



# 2021/2022 ANNUAL REPORT

CELEBRATION OF OUR COMMUNITY, OUR COLLECTIVE DIFFERENCE & DIVERSITY

Art by Ronoo Davis

## ACKNOWLEDGEMENT OF COUNTRY

QulHN acknowledges the Traditional Custodians of the land on which we work and pays respect to Elders, past, present, and future. QulHN also acknowledges and respects the continuation of Cultural, Spiritual, Educational and Health practices of Aboriginal and Torres Strait Islander peoples.

We acknowledge Aboriginal and Torres Strait Islander peoples' strength, resilience, and capacity in response to the impacts of colonisation. QulHN is committed to contributing to a reconciled Australia.



Image - Renee Davies, Unknown



Image - Liz Challis, Great Barrier Reef

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### Acknowledgement of Front & Rear Cover Art:

#### Front cover –

Artist - Renee Davies  
Artwork Title - Unknown

#### Back cover –

Artist - Liz Challis  
Artwork Title - Great Barrier Reef

### In Memory

Sadly, on Aug 16th this year, we lost a beautiful soul - Liz Challis. Liz was a QulHN Representative for the Townsville office. Liz was dedicated to her work with us and fulfilled her role with compassion, wisdom and professionalism.

It's difficult to describe Liz in only a few words because she had so many wonderful attributes – Liz was kind, staunch, patient, humble, friendly and had spunk and a beautiful aura about her.

Liz was one of those people, who once you met her, you never forgot her. Liz was also a talented artist who was an incredibly dedicated and loving mother and family member.

We treasured you here at QulHN and we will miss you Lizzie!

## STATEMENT OF INCLUSION

QulHN recognises the strength, resilience, survival, and solidarity of people who use drugs and remembers those of the drug using community who are no longer with us. QulHN values are underpinned by a social justice framework that respects diversity and difference and we are committed to providing fully inclusive, professional, and non-judgmental services to people of all cultures, languages, capacities, sexual orientations, gender identities and/or expressions.



### Ngurr (Side by Side)

This art work has a special meaning to QulHN. The big blue circle in the centre represents the QulHN base/home. The 'U' shape symbols represent all the workers and their skills/knowledge that make up the QulHN workforce.

The white circles represent the different communities that QulHN has worked with and made connections with and continues to do so.

The blue line that leads out from the centre through the white circles with the blue and white 'U' shape symbols represents the pathway that QulHN takes to help their clients in the way of health and wellbeing, family, drug use and recovery, counselling, building relationship skills, and communication.

The circles on the edges of the painting represent the families of the clients and their communities, it shows the strength and resilience of the people involved to help clients to achieve good health and improve social and emotional wellbeing.

The emu footprints represent our ancestors traveling with us, helping us, and guiding us in the right direction in all areas of our life.

This painting is about everyone coming together side by side working together for a healthy positive future.

Artist, Wayne Martin

Nurambang Cultural Education and Aboriginal Art

### Artist Information

Wayne Martin is a proud Wiradjuri/Mardigan/Kooma man. Wayne's family originates from Cunnamulla in South West Queensland on Kunja country. His mother's country is Mardigan country, in Quilpie. He also has family connections in Lightning Ridge on Yuwaalaraay Country, his grandmother's country is along the Lachlan and Murrumbidgee Rivers on Wiradjuri country.

Wayne's family moved around a lot through Queensland and New South Wales when he was growing up. He has done a lot of travel throughout his life. As a teenager, Wayne's uncle, also named Wayne, started teaching him about Aboriginal Culture and Lore. Along his cultural journey, he met a lot of strong cultural men which is what inspired his art, showcasing dreaming stories and connections to Mother Earth.

Wayne loves to share his culture with everyone, and painting has allowed him to do that. He wants to be able to give people a piece of his journey, his cultural knowledge, and his experiences.

Find more at

[www.ngurambangaboriginalart.com](http://www.ngurambangaboriginalart.com)

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# OUR VISION & PURPOSE

## OUR SHARED VALUES

OUR SHARED VALUES ARE WHAT CONNECTS US AS AN ORGANISATION AND WE STRONGLY BELIEVE THAT:

- All people should have choices allowing for self-determination and self-reliance.
- That we all need to remain committed to being consumer-focused through engagement and participation.
- That respect for oneself and others is essential, our approach must remain inclusive and accepting.
- We value all people with whom we work, and we respond with positive regard, dignity, and courtesy.
- We embrace difference and diversity as an asset and strength, accepting everyone regardless of culture, sexuality, disability, gender, age, and life circumstances.
- We value transparency and accountability in our work, and we commit to genuine authenticity and individual, organisational, and public accountability.



## OUR VISION

QuiHN’s vision is for a world where all people who use substances can reach their full potential & the health & wellbeing outcomes of our communities is maximised.

## OUR PURPOSE

Through our services we strive to contribute to the elimination of drug overdoses, hepatitis C incidence is eliminated, physical and mental health and wellbeing increased, quality of life improved, and individual potential realised. Regardless of where people are at in their journey, our services are provided with respect, non-judgement, self-agency and through this we create a sense of belonging and safety.



**I always feel better after a session here. Very flexible and upbeat atmosphere. Keep up the good work...**



# PRESIDENT'S REPORT



**LAUREN TRASK**  
President  
QuIHN

**2022 saw a year of new challenges and subsequent learnings. QuIHN demonstrated its ability to be agile and pivot where required to ensure the people walking through our doors have continuity of care through the unique system of care that is fit for purpose, of the highest quality, and accessible.**

The reimagined relationship between QuIVAA and QuIHN has further positioned the voices of those with lived and living experiences. The honour of standing with colleagues of QuIVAA comes with responsibility. Together we will continue to provide the vision that aims to empower the professionalism of peers through further refining the way we work and building upon our solid foundations. The strength, through our joint vision, has seen the establishment of two senior peer leadership positions. We stand together in solidarity, grounded through the experience and advice of smart solutions to complex issues.

Access to healthcare is a fundamental human right. The individuals working with QuIHN demonstrate a passion and deliver care with integrity, each has a role that contributes to ensuring people who use drugs can access the care they need at an optimum time. The innovation and wisdom of QuIHN staff have seen significant achievements in preventing overdose through our Naloxone program. We have seen QuIHN staff as the face of national campaigns aiming to eliminate Hepatitis C, selflessly sharing personal journeys that encourage access to testing and treatment. We've seen further linkages with prisons to enable better access to care for priority populations through innovative programs. Passionate individuals, and healthcare professionals delivering harm reduction education in ways that grow a collective to ensure partygoers are safer to enjoy experiences. We are involved in innovative trials that support drug users to be better informed about the content of illicit substances to make informed decisions in real-time. To the staff of QuIHN, those passionate and with a drive to serve and provide the communities with a system of care that supports people wherever they are on their journey – the QuIHN Board says, 'Thank you.'

The strength of the executive team, led by Geoff Davey, to inspire QuIHN towards the execution of the organisation's business plan aligned with the values and shared vision is undertaken with integrity. Our highly skilled, committed exec team, staff, and volunteers are the heart and soul of the organisation. The board acknowledges the integral role you play in people's lives.

To our funders and those allies that recognise QuIHN as leaders and as the choice of providers in the delivery of the highest quality, fit-for-purpose services for and together with people who use drugs, thank you for the role you play in making a difference and enabling QuIHN to continue to deliver a system of care that meets the needs of our people walking through the door.

Finally, I acknowledge, pay my respects, and thank my fellow directors and those directors of QuIVAA. Thank you for your continued commitment and patience, for the knowledge and wisdom generously shared. It has been a difficult few years and yet, together, we continue to achieve above and beyond expectations. I acknowledge the continued strength and integrity that each of you brings to the table despite the loss of those significant in our personal and professional lives. It is a privilege to have a seat at the table with you.

On behalf of the QuIHN board, I look forward to the year ahead, the challenges that it will bring, and QuIHN's ongoing capacity to remain agile in delivering solutions that enable access to the highest quality, fit-for-purpose healthcare for people who use drugs.

Sincerely,

**Lauren Trask**  
President  
QuIHN

# CEO'S REPORT



**GEOFF DAVEY**  
Chief Executive  
Officer

**Throughout this year our shared values, goals and mindset continue to serve us well in responding to the needs of the community. We continued to maintain very high levels of service continuity in all programs.**

## Our Reconciliation Action Plan

This year marked the official launch of our Reflect Reconciliation Action Plan (RAP). Our Reflect RAP provides an opportunity for our organisation to reaffirm our shared commitment to reconciliation and 'getting it right through practical but respectful steps and activities consistent with each stage of our reconciliation journey. The Reflect RAP is led by the RAP Working Group with support from all QuIHN staff. As a health service, we recognise the harm and destruction colonization has had on Aboriginal and Torres Strait Islander peoples. We recognise the continued impact of past policies and directives that have had a dire impact on intergenerational trauma, and we recognise the strength and resilience of Aboriginal and Torres Strait Islander people and communities. We look to the future and are excited to further embody a culture of improving the way our services are delivered.



Image - Hi-Strand Launch



**I love the groups run - I'd attend any group run by QuIHN ... I feel seen, heard, and respected completely and would recommend them to absolutely anyone.**



### Our Financials

During the year the organisation maintained a strong financial position. Over the course of the year, the organisation furthered its work on the new site on the Sunshine Coast, to build a fit-for-purpose facility to house our Sunshine Coast regional operations for the long-term future. A town planning development application (DA) was lodged over the development of the site and the existing structure on the site was demolished. Significant work has gone into the town planning DA and we have reached a final decision stage. With successful DA approval, we will now be commencing the tender and construction stages for the completion of the site. Delays have occurred to the project timeline, and we are expecting completion of the site before the end of the 2022/2023 Financial Year (FY). As a result of continuing reinvestment into the organisation, we are forecasting deficits in our corporate operating budgets for the current 2022/2023 FY. Retained earnings from previous years are earmarked to be utilised to support the objectives of QuIHN, namely the construction of our future Sunshine Coast regional site and other physical infrastructure requirements. Despite continuing reinvestment and the ongoing macroeconomic challenges being experienced more broadly, the organisation maintains continued strong growth.

### Our Services

We have continued to deliver critical services to our clients and the Queensland community. Our services provide a continuum of high-quality, innovative, and evidence-based specialist Alcohol and Other Drug (AOD) health services to reduce harms associated with the use of substances. It is through this continuum that QuIHN can work with people at all stages of change, from those actively using to those who are seeking to reduce or cease their use. Through this approach, we assist people to achieve positive and lasting change while reducing harms, improving health, and enhancing lives.

Over the past year, our organisation has continued its commitment to innovation and new programs, this has been exemplified through the:

- Continued rollout of our widened Point-of-Care-Testing (PoCT) programs encompassing Hepatitis C, HIV, and syphilis.
- The continued provision and evaluation of the QuIHN and Gold Coast Primary Health Network partnership in the Community Withdrawal Program provides comprehensive treatment and support for people experiencing AOD-related problems who are unable to access or require inpatient withdrawal services.
- Our involvement in the delivery of COVID vaccination utilising a nurse-led and outreach-based model to socially disadvantaged populations in Brisbane North areas.
- The continued provision of our Take Home Naloxone (THN) Program across our NSP network, providing important lifesaving medication to reverse the effects of opioid overdose in the community. This program was a trailblazer and was available well before the National Pilot THN program was expanded nationally.
- The Peer Leadership Workforce initiative is now underway which will provide a workforce framework to embed lived experience work. This will greatly benefit QuIHN and the wider AOD sector.



Image - Hep C Posters

### Our Teams

Our shared values are what connect us as an organisation, and it is what keeps our culture strong. The experience of the pandemic has not allowed our organisation to have been able to come together face-to-face through our 'QuIHN Days', but the opportunity is now. We have planned to hold our bi-annual company days in November 2022 and to celebrate the theme of individual and collective belonging and connection to our purpose. We look forward to welcoming back our 'QuIHN Days' and uniting in place and collective belonging, together again.

During the year we finalised the rollout of our upgraded Human Resource Information System (HRIS), including its Learning Management System (LMS) and ongoing work with our induction and onboarding systems. The new HRIS also allowed us to relaunch our ongoing Rewards and Recognition programs, celebrating the commitment of our staff in demonstrating living our shared values.

Over the course of the year, we also made provisions and plans for the launch of a new role funded by the organisation to lead our Peer Leadership Project. The role will lead and develop the establishment of a best practice Peer (Lived / Living Experience) Workforce framework to help us further embed lived experience work within the organisation and foster person-centered, strengths-based, culturally appropriate, trauma-informed practices, in line with QuIHN's harm reduction commitment. This project will work closely with our workforces as well as QuIVAA, our member organisation, and a range of local, State, and National stakeholders. We believe this will not only benefit QuIHN but will have wider application across the state and national AOD sector.

Additionally, QuIHN also provisioned investment to support our member organisation, QuIVAA Inc, to develop its future organisational capacity through the introduction of a new Executive Officer role. The role will be responsible for undertaking the development, leadership, and direction of QuIVAA activities. It will collaborate extensively with peer drug consumers, identify funding opportunities, strategic direction, development, and planning and undertaking a range of future projects supporting the health and human rights of people who use (and have used) illicit drugs.



Image - Brisbane Team on IOAD

### Our Futures

We are founded by the communities with which we serve, and our organisation continues this long and strong connection and tradition. Over the year we have been working with our founding member and partner, QuIVAA Inc, in strengthening our member engagement through such work as the Peer Leadership Project and the establishment of the Executive Officer role. As an organisation, we are proud of our community and grassroots history and excited about our future.

While our programs have had great success to date there are still many opportunities to innovate, extend our reach, and improve accessibility and sustainability in the future. Through our services, we strive to contribute to reducing drug-related harms such as the elimination of drug overdoses and hepatitis C incidence among our populations. We strive to improve physical and mental health and well-being for our communities, to lift quality-of-life and social participation, and to help ensure individual potentials are realised. We believe in a world where all people who use substances can reach their full potential in life and where the health and well-being outcomes of our communities are maximised.

- To achieve this, we must continue to ensure we can expand our services for more people affected by problematic drug use in Queensland, and to do that we must continue to:
- Ensure our workforces and our people are highly passionate and strongly aligned, and that they have access to high-quality support, training, and employment outcomes.
- Integrate our programs to provide a truly end-to-end cascade of care, where there are no wrong doors, multiple entry points, and smooth exits.
- Ensure strong partnerships through co-design with our communities, and consumer and stakeholder engagement.
- Enhance our ability to promote our impact to potential clients, sector partners, and potential funders and sponsors.
- Enhance our physical and digital infrastructures to ensure our sustainability and create local presence and touchpoints.
- Ensure our finances and funding mix are both sustainable and adequate to achieve our goals and purpose.

It is an honour and pleasure to lead a passionate organisation and group of people. I continue to be made immensely proud by the individual and collective achievements of our clients, our staff, our volunteers, our directors, and our organisation.

Standing in solidarity,

**Geoff Davey**  
Chief Executive Officer  
QuIHN Ltd

2021 / 2022  
**PROGRAM  
REPORT**

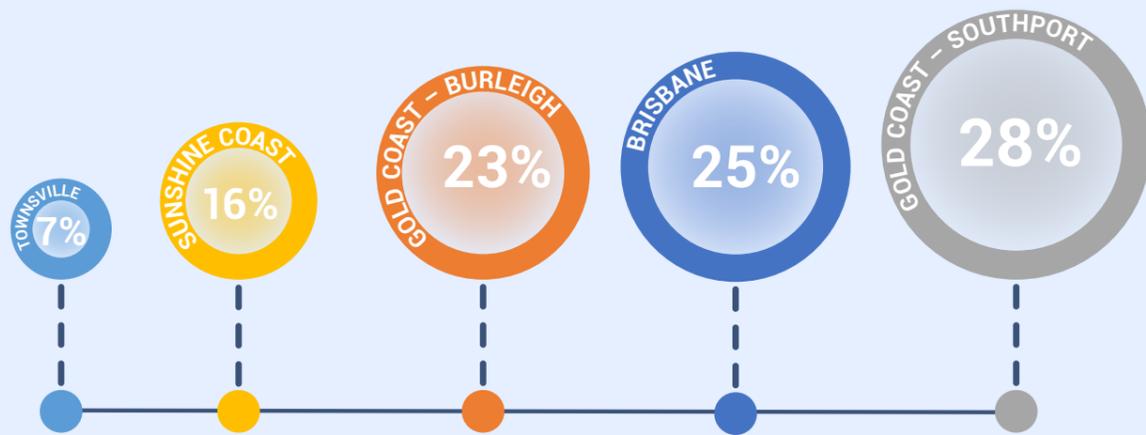


# HARM REDUCTION SERVICES

HARM IS REDUCED THEREBY SOCIAL OUTCOMES ARE IMPROVED.

Reduced harms associated with overdose, and communicable diseases, improved mental health functioning, and reduced risks associated with substance use.

The NSP delivered a total of 27,612 occasions of service during the period.



A TOTAL OF

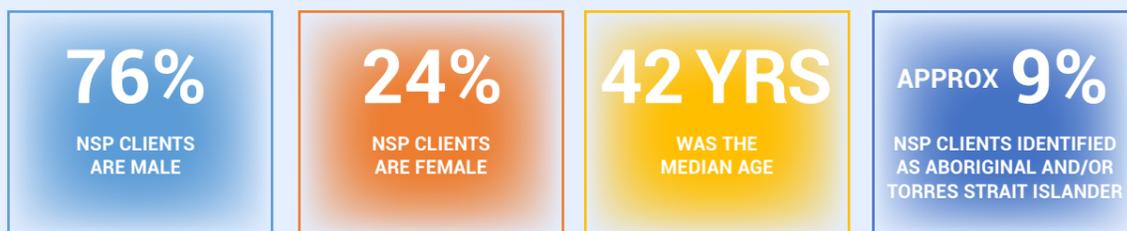
**32,773**

Brief Interventions and

**5,543**

referrals were facilitated via NSP during the reporting period.

The NSP demographics were:



## Naloxone access

QuIHN's Harm Reduction team commenced naloxone distribution in July 2020. Since this time, staff has provided 1,638 individual devices to clients identified as "at risk" of overdose, or those likely to witness a friend or family member overdose. As of the end of June 30, 2022, 348 naloxone resupplies have also occurred.



**1,638**

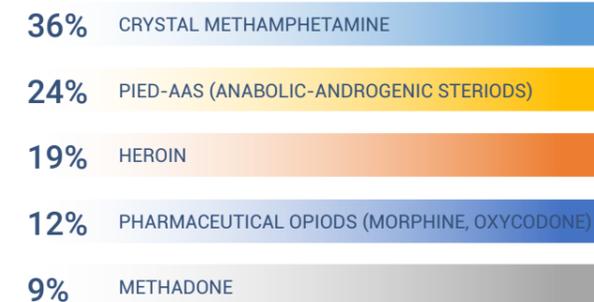
Naloxone distributed to clients at risk of overdose  
AND



**348**

resupplies

## Top 5 Drugs reported for injection by NSPs



## Hepatitis C Virus (HCV) Testing

During this reporting period, QuIHN's Treatment Management Program and Better Access Medical Clinic completed a total of 1,121 HCV tests. The detection rate across all tests conducted was 12.2%. Hepatitis C Point-of-Care-Tests (PoCTs) accounted for 553 Hepatitis C tests conducted across the service. The Hepatitis C PoCT activity has allowed for opportunistic testing of NSP clients, the Hepatitis C Detected rate from PoCTs during this period was 16%. Townsville and Brisbane also introduced HIV and Syphilis PoCT during the period with wider implementation plans continuing.

## HCV Treatment

QuIHN's Hepatitis C Community Peer Support project was completed in December 2021 after providing outreach, HCV testing, linkage to care, and Hepatitis C health promotion across Brisbane, Sunshine Coast, and Townsville. HCV testing was conducted by our Peer Workers at boarding houses in Brisbane, Indigenous Health services, and services across the Maryborough and Hervey Bay communities.

Nurse Practitioner Outreach clinics were routinely conducted in Burleigh Heads, Southport, Logan, Brisbane, Sunshine Coast, and telehealth support to Townsville. Nurse Practitioner clinics expanded to include community corrections in the Metro North and Townsville regions. The Treatment Management Program (TMP) worked with 205 people, assisted 66 people to complete treatment, and commenced 50 people onto treatment.

**TMP – Whole of Program outcomes  
(Jan 2016 – June 2022)**

**2,400**

HCV screens completed  
(inclusive of PoCT)

**826**

scripted for HCV treatment

**781**

started HCV treatment

**768**

completed HCV treatment

**750**

eligible for Sustained  
Viral Response (SVR)

**215**

Missing SVR

**535**

attended SVR confirmatory test

**515**

SVR confirmed

**20**

non-responses to treatment

**7%**

re-infection rate of clients  
treated identified as being  
treated for re-infection



**TMP Prison Transition Program**

The Prison Transitions Worker (PTW) worked as part of the overall Harm Reduction team, but more specifically the TMP and Prison Health Services, with a focus on managing centralised referrals, providing linkage and support to clients seeking or on Hepatitis C treatment who are post-release from correctional services in South-East Queensland. The role also assists clients at risk of entering the correctional system, with a focus on access to HCV testing and treatment. The PTW provides in-reach to multiple prisons, including Brisbane Women's Correctional Centre, Borallon Correctional Centre, Brisbane Correctional Centre, and Wolston Correctional Facility. During the year the prison transition service provided:

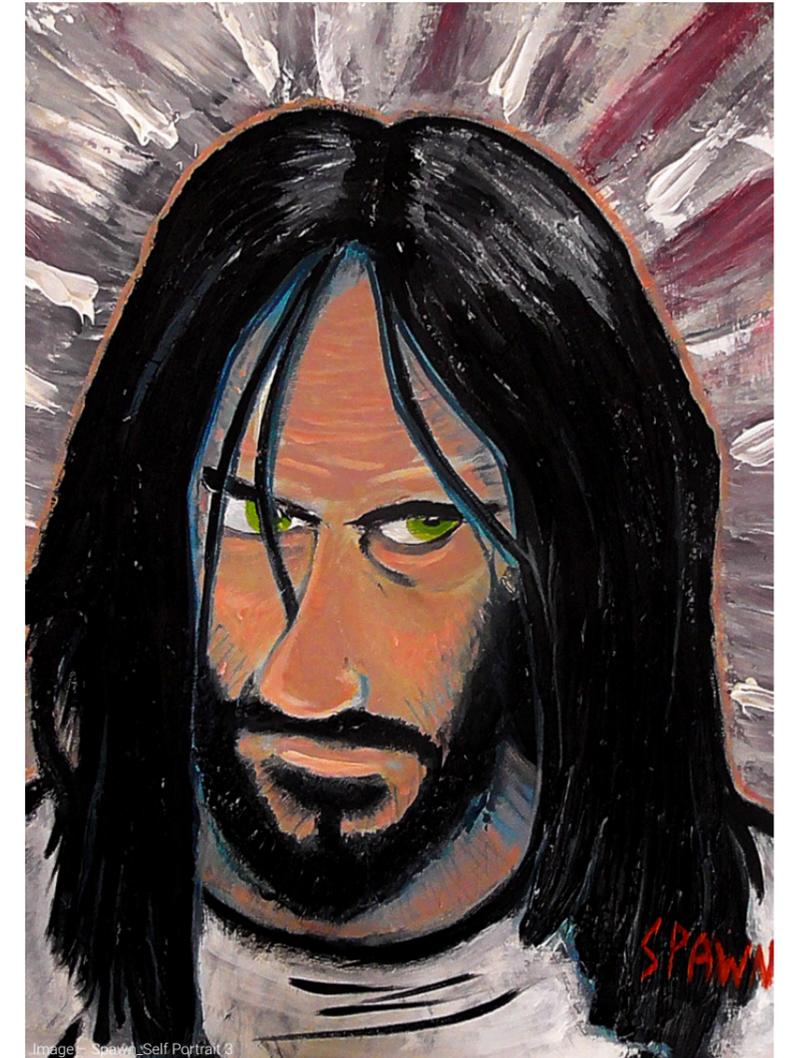
- 260 client referrals
- 33 prison inductions sessions
- 43 stakeholder relationship management episodes
- 5 Program Management episodes
- 3 Conference presentations
- 1 in-service presentation

The PTW also engaged with 283 individual clients, including:

- 208 clients were seen in prison, 75 clients in the community
- 68.75% identified as Male, while 31.25% identified as Female
- 17 medication deliveries to people transitioned from prison to community

The most common presenting age group was between 26 and 35 years of age.

The QuHN Prison Transition Services was invited to collaborate on Hepatitis C PoCT blitz events where all people in prison at the time of the event were offered PoCT. Blitz events were conducted at: Lotus Glen Correctional Centre, Palen Creek Correctional Centre, Woodford Correctional Centre, and Borallon Training and Correctional Centre.



“ I learned some great things from these modules that I will use daily ”

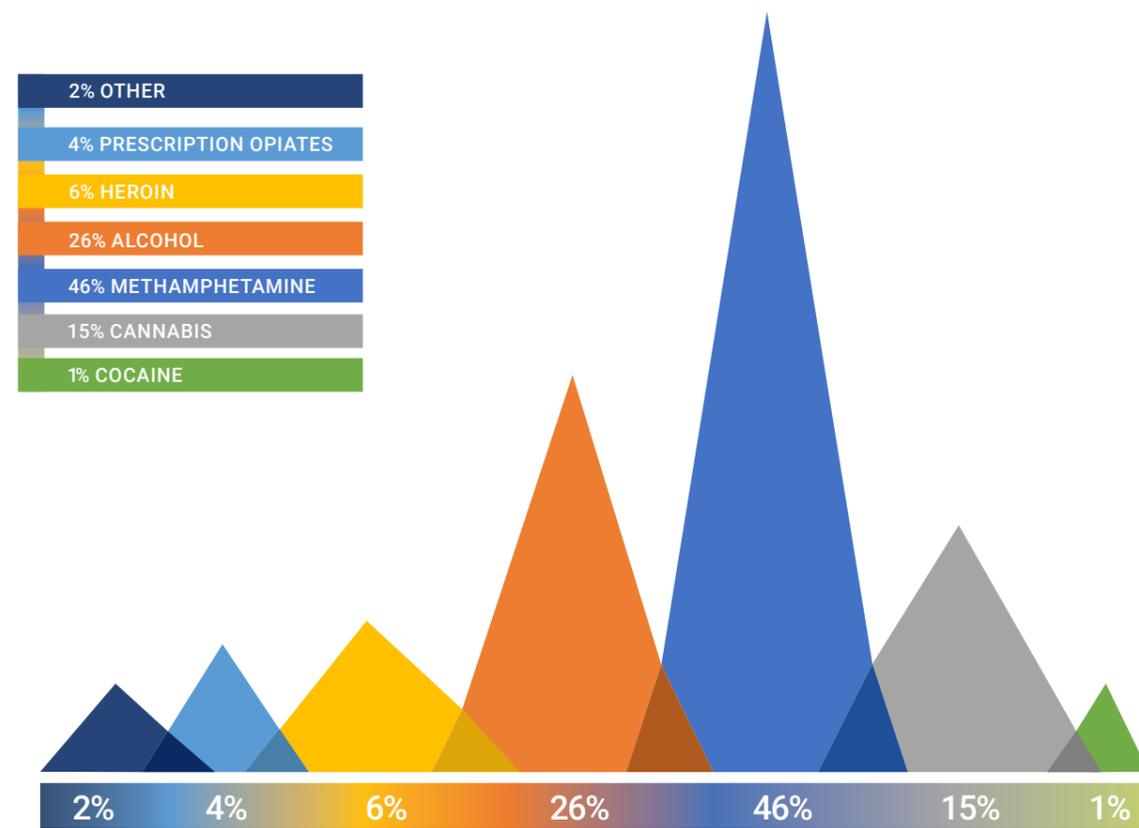
# THERAPEUTIC SERVICES

QulHN's Therapeutic Counselling and Case Management Programs are delivered across Gold Coast, Redlands, Brisbane, Sunshine Coast, and Cairns regions.

Combined these programs over the course of the year delivered:

- services to a total of **2,681** clients
- **1,868** client episodes began
- **2,291** client episodes were closed
- **8,712** counselling sessions
- **2,131** case management sessions
- **2,020** group contacts in our therapeutic groups

53% of Therapeutic program clients were male and 46% were female. Of this 11% of clients identified as Aboriginal and/or Torres Strait Islander. The average age of clients was 41 years.



**Principle Substance of Concern among Therapeutic Services**

Methamphetamines (46%) were identified as the main primary drug of concern for the Counselling and Case Management Programs in 2021/2022.

## Counselling and Case Management Outcome Data

QulHN's Therapeutic Services Counselling and Case Management Programs collect outcome data from all clients who access the programs. Upon assessment, some baseline psychometrics are collected. These are then followed up 4-6 sessions later or at the end of a group program to see if there are any changes. The 4 primary measures used are the Depression, Anxiety, Stress Scale (DASS 21), The Severity of Dependence Scale, and the Rosenberg Self Esteem Scale.

2021/2022	Baseline	Follow up	Difference	Percentage Improvements
Depression (21+)	18.97	15.22	3.75	20%
Anxiety (15+)	16.09	14.33	1.76	11%
Stress (26+)	21.94	18.80	3.14	14%
SDS (4+)	7.16	4.17	2.99	37%
RSE (higher is better)	25.91	27.48	1.57	6%

This shows that in 2021/2022 the average scores for the follow-up measures all improved over the baselines. baseline Depression, Anxiety, and Stress were significantly lower than last quarter. The number in brackets represents a 'Severe' score. Many clients first present for counselling and case management in a heightened state.



Image - Hep C Testing



The course has been wonderful, and I have enjoyed everything we have talked about. Changing my behavior can be hard, but I now have more self-awareness and a greater desire for change. This has been informational and exactly what people need for the actions of change. Thank you



#### Brisbane Outreach Social & Nurse Support Program

This program provides outreach social support and nursing support to clients in Redcliffe, Deception Bay, and Caboolture areas. Throughout the year the Case Manager and Outreach Nurse saw over 430 clients, supporting them with welfare and health issues. The team source several donations of food and clothing that they can distribute to the clients they work with. They also provided several COVID and seasonal influenza vaccination clinics to these communities.

#### Community Withdrawal Program (CWP)

This program began in March 2021 and aims to provide a comprehensive treatment and support service for people with AOD-related problems who would not access or require inpatient withdrawal (sometimes referred to as 'detox'). Through our Nurse Practitioner-led community withdrawal program, we support individuals to withdraw from a range of substances in the privacy of their own homes. AOD withdrawal in the community setting enables people to withdraw in their local home environment, with the support of specialist AOD clinical staff and their families and support persons. During the year the program has completed 153 Intake Screens and of these, 114 assessments were completed with eligible clients. This led to 93 people starting the program and 68 clients completing the program.

The Program has made ongoing improvements and amendments to its eligibility criteria for clients over the year to ensure wider accessibility. To detox at home, clients must fall within certain safe limits of use and mental health stability. There is no hospital or medical facility surrounding the client when they choose to withdraw in their own home. As this was more widely understood by referrers the program experienced more targeted referrals with more clients being subsequently accepted. Additionally, during the year the program undertook marketing via the local radio across the Gold Coast which saw significantly more numbers of inquiries and subsequent completions.

#### Queensland Corrective Services (QCS) Program in North Queensland

Over the year the counselling and therapeutic group programs we provide for QCS continued with great success. The moderate-intensity group program that we provided to Townsville and Cairns (Lotus Glenn) continued to be refined over the year. Clients have appreciated the nonjudgmental and harm-reduction approach to the presented material. The program worked with 801 clients in counselling. It also facilitated 10 therapeutic group programs over the year.

QulHN conducted two training sessions for Far North QLD Corrective Services Staff. This training was well received and will provide the basis for some other opportunities with QCS over the next year. The training was on what QulHN does and what we can offer clients on parole orders. The modules from the group program QulHN facilitates in the Northern Queensland Prisons were also outlined along with the reasoning behind their inclusion. Much of this content is also utilised by the counsellors in the sessions conducted in parole offices. Knowing this will help officers 'sell' the benefits of groups and counselling in a more targeted way to help increase client engagement. There will be a focus on a client-centered, harm reduction approach to dual diagnosis issues to enable parole officers to develop a greater understanding and realistic outlook on those they are supporting.

#### Professional Development

QulHN's Therapists have extensive knowledge and experience in complex mental health and substance use issues. Staff continues to undergo regular professional development opportunities to keep abreast of the latest evidence-based approaches to therapy. During this reporting period (1 Jul 2021-30 Jun 2022) staff availed themselves of training in complex trauma, mindfulness, Sensory Approaches to AOD, Acceptance and Commitment Therapy, Advanced Cultural Awareness Training, Schema Therapy, Motivational Interviewing, and Attachment Therapy.

# BETTER ACCESS MEDICAL CLINIC

Over the course of the year, the Better Access Medical Clinic (BAMC) provided 12,859 patient appointments with 80% delivered through face-to-face consults. Patient demographics included:



6%

of patients identified as members of the Aboriginal and Torres Strait Islander community



44%

of active patients identify as Male and 55% identify as Female



57

patients supported in our Opioid Substitution Therapy (OST) via the clinic each month



293

patients attended for quarterly sexual health certificates



1,191

were screened for Chlamydia



890

were screened for Hepatitis C



1,187

were screened for Gonorrhoea



989

were screened for syphilis



903

were screened for HIV

# CLIENT ENGAGEMENT

QuiHN has continued to dedicate resourcing in the form of the Client Engagement role to centrally coordinate and report back on client engagement activities across the organisation. This position works closely with the regional teams to support client engagement to inform service planning, delivery, and evaluation. Other activities conducted or coordinated over the year included:

- coordination and facilitation of the Feedback2Action (F2A) Group whose membership consists of both client representatives and members from all teams across all regions. This allows the flow of information between clients, teams, management, and client representatives.
- Providing guidance and support with client feedback on policies and procedures.
- Supporting the development of a series of animations that have now been completed and are now available on QuiHN's YouTube Channel. Animations delivered over the year included topics such as Neuroplasticity, Hep C Peer Heroes, Hep C Prevention and Treatment, QuiHN Service, MAISE topics, etc.
- Providing QPAMS support to OST clients and education to staff on new OST medications, and other OST issues (e.g., pain and substance use, lack of options for treatment, and stigma). Between 15 to 20 occasions of service are provided per month to clients on the Qld Opiate Treatment Program (QOTP) and other individuals seeking advice and support during this reporting period. This year saw additional support provided around the implementation of QSCRIPT and increased demand for support by individuals due to the reduction in prescribers across Qld.
- Participation in the working group on the development of the new Opioid Treatment Guidelines, facilitated by Qld Health.
- Ongoing support to QuiHN's social media channels over the year. Social media has continued to communicate with clients regarding service delivery changes, drug warnings, promotion of QuiHN activities and events, relevant community events, and key dates.



Image – Support Don't Punish Day

## ABILITY TO SELF-SUSTAIN

### Outcomes: Diverse funding streams and organisational growth

Over the course of the year, the organisation managed 18 funding contracts across State via Queensland Government and Queensland Corrective Services, the Federal Government via Primary Health Networks (PHNs) and Medicare, and private sources. An example of some of our newer activities is outlined below.

# HARM REDUCTION SERVICES

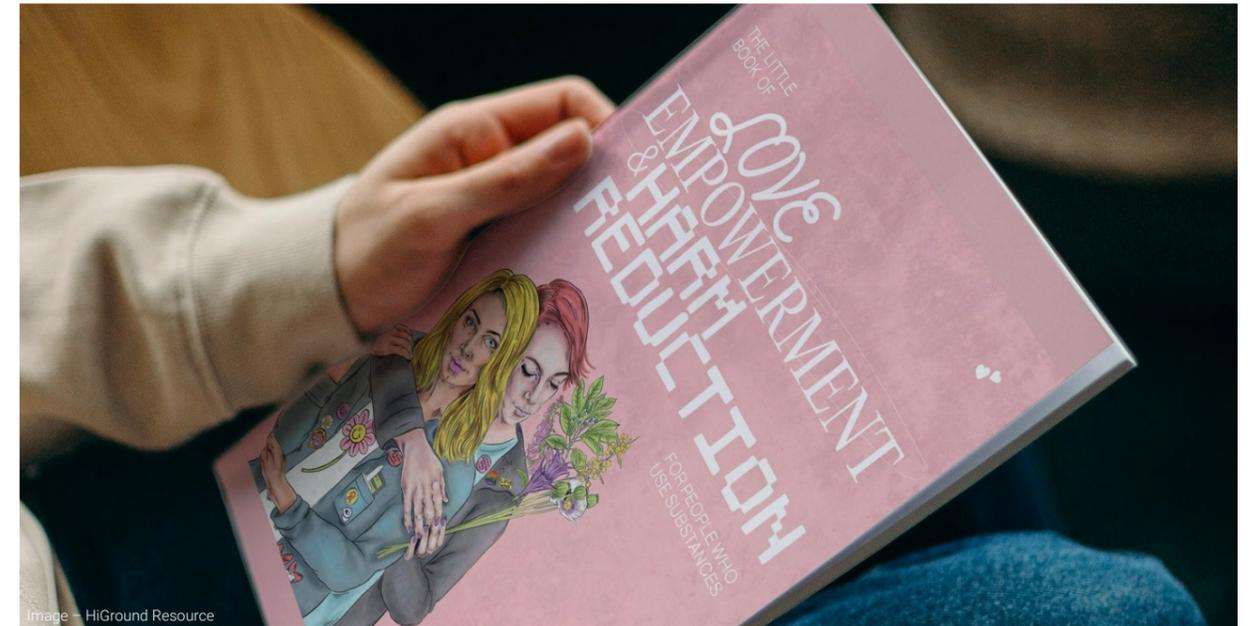


Image – HiGround Resource

## Additional Clinical capacity

QuiHN's Hepatitis C Treatment & Management Program (TMP) increased its clinical capacity during this past year with an additional Nurse Practitioner. This role is based out of the QuiHN Sunshine Coast office offering Hepatitis C testing and treatment, Sexual Health checks among other clinical initiatives. This new position complements the existing Nurse Practitioner and Harm Reduction staff. Telehealth options are available to Townsville to assist in broadening access.

## The Australian Injecting and Illicit Drug Users League (AIVL) Grant

QuiHN & QuIVAA worked in partnership on a small grant administered via AIVL through the Blood Borne Virus (BBV) and Sexually Transmitted Infection (STI) Implementation Activity Grants Project. This project focused on increasing Naloxone access for People Who Inject Drugs (PWID) and those likely to witness an overdose. The project has been coordinated by an experienced Peer Outreach Worker dedicated to providing overdose education and Naloxone to those at risk of overdose in identified areas of

need. The position is also responsible for the referral into other vital services, including, but not limited to, QuiHN's TMP for HCV testing and treatment where required, as well as other education and training opportunities focusing on reducing harms associated with drug use. QuiHN also has numerous referral points, ensuring PWID/PWUD receives smooth access to other services and programs as required. This project has enabled an increase in people's knowledge around overdose and naloxone, in addition to increased amounts of Naloxone being distributed throughout our target populations.

## Eliminate Hepatitis C – EC Australia Campaign

During this period, EC Australia and QuiHN worked in partnership on the "It's Your Right" Hepatitis C Treatment Campaign. The campaign has enabled increases in our target populations for HCV testing and treatment. The campaign took place across four Qld locations, Townsville, Sunshine Coast, Brisbane, and Gold Coast, and included:

- street advertising across multiple channels
- peer outreach/engagement

activities to increase conversations about hep C treatment and links with trusted services

- merchandise giveaways to engage and promote campaign messages
- financial incentives for the testing and treatment pathway
- online video series to share personal stories about treatment

## National Safety Quality Health Standards (NSQHS)

The HCV TMP has successfully achieved accreditation through the National Safety Quality Health Standards (NSQHS) during this reporting period

## TMP Tele-Health Evaluation

Negotiations continued with Eliminate C (EC) Australia, the Burnet Institute, and Queensland University of Technology (QUT) to evaluate and fund travel and accommodation and evaluation expenses related to a proposed outreach and telehealth Hepatitis C treatment model to Mt Isa, Townsville, Rockhampton, and Wide Bay areas. This has progressed and will continue throughout subsequent reporting periods.

# THERAPEUTIC SERVICES

## Qld Corrective Services

The reputation of our Far North Queensland group and counselling programs is growing from strength to strength. At the end of the year, we were asked to provide many more group programs for the coming year. In addition to the moderate intensity 42-hour therapeutic group, we will be providing shorter 12-hour and 16-hour groups along with a 100-hour therapeutic group program in The Townsville Women's Correctional Centre.

## The Psychiatry Support Program 2021/2022 Update

Throughout the last year, QuIHN Counsellors and medical staff identified clients who would benefit from this program and referred them to local psychiatrists. Brokerage funding was used for access to specialist psychiatry consultations. Some clients accessed follow-up consultations in addition to initial consults. QuIHN Gold Coast paid for some sessions in advance with a psychiatrist that clients reported positive experiences. This prepaid amount lessened the administrative burden of billing QuIHN and made the process seamless for the client.

Some regional offices also employed local psychiatrists to continue in consultation roles. In the Sunshine Coast and Brisbane locations, a local psychiatrist attended monthly case conference sessions with the therapeutic teams and was available outside of these times for further advice and support. In addition to this, another local psychiatrist made herself available at the Sunshine Coast QuIHN office to see clients with the QuIHN Dual Diagnosis Therapist in attendance. The therapist could support the client but also be brought in as part of the treatment for the client.

The expansion of the program into the second year and the move away from strictly a telehealth approach has been beneficial. It would be great for QuIHN and other like services to be able to provide a version of this program moving forward. The trial was a success.

# BETTER ACCESS MEDICAL CLINIC

As a result of COVID-19 the clinic, like other clinics across Queensland, has continued to provide telehealth appointments. The clinic/GPs ensure patient safety and eligibility before providing Telehealth services. During this period 20% of all appointments were provided via telehealth, and the remaining 80% were delivered via face-to-face.

Reminder systems have continued, to support our patients with follow-up treatment, such as pap smear tests, mental health plan reviews, etc. Clinic strategies to reduce DNAs include reminder texts, cancellation, or rebooking of an appointment if a client indicates that they will not make the appointment. As a result of these enhanced systems, only 12.5% of appointments were marked as Did Not Attend. These DNAs, as per our procedure, were provided with a follow-up phone call to see if they would like to make another appointment, of which 94% of those made another appointment.

# CORPORATE SERVICES

## Sunshine Coast Purpose-Built Facility

During the year QuIHN continued work on progressing its plans to establish its purpose-built service facility on the Sunshine Coast. The organisation progressed with architectural building plans and submitted its Development Application (DA) to the Sunshine Coast Regional Council (SCRC) and responded to DA information requests. The existing building structure was also demolished over the year with the site now cleared and ready for construction. We expect a decision from SCRC on our DA in the first to the second quarter of the 2022/2023 financial year. QuIHN is working with Interite Health Care Solutions on the design, build, and construction and Mecone for our Town Planning. While there have been delays in the project timelines, we are still on track for the completion of this project before August 2023.

## Queensland Mental Health Commission (QMHC) Putting Together the Puzzle

Towards the end of this reporting period, QuIHN has been funded by the Queensland Mental Health Commission (QMHC) to deliver the "Putting together the Puzzle" training package across Queensland. "Putting together the Puzzle" is a training package focused on reducing and challenging the stigma and discrimination experienced by people who inject drugs (PWID), people on opioid substitution programs, and people affected by hepatitis and other blood-borne viruses. The training has been run in a variety of settings since 2014, and uses real-life insights, interactive discussions, and lived experience facilitators to explore attitudes and behaviours towards people who use drugs. It aims to improve the health outcomes and experiences of people who use drugs in health and community settings.

# HARM REDUCTION SERVICES

**EVIDENCE CREATED THROUGH RESEARCH AND EVALUATION INFORMS PRIORITIES & TRANSLATION INTO PRACTICE.**

**Outcomes: Demonstrate sector leadership through the development and sharing of high-quality research and translating research into practice.**

Over the year the organisation has been involved in a range of research partnerships that have informed our priorities and practice.

## University of Queensland (UQ) HCV TMP Partnership

UQ finalized evaluation reports for both the Hepatitis C Treatment Management Program (2016 – 2021) and the Hepatitis C Prison Transition Service (2019 - 2021). These evaluation reports will assist in planning for future service delivery and allow for reflection on current practices.

## QLD Sexual Health Research Fund Partnership – Harm Reduction Services for Indigenous Australian People Who Inject Drugs (Project)

QulHN is a key partner in this research project with the University of Queensland, Queensland Aboriginal and Islander Health Commission, and Youthlink (Cairns) aiming to conduct a full suite of point-of-care tests (Hepatitis C, Hepatitis B, Syphilis, and HIV), a survey, and optional interview. Local procedures have been developed for the conducting of all point-of-care tests. Fieldwork commenced during this reporting period (October 2021) at QulHN Brisbane. QulHN Townsville will be next with their fieldwork due to commence in April 2022. Outcomes and other key findings will be provided to the QulHN Board during the post-research period.

## UNSW Stigma Indicator Research Project

QulHN in partnership with UNSW surveyed QulHN NSP from Mon 8th Nov to Fri 19th Nov entitled "Stigma Indicators Monitoring" with a focus on stigma and discrimination. Results from the survey will inform ways that we can reduce stigma and discrimination toward people who inject drugs. Participants were asked to complete an online survey that took approximately 15 minutes to complete. All participants received \$20 to complete the survey. Results from the survey are to be reported in subsequent reporting periods.

## Eliminate C Australia

The Eliminate C Australia Hepatitis C Peer Project was completed in December 2021. The evaluation of the project was completed and submitted by the University of Queensland. The evaluation report and QulHN activity report were well received by the ECA team with additional support provided for the promotion of the need to increase funding for peer positions highlighted in an upcoming article to be published in Croakey Health.

## Australasian Viral Hepatitis Conference

Staff presented and attended the Australasian Viral Hepatitis Conference in May 2022. Presentations included:

- An overview of the implementation of QulHN's Hepatitis Treatment Management Program
- Implementation of QulHN's Hepatitis C Prison Transition Service
- Guest panelists on the Stigma and Discrimination forum
- Guest speakers at an industry-sponsored event as part of the conference

## TMP Tele-Health Evaluation

Negotiations continued with Eliminate C (EC) Australia, the Burnet Institute, and Queensland University of Technology (QUT) to evaluate and fund travel and accommodation and evaluation expenses related to a proposed outreach and telehealth Hepatitis C treatment model to Mt Isa, Townsville, Rockhampton, and Wide Bay areas. This has progressed and will continue throughout subsequent reporting periods.

# CORPORATE SERVICES

Client engagement practice is informed by the latest research through Stretch2Engage. The Engagement Officer is connected to the relevant networks – Health Consumers QLD, IAP2, Enlightened Consultants, and others to ensure the practice is up-to-date and evidence-informed.

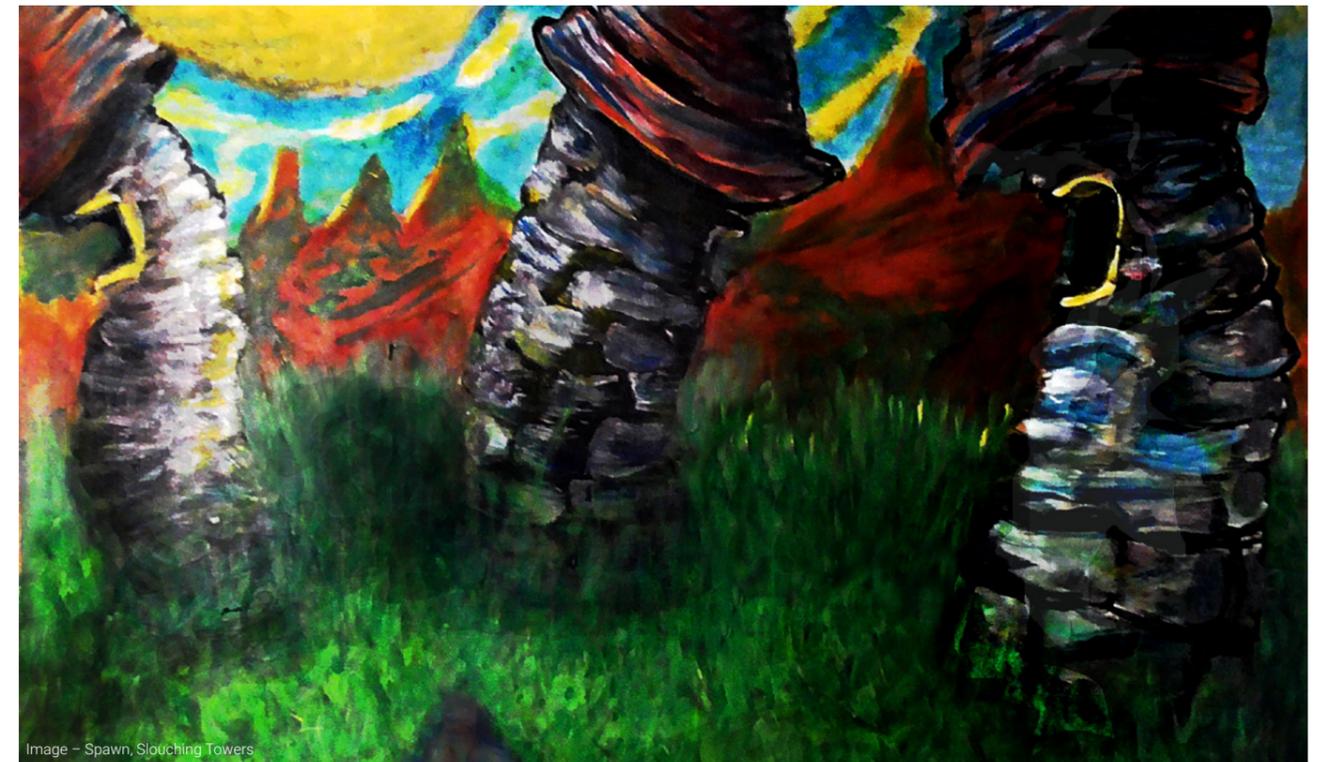


Image – Spawn, Slouching Towers

# HARM REDUCTION SERVICES

**PWUDS ARE RESPECTED PARTNERS IN SERVICE DESIGN AND GOVERNANCE.**

**Outcomes: Peer-led practice is embedded in all service design, planning, and evaluation aspects of our work**

## QulHN Peer representative on ASHM Forum

Peer harm reduction staff member is a new participant representing QulHN in the Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM) National Hepatitis C Online Forum targeting Homelessness, AOD, and Mental Health settings.

## Peer Naloxone outreach worker

A new Peer Naloxone worker proposal was successful during the reporting period. QulHN in partnership with QulVAA was successful in its bid to secure funding for the recruitment of a Peer Naloxone worker on a Permanent Part-time (PPT) basis, 2-day per week for 12 months.

## National Hepatitis C Campaign

Our Peer Harm Reduction Worker has been leading the charge for Queensland and the implementation of the Queensland campaign "It's Your Right", a peer-led and designed campaign. Further details on this project have been provided previously in this report.

# THERAPEUTIC SERVICES

## Client Satisfaction

For the reporting period (1 Jul 2021-30 Jun 2022), QuIHN's Therapeutic Services continued to receive high client satisfaction scores. For Counselling and Case Management Programs the Satisfaction score was 97% on average.

Group feedback was also strong for these programs. For the categories of relating, goals and topics, approach, and overall, the average score was 9.12 out of 10.

## Harm Reduction and Client-Centred Practice

People who use drugs are at the center of the Therapeutic Services provided by QuIHN. Collaborative treatment plans are agreed upon by the client with input from the counsellor. The updated Counselling Guidelines will be developed into a training/induction package for new staff.

Clients continue to be placed front and center in QuIHN's Therapeutic Services programs. Collaborative Treatment Plans drive the therapeutic process where clients decide on the content and approach taken in sessions. These are regularly reviewed, and adjustments are made. Client outcomes and satisfaction is collected with consent throughout their time with the service and is used to guide future sessions. Clients are made aware of the ease with which they can change therapists if they want to for any reason whatsoever.

## Client Management System Database

During the year 2021/2022, QuIHN Therapeutic Services developed a new Client Data Management System used for capturing all the client demographic, outcome and case note data. Driving this development has been a desire to reduce the amount of 'paperwork' that a client must do when entering Therapeutic Services. Fortunately, funding bodies seem to be more aware of this potential stress point and have responded accordingly by simplifying what they want to know above and beyond the mandatory NMDS. The new database was launched in June to be fully operational by July 2022. Staff will be working closely with clients in reviewing any changes made and feedback will be sought at key steps along the way.



Image - Burleigh Team on IOAD



Image - Christmas in Brisbane



Image - Homeless Connect Gold Coast



Image - QuIVAA at Winter School

# MEDICAL CLINIC

The Practice Manager is an active member of the F2A committee. The aim of this is to work in conjunction with the programs, to trial activities that support consumer engagement within the clinic and increase feedback. As a result of this work, the wording has been changed on several documents to make it more acceptable and welcoming to QuIHN clients.

# CORPORATE SERVICES

The Client Advisory Group (CAG) supports service-related policy/procedures and process/system development through engagement with the client representatives and is facilitated via a minimum of quarterly meetings across all regions. This group is chaired by the CE and provides a formal mechanism for ensuring that clients contribute to the development and improvements of services, ensuring that they meet the needs of the community. Such activities have included but are not limited to:

- Regional meetings attended by client representatives across QuIHN regions.
- Development of QuIHN website – participation with clients for evaluation and feedback.
- Client representatives are invited to be a part of QuIHN's recruitment processes, with a client representative sitting on most interview panels.
- Client representatives are part of the TRACKS committee and have contributed to this magazine.
- One client representative is working with the Reconciliation Action Plan (RAP) Working Group.
- Client Representative (GC) attended Harm Reduction Team Days to present to staff her role at QuIHN, her learnings, and experiences as the client representative, what she has been involved in, and how we can support client representatives across the regions.
- Client representatives have contributed to the development of an online QuICS.
- Client representatives have continued to contribute policy review and terminology.

Due to QuIHN experience in engaging and working with PWUDs in planning service design and governance, QuIHN has facilitated the following:

- Ongoing facilitation of the Peer Workforce Group monthly and supports peer workers (identified and non-identified positions) across the regions.
- Individual peer support/supervision provided to peer workers as required.
- Ongoing support provided to QuIHN's existing client and peer representatives – liaison, advocacy, support to engage, and information regarding engagement opportunities.
- Ongoing work with the AIVL national network around drug warnings/alerts and creating a better / faster process/system around identifying dangerous/risky batches of drugs and informing the community. QuIHN has been funded for involvement in this project, titled Prompt Response Network (PRN) funded by NCCRED.
- Ongoing training is provided to client representatives. Some training throughout the year has included NSP authorisation, client representative skills, access to AOD online training, understanding of welcome to country, etc.
- Client Engagement officer providing support to staff around engaging client representatives and seeking broader client feedback across the local regions.
- Mud Maps clients contribute to the themes and topics of the group, our collective rules, and values, and occasional activities and learnings.



Always a calming session



# HARM REDUCTION SERVICES

KNOWN FOR STRONG GOVERNANCE AND BEING A VALUED PARTNER.

Outcomes: Collaborative and positive partnerships with members, supporters, funding bodies, and stakeholders that advance our goals

## TMP EAP

The Treatment Management Program Expert Advisory Panel has undergone membership renewal. We have received a resignation from Professor James O'Beirne, Hepatologist at Sunshine Coast University Hospital who is to be replaced by Dr. Enoka Gonsalkorala (Gastroenterologist from Caboolture Hospital). All other members have renewed.

## Point of Care Testing (PoCT) Partnerships

Through point-of-care testing, we have established new and consolidated existing collaborative partnerships mentioned above. We continue representation on the National Hepatitis C Point of Care Testing project committee and the National Needs Assessment and Steering Committee: Public Health Literacy and Hepatitis C Education in the Australian Prisons.



## ASHM Prison Forum Committee

Three staff members from QuIHN's Harm Reduction Programs were invited to sit on a newly established committee. The forum aims to bring together health professionals working in Queensland prisons and those providing in-reach or telehealth services, to discuss progress in HCV treatment programs and opportunities to strengthen care during the transition to the community. In attendance are our Prison Transitions Worker, Harm Reduction Coordinator, and Peer Harm Reduction Worker.

- Continued participation in the National Hepatitis C Point of Care Testing Project run by the University of New South Wales and Flinders University.
- The quarterly TMP Expert Advisory Panel was held in February 2022 with positive feedback received from the members. We welcomed Dr. Enoka Gonsalkorala as the Specialist advisor on the panel to replace Dr. O'Beirne.
- In March 2022, QuIHN was invited to present at the National Point of Care Testing Roundtable on the successful implementation of point-of-care testing in the NSP setting.
- QuIHN's Prison Transition Worker, in partnership with Hepatitis QLD, Kombi Clinic, and Prisoner Health attended Woodford Correctional Centre for 1 week to provide HCV PoCT to as many of the prison population as possible. 691 men were tested with 181 returning a positive HCV result representing a 26.1% positive rate. Most of these men have already been scripted.
- Continued participation in the National Hepatitis C Point of Care Testing Project run by the University of New South Wales and Flinders University.
- The quarterly TMP Expert Advisory Panel was held in May 2022. We welcomed Dr. Enoka Gonsalkorala as the Specialist advisor on the panel.
- QuIHN TMP has been invited to partner on research proposals with the University of Queensland.
- QuIHN TMP has been invited to submit a proposal for expansion of the Prison Transition Service by Pharmaceutical Company Gilead Sciences.
- QuIHN has invited to co-author a **Croakey Health article on the QuIHN Hepatitis C peer project**, published in June 2022

# THERAPEUTIC SERVICES

## QuIHN Therapeutic Services

Continued to enjoy positive and productive working relationships with its range of funding bodies and regional network groups. QuIHN staff are valued members of these networks and are often asked to contribute expertise on pertinent issues in the area. Homelessness continues to be the biggest social issue impacting clients. It is particularly dire now in the Sunshine Coast and Gold Coast. This issue permeates every other conversation around health and well-being.

## The Psychiatry Support Program Research Evaluation

This project was a new initiative for QuIHN, made possible by the Immediate Measures Grant. As such, we were keen to establish the benefits and limitations inherent in the project. QuIHN partnered with the University of Queensland to evaluate the effectiveness of the project. UQ gained ethics approval to conduct interviews with staff, clients, and the Psychiatrist about their experiences.

They also investigated client outcome data and tracked changes in clients' mental health, substance use, and well-being measures. The report of the research evaluation has now been finalised. Key findings included:

- All clients showed improvement over time in their symptoms of depression and stress and their self-esteem.
- However, there were no significant differences between those clients whose cases were discussed in the case conferences compared to those clients whose cases were not discussed in these conferences. The measurement of change is limited by the small sample size.
- From pre- to post-intervention, staff members were less willing to implement treatment suggestions, but their knowledge about medications associated with the treatment of mental health conditions increased significantly.
- Based on the interviews, most clients and staff members reported some positive changes in clients' well-being and functioning and some improvements in staff confidence and knowledge of dual diagnosis and treatment. Several suggestions were provided to maintain the case conferences over time, particularly related to delivery, structure, and resources.

## Community Withdrawal Program Evaluation

- Will be evaluated by the University of Sunshine Coast. There will also be a research project attached to this that will be undertaken early in the year 2022/2023.

# MEDICAL CLINIC

Towards the end of the reporting period, QuIHN engaged an external consultant (Synapse Medical Services) to assist with an external independent review of the clinic to:

Assist us to understand our current billings and plans for future improvements

Provide recommendations and support to implement future improvements regarding billings

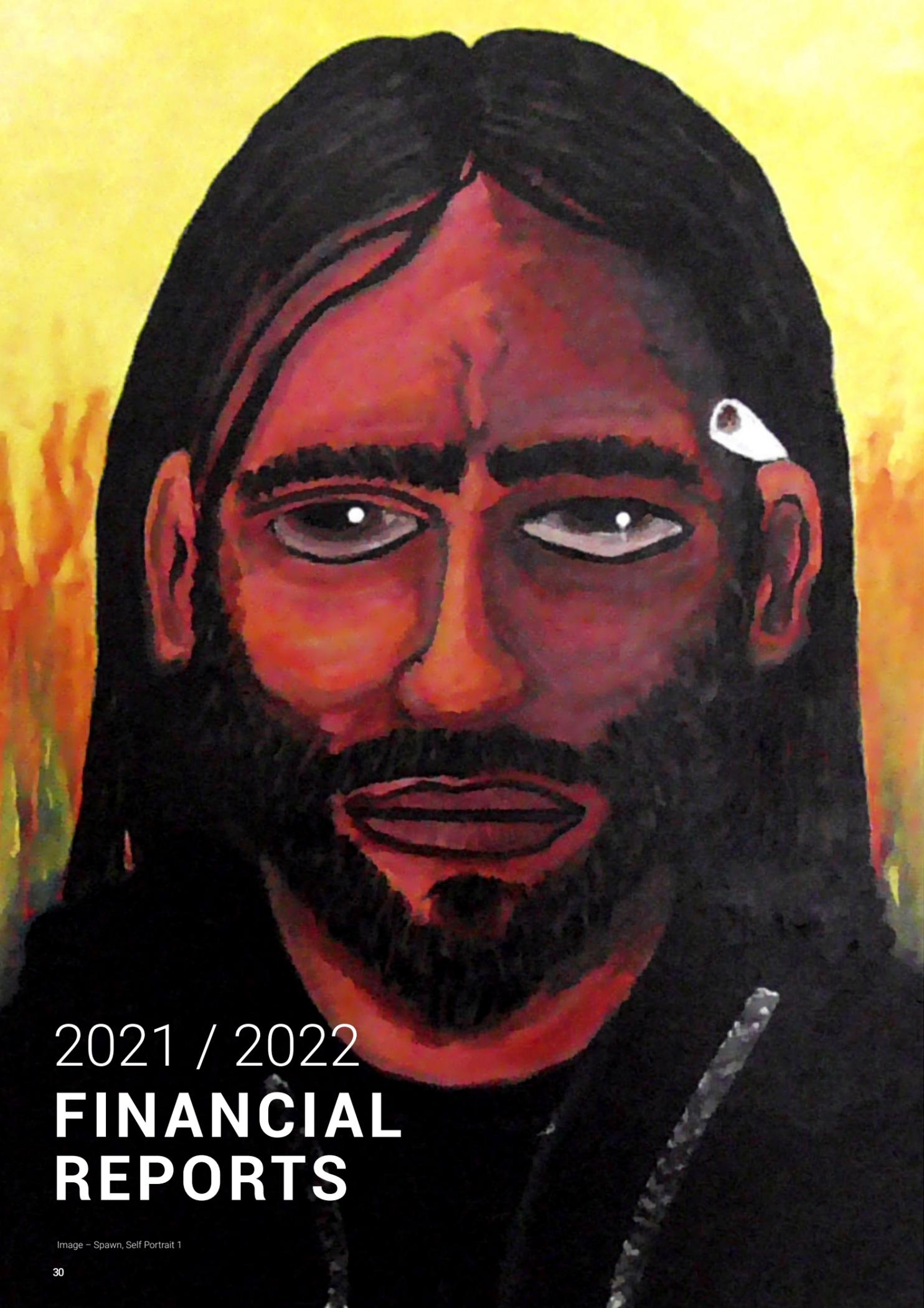
Review our clinic's processes relating to billing and identify opportunities for improvements

Work has commenced, with the consultants analysing one year of a dataset of MBS claims, and undertaking an online GP survey, to be followed up by one interview. The final report is expected to be received in September 2022.

# CORPORATE SERVICES

QuIHN is known for its experience as a leading agency in the AOD sector and is seen as a valued partner in engaging with consumers. A range of sector meetings have been attended this year, some examples include the following.

- Membership of the BN PHN AOD Partnership Advisory Group
- Membership of the GC PHN AOD Partnership Advisory Group
- FNQ Community of Practice
- Membership in the Sunshine Coast Alliance
- Participation in the BN Lived Experience Expert Group
- Participation in Client Engagement meetings with Brisbane South AOD Collaborative. The purpose of this group is to obtain sector-wide client engagement
- Attend the Community of Practice – Lived Experienced / Peers project facilitated by Brook RED – ongoing.
- Participation in My Choice Project – OST choice – meetings with INSHU and stakeholders



# 2021 / 2022 FINANCIAL REPORTS

Image - Spawn, Self Portrait 1

## FINANCIAL REPORTS

### FINANCIAL POSITION



### FUNDING SOURCES



### REVENUE ALLOCATION

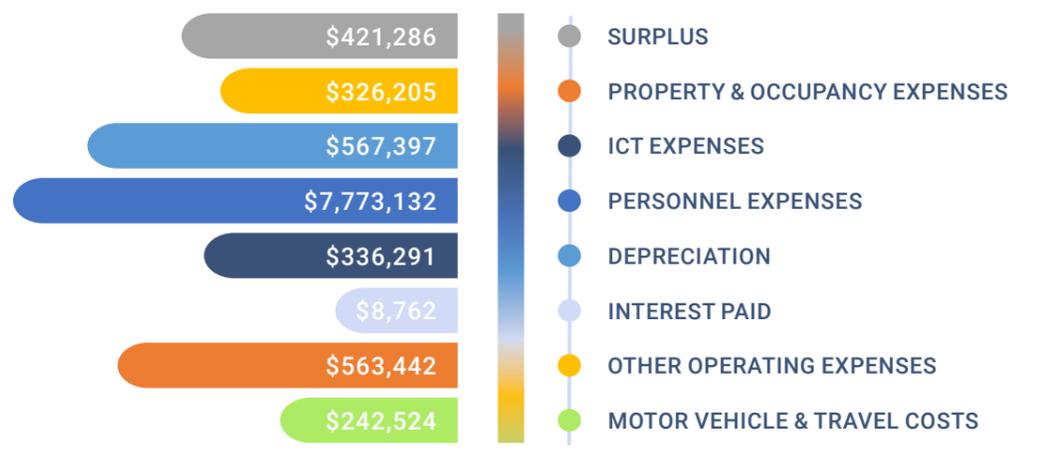




Image – Liz Challis, Great Barrier Reef

