

A safe place for change

Brotherhoo

ANNUAL REPORT 2021

TABLE OF CONTENTS

The Glebe House Story	3
Mission Statement	4
Chairman's Message	6
Manager's Message	7
Quality Assurance	9
Summary of Treatment Outcomes	10
Client Statistics	12
Health and Wellbeing	17
Outreach Program	18
A Client's Journey	19
Treasurer's Report2	20
Committee's Report	21
Auditor's Report2	27
Service Networks	34

A safe place for change

The Glebe House Story

Glebe House opened on Glebe Point Road in 1974 as a halfway house for men exiting custody. Following prison riots and in recognition of a lack of support for those leaving prison, the house provided transitional accommodation for this highly marginalised group.

In 1993 the service moved to its current location, moving into two converted Victorian terraces, one of which, ironically, had been a hotel. The heritagelisted building has been home to scores of men since.

Over the past 28 years a structured therapeutic program has been developed to meet the complex needs of the client population, which is now divided between those coming directly from prison and other men referred from the community. This strategy, along with the homely environment, supports a therapeutic community that is far removed from jail or other institutions.

Glebe House has become a well-respected service set in the heart of a diverse and inclusive local community. Its clients are able to start to turn their lives around, becoming productive members of society.

Glebe House acknowledges the Gadigal People of the Eora Nation as the traditional custodians of the land on which our house stands. We wish to pay our respects to Elders past and present and to all Aboriginal people.

MISSION STATEMENT

Our Vision is supporting men to realise their full potential, creating, and sustaining a safe place for change.

Our Purpose is to provide an inclusive, personalised service where men are treated with compassion and respect.

Our Mission is to provide a therapeutic community that helps men transition to a life free from addiction.

Treatment assists clients to

- Address their addiction issues
- Develop healthy relationships
- Build the capacity for independent living
- Reintegrate as productive members of the broader community

Glebe House provides treatment for men with complex needs, including substance dependency, secondary addictions, dual diagnosis, and complex trauma, including physical and sexual abuse.

The program is holistic in nature: Yoga, Pilates, Art therapy, sport, recreation, and social activities are included in the structured timetable, as well as the requirement for clients to attend two 12-Step fellowship meetings per day.

In addition, psychological counselling helps clients explore their underlying emotional issues and develop selfawareness. Group work addresses negative thinking and behaviour and enables men to better cope with emotions and the challenges of daily life.

Glebe House clients commit to a structured program of recovery, reinforced by an immersive experience in the 12-Step fellowships, working with a sponsor, developing vital support networks. It is a design for living clean and sober.

Glebe House for many men, is the first real alternative to a life of addiction and crime. In response to the level of trust and freedom granted, the men establish a personal program of recovery for themselves, taking on responsibilities, and enjoying hope for a better future.

The Glebe House family provides ongoing, open-ended support for men in recovery. The Outreach Community continues to grow, with men sharing their lived experience, becoming role models for their peers. Glebe House enables men to build healthier relationships, to give and receive love. It is a place for connection and community.

Our Values

Encouragement: Encouraging clients to be accountable to themselves and those they love, for their personal actions and the outcomes in their lives.

Compassion: All clients are treated with compassion, kindness and respect and supported without judgement.

Accountability: We are accountable to our clients through evaluation, review and improvement of service delivery and we encourage our clients to be accountable to one another.

Collaboration: We collaborate with other communitybased services to ensure our clients are adequately supported throughout all stages of their recovery.

Lived experience: We pride ourselves on employing staff with lived experience of addiction and imprisonment and clients are continuously involved in service development, review, and improvement.



MESSAGE FROM THE CHAIRMAN

Once again, Glebe House has assisted many men to transition from the troubled life of addiction to lead happier, more useful lives and become part of the Glebe House family. As 2021 draws to a close we see at last an opportunity to slowly return to aspects of the Glebe House experience which had been curtailed or modified because of COVID. However, throughout 2021 once again, our activities in all areas were impacted by COVID restrictions. Despite these distractions, I am pleased to report the performance of Glebe House has been outstanding in both operational and strategic achievements during 2021.

The results in our Annual Report indicate strong performance in both residential completion rates and participation in our Stage 2 program. These are very encouraging as our experience has shown that these measures are a significant indicator of client success. The increased effectiveness of Stage 2 after its initiation some 5 years ago as part of our long-term strategy is particularly encouraging. Our ASES Quality accreditation took place in 2021. This was another significant strategic initiative which involved detailed and painstaking work from both Staff and Board, with external support, over the last 5 years. We are confident the procedural and cultural changes implemented during this journey have substantially strengthened Glebe House.

Once again, we are grateful to our funders for their continued support in 2021. The NSW Department of Communities and Justice and the Commonwealth Department of Health continued to support us financially and operationally. Our ongoing dialog with these agencies allows us to improve our partnership to ensure mutual success. We were especially grateful for additional support during COVID for our business continuity planning.

Special thanks to David Mcallister and his team again this year. Their dedication to the client experience and substantial contribution to the completion of our Quality Accreditation in a challenging year is especially appreciated. We acknowledge this has required additional hours and discretionary effort from all staff and we greatly appreciate their good will and flexibility.

I also commend the active contribution of our Board during 2021. We met frequently, and mostly on-line, through 2021 to address strategic and governance issues as well as routine business. Our Board members continue to volunteer their services to Glebe House. Their diverse skills and dedication contributed significantly to the operation and sustainability of Glebe House

The results in this report speak for themselves. Once again, Glebe House has assisted many men to transition from the troubled life of addiction to lead happier, more useful lives and become part of the Glebe House family.

On behalf of the Board, it has been a pleasure to be of service once again.

James Beattie Chairman

MANAGER

We continued to operate throughout 2020-2021 evaluating and moving service delivery online in most cases with limited disruptions around the transitioning periods. Over the last 12 months we have learned from our experiences of Covid-19 pandemic that it can change and vary and so can we. Through continued quality improvement, the re shaping and enhancing the service delivery has enabled us to deliver a raft of service variations to clients in both stages of the program whilst meeting and in some instances exceeding our targets.

continued We to operate throughout 2020-21 evaluating and moving service delivery online in most cases with limited disruptions around the transitioning periods. Work Health and Safety, including risk assessment and reviews, are paramount in the operations of the service and continue to be discussed in our weekly team meetings with regular reporting to the Board.

Client intakes have continued with increased safety procedures introduced for all new admissions requiring testing on route and isolated from community in designated isolation room until test results returned, following recommendations from NSW Health and the Federal Government. Referral processes and pre admission waiting lists have been enhanced to include online check-in groups encouraging connection with Clients and the service identifying any gaps to admission pathways.

We were able to support 30 residents in program this year with 24 completing the 12-week program, further support was provided with all 24 housed into stage 2 program at some stage with 16 of those continuing to be supported today. The service accepts clients directly from custody, with beds part-funded by Corrective Services NSW, or from the community, with clients selfreferring (typically from private hospitals and other institutions following detox / stabilisation) or referred by other AOD services (typically 28-day programs).

Clients entering treatment from custody are generally referred between 1-6 months prior to release. Admission dates are dictated by the criminal justice system, including parole board direction. We admit men directly from prison on the date of release and ensure their abstinence from all substances via urinalysis prior to release. Pre-release engagement is undertaken by the service via weekly check-ins. Extensive phone assessments determine the appropriateness of the program to inmate needs.

Due to the demands of the criminal justice referrals, admissions from the community are expedited around prison referrals. Our main community agency partner is Foundation House, and we aim to take clients directly from completing this program, thus providing a continuum of treatment.

Clients are also admitted after initial primary treatment at private hospitals or other AOD services, including those supporting cessations of pharmacotherapy. Waiting times for treatment for men admitted from the community range from 2-8 weeks. Wait-listed clients are required to check in weekly to maintain their place on the list.

We have had a significant IT upgrade over the past 12 months enabling us to explore the virtual world and adapt our program utilising telehealth, online conferencing and delivering services to our Outreach clients and receiving services for our Residential Clients.

Due to increased demand and in collaboration with our partners at Metro Community Housing, Glebe House has expanded its Stage 2 program by 20% this year where we now support 16 men in 5 properties across 4 suburbs. Clients are supported to engage in further education, training, and re-entry into the workplace. Participation in social activities is fostered as men reintegrate into the broader community and develop healthier strategies for independent living and social inclusion and connection.

As indicated in our 2021 - 23 Strategic plan we are embarking on building stronger connected pathways for men whilst on the waiting list prior to entering the first stage of the program, with the focus on catching referrals that have in the past slipped through the gaps. We have always envisioned a structured day program and additional funding would increase treatment outcomes over a longer term for more clients.

embraces The service and encourages cultural diversity and inclusion, this is reflected in our policies and procedures, including staff training. Glebe House considers a trauma-informed care response as crucial to ensuring Indigenous clients are not retraumatised by service practice. This means all staff are trained in culturally sensitive practice and are aware that successful engagement with clients is dependent on understanding the impacts of history, the presenting issues and responding to the individual needs of clients. The service works with indigenous services where possible to provide cultural connection. 12% of clients identified as ATSI in the last year this represented a 50% increase from 2018/19 and up 2% from this time last year. Additionally, 9% were from CALD backgrounds, reinforcing the inclusive nature of the service.

Our work would not be possible without the support of our bodies; Department funding of Communities and Justice (DCJ), and the Commonwealth Department of Health (DoH), your support has impacted the lives of many. Our contact managers Rhonda Hodgins (PACE), Myrna Chaar (DCJ) and Andrea Stephens (DOHA) We also would like to thank the Network of Alcohol and Other Drug Agencies (NADA) and all the other specialist services who work alongside us to support the men from Glebe House.

David Mcallister Manager



QUALITY ASSURANCE

AUSTRALIAN SERVICE EXCELLENCE STANDARDS (ASES)

In October this year, Glebe House underwent an audit for Quality accreditation through The Australian Service Excellence Standards certificate level (ASES) and have attained Accreditation. This being a culmination of several years of hard work towards service excellence and continued quality improvements.

HIGHWIRE GROUP

The engagement of consultant Maree Davidson of Highwire group in June 2020 has been an integral part in our accreditation process with in-depth policy and procedure reviews, assisting with the development of strategic and operational plans, risk reviews and business continuity plans.

Congratulations Glebe House on this great result. 100% of the 99 ASES requirements were met!

"I have been working with the Australian Service Excellence Standards quality accreditation framework as an assessor for 10 years. I know that achieving 100% the first time is incredibly hard. In fact, it is rare. But then, so is Glebe House. I feel very fortunate to have worked alongside the governance and leadership team as a coach for the past 18 months through their preparation for ASES accreditation. From day one I could tell that Glebe House was as authentic and focussed on their approach to quality as they were on providing client centred support. Exactly the type of organisation we love to work with"

A special thanks from Highwire to David Mcallister for his support of other organisations going through ASES. David was always a generous contributor in our monthly ASES collaboration meetings.

With their strong learning culture, dedicated leaders and passionate staff, Glebe house will continue to go from strength to strength.

Go Team!

Maree Davidson

Managing Director – Highwire Training and Development Pty Ltd

CLINICAL SUPERVISION

Geoff Minards continues in the role of external supervisor, with experience in relevant fields of practice. His individual sessions with each member of staff provide innumerable benefits.

This is a monthly conversation offering staff members the opportunity to ask questions about clinical issues, to discuss ethical matters, to reflect on personal strengths, and consider career and educational options. The process enhances confidence and promotes team building. In this regard, it is an integral part of Quality Improvement. Having regular supervision supports workers to reflect on stress levels and take appropriate action if the need arises, to consider how and why burnout occurs, and to maintain a healthy work/life balance.

"There is richness in these conversations that reflects the care and concern Glebe House, as an organisation, offers to its staff, and highlights the sense of pride and professionalism each staff member brings to their work."

- Geoff Minards

LIZ WILLIAM COUNSELLING SERVICES

Liz has been with Glebe House, providing psychotherapy for the men of Glebe House coming up to 12 years in February, and will leave the organisation to enter a well-deserved retirement in March 2022, Liz has helped in excess of 300 men in that time, working together to identify and change the thought and behavior patterns that can keep them from feeling their best.

By the time their done, they not only have solved the problem that brought them in but will have learned new skills so they can better cope with whatever challenges arise in the future. We thank Liz for her time at the service and we wish her the very best for her future.

My responsibility as a counsellor and psychotherapist rests on the client-centered model of Carl Rogers that offers unconditional warm regard for the client who is seeking change and an opportunity to explore the possibilities and potential for self-fulfillment. Carl Rogers' humanistic personality theory emphasizes the importance of the self-actualizing tendency in forming a self-concept.

In my practice, the relationship with the client is the primary element in an integrative approach that includes various other streams of counselling, including Cognitive Behavior Therapy, Schema Therapy, Family Systems Theory and Focusing Theory. Every client brings a deep vein of opportunity for personal and emotional growth that can be uncovered and explored with patient listening and quiet confidence in the context of the wider Glebe House Program.

There are several levels or goals imbedded in the counselling experience. Firstly, to explore, with respect and curiosity, the underlying narrative. Secondly, to access and develop that positive energy that exists in every one of us. Thirdly, to motivate a sense of enthusiasm for personal growth and emotional development.

The initial sense of freedom and well-being of early recovery is extended to embrace the work of active participation and personal commitment in the process and

personal management of change. Engagement with new ideas and attitudes, with respect for each client's individual circumstances and personal history, is discussed and encouraged. Focusing on the client's decision to seek recovery and rehabilitation, the counselling process offers the client an opportunity to trust the strict confidentiality of the counselling environment to uncover and understand schemas or patterns that are unhelpful and problematic and the opportunity to discuss and explore options and potential for a new and positive approach to situations and circumstances that arise in early recovery and beyond.

Encouragement to explore new ways of responding to old situations and new circumstances is a significant steppingstone in the counselling process and offers greater personal autonomy and successful transition into the community. The counselling session provides the opportunity to open up and feel safe and respected to identify feelings and ideas that are sources of emotional confusion. It has the important function of disclosing emotional vulnerability and developing self-awareness. It also stimulates the desire for change and selfactualization and addresses issues of dependency and codependency.

Possibly, one of the most important aspects of the counselling session is to bring a sense of self-belief and confidence to the work of recovery. Focusing on the circumstances of the individual client and encouraging personal responsibility, clients are motivated to think in new and creative ways about aspects of their lives that will ensure unlimited possibilities for personal development and professional training.

My unconditional warm regard for each and every client that has come through the door of my little room at Glebe House is unwavering. You have demonstrated courage and quiet intelligence in your willingness to engage as openly and honestly as you could with the counselling process. You have shown me unfailing respect and kindness. Thank you for the privilege of being part of your lives.

Liz Williams

ENCAPSULATOR – DIGITAL TIME CAPSULES

The Encapsulator Time Capsule Program provides a therapeutic space for clients to record and document who they are today and deliver a message of love and hope to their future selves. Feedback has shown that the clients particularly enjoyed this experience and feel it is a great way to measure their progress.

SUMMARY OF TREATMENT OUTCOMES

FINANCIAL YEARS Summary of Treatment Outcomes	2018/19	2019/20 Covid-19	2020/21 Covid-19
Men in residence	29	27	30
Men in Stage 2	16	17	24
Aboriginal and or Torres Strait Islanders	6%	11%	12%
CALD Clients	24%	22%	21%
Program completion	61%	67%	80%
Program Duration 12 weeks = 84 days	64.37	64.59	78.96
Number of weeks in program average	9	9	11
Funded Partnership Initiative referrals	22	47	23
Funded Partnership Initiative admissions	6	6	5
Discharged Noncompliance	13%	15%	6%
Self-Discharged against advice	19%	18%	14%
Managed relapse with support in stage 2	1	2	3
Peer support / relapse prevention attendances	1188	1008	939
Stage 2 Housing support groups attendances	265	230	235
Referrals to other external services	85	83	102
Employed	18%	15%	30%
Engaged in Study or training	3%	2%	10%
Remained abstinent	32%	50%	72%
Reduced severity of distress Kessler K -10	20%	24%	25%
Psychological Health and Quality of Life WHO QoL -8 improved by	12%	24%	25%
Diagnosed mental health condition (CIMS)	62.1%	68.5%	67.9%

STATISTICS

The statistics included in this report are taken from the Client Outcomes Measurement System (COMS) data management system, The system provides measurement and reporting tools regarding client outcomes for both the agency and its funders. National Minimum Data Set (NMDS) data is automatically provided to the Department of Health via this system.

Every client admitted into the program develops a personalised case plan, which is subject to review throughout his stay and modified over time according to a client feedback process. COMS provides demographic and program delivery metrics, with further client outcome measures provided by the Kessler-10 psychological wellbeing assessment tool as well as the World Health Organisations Quality of Life and Quality of Health measures.



The COMS database is part of a suite of data systems used by Glebe House. Data on homelessness is collected through Family and Community Services' (FACS) Validata and CIMS databases. Referrals from custody for men admitted into program under the Funded Partnerships Initiative (FPI) are managed and reported upon for Corrective Services NSW (Dept. of Justice) through a dedicated portal system.

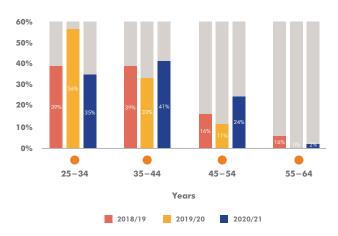
This year 41% of the client cohort were aged between 35-44 with a further 35% falling in the next age bracket 25-34 with 24% in the 45-54 bracket and 2% in the final 55-64 age bracket.

There has been a reduction on clients transitioning from prison into the service, due to several factors including referrals and Covid - 19. We are working with DCJ and the gatekeeper at Leichhardt Community Corrections to promote the service within the prison systems.

Most clients were referred from other AOD services. Glebe House remains an inclusive service and has always attracted clients from CALD backgrounds. This year 21% of men were from culturally and linguistically diverse (CALD) backgrounds, with only 79% identifying as Australian. 12% of those admitted for treatment this year identified as Aboriginal or Torres Strait Islander. The service acknowledges the effects of inter-generational trauma and colonisation experienced by indigenous members of the community and works with clients from this perspective to provide a respectful and supportive trauma-informed environment. Glebe itself is a culturally diverse and inclusive suburb, of course, which helps clients feel 'at home' in the neighbourhood. We have a wellearned reputation for our work with indigenous men and culturally sensitive approach to all program participants.

The demographic profile of clients presenting to the service over the last 3 years is reflected below

Table 1. Age profile



2018/19 – (average age 43.4) 2019/20 – (average age 38.3) 2020/21 – (average age 38.7)

Referrals

Table 2 illustrates the source of client referrals to Glebe House. While our funding agreement with the Department of Communities and Justice (DCJ) prioritises men exiting custody, we have again been disappointed by the conversion rates in respect of referrals vs. actual admissions. Analysis of referrals on the Department of Justice's, Funded Partnerships Initiatives (FPI) portal again reveals that only one in five became treatment admissions. Most referrals from the criminal justice system had to be rejected for a variety of reasons: inmates were withdrawn by Corrective Services personnel due to them securing alternative exit arrangements, were found to be ineligible according to our criteria, or were found to be using drugs, having produced positive urinalysis results. Some simply failed to arrive for admission. Unfortunately, as in previous years, several of these 'expected' admissions fell through 'at the last minute', leaving the service with a vacant FPI bed for a fairly significant time prior to reallocation, hence the poor 'admission from custody' results overall.

Awareness of Glebe House as a post-release service remains low among Corrective Services personnel working in the prison system this has been again identified from meetings this year with representatives from PACE, Leichhardt Community Corrections and Glebe House management team, together we are implementing changes including sharing promotional videos with parole unit managers.

Prison overcrowding and the prevalence of drug use in jail also impact referral processes. Urinalysis within the custodial environment was often not forthcoming and was ceased completely early this year due to Covid - 19 However, Protocols developed with parole units to expedite prisoner transfers to Sydney jails where possible, just prior to release from custody, has improved the likelihood of post-release treatment for some men leaving jail. But unfortunately, these have now been suspended due to Covid -19 outbreaks in the prison systems.

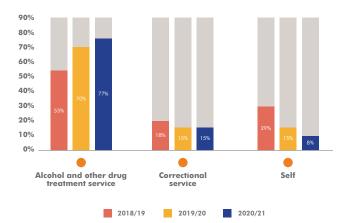
FPI admissions from corrections is the same as last year at 15 % with a further 8% of clients being granted parole but not counted in released from prison statistics instead choosing to engage with the service upon release not having required Med/High LSIR to secure a funded partnership initiative (FPI) placement. The continuation of a new case management system being introduced into jails will hopefully produce an increase in referrals over time, we are committed to working with the department to promote the service to these workers.

AOD services, including private hospitals accounted for most referrals to the program this year. Foundation House provided most of these referrals. (47%) Men seeking treatment from the community are placed on our waiting list. As there is a 30-day abstinence requirement for entry, many of these will undertake treatment at Foundation House before transitioning to Glebe House. Hence, a coordinated case management plan can be developed, which provides a continuum of treatment to the client.

Wesley Private in Ashfield is the largest referrer of all the private hospitals with (15%) followed by We Help Ourselves (WHOS) with (15%) of referrals, mainly from the Opioid Substitution to Abstinence Residential (OSTAR) program.

The service also accepts self-referrals these numbers appear down from previous years (8%) but are captured in the AOD service statistics. These may have been stimulated by a GP or word of mouth recommendation through AA or NA members. Evidence suggests that Glebe House continues to build a respected reputation within the 12-Step fellowships and is known as one of the few affordable, abstinence-based programs available in NSW.





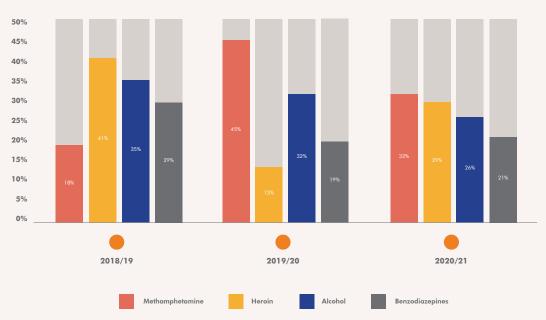


Table 3: Principal drug of concern



Principle Drug of Concern

Heroin was the most cited 'principal drug of concern' among our client population, with a 16% increase from last year. as shown in Table 3.

There has been a decrease of 13% in Methamphetamine as 'principal drug of concern' compared to last year figures. Of course, most program participants used multiple substances in addition to their 'preferred' substance as well as other compulsive behaviors (secondary addictions) including Gambling.

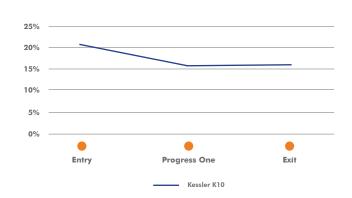
Alcohol was reported as the primary drug of concern for a quarter of the client cohort with 26% citing as 'principal drug of concern' this remains stable on last year's statistics but down 6% on 2019 most program participants used multiple substances in addition to their 'preferred' substance.

Data on risky behavior, which is collected from clients, indicated sharing of needles and other drug paraphernalia is occurring, Unsafe sex practices are quite commonly reported by clients, especially while intoxicated. Additionally, more than half the client population admitted to operating machinery or vehicles after drinking or using drugs. Part of the program at Glebe House is devoted to psycho-educational groups to raise awareness of risks associated with AOD use and provide harm-minimisation strategies for clients to use in future.

Glebe House remains committed to supporting clients who wish to cease smoking, restricting the habit to a designated outdoor area. Educational material is provided also. Some men switch from tobacco to 'vaping'. Although probably preferable to tobacco smoking, we are hesitant to actively promote this practice while an insufficient evidence base exists around its safety with recent legislative changes now requiring a prescription from GP.

We measure the effectiveness of the program using several tools which are included in the COMS application, which is self-completed by clients at various stages of treatment under staff supervision. Psychological health is measured by way of the Kessler -10 assessment tool. Aggregated scores demonstrated significant reductions in levels of stress, anxiety, and depression among the client population this year. The K -10 mean score on completion of the program was again 25% lower than the mean score on admission this year.

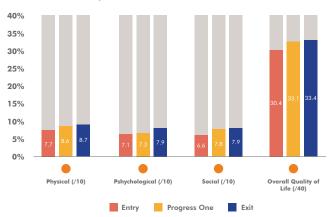
Table 4: Kessler K10



Further evidence of the program's efficacy is provided by data from the World Health Organisation's Wellbeing assessment tool, which is also administered during the program. When clients were asked to rate their quality of life, mean scores demonstrated an improvement of 10% from client intake to exit. A significant shift over a threemonth period. These measures align with positive metrics regarding program completion and the achievement of case management goals.

Quality of Life 2020-21





Once again, many men elect to continue their treatment in Stage 2 of the program, receiving extended wrap-around support for a further 12 months after completing the initial residential program.

Program completion remained high this year with (80%) of clients completing the 12 weeks in treatment, demonstrating that most men who engage with our program go on to finish it. Client retention is an important measure of success and provides some indication of future long-term recovery. Indeed, most 'completing' clients stay in treatment as outreach clients, including those transferring to Stage 2.



The aftercare program provides open-ended treatment and ongoing connection with the service. Its success is demonstrated by a consistently high attendance of the weekly peer support group, prior to Covid-19 lockdown. Every Tuesday up to 30 men were attending the weekly 'spaghetti night', enjoying a meal together and the opportunity to network and socialise. The 90-minute group provides a unique forum for men in recovery to share their experiences and support each other. It demonstrates the essence of the Glebe House Family. Following the advent of Covid-19, members still met via Zoom, although with reduced numbers. The meeting continues in whatever way possible, as clients value the connection offered through the group. More recently, a hybrid meeting format has been established as restrictions ease. The group has always run, which shows its importance as vital source of connection.

Table 6: Treatment Outcomes 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% Discharged Self–discharged against advice Program Completion noncompliance 2018/19 2019/20 2020/21

Treatment Outcomes

Client Feedback

A fundamental element of Glebe House's client-centered focus is the participation of service users in service delivery. Ongoing client feedback is received throughout treatment and all men exiting the program complete a formal feedback survey from which service delivery can be monitored and adapted. In addition, the board of Directors includes a former Glebe House client and four board members who have lived experience of recovery.

HEALTH & WELLBEING

Yoga and Pilates practices returned face to face at the start of November, after practicing online earlier in the year. I would personally like to extend my gratitude to all the teachers Kathy Cogill from Flow to Yoga and Sonia from Sonia Forato Pilates and Meditation for providing services for the men of Glebe house. Our Wednesday morning ceramics group was replaced for a time being with a 12 step Big Book relapse prevention study group taking its place due to Covid 19 service restrictions not allowing visitors onsite. We welcomed Karin Dovel Ceramics back face to face in late October. And have included the Big Book study group into the 2021-22 program.

Telehealth appointments with Glebe Family Medical Centre (GFMC) continue, with all clients engaging in comprehensive medical assessment on admission including referrals with Mental health services as required.

All new clients are required to undergo Covid - 19 vaccinations as a safety requirement enabling us to keep all clients and staff protected whilst ensuring the continuity of service. these are arranged whilst waiting for admission and completed, if necessary, with GFMC.





Optometrist appointments made are made through, Vision Australia a DCJ funded, NSW Spectacles Program, assisting clients to access subsidised prescription glasses for men dependent upon Centrelink benefits from local Optometrist George Amaro at Glebe Eyewear.

A new therapeutic Ethical Masculinity group has been developed and facilitated by Geoff Minards in early 2020 and implemented in the later part of the year during the first wave of Covid -19 and was successfully run for 12 weeks finishing February 2021. The group is designed to promote discussion. Although there are educational and health promotion aspects to its content the major focus is on a therapeutic change model and developing insight and motivation to implement ethical responses to one's life. The emphasis will always be on bringing practical and healthy behaviours into the present. We have retained the group for another 12-week program. This group is available to all residential and non-residential clients who are committed to the 12-week program.

Glebe House is registered as a charity with the ACNC and is a Public Benevolent Institution; it has Income Tax Exemption and Fringe Benefit Tax Exemption and is a Deductible Gift Recipient (DGR). Following the 12-week residential component of treatment, clients are offered an open-ended period of aftercare, which provides a continuum of treatment.

This aligns with the principles of 'throughcare', which is widely acknowledged as the best practice approach when working with those exiting custody. Although clients are referred into safe, supported accommodation they are especially vulnerable during the period immediately following residential treatment.

Being part of the 'Glebe House Family' allows a man to return 'home' at any time they need support. We have established an environment where alumni become role models and mentors for newer clients. Glebe House has always recognised the efficacy of sharing lived experience, with many service consumers volunteering as peer leaders and mentors. Ongoing advice, referrals, advocacy, and counselling are available to outreach clients. Brokerage is offered to support men in establishing independent living arrangements.

Food donations are also offered, in collaboration with Oz Harvest, who make a weekly food delivery to the House. Regular social events are held for the overall community enhancing engagement and connection.

The nexus of the outreach program is still the weekly peer support and relapse prevention groups on Tuesday nights which has been moved temporarily to online, where exresidents engage with current clients, followed by an online topic meeting. This therapeutic group attracts in excess of 25 men each week. The online platform has enabled past clients from outer state to reconnect to the Glebe House family. Relapse prevention and support systems are in place to assist clients who relapse with extra support to enter 30-day treatment options with collaboration from other service providers, returning on completion into structured stage 2 program increasing their chance of rehabilitation.

Last year we surrendered one of our stage 2 properties due to intake down turns and our ability to fill properties due to Covid - 19 pandemic intake restrictions. This year in collaboration with Metro Community Housing we have regained that property and acquired a further 3 Bed property increasing stage 2 capacity by 20% securing stable transitional supported accommodation for the men bringing the total properties to 5, with nomination rights to house 16 men and we are at capacity again. Former clients have the opportunity to 'give back', sharing their experiences of living clean and sober; they become role models for those currently in residential treatment. Over several years a safe space has been created where men feel safe to be vulnerable and talk about their feelings. Clients often remark that this is the most powerful recovery meeting of their week. They can forge healthy relationships and offer mutual support in managing their lives, free from addiction.

Stage 2 group BBQs have been suspended due to Covid restrictions but will resume as soon as we are able to socially distance following the NSW Health Department directives, Online groups are held in place every 2nd Friday where men discuss any concerns within the outreach community and to keep each other accountable.



Allan's Story

My name is Allan. I'm a 34-year-old Aboriginal male from Newcastle.

There were 30 people in the 4-bedroom house I grew up in with drugs and alcohol used daily around me.

From the age of 11 until 16 I was groomed and molested by multiple men. I was doing a paper run and working at Subway at nights and weekend to pay for dance lessons also cleaning my dance studio to cover the costs of private lessons and still attending high school.

At 16, I moved out of home and became a full-time dance student overseas on a scholarship. I travelled around the world working for multiple dance companies and circuses.

After having a major fall and breaking multi vertebrae in my spine in Japan, I came back to live in Sydney thinking I could figure out who I was going to be from here on in.

Parties and clubbing seem like the way to do this but went from being a weekend user to slowly becoming an everyday thing. I got sucked up and lost in the drug scene in Sydney. Not able to hold a stable job in four years, I became so desperate I did whatever it took to get drugs.

By the time I was 24 I had lost my identity and my direction and drugs became my life. Unstable mood swings, anxiety, depression, isolation, crime, and dramatic loss of weight would become my whole world. My first arrest would send me to jail for 5 years and 9 months on top and 3 years 9 months on the bottom. I kept my head down and I worked doing every program that was available and end up finishing my cert three in commercial cookery and doing work release. I then breached parole and had to serve another year in prison.

I was going to have many more arrests and serving another year and eight months in prison.

I first tried a Christian 12-step based program interstate which I lasted for a total of eight months.

After finishing rehab, I went to stay at Mission Australia in Surry Hills and within three months I had 17 new friends in recovery die from suicide or drug overdose, I used this as an excuse to go back out and not have to deal with the pain and hurt and continually to use for another 12 months.

After being caught by the police and arrested on drug charges I decided to go to Who's rehab in Cessnock. I have completed the full program. Here I decided that I needed more help to build better connection support and network through N.A and A.A. so, I came straight to Glebe House. Whilst being at Glebe House I have been given a safe haven where I have been able to receive counselling one to one and in a group situation and a chance to build relationships with other people who have walked this path before me. Before coming to Glebe House, I had no self-worth, confidence, and barely understood what my values, morals and beliefs were. I had trouble describing who I was. Through working 12 steps with a sponsor, I have been able to understand a Power greater than myself and love for oneself to change all that.

One of the biggest things I learnt while staying in Glebe House is I'm not a bad person though I may have made some bad decisions. I was able to build healthy relationships with other males in recovery which I found quite difficult before. When I approached the staff about past traumas this was the first establishment who didn't say "I'm sorry we don't know how to deal with that you'll have to unpack that somewhere else" the staff gave me their support and helped me get into trauma counselling. They took time to check in with me and make sure I was feeling safe and supported.

This program has allowed me to move at my own pace in recovery working with a diverse group of staff who are all in recovery.

The fact that most of them coming through this program has shown me that I walk on the shoulders of giants. Coming to the end of Stage one I've been able to build a network with other men in stage two from our Tuesday night peer support meeting. I have a sense of comfort as I move to stage two. I'm no longer driven by fear and anxiety.



Staff and Management Team Xmas Luncheon

TREASURER'S REPORT

Treasurer's Report for the Year Ended 30 June 2021

We are very pleased to thank our wonderful funders for the following ongoing enhanced grants received during the financial year.

Department of Corrective Services	\$ 330,446
Family and Community Services	\$ 178,461
Department of Health	\$ 164,952

This funding continues to enable Glebe House to Fulfill its mission in providing clients with a sound rehabilitation and steppingstone for better lives in the community.

The funds received are well and carefully managed in accordance with prescribed budgets in the best interests of our funders and clients.

Glebe House remains in a sound financial position to meet the significant demand and need for help from a growing client base.

We thank our very committed staff, management and Board for their dedication and invaluable support for Glebe House and its clients.

< John Stone

Treasurer. Glebe House Incorporated

FINANCIAL REPORTS

COMMITTEE'S REPORT

DocuSign Envelope (D: ACIC40000-533HC-47A1-67E8-59D06E74D4FE

TO THE FINANCIAL STATEMENT FOR THE YEAR ENDED 30 JUNE 2021

Statement of Significant Accounting Policies

This financial report is a special purpose financial report that has been prepared to satisfy the reporting requirements of the Association Incorporation Act 1984. The committee has determined that Glebe House Inc. is not a reporting enlity.

The financial report covers Glebe House Inc. as an individual entity. Glebe House Inc. is an association incorporated in New South Wales under the Association Incorporation Act 1984.

This tinancial report has been prepared in accordance with the requirements of the Associations Incorporation Act of New South Wales and applicable Australian Accounting Standards.

The financial report has been prepared on an accruals basis and is hased on historical costs and does not take into account changing money values or current valuations of non-current assets and liabilities. Cost is based on the fair values of the consideration given in exchange for assets.

The following is a summary of the material accounting policies adopted by the Association in the greparation of the financial report. The accounting policies have been consistently applied, unless otherwise stated:

Income Tax The Association, being a non-profit organisation, has income tax exemption.

Employee Benefits

Provision is made for the company's liability for employee benefits arising from services rendered by employees to balance date. Provision for long service leave is provided from the time of employment although in most circumstances it is not payable until after ten years of service.

Employee benefits expected to be settled within one year together with henefits atising from wages and salaries, annual leave and sick leave which will be settled after one year, have been measured at their nominal amount.

Goods and Services Tax (GST)

Revenues, exponses and assets are recognised not of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Tax Office. In these circumstances the GST is recognised as part of an item of the expense. Receivables and payables in these financial reports are shown inclusive of GST.

COMMITTEE'S REPORT CONT'D

22

Docusign Envolupe 11: 40040000-5380-47A1-67E8-59008F74E4FF COMMITTEE'S REPORT Your committee members submit the financial report of Glebe House Incorporated for the financial year ended 30 June 2021. **Committee** Members The names of committee members throughout the year and at the date of this report are: Mr James Beattie Chairperson Mr David Mcallister Manager Mr John Stone Treasurer Ms Philomena Wing Mr Brian Donnellan Ms Sonia Fereto Ms Sophic Russell Mr Anthony Simons **Principal Activity** The principal activity of the association during the year was assisting male persons with drug and alcohol addiction with rehabilitation and reintegration. Significant Changes No significant change in the nature of these activities occurred during the year. **Operating Result** The surplus from activities for the year ended 30 June 202: was \$18,994 with total accumulated funds being \$117,543 at 30 June 2021. The organisation, being a non-profit organisation, does not pay income tax. Signed in accordance with a resolution of the Members of the Committee. DecuSares by James Brattic Chairperson..... James Hearing David Mcallister Committee Member..... David Mcaliister Dated this 2nd day of November 2021

Cool Skin Envelope ID: ACC4CD0C-538C-47A1-8758-59D06F74O457

STATEMENT BY MEMBERS OF THE COMMITTEE

In the opinion of the committee the financial report attached:

1. Presents a true and fair view of the financial position of Glebe House Inc as at 30 June 2021 and its performance for the year ended on that date in accordance with Australian Accounting Standards, mandatory professional reporting requirements and other authoritative pronouncements of the Australian Accounting Standards Board.

2. At the date of this statement, there are reasonable grounds to believe that Glebe House Inc. will be able to pay its debts as and when they fall due.

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

	uocalitymas by
Chairperson	James Erallin
	Janses Weatherans
	DocuBrid St.
Committee Member	David Mcallister
	David WEATSKE

Dated this 2nd day of November 2021

COMMITTEE'S REPORT CONT'D

Glebe House Incorporated ABN: 70 001 327 626

CONSOLIDATED BALANCE SHEET AS AT 30 JUNE 2021

	2021	2020
CURRENT ASSETS	\$	\$
Cash at Bank - Cheque Account	7,076	4,273
Cash at Bank - Online Saver	68,661	77,072
Cash at Bank - Term Deposit 1510	114,208	114,187
Cash at Bank - Term Deposit 5707	100,272	0
Cash at Bank - CBA 3571	879	
Petty Cash	800	800
Trade Debtors	0	90,873
	291,896	287,205
NON CURRENT ASSETS		
Motor Vehicle at cost	31,387	31,387
Less: Accumulated Depreciation	-22,233	-18,309
Office & Household Equipment	48,558	30,000
Less: Accumulated Depreciation	-33,471	-23,395
Total Equipment	24,241	19,683
TOTAL ASSETS	316,137	306,888
Less:		
CURRENT LIABILITIES		
Trade Creditors & Accruals	35,469	17,324
Other Liabilities	9,687	82,614
Provision for Annual Leave	43,468	22,320
	88,624	122,258
NON CURRENT LIABILITY		
Provision for Redundancy	69,081	53,331
Provision for Long Service Leave	40,889	32,750
The structure of the second structure of the second structure is the second structure of the second st	40,000	
TOTAL LIABILITIES	198,594	208,339
TOTAL LIABILITIES		
	198,594	208,339
NET ASSETS	198,594	208,339
NET ASSETS Comprising:	198,594 117,543	208,339 98,549

Glebe House Incorporated ABN: 70 001 327 626

CONSOLIDATED PROFIT AND LOSS STATEMENT AS AT 30 JUNE 2021

	2021	2020
REVENUE	\$	\$
Grant- Dept of Family & Community Services	178,461	175,393
Grant- NSW Corrective Services	330,446	303,398
Grant- Department of Health	164,952	164,952
Dept Communities Justice SSTF	10,318	0
NDIS- Selfcare support	0	5,118
Donation Received	0	500
Interest Received	390	3,296
Rent Received	58,122	56,682
Miscellaneous Income	9,444	75
Cash Boost Stimulus	54,212	45,788
TOTAL REVENUE	806,345	755,202
EXPENSES		
Accounting & Audit Fees	18,631	17,324
Consultants	2,772	9,364
Food & Housekeeping	36,862	32,773
Household Items & Equipment	5,445	5,888
nsurance- General	3,912	3,238
abour-Wages & Salaries	486,592	473,565
_abour- On Costs	104,787	40,998
Family & Outreach Support	18,545	16,940
Motor Vehicle Expenses	4,231	4,557
Depreciation Hyundai Van	13,999	19,430
Office & Computer Expenses	16,141	12,487
Rent	21,000	21,000
Repairs & Maintenance	3,866	3,703
Residents' Activities, Resources, Aids, etc	30,812	29,354
Telephone & Internet	2,177	2,242
Brokerage & Client Support	2,177	2,242
raining & Clinical Supervision	11.115	10.380
Julities	6,464 787.351	5,654 708,897
SURPLUS/(DEFICIT)	18,994	46,305
ACCUMULATED FUNDS AT BEGINNING OF YEAR	98,549	52,244
TOTAL ACCUMULATED FUNDS AT THE END OF YEAR	117,543	98,549

COMMITTEE'S REPORT CONT'D

Glebe House Incorporated ABN: 70 001 327 626

CONSOLIDATED STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30 JUNE 2021

CASH FLOWS FROM:	2021 \$	2020 \$
Net Income	18,994.00	46,305.00
Movement in Current Assets	90,873.00	-90,873.00
Movement in Non Current Assets	-18,558.00	-22,112.00
Movement in Other Current Liabilities	4,255.00	-111,231.00
Net Surplus/ <decrease> in Cash Held</decrease>	95,564.00	-177,911.00
Funds at Bank at the beginning of the Financial Year	196,332.00	374,243.00
Funds at Bank at the end of the Financial Year	291,896.00	196,332.00

REPORT



AUDITOR'S INDEPENDENCE DECLARATION

UNDER AUSTRALIAN CHARITIES AND NOT FOR PROFITS COMMISSION ACT 2012 SECTION 60-40 TO THE COMMITTEE OF TO THE MANAGEMENT OF GLEBE HOUSE INCORPORATED

I declare that to the best of my knowledge and belief, during the year ended 30 June 2021 there have been:

- (i) no contraventions of the auditor independence requirements as set out in the Corporations Act 2001 in relation to the audit; and
- (ii) no contraventions of any applicable code of professional conduct in relation to the audit.

MITCHELL & PARTNERS

CHARTERED ACCOUNTANTS

len Marchant

Glenn Merchant CA

Partner

Signed this 3rd day of November, 2021.

	A11.00	all has C. I	ABN: 62 606 570 742 P.O. Box 5460 Sydney NSW	20.01 4.	utua lia	
Suite 3, Level 2 66 Clarence Street Sydney	NSW 2000 A		TELEPHONE: 02 9392 8686		HLE: 02 9299 8195	EMAIL reception@mitchellpartners.com.at
		be	yond accountin	9		Liability limited by a scheme approved under the Professional Standards Legislation

27

AUDITOR'S REPORT CONT'D



INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF GLEBE HOUSE INCORPORATED A.B.N. 70 001 327 626

Report on the Financial Statements

Opinion

We have audited the financial report of Glebe House Incorporated (the entity), which comprises the consolidated balance sheet as at 30 June 2021, consolidated profit and loss statement for the year ended 30 June, 2021 and consolidated statement of cash flows for the year then ended, notes comprising a summary of significant accounting policies and other explanatory information, and the statement by members of the committee.

In our opinion, the accompanying financial report of Glebe House Incorporated is in accordance with the Association Incorporations Act 2009, including:

• giving a true and fair view of the entity's financial position as at 30 June 2021, and of its financial performance for the year then ended; and

· complying with Australian Accounting Standards.

Basis of Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Report section of our report. We are independent of the association in accordance with the auditor independence requirements of the Corporations Act 2001 and the ethical requirements of the Accounting Professional and Ethical Standards Board APES 110: Code of Ethics for Professional Accountants (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

We confirm that the independence declaration required by the *Corporations Act 2001*, which has been given to the committee members of Glebe House Incorporated, would be in the same terms if given to the committee members as at the time of this auditors' report.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Information Other than the Financial Report and Auditors' Report Thereon

The committee members are responsible for the other information. The other information comprises the information included in the entity's annual report for the year ended 30 June 2021, but does not include the financial report and our auditors' report thereon. Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon. In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained during the audit or otherwise appears to be materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

ABN: 62 606 570 742 All mail to: G.P.O. Box 5460 Sydney NSW 2001 Australia

Suite 3. Level 2 | 66 Charence Street Sydney | NSW 2000 Australia | TELEPHONE: 02 9392 8686 | FACSIMILE: 02 9299 8195 | EMAIL: reception@mitchellpartners.com.au

beyond accounting

Liability limited by a scheme approved under the Professional Standards Legislation



AUDITOR'S REPORT CONT'D



INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF GLEBE HOUSE INCORPORATED A.B.N. 70 001 327 626

We communicate with the committee members regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

MITCHELL & PARTNERS Chartered Accountants

len Marlant

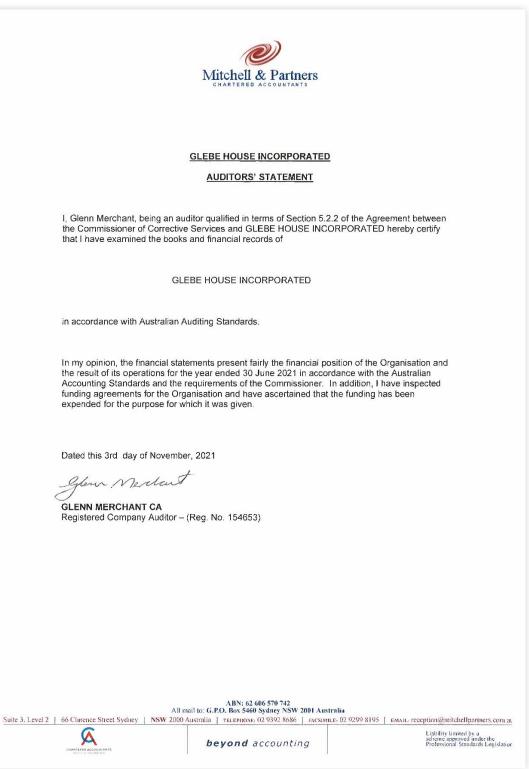
Glenn Merchant CA Partner Dated this 3rd day of November, 2021

ABN: 62 606 570 742 All mail to: G.P.O. Box 5460 Sydney NSW 2001 Australia Suite 3, Level 2 [66 Clarence Street Sydney | NSW 2000 Australia | TELEPHONE 02 9392 8686 | FACSIMUE: 02 9299 8195 | EMAIL: reception@mitchellpartners.com.au

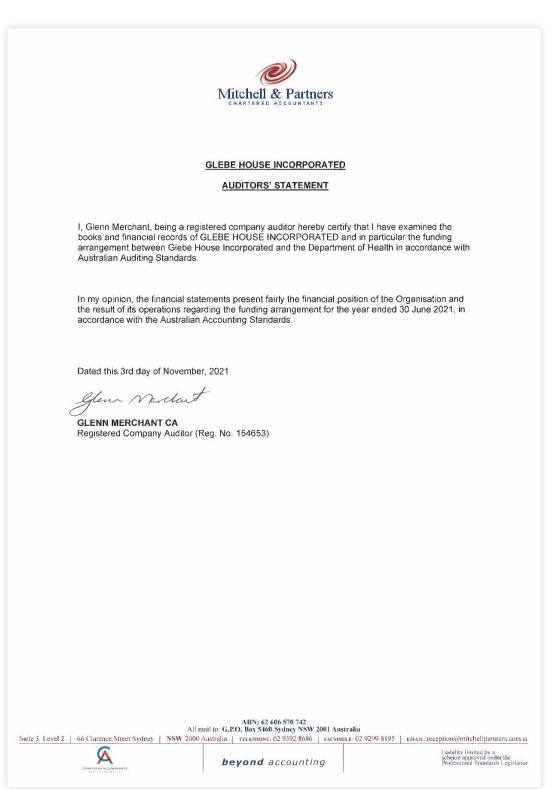
A

beyond accounting

Liability limited by a selignic approved under the Professional Standards Legislation



AUDITOR'S REPORT CONT'D





33

Service Networks

DETOX UNITS

- » Wards 64 & 69, RPA Hospital
- » William Booth (detox and primary treatment)
- » Herbert St Clinic, Royal North Shore Hospital
- » Gorman Unit, St. Vincent's Hospital
- » Corella Lodge
- » Nepean Hospital

AOD SERVICES

- » The Network of Alcohol and other Drugs Agencies (NADA)
- » Foundation House
- » WHOS OSTAR
- » WHOS Gunya
- » WHOS West
- » William Booth House
- » The Glen
- » Bourke Street Program
- » South Pacific Private
- » Wesley Private
- » Northside Private Hospital

HEALTH SERVICES

- » Glebe Family Medical Centre
- » Camperdown Community Mental Health Service
- » Liz Williams Counselling Services
- » RPA Imaging and Allied Health Services
- » Redfern Community Health Centre
- » Justice Health and Forensic Mental Health
- » SAMSN

CRIMINAL JUSTICE SERVICES

- » Leichhardt Community Corrections
- » Correctional Centres throughout NSW
- » Guthrie House
- » Rainbow Lodge
- » Community Restorative Centre (CRC)
- » Justice Health Connections
- » New Horizons Tribal Dreaming
- » Prisoners Aid

HOUSING SERVICES

- » Metro Community Housing
- » Housing NSW
- » Wesley Housing
- » St. George Community Housing



AUXILIARY SERVICES

- » City of Sydney Community Venues
- » Newtown Neighbourhood Centre Glebe Town Hall
- » Sonia Forato Pilates /Meditation
- » Kathy Cogill Flow to Yoga
- » Karen Dovel Ceramics
- » Glebe Town Hall
- » Highwire Group

- » Fastdot Australian Web Hosting
- » Encapsulator
- » Shack Furniture
- » Oz Harvest
- » TAFE NSW
- » Centrelink
- » Victoria Park Pool
- » State Debt, WDO



GLEBE HOUSE

5-7 Mt. Vernon Street Glebe, NSW 2037

P: **02 9566 4630** E: **info@glebehouse.com.au** F: **02 9552 1585**

PO BOX 215 Glebe NSW 2037

www.glebehouse.com.au