. We understand that our clients are mothers, fathers, sons, daughters, aunts, uncles, grandparents, work colleagues and friends. One thing that they have in common is that they need help to tackle problems they are having as a result of their drug and alcohol misuse or mental health concerns.

Some of our clients access general and specialist medical care through our Banjara Medical Centre or are young people seeking mental health support through headspace Southport. In each case, expert and confidential care is provided along

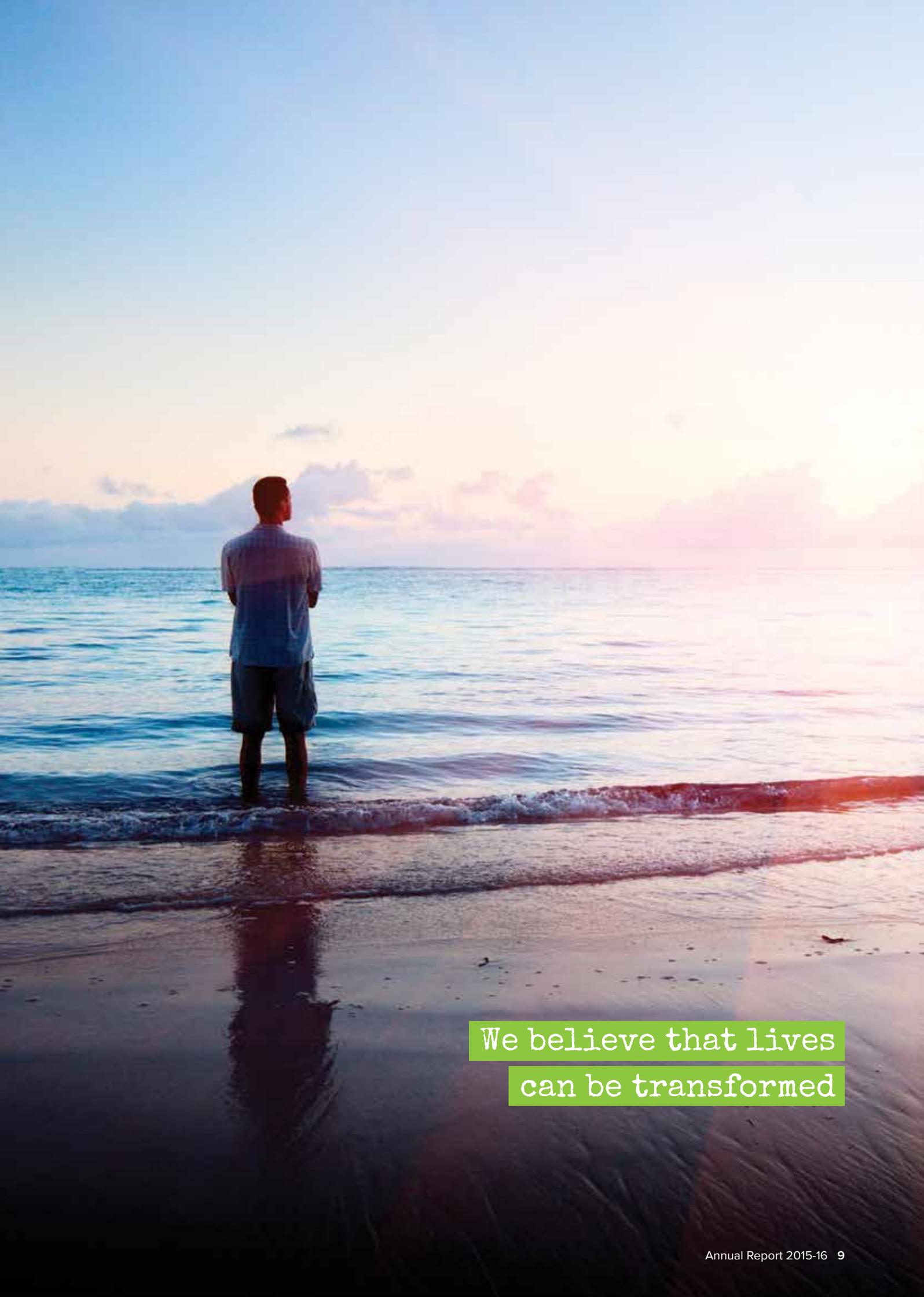
with assessments, referrals and ongoing support.

Our stakeholders also include the wider community, our funders including state and federal government, our partners and supporters, our donors, the community services and mental health sector, researchers working in the alcohol and drug sector, mental health and allied fields and the media. We thank them for their ongoing support, helping us to reach and support more people.

We take a holistic approach to helping our clients. At times, this could extend to working with other government, community and welfare services to help address other life needs, such as in housing, employment, education or health care and connecting them to the relevant community networks.

We work closely with a range of government and non-government service providers including Primary Health Networks, Queensland Health and Hospital Services, the courts, police, community organisations, and the alcohol and other drugs and mental health sector.

Our services have one shared focus – to ensure that Queenslanders live their lives well by promoting and supporting their health and wellbeing.



We believe that lives
can be transformed

Be heard

Lives Lived Well proactively seeks to engage with our clients and communities, inviting feedback and staying connected. Whatever the experience, we want to hear about it so that we can work to improve our services.

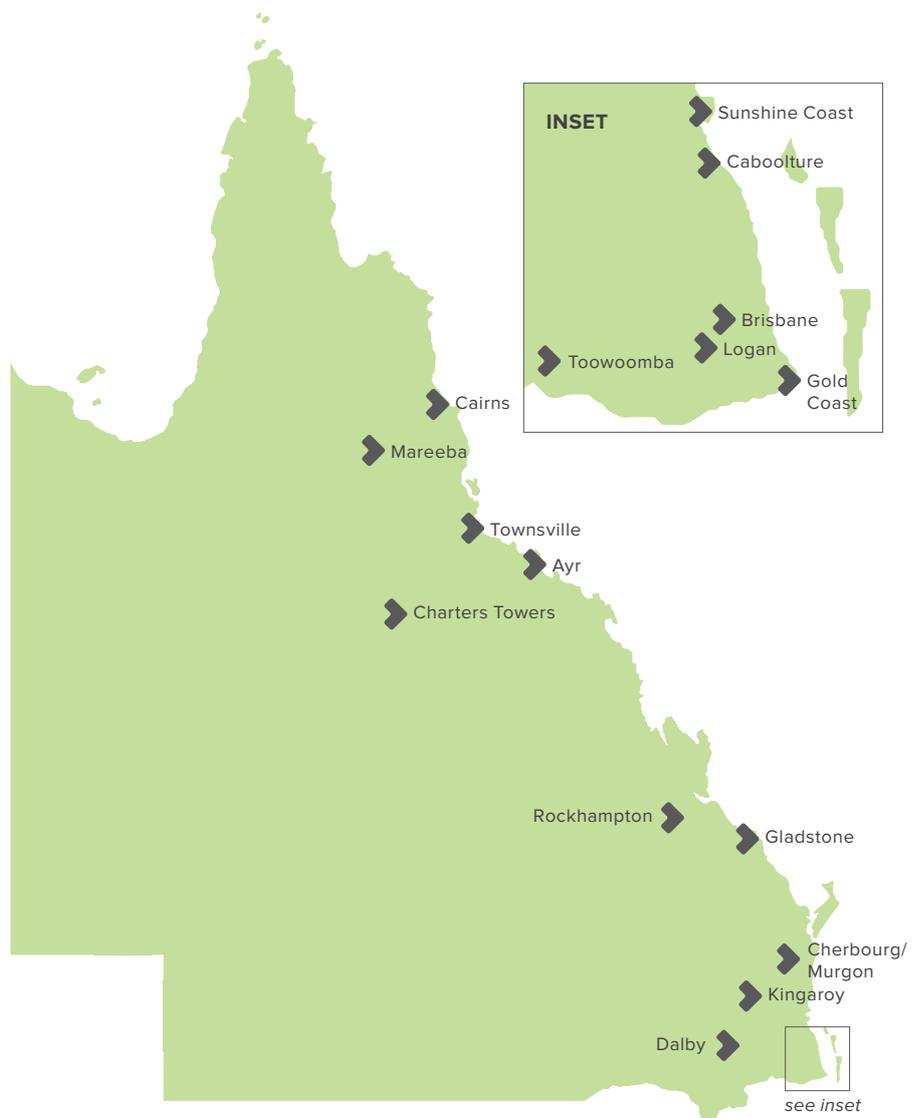
We invite people to email us, connect with us on social media or post their stories on an independent website called Care Opinion, which collects feedback on health care and support services. We also have a Feedback Brochure available for download from our website.

Feedback is also encouraged through our client satisfaction surveys and connection is possible by agreeing to subscribe to our e-newsletters.

Young people are welcome to join our headspace Youth Advisory Council at Southport to give us advice and help keep our headspace services youth-friendly.

Where we are located

We deliver services across 16 locations in Queensland, including Ayr, Brisbane, Caboolture, Cairns, Charters Towers, Dalby, Gladstone, Rockhampton, Gold Coast (Burleigh Heads and Southport), Kingaroy, Cherbourg/Murgon, Mareeba, Logan (Chambers Flat), Sunshine Coast (Maroochydore), Toowoomba and Townsville.





Our strategic plan considers
the challenges we face in an
environment of limited funding
and higher consumer demand
and expectations

5.

Our strategic direction

Our strategic plan guides Lives Lived Well's work and commitment towards providing help for people who have alcohol and drug problems, as well as mental health concerns. We also work to support their families and loved ones.

This financial year, our Board revised our long-term Strategic Plan and endorsed a one-year Business Plan.

Our strategic plan considers the challenges we face in an environment of limited funding and higher consumer demand and expectations along with a need to invest in our staff. We are confident that our approach will see us provide relevant services, informed by service users, that are demonstrated to make a difference.

Our Strategic Directions Statement

By 2025 Lives Lived Well, with our partners, will be delivering person-centred services that maximise impact and achieve best practice outcomes in helping people to overcome obstacles to living their lives well, across multiple states and territories.

Our united mission

We are united in our mission to provide services in the community that achieve the maximum impact in reducing individual and social harm by:

- › addressing problem behaviours
- › building individual and community capacity
- › promoting and supporting health and wellbeing

The values we live by

- › **Integrity** – we act with integrity in all we do
- › **Leadership** – we provide leadership as an organisation and as individuals
- › **Trust** – we value the trust that is placed in us
- › **Accountability** – we accept accountability for all our actions and decisions



Closing the Gap

Lives Lived Well is committed to closing the gap on disadvantage for Aboriginal and Torres Strait Islander people. We bring respect and cultural understanding to our relationships with Indigenous people and communities and we work together towards improving health, wellbeing and employment opportunities. We also work to educate and foster frameworks of unity and respect towards our strong support for Reconciliation.

This year, we have started to implement 'Working with Aboriginal and Torres Strait Islander Clients' training and education workshops.

The first round of training was conducted with our teams at Mirikai. The training provides education around early settlement and reflection on best practice strategies for non-Indigenous staff.

We have continued to provide Aboriginal and Torres Strait Islander Mental Health First Aid training.

We have also formed a Reconciliation Action Plan - RAP Advisory Group, which will drive a renewed Reconciliation Action Plan for Lives Lived Well.

Lives Lived Well supports and participates in a range of Indigenous events, including Reconciliation Week and NAIDOC Week activities.

Also, our Brighter Futures team at Cherbourg and Murgon partnered with other community organisations this year to host a range of Closing the Gap events, including free barbeques, information, health checks and fun activities.

6.

Meet our Board



Barry Scott
Chairman

Barry has over 40 years' experience in senior executive and CEO roles in public and private companies including Coles Myer, Woolworths, Freedom Furniture and Cyberlynx. He is currently Board Chairman for IHCA (Institute for Healthy Communities Australia).



David Tapsall
Deputy Chairman

David has worked in senior management with Qantas for over 33 years and brings a diverse range of experience to the Board in the areas of human resources, industrial relations and finance. He is currently a Member of Australian Institute of Company Directors (MAICD).



Damian Wright
Treasurer

Damian is a Chartered Accountant and Audit Partner with BDO Chartered Accountants. He has been working in the accounting profession for some 25 years and provides services for a wide range of businesses in a variety of industries.



Cheryl Herbert

Cheryl has extensive experience in executive management in the health and community sector, including over 20 years as CEO. She is currently the Chief Executive Officer of the Institute for Healthy Communities Australia Group. Cheryl also holds several non-executive director positions for various health and community service organisations.



Raylee Taylor

Raylee has been involved in suicide prevention at a local, State and National level over the past 25 years. She founded Care for Life: Suicide Prevention Assoc. and is a member of Suicide Prevention Australia and The International Assoc. for Suicide Prevention.



Dr Jeremy Hayllar

Jeremy has been the Clinical Director of Metro North Hospital and Health Service's Alcohol and Drug Service, now part of Metro North Mental Health, for 12 years. A General Physician and an Addiction Physician, his interests include the growing prevalence of pharmaceutical opioid dependence and supporting people to quit smoking.



**Professor
Cindy Shannon**

Cindy is a descendent of the Ngugi people from Moreton Bay. Cindy is the Pro-Vice-Chancellor (Indigenous Engagement) at The University of Queensland and is also currently the Director of the Poche Centre for Indigenous Health. She was previously the Director of the Centre for Indigenous Health at The University of Queensland. She has contributed to Indigenous health policy development and implementation nationally.



Kim Price

Kim has over 20 years' experience in corporate communications, marketing, community engagement and issues management. She has overseen and implemented communication strategies for major organisations in the private and public sectors and has extensive experience working on high-profile projects across a broad range of industries.



Ray Brownhill

Ray has over 30 years' experience in the Queensland Police Service which has included operational, investigative, training and legal positions. Ray's substantive position is the Inspector in Charge of Fortitude Valley Division but he is currently on an external secondment to Griffith University as a visiting fellow to the Griffith Criminology Institute. He is also the Deputy Chair of QBank.

7.

Our senior management team



From left, David Chalmers, Mitchell Giles, Karen Zoch and Marcus Coleman

Mitchell Giles *Chief Executive Officer (CEO)*

Mitchell Giles was appointed as the first CEO of Lives Lived Well in May 2012, following seven years as CEO of the Alcohol and Drug Foundation Queensland.

Mitchell is a Registered Nurse and holds a Bachelor of Business and a Master of Health Science.

Mitchell began work in the alcohol and other drugs sector while working as a nurse in 1988 in an inpatient detox unit. He later went on to manage another acute hospital-based drug and alcohol service for 12 years.

During his career Mitchell has worked in a variety of other positions including serving as Deputy Director of Clinical Services and State Manager for a HIV services program.

Mitchell is a member of the Queensland Mental Health Commission Advisory Council and on the Board of the Queensland Network of Alcohol and Other Drug Agencies (QNADA) and the Australasian Therapeutic Communities Association (ATCA).

David Chalmers *Chief Financial Officer*

David joined Lives Lived Well in September 2012 as the organisation's Chief Financial Officer. He is a Chartered Accountant who originally hailed from Scotland.

Prior to joining Lives Lived Well, David was employed by another not-for-profit organisation that supports people with disabilities.

Marcus Coleman *Operations Director*

Marcus commenced his career as an accountant, progressing through account management roles to larger project management and commercial roles, in Melbourne and London. Prior to commencing at Lives Lived Well in July 2015, Marcus was Oceania Commercial Director at Brightstar. Marcus holds a Bachelor of Commerce.

The personal, financial and analytical skills Marcus has developed over 20 years are in full use at Lives Lived Well every day.

Karen Zoch *Executive Manager People, Culture and Communications*

Karen commenced in the new Lives Lived Well role of Executive Manager (People, Culture and Communications) in February 2016. Through both professional and volunteer roles Karen has more than 20 years' experience across all facets of human resource management and organisational development fields in the not for profit, government and education sectors. This role with Lives Lived Well provides a rare opportunity across the human resource, work health and safety, organisational development and marketing and communications spheres for an organisation where values and client outcomes are paramount.



8.

The difference we make

We are passionate about the possibilities that we see in people and are committed to working with them towards realising their own potential and supporting them to lead lives lived well, free from the harms of addiction.

Our holistic approach means that we aim to respond to the various factors contributing to a person's addiction, as well as addressing any mental health concerns, and drawing upon whatever services are needed to help provide comprehensive support.

Over 2015-16, we provided:

-  face to face and over the phone counselling and support
-  live-in residential programs
-  transitional programs – supported accommodation
-  mental health support for young people
-  programs for young people, including outreach
-  programs for families and friends, including support groups
-  programs for Aboriginal and Torres Strait Islander people, including outreach
-  diversion, prison and court programs
-  and preventative, health promotion-based programs
-  and services from Banjara Medical Centre.

Our program and services

We offer a range of professional and confidential services across Queensland including:

Community services

People come to us for help when their alcohol or drug use becomes a problem in their lives and, if need be, we will go to them through our outreach programs. If they can't come to us, we also provide counselling over the phone.

We are there to listen, to assess and work with people to get their lives back on track, whatever it takes. We see the whole person and take into account their family and cultural background and needs. We will work with other community groups and government agencies to ensure all their needs are met in a holistic and comprehensive approach.

Our free community services range from alcohol and drug counselling, support and outreach to specific programs, such as those that focus on working with young people, families, Indigenous communities or people who have a dual diagnosis or complex needs.

Through these services, our teams work hard with people to help them rebuild their lives after addiction.

Residential services

We manage three rehabilitation programs where people can live-in and recover. These include:

- ▶ **Mirikai:** a 40-bed facility helping those aged 18 to 29 years, located at Burleigh Heads on the Gold Coast
- ▶ **Logan House:** a 37-bed facility helping those aged over 18 years, located in Chambers Flat in the Logan area in Brisbane
- ▶ **Shanty Creek:** a service for Aboriginal and Torres Strait Islander people aged over 18 years, located in Mareeba on the Atherton Tableland, an hour's drive west of Cairns.

We also provide transitional accommodation to help people who are ready to leave our rehabilitation facilities after tackling their addiction. We assist by providing accommodation and support such as re-entry to education and employment.

Medical services – we operate Banjara medical centre on the Gold Coast. This centre provides a general medical practice as well as psychiatric and psychological services, with Medicare bulk-billing available.

Mental health services for young people – we are the lead agency for headspace Southport, a youth mental health service, providing young people with counselling,

information and support on a range of issues, including anxiety, depression, early psychosis, education, employment, alcohol and drugs and general health. This service provides support for mild to complex mental health needs for people aged 12 to 25 years.

Prevention services

We run Act on Alcohol, a service which works closely with Queensland communities to help them find solutions to issues and problems they are facing around alcohol. This service works to provide communities with the knowledge, skills and tools to mobilise, engage and connect with each other to address alcohol-related harms and concerns. We also run CHLY, the Coomera Healthy Living for Youth program, which informs young people, 12 to 25 years, about the risks of drugs and alcohol. Many of our outreach and counselling teams are often out and about at health and community events and in schools, providing information to help reduce the harms related to alcohol and drug misuse.

Drug and alcohol counselling

Our counselling service assists people who are concerned about the role that alcohol and drugs play in their lives, and provide state-wide services funded by Queensland Health.

We help people to identify what is motivating their problematic drug and alcohol use, work with them to develop strategies for addressing their problem and provide tools to help them avoid relapse and focus on recovery.

We also provide support for family and friends to ensure that they are better placed to cope and can more effectively support a loved one dealing with their misuse of alcohol and drugs.

Our service provides a range of assistance including:

- ▶ face-to-face counselling, including youth and Aboriginal and Torres Strait Islander specific programs
- ▶ over the phone counselling
- ▶ comprehensive assessments
- ▶ AOD education
- ▶ information and support for community groups
- ▶ outreach

- ▶ phone support
- ▶ support for family and carers
- ▶ case management
- ▶ advocacy
- ▶ referrals
- ▶ crisis intervention.

We work closely with other agencies including probation and parole, employment, welfare, health and mental health services, community groups and in some regions we work alongside key Aboriginal Elders.

During the year, our alcohol and other drug counselling teams:

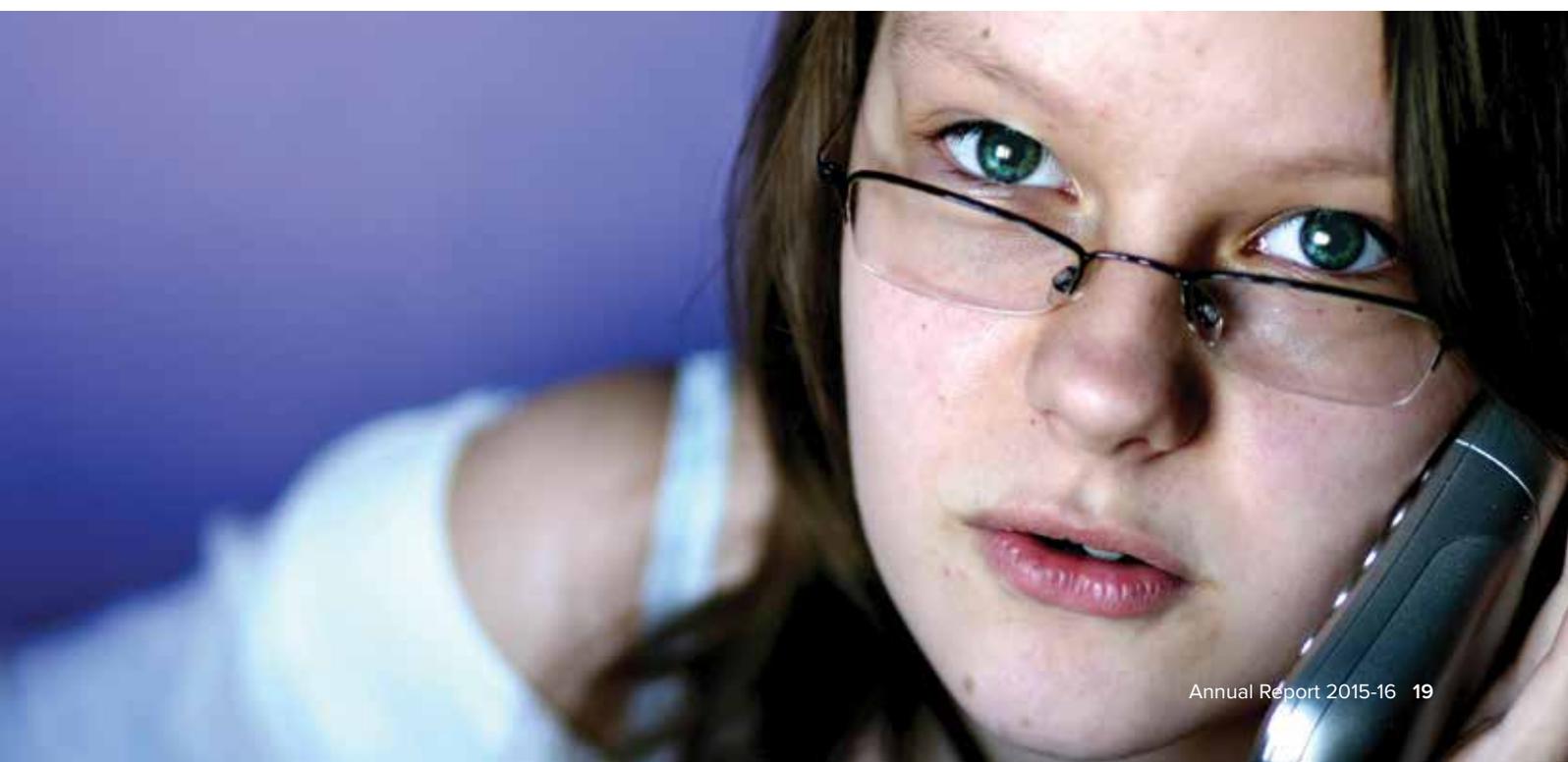
- ▶ supported 1631 people across Queensland assisting them to address the problems they are experiencing as a result of using drugs or alcohol or the impact of a loved one's substance misuse
- ▶ provided a total of 11,922 episodes of care. One episode of care represents each time we supported a client. This includes assessment, case management, advocacy, case review, counselling, crisis intervention, outreach, referral, phone support and transportation to appointments

Doing more for each AOD Counselling client with our episodes of care increasing by 18.5% from the previous year



TABLE (1). HOW WE DELIVERED AOD COUNSELLING BY LOCATION DURING 2015-16:

	Number of clients	Number of episodes of care	Average Age of clients	Breakdown by gender	Primary drug of choice
North Qld – Ayr/Townsville and Charters Towers	134	695	34	70% male 30% female	47% Alcohol 24% Cannabis 15% Meth(ICE)
Central Qld – Gladstone/Rockhampton	357	1914	32	76% male 24% female	24% Alcohol 10% Amphetamines 31% Cannabis 23% Meth (ICE)
Central West - Longreach (program closed Sept 2015)	29	86	28	72% male 28% female	97% Alcohol
Darling Downs (Dalby)	118	390	33	75% male 25% female	24% Alcohol 30% Cannabis 37% Meth (ICE)
Kingaroy	74	423	23	66% male 34% female	20% Alcohol 38% Cannabis 14% Meth (ICE)
Toowoomba	162	1751	25	72% male 28% female	20% Alcohol 39% Cannabis 20% Meth (ICE)
Gold Coast	376	3825	17	47% male 53% female	29% Alcohol 47% Cannabis 16% Meth (ICE)
Sunshine Coast	381	2838	19	63% male 37% female	13% Alcohol 68% Cannabis 12% Meth (ICE)
TOTAL	1631	11,922			



During the year, our AOD services expanded their reach by commencing to offer over-the-phone counselling during office hours. This service enabled us to provide support to more people, including those living in remote areas of Queensland.

In **Kingaroy**, we:

- ▶ provided information in a Healthy Lifestyle Expo in Nanango, Kingaroy, Dalby and Cherbourg
- ▶ attended stakeholder meetings in Kingaroy, Cherbourg, Wondai, Murgon and Dalby
- ▶ have been listed on the police referral system and have been getting referrals from Dalby, Murgon, Cherbourg from the QLD Police Service
- ▶ have created an AOD specific stakeholder meeting in Cherbourg and are organising one for Kingaroy
- ▶ have a partnership with Centrelink where a social worker attends our office weekly to assist clients
- ▶ introduced the Kickstart Gym program for disengaged youth. This has been well received and conducted across Kingaroy and Nanango
- ▶ ran alcohol and drug education sessions at Yarraman SS, Nanango SHS (years 10, 11 and special needs), Kingaroy SHS and St John's Lutheran College.

In **Toowoomba**, we

- ▶ were involved with the Community Learning Centre off Campus School for Aboriginal Youth. This involved weekly visits, playing sport at the Community Youth Games, doing activities such as climbing Tabletop Mountain and building positive relationships with both the young people and the staff
- ▶ continued involvement with the Murri Court and in particular working with Stacey McCarthy, Co-ordinator, and Uncle Darby McCarthy. It is an honour and a privilege to be accepted as their preferred provider of AOD Counselling to Murri Court participants. We look forward to future visits to Gatton Correctional Centre with the Elders
- ▶ worked closely with Youth justice. We continued our involvement in the Youth Justice Conferencing program as an early intervention to young people first entering the criminal justice system
- ▶ conducted weekly visits to headspace and worked closely with its team.

In **Townsville**, we

- ▶ attended the James Cook University student association Orientation Week market day stall
- ▶ worked closely with headspace Townsville
- ▶ worked hard to expand collaborative relationships with a wide range of community services and agencies including health and Indigenous organisations, and corrective services, in the Townsville region.

In **Gladstone**, we

- ▶ continued to build networks and relationships with Probation and Parole and local industry, where many of our referrals originate
- ▶ have been contacted by a number of local Industry providers to seek information and education sessions for their managers and staff
- ▶ were featured in the Gladstone Observer Newspaper a number of times in response to the high number of AOD articles that have been run
- ▶ continued to provide specialist Youth AOD Counselling at the Gladstone headspace Centre.

In **Rockhampton**, we

- ▶ grew from 1 to 2 full-time AOD counselling staff
- ▶ increased our outreach capacity to service the additional towns of Yeppoon, Mt Morgan, Emerald, Blackwater and more remote areas via phone counselling
- ▶ continued to maintain our strong partnerships with Probation and Parole, Youth Justice, The Salvation Army and Red Cross.

Ben's story



***Ben, a 17-year-old apprentice tradie, came home one night in a psychotic state, making no sense at all. His family then became aware he was using the drug, ice.**

Wanting to address the problem, his mother talked him into going to the Lives Lived Well Toowoomba service for counselling.

At his first counselling visit, it was apparent he did not want to be there. In fact, during the visit he asked to use the bathroom and while in there, sent his mother a text message saying "this is sh...".

The mother showed the text to the counsellor.

On his return, the counsellor struck a deal with him – attend two more sessions, without mum, and then you don't have to come back.

Deal.

At his next visit, motivational interviewing was applied, and he was asked when he thought he would know if his ice use was becoming a problem.

He was prompted with the following examples:

- ▶ Would having a criminal record become a problem and impact your plans for the future? It was explained to him that some people have been visiting their dealers when they were raided by the police, and because they were there, they were also charged.

"Wow, that nearly happened to me – my dealer got raided just after I left, and I had even been spending most weekends there!"

- ▶ Would it be a problem if you can no longer contain your ice use to just on the weekends, such as you start having a bad week and need another shot during the week so that you can go to work?

"Yes, I have been using during the week even though I thought I never would!"

- ▶ What about if you start needing a shot on Monday morning just to start the working week?
- ▶ What if you start having issues at work, such as relationship issues with other workers or your boss?

"Wow, that's me. I got into a punch up last week with one of the tradies!"

Ben had shifted from being pre-contemplative to contemplative easily in one session.

This young man had plans for the future, a good supportive family, and a good job, but had slipped into an ice habit. He lived on a farm with his parents, and it was coming up to his 18th birthday.

His brother and father took him camping for 11 days for his birthday and to detox.

His mum spoke with his boss.

Ben agreed to giving mum his credit and debit cards, and to only use his ute to drive to work.

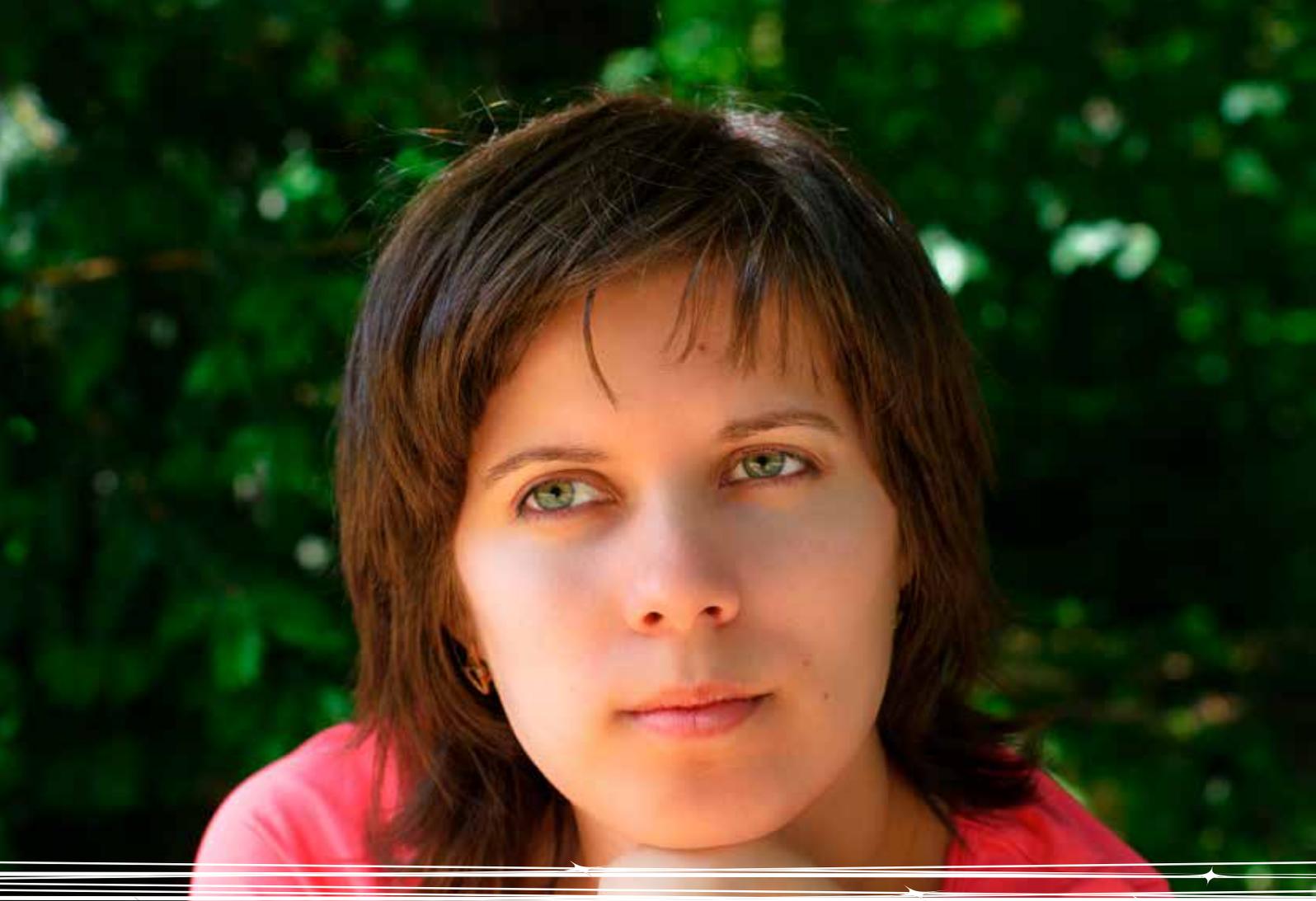
He was isolated from his negative peers, and for a time he only came into town to go to work.

As promised, Ben did one more counselling session around relapse prevention and he did not return.

We've since heard through his mother that he is doing fine.

Ben was fortunate that he received counselling before he had stacked up a lot of negative consequences. This is the advantage of having a supportive and loving family, something that the majority of our clients do not have.

*Please note Ben is not the person's real name and the photo used is not his real image but a stock photo for illustration purposes only. Lives Lived Well works hard to protect the privacy of the clients we help. The name and image have been changed to protect privacy.



Lisa's story

***Lisa came to our Kingaroy service for counselling regarding her misuse of the drug ice.**

She had been using ice for over one year when she had a psychotic episode. She was hospitalised and her two children removed from her care and given into custody of a family member for a set period of time.

Lisa stopped using ice in October 2015 and started counselling with our service in April 2016.

Lisa has attended every counselling session and has now obtained a new job and acquired a house to live in.

Due to her ongoing success in counselling and in her personal life, she has regained custody of her two children two months earlier than initially determined.

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Our Residential Services

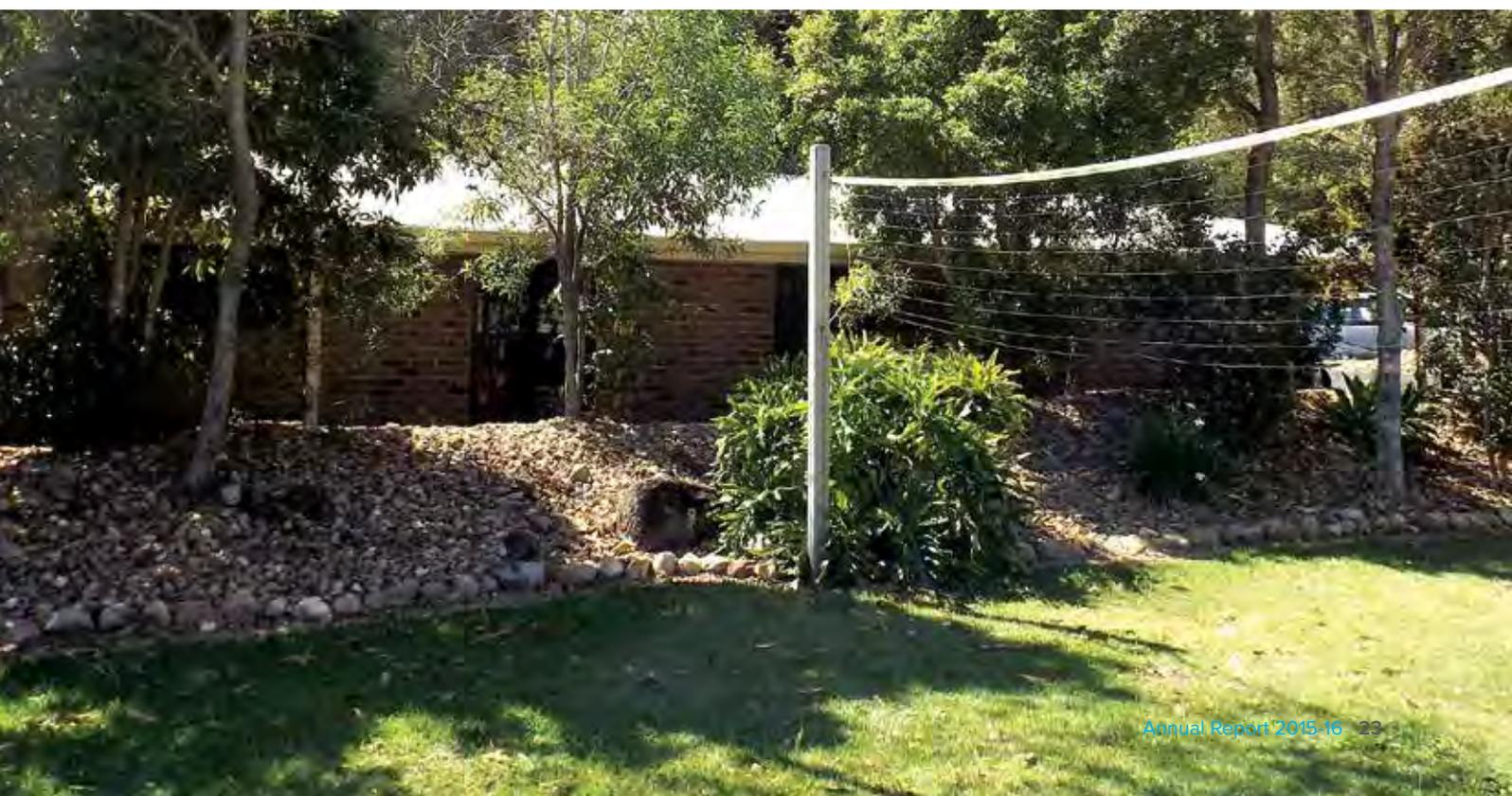
Lives Lived Well runs three residential programs to provide a place for people to live-in and stay, while they undergo a multi-staged alcohol and drug treatment program. We take a “community” approach to recovery in which members of the community support each other to make positive life changes.

Our live-in programs also provide transitional accommodation such as halfway houses and other supported accommodation programs to help our residents return to independent living at the program’s completion.

During the year, our residential services:

- ▶ supported more than 630 people, providing a total of 31,500 bednights, across our 97 beds available
- ▶ served mostly male clients, with males representing 68 per cent of our residential clients
- ▶ reported alcohol or methamphetamine as the primary drug of choice for most of our residents, with an increase in methamphetamine (ice) use observed across all our centres compared to the previous financial year.

Our residential services provided 5 per cent more bed nights than the previous year, representing an extra 1473 bed nights



Logan House



Logan House is an alcohol and drug residential program based at Chambers Flat within the tranquil surrounds of the Logan area. The program assists residents to address their addiction to alcohol and/or other drugs (AOD) whilst considering other factors that have contributed to their arrival to Logan House.

Logan House seeks to support a wide demographic of people aged over 18. The goal of Logan House is to enhance the capacity and commitment of clients to achieve, as well as maintain, an optimal level of personal and social functioning free from harmful AOD use.

Logan House helps residents to increase personal awareness and develop life skills which assist them to reintegrate into the wider community. The program includes access to psychiatric/psychological care, education, group therapy, counselling, case management, work skills development, art and activity and physical activity. Additionally, residents receive comprehensive support through medical/psychiatric assessments, tailored treatment planning and welfare assistance for legal, financial and family matters.

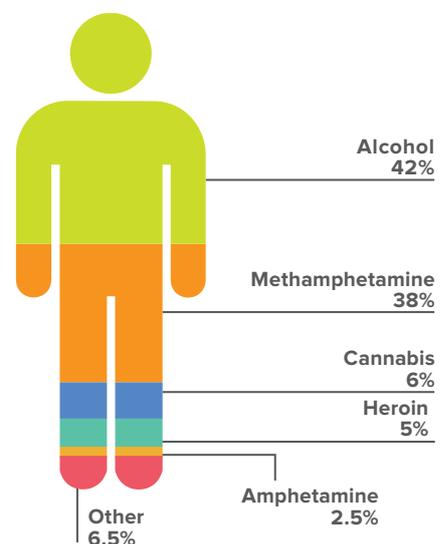
“Logan House was an absolute saviour for me, it not only helped to heal my heart and mind but instilled in me a better understanding of myself. It has helped me to return to a productive and full life and given me the correct tools to deal with the curve balls that life throws”

During the year:

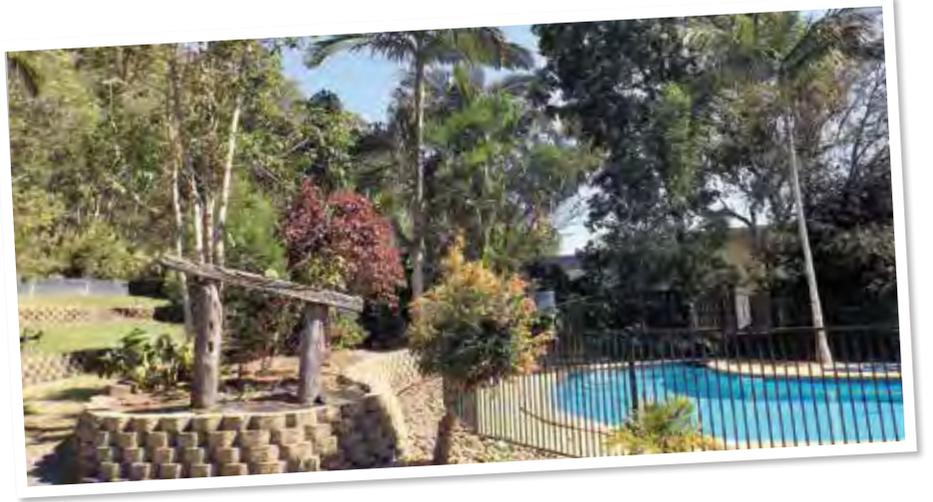
- we supported 217 residents, providing a total of 11, 277 bednights
- the average age of our residents was 37, with 70 per cent being male
- alcohol was the primary drug of choice for 42 per cent of our residents and methamphetamine was the primary drug of choice for 38 per cent of residents
- the average length of stay was 62 days
- we continued our commitment to the Access to Allied Psychological Services (ATAPS) program providing timely psychological interventions to our residential clients
- successfully continued the Banjara Clinic for access to Psychiatry and Allied Health professionals and hosted psychiatric treatment sessions at Logan House supporting the treatment and management of dual diagnosis
- centralised the intake and bed management systems for the purposes of greater consistency, monitoring and improved occupancy
- undertook a comprehensive review of Logan House including all clinical, operational, managerial and relational processes.

Primary drug of choice during 2015-16

Percentage of Logan residents



Mirikai



Mirikai is an alcohol and drug (AOD) residential program based at the Gold Coast. The program assists residents to address their dependence on AOD alongside co-morbid mental health conditions and associated social concerns related to their substance use.

Mirikai seeks to support young people aged 18 to 30 years (up to 35 on a case by case basis). The goal of Mirikai is to enhance the capacity and commitment of clients to achieve, as well as maintain, an optimal level of personal and social functioning free from harmful drug and alcohol use.

Mirikai offers a suite of programs within the design including a 28 Day Treatment Program, a 10 weeks living/life-skills program and some Leadership/Integration programs that preclude the OASIS transition housing program.

Mirikai helps residents to increase personal awareness and develop life skills which assist them to reintegrate into the wider community.

The program includes access to psychiatric/psychological care, education, group therapy, counselling, case management, work skills development, art and activity, physical activity and an information technology jobs skills course accredited through TAFE Queensland.

“Mirikai gave me the opportunity to take my life back. I’m over 5 years clean now with an 11-month old daughter. Thank you Mirikai for giving my life back”

Additionally, residents receive comprehensive support through medical/psychiatric assessments, tailored treatment planning and welfare assistance for legal, financial and family matters.

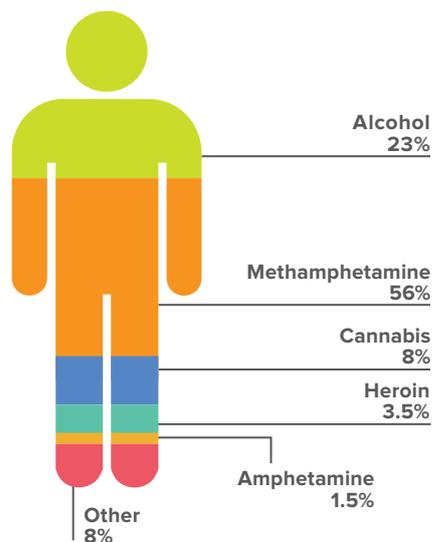
During the year:

- ▶ we supported 287 residents, providing a total of 13,674 bednights
- ▶ the average age of our residents was 27, with 75 per cent being male
- ▶ average length of stay was 54 days
- ▶ methamphetamine was the primary drug of choice for 56 per cent of residents and alcohol was the primary drug of choice for 23 per cent
- ▶ prepared for the implementation of the 28 Day Treatment Program including a significant refurbishment of the White House Lounge space

- ▶ planned for the reformation and implementation of the Mirikai Programs now branded as the ‘10 Week Life-skills Program’; ‘Mirikai Leadership Programs’; ‘Mirikai Integration Program’
- ▶ successfully negotiated a robust and thorough ISO set of auditing with ongoing quality ensuing.

Primary drug of choice during 2015-16

Percentage of Mirikai residents



Outreach Accommodation Support and Integrated Services (OASIS)

OASIS is a transitional housing program, consisting of five houses, allowing for 17 placements, which is designed to assist young people who are preparing to leave Mirikai and/or have graduated through the Mirikai Leadership/Integration programs.

OASIS Program provides safe supported accommodation and assistance for residents to re-enter the wider community.

The program supports people through collaborative plans that involve a range of assistance, from practical help such as supported accommodation, assistance in accessing employment, educational and vocational opportunities as well as counselling, psychological and medical support through the Banjara Medical Centre.

During the year, our Logan House OASIS aftercare program supported 18 people, providing 1215 bednights with an average length of stay of 92 days.

Our Mirikai OASIS program, supported 39 people (78 per cent male), providing 4056 bednights with an average length of stay of 177 days.

Early Birds Program

Our Early Birds Program is a relapse prevention program for people who are living in the community and/or are residents of our OASIS supported accommodation program.

Facilitated by a youth counsellor, it explores topics based around managing emotions and reducing substance misuse.

During the year, 90 people were supported through this program, with 408 group attendances held.



Shanty Creek



Our Shanty Creek residential rehabilitation centre provides a tailored alcohol and other drugs treatment program for Aboriginal and Torres Strait Islanders aged over 18 years.

It is situated on a picturesque 25 acre site about 10 kilometres from Mareeba in the tablelands of Far North Queensland, about an hour's drive west from Cairns.

People can live-in and stay for the six to nine month program, which covers cultural, educational, health, social and spiritual wellbeing.

It includes job skill training, case-management, group work, community business and activities such as farming, hospitality, life skills, music and art and crafts.

During the year, we:

- ▶ supported 136 residents, providing a total of 6552 bednights
- ▶ the average age of our residents was 36, with 72 per cent being male
- ▶ alcohol was the primary drug of choice for 68 per cent of our residents, Methamphetamine for 8 per cent and cannabis for 15 per cent.

Shanty Creek had a busy year, with our staff and residents working hard towards their recovery.

There has been a strong focus on embedding cultural healing practices in to our program, along with structured daily routines to enhance engagement in the program's clinical aspects.

Examples of the cultural program include our Bang Gaa (earth oven) and the vegetable garden which is called the Bama Healing Garden; as well as cultural knowledge sharing between staff and residents.

We saw an increase in our occupancy and people are engaging longer in our therapeutic healing program.

This year we focused on increasing engagement with families, with the aim of seeing them encourage and support their family member in their recovery. This resulted in an increase in family visits on

weekends which in turn is reflecting on resident's engagement in our program, contributing to them settling into the community better.

There are exciting opportunities ahead for Shanty Creek and we are looking forward to what 2017 brings.

"I feel like a brand new person... I can go out and say no to drugs and alcohol and make new friends... instead of slipping back into the old routine.

It is way better than what it was before...

...and I never thought of coming to rehab... because me and my family were out drinking too much.

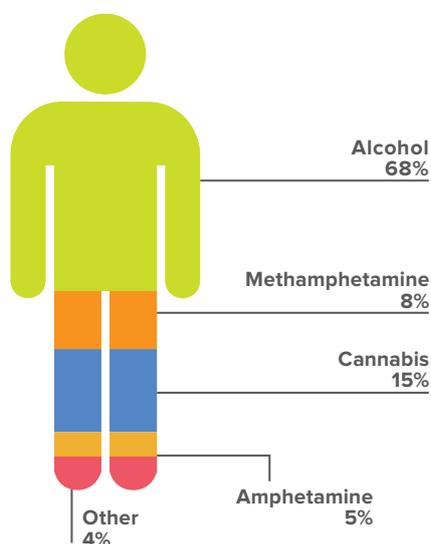
Myself and my family sat down and had a good yarn and thought rehabilitation would be a good start to get my life back on track.

The first time I arrived here at Shanty Creek, the staff and residents welcomed me with open arms, it just felt like being back home, just like a big family.

I fit in real well."

Primary drug of choice during 2015-16

Percentage of Shanty Creek residents



Albert's story



Albert, aged in his twenties, is a successful graduate of our Mirikai and OASIS programs and is now residing in one of Lives Lived Well's housing partnership programs.

Albert presented to our Mirikai service seeking treatment for his severe and chronic alcohol dependence (up to 45 standard drinks per day). He also was misusing cannabis.

Albert's history, as he described it, is 'littered' with alcohol-fuelled incidents, resulting in him accumulating a range of convictions for offending whilst intoxicated. His background also included learning and family challenges.

His pattern of alcohol misuse was excess to blackout. This exacerbated his complexity and his ability to care for himself and he had become homeless.

When he was admitted to Mirikai and assessed, he was provided with an agreed treatment plan to address his needs.

The treatment plan involved a collaborative working arrangement involving regular case management, the Psychiatric Registrar Program; our Medical Team (Banjara – GP, Psychologist); our Family Therapy Service; our Complex Needs Assessment Panel

(CNAPIS) and our Youth Outreach Program (YOP).

Through his treatment he was also linked with a housing program for the purpose of arranging long-term sustainable housing options.

Albert persevered with the Mirikai Program and graduated to our supported accommodation program, OASIS.

He was linked with our family therapist for support in rebuilding family relations.

CNAPIS linked him with driving instructors, a training opportunity, brokered practical support and linked him to employment options.

He is employed, has accommodation and remains sober today.

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Albert is a good news story and an example of the strength of long-term positive engagement and the holistic, diverse and seamless manner of Lives Lived Well services such as Mirikai, OASIS Transition Housing, CNAPIS, YOP and Family and Community Services working together.

Albert's journey also highlights the importance of partnering relationships with organisations such as Dept. of Housing and Public Works, Tertiary education providers and specialist health services in determining holistic and sustainable outcomes.

Albert's case is to be celebrated, showcasing the value of the 'one stop shop model' of service that moves individuals afflicted by complex co-morbidity through a system that is cohesive and comprehensive.

Working with young people

Many of our clients are young, aged between 12 and 25, and are starting to experience problems with alcohol and drugs, usually in association with other concerns such as family or school problems or mental health issues including stress, depression and anxiety.

Our experienced teams understand youth issues and are supportive. Adolescence can be a time of risk-taking, experimentation and testing boundaries, and using drugs or alcohol is often part of this developmental process. We help young people understand the effects of substance misuse and provide support to help them reach their potential to enjoy a full and rewarding life.

Our teams provide confidential counselling, therapeutic groups, education and mobile outreach support and we work closely with schools and other youth agencies such as police citizen youth clubs.

We focus on building skills in anger management, problem-solving, goal setting and stress management and help young people to make positive life changes.

We have programs specifically tailored to help young people, such as the Complex Needs Assessment Panel and Integrated Services which can help those who have a range of complex needs, and our Dual Diagnosis program which supports young people who have a drug or alcohol problem as well as mental health concerns.

We are also the lead agency for headspace Southport, which is offers young people help for a range of mental health concerns and aims to support young people's social wellbeing.

Our youth outreach programs also support family and friends who may be worried about a young person who has alcohol or drug problems.

Complex Needs Assessment Panel and Integrated Services (CNAPIS)

Our CNAPIS program brings together key decision makers in government and non-government organisations to provide a coordinated and holistic approach when assessing and planning the needs of young people with complex needs.





The program is funded by Gold Coast Hospital and Health Service. Members of the CNAPIS panel come from a range of government and community organisations. The panel and support workers plan, implement and review strategies and interventions needed to support a young person, identifying any issues and barriers involved.

Our aim is to:

- ▶ improve the quality and availability of support to young people with complex needs
- ▶ improve service delivery by assisting government and community agencies to work collaboratively
- ▶ provide increased flexibility and support to existing services
- ▶ provide an integrated and holistic response to complex needs (physical, mental, social).

Our program has been developed because it recognises that one organisation alone cannot meet a person's complex needs.

One unique and integral aspect of CNAPIS is a brokerage fund that is available to purchase flexible assistance in line with agreed support plans which would otherwise not be available. In collaboration with an intensive supportive network, this brokerage assists CNAPIS clients in their journey towards improved health and wellbeing.

During the year, CNAPIS worked with 29 people intensively supporting them with 1424 episodes of care. The average age of clients was 24 years and 52 per cent were female. The primary drug of choice was cannabis for 38 per cent of clients and alcohol for 34 per cent.

Clients must reside in the Gold Coast region, be between the ages of 17-29 years, have provided informed consent and have significant alcohol and other drug use issues/concerns.

Youth Dual Diagnosis Support Program

This program delivers mental health and AOD support, providing therapeutic interventions for young people aged between 12 and 25 years. It supports the residents of Mirikai, our Gold Coast based residential facility.

The Dual Diagnosis coordinator also supported Masters Psychology student placements from Bond and Griffith University and provides supervision to the Psychiatric Registrar from the Gold Coast Health and Hospital Service.

Another key role of this position is the provision of dual diagnosis training to the health sector – both government and non- government. Eight training workshops were run over the past financial year.

The program has been achieving a range of outcomes including retention in treatment and training outcomes with positive feedback from attendees.

During the year, we supported 34 young people, delivering 507 episodes of care. The average age of people being supported was 23 years and 56 per cent were male, with 3 per cent identifying as transgender. Primary drug of choice was cannabis for 41 per cent of clients, methamphetamines for 26 per cent and alcohol for 18 per cent.

Youth Outreach

Several of our youth programs have a strong, pro-active outreach component. These programs include our Youth Outreach Drug & Alcohol (YODA), our Youth Out client Program (YOP) and our Coomera Healthy Living for Youth (CHLY) program.

These three programs work with young people to build resilience and provide education around substance use and the associated harms. We work within the Harm Reduction Framework and No Wrong Door policy. A thorough bio/psycho/social assessment is completed on each young person to make sure that the treatment options match the needs of that young person and where possible the needs of the family/extended family.

Youth Outreach Program (YOP)

YOP also aims to help young people, aged between 12 and 25, but it differs from YODA (see below) in that it provides both in-house and mobile options. It is the longest running youth program attached to Lives Lived Well Gold Coast facility and works alongside the other programs to enhance service delivery and provide flexible options. This program works in partnership with local high schools and provides in house relapse

prevention programs for community clients waiting to enter into longer term rehabilitation.

The program has the option of longer term interventions for young people and works closely with a number of community stakeholders and is a federally funded initiative through the Department of Health and Ageing.

During the year YOP supported 92 young people, providing 1125 episodes of care. The average age supported was 20 years, with 73 per cent being male. The primary drug of choice was cannabis for 46 per cent of young people supported, 26 per cent for methamphetamines and 20 per cent alcohol.

Youth Outreach Drug and Alcohol (YODA)

YODA provides mobile services to young people, aged between 12 and 25 on the Gold Coast and Sunshine Coast, comprising early and brief intervention and alcohol and other drugs education, counselling and support and advocacy.

Our YODA teams help young people understand the impacts of substance misuse and supports them to reach their potential to enjoy a full and rewarding life, drug-free.

The program is a short-term option for young people, delivering six to eight sessions.

Successful outcomes of this program include seeing young people returning to school or other learning options, as well as family reunifications. YODA is a key stakeholder with Youth Justice on the Family Action Plan and Project 200 (P200).

“I was referred to YODA through headspace after I realised my life was heading into a direction where by drugs were becoming a major part of my life. After ending a long-term relationship everyday life was becoming a tough idea to swallow. Meeting with a person who could understand my situation and listen to what I had to say helped my development and journey through this period in my life immensely. There was no judgement or forced programs merely someone reliable and consistently there when the time was right. The program allows you to meet in different public locations which helped not only for convenience but made me feel more relaxed and able to work through my issues with a bit more clarity.”

The youth teams work with Education Queensland in providing workshops and individual sessions to students that align with local school needs as well as having collaborative partnerships with Queensland Health and local city councils.

During the year, YODA on the Gold Coast supported 376 people, providing 3825 episodes of care. The average age that our team supported was 17 years and 53 per cent were female. The primary drug of choice was cannabis for 47 per cent of young people supported, alcohol for 29 per cent and methamphetamines for 16 per cent.

Some of our activities for YODA Gold Coast during the year included:

- ▶ providing individual AOD counselling on site at three local schools as an external service. This service educates and explores contributing factors to student's maladaptive behaviors around AOD use
- ▶ providing an option of harm minimisation education with choice of further counselling to young people facing suspension and exclusion from the education system
- ▶ contributing and participating in Breaking the Ice community forums as part of the AODs ice task force. YODA also worked in partnership with AODs to contribute towards ongoing planning and development of Ice Task Force project
- ▶ continuing to support people awaiting residential programs at Mirikai and at time of exit from Mirikai.

During the year, YODA on the Sunshine Coast supported 381 people, providing 2838 episodes of care. The average age supported was 19 years and 63 per cent were male. The primary drug of choice was cannabis for 68 per cent of young people supported, 13 per cent for alcohol and 12 per cent for methamphetamines.

Some of our activities for YODA Sunshine Coast during the year included:

- ▶ hosting a part-time student on placement for Social Work this year
- ▶ working positively with a number of partner agencies on the Sunshine Coast
- ▶ providing numerous education and information sessions to local schools and sporting clubs on the Sunshine Coast
- ▶ continuing to support local schools across a wide region from Gympie and Tin Can Bay past Maroochydore to Caboolture
- ▶ continuing to support our in-kind contribution to headspace Maroochydore.

Coomera Healthy Living for Youth

This youth program works with young people, aged 12 to 25, to provide free support, education and counselling with a goal to reduce the level of harm associated with their alcohol and drug misuse. Our team comprises a youth outreach counsellor and a health promotion worker and they work with young people in the Coomera area and surrounds (Helensvale to Logan).

CHLY helps young people understand how certain behaviours influence their health, safety and wellbeing, including:

- ▶ alcohol and substance use
- ▶ tobacco use
- ▶ risk-taking that can result in injury and violence
- ▶ hygiene practices
- ▶ self-esteem and resilience building
- ▶ physical activity
- ▶ healthy eating.



CHLY is 'hard hitting and brilliant'

The team informs them about the impacts of drugs and alcohol and provide tips on how to stay safe and healthy. CHLY will also offer assessments and referral advice. We collaborate closely with local high schools and other youth services supporting young people on the northern corridor of the Gold Coast.

CHLY is funded by the Department of Health and Ageing.

During the year, CHLY supported 31 young people, delivering 431 episodes of care. The average age of clients was 17 years and 58 per cent were male. The primary drug of choice was cannabis for 74 per cent of clients and alcohol for 16 per cent of clients.

“As a secondary school we continually seek ways in which to be proactive regarding student wellbeing. CHLY utilises a ‘harm minimisation’ approach to drugs and alcohol which has been found to be the most effective approach to minimise risk. Through using an educational approach to minimise risk rather than students being told not to do something, we found that the students fully engaged within the experience. The children appeared to listen to every word. Rather than this being another adult lecturing students, the presenter was able to deliver hard hitting facts in a student friendly way. I think we all learnt new facts!”

School guidance officer.

Jenny's story



At age 15, *Jenny was referred to our YODA program through Ohana for Youth. Her referral related to cannabis use as it had been identified as affecting her education. During the initial assessment, our counsellor found more complex needs and issues were present.

She was also found to be in a relationship with an older male. They were living rough and couch surfing around the Southport area and her drug use was more extensive than first assessed.

Jenny was also on a conditional order at school due to poor attendance and was facing being exited from an educational program. Jenny was also becoming more disconnected from her family.

Through counselling with YODA and meeting Jenny's family, it became apparent that Jenny was in fact from a loving home environment and her current lifestyle was out of line with her values. This then led to strength-based work and motivational interviewing which enabled Jenny to decide she would like to enter a detox program and take the first big step in changing her drug misuse.

YODA was able to visit her half way through her program to provide a friendly face and encouragement. Jenny continued the program and completed it successfully. YODA was then part of Jenny's exit plan to continue providing counselling for relapse prevention.

Jenny returned to school and started attending regularly again. By the time YODA closed Jenny's case, she was sounding much more “alive” and reporting positive experiences at school.

Even though YODA is a short-term interventional program, Jenny used it well and managed to make significant changes to her drug use and return to regular support for her emotional and mental wellbeing, education, connection with the community and healthy peers.

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Working with young people and mental health

headspace Southport

Lives Lived Well is the lead agent for the headspace Southport Consortium.

headspace Southport's mission is to promote and facilitate improvements in the mental health, social wellbeing and economic participation of young people aged 12-25 in the Gold Coast and associated areas.

The centre is a youth friendly hub that provides services across four core streams; primary health care, mental health and alcohol and other drug (AOD) services, and social/vocational services.

The services offered at the Centre include:

- ▶ bio psychosocial assessment of needs
- ▶ psychological interventions
- ▶ psychiatric assessment
- ▶ general practitioner services
- ▶ on site vocational provider
- ▶ joint initiatives with Gold Coast Hospital & Health Service
- ▶ community education and development
- ▶ flexible access through our new "Drop-In" space.

The Youth Advisory Committee (YAC) are a dedicated group of peers that actively promote headspace in the community alongside the Community Development Worker role.

headspace is developing a Peer Work Force to provide a transition pathway for members of the YAC.

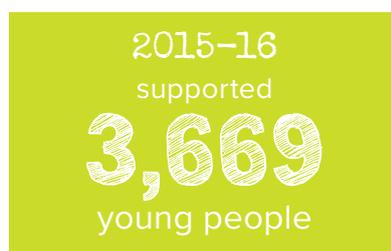
During the year, headspace Southport significantly increased its support and worked with a total of 3669 young people, which included the young people supported through our headspace Youth Early Psychosis Program (hYEPP) team and included 1796 new young people (first time referrals).

In all, these young people were provided with more than 21,000 episodes of care, which is about 1.2 above the national average for headspace providers.

Some of our activities for the year at headspace Southport included:

- ▶ providing pet therapy with Jymbi the therapy dog and Lenny & Lulu, our resident guinea pigs
- ▶ implemented outreach headspace clinics within three local high schools, meaning we can provide accessible services and early intervention activities in an environment that reaches young people quickly
- ▶ introduced a Culturally Safe program which has increased the number of Aboriginal & Torres Strait Islander young people accessing our headspace centre
- ▶ developed a Market Space.

headspace Southport helped about 67% more young people than the previous year and delivered almost twice as many episodes of care



This is a space that any young person can come to just to “chill” but more importantly to get free clothing. One of our Peer Workers supports this space each month giving the young person an opportunity to talk with someone with similar life experience

- provided easier access to our clinicians through the provision of phone assessments and extended opening and closing times. headspace Southport offers after-hour access on Tuesdays, Thursdays and Wednesday and Saturday by appointment
- new partnerships with Multicultural Network, Titans NRL Club, Robina Housing, Keebra Park Rugby School, Varsity College and Tamborine State High School
- increased the number of GPs and private psychologists, which has in turn increased the number of young people accessing the centre and decreased wait times
- partnering with OHANA for Youth Gen – Z employment on a co-location Service Agreement, this program offers support and advocacy for young people getting back to work and works in with our Functional Recovery Team’s Vocational and Educational Coordinator

- research partnership between headspace Southport and Orygen Youth Mental Health, with two research assistants being based at headspace Southport to interview young people about the design of an evaluation tool

headspace Youth Early Psychosis Program (hYEPP)

Lives Lived Well is also the service provider for the hub site of the South East Queensland headspace Youth Early Psychosis Program (hYEPP). This program works in partnership with the spoke service of the South East Queensland hYEPP cluster located at headspace Meadowbrook.

This service is an early psychosis specialty service that provides care for young people, between the ages of 12 and 25, who are at risk of experiencing a psychotic episode or who have experienced distress and difficulties relating to an episode of psychosis. Services that are provided by the hYEPP service include:

- Mobile Assessment and Treatment Team (MATT): This module provides assertive community engagement and crisis support to young people engaged in the hYEPP program. MATT provides support for the full cluster and working with young people from Nundah in Brisbane’s north, Ipswich west of Brisbane and south to Murwillumbra.

- Functional Recovery Team (FRT): This module provides recovery focused services for young people engaged with the program across the full cluster. FRT runs a range of group based and individual care programs aimed at supporting young people to participate in their community.
- Continuing Care Team (CCT): this module provides tertiary level care coordination services to young people in the Gold Coast area living with complex needs who require assistance to engage and manage symptoms relating to their mental illness.

In addition to these modules hYEPP also offers psychiatric, general medical, dietician, vocational specialist, personal training, family therapy and many more discipline specific interventions.

hYEPP is supported in developing and providing youth friendly services by the headspace Southport Youth Advisory Group and the headspace Southport Consortium.

During the year, hYEPP worked with over 350 young people, which included providing case management support to 160 of them. On average, the team provided over 1000 episodes of care per month.

Quentin's story

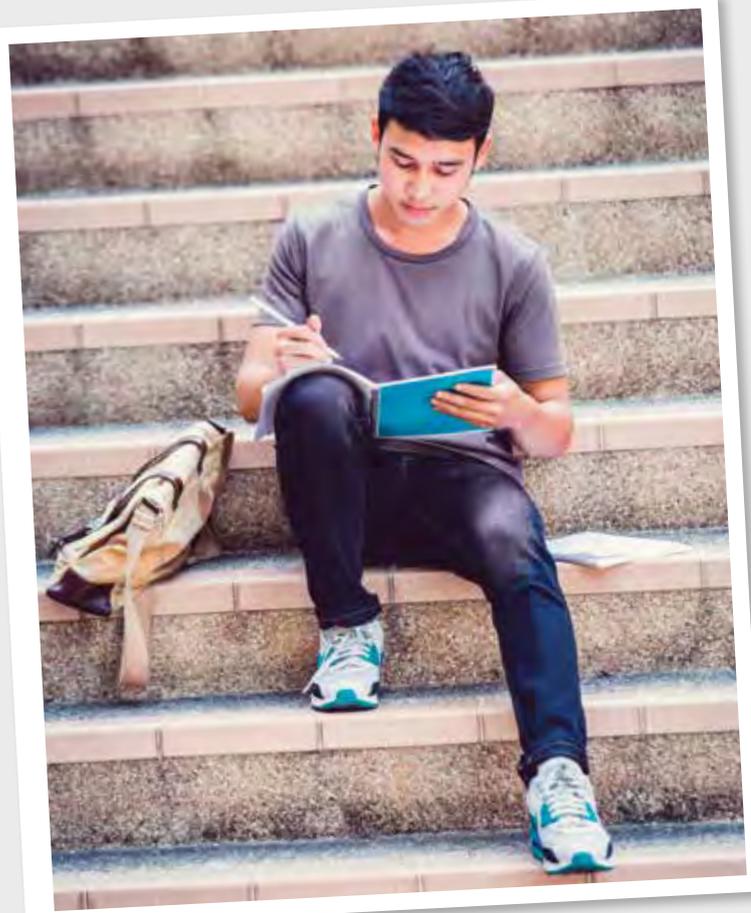
***Quentin is a teenager who is living in supported accommodation on the Gold Coast.**

Quentin self-referred to headspace Southport after acquiring an information flyer and identifying with some of the symptoms of psychosis.

He was seen by headspace Southport and diagnosed with First Episode Psychosis.

Through our headspace service, he had the opportunity to access thorough psychosocial and Occupational Therapy assessments to identify his level of function, medical reviews and monitoring of medication, vocation and education assistance, advocacy and assistance with finances, social support and skill development to foster independence.

He is now engaged in several functional recovery groups and reports finding these very beneficial to his mental and physical health.



Since his admission, Quentin's mental health has dramatically and rapidly improved. He identified gaining sustainable employment as his most important recovery goal, which he is current working towards both independently and in collaboration with headspace staff. His long-term goals include acquiring private accommodation and returning to study.

*Please note Quentin is not the person's real name and the photo used is not his real image but a stock photo for illustration purposes only. Lives Lived Well works hard to protect the privacy of the clients we help. The name and image have been changed to protect privacy.

Working with families

Families of people who have problems with alcohol or drugs often report feeling “lost” or “overwhelmed” by what their partner, child or sibling is going through. They often lack the coping skills and strategies to offer support or they may start to neglect their own health needs.

We have developed programs and support groups to help families better understand the effects of alcohol and drugs and how they can help their loved one and themselves, especially during crisis situations.

We also have programs that help parents who have alcohol and drug problems. Their children can be at risk of neglect. We work closely

with those families to ensure they can cope during the process of recovery.

Lives Lived Well provides the following programs and services for families:

- › Kids in Focus
- › Family & friends support groups
- › Young Family Support
- › Family Therapy Program
- › Parents Under Pressure.

Kids in Focus

Lives Lived Well leads the Kids in Focus (KIF) program on the Gold Coast which involves a collaboration with Wesley Mission Brisbane and The Benevolent Society Nerang. The program provides services to families with children who are both vulnerable and disadvantaged with parents

experiencing issues with substance misuse. It is funded by the Federal Department of Social Services.

KIF has partnerships with a range of key stakeholders and is a member of the Helping out Families (HOF) Family Support Alliance and Youth Justice’s Family Action Plan initiative. Our KIF team are also a member of the Child Safety Practice Framework Reform Regional Implementation group. Staff also completed a Child Safety Practice Framework two-day training which helped to reflect on our KIF framework and adapt accordingly with other family support services.

During the year, we supported 28 families, delivering 784 episodes of care. The average age supported was 34 and 79 per cent were female. Primary drug of choice was alcohol for 35 per cent of clients, cannabis for 33 per cent and methamphetamines for 13 per cent.



Family and Friends Support Program

The Family and Friends Support Program is a structured alcohol and drug education group on the Gold Coast for family and friends who have loved ones either in treatment or still in active addiction. This group has consistently performed and retention rates have been excellent. There are five eight-session groups per year. This program is also a referral source to more in depth family therapy. The program is funded by the federal Department of Health.

During the year, we helped 40 people with the average age being 53 and 75 per cent being female.

Young Family Support Program

The Young Family Support Program is a referral pathway for Intensive Family Support services and is also a referral annex for families referred by Act for Kids. The program provides the clinical interventions for alcohol and drug issues and works alongside Act for Kids case managers. This program has a very specific role in that it does not case manage but adds value to the case management plan in place. It is funded by Department of Communities, Child Safety and Disability Services.

The program works with mothers who are pregnant and with families who are impacted by substance misuse and who have young children up to the age of 18 years.

During the year, young family support assisted 55 families, providing counselling, advocacy, assessment, co-case management, developing coping skills and general support, home visits, referrals and transport. The program delivered 1945 episodes of care.

Family Therapy Program

The Family Therapy Program supports people who are concerned about their partner, child, sibling, grandchild or friend. The program helps with developing coping skills and strategies, information about services and recovery options, understanding dependency, and providing information and tools to support loved ones more effectively.

Counselling is provided free of charge to individuals, couples or groups and does not require a referral in order to access it. Sessions are delivered at our Burleigh Heads centre.

During the year, we supported 77 people, delivering 322 episodes of care. The average age of people being supported was 51 and 81 per cent were female.

Parents Under Pressure

The Parents Under Pressure (PUP) program provides support to parents during their stay at our Logan House residential facility as well as delivering services to parents in the community, who are experiencing high levels of stress when raising their children. The program has been running at Logan House since 2008 and is funded by the federal Department of Health.

PUP work with families to assist sound relationships, reduce the incidence of child abuse and neglect, and improve the developmental outcomes for children. The program is open ended and delivered in both a group and individual format.

During the year, 40 residents of Logan House participated in this program.

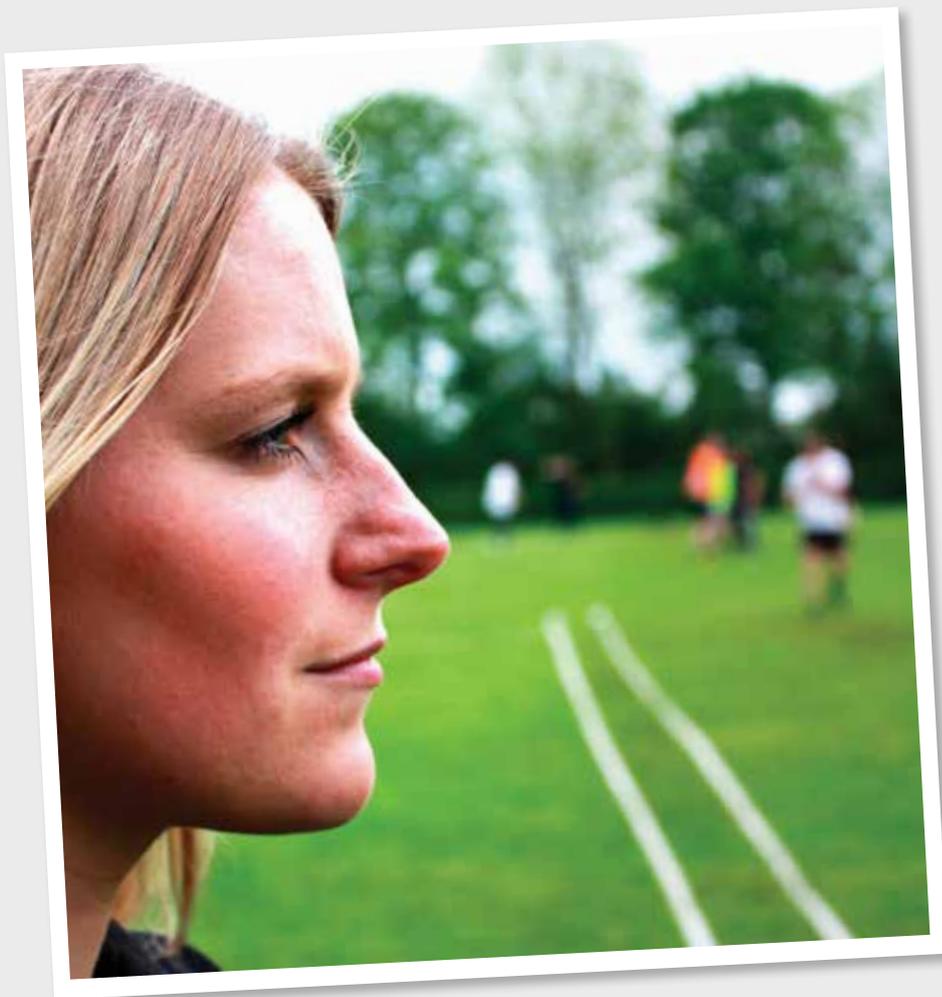
Joan's story

***Joan attended the Family Therapy Program as her husband was grappling with an ice addiction and she was seeking strategies and support.**

A mother of three young children, she herself was experiencing symptoms of depression and anxiety. In addition to her family therapy sessions, Joan was referred to Banjara to attend sessions with a psychologist and psychiatrist. She also attended and completed the Family Support Group and then went on to access the Family Check-in Group.

Several months on and Joan reports an improvement in her depression and anxiety.

Her husband has continued to use ice, however she reports she now has improved skills at setting boundaries and has learned to more effectively engage her own support network with assistance from her family. She has decided that in the best interests of their family that she needs to leave her husband. Joan has expressed she would not have been able to take this critical step without the support of the Family Therapy Program.



*Please note Joan is not the person's real name and the photo used is not her real image but a stock photo for illustration purposes only. Lives Lived Well works hard to protect the privacy of the clients we help. The name and image have been changed to protect privacy.

Nevaeh's story

A teenage mum, *Nevaeh, was referred to our Kids in Focus (KIF) program from Child Safety.

Dependent on cannabis, Nevaeh had a range of medical needs when she first came to us.

Because of the illicit drug use in the home and because she was being subjected to domestic violence in a relationship with her boyfriend, Child Safety had placed her baby in foster care.

During the past 12 months, our KIF team supported Nevaeh to:

- ▶ complete a cannabis detox program (she has remained abstinent since)
- ▶ become more aware of the harm in her relationship. With this knowledge and support, she decided to move out of her boyfriend's home
- ▶ be placed in accommodation where she is well supported financially and emotionally
- ▶ prepare a resume, role play job interviews and apply for part time work. After working several part time positions, Nevaeh has now secured a full-time apprenticeship which she is enjoying

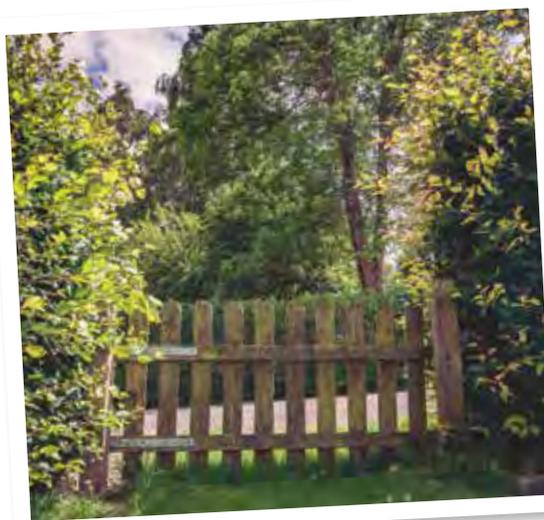


- ▶ learn about healthy food choices
- ▶ make new friends and engage in new activities
- ▶ improve her living situation and life skills
- ▶ access a Women's Health Clinic, GP and specialist doctors as well as receiving dental care
- ▶ complete Triple P and Parenting Under Pressure Courses. KIF continues to work collaboratively with Child Safety as Nevaeh cares for her baby a few days each week in her home. She continues to work with KIF and Child Safety with the goal of full reunification with her baby
- ▶ commence driving lessons and saving for a car.

KIF has worked on many areas of this young mother's life, at times collaboratively with other services such as Child Safety, to help improve her health and wellbeing, with many successful outcomes, providing her and her baby with a much more positive outlook for the future.

*Please note Nevaeh is not the person's real name. Lives Lived Well works hard to protect the privacy of the clients we help. The name and image have been changed to protect privacy.

Working with diversion



We believe in giving people a second chance and that people can change. We set out to help people, who have committed offences as a result of their alcohol and drug use, to turn their lives around so that they don't reoffend. We go into prisons or work with people on parole or first-time offenders to help them realise and understand what has led to their alcohol and drug problem and give them the tools to address it.

Drug & Alcohol Assessment and Referral

Our Drug & Alcohol Assessment and Referral (DAAR) program takes referrals for people who have committed an offence of violence while intoxicated in a public place, into drug and alcohol treatment.

As a result, face to face services have been offered in a range of locations across the state in a consortium model with Lives Lived Well as the lead agency, working in partnership with Drug Arm, RFDS, Bridges Aligned Services, and Harmony Place. Appointments are also able to be conducted by phone/Skype for persons in more remote areas, or who are unable to attend in person.

Lives Lived Well and consortium members supported 325 people.

We also hosted a DAAR conference to ensure consortium stakeholders gained up to date training and were able to network with each other.

Police Court Diversion

We offer Police Court Diversion (PCD) services in the Townsville region.

PCD is offered by Police and Courts as an alternative to a charge for people who have been found to be in possession of small amounts of illicit substances, and who have no other criminal history. The participants are required to attend in person for a drug & alcohol assessment/ education and brief intervention.

During the year, our Police Court Diversion service supported 238 people.

Drug Offender Intervention & Treatment (DO-IT)

Our DO-IT program is a 24-session program which helps prison inmates at a Queensland correctional centre whose offending is alcohol or drug related and who expect to be released within the next six months.

The program provides participants with the knowledge, skills and motivation to achieve and maintain an alcohol and drug free lifestyle on release. Group topics include understanding addiction and change, addressing unhelpful thinking patterns, managing cravings, establishing support networks and relapse prevention.

The program also provides community-based outpatient counselling to those inmates who recognise they need further support.

During the year, DO-IT worked with 296 males, providing 2,964 episodes of care. The average age supported was 32 years. The primary drug of choice was amphetamines for 52 per cent of those supported, cannabis for 13 per cent, alcohol for 12 per cent, methamphetamines for 7 per cent and heroin for 6 per cent.

Community Re-entry Services Team (CREST)

In June 2016, we were awarded a tender to commence providing community re-entry services to men leaving correctional centres in Central and Far North Queensland. We look forward to reporting on this service in the next reporting period.

Working with Aboriginal and Torres Strait Islander Communities

Lives Lived Well has a number of programs that are culturally appropriate and work to support the Social and Emotional Wellbeing of Aboriginal and Torres Strait Islander people. Our programs are in various locations from Cairns to the Gold Coast and are a combination of outreach and live-in rehabilitation.

We understand that the role of the family and extended family is key and so we work closely with local Elders towards reducing the harms of alcohol and other drugs.

We offer the following Aboriginal and Torres Strait Islander programs and services:

- › Clinical Liaison Aboriginal and Torres Strait Islander Service (CLAIS)
- › Brighter Futures
- › Shanty Creek
- › Our alcohol and other drug services also provide specialist counselling and outreach services for Aboriginal and Torres Strait Islander people.

Clinical Liaison Aboriginal and Torres Strait Islander Service (CLAIS)

Based on the Gold Coast, CLAIS supports young Aboriginal and Torres Strait Islander people and their families who have problems with alcohol and other drugs.

While providing support, the program ensures cultural needs are considered and met, whether it be through our residential program Mirikai or within the community in general.

Attached to the CLAIS program is the Homes for Life project, which is a 12-month supported accommodation initiative run jointly by Lives Lived Well and Department of Housing Robina. The initiative caters to Aboriginal and Torres Strait Islander people and families who have high complex needs.

This program provides leadership and guidance for all staff of LLW on how to work with Aboriginal & Torres Strait Islander peoples in a respectful and culturally safe manner.



“My spirit came
back to life”

CLAIS is funded through the Council of Australian Governments (COAG) and continues to develop strong partnerships with key stakeholders. CLAIS is advocating for social and emotional wellbeing of Aboriginal & Torres Strait Islander communities.

During the year, we supported 24 people, delivering 404 episodes of care. The average age of people being supported was 25 and 50 per cent were female. The primary drug of choice was cannabis for 45 per cent of clients, alcohol for 20 per cent and methamphetamines for 20 per cent.

AOD Counselling and Support for Aboriginal and Torres Strait Islander Communities

Lives Lived Well has a range of counselling, advocacy and support programs across the state from our Shanty Creek residential centre (in Mareeba outside of Cairns) to CLAIS on the Gold Coast. In between, we have culturally appropriate services in all hospital and health service areas. These services work with local Elders and agencies to make sure the best possible outcomes are delivered for their mob.

We trained our staff in cultural competency and are well respected in the community.

Lives Lived Well has a strong presence and is seen as an agency that truly understands the complexities affecting Aboriginal and Torres Strait Islander communities.

Brighter Futures

We provide support for Aboriginal and Torres Strait Islander families in the Cherbourg and Murgon communities, as well as throughout the broader South Burnett and Darling Downs areas. This outreach program includes alcohol and drug counselling for young people and provides a range of family supports.

Our team works with local Elders and other services within the community to help young people get their lives back on track and to reduce the effects of drugs and alcohol on family members.

Jai and Kristy's story

A couple, Jai and Kristy*, first engaged with the Young Families program in January 2016.

Kristy was pregnant and their other children were in the care of family members.

They were referred to CLAIS for AOD support and, requiring a range of other supports, the couple also

accessed our Youth Outreach Program and CNAPIS – Complex Needs Assessment Panel and Integrated Support.

Because of this comprehensive support and an ongoing commitment from Jai and Kristy to overcome substance misuse, a reunification of the family with all their children is now taking place.

The couple has been allocated accommodation and has been referred for continued cultural support, providing them with a much more positive outlook.

**Please note Jai and Kristy are not the couple's real names. Lives Lived Well works hard to protect the privacy of the clients we help. The names have been changed to protect privacy.

During the year, we supported 65 people on an individual basis, delivering 127 episodes of care. The average age of people being supported was 27 and 80 per cent were male. The primary drug of choice was alcohol for 67 per cent of clients and cannabis for 20 per cent.

In addition, some of our many community development activities for the year included:

- › working closely with the Rodeo School, Shaftesbury School Murgon, which works with young people who have been expelled from school and are disengaged. It is run by Arethusa College's Barambah campus, with schoolwork taught during the week, and rodeo action every Friday. Brighter Futures attends to talk with the young people about alcohol and other drugs, culture, health and wellbeing and provides support to the program, helping young people to get back on track

- › participating on the Murri Court Board with Murri Court opening on 22 June, 2016
- › starting a partnership with the Cherbourg Hornets rugby league club to support all their teams and their families with healthy lifestyle choices, AOD counselling and AOD education. We also supported community barbeques and supplied the club with water bottles
- › partnering with the Cherbourg Regional Aboriginal and Islander Community Controlled Health Services to address sniffing and substance misuse
- › becoming part of SOS2 Snuff out sniffing committee, attending all barbeques and events
- › contributing on the Closing the Gap committee and providing an information stall at the community event

- › participating in NAIDOC 2016, Closing the Gap, and Domestic Violence awareness activities
- › working with SRG (Sport and Rec) to support healthy lifestyles within community
- › facilitating cultural education to change people's thought patterns to choose hobbies rather than misusing substances or alcohol
- › initiating a syringe program, which delivers safe handling training within the community and the placement of five syringe units for safe disposal
- › part of the SPAN group where the aim is to strengthen protective factors related to suicide prevention through art, events and the development and celebration of identity
- › attending schools to provide AOD education.

Jason and Gary's stories



Jason

Disengaged from school, Jason has been receiving support from Brighter Futures for some time. His primary drug of choice is volatile substances. He has now reduced this misuse significantly. He has returned to school and attends programs that Brighter Futures are involved in, such as touch footy, cultural activities and yarning circles.

Gary

Gary one day came to Brighter Futures, after he was unable to receive assistance from other organisations due to their waiting lists, and was depressed.

He was supported that day, receiving the help that he needed. He now continues weekly appointments and has started a hobby in building bird houses and has just donated one to our team. He is now looking for employment and doing well.

**Please note Jason and Gary are not their real names. Lives Lived Well works hard to protect the privacy of the clients we help. As such, the names have been changed to protect privacy.

Preventing harm

Lives Lived Well is committed to supporting safer and healthier Queensland communities.

Towards this, we work to ensure people are better informed about the risks and effects of using drugs and alcohol.

As such, we provide resources, information, support and advice across a range of programs and our teams work closely with communities, parents, schools and venues.

Act on Alcohol

SUPPORTING QUEENSLANDERS TO PREVENT & REDUCE THE HARMFUL USE OF ALCOHOL

Act on Alcohol

Our Act on Alcohol (AoA) team works to reduce alcohol-related harms through grassroots community action. The team does this by building the capacity of local Queensland community members and organisations to help address local issues around alcohol through effective prevention strategies.

The annual Act on Alcohol state-wide survey was conducted in March 2016, with a great response from Queensland communities. The survey findings have guided the way AoA has developed its resources and its approach to service delivery and saw the team out on the road, visiting numerous Queensland communities, connecting with local people and services.

A number of community workshops were delivered in regional areas, with positive outcomes including: developing personal skills, provision of information and education, establishment of stakeholder networks in regional communities, awareness raising about Lives Lived Well services including the Act on Alcohol website, promoting the service and encouraging communities to take action.

During the year, Act on Alcohol has:

- ▶ travelled to Gladstone, Rockhampton, Emerald, Blackwater, Kingaroy, Toowoomba and Townsville
- ▶ conducted five Act on Alcohol workshops

- ▶ supported the development of project plans for FASD groups and other alcohol groups
- ▶ supported the Safe Night Out Precincts and assisted local planning meetings
- ▶ developed professional relationships and networks by connecting with peak bodies, services and community members
- ▶ engaged with the online community through social media
- ▶ released bi-monthly e-newsletters.

Visitors to the Act on Alcohol website have steadily increased since the launch of the site in December, 2015. It is used as a hub of information, news, tools and resources.

Facebook has been the platform which Act on Alcohol regularly engages with the online community. Their Facebook page has more than 1000 followers and is used to create community conversations and share information, specifically from the drug and alcohol sector. This social media strategy is also used to drive online traffic to the Act on Alcohol website.

Subscription to the Act on Alcohol e-newsletter has grown to more than 250 subscribers. Feedback from readers confirms that the information presented is relevant and useful. Thanks to the Act on Alcohol e-newsletter, links have been established between community groups in Gold Coast and Townsville, enabling the sharing of information, resources and experience.

The AoA service is in a strong position to continue to drive its key aims in connecting people and communities and encouraging and supporting them to take community action on alcohol and reduce related harms.

QCAA

Lives Lived Well continues their membership of the Queensland Coalition for Action on Alcohol (QCAA). The QCAA is committed to reducing alcohol-related harms with the primary purpose to achieve a cultural change that will reduce alcohol harms and improve the health and wellbeing of Queenslanders.

For more information about the coalition, the campaigns, or to download a copy of its five-point plan visit www.qcaa.org.au/



Our medical services

Banjara Medical Centre

The Banjara Medical Centre, based at Burleigh Heads on the Gold Coast, provides a range of professional services and offers a holistic approach to treatment. Our expert clinical services team work in a collaborative manner to provide confidential and comprehensive care.

As a not-for-profit general practice and specialist clinic, Banjara is now helping more people address their general health and mental health concerns as well as their health issues around addiction in a welcoming and non-judgmental setting. Open to all members of the community, we accept self-made appointments and referrals from other services and we provide access to bulk-billing healthcare.

Banjara continues to offer a significant service to Lives Lived Well clients, and other clients who utilise the service – to address their complex primary health and mental health care needs in an on-site specialist setting. We continue to be grateful to all of the private providers who work closely with our staff teams to provide high levels of care – and acknowledge their contribution.



Banjara increased its appointments by almost 20% from the previous year

Number of Banjara appointments

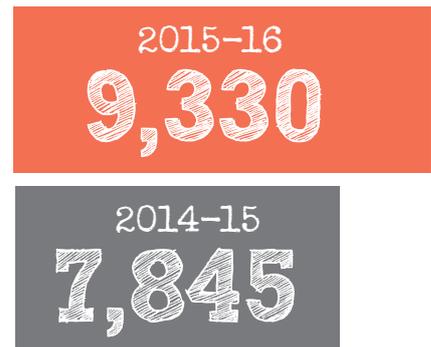


TABLE 02: HOW BANJARA PROVIDED SUPPORT DURING 2015-16



TOTAL = 9330

Our events

Australian Winter School

In 2016, the annual Winter School conference took on a different format and was held as a series of workshops. The first of our workshops was held from 13-14 April, at Rydges South Bank, Brisbane.

International facilitator Colin O'Driscoll from HSE Ireland, Assoc Prof Nicole Lee from The LeeJenn Group and Dr Joel Porter, Lives Lived Well, presented on the topic: *Piecing the puzzle together - Designing, developing and implementing evidence-based AOD services.*

Delegates took away tools to assist them in renovating current services and developing new ideas.

How our 2016 April Winter School Workshop fared:

- ▶ 61 people registered to attend the hands-on, interactive workshop
- ▶ 42 organisations were represented bringing together AOD, mental health and other NGOs, private clinicians and government
- ▶ delegates came from across Australia
- ▶ 50 per cent of our delegates had attended Winter School events previously, 44 per cent identified this workshop as their first Winter School event
- ▶ the three facilitators were rated highly overall. 84 per cent of respondents rated the speakers as excellent or good
- ▶ overall satisfaction with the workshop was high with 84 per cent of respondents identifying the workshop as excellent to very good
- ▶ 80 per cent of respondents agreed that they learnt something that would assist them with their jobs
- ▶ 75 per cent of delegates rated the event favourably in meeting their expectations, and gave good feedback regarding improvements
- ▶ 74.2 per cent of delegates agreed that the workshop provided good value for money
- ▶ 48 per cent of respondents strongly agreed that they would recommend this type of event to others.

A second workshop as part of this series will be held in late 2016 and the full conference will return in 2017.

International Women's Day 2016 event

Following on from the success of its International Women's Day (IWD) event held the previous year, Lives Lived Well held a similar open day, this time entitled "Women and Ice".

The IWD event, held on 8 March 2016 at its Mirikai service at Burleigh Heads, invited women to come along and hear about drug and alcohol information and support and to have their say.





With the theme “gender parity”, the event aimed to hear from the community as to how Lives Lived Well could better reach and support women on the Gold Coast.

About 60 women attended and Lives Lived Well’s senior female practitioners and a female member of our Board presented.

Community Services State Conference

Lives Lived Well staff from all over Queensland came together for two days in June 2016 for our inaugural Community Services State Conference.

It was a great opportunity for staff to meet and exchange thoughts and ideas while participating in a range of workshops and information sessions.

Training sessions covered such topics as cognitive behaviour therapy, understanding trauma, motivation interviewing and working to minimise vicarious trauma. Other information was delivered in regards to internal processes and support services.

Feedback was positive with some attendees reporting:

“I really enjoyed the conference last week, the company was great, it was wonderful meeting and greeting with everyone that was present. I appreciated the clear messages that this gathering brought to the table and the training and talks were awesome”.

“I would like to thank you very much for inviting us to attend the conference and the training last week. It was a great two days and the training sessions were valuable”.

9.

Research, Capability Client Satisfaction and Outcomes

Research and our internal staff capability are key areas of interest and growth for Lives Lived Well to ensure that we continue to be at the cutting edge of service delivery and best able to support client needs.

This year has seen a number of plans come to fruition in service capability and the building of our research culture:

- ▶ a complete review was undertaken of measures being used for screening and outcomes across the Lives Lived Well services. This review resulted in some standardisation of measures as well as sourcing improved tools. This will ensure greater consistency across services and better collation, analysis and reporting on outcomes
- ▶ we established research-related policies as well as internal systems for organising research activity including ensuring quality and risk systems were in place to support it

- ▶ appointed a Lives Lived Well Professorial Chair in collaboration with the University of Queensland. This position will commence in January 2017. Working closely with Lives Lived Well will ensure this work can be readily translated into clinical settings, where it will have the most impact. The Professorial Chair will also work to train and build a team of AOD clinical researchers
- ▶ appointed a Capability and Research Manager, situated within the Clinical Directorate, in January 2016. In the future, this position will work closely with the University of Queensland and the Lives Lived Well Professorial Chair, to design and implement research studies and disseminate the results of this research through publication and other media.

Training and Development

During the year, we established a comprehensive training and development calendar, providing staff with regular access to high quality internal training. Academics and expert clinicians were invited to present throughout the year at Lives Lived Well's larger site

locations. The training calendar was developed following a staff competency audit and consultation.

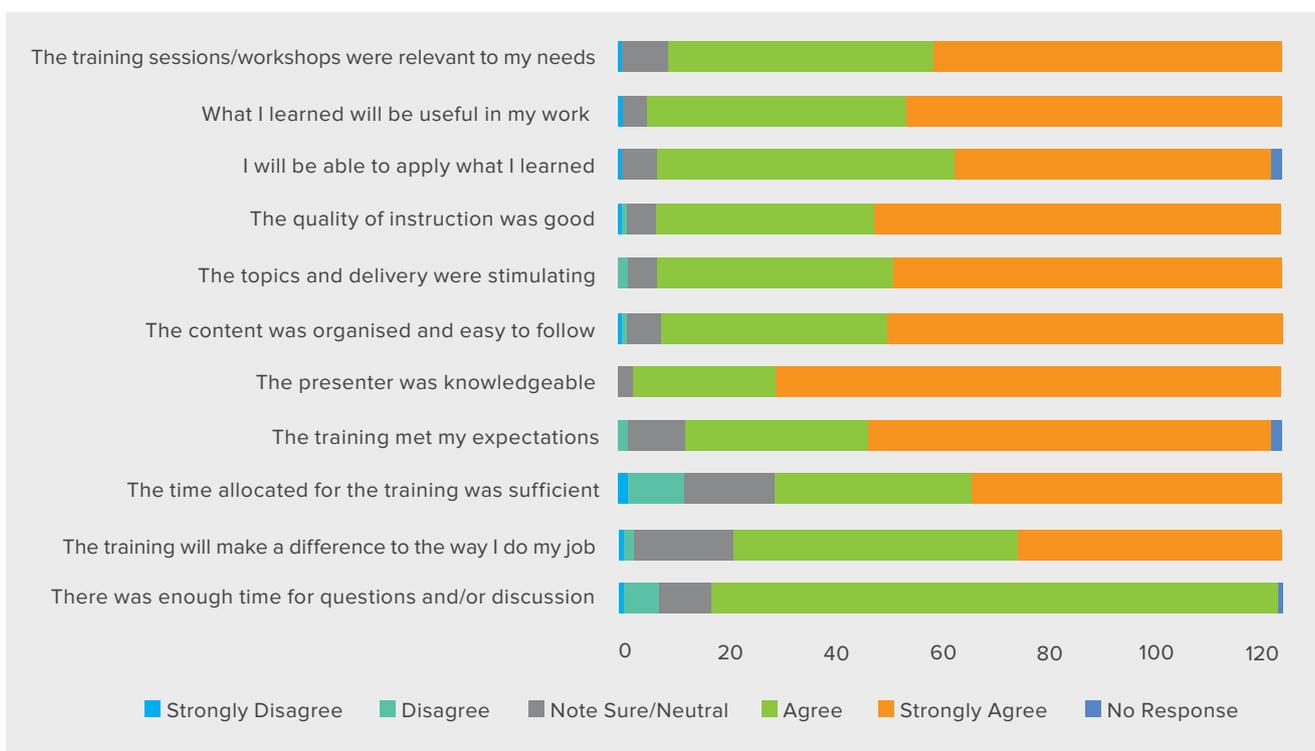
This training was evaluated throughout the year with 126 responses received with positive results, as shown.

Clinical Supervision

A new model of Clinical Supervision was introduced this year with group supervision being offered to all clinical staff at Lives Lived Well, in addition to the individual supervision that is already provided by many of our qualified internal supervisors. The group supervision was provided by an external supervisor, contracted by Lives Lived Well to provide confidential supervision that is independent of organisational management. A calendar of supervision was published every three months so that clinical staff had regular monthly access to group supervision. For clinical staff who work in more remote locations, this supervision was provided via Skype.

Research

Research projects continued through several initiatives reported against the Improved Services project.



These include:

- the Queensland Alcohol-related violence and Night-Time Economy Monitoring (QUANTEM) project - Along with a consortium of Australian universities led by Deakin University, Lives Lived Well is a research partner in the QUANTEM project, which will begin researching and evaluating the effects of Queensland Government’s Tackling Alcohol-Fuelled Violence policy measures in 2017. The evaluation will examine all the policy measures introduced as part of Queensland’s legislation. These include late-night trading hours, targeted policing initiatives, education campaigns, liquor licensing and compliance, precinct management, and police

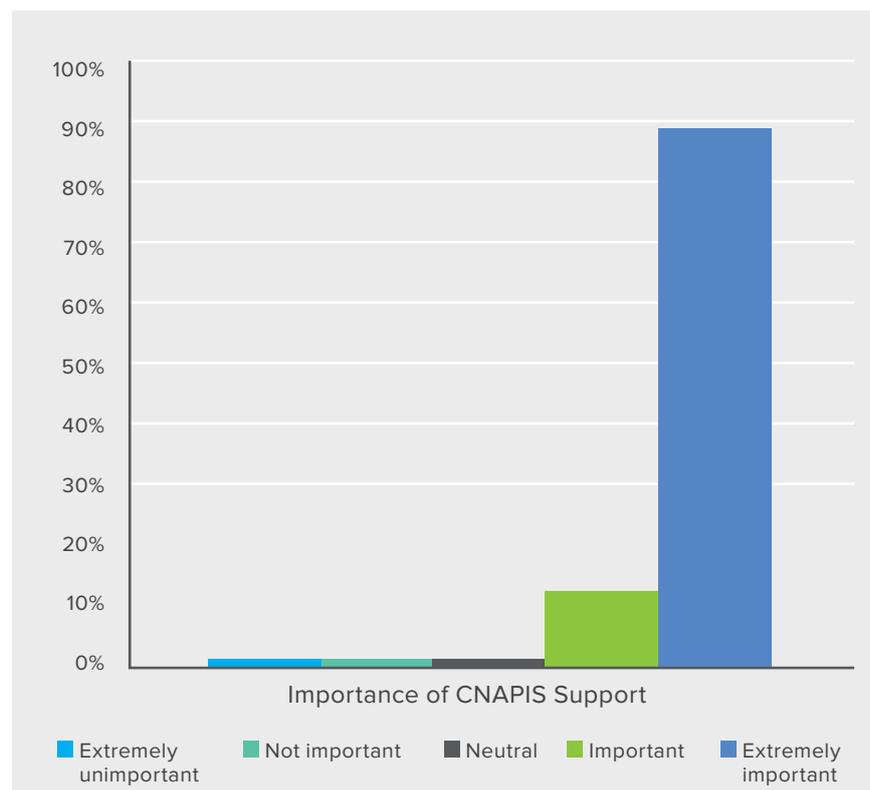
and court powers. The research will evaluate the extent to which the Queensland Government’s policy is achieving its objectives and where possible, identify which initiatives are contributing to the achievement of the intended outcomes or identify which initiatives in combination can be credited with achieving improvements. QUANTEM is funded by the Queensland Government and by the Commonwealth Government under the Australian Research Council (ARC) Linkage Projects scheme, with additional funding provided by FARE, Lives Lived Well and ARF, and in-kind support from Turning Point Alcohol and Drug Centre

- ▶ Y-COM Validation Study – the Youth-Specific Change and Outcome Measure (Y-COM) validation study commenced at headspace Southport in May 2016. This study, led by Orygen, the Centre of Excellence in Youth Mental Health, aims to validate a new brief measure of changes in mental health and functional wellbeing at the beginning and end of an episode of care at several headspace centres throughout Australia
- ▶ The Queensland Mental Health Commission Stigma and Discrimination study – The Drug Policy Modelling Program at NDARC (UNSW) is conducting this study on behalf of the Commission to address an important action identified in the *Queensland Alcohol and Other Drugs Action Plan 2015-17*. The research will involve a literature review, and interviews with Queenslanders with a lived experience of problematic alcohol and other drug use to examine their experiences of stigma and discrimination. Residents of Mirikai and Logan House have been interviewed. There is currently very limited research into the most effective way of reducing stigma and discrimination that impacts on the ability of service users to be socially connected and to participate in education, training and employment, or how it acts as a barrier to members of the community seeking help when they need it. The final report is due to the Commission in January 2017

- ▶ Tackling Nicotine Together Study (TNT) – a federal initiative including the University of Newcastle consisting of a randomised control study involving 32 facilities questioning an intervention group versus a control group based on the effect of smoking cessation programs in residential AOD settings. The TNT project is now completed and both Mirikai and Logan House exceeded the requested benchmark in terms of the numbers provided for the study. In recognition of this, both facilities were afforded \$1000 worth of complimentary NRT resources. We now await the findings of the research to be published.
- ▶ The Turning Point and University of Queensland Social Networks and Recovery (SONAR) Project, a two-year longitudinal study following up a cohort of 308 individuals accessing Therapeutic Communities (TC)

across Queensland and Victoria, was completed in the first half of 2016. This research offered an innovative way of assessing TC effectiveness and tested a model that emphasized the role of social identity and recovery capital as key predictors of change. We will soon see the results of the study and at least one paper has been submitted for publication.

- ▶ The QNADA Nutrition and Dietetics pilot program - this study has been completed and some of the initiatives of the program have been integrated into our nutritional programs and informed our menu planning
- ▶ An internal evaluation of the Complex Needs Assessment Panel for Integrated Support (CNAPIS) program was conducted this year. The CNAPIS program aims to enhance both the quality and opportunity of access available to young people with complex



needs arising from drug and alcohol-related issues. Respondents reported fewer hospitalisations, better access to services, less involvement in the criminal justice system and more stable housing since accessing the support provided by the CNAPIS team. As shown in the figure below, respondents found the CNAPIS program to be very important in helping them with daily life. The question posed was “How important has the support put in place by CNAPIS been in helping you?”. Almost 90% of respondents reported that the help put in place by CNAPIS was “extremely important”. All remaining respondents stated that the help offered was “important”.

Client Satisfaction

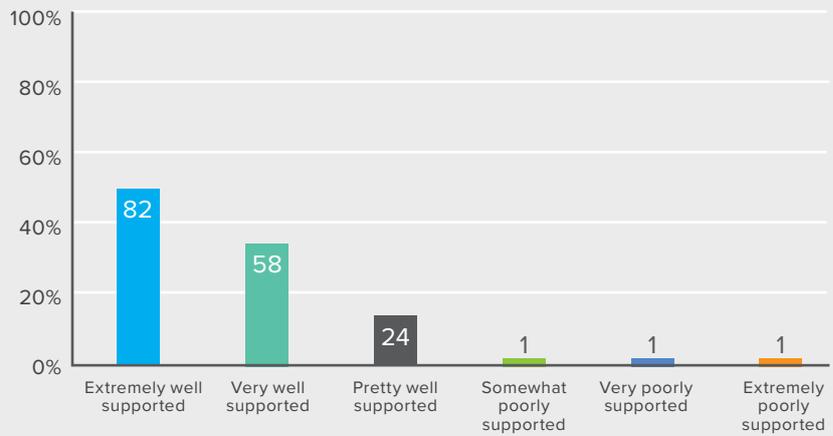
During the year, the Lives Lived Well Client Satisfaction Survey continued to seek feedback and measure satisfaction with the services being offered by Lives Lived Well. Former and current clients voluntarily participated in the anonymous survey via Survey Monkey. The results below show that clients were very satisfied overall and felt well supported by our services.

Outcome measures

The following graphs show the results for two outcome measures for the year to date for Logan House, Mirikai and Community Services and indicate an overall positive impact on clients outcomes while with our services.

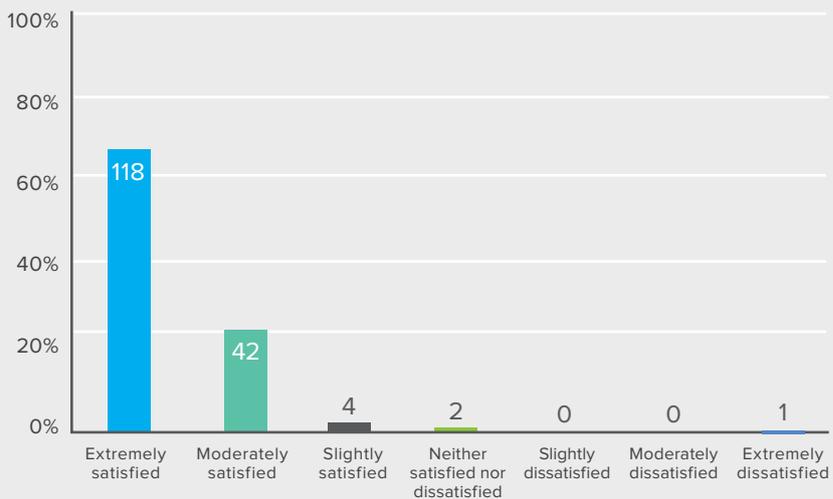
HOW SUPPORTED DID YOU FEEL BY THE SERVICE?

(Total Responses – 167)



OVERALL, HOW SATISFIED ARE YOU WITH THE SERVICE/S YOU RECEIVED FROM LIVES LIVED WELL?

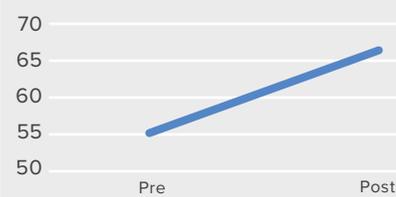
(Total Responses – 167)



DTCQ-8 Drug-Taking Confidence Questionnaire is a questionnaire in which clients rate their confidence levels in being able to cope in high-risk situations and helps determine relapse potential in the most common high-risk situations. The BASIS-24 measures self-reported difficulty in relation to symptoms and functioning. These are all for significant samples of our clients and show marked improvement.

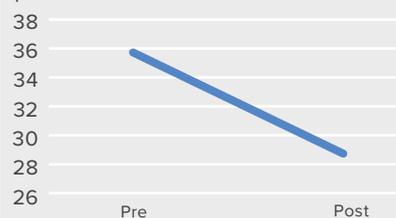
DRUG TAKING CONFIDENCE QUESTIONNAIRE (DTCQ) 2015-16

N=295 Higher score=higher confidence



BASIS-24 2015-16 N=160

Reduced score=reduce difficulties/problems



Quality improvement

Lives Lived Well is committed to quality improvement and maintaining accreditation against recognised standards.

Lives Lived Well was accredited against ISO 9001:2008 Standards in August 2014, which is valid until August 2017, with a requirement for annual maintenance assessments. Lives Lived Well is also accredited against the National Standards for Mental Health Services.

A maintenance assessment conducted against the standards in July 2016 found that Lives Lived Well fully met the requirements to continue certification to the ISO 9001:2008.

A commitment to quality improvement demonstrates our desire to be accountable and transparent to our stakeholders, and to ensure that we provide quality services to our clients in line with our organisational strategic objectives.

As part of this commitment, we are willing to be reviewed by an external reviewer against a set of standards to ensure we are a quality organisation. We are also dedicated to seeking feedback from our clients, and closely analysing our service output and quality, in order to continue to identify opportunities to improve in what we do.

Quality Improvement is a culture, and one that we support not only through what we do daily, but in the way we lead, manage and deliver our services.



10.

Our people

Every day our people work with clients who are affected or know someone affected by alcohol and drug misuse and/or mental health issues. At times our clients have lost sight of hope. Our people work with clients in their journey and support them to find hope once again and see the possibilities for their lives that lay ahead.

A defining characteristic of our people is their commitment to our organisation, the work we do and the way we do it – guided always by our values. Accountability, Trust, Leadership and Integrity.

To support our people in their work, this year has seen a significant investment in developing their capability in clinical practice, access to regular supervision, offering an expanded range of benefits, increased access to information and resources through regular organisational communication and a focus on building a safety culture.

Investment in our people through providing development, meaningful work, safe workplaces, transparent



employment practices, workplace flexibility and appropriate reward and remuneration will continue to be a key plank of our organisational strategy.

Our workforce is enriched by volunteers and students who contribute their time and skills to support us in our work directly with clients and also in support services.

Our staff profile

During the year, Lives Lived Well grew its staff body by about 10 per cent, increasing its number to 176 staff, of which 82 per cent represents employees involved in direct service delivery.

The following graphs show the profile of our people in relation to service, gender, employment status and area of service.

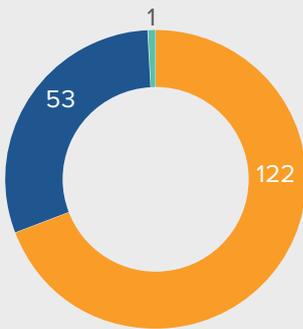
Our staff's passion helps
to change people's
lives and make a
positive difference

The following graphs show the profile of our people in relation to service, gender, employment status and area of service, showing figures as of 30 June 2016.

SERVICE PROFILE

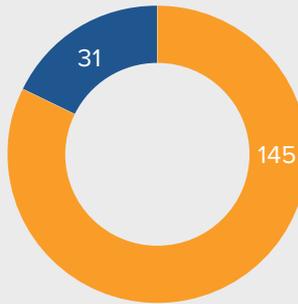


GENDER PROFILE



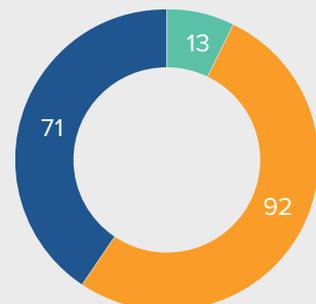
- Female
- Male
- Other

STAFF MEMBERS PER BUSINESS AREA



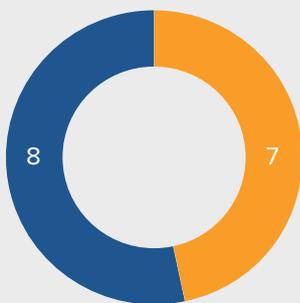
- Direct Service
- Management and Support

EMPLOYMENT STATUS



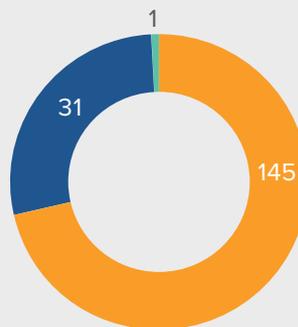
- Full-time
- Part-time
- Casual

GENDER PROFILE MANAGEMENT



- Female
- Male

GENDER PROFILE INDIVIDUAL CONTRIBUTORS



- Female
- Male
- Other

Our volunteers

We continue to benefit from and be grateful for the generosity of many volunteers offering a helping hand and working across many Lives Lived Well programs.

Throughout 2015-16, we drew from an average of 60 volunteers. Whether contributing in the office or directly helping with our clients, their work helped to add value and enhance our service delivery.

During the year, we saw our volunteer program diversify with the addition of volunteer yoga and meditation facilitators who contributed to the holistic care of our clients whilst in residential treatment.

As a show of appreciation, the volunteer team at our Burleigh campus were taken out for an evening of tenpin bowling and dinner for National Volunteers Week to acknowledge and thank them for their significant contributions.

At headspace Southport, a Peer Support Program commenced. It aims to engage young people who have used headspace services or other mental health services in roles where they can contribute their lived experience to support other young people having a tough time.

Ten young people were recruited and trained as Peer Support Workers. They are on hand to share stories of their recovery and wellness journeys, wellbeing strategies and tips and “be real” about the struggles and tough parts of their experiences. As such,

they volunteer their time to work in partnership with clinicians to support young people accessing our services by;

- ▶ normalising and de-stigmatising help-seeking and supporting young people to engage with headspace
- ▶ supporting and encouraging young people to access the full scope of services on offer, including our Functional Recovery Groups
- ▶ co-facilitating Functional Recovery Groups with clinicians
- ▶ providing individualised support to young people.

One of our Peer Support Workers, Jes Carolyne has been named as a finalist for the Youth Award and also the Jude Bugeja Award at the 2016 Queensland Mental Health Week Achievement Awards to be presented on 14th October 2016.

During the year, we also paid tribute to one of our longest serving volunteers, Marnie Higgins. Marnie began volunteering with us in 2008 and four years ago became an invaluable member of our administration team at Banjara. Giving up two mornings a week, rain, hail or shine, her constant dedication and commitment were acknowledged across Lives Lived Well.

“Being a volunteer at Mirikai is helping me learn new lifestyle skills as well as skills I can use to return to the workforce. Volunteering also helps me give back to the organisation that did so much for me. It’s my way of saying thank you.”

Our students

Lives Lived Well is committed to taking in students and working with them to support their training and sector knowledge. We have found that students offer a fresh perspective and are eager to learn and broaden their industry knowledge by networking with our staff.

headspace Southport is a vibrant student hub. Over the past year we have hosted occupational therapy, social work, psychology, community services and medical students.

On average, two students at a time have been placed within the Southport centre and this occasionally increased up to five students at a time.

Student placements range from a few days for medical students and up to 14 weeks for occupational therapy and psychology students. headspace Southport will continue to actively pursue student placements through the next financial year.

11.

Our support services



We believe that with team support much more can be achieved

People Culture and Communications

In 2015 organisational reviews were conducted for the functions of Human Resources, Work Health and Safety and Marketing and Communications. The review resulted in the formation of the People, Culture and Communication directorate led by a new executive position – Executive Manager (People, Culture and Communication). This change is aimed at ensuring our people are supported operationally and that necessary governance of our employment and workplace safety practices is in place. It also is key to achieving our organisational strategic aims through implementing strategic workforce and marketing initiatives.

Our Human Resources team

The Human Resources team provides a range of HR management, advisory and administration services across all phases of the employment lifecycle. Our focus is to ensure that HR processes support and enable our service delivery people to carry out their work.

2015-16 saw sustained levels of activity in recruitment, onboarding, contract administration, remuneration management and performance management matters. Subsequent to the review, it was also a year of consolidation and improvement of policies, processes and practices.

Key achievements included:

- ▶ a review of the Lives Lived Well Induction Program to place an increased focus on promoting early engagement with Lives Lived Well, focusing on organisational strategy, values, culture and service range
- ▶ recruitment of 88 new employees
- ▶ improved onboarding and probation processes
- ▶ supporting the establishment of new services and processes
- ▶ reviewing and refining policies and procedures
- ▶ a revamp of the Lives Lived Well Intranet
- ▶ organisational restructures and service reviews
- ▶ introduction of additional employee benefits.

Our Marketing and Communications team

Our marketing and communications team works to enhance Lives Lived Well's reputation and brand and to raise awareness of all our programs and services through management of a vast range of communication activities. Broad responsibilities include brand development and management, public and media relations, corporate and internal communications, publications and print management, managing sponsorships and partnerships, corporate events and workshops, online marketing, web content and design, and social media.

During the year, we

- ▶ hosted the first of our 2016 Australian Winter School Workshop series in April 2016
- ▶ launched a new Lives Lived Well website, including a migration to a different platform
- ▶ engaged an external agency to plan and implement a comprehensive digital marketing campaign
- ▶ delivered a Lives Lived Well brand refresh style guide
- ▶ launched a suite of 15 new or updated service flyers and brochures
- ▶ produced a client feedback brochure and distributed it to our service locations
- ▶ provided event management support for a community service state conference

- ▶ implemented a new all-staff email notification system
- ▶ undertook a major review and implementation of new signage throughout our service locations
- ▶ responded to or initiated 43 media inquiries, relating to drugs and alcohol issues, providing expert comment.
- ▶ distributed 11 media releases regarding Lives Lived Well programs and services
- ▶ produced and distributed quarterly staff e-newsletters
- ▶ co-ordinated bulk purchasing and distribution of marketing merchandise to our AOD community service teams
- ▶ continued to update and maintain the intranet, including posting regular event and news items and resources
- ▶ supported regular communications to staff via the CEO
- ▶ actively engaged our publics through social media including Twitter, Facebook, LinkedIn and YouTube
- ▶ regularly updated our advertising through Google Adwords.

Our Workplace Health and Safety team

A key focus for Work Health and Safety was continuing to build our "no blame" safety culture underpinned by strong health and safety and risk management systems and processes.

During the year, the following initiatives were undertaken:

- ▶ an active Work Health and Safety Committee expanded its representative membership across all areas of service delivery
- ▶ we improved our incident reporting processes to respond more effectively to incidents when they occur and to inform our ongoing risk management practices
- ▶ improved governance in incident and risk management
- ▶ held regular and planned discussion of work health and safety matters at Board, Executive and management and team levels
- ▶ linked health and safety intentions to our LLW organisational values
- ▶ included health and safety training within our internal training calendar
- ▶ conducted a work health and safety audit and compliance activities.

Our Finance team

Our Finance team undertakes a broad range of roles including management and financial accounting, which is necessary to ensure that we both monitor and report on our financial position. They also provide reports as to the financial implications of the strategic plan, in particular how this relates to sustainable growth in the

Health and Safety Activities:	Number
WHS training and education delivered to residents (Induction, fire safety & work crew training)	197
WHS training and education delivered to employees (Induction, fire safety, first aid, job specific training)	191
WHS training and education delivered to Students, Volunteers and Contractors (Induction, fire safety, job specific training)	31
Number of formal site inspections or audits conducted and recorded	60
Identified risks requiring corrective action/ management	96 (includes 64 low risk/minor corrective actions)

long term. The finance team is also responsible for the management of our payroll, leave management and salary packaging program.

During the year, we:

- ▶ continued strengthening our internal controls and improved the efficiency of processing the financial information
- ▶ provided financial budget support for a number of tender submissions
- ▶ brought up to date and streamlined our financial policies and procedures.

Our Operations team

Operations provides support to our programs by ensuring their premises, equipment, vehicle and ICT needs are met. When inducting new staff, our catchcry is “If you do not have the tools necessary to do your job to the best of your abilities, we want to know about it!”. Our goal is to use the resources we have efficiently, to maximise the service we can offer clients, as well as to enable and satisfy staff needs where possible.

There has been much staff movement in the Operations management team in the year to June 2016. A new Operations Director, Marcus Coleman, commenced in July 2015, along with Leah Tickner, Manager Operations & Performance, Regional Community Services. Ben Taylor, Head of ICT, and Rachael Ham, Manager Operations & Performance Far North Queensland also joined us, followed by James Curtain in March 2016, who joined part-time as Manager Operations & Performance, Community Services Central and South West Queensland. Julie Dignan commenced a role within the team in June 2016 as Business Manager - Quality, Risk & Reporting. Several other service portfolio changes have been implemented.

During the year, there were multiple highlights across all our service types.

Community Services

- ▶ established monthly performance reporting at staff member level for community services staff

- ▶ held a Community Services Conference in Brisbane, which enabled staff to share experiences, develop their skills and knowledge and apply clinical best practice
- ▶ recruited multiple new staff who are delivering excellent service to our clients
- ▶ participated in ‘Big 4’ accounting firm Deloitte’s Impact Day, welcoming staff into our Mirikai program for a day
- ▶ conducted fee for service training and awareness sessions to industry clients
- ▶ refreshed equipment to facilitate peoples’ service roles
- ▶ moved several offices to better serve our client and staff needs, or optimise our costs
- ▶ altered the management structure to build transparency and assist remote staff.

Residential Southeast Queensland

- ▶ completed capital refurbishment works at Mirikai, Logan and one of our halfway houses
- ▶ completed a full review of our service and facility at Logan
- ▶ designed and introduced a 28 day ‘short stay’ program at Mirikai
- ▶ obtained a concept design for six family units to be added to the Logan property, and applied for funding to assist with it.

Residential Far North Queensland

- ▶ recruited Rachael Ham to manage
- ▶ implemented changes to optimise the funding available and introduce new aspects to the clinical and cultural programs

- › substantially improved the reach of our services, by attracting more clients for longer stays
- › established funded programs with Quality Innovation Training & Employment, bringing their clients to Shanty Creek to assist with maintenance and learn new skills.

Medical and Health Practice

- › completed an external review of our Banjara practice, with a view to expanding our service in the year to June 2017
- › welcomed new practitioners to headspace Southport and Banjara to expand our service.

Youth

- › established a Youth Early Psychosis program at Southport, collaborating with multiple stakeholders within this
- › commenced multiple types of group sessions and community outreach programs, to broaden awareness and impact of our services
- › engaged youth advisory councils, peer workers, therapy dogs and artists to assist with the clinical programs for youth.

Operations Support (note ICT is reported separately)

- › established role KPIs for Managers within the Operations team
- › improved the storage of our source information
- › reviewed and refreshed policies and procedures
- › negotiated a new insurance contract for Lives Lived Well
- › established initial cost benchmarking across Lives Lived Well
- › commissioned economic analysis of our Residential and Youth Early Psychosis services.

Many exciting initiatives are continuing and we look forward to reporting on them as we evolve rapidly to meet service needs.

Our Information and Communication Technology team

The recent focus for ICT has been to elevate the position of technology at Lives Lived Well to ensure it contributes to strategy and innovation opportunities across the organisation. This has been enabled through the introduction of the head of ICT position in October 2015 and the formation of the ICT Governance subcommittee to build and implement a strong strategically aligned technology vision.

Effort has also been invested in strengthening the operational aspects of ICT with a full services review and a broad range of projects improving network, infrastructure and the operating environment. Highlights of these projects include:

- › migration of O365 to Australian hosted servers – as part of the strategy to ensure data sovereignty compliance, Lives Lived Well's Microsoft Office 365 tenancy was migrated to Australian hosted servers in December 2015
- › internet at Logan House – an improved internet service was installed at Logan House providing a point-to-point wireless solution. This is significant given the Logan House area has historically had limited services available
- › Security Review – an overall network and application security review was performed as well as development and implementation of new security based ICT policies

- › Windows 10 + Office 2016 rollout – a standard operating environment comprising of Windows 10 and Office 2016 was developed and rolled out organisation wide in June/July 2016.

Major ICT contracts were also reviewed over 2015/16 for core ICT services. An evaluation of Service Desk and Desktop Support, Wide Area Network and Telecommunications was conducted across multiple suppliers. The review resulted in a continued partnership with Centra Networks to provide all outsourced services as well as scope for growth and project implementation. The Mimaso contract (our primary clinical platform) was also reviewed and continued, with the Mimaso SaaS platform aligning well to the overall ICT strategy.

Looking ahead, there are many opportunities technology presents to Lives Lived Well with plans for capabilities to be developed around Business Intelligence, online Learning Management, Mobile apps to support Recovery and post-treatment health, and improvements across Human Resource and Finance systems.

Our Administration team

Our administration team provides support services to Lives Lived Well programs and corporate services. Primarily based at the Gold Coast, Spring Hill, and Cairns/Mareeba offices, the team provides reception and administration support services, and handle thousands of incoming enquiries for drug and alcohol treatment information and support every year through the Lives Lived Well 1300 727 957 number as well as the Lives Lived Well website. Additionally, administration staff members support our residential services assessment and admissions process, and provide reception services for the Banjara Medical Centre.

12.

Our funders, partners and supporters

Our funders

- › Department of Health - Queensland
- › Department of Communities
- › Department of Housing & Public Works
- › Department of Health - Commonwealth
- › Department of Social Services
- › Department of Prime Minister & Cabinet
- › Department of Prime Minister & Cabinet – NAIDOC Event project funding
- › Royal Australian and New Zealand College of Psychiatrists, Department of Health
- › Royal Australasian College of Medial Administrators, Department of Health
- › Gold Coast Medicare Local (Primary Health Network)
- › Gold Coast Hospital & Health Service
- › headspace National
- › Foundation for Alcohol Research & Education
- › Kuranda Koala Gardens
- › Quality Innovation Training and Employment (Work for the Dole)

Donors

- › Jack Jacobs Charitable Trust
- › Gold Coast City Council
- › Pauline Lynch
- › St Andrews Lutheran College
- › Nathan Campbell
- › Ex-Grilled Robina
- › The BMX Club Logan
- › L.J. Hooker
- › Audrey Verlaque
- › Rob Molhoek MP Southport
- › The ZONTA Group Paradise Point (headspace Southport)
- › Varsity College

Our consortium partners

- › headspace Southport consortium – Wesley Mission Queensland, Gold Coast Hospital & Health Service, Medicare Local, EPIC Employment, GCHH Indigenous Health Unit, MIFQ, PHN and our Independent Chair Ms Christine Smith OAM, Marumali Consultants, GCHHS Carers and Consumers Unit, Keebra Park SHS, OHANA for Youth Gen-Z.
- › headspace Youth Early Psychosis program – Aftercare, and Gold Coast Hospital & Health Service

- › Kids in Focus – Wesley Mission Queensland & Benevolent Society
- › Department of Housing & Public Works – housing program partnerships
- › Complex Needs Assessment Panel and Integrated Services – members, FSG, Ozacare, WM Qld, Department of Communities, Aftercare and Qld Health.
- › Gold Coast Hospital & Health Service – co-location
- › Gold Coast Hospital and Health Service - Psychiatric Registrar Vocational
- › Queensland Innovation Training and Employment (Work for the Dole)
- › Mulungu
- › Cairns HHS-AODS
- › Gindaja
- › Wuchopperen
- › Queensland Health ATODS
- › Abiculture
- › Amaroo Medical Centre
- › Cultural Enhancement Group Indigenous Corporation

Training Placement:

- › Bond University – Psychology Masters Student Internship
- › Griffith University – Psychology Masters Student Internship
- › USQ – Externships, both Psychology and Social Work
- › SCU – Externships, both Psychology and Social Work
- › GCPHN clinical placements Medical Students

Private providers – Banjara Medical Centre

We would like to acknowledge the providers who work as part of our team at Banjara Medical Centre:

- › Dr Vicky Satchwell
- › Dr Elizabeth Colebourne
- › Pejman Hoviatdoost
- › Matthew McGregor
- › Rachel Hinton
- › Dr Leah Pischek-Simpson
- › Rose Gillett
- › Cliff Battley
- › Peter St Henry
- › Lisa St Henry
- › Rose Gillett
- › Tristan Abba

Mental Health Nurses

- › Alan Hainsworth
- › Anne-Marie Bradley
- › Leanne Nathan

Psych Registrars

- › Dr David Barison
- › Dr Lee Williams

Private providers – headspace Southport

- › Dr Susie Radford GP
- › Dr Michelle Davis GP

Private Psychologists

- › Ian Platt
- › Jade Walters
- › Jamie Barnier
- › Michelle Pittaway
- › Rebecca Dale
- › Renee Sichter
- › Amy Bannatyne
- › Brent Holgate
- › Cameron Brown
- › Catherine Cockburn
- › Dallas Pitt
- › Damien Thomas
- › David Boyd

- › Erin Hayes
- › Paul Phelps
- › Rachel Hinton
- › Richard Moore
- › Veronica Lister
- › Camilla Henderson
- › Carlie Robertson
- › Tim McIntyre
- › Emily Hughes
- › Elizabeth Edwards
- › Kate Feely
- › Michael Chamberlain
- › Michael Nielsen
- › Lerome Casperz
- › Stacey Veroot
- › Louise Pennant
- › David Barison
- › Sandra Garcia

13.

Where our money goes

Financial snapshot 2015-16 Lives Lived Well

Where our money comes from

The main funding sources for the programs delivered by Lives Lived Well come from Federal and State Government departments such as Queensland Health, Department of Health - Commonwealth and the Prime Minister and Cabinet – a full list of funders is provided in this report. However, it is envisaged that as the organisation continues to grow that funding sources other than government will be investigated with a view to broadening our income stream.

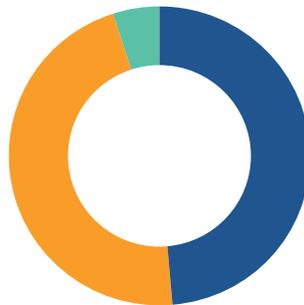
In summary

Lives Lived Well has had another solid year, the financial position remains strong with net assets of \$12.59 million (2015 \$11.05 million). It had a net surplus of \$1.54 million (2015 \$1.26 million).

OUR FINANCIAL STATEMENT

If you would like a full copy of our financial statement please email us at info@liveslivedwell.org.au

FINANCIAL PERFORMANCE 2015-16



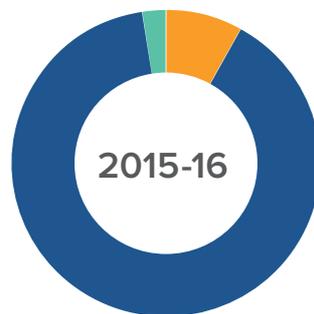
- Revenue 20.22m
- Expenses 18.68m
- Surplus 1.54m

FINANCIAL POSITION 2015-16



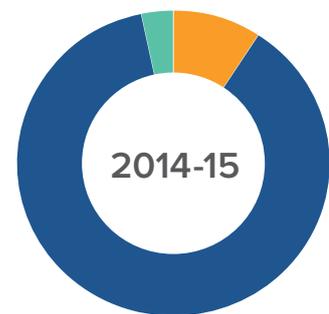
- Total assets 20.08m
- Total equity 12.59m
- Total liability 7.49m

WHERE OUR MONEY COMES FROM



- Grant Revenues 18,123,986 (89.6%)
- Service Income 1,658,827 (8.2%)
- Other Revenue 441,096 (2.27%)

TOTAL = 20,223,909



- Grants Revenues 14,190,119 (87.63%)
- Service Income 1,489,051 (9.20%)
- Other Revenue 514,616 (3.1%)

TOTAL = 16,193,786

Contact us

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