



Toora  
Women Inc.

19–20

# TH AN DO NE WE AR

Safety, respect and choice for women





### Acknowledgement

Toora Women Inc. acknowledges the Ngunnawal people as the traditional custodians of this land. We would like to pay our respects to their Elders past, present and emerging and to celebrate their ongoing contribution to Australian culture. We express our gratitude for the privilege of being able to live and work on their land.

### Funded by

ACT Health Directorate

National Affordable Housing Agreement and the National Partnership Agreement on Homelessness, which are jointly funded by the ACT and Australian Governments.

Capital Health Network



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## Services and programs

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### Corporate Office

Executive  
Finance  
Marketing and Communication  
Policy, Quality Assurance and Risk

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### Toora Domestic Violence and Homelessness Services

Heira Domestic Violence Program  
Women and Children's Program  
Families Program  
Toora House Supported Accommodation Program  
Coming Home Program  
Aleta Outreach Program  
Head Tenant Program  
Property Management

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### Toora Alcohol and Other Drug Services

Toora AOD Day Program  
Lesley's Place Residential Program  
Marzenna House Transitional Program  
Toora AOD Outreach Program

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### Toora Counselling Services

AOD counselling



## Contents

|   |           |
|---|-----------|
| <b>Board Chair's Report</b>                                     | <b>2</b>  |
| <b>Chief Executive Officer's Report</b>                         | <b>3</b>  |
| <b>Toora Domestic Violence and Homelessness Services</b>        | <b>7</b>  |
| <b>Toora Alcohol and Other Drugs Services</b>                   | <b>11</b> |
| <b>Toora Alcohol and Other Drugs (AOD) Counselling Services</b> | <b>15</b> |
| <b>Treasurer's Report</b>                                       | <b>17</b> |

# Board Chair's Report

**For many, 2020 has presented incredible challenges and significant change to our lives. The bushfires experienced over the summer and the COVID-19 pandemic directly impacted our community, our sense of security, our health and our wellbeing.**

In its 38th year of operation, Toora responded to these dynamic and ongoing crises by focusing on the wellbeing of our staff and clients. Toora successfully adapted its service model to ensure that vulnerable women, and their children, continued to receive quality services and care.

On behalf of the Board, I would like to thank the Toora team for their exceptional efforts this year. They went above and beyond to ensure that services continued while maintaining the highest safety standards for staff and clients. Their adaptability, resilience and commitment to supporting women in our service is to be commended.

In response to COVID-19, Toora enacted its Pandemic Response, as set out in the Business Continuity Plan. Toora established a Crisis Management Team that developed protocols to respond to the pandemic, which were reviewed and refined as more information became available. The Board was regularly briefed and provided oversight of these arrangements via fortnightly meetings during the COVID-19 lockdown period. Compliance with government guidelines and best available medical information was paramount to the response.

This year, the Board received briefings from a range of staff members on their services and projects. It was invaluable to hear directly from these staff about their work, priorities and challenges. On behalf of the Board, I wish to thank Erin East and Melissa Dunn for their excellent presentations, and time spent preparing for these briefings.

Insight and reflections on Toora's performance, and how Board decisions affect the organisation, is also provided by reports from the Toora Advisory Forum (AF) and the two AF representatives, Karina Lockwood and Elgita Dajsmali, who sit on the Board. After two years as an AF representative, Karina Lockwood is stepping down. On behalf of the Board, I wish to thank her for her invaluable contribution and look forward to welcoming a new AF representative.

The Board also welcomed two new community Board members this year. Kate Yuille and Naomi Cole – both of whom have actively contributed to the Board in their respective roles as Secretary and policy subcommittee member. It has been a privilege to get to know and work with these two outstanding women.

The Board also sadly farewelled our Acting Chair, Susie van den Heuvel, our Deputy Chair, Olivia Turner, and former AF Chair, Tracie Williams. Susie's exceptional communication skills and work to refresh the Toora website and build the Stakeholder and Fundraising Committee has paid dividends this year, with increased engagement, fundraising contributions and donations. Olivia's legal skills and strong feminist values also contributed greatly to the enhancement of Toora policies, sound governance and decision making. Our thanks to these exceptional women for contributing their gifts and talents to Toora.

As we look forward to 2021, it is with pleasure that I can report that, despite the incredibly disruptive nature of 2020, Toora has remained focussed on, and has progressed, its strategic goals. The continuing development of the partnership with EveryMan Australia, and the ongoing evolution of the unique service this partnership delivers through combining the strengths of gender-specialist services, is progressing and will remain a key strategic focus for 2021.

It is standard that the Board acknowledges and thanks the leadership of our CEO, Susan Clarke-Lindfield, in our annual report. While warranted every year, this year has not been standard, and I, on behalf of the Board, want to particularly acknowledge Susan's leadership and the Directors who support her – Rebecca and Mirsada. The responsiveness, adaptability, problem solving, sheer hard work and care shown by Toora's leadership team has been truly exceptional this year. Susan not only led Toora but also provided real leadership within the community sector as engagement with government services became more frequent and complex as the response to COVID-19 was worked through. Her ongoing strategic focus, calmness and experience is such an asset to Toora. My thanks also to Aghia Gunawan for her excellent policy work and secretarial support she has provided the Board.

And finally, I wish to thank the Board for the support they provided me in my first year as Chair. It has been a challenging year – but the diversity of skills, insights and commitment to sound governance demonstrated by the Board has meant we have continued to achieve our mission of Safety, Respect and Choice for women.

2020 has shown more than ever the importance of a safe home, health and wellbeing and protecting the vulnerable. The high quality, women-led services Toora provides in the Canberra community are critical to achieving these essentials and are highly valued by our clients.

**Suzanne Muir**  
Toora Board Chair





# Chief Executive Officer's Report

**I am proud to present our strategic highlights from the past year and to reflect on our organisation's achievements and the hard work of all our staff and Board members. Another busy year for Toora, we provided specialist wrap-around support to 455 clients and 151 children. The number of clients supported was down by 9% from last year due to a lack of exit options during the bushfire and pandemic periods.**

We continued to deliver services to women and children from varied backgrounds, with 81 clients identifying as Aboriginal and Torres Strait Islander and 146 from Culturally and Linguistically Diverse backgrounds. Many women and children entered our services with experiences of significant trauma. They presented with multiple and enmeshed complex needs, including domestic and family violence, mental health issues, alcohol and other drug use, homelessness, sexual abuse, and exiting from the correctional system. This year, the percentage of clients seeking support for domestic and family violence increased significantly. Additionally, between March and June, we were contacted by 50 non-clients seeking violence-related COVID-19 support. ▶

Strategic Goal 1: to provide gender-specialist quality services that are holistic, evidence based and outcome focused



Chief Minister's Charitable Fund Awards 2019

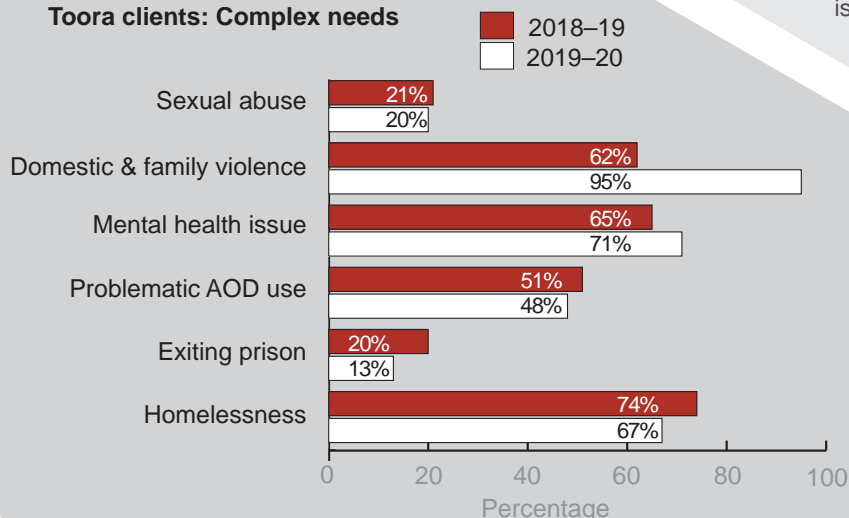
## Partnership with EveryMan Australia

Toora's work with EveryMan Australia (EveryMan) continues to benefit the clients and staff of both organisations. There is a wealth of evidence demonstrating that clients who receive gender-specialist support achieve better outcomes.

As gender-specialist providers, we recognise our common interests and principles and the expanded support we can provide our clients. Many of our clients do not want to leave their partner. They just want the violence to stop. Working together, we can respond to a family holistically, ensuring that each family member receives gender-specialist support.

Both Toora and EveryMan recognise that our partnership is one of our greatest assets. Given that statistics show that up to 70% of all business partnerships ultimately fail, this year Greg Aldridge (EveryMan CEO) and I developed a strategic risk management plan that identified 21 partnership risks across three broad areas ▶

### Toora clients: Complex needs



– political and stakeholder management; relationship management; contract and financial management. In 2020–21, we will convert the identified risk controls and strategies into an action plan to ensure we can continue to strengthen our relationship for many years to come.

This year, we were able to run the Building Respectful Families program once more thanks to funding from the Office of Aboriginal and Torres Strait Islander Affairs, Hands Across Canberra, the Chief Minister's Charitable Fund and The Snow Foundation. Both Toora Domestic Violence and Homelessness Services and Toora AOD Services worked with EveryMan to provide intensive support for four couples seeking to address the violence in their relationships. The University of the Sunshine Coast was engaged to conduct an evaluation of the program and we look forward to the results (pp. 9–10; 13).

Strategic Goal 2: to inform people of who we are, what we do and why we do it

## 2019 ACT Women's Summit

To further develop the ACT Women's Plan 2016–2026, the ACT Government held a Women's Summit in October 2019. Approximately 165 community sector, business and government stakeholders came together to consider how government policy and programs can better support the gender-specialist needs of Canberra women and girls.

I attended as a keynote panel member discussing the theme *'Equity together – equity for all'*. It gave me an opportunity to discuss how the pathways into homelessness are different for men and women. For instance, the primary reasons for men's homelessness is financial crisis, housing affordability, mental health and AOD but the primary reason for women's homelessness is domestic and family violence. I was able to emphasise the need for gender-specialist services and how Toora addresses the impact of trauma in a safe and supportive environment.



Susan Clarke-Lindfield speaking at the ACT Women's Summit

## Improved social media presence

In late 2019, we said goodbye to our Social Media Specialist, Brigitte Honeyman. In April 2020, we employed Erin East as our Communications Officer. Together with Leadership and the Board, we developed a new vision for Toora's social media channels. Our social media accounts are becoming places for honest conversations about life for women in the ACT and surrounding regions, while staying true to Toora's mission to provide Safety, Respect and Choice for women as they move out of trauma and into sustainable recovery.

Our primary social media platforms are Twitter, Instagram and Facebook. We suspended our YouTube account during the COVID-19 shutdowns; however, we hope to reactivate the account as social distancing restrictions continue to ease. Almost 80% of our followers are women between the ages of 25 to 44 on Instagram, whereas on Facebook, this shifts to 35–44, and 65+.

We are proud of our social media community that is gathering relevant voices in the trauma sector and an increasing number of women in the ACT region. Engagement, measured in profile visits, website click throughs, likes and comments, is growing and is continuing to grow.

## Community engagement with the 2018–19 Annual General Meeting



Joan Andersson speaking at AGM 2019

At our Annual General Meeting in November 2019, the organisation was pleased to welcome representatives of Canberra Girls Grammar School and the 2019 Lifeline Canberra Woman of Spirit Joan Andersson. Hearing from Canberra women about issues close to their heart helps shape our response to the needs of vulnerable people in the ACT and surrounding regions. We look forward to hearing from more Canberra women in the future.

Strategic Goal 3: to be a sustainable organisation with a diverse funding stream

### Generous community donations

This year in particular we have felt the extra generosity and love of the Canberra community and our supporters. At a time when many people struggled with their mental and physical health, lost their jobs, or felt uncertain about their future, we saw an increase in monetary and non-monetary donations and offers to volunteer. We received \$10,000 from the Lestari Foundation, a further \$10,000 from the Canberra Recovery Appeal. Overall, donations came to \$37,382. Many donors opted not to be acknowledged publicly, so we would like to use this opportunity to thank you all for your generosity which enabled us to support our clients during these tough times.

Throughout the year, community members, including Canberra Girls Grammar School, held fundraisers for Toora clients (p. 10). In July 2019, Jenni Tarrant of Bond Hair Religion worked with us to highlight the real-life experiences of women experiencing homelessness. In the cold Canberra winter, Jenni spent one week living in her small car and washing in public bathrooms. Her generosity not only raised funds for Toora but also prompted conversation within the Canberra community about the dignity of all women and the value of safe and secure housing.

Strategic Goal 4: to ensure organisational capacity and capability to meet the needs of existing and future clients

### Engaging with stakeholder feedback

In April 2020, we introduced the Tickit on Demand (Tickit) online feedback system, which is used to register all client and stakeholder complaints, suggestions, enquiries and compliments. Tickit will improve accountability and transparency and provide anonymity for those who do not wish to give their name or to hand write a paper-based complaint form. Due to COVID-19, we were only able to do a soft launch in June, however, we plan to fully utilise this online system in 2020–21.

### Impact of bushfires and COVID-19 global pandemic

A particular strength of Toora is the risk and crisis management skills of its Leadership team. A Business Continuity Plan (BCP) has been in place since 2012 and is regularly reviewed. This broad BCP provides an excellent framework to develop more detailed risk management plans as crises emerge.

As soon as pressure from the bushfires eased in late January, we started planning for the COVID-19 pandemic. We researched international pandemic guidelines for homelessness services, organised much of our information technology, stockpiled essential supplies where possible (though PPE were hard to obtain), and started coaching our clients on strategies to reduce the spread of viruses.


By the time the first case of COVID-19 in Canberra was confirmed in March, we had established a Crisis Management Team (CMT) and were able to contact the clients and mobilise our workforce to work from home within 48 hours. Every client received a daily telephone case management support call and we had a small roster of staff safely attending the shared accommodation sites three days a week to make sure that people had everything they needed.

Toora now has two COVID-19 risk plans. The first covers Phase One (our crisis plan when a local outbreak occurs). The second covers Phase Two (which we were moving into by the end of June).



Jenni Tarrant and the Invisible Homeless Project





In these plans, we identified 43 risks across three areas – service delivery; work, health and safety; and property and assets. Phase Two is on Tickit, which sends us weekly alerts as to what section of the plan to review at our CMT meetings. In this way, the areas of highest risk are reviewed at least fortnightly and lower risks are reviewed monthly.

At Toora, we acknowledge the ongoing pandemic effects of trauma on our clients' wellbeing and promote a culture of safety, respect and personal agency. We're proud of the fact that we were able to maintain the same standard of service delivery as pre-COVID times. Client feedback shows that more than 90% were satisfied or very satisfied with the support received. We believe that the care we were able to take of our staff played a large role in this success, as did our ongoing commitment to the BCP and our strengths in managing risks and crises.

Client care begins with staff care. We couldn't support our clients unless we also cared for our mental and physical health. A generous donation from the Lestari Foundation allowed us to establish a Staff Wellbeing Program. For almost six months, mindfulness, meditation and exercise sessions were held via Zoom for 30 minutes every morning. The sessions were extremely popular. Attendance tapered off naturally as people moved back into the office. Some of the positive feedback from staff included:

*"It is a good way to start working, especially in this situation where we are under so much stress. I am really grateful for this initiative...thanks."*

*"The program has been very helpful in maintaining my physical and mental health."*

*"It clears my mind and I find that afterwards I am more focused on doing work."*

*"I think it is brilliant and would love it to continue."*

*"I absolutely enjoy the mindfulness program and have noticed a significant positive change to the way I start my day. In other words, my stress level has gone from 10 to 2."*

To run the program, we hired three wellbeing practitioners – Sandra Warn of Mountains Mindfulness, Dragan Radicoski of Fitness Australia, and Rachel Huria, a qualified fitness instructor and Toora Case Coordinator.

## Key challenges and opportunities in the future

As always, it's hard to know what challenges lie ahead in this rapidly changing environment. We do know that the impacts of COVID-19 will be felt for many years to come. Thanks to the work of Leadership and the Board to instil resilience in the organisation, Toora is in a strong position to withstand whatever comes our way.

We have two very exciting projects for the upcoming year:

### Safe Places Emergency Accommodation

We were fortunate to be successful tenderers for the Safe Places Emergency Accommodation grant program. This program is part of the Commonwealth Government's \$78m funding package to provide additional safe places for women and children experiencing family and domestic violence. Toora will be using this funding to purchase two three-bedroom townhouses. The townhouses will be built to Universal Gold Design Standards suitable for women and children with disabilities or chronic health conditions. The properties will be pet friendly and will have a strong emphasis on security.

As an established, specialist domestic and family violence service and a community housing provider, Toora has the infrastructure, networks, staffing and skills to support up to 900 women and children in these properties over 15 years.

### Complexity Centre

In the upcoming year, in partnership with EveryMan, we will establish a Complexity Centre to provide advanced practice counselling and case management services for people living with high and complex needs. The centre will operate initially out of the Griffin Centre, using interview rooms on the ground floor with street access and, as demand increases, other rooms in Toora and EveryMan tenancies. Centre services will not be available for clients presenting with lower levels of complexity, as they are best supported by existing Toora services.

Complexity Centre services will be provided by Toora and EveryMan staff working as co-practitioners, or by staff of either agency alone. We have a team of advanced practitioners, skilled in working with extensive complex needs, such as ingrained intergenerational patterns, underlying mental health or neurological conditions, and extensive history of multiple service use with varying degrees of effectiveness.

## Many thanks to our team

Every year, I acknowledge how proud I am to be the CEO of Toora Women Inc. This year, as the organisation pulled together during unprecedented national and global crises, the dedication and camaraderie within Toora has never been more apparent.

We have a hardworking Board that provides continual support. During the peak of the pandemic, the Board met fortnightly rather than monthly. This extensively increased their workload



at a time of high stress for the Canberra community. Their willingness to dedicate their personal time to help Toora meet the demands of COVID-19 was invaluable, and on behalf of the Toora staff I extend my thanks.

I am also grateful for the Leadership team and the CMT. With diligence, they carried the weight of responsibility for staff and client safety during the bushfires and the COVID-19 lockdowns. The organisation's ability to maintain client support during these times is a testament to their flexibility in response to challenges and change. Thank you Mirsada Draskovic, Rebecca Wood, Tess Rogel, Aghia Gunawan and Sara Paniker.

My particular thanks to Toora's tireless staff. You are the backbone of the organisation. With client complexity growing every year and resources diminishing, you do an outstanding job in supporting clients to achieve positive change. You were on the front line of client care during the COVID-19 lockdowns. The care you provided during a highly uncertain and frightening time for the Canberra community was exemplary.

As always, I would like to thank our funding bodies – the ACT Government's Community Services Directorate and Health Directorate, the Office of Aboriginal and Torres Strait Islander Affairs, the Chief Minister's Charitable Fund and the Capital Health Network – who provided responsive and committed support during the COVID-19 lockdowns. Our thanks also go to our community-based supporters, including the Lestari Foundation, Hands Across Canberra, The Snow Foundation, Bond Hair Religion, Deserved Luxury, Pandora's at O'Connor Preloved Fashion, Zonta International, GIVIT, and everyone who donated their time, money or goods to the women and children supported through Toora.

**Susan Clarke-Lindfield**  
Chief Executive Officer



## Toora Domestic Violence and Homelessness Services

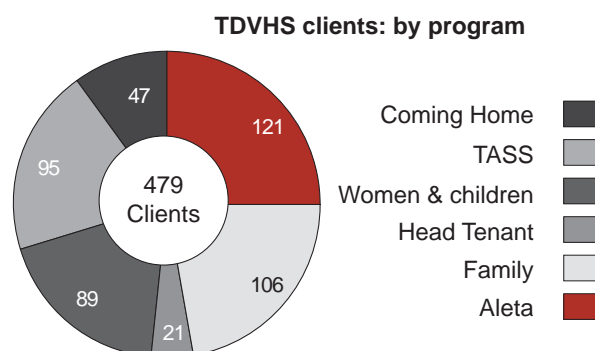
**Toora Domestic Violence and Homelessness Services (TDVHS) operated in crisis management mode for more than half of this year, starting with the intense bushfire season and moving into the COVID-19 pandemic. Thanks to the leadership of our Crisis Management Team and the professionalism and passion of TDVHS staff, we quickly and effectively adapted our operations to continue delivering services while maintaining the health and safety of our clients, the team and our families.**

The COVID-19 lockdowns saw an increase in women seeking support from our service. Requests for one-off assistance increased from 2 in 2018–19 to 85 in March–June 2020. Though we were at capacity, these women were supported by the team with information, referral, safety planning and advocacy.

Continuing our focus on internal improvements, a key achievement this year was the team planning and development day. Guided by the question 'how do we promote Safety, Respect and Choice for our clients, our team and within the workplace?', we reflected on our strengths, celebrated our achievements and identified opportunities for growth. The day also provided an opportunity for us to engage in fun team bonding activities. Outcomes from the day were reviewed by our Operational Management Team and, where possible, actions were implemented and strategies developed to address the identified barriers.

This year, the partnership with Housing ACT set a precedent, successfully advocating for a single woman on a bridging visa to access public housing. This outcome was the direct result of a mutual understanding of the client's exceptional needs and vulnerabilities, with collaborative efforts from both parties taking place over one and half years, while the client was residing in our crisis accommodation.





## Service profile

In the last twelve months we supported 479 clients through our residential and outreach domestic violence and homelessness programs. This number includes clients we have supported through additional COVID-19 and domestic violence response programs.

The number of clients, without accompanying children, in employment at the end of their support period increased, whilst for other clients with accompanying children their employment rates were impacted by the restrictions imposed due to the COVID-19 shutdown.

## Heira Domestic Violence Program

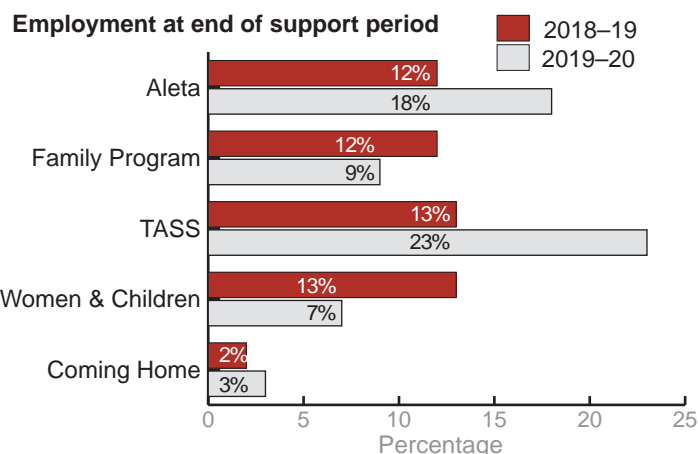
In collaboration with the Domestic Violence Crisis Service (DVCS) and other specialist homelessness services we expanded our outreach capacity to support additional women and families escaping domestic and family violence through the Christmas Initiative Program and the COVID-19 Response Accommodation Program. Under both these programs, DVCS provided the crisis accommodation and the specialist homelessness services worked with the clients to exit into independent accommodation while addressing any safety concerns.

TDVHS, along with Toora AOD, DVCS and Woden Community Service, participated in the pilot training project *Recognising and Responding to Financial Abuse*, delivered by Care Inc. and funded by the Family Safety Hub.

## Homelessness programs

We have continued to work with single women without accompanying children with co-morbidity issues. While access to detox and rehabilitation beds have previously been very limited for our clients, due to the pandemic, exits into detox and rehabilitation units have been even more restricted. With groups for AOD support not being run, it has been especially difficult to support these clients with addressing their addictions.

During the time of social distancing and isolation restrictions case coordinators increased their contacts with clients most in need, continued to provide case management, harm minimisation strategies and emotional



wellbeing supports as much as needed via Zoom, over the phone and face to face following strict safety and hygiene protocols.

Our Child & Family Specialist, highly skilled and experienced in AOD health treatment, also provided one-on-one relapse prevention sessions to address the gaps left by the cessation of AOD group supports in the community. This holistic and continuing support ensured that our clients were able to manage their substance use safely and maintain their accommodation within the service.

As a service we have further struggled, juggling the balance between trying to meet the mental health support needs of individual clients and the safety and needs of other clients within shared accommodation. The bushfires and the pandemic had a negative impact on our clients' mental wellbeing. Clients with a history of trauma or existing mental health concerns were especially affected, as were single women and women from CALD backgrounds.

All clients were supported through case management to further develop their strategies for managing their wellbeing. This included individualised wellbeing care plans, self-care boxes and increased access to Toora on-call support. Where needed, we also provided clients smartphones and phone credit so they could maintain connections with their loved ones and access e-health services.

Through the Aleta Outreach program, we continued to assist women at risk of homelessness, connecting them with wellbeing, legal and financial support services. Anecdotally, we've observed that ongoing engagement between clients and external services has decreased. Adequate long-term support for women from CALD backgrounds is particularly limited. This has resulted in previous clients returning to the program when the need arises. The long-term, non-intensive relationship offered by our service has proven crucial for CALD women and women with mental health issues living in the community to maintain their independence.

In partnership with OneLink and Housing ACT we accepted six additional head tenancies under the Client Support Fund Program. This program will ensure that clients living with complex issues have safe accommodation with us for a period of 12 months whilst being supported to develop their capacity to maintain personal safety, connect with the community and be able to exit into independent accommodation.

It has been a busy year for our Property Management Team with the total number of TDVHS properties increasing to 47. The team now has three permanent full-time property officers to meet the demands of the service. Our key achievements include successfully passing the National Regulatory System for Community Housing (NRSCH) Compliance review in October 2019, participating in the NRSCH working group and installing solar panels in properties. This year we also implemented the Chintaro cloud and PIM's, linking the two property systems to allow inspections to be captured on iPads and uploaded directly to the database. With the rent relief provided by the Community Services Directorate, we have upgraded some of the shared properties, installing custom built-in wardrobes and modifying playgrounds to ensure the equipment meets Australian standards.

## Coming Home program

This year we continued to support women in, and exiting from, the Alexander Maconochie Centre (AMC). Thirty percent of Coming Home clients were of Aboriginal and/or Torres Strait Islander background. Prior to the onset of the COVID-19 pandemic, we co-facilitated an outreach session at the AMC with the Indigenous Unit from EveryMan Australia. This session informed clients of their options to engage with cultural support prior to exiting the AMC.

We worked closely with Aboriginal Liaison Officers at ACT Mental Health and Justice Health and Alcohol & Drug Services (MHJHADS) and Victims Support ACT Liaison Officers to promote the wellbeing and culturally sensitive safety of Indigenous clients. Working with the AMC Indigenous Services Coordinator, we successfully supported a client in custody to obtain funding for one-on-one trauma counselling as part of the Elders Healing Group.

While working with this group of clients, it has become apparent that there is a barrier for women with histories of using violence to access alcohol and drug rehabilitation services within the ACT and interstate. Due to the nature of their criminal history, these clients are rejected by rehabilitation services even though they are ready and willing to address their substance use. We worked closely with Toora AOD and MHJHADS to advocate strongly for these clients to be able to access these specialist supports.

During 2019–20 AMC service delivery changed with case managers at the AMC now supporting both female and male detainees. This change, along with new staff at the facility, resulted in lapses of communication and a lack of consistent referrals. We addressed this with the Throughcare Manager and AMC staff, resulting in improvements to referrals and communication. During the COVID-19 lockdowns, face-to-face services at the AMC were suspended. However, we continued to do intake and assessment and provide support to clients at the AMC via the phone. We also continued to provide court support to clients on probation.

Along with EveryMan Australia, we met with representatives of Selarang Halfway House, Singapore. Selarang provides case management, counselling and transitional accommodation for men and women at risk of reoffending while on parole. The meeting was an opportunity to exchange insights and best practice principles for working with people exiting incarceration cross culturally.

In collaboration with Justice and Community Services Directorate, Toora AOD and the Drug Court, we provided safe accommodation to a client on the Drug and Alcohol Sentencing List while she waited for a place in the Toora AOD residential health treatment program. We received the following feedback from our client's solicitor:

*"I wanted to express my sincere thanks to Toora, and in particular to the case coordinator for her dedication and hard work yesterday afternoon in the Supreme Court with our mutual client. Had our client not had accommodation offered through Toora, she would without a doubt be sentenced to more time in prison. This could very much be a lifeline for her."*

*"Despite all the efforts the Drug Court is making, it still seems that homelessness is left in the hands of refuges. The sentence was protracted to say the least, and we did not get out of Court until past 5pm. The client wasn't released until after 6pm, and the case coordinator waited the entire time, despite, I'm sure, having numerous other commitments. The case coordinator's compassion and kindness was remarkable and not unnoticed."*

## Collaborations

We continued our fruitful partnership with EveryMan Australia, giving a joint presentation at the Stop DV conference in December 2019 — *"Achieving powerful results by partnering specialist men's and women's services to address generational family violence."* We also jointly presented at the Joint Pathways Workers Forum on *"The innovative partnership of two gendered services."* Staff from both organisations continue to co-facilitate outreach workshops to men from culturally and linguistically diverse backgrounds on *"Prevention and Practice: Empowering non-violent men to prevent violence against women."* These workshops are organised and delivered in collaboration with the Migrant and Settlement Services of the ACT (MARSS).

The partnership received additional funding to run the Building Respectful Families program. We have worked with two couples of Aboriginal background, providing therapeutic support and tools to re-configure patterns of behaviour in their relationship and to improve outcomes for their children. The University of the Sunshine Coast is currently evaluating the program, with findings to be shared at the Stop DV 2020 conference.



Staff from our service and EveryMan Australia attended a two-day Trauma Informed Care workshop run by Dr. Sandi Plummer. This training allowed us to address recommendations in Dr. Plummer's report on *Trauma Informed Practice* and brainstorm strategies on how best to close some of the identified service delivery gaps. Strategies included developing a Trauma Informed Care Policy, which was endorsed by the Board in early 2020.

Prior to the COVID-19 lockdown, our ongoing alliance with the Women's Health Service and ACT Health gave our clients access to onsite Nurse Practitioner Clinics and timely dental services through the Mobile Dental Truck. We continue to work closely with Street Law, Legal Aid ACT and the Women's Legal Centre to provide clients with advice about immigration, housing, and family law matters.

Our collaboration with the Red Cross and ACT Libraries resulted in further practical support for our clients. Red Cross volunteers assisted our CALD clients with filling out different documents, while ACT Libraries provided the space for the volunteers and clients to meet. We held an information session for the Red Cross volunteers on how to provide trauma-informed support.

Over the year, we worked closely with Winnunga Nimmityjah Aboriginal Health and Community Services and Gulan Gulwan Youth Aboriginal Corporation to provide cultural connection for our clients and their children and referrals to the Tjillari Justice Aboriginal Corporation's Yarrabi Bamirr program.

## Systemic input

TDVHS participated in the reference group for the ACT Corrective Services' Women Offenders Framework. We had input into the following areas: social, life skills, education, work, housing, finances, health, responsiveness and enabling environment. The framework will provide overarching principles for the continuing management and support of women in custody and women supervised by the ACTCS in the community.

As the director of the service, I continue to be a member of the Joint Pathways Executive, and also participated in Care Inc.'s expert panel on "Understanding Financial Abuse." Our team leaders and our Child & Family Specialist participated in the Capital Health Network workshop on developing a trauma-informed care model for children. This year we continued to engage with the homelessness sector, chairing the SHIP Working Group. We also participated in the Ainslie Village Safety Forum, highlighting safety concerns for women accessing their accommodation.

We furthered our relationship with Canberra Girls Grammar School, speaking with students and teachers about domestic violence, privilege, gender discrimination and empowerment. Students ran campus fundraising campaigns to provide resources for our groups. Our team leaders had the opportunity to judge the school talent activities, with donations given to TDVHS.

Prior to the pandemic we met with the Radford College student council to raise awareness about domestic and family violence and to identify projects that we could undertake together to support women and children residing in our crisis accommodation.

We are an active member of the Health Care Consumers Project Advisory Committee, established by the Health Care Consumers Association of the ACT to develop a health literacy training package for community workers. Our team were among the first to receive this training.

## Key trends

42% of our clients were aged 26–35 years. Of note, 10% of our clients had a formally recognised disability and 11% had chronic health and medical needs.

In recognition of the increasingly complex and comorbidity needs of our clients, especially through Coming Home and the COVID-19 programs, the service is currently integrating aspects of the Toora/EveryMan Integrated Practice Methodology (IPM) into case management. The Building Respectful Families program is also using the IPM model more intensively through incorporating individualised case management and a combination of psychoeducational and psychotherapeutic approaches, including cognitive behavioural therapy, family counselling, and family systems theory. The IPM program has a feminist understanding of gender-based violence.

This year, 16% of clients with accompanying children identified as Aboriginal and/or Torres Strait Islander. This number has remained consistent across the last four years. In recognition of the need to provide culturally sensitive early intervention to Aboriginal and/or Torres Strait Islander women wanting to strengthen their parent-child relationship and to reduce involvement with statutory interventions, we applied for funding to train and supervise workers to deliver a culturally tailored Circle Of Security program. The program was to be delivered by Dr Thabile Twala. Though the grant application was unsuccessful we will continue to source opportunities to be able to provide this culturally specific service.

We continue to see high rates of CALD clients accessing our service, approximately 30% each year, 16% having limited or no English language skills. We support these clients using the Translating and Interpreting Service. This year, we developed a Memorandum of Understanding (MOU) with the Multicultural Hub Women's Service to provide our clients from CALD backgrounds opportunities to access supports offered by the Hub safely and confidentially.

## Future directions

Over the next 12 months we will be preparing the service to be tender ready. As part of enhancing case management practices, we will continue to provide training to staff in using IPM, and particular attention will also be put to the continuing implementation and addition of the methodology protocols for clients needing complex case management support.

In recognising and responding to the women's experience of trauma and adversity and the benefits the in-house counselling provided to our clients during the period of the pandemic, we will be looking at procuring ongoing funding for this service to continue. We are especially grateful for the generosity of Havelock Housing in sharing resources with us and the ACT Government for allocating extra funding to women escaping domestic and family violence.

As a registered community housing provider, we will also use the next year to identify opportunities for expanding our community housing portfolio and property management program.

## Thank you

Thank you to the Board and Susan for their supportive and decisive leadership through what has been a year of unprecedented events. Thank you to Toora Corporate and Toora AOD for your support and teamwork.

A very special thank you to Share the Dignity, Pandora's at O'Connor Preloved Fashion, Oz Harvest, Zonta International, GIVIT, Bond Hair Religion and private donors who have provided much needed donations for the clients and children in our service.

Finally, a very big thank you to my team who had clients across all programs, shared houses and home offices prepared and transitioned to remote operations within 48 hours of notice from the Leadership Team. Once again, under the most difficult of conditions, you have shown an exceptionally high level of care, professionalism and dedication to ensure the safety and wellbeing of our clients and their children.

### Mirsada Draskovic

Director, Toora Domestic Violence and Homelessness Services



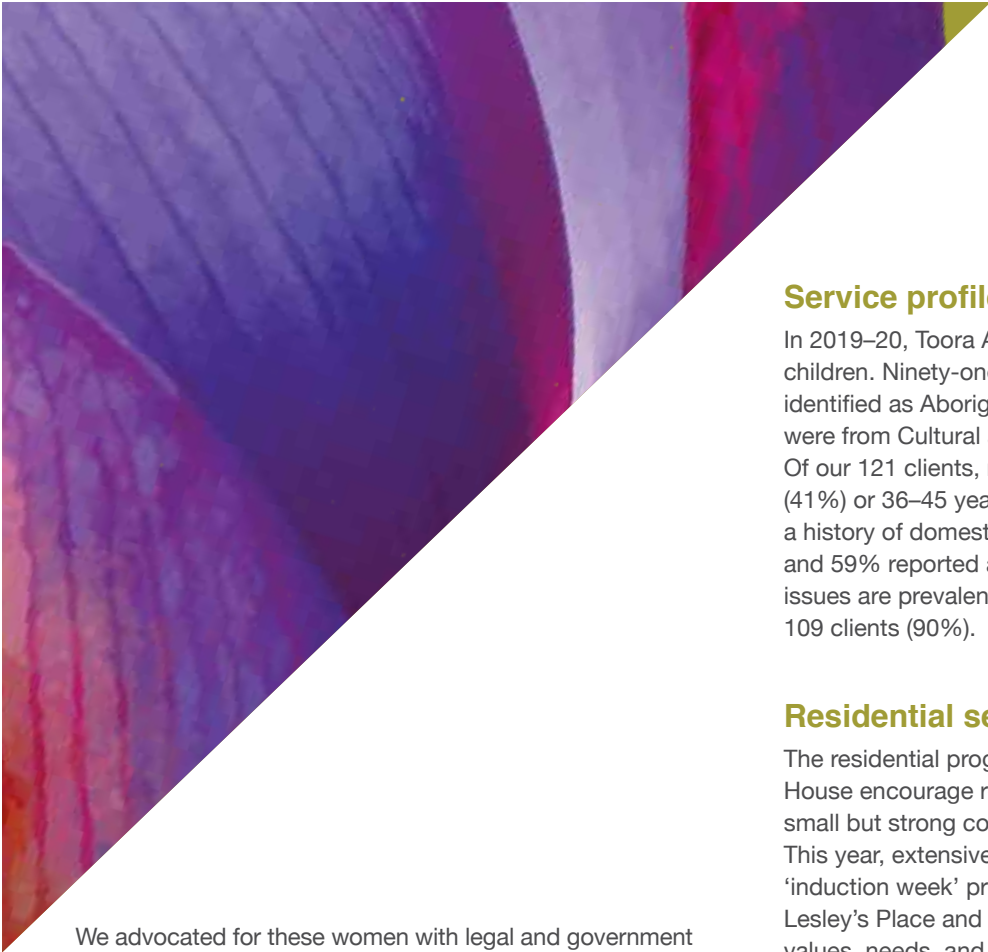
# Toora Alcohol and Other Drugs Services

**D**espite a highly challenging year, the Toora Alcohol and Other Drugs Services (Toora AOD) has consistently provided support and hope for vulnerable women experiencing issues with substance use. While the team is relatively small, we maintain eight distinct areas of operation: the Outreach Program (including SMART Recovery and the Pathways from Prison program), the Day Program, Lesley's Place and Marzena House residential services, the Building Respectful Families program, the Supporting Partners with Strong Emotions program, the Drug and Alcohol Sentencing List (DASL) program and AOD Counselling Services.

The twin stressors of the bushfires and the global COVID-19 pandemic required a complete rethink of how we provide support services while keeping staff and clients safe. Where possible, programs were delivered remotely. Flexible delivery options were developed. All clients, including women in the Alexander Maconochie Centre (AMC) and interstate, were offered appropriate support. None were turned away.

We continued to create a strong, supportive residential community where women can focus on AOD recovery. We implemented principles of Therapeutic Communities, in accordance with our membership with the Australasian Therapeutic Communities Association. A number of women entered Toora AOD programs with their accompanying children or worked towards parenting restoration plans.





We advocated for these women with legal and government services, including Housing and Community Services and the Child and Youth Protection Services (CYPS), and worked hard to provide parenting supports and referrals as needed.

Feedback from a client who completed Toora AOD programs earlier this year sums up the glowing work of the Toora AOD team:

*"It's hard to put into words the journey that I have had here emotionally. I have grown so much as a person and been supported the whole way. I have learnt what my values are and who I want to be. I have a sense of direction in my life, a confidence and comfortability I haven't had before."*

*"I was so young when I used drugs and had been dependent for most of my life that I didn't really know how to live. What I can tell you is that I am leaving here, and I can't promise that life is going to be easy or that I won't struggle, but I can say that I now have the tools to deal with whatever comes my way."*

## Service profile

In 2019–20, Toora AOD supported 121 women and six children. Ninety-one were new clients, of which nine identified as Aboriginal and/or Torres Strait Islander and four were from Cultural and Linguistically Diverse backgrounds. Of our 121 clients, most were aged between 26–35 years (41%) or 36–45 years (29%). The number of clients reporting a history of domestic and family violence was high, at 85%, and 59% reported a history of sexual abuse. Mental health issues are prevalent in this population and were reported by 109 clients (90%).

## Residential services

The residential programs at Lesley's Place and Marzenna House encourage residents to work together to build a small but strong community and long-term support network. This year, extensive work was completed to develop an 'induction week' program to introduce new residents to Lesley's Place and to assist them to identify their personal values, needs, and goals. These are incorporated into their treatment plan at Lesley's Place and carry with them if they transition into Marzenna House. We continue to hold weekly Awareness Groups, where staff and residents work together to discuss personal development, self-reflection and behaviour change.

Many service delivery changes were needed during the COVID-19 shutdowns. Intake into the residential programs was reduced to adhere to social distancing rules. Marzenna House was kept empty to enable clients to self-isolate, where necessary, and to see children visiting from interstate. Residents were supported both in person and remotely. Community was encouraged through a variety of methods, including daily phone calls and participation in the fortnightly team Zoom meetings.

## Day Program and Pathways from Prison

Despite a challenging year, the Toora AOD Day Program continued to offer clients holistic support. Safety was at the forefront of all programming considerations. When face-to-face groups were not possible, we modified the Day Program so that it could be delivered remotely while still covering key content. External agencies, including Legal Aid ACT, Care Inc., the Canberra Alliance for Harm Minimisation and Advocacy, and St. Johns Ambulance ACT, continued to run invaluable sessions in the Day Program and provided information and referrals when face-to-face groups were put on hold.



The COVID-19 restrictions affected the Pathways from Prison program. With the introduction of social distancing requirements in March, sessions at the AMC were suspended. To ensure clients were not left without support, we offered phone assessments and counselling. One client participated in the Day Program remotely. Face-to-face groups in the AMC will resume when it is safe to do so. Clients provided positive feedback regarding the value of the Pathways from Prison program, noting that it is often their first introduction to Toora AOD before seeking to link in with other Toora AOD programs upon re-entering the community.

This year also brought with it staffing changes. After one of our two Day Program facilitators went on maternity leave and the other moved into a new role within Toora AOD, we welcomed two new Day Program facilitators. Like their predecessors, the new Day Program facilitators brought a plethora of skills and enthusiasm to the role.

## Collaborations

There is strong evidence of a link between alcohol and drug use and domestic and family violence. More than 80% of Toora AOD clients report domestic and family violence in their relationship.

In partnership with EveryMan Australia (EveryMan) and TDVHS, we introduced the Building Respectful Families program and the Supporting Partners with Strong Emotions program for couples that identify domestic and family violence related to drug or alcohol use in their relationship. We support the female partner while EveryMan supports the male partner. The positive outcomes achieved for our clients demonstrate our excellent partnership and collaborative way of working in developing and delivering quality programs.

The programs are based on the highly successful methodology developed by the Bower Place clinic in Adelaide, where key staff from Toora AOD and TDVHS completed a week-long internship in 2019. We regularly meet with staff from EveryMan and TDVHS to provide the clients the best treatment possible through working together to analyse cases, problem solve and support each other (p. 9).

Toora AOD works in close collaboration with CYPS in the ACT and similar agencies in the surrounding areas. The main focus is to ensure that children are kept safe from harm. Toora supports mothers to address substance use issues and build life skills to ensure a safe and caring environment for their children. By working closely with CYPS we aim to help mothers keep children in their care or work towards a smooth and successful restoration process. Children can enter Toora or be reunited with their mothers while their mothers are in the AOD programs, providing wrap-around support for both mother and child.

## Systemic input

We continued our close cooperation with ACT Health and the Alcohol Tobacco and Other Drug Association (ATODA). We worked with the ACT Health Directorate to develop COVID-19-safe health services and participated in the consultation process for the ACT Medically Supervised Injecting Facility Feasibility Study.

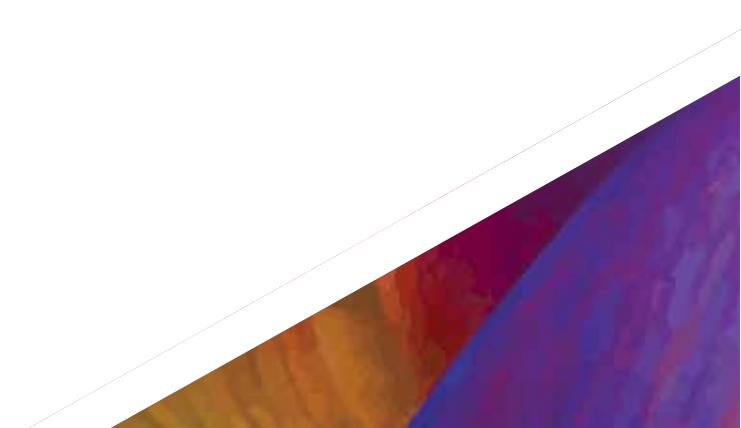
Along with other members of the specialist ACT AOD sector, we were invited to develop an alternative sentencing program for offenders whose crime is related to drug or alcohol dependency. We worked with the sector, the ACT Supreme Court and ACT Health to design a program that allows clients to choose the treatment provider that best suits their needs and is sustainable for health treatment services. We found that the program is an invaluable support for clients and contributes to rehabilitation efforts and improved health outcomes. We hope to be able to continue the DASL program in the future. Feedback from a DASL client demonstrates the program's value:

*"The Day Program at Toora and my case worker have played a big part in my recovery. I now have the tools to stay clean and start my new life and to be the best mother I can be to my children. I can't not thank everyone at Toora enough for treating me with dignity and respect and for giving me my life back. You're all amazing."*

## Key trends and gaps

This year, we noted three key trends. First, alcohol use remained the primary reason for seeking support. Of the 91 new clients in 2019–20, alcohol use was the primary concern for 35 clients, followed by methamphetamine (28 clients), cannabis (14 clients), heroin (11 clients) and misusing prescription medication (3 clients).

Second, the COVID-19 pandemic measurably affected our clients' health and wellbeing. Following the introduction of the COVID-19 restrictions, clients' alcohol consumption increased. Clients reported feeling anxious and isolated. They felt more at risk of reusing, as their usual sources of accountability, such as attending school or work, were no longer in place. Clients also advised that it was extremely challenging not being able to follow their usual plans for maintaining sobriety or general wellbeing, such as seeing family, attending groups or spending time in safe places like libraries or gyms. Several past clients reached out for, and received, support to maintain their recovery journey and their sense of connection to others.



*"The accountability is gone. I'm working from home; I don't need to take the kids to school. No one is going to know if I have a few drinks during the day, so I'm really struggling to stay on track."*

*"I need some extra supports from Toora at the moment, I'm feeling really vulnerable, all the things I usually do are gone, like going to CIT, and I'm feeling really alone."*

*"I had to write a new safety plan, as all the things I usually do to distract myself, like go to the library or meet a friend for a coffee, just can't be done."*

*"I want to see my kids; we were working towards restoration and now the service that brings them for the visits between NSW and ACT won't travel – when am I going to see them?"*

Third, as in previous years, interest from women who care for children is high. We remain the only gender-specialist residential AOD service in Canberra that supports women and their accompanying children. Many clients do not have their children in their full-time care. Some are working on restoration plans with CYPS. Senior Toora AOD staff worked on the development of a Parenting Needs Assessment tool to be used with clients prior to entry into our service. This tool allows clients to explore what support both they and their children may need.

As a gender-specialist service, we consider the needs of women and children to be a central part of our programs. It is often crucial to work in this area to support holistic AOD recovery. Our vision is to expand Toora AOD Counselling Services to include a dedicated Child and Family Counsellor.

## Future directions

Highlights of the past year include participating in the Domestic and Family Violence Capability Assessment Tool (DFVCAT) Baseline Assessment Project. The resulting report found that we operate at a DFVCAT service level of Coordinated Care (Level 4). This demonstrates our commitment to best practice support for AOD clients who have experienced domestic and family violence. Future directions shall focus on how we can resource and support staff to meet Integrated Care (Level 5) requirements.

The Toora AOD team values every team member. Ours is a highly functioning team where every voice is respected. Together, we recognised room for growth around having uncomfortable conversations to enhance our peak performance. This year, we completed coaching style training to learn how to more effectively communicate and draw out our strengths and experiences. In the coming year, we will focus on embedding these learnings so that we can continue to thrive as a safe and supportive team.

As the Director of Toora AOD, I spoke at the annual CPA Australia: Women in Leadership Lunch to raise Toora's profile and share details of the amazing work we do. I aim to be speaking at more events in the future.

## Thank you

I would like to thank the AOD team for their ongoing commitment to their clients, to each other and to the Toora AOD programs. This year, some staff moved on to new opportunities elsewhere. Others joined the team, bringing with them passion and enthusiasm. The connection between each team member has kept us going from strength to strength even through such an unprecedented year of challenges. Well done team, and I look forward to us continuing to share knowledge and draw inspiration and strength from each other into the future.

I would also like to extend my thanks to the Board, our CEO Susan Clarke-Lindfield, Team Leader Nicole Ter Horst, TDVHS, and the Corporate Team for their ongoing support throughout the year.

We would also like to thank the ACT AOD specialist sector and the ACT community for their time and donations. These have made such an amazing difference to our programs and to our clients' lives.

## Rebecca Wood

Director, AOD and Clinical Services





## Toora Alcohol and Other Drugs (AOD) Counselling Services

**2019–20 was a year of change for Toora AOD Counselling Services. The year began with staff changes. We farewelled our counsellor, Ashleigh, who moved to private practice, and welcomed Karina, who transitioned from her role as Group Facilitator for the Toora AOD Day Program. In March 2020, COVID-19 started impacting service delivery, requiring us to change how we provide individual and group counselling to both our residential and our community clients.**

We adapted. Counsellors worked from home, supporting counselling clients over the phone and via Zoom. We completed 166 counselling appointments remotely. Client engagement remained high. We also supported client engagement by moving to flexible working hours for our counsellors. If a client required an appointment outside normal business hours, we worked to accommodate this where possible.

While working remotely, we combined our online staff meetings with the Toora AOD team. Zoom meetings for tasking occurred daily. Clinical meetings occurred fortnightly. The meetings were a core part of client care, as they provided a platform to work together to tailor client treatments and interventions.

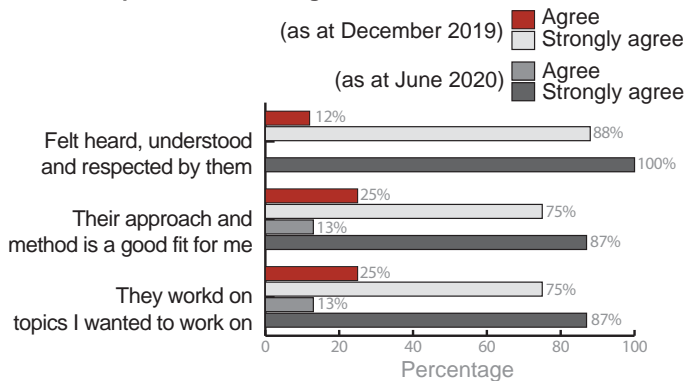
Counsellors continued to meet fortnightly with the Toora AOD Intake Worker and the Toora AOD Team Leader to discuss upcoming referrals and counselling client closures. This streamlined the referral process and ensured that clients were allocated the counsellor most suited to their needs. It also ensured that clients who finished the recovery programs at Lesley's Place or Marzenna House were offered further support by Toora where required.

In total, 684 appointments were booked this year. Of these, 441 were attended, 181 were rescheduled and 62 were, without notice, not attended. Attendance increased from 57% in 2018–19 to 65%. Due to the nature of addiction and related issues of trauma, mental health concerns, homelessness and legal issues and the impact of COVID-19, we understand that attendance can be intermittent for the AOD population. Rescheduled appointments can be viewed as positive. They demonstrate flexibility and willingness to accommodate our clients' needs. We also relaxed closures for intermittent attendees affected by the stressors of COVID-19.

We continually attend training programs to build our capacity to support our clients. This year, we attended seminars and webinars about suicide awareness and prevention, personality disorders, domestic and family violence, and best-practice developments in AOD treatment theory and practice. Our counsellors continued their professional development by working towards a Diploma in Leadership & Management and an EMDR Diploma. In line with industry standards, and to support staff development and self-care, all counsellors had access to external supervision and counselling support.



### Client experiences: working with Toora counsellors



### Service profile

Of the 87 clients referred to Toora AOD Counselling Services, 61 engaged in therapy. Their median age was 36; ages ranged from 21 to 63. This is consistent with 2018–19 figures. This year, 41 clients had been residents of other Toora services. Twenty-six had spent time in corrective services. Twenty-one had attended the Healing Trauma Group. Forty-one reported childhood trauma. Fifty (81%) reported past or present domestic and family violence.

Prior to COVID-19, the Healing Trauma Group was delivered face-to-face three times. The group is run over six sessions and focuses on overcoming the ongoing, and often hidden and misunderstood, effects of trauma. This year, 17 clients began the program; 9 graduated. Following the commencement of the COVID-19 restrictions, the Healing Trauma Group was suspended. We have recently recommenced delivering the program in conjunction with counselling. Four clients undertook this revised program. One graduated, two are near graduation and one client is expected to complete the program in due time. This is an amazing outcome, as such intensive treatment can be difficult for clients due to life circumstances. Feedback about the Healing Trauma Group continues to be very positive.

### Collaborations

This year, we continued to work with Northside Community Service to offer our clients flexible access to childcare services. This enabled one client to attend counselling without her child being present. Access to safe, professional childminding services is crucial for some clients, as having to parent during a counselling session can make it difficult for clients to fully participate in the therapeutic process.

We have a strong relationship with the University of Canberra. We receive a steady stream of students who require a placement to complete their studies, including Master of Counselling, Bachelor of Science in Psychology and Graduate Diploma in Counselling. Two students had placements within the service this year. Unfortunately, the second placement had to end short of the required hours due to COVID-19 and remote working restrictions. We have not been able to take any further placements as of yet. We are in close and regular contact with the university and are together making plans for these placements to resume as soon as possible.

As part of the broader AOD team, the counselling team also contributed to Toora AOD's work with the ACT community services sector.

### Key trends and gaps

The primary drugs of concern were methamphetamine (39%), alcohol (32%), cannabis (6%) and heroin (6%). Compared with 2018–19, methamphetamine use rose slightly while alcohol use remained almost the same. The biggest difference was the 17% reduction in cannabis use and a slight reduction in heroin use.

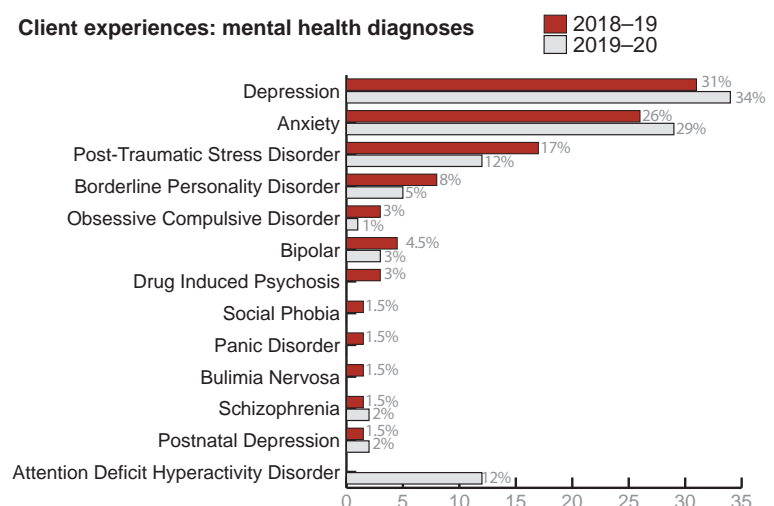
Many clients presented with multiple mental health issues. The most reported conditions were depression, anxiety, post-traumatic stress disorder (PTSD) and borderline personality disorder. As with previous years, depression, anxiety and PTSD remained prevalent in clients. This year, we noticed a sharp rise in the number of clients presenting with formal diagnoses of ADHD.

### Future directions

Toora AOD Counselling Services will review the impact of COVID-19 on service delivery, staff and clients. However, even without this analysis, there is a clear need to improve continuity of care for incarcerated clients. We will petition ACT Corrective Services to allow our clients to continue working with Toora AOD Counselling Services while incarcerated.

While we primarily focus on alcohol and drug use, we recognise there is a link between AOD concerns and domestic and family violence. To provide trauma-informed, holistic counselling support, we routinely address matters relating to domestic and family violence in all areas of treatment planning. This year we participated in the Domestic and Family Violence Capability Assessment Tool project and achieved a Level 4 rating, meaning we identify issues relating to domestic and family violence and can deliver more advanced support. Going forward, we will determine what training and resources are required to equip the service to provide Level 5 support.

### Client experiences: mental health diagnoses



## Thank you

Even in uncertain and challenging times, with the bushfires and the COVID-19 pandemic, we continued to offer outstanding support for vulnerable women. I wholeheartedly thank the team for their constant dedication and commitment to Toora Women Inc. Counselling is an essential part of holistic, long-term recovery; thank you for creating a safe, empowering space for our clients.

*"My experience with counselling has been a breath of fresh air, and not at all wasted. It doesn't matter who I see, the experience is consistent: a collective safety net. I've never felt that I'm being 'flicked off' from one person to the next. Equally as important, I don't feel like another hospital patient, where information is being so casually exchanged."*

*"Thank goodness I found Toora and my counsellor. I am so much happier and calmer now. I am no longer depressed and have been able to let go of a lot of anger and pain."*

*"For me, my sessions have been life changing. I have learnt so much about myself."*

I would like to thank Toora AOD, TDVHS, Northside Community Service and ATODA for their ongoing support. We also had the support of the Canberra community and specialist ACT legal, social and AOD services. Thank you for working with us to provide holistic, wrap-around support for our mutual clients.

**Rebecca Wood**

Director, AOD and Clinical Services



## Treasurer's Report

**This year has been like no other for Toora Women Inc. Toora is always finely balanced between being profitable and making a loss. To this end, the Finance Committee meets every month to review the organisation's financial position. The Finance Committee consists of the Treasurer, the CEO and the Financial Controller. The committee reports directly to the Board at its monthly meetings and examines the actual expenditure, the forward budget and how this all fits into Toora's strategic direction.**

Table 1. Toora income 2019–20

| Where the money comes from               | \$                  |
|--|---------------------|
| Domestic Violence & Homelessness Service | 3,182,533           |
| Alcohol and Other Drugs Service          | 1,592,146           |
| Covid-19 Subsidy and Stimulus Package    | 77,292              |
| Donations                                | 37,382              |
| Rent and other contributions             | 598,929             |
| Bank interest & other income             | 127,656             |
| <b>Total</b>                             | <b>\$ 5,615,938</b> |

Most of the income that we generate comes from Government funding, so the Finance Committee is looking at finding new sources of income going forward.

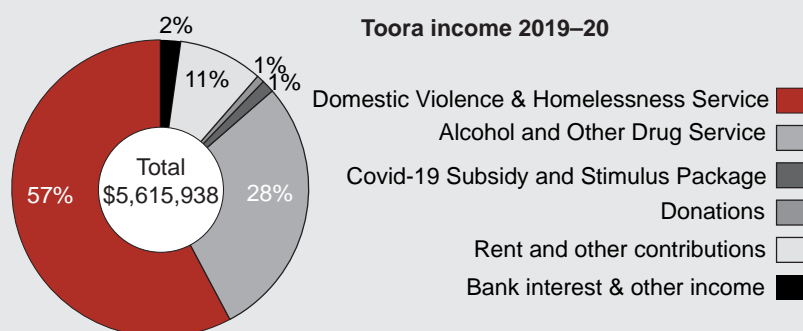
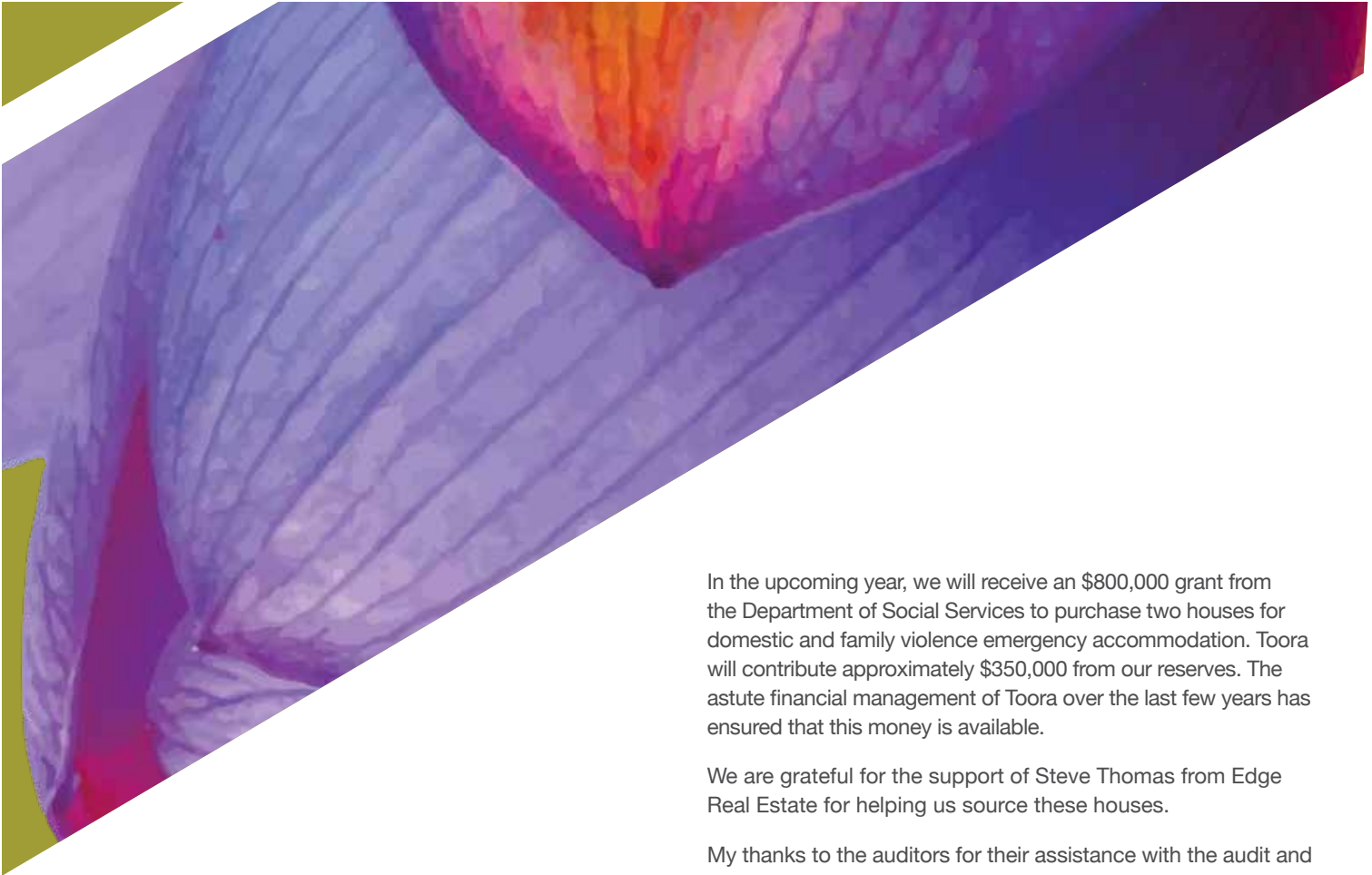
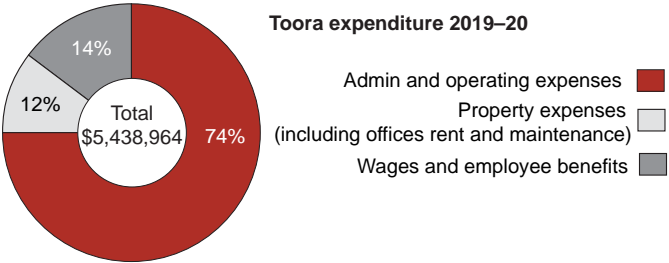


Table 2. Toora expenditure 2019–20

| Where the money goes                                       | \$                  |
|--|---------------------|
| Wages and employee benefits                                | 4,017,424           |
| Property expenses (including offices rent and maintenance) | 643,915             |
| Admin and operating expenses                               | 777,626             |
| <b>Total</b>   | <b>\$ 5,438,964</b> |



Most of our expenditure is on wages and employee benefits. There is not a lot left for all our other costs, so we must budget carefully and make sure that we are controlling our expenditure.



The budget process is working well. The Directors meet with the CEO and the Financial Controller on a regular basis to prepare and monitor the budget. This process allows appropriate decisions to be taken by the Leadership team. We have also approved our three-year financial forecasts, which will enable us to be even more proactive with our financial strategies and performance monitoring. We are now looking forward to forecasting over an even longer term.

COVID-19 created some challenges that had financial impact. Fortunately, government subsidies enabled us to weather the storm. We had a smooth changeover to a new payroll outsourcing company and we are changing to a new system of time recording that should enable things to run even more smoothly.

In the upcoming year, we will receive an \$800,000 grant from the Department of Social Services to purchase two houses for domestic and family violence emergency accommodation. Toora will contribute approximately \$350,000 from our reserves. The astute financial management of Toora over the last few years has ensured that this money is available.

We are grateful for the support of Steve Thomas from Edge Real Estate for helping us source these houses.

My thanks to the auditors for their assistance with the audit and throughout the year. Changes to Toora staff and processes have resulted in less stress to all at audit time.

I would also like to thank all the Toora Women Inc. staff for their hard work in making Toora the financially sound organisation that it is today. The Finance Team deserves a special mention, as the information they provide is always clear and concise and makes my job a lot easier. We could not do this without you and your input and assistance.

Lastly, I would like to thank my fellow Board members. Board meetings are a delight, and I am pleased that the Board members all take a keen interest in matters financial.

In summary, this has been another good year for Toora Women Inc. financially. We work together as a team and have sound financial management practices that ensure we operate within our means. I am looking forward to our future as property owners as this marks another change for Toora going into the future.

Thank you all.

**Gail Freeman, FCA**  
Toora Treasurer



If you wish to view a copy of the audited accounts, please contact the Corporate Office at Toora, 6122 7000 or email [TooraAdmin@toora.org.au](mailto:TooraAdmin@toora.org.au)



## INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF TOORA WOMEN INCORPORATED

### Report on the Audit of the Financial Report

#### Opinion

We have audited the accompanying financial report of Toora Women Incorporated (the association), which comprises the statement of financial position as at 30 June 2020, the statement of profit or loss, statement of comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, notes comprising a summary of significant accounting policies and other explanatory information, and the committees' declaration.

In our opinion, the accompanying financial report of Toora Women Incorporated has been prepared in accordance with Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012* (the ACNC Act), including:

- (i) giving a true and fair view of the association's financial position as at 30 June 2020 and of its financial performance for the year then ended; and
- (ii) complying with Australian Accounting Standards – Reduced Disclosure Requirements and Division 60 of the *Australian Charities and Not-for-profits Commission Regulation 2013*.

#### Basis for Opinion

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

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

#### Emphasis of matter

We draw attention to Note 1(p) of the financial report which notes the outbreak of COVID-19 as a global pandemic how this has been considered by the directors in the preparation of the financial report. The impact of COVID-19 is an unprecedented event, which continues to cause a high level of uncertainty and volatility. As set out in the financial statements, no adjustments have been made to financial statements as at 30 June 2020 for the impacts of COVID-19. Our opinion is not modified in respect of this matter.

#### Responsibilities of the Committee for the Financial Report

The committee of the registered entity are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards – Reduced Disclosure Requirements and the *Australian Charities and Not-for-profits Commission Act 2012* and for such internal control as the committee determines 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 the ability of the registered entity to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the committee either intends to liquidate the registered entity or to cease operations, or has no realistic alternative but to do so.

The committee are responsible for overseeing the registered entity's financial reporting process.

*Liability limited by a scheme approved under Professional Standards Legislation*



## INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF TOORA WOMEN INCORPORATED

### Auditor's Responsibility for the Audit of the Financial Report

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not a guarantee that an audit conducted in accordance with the Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of 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 registered entity's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the committee.
- Conclude on the appropriateness of the committee'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 registered 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 auditor's 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 auditor's report. However, future events or conditions may cause the registered entity to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the committee 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.



Shane Bellchambers, FCA  
Registered Company Auditor  
BellchambersBarrett

Canberra, ACT  
Dated this 23<sup>rd</sup> day of November 2020



## Services and programs

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### **Corporate Office**

Executive

Finance

Marketing and Communication

Policy, Quality Assurance and Risk

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### **Toora Domestic Violence and Homelessness Services**

Heira Domestic Violence Program

Women and Children's Program

Families Program

Toora House Supported Accommodation Program

Coming Home Program

Aleta Outreach Program

Head Tenant Program

Property Management

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### **Toora Alcohol and Other Drug Services**

Toora AOD Day Program

Lesley's Place Residential Program

Marzenna House Transitional Program

Toora AOD Outreach Program

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### **Toora Counselling Services**

AOD counselling



