



**A safe place for change**



**ANNUAL REPORT 2022**

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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 heritage-listed building has been home to scores of men since.

Over the past 29 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. Walking alongside and supporting our clients so that they are able to start to turn their lives around.

**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 realize 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 self-awareness. 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 for people who have stopped using drugs.

For many men, Glebe House is the first real alternative to a life of addiction and crime. In response to the level of trust and freedom granted program residents, men establish a personal program of recovery for themselves, taking on responsibility 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 community-based 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 CHAIRPERSON

Over the last year we have supported over 85 men experiencing substance dependency, and throughout my role as Chair of the Board, I have had the opportunity to speak with many current and former clients of Glebe House.

On behalf of the Glebe House Board of Management I am thrilled to report on the progress of the organisation over the past year. In many ways, 2022 saw the continuation of a challenging couple of years for Glebe House and the community sector more broadly. Covid-19 has continued to have an impact on service delivery, but the service has remained agile and under David's leadership has successfully managed the program so that disruption for our clients has been minimal.

We are exceptionally grateful for the ongoing support of our funders, the NSW Department of Communities and Justice and the Department of Health. I am also grateful to our partners across the community sector and allied health services. These partnerships ensure we can continue to do the work we do.

There are reflections I would like to make on the work of Glebe House and the sector within which we work. In 2018, the Special

Commission of Inquiry into the Drug 'Ice' recommended increased government resourcing for drug rehabilitation and treatment given the significant social harm caused by substance dependency and a lack of appropriate services. Since that time the number of people in prison has remained high, and the number of First Nations people in prison has continued to grow, including the number of those imprisoned on drug-related offences. Alongside this, we have seen an increase in the rate of people returning to prison. It is unfortunate that it is within this context that the funding of Glebe House was reduced. It is at a time we would hope to see more investment into the community sector and into drug rehabilitation and treatment and services and support which are focused on principles of empowerment, compassion, and connection – some of the guiding values of Glebe House.

As an organisation we continuously seek ways to improve our services and programs. As a small, not-for-profit service focused on frontline service delivery, acquiring the resources to conduct independent evaluations can be a challenge. I am so pleased that Glebe House was recently awarded funding for experienced evaluator Patrick Shepherdson to carry out research in 2023 in collaboration with our staff – an identified strategic priority for the organisation. This will form an important component of our process of continuous improvement and to ensure our program is aligned with the most up to date best practice evidence.

Over the last year we have supported over 85 men experiencing substance

dependency, and throughout my role as Chair of the Board, I have had the opportunity to speak with many current and former clients of Glebe House. It has been an honour to hear their stories of resilience, perseverance, and recovery. The stories and journeys of the people we work with – and the role that Glebe House plays in shaping these – are what spur us on and motivate us, in working in what can at times be a challenging field.

I commend David and the dedicated staff of Glebe House for their work over the past year. Glebe House has continued to deliver excellent and innovative drug and alcohol recovery services to men with complex support needs, including supporting men in our (unfunded) Stage 2 Outreach Program, to ensure they remain supported and connected to the service following the completion of the in-house program. Our success as an organisation comes down to our staff who are doing this work every day. They are our greatest asset.

Finally, I express my appreciation to the Board Members of Glebe House for their passionate work. I extend special thanks to Jim, who has been very supportive over this past year. As I am retiring from the Board, I wish to extend my sincere thanks to everyone I have had the pleasure of working with over this time. It has been a privilege to work with such dedicated volunteers and to be of service to Glebe House over the past 7 years.

**Sophie Russell**  
Chairperson

# MESSAGE FROM THE MANAGER

We continued to operate throughout 2020-2021 evaluating and moving service delivery online in most cases with limited disruptions around the transitioning periods.

Change happens when services conduct quality improvement reviews and implement their findings. For without change services can move backwards relying on antiquated systems that have some merit but may not address current conditions or the environment.

Over the past 3 years navigating the global pandemic, Glebe House responses were calculated, risks assessed, and mitigating strategies formed and actioned in line with our Business Continuity Plans. From which we have remained operational the past year with limited incidences of Covid impacting our ability to operate at capacity.

Reviews conducted in 2021 across a myriad of areas, had findings leading us towards a restructure within the organisation reflecting on work health and safety as best practice in line with our Business Continuity, Strategic and Operational plans, strengthening the service and providing a more resilient and effective outcome for all stakeholders.

The previous years have shown us that having a strong, supportive, and dedicated team in place, there was a need to build a wider pool of staff to fill areas from quality

improvement reviews looking specifically at staff turnover and burn out rates identified from feedback from within the sector.

During this time several of our staff moved onto other employment opportunities and we wish them all the best in their future. We have a new team in place with permanent part time roles mitigating the risk of burnout.

I am pleased to report that it has been another successful year at Glebe House supporting over 88 men throughout the year in both stages.

Support was provided to 31 residents in first stage of the program this year with (75%) completing the 12-week program, further supporting 22 men transitioning into stage 2 with 15 of those continuing to be supported today.

In the last year (19%) of clients identified as Aboriginal and or Torres Strait Islanders representing a (30%) increase from this time last year. (22%) were from culturally and linguistically diverse backgrounds.

Our Stage 2 program was cost evaluated after a reduction of funding, and we have needed to revise service engagement back to accommodate ongoing support

periods. This outreach program has been building steadily over the past 5 years and without further funding could see a decline in the program. We hope to secure extra funding to keep this important program available, open, and viable.

Tuesday night relapse prevention group is a major component of our service structure providing ongoing peer support with our group now hybrid enabling us to give support to more men some of which now reside interstate continues averaging 25 men.

In November 2021, Glebe House implemented a new constitution replacing our articles of association. A special mention going out to Robert Stirling, the CEO of NADA for support with this and Merryn Lynch, lawyer from Justice Connect for conducting the Glebe House governance health check and reporting that the organisation demonstrates a high level of governance and provided further recommendations which have been actioned.

To our Board of directors who continue to volunteer their services to Glebe House. Your dedication, passion and creativity contributed significantly to the operation and sustainability of Glebe House.

Special thanks to James Beattie Chairperson from 2014-21 and Tony Simons who both have served as long-standing Directors and who have now rotated off. We are deeply appreciative of the service of these men over preceding years. Both James and Tony were re-nominated and re-elected board members for 2022. Sophie Russell leaves the board

at the end of the year, and we thank her for the dedicated service and ethical governance to Glebe House over the past 7 years as a board member and last year as the organisation chair and for all the work that you have done to further the Glebe House cause. We wish you and your family all the very best.

Thank you to the services that provided support to our clients over the past year, our partners at Metro community housing, providing post-graduation transitional supported accommodation to men in stage 2

Our dedicated staff who have worked tirelessly in the pursuit of excellence, creating a safe place for change for all our clients. Some of whom have moved on to other opportunities - my gratitude goes out all for the works that you have accomplished within the service and on your new journeys.

Our funders. NSW Department of Communities and Justice and Department of Health Your support has impacted the lives of many.

Our contact managers Department of Communities and Justice  
Rhonda Hodgins – Senior Project Officer, FPI Contracts  
Myrna Chaar – Commissioning & Planning officer.  
Department of Health Andrea Stephens – Funding Arrangement Manager, Community Grants Hub.

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)

Period of accreditation 20 October 2021 – 20 October 2024

Glebe House is an accredited service under the Australian Service Excellence Standards at certificate level (ASES) continuing with improvements in service excellence and quality improvements.



## EXTERNAL CLINICAL SUPERVISION

There has been a strong focus on transition over the past twelve months. Glebe House continues to practice strengths-based supervision, in which staff members are encouraged to reflect on how to improve the quality of their work, which is client centered, and to foster personal wellbeing as an essential component of working effectively in the community services sector. Each staff member receives at least one hour a month of individual face-to-face supervision with Geoff Minards who is a specialist AOD/mental health social worker and a narrative practitioner.

## STAFF TRAINING IN 2022

- Reconciliation NSW - Aboriginal and Torres Strait Islander Cultural Competence Course
- Gabor Mat'e - Compassionate enquiry
- Gabor Mat'e - The Hungry Ghost - A Biopsychosocial perspective on Addiction from Heroin to Workaholism
- The Wisdom of Trauma
- Suicide prevention training
- NADA data base
- Personal wellbeing index (PWI)
- Client information management systems (CIMS)
- Senior first aid
- Policy and procedures reviews



# SUMMARY OF TREATMENT OUTCOMES

FINANCIAL YEARS Summary of Treatment Outcomes	2018/19	2019/20 Covid-19	2020/21 Covid-19	2021/22 Covid-19
Men in residence	29	27	30	31
Men in Stage 2	16	17	24	22
Aboriginal and or Torres Strait Islanders	6%	11%	12%	19%
CALD Clients	24%	22%	21%	22%
Program completion	61%	67%	80%	75%
Program Duration 12 weeks = 84 days	64.37	64.59	78.96	73.58
Funded Partnership Initiative referrals	26	47	23	10
Funded Partnership Initiative admissions	10	8	5	8
Funded partnership initiative active or complete	6	3	4	4
Number of weeks in program average	9	9	11	10
Discharged Noncompliance	13%	15%	6%	12%
Self-Discharged against advice	19%	18%	14%	13%
Managed relapse with support in stage 2	1	2	3	3
Peer support / relapse prevention attendances	1188	1008	939	1050
Stage 2 Housing support groups attendances	265	230	235	232
Referrals to other external services	85	83	102	87
Employed (CIMS)	18%	15%	30%	48%
Engaged in Study or training (CIMS)	3%	2%	10%	7%
Remained abstinent	32%	50%	72%	66%
Reduced severity of distress Kessler K -10	20%	24%	25%	19%
Counselling sessions	348	324	360	372
Diagnosed mental health condition (CIMS)	62.1%	68.5%	67.9%	64.4%

# CLIENT STATISTICS

## There were 31 closed treatment episodes during FY 2021-22

From this group

- 75% of clients completed the residential program.
- 22 were supported and housed into stage 2 program
- 15 currently reside in the Stage 2 supported accommodation program.
- 57 men are regularly engaged in the aftercare program.

From the client group who completed the program over the past year:

- 72% are currently abstinent
- 12% have relapsed
- 48% are employed
- 6% are currently studying

The statistics included in this report are taken from The Network of Alcohol and other Drugs Agencies (NADA) data base. NADA is the peak organisation for non-government alcohol and other drugs sector in NSW. Further statistics used are from 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.

Funded Partnership Initiative (FPI) Transitional Support Accommodation (TSA) open Tender was carried out in July, which while our application was well received by the tender evaluation committee (TEC) the TEC awarded Glebe House 3 TSA beds stating this is a positive recognition of the work we do however, understanding it's below the minimum 4 beds we requested.

Representing a loss of funding for 1 bed for the next 3 years.



## CLIENT STATISTICS CONT'D

We continue to receive a reduction on clients transitioning from prison into the service, due to several factors including low numbers of referrals and the remnants of Covid - 19. We are working with Justice team (DCJ) and gatekeeper at Leichhardt community Corrections to promote the service within the prison systems including producing an information booklet and short video that has been distributed to corrective services employees via the intranet.

This year (42%) of the client cohort were aged between 25 - 34 with a further (32%) falling in the next age bracket 35 - 44 followed by (16%) in the 45 - 54 brackets with the final (10%) in the 55 - 64 age brackets

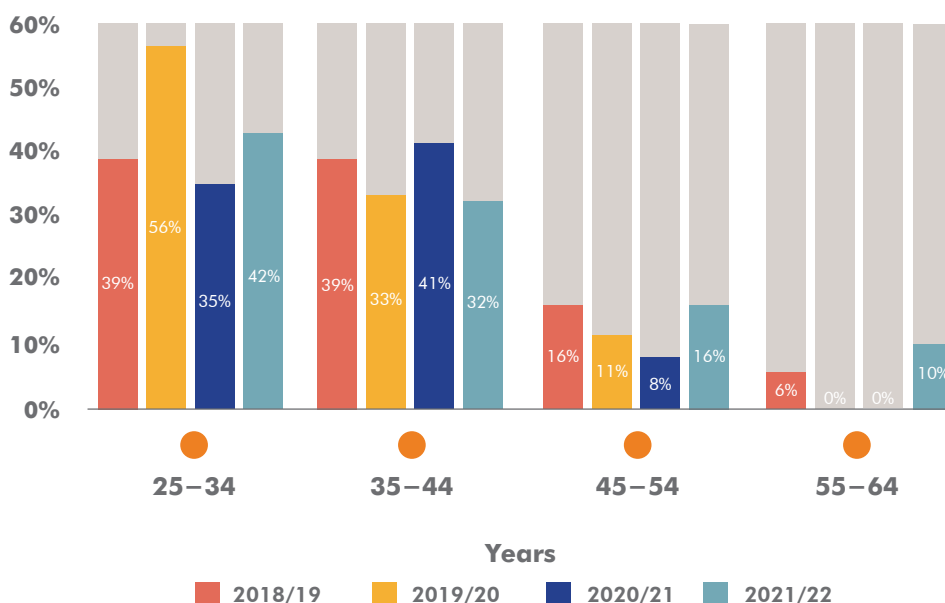
Most referrals 68% came from AOD services. Glebe House remains an inclusive service and has always attracted clients from CALD backgrounds. This year (22%) of men were from culturally diverse backgrounds, with (78%) identifying as Australian. (19%) of those admitted for treatment this year identified as Aboriginal and or

Torres Strait Islander peoples. This represents an increase of (7%) from last year.

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 well-earned reputation for our work with Indigenous men and culturally sensitive approach to all program participants. Whilst all staff were offered and received cultural competency training this year, the service has a need for a dedicated Indigenous worker as numbers have steadily increased over the past 4 years from (6%) in 2018/19 to (19%) in 2021/22.

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)  
2021/22 – (average age 38.1)

# CLIENT STATISTICS CONT'D

## 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) this year the portal reveals that only 10 referrals were received and from that cohort 8 became treatment admissions with 4 of those completing the 12-week program representing that those that arrived into treatment over the past 4 years is (54.83%) of client completing once they arrive into the service.

Some referrals from the criminal justice system had to be rejected for a variety of reasons: referrals from prison 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 actioned changes including sharing a promotional video with parole unit managers.

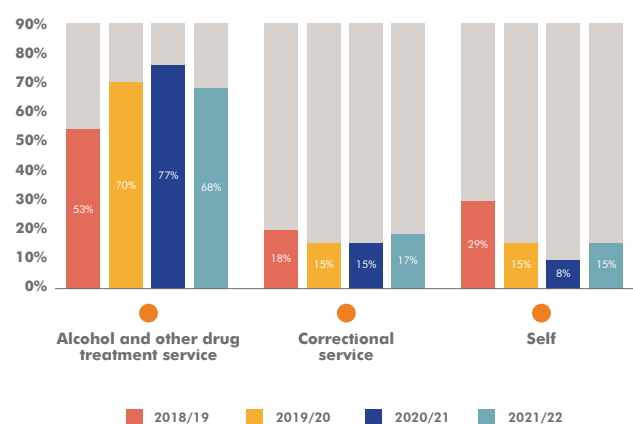
Prison overcrowding and the prevalence of drug use in jail also impact referral processes. Urinalysis within the custodial environment was often not forthcoming and was ceased completely early last year due to Covid - 19. However, Protocols developed with parole units to expedite prisoner transfers to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

FPI admissions from corrections is up from last year to (17%). Its hopeful that the continuation of a new case management system being introduced into jails will produce an increase in referrals over time and 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. 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 or William Booth House before transitioning to Glebe House. Hence, a coordinated case management plan can be developed, which provides a continuum of treatment to the client.

The agency also accepts self-referrals these numbers are up from the previous year (15%) 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.

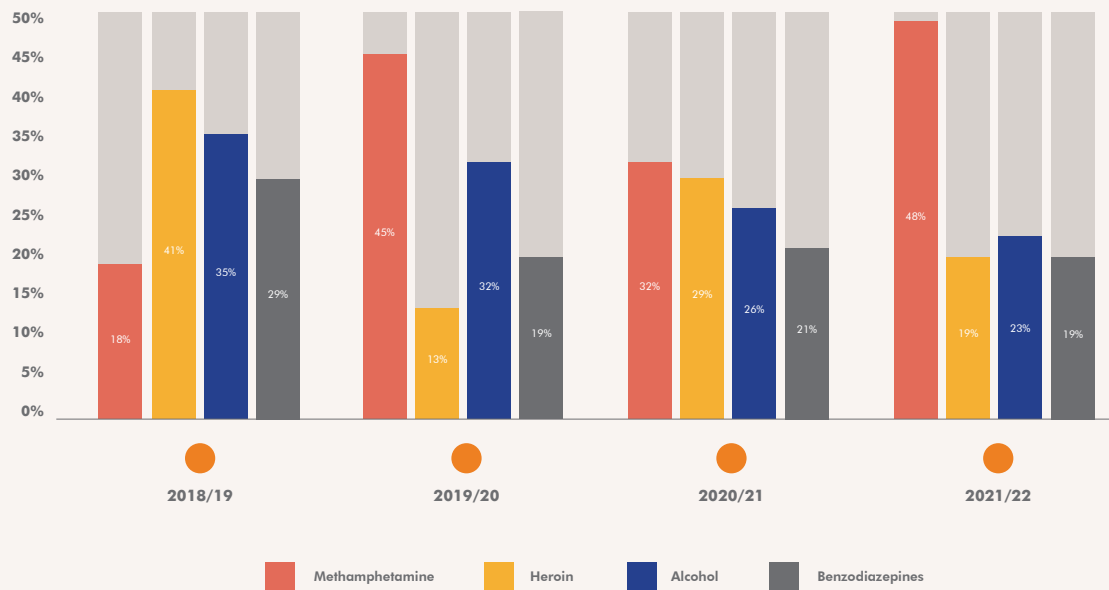
Table 2: Source of referrals





# CLIENT STATISTICS CONT'D

Table 3: Principal drug of concern



# CLIENT STATISTICS CONT'D

## Principle Drug of Concern

Methamphetamine 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 (3%) in Alcohol 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 (23%) citing as 'principal drug of concern' this remains stable on last year's statistics but down (3%) on 2021 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.

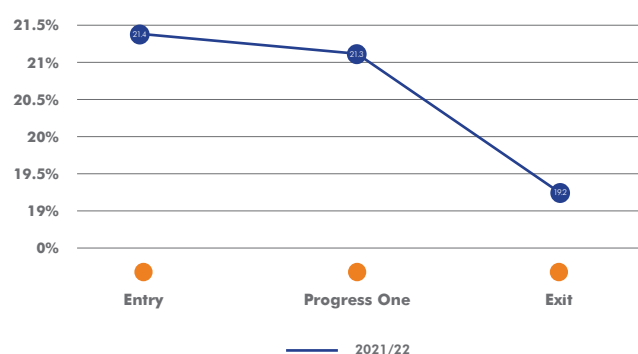
Glebe House remains committed to supporting clients who wish to cease smoking, restricting the habit to a designated outdoor area. Educational material is provided also. Some men switch from tobacco to 'vaping'. Although probably preferable to tobacco smoking, we are hesitant to actively promote this 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 lower than the mean score on admission this year.

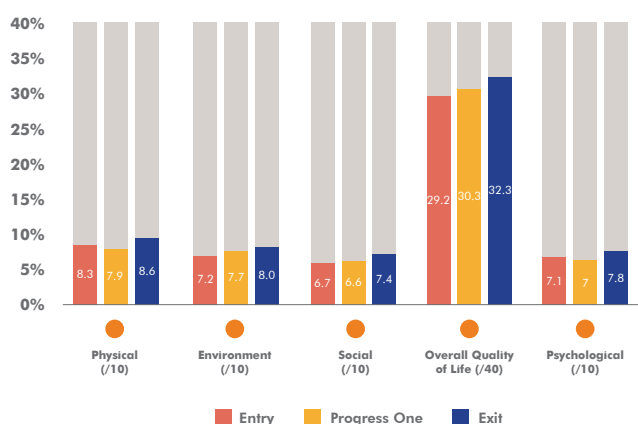
Table 4: Kessler K10



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 from client intake to exit. A significant shift over a three-month period. These measures align with positive metrics regarding program completion and the achievement of case management goals.

## Quality of Life 2022

Table 5: Quality of Life 2022



## CLIENT STATISTICS CONT'D

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 (75%) 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.

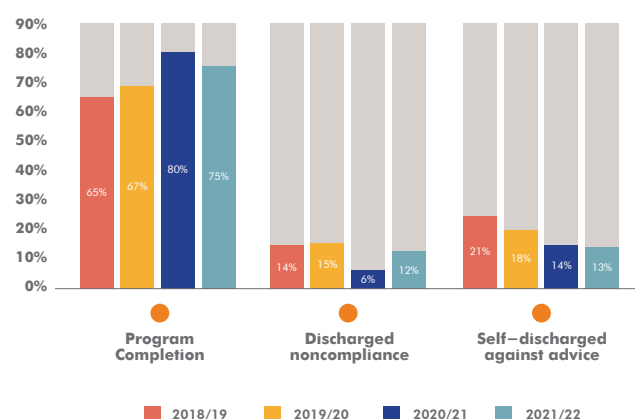


The outreach program provides open-ended treatment and ongoing connection with the service. Its success is demonstrated by a consistently high attendance of the weekly peer support group, every Tuesday up to 25 men attending the weekly 'spaghetti night', enjoying a meal together and the opportunity to 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. 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.

### Treatment Outcomes

Table 6: 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 Management includes a former Glebe House client and four board members who have lived experience of recovery.

# HEALTH & WELLBEING

## Health and Wellbeing

Thanks to all the wonderful teachers providing classes for the men of Glebe House in 2021, Sonia Forato - Pilates and meditation, Kathy Cogill - flow to Yoga, and Karin Dovel - Ceramics



## Ethical Masculinity Group

We continued engagement of the Ethical Masculinity group again this year a program developed and facilitated by Geoff Minards in early 2020, we will continue to be running these groups throughout 2023 and are hopeful to receive funding from City of Sydney grants allowing this to take place into 2024. The group promotes educational and health aspects with the focus on a therapeutic change model developing insight and motivation to implement ethical responses to one's life. The groups emphasis will always be on bringing practical and healthy behaviours into the present.

## Life Skills Program

As part of the living skills program residents take turns preparing dinner; weekly meetings are held on Fridays to discuss and finalise dinner menus. Residents are

encouraged to try different recipes and ingredients that they have not tried before. Recipes need to be healthy, are all cooked from scratch and are planned within a budget appropriate to what their individual financial situations may be post Glebe House. Support is provided as some residents have not cooked for several years and some have limited cooking skills. Each resident is given a recipe folder with some easy recipes and recipes that have been a popular hit at dinner with previous residents.

## Health Assessments

Glebe Family Medical Centre (GFMC) provide comprehensive medical assessment on admission including referrals to Mental health services as required. All new clients 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 accessible from local Optometrist at Glebe Eyewear.





## THE OUTREACH PROGRAM

# STAGE 2

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 to Hybrid now enabling clients from other parts of the country to take part in the recovery process where ex-residents engage with current clients, followed by an online topic meeting. This therapeutic group attracts more than 25 men each week.

Relapse is often mis represented as a failure by some, but this is not the case as the time people spend in the Glebe House program has a positive impact on their lives and the lives of those that support them.

After consultation and feedback from our second stage cohort about what they would like to happen upon relapse in stage 2 all clients wanted to be supported to transition back and reiterated that they would be supportive of relapsed clients on the provision that they didn't use within their homes as a matter of safety and followed directions from Glebe House staff.

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 including William Booth House who have assisted us with 3 client relapses this year, returning on completion into structured stage 2 program increasing their chance of rehabilitation.

This year in collaboration with Metro Community Housing we are able to secure stable transitional supported accommodation for the men bringing the total properties to 5, with nomination rights to house 15 men and we are at capacity again.

Former clients have the opportunity to 'give back', sharing their experiences of living a life free from dependency; 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 and house meetings are conducted every fortnight where men discuss any concerns within the outreach community and to keep each other accountable.

To Greg, Juliette and both the wonderful teams from Habitat for humanity & Habitat for humanity women and their suppliers for donating their time and expertise to supply and construct a new pergola for the men of Glebe House our thanks go out to every one of you.



Habitat for Humanity team



## Peter's Story

Prior to entering Glebe House in April this year, I was living in Melbourne, in active addiction. I was overcome with anxiety, depression and just feeling deadset hopeless as I did not have the proper tools to handle sobriety and maintain my mental health. I was prompted to contact Glebe House, so I did, I would call every Tuesday to check in and I finally made it!

After entering Glebe House, I instantly felt at home and experienced this strange blanket of peace.

Through the help of Glebe Houses' programs, I have been able to get clean and stay clean. The connections I have made through this program at Glebe have been a blessing – I could not have done it without them. They have provided me with the safe and secure space that I needed.

Through regular meetings and the 12-step program I have been able to achieve my short term goals and now am progressing towards my mid-term goals.

**I could not thank Glebe House and the staff there enough. I have been overwhelmed with the love and support the programs have provided.**

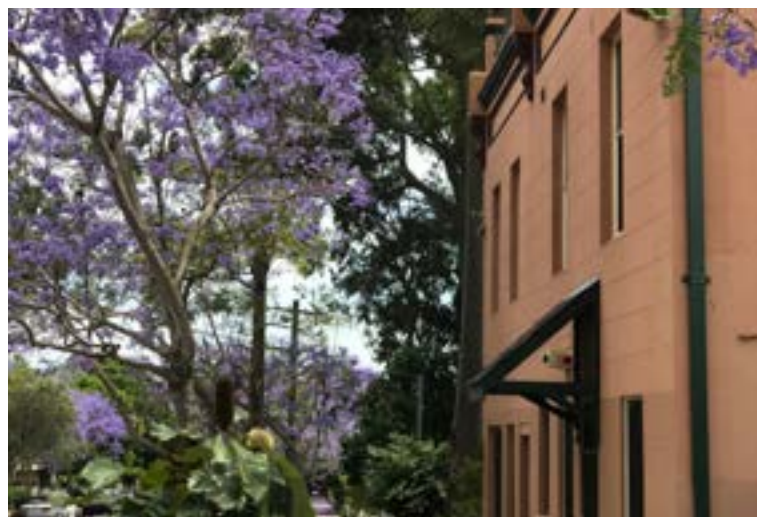
Through regular Yoga/Pilates I have been able to work on being grounded and in the present moment – I found this to be a great healthy escape.

I have benefited greatly and have found a new love for Art Therapy – I never thought I would be into Ceramics.

I have been able to gain and maintain tenancy within the Dulwich Hill area through the Counselling Assistance provided.

I have really been able to work through quite a lot with the assistance of Rebecca the counsellor – I thank her a lot

I honestly think I have gained a whole new world of knowledge just by being exposed to these classes and programs. Not in a million years did I think I would be doing all this.



## Couper's Story

I went from working full time in a kitchen, smoking pot, or having a few drinks after work with friends occasionally to smoking all day and not working and living in a car. I was so crippled with fear and anxiety I couldn't do anything but drink and smoke, preferably on my own so no one could tell me otherwise.

I always knew I had addictive tendencies, but I didn't think I had a problem until I had planned my suicide. In my desperation I asked for help and ended up in a rehab, I did a short rehab of 28 days and then moved on to Glebe House which taught me the power of connection and communication.

The program offered a lot of community driven experiences and activities, like morning check in group, cooking, yoga, Pilates, and ceramics.

Glebe house is the perfect stepping-stone to getting back into the community without the use of drugs and alcohol and is a smooth transition offering support from other recovering addicts as well as professional help from a counsellor and doctor.

There is a relapse prevention group every week where all the ex-residents can attend to have dinner and a meeting and is a great way to stay connected with the people you meet along the way.

**Glebe house has been a big turning point in my life, and I am excited to start living again with the tools I have learned throughout the program.**

## TREASURER'S REPORT

### Treasurer's Report for the Year Ended 30 June 2022

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

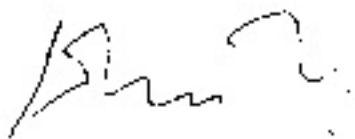
Department of Corrective Services	\$330,445
Department of Family and Community Services	\$185,000
Department of Health	\$155,766

This funding continues to enable Glebe House to fulfil its mission in providing clients with a sound rehabilitation and steppingstone for better and more useful 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

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### COMMITTEE'S REPORT

Your committee members submit the financial report of Glebe House Incorporated for the financial year ended 30 June 2022.

#### Committee Members

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

Ms Sophie Russell	Chairperson
Mr David Mcallister	Manager
Mr John Stone	Treasurer
Mr James Beattie	
Ms Philomena Wing	
Ms Sonia Forato	
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 deficit from activities for the year ended 30 June 2022 was (\$1,119) with total accumulated funds being \$116,424 at 30 June 2022. The organisation, being a non-profit organisation, does not pay income tax.

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

Chairperson .....   
Sophie Russell

Committee Member .....   
David Mcallister

Dated this 10/24/2022

# FINANCIAL REPORTS

## COMMITTEE'S REPORT CONT'D

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### 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 2022 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:

Chairperson .....

Designated by:  
  
Sophie Russell

Committee Member .....

Designated by:  
  
David Mcallister

Dated this 10/24/2022

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Glebe House Incorporated  
ABN: 70 001 327 626

CONSOLIDATED BALANCE SHEET  
AS AT 30 JUNE 2022

	2022	2021
<b>CURRENT ASSETS</b>	\$	\$
Cash at Bank - Cheque Account	12,903	7,076
Cash at Bank - Online Saver	37,176	68,661
Cash at Bank - Term Deposit 1510	114,726	114,208
Cash at Bank - Term Deposit 5707	100,397	100,272
Cash at Bank - CBA 3571	3,763	679
Petty Cash	355	800
Trade Debtors	0	0
	<u>269,322</u>	<u>291,896</u>
<b>NON CURRENT ASSETS</b>		
Motor Vehicle at cost	31,367	31,367
Less: Accumulated Depreciation	-26,156	-22,233
Office & Household Equipment	48,558	48,558
Less: Accumulated Depreciation	-36,942	-33,471
Total Equipment	<u>16,847</u>	<u>24,241</u>
<b>TOTAL ASSETS</b>	<u>286,169</u>	<u>316,137</u>
Less:		
<b>CURRENT LIABILITIES</b>		
Trade Creditors & Accruals	37,565	35,469
Other Liabilities	0	9,667
Provision for Annual Leave	62,320	43,468
	<u>99,885</u>	<u>88,604</u>
<b>NON CURRENT LIABILITY</b>		
Provision for Redundancy	25,049	69,061
Provision for Long Service Leave	44,611	40,869
<b>TOTAL LIABILITIES</b>	<u>169,545</u>	<u>198,534</u>
<b>NET ASSETS</b>	<u>116,624</u>	<u>117,603</u>
Comprising:		
Accumulated Funds Prior Year	117,544	96,549
Surplus/(Deficit) for Year	-1,120	18,904
<b>TOTAL ACCUMULATED FUNDS</b>	<u>116,424</u>	<u>117,543</u>



# FINANCIAL REPORTS

## COMMITTEE'S REPORT CONT'D

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### TO THE FINANCIAL STATEMENT FOR THE YEAR ENDED 30 JUNE 2022

#### 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 entity.

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 financial 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 based 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 preparation 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 benefits arising 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, expenses and assets are recognised net 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.

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Glebe House Incorporated  
ABN: 70 001 327 626

CONSOLIDATED PROFIT AND LOSS STATEMENT  
AS AT 30 JUNE 2022

	2022	2021
<b>REVENUE</b>	\$	\$
Grant- Dept of Family & Community Services	185,000	178,461
Grant- NSW Corrective Services	330,448	330,448
Grant- Department of Health	166,706	164,952
Dept Communities Justice SSTF	16,681	10,318
Homelessness NSW	14,545	0
NADA Training Grant	674	0
Donation Received	535	0
Interest Received	1,159	390
Rent Received	58,913	58,122
Miscellaneous Income	0	9,444
Cash Boost Stimulus	0	54,212
<b>TOTAL REVENUE</b>	<b>774,719</b>	<b>806,345</b>
<b>EXPENSES</b>		
Accounting & Audit Fees	17,975	18,831
Consultants	3,596	2,772
Food & Housekeeping	38,115	38,862
Household Items & Equipment	1,913	5,445
Insurance- General	4,382	3,912
Labour-Wages & Salaries	528,533	488,592
Labour- On Costs	45,549	104,787
Family & Outreach Support	19,480	18,545
Motor Vehicle Expenses	4,299	4,231
Depreciation Hyundai Van	3,923	13,999
Office & Computer Expenses	10,637	16,141
Rent	21,000	21,000
Repairs & Maintenance	2,300	3,866
Residents' Activities, Resources, Aids, etc	31,164	30,812
Telephone & Internet	1,888	2,177
Brokerage / Client Support	145	0
Employment Expenses	2,500	0
Training & Clinical Supervision	5,798	11,115
Utilities	7,177	6,464
SSTF Funding expenses	16,166	0
ASES (Homelessness funding) exp	9,596	0
NADA Training Grant expenses	673	0
<b>TOTAL EXPENSES</b>	<b>775,838</b>	<b>787,351</b>
<b>SURPLUS(DEFICIT)</b>	<b>-1,119</b>	<b>18,994</b>
<b>ACCUMULATED FUNDS AT BEGINNING OF YEAR</b>	<b>117,543</b>	<b>98,549</b>
<b>TOTAL ACCUMULATED FUNDS AT THE END OF YEAR</b>	<b>116,424</b>	<b>117,543</b>

# FINANCIAL REPORTS

## COMMITTEE'S REPORT CONT'D

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Glebe House Incorporated  
ABN: 70 001 327 626

### CONSOLIDATED STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30 JUNE 2022

	2022 \$	2021 \$
<b>CASH FLOWS FROM:</b>		
Net Income	-1,119.00	18,994.00
Movement in Current Assets	-22,574.00	90,873.00
Movement in Non Current Assets	0.00	-18,558.00
Movement in Other Current Liabilities	1,119.00	4,255.00
Net Surplus/ <Decrease> in Cash Held	<u>-22,574.00</u>	<u>55,564.00</u>
Funds at Bank at the beginning of the Financial Year	291,896.00	190,332.00
Funds at Bank at the end of the Financial Year	<u>269,322.00</u>	<u>291,896.00</u>

# AUDITOR'S REPORT



## AUDITOR'S INDEPENDENCE DECLARATION

UNDER AUSTRALIAN CHARITIES AND NOT FOR PROFITS COMMISSION ACT 2012  
SECTION 90-40 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 2022 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

Glenn Merchant CA  
Partner

Signed this 24th day of October, 2022.

# AUDITOR'S REPORT CONT'D



## **INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF GLEBE HOUSE INCORPORATED A.B.N. 79 001 327 626**

### **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 2022, consolidated profit and loss statement for the year ended 30 June, 2022 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 2022, 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 2022, 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.

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**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF  
GLEBE HOUSE INCORPORATED  
A.B.N. 79 601 327 626**

**Responsibility of the Committee for the Financial Report**

The committee members of Glebe House Incorporated are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards and for such internal control as the committee members determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the committee is responsible for assessing Glebe House Incorporated's ability to continue as a going concern, disclosing, as applicable, matters relating to going concern and using the going concern basis of accounting unless the committee members either intend to liquidate the association or to liquidate the entity or to cease operations, or have no realistic alternatives but to do so.

**Auditors' Responsibility for the Audit of the Financial Report**

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the Australian Accounting Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

As part of an audit in accordance with the Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial report whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the association's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the committee members.
- Conclude on the appropriateness of the committee member's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the entity's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditors' report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditors' report. However, future events or conditions may cause the entity to cease to continue as a going concern.

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# AUDITOR'S REPORT CONT'D



**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF  
GLEBE HOUSE INCORPORATED  
A.B.N. 70 091 327 626**

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

**Glenn Merchant CA**  
Partner  
Dated this 24th day of October, 2022



**GLEBE HOUSE INCORPORATED**

**AUDITORS' STATEMENT**

I, Glenn Merchant, being an auditor qualified in terms of Section 5.2.2 of the Agreement between the Commissioner of Corrective Services and GLEBE HOUSE INCORPORATED hereby certify that I have examined the books and financial records of

GLEBE HOUSE INCORPORATED

in accordance with Australian Auditing Standards.

In my opinion, the financial statements present fairly the financial position of the Organisation and the result of its operations for the year ended 30 June 2022 in accordance with the Australian Accounting Standards and the requirements of the Commissioner. In addition, I have inspected funding agreements for the Organisation and have ascertained that the funding has been expended for the purpose for which it was given.

Dated this 24th day of October, 2022

**GLENN MERCHANT CA**  
Registered Company Auditor – (Reg. No. 154653)

# AUDITOR'S REPORT CONT'D



## GLEBE HOUSE INCORPORATED

### AUDITORS' STATEMENT

I, Glenn Merchant, being a registered company auditor hereby certify that I have examined the books and financial records of GLEBE HOUSE INCORPORATED and in particular the funding arrangement between Glebe House Incorporated and the Department of Health in accordance with Australian Auditing Standards.

In my opinion, the financial statements present fairly the financial position of the Organisation and the result of its operations regarding the funding arrangement for the year ended 30 June 2022, in accordance with the Australian Accounting Standards.

Dated this 24th day of October, 2022:

**GLENN MERCHANT CA**  
Registered Company Auditor (Reg. No. 154653)



# GLEBE HOUSE INCORPORATED

## AUDITORS' STATEMENT

I, Glenn Merchant, being a registered company auditor hereby certify that I have examined the books and financial records of GLEBE HOUSE INCORPORATED and in particular the funding arrangement between Glebe House Incorporated and the NSW Family and Community Services in accordance with Australian Auditing Standards.

In my opinion, the attached financial statements present fairly the financial position of the Organisation and the result of its operations regarding the funding arrangement for the year ended 30 June 2022 in accordance with the Australian Accounting Standards.

Dated this 24th day of October, 2022

**GLENN MERCHANT CA**  
Registered Company Auditor (Reg. No. 154653)

# Service Networks

## DETOX UNITS

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

## HEALTH SERVICES

- » Glebe Family Medical  
Centre
- » Camperdown Community  
Mental Health Service
- » Rebecca Eagan  
Heartfelt Counselling
- » RPA Imaging and Allied  
Health Services
- » Redfern Community  
Health Centre
- » SAMSN

## AOD SERVICES

- » Foundation House
- » William Booth House
- » The Glen
- » Guthrie House
- » Rainbow Lodge
- » Bourke Street Program
- » OSTAR
- » We Help Ourselves
- » South Pacific Private
- » Wesley Private
- » Northside Private Hospital

## CRIMINAL JUSTICE SERVICES

- » Leichhardt Community  
Corrections
- » Correctional Centres  
throughout NSW
- » Community Restorative  
Centre (CRC)
- » Justice Health Connections
- » Prisoners Aid



## HOUSING SERVICES

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



## AUXILIARY SERVICES

- |                                     |                      |
|-------------------------------------|----------------------|
| » City of Sydney - Glebe Town Hall  | » Oz Harvest         |
| » Sonia Forato Pilates & Meditation | » TAFE NSW           |
| » Kathy Cogill Flow to Yoga         | » Centrelink         |
| » Karen Dovel Ceramics              | » Victoria Park Pool |
| » Habitat for Humanity              | » State Debt, WDO    |
| » Tim Caplin                        |                      |



**A safe place for change**

**GLEBE HOUSE**

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