



NSW ASSOCIATION FOR YOUTH HEALTH INC.
ANNUAL REPORT
01 JULY 2009 — 30 JUNE 2010



NSW ASSOCIATION FOR YOUTH HEALTH INC.

ANNUAL REPORT

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The NSW Association for Youth Health Incorporated (NAYH, previously known as the NSW Association for Adolescent Health) is the peak body committed to working on behalf of the youth health sector in NSW to promote and advocate for the health and well being of marginalised young people aged 12 to 25 years.

NAYH works closely with youth health services in NSW and the majority of NAYH's work focuses on providing the youth health sector with support and training, research and advocacy, policy and resource development, and community sector networking.

NAYH acknowledges that health is much more than simply the absence of illness and disease, and recognises the impact that social and environmental factors, such as: poverty; gender; housing and homelessness; cultural and ethnic background; family functioning; and geographical location and connectedness with school or community, significantly impact on the health and well being of young people.



COMMITTEE'S REPORT

For the year ending 30 June 2010 The NSW Association for Youth Health

Your committee members submit the financial report on the entity for The NSW Association for Youth Health year ended 30 June 2010.

Committee Members

The names of Committee Members during the year and to the date of this report are:

- Anthony Stralow
- Cheryl Davenport
- Mark Morris
- Kristen Day
- Michael Cummings
- George Mudford
- Amanda Webster
- Susie Purcell

Principal Activities

The principal activity of Association during the financial year was to work with and advocate for the youth health sector in NSW to promote and advocate for the health and well being of young people aged 12 to 25 years.

Operating Result

The operating surplus amounted to \$1,560.

Significant Changes in State of Affairs

No significant changes in the entities state of affairs occurred during the financial year.

After Balance Date Events

Since balance date there has been no significant event.

Indemnifying Officers or Auditor

No indemnities have been given or insurance premiums paid, during or since the end of the financial year, for any person who is or has been an officer or auditor of the entity.

Proceedings on Behalf of the Entity

No person has applied for leave of Court to bring proceedings on behalf of the entity or intervene in any proceedings to which the entity is a party for the purpose of taking responsibility on behalf of the entity for all or any part of those proceedings.

Auditor's Independence Declaration

The lead auditor's independence declaration for the year ended 30 June 2010 has been received and can be found at the end of this report.

Signed in accordance with a resolution of the Board of Directors.

Committee Member _____

Committee Member _____

Dated this 2 November 2010



Anthony Stralow

President
NSW Association for Youth Health Inc.

PRESIDENT'S REPORT

In 2009-2010 NAYH played a strong role in advocating on behalf of the needs of the Association's members and the youth health sector through several new initiatives and will continue to build upon this in the coming year. Please see the Executive Officer's Report for more detailed information.

The approaching year brings some new challenges for NAYH and the Youth Health Sector. This includes implementing the second phase of the Comprehensive Quality Process project and implementing other projects to research the effectiveness of youth health services in proving positive outcomes for young people. This will increase the evidence base for youth health services and enable recognition of the excellent work that youth health services perform. However, it may also mean that youth health services have to challenge the status quo of youth health service delivery and find new innovative ways of service delivery. Youth health services are committed to quality service delivery so I am sure that any recommendations of improving services will be met enthusiastically – adapting to change accordingly.

I would like to thank you all for your support and commitment to NAYH. An organisation such as NAYH survives and thrives on the commitment and passion of those who serve it. Firstly, it has been a pleasure to work with our Executive Officer, Emma Marshall and our Administrative Assistant, Shannon Elliot, who together ensure that NAYH stays focused on its duties and serving the youth health sector. Emma has taken maternity leave and has been replaced by Jason Appleby. We wish Emma good luck with her growing family and we welcome Jason into the Executive Officer role.

Finally, I would like to thank those who served on the NAYH Board: Mark Morris; Michael Cummings; George Mudford; Susie Purcell; Amanda Webster; Cheryl Davenport; and Kristen Day. It has been a privilege to serve as the President of NAYH and I look forward to continuing to work with and support the Association in the year to come.

EXECUTIVE OFFICER'S REPORT

The year 1 July 2009 to 30 June 2010 has been an exciting and reinvigorating year for the NSW Association for Youth Health. As Executive Officer, I feel the Association took a journey of development and consolidation, all whilst maintaining a focus on promoting and advocating for the social, health and well being needs of marginalised young people in NSW.

Emma Marshall

Executive Officer, July 2009 to June 2010
NSW Association for Youth Health

In December 2009, the Association formally announced its change of name from *NSW Association for Adolescent Health* to *NSW Association for Youth Health*. The Association's Board, Staff and Members were all in agreement that this new name more strongly embraced the age range of 12 to 25 years. In addition to a new name, the end of 2009 also saw the launch of the Association's new website and logo. This enabled consistent branding for the Association to be across publications, including the Association's monthly electronic E-news.

In 2009 to 2010, the Association introduced additional services to members which aimed to increase the capacity of the youth health sector. These services included the introduction of the Members Online Community, Capacity Building Grant Program and training workshops regarding youth smoking cessation.

The NAYH Management Committee have continued to provide vision, advocacy and support not only to the Association but also to the youth health sector. In particular, I take this opportunity to thank Anthony Stralow for his vision, support and guidance. I would also like to thank Committee Secretary, Mark Morris, and Committee Members Susie Purcell, Michael Cummings, Cheryl Davenport, Kristen Day, Amanda Webster and George Mudford for their endless commitment to youth health. During my time with NAYH, I have been afforded a vast array of opportunities and thank the NAYH Management Committee for their support.

Finally I would like to take this opportunity to thank the large number of individuals and organisations who have worked collaboratively with the Association on a range of issues impacting on the health of young people in NSW. The Association looks forward to continuing, and building, our work on behalf of youth health sector and marginalised young people in NSW in the coming year.



ABOUT NAYH

The NSW Association for Youth Health (NAYH) is the peak body for health service providers committed to promoting and advocating for the health and wellbeing of young people aged 12 to 25 years in NSW. NAYH is a membership-based organisation and represents over 100 members. NAYH has a strong interest in advocating for the health needs of marginalised young people whose health status and help-seeking behaviours and health status may be compromised, for example, by homelessness, family breakdown, poverty, mental illness, substance use, unemployment and/or disengagement from education. NAYH regards 'marginalised young people' as those young people who are at risk of, or currently are:

- socio-economically disadvantaged;
- Aboriginal and Torres Strait Islander;
- culturally and linguistically diverse;
- refugees;
- homeless or at risk of homelessness;
- gay, lesbian, bisexual and transgender;
- living with a disability;
- socially isolated;
- living in regional and rural areas;
- experiencing mental health problems;
- experiencing alcohol or emerging drug and alcohol problems;
- experiencing a dual diagnosis;
- at-risk of, currently in or leaving out of home care;
- in contact with the criminal justice system;
- victims of crime;
- have responsibility to care for a family member and/or others with a long term illness, disability, mental illness or drug or alcohol problem (ie young carers);
- living with a history of abuse, neglect and trauma; and
- experiencing family breakdown.

NAYH is funded by the NSW Department of Health, through their NGO Funding Stream and has received funding from NSW Health for over fourteen years. NAYH employs one part time (currently 0.8 FTE) Executive Officer, Research and Youth Health Consultants, and casual administration and bookkeeping staff as needed.

NAYH works closely with the State's fifteen Youth Health Services and with the NSW Centre for the Advancement

of Adolescent Health (NSW CAAH). Most of NAYH's work focuses on Youth Health Sector support and training, government liaison and lobbying, policy and resource development and community sector networking.

At the NAYH Strategic Planning Days, held September 2009 and February 2010, NAYH's Mission Statement, Guiding Principles and Objectives were reaffirmed to reflect the work of NAYH, its purpose and funding mandate:

Mission Statement

The NSW Association for Youth Health Inc. is the peak body committed to working with and advocating for the youth health sector in NSW to promote the health and well being of young people aged 12 to 25 years.

Guiding Principles

The following principles inform the processes by which the NSW Association for Youth Health Inc. conducts business and meets its objectives:

1. Health is more than the absence of disease, but rather, a state of complete physical, mental and social well being. This notion accepts the social determinants of health which requires intersectoral collaboration and population-based approaches in addition to traditional models of health service delivery to young people.
2. Promoting equal opportunities and access to services can improve the health and well being of all young people, particularly at-risk or under-represented young people.
3. Health service delivery which promotes social justice and fairness can enable young people to reach their full potential and have their human rights respected.
4. Collaboration and consultation with the youth health sector and intersectoral partners facilitate the Association's ability to meet its vision, mission statement and objectives.
5. Building the capacity of the youth health sector strengthens and maintains the provision of relevant and evidence-based services to young people aged 12-25 years.
6. Regular critical review and planning ensures accountability and promotes the strategic governance and operation of the Association.

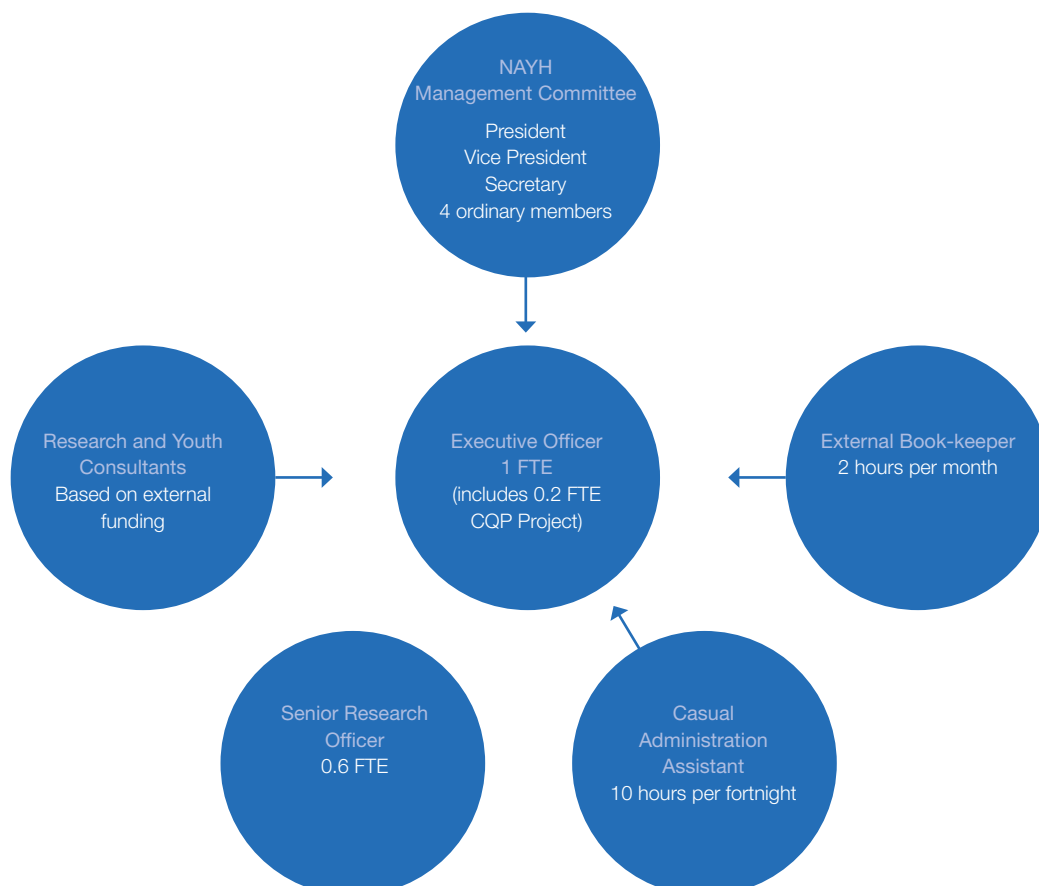
Objectives

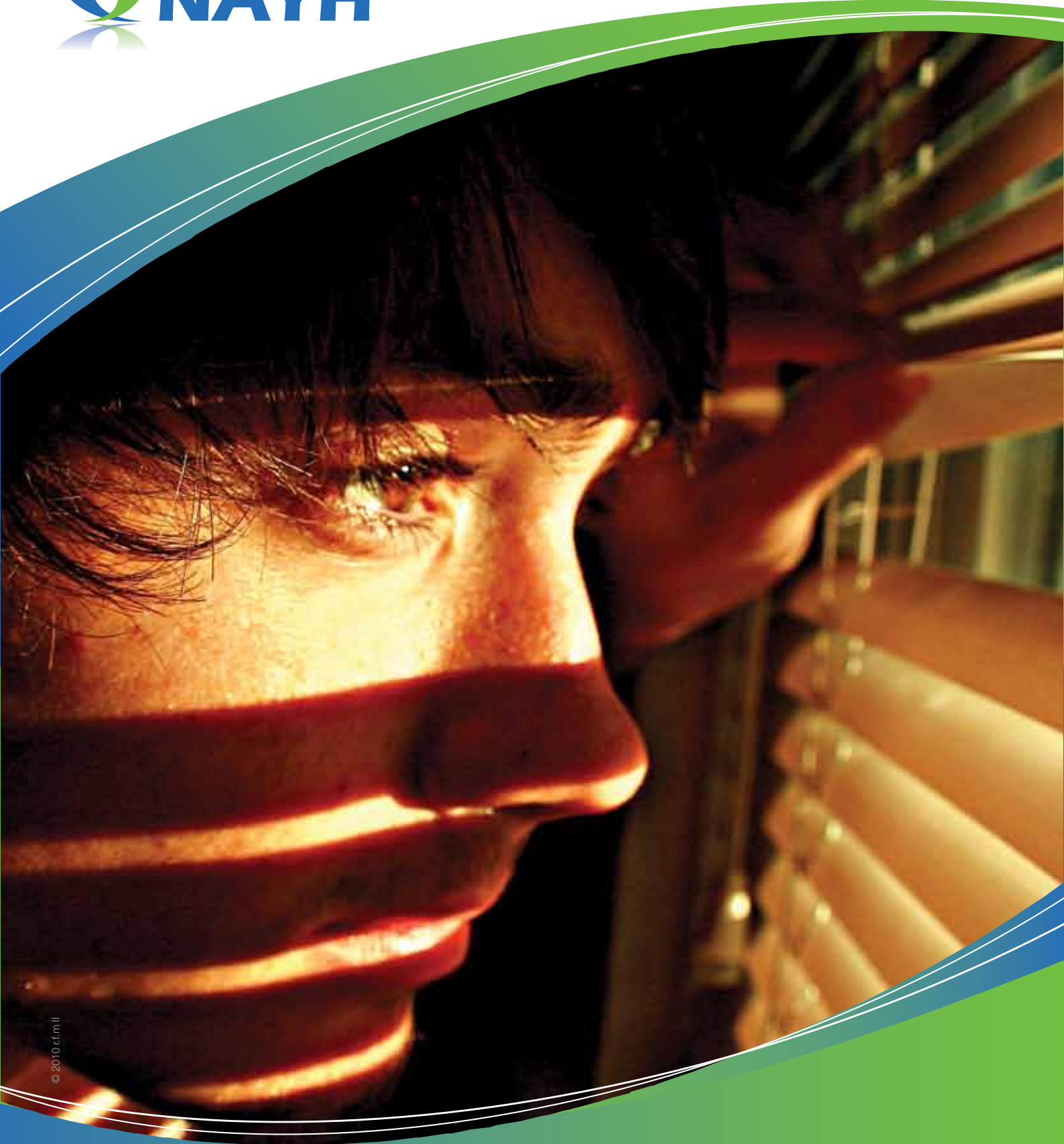
- To build, enhance and maintain strategic relationships with key partners
- To develop and participate in collaborative projects in response to the needs of the youth health sector and young people's needs
- To represent, advocate for, and support the youth health sector and youth health issues at all levels
- To enhance and maintain NAYH's profile and increase its membership base and communication channels and provide support to and advocate for those working with young people and or issues relating to youth
- To build and maintain NAYH's organisational and risk management and quality improvement structures

Strategies

- Advocating on behalf of young people and the youth health sector;
- Informing and influencing policy and legislation;
- Promoting the development and needs of the youth health sector;
- Building the capacity of youth health sector;
- Providing a supportive network through access to information, education, professional development and research;
- Encouraging research regarding youth health and youth health service provision;
- Promoting public and professional action on the health and well being of young people; and
- Providing opportunities for consultation with young people and service providers.

Organisational Structure





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SUMMARY OF ACHIEVEMENTS for 2009-10

The following headings of the Association are derived from the organisation's Business Plan for July 2009 – June 2010.

Strategic Relationships

AIM 1: To build, enhance and maintain strategic relationships with key partners

NAYH continues to form strategic relationships with a range of government and non-government organisations and departments; this has included involvement with the following:

NSW Health

The Association has built relationships with the Primary Health and Community Care Branch through the involvement on the NGO Advisory Committee (convened by the Primary Health and Community Care Branch) and various other NSW Health Steering Committees. In February 2010 NAYH was invited and joined the newly formed Chlamydia Working Group to assist NSW Health in developing a strategic response to Chlamydia infections in young people and the new NSW STI Strategy.

From July 2009 to June 2010, NAYH participated in the NSW Youth Health Policy Reference Group regarding the new youth health policy for NSW (as overseen by NSW Centre for Advancement for Adolescent Health).

NSW Centre for the Advancement of Adolescent Health (CAAH)

The Association continues to support and collaborate with the NSW Centre for the Advancement of Adolescent Health (NSW CAAH) based at the Children's Hospital, Westmead. NAYH is a member of the CAAH Advisory Board and also the Youth Health Forum Organising Committee and regularly participates in associated meetings and events. In particular, in March 2010, NAYH co-convened the Youth Health Forum, titled *Youth Homelessness: Evidence and approaches to working effectively together*. NAYH facilitated speakers for this forum, including interstate guest speaker Dr Guy Johnson from the Australian Housing and Urban Research Institute (Melbourne).

Peak bodies

NAYH sits on and contributes to the following Committees overseen by other peak body's in NSW:

Council of Social Services of NSW (NCOSS)

- Health Policy Advisory Group
- Federation of Non Governmental Associations (FONGA)

Youth Action and Policy Association (YAPA)

- Multicultural Youth Issues Network NSW (MYINN)

Youth Accommodation Association (YAA)

- Health Division Advisory Committee

Other committees

- NSW Youth Health Council
- NSW Cancer Council Tackling Tobacco Expert Advisory Committee

The Association continues to form strategic relationships with a range of government and non-government organisations and departments to advocate for the health and well being needs of marginalised young people and the information, service and policy needs of the youth health sector.

Responsive Projects with Partners

AIM 2: To develop and participate in collaborative projects in response to the needs of the youth health sector

NAYH developed several collaborative projects during the 2009-2010 financial year, including:

Capacity Building Workshops for the Youth Health Sector: Working with young people and smoking

In August 2009, NAYH received funding from the Cancer Council NSW to work in partnership with the Youth Action and Policy Association (YAPA) to undertake capacity building workshops for the youth health sector regarding youth smoking cessation. This Project engaged youth health services and other youth related services in NSW and aimed to build the capacity of people working with marginalised young people to address tobacco and smoking related



issues with their clients. As a result of this Project, participants reported increased confidence and intention to incorporate smoking cessation strategies into routine service delivery and case work practice.

From October to November 2009, four, full day training workshops were held in metropolitan and regional NSW: Lismore, Taree, Camperdown and Parramatta. Workshop content focused on:

- Introduction to smoking and socio-disadvantage;
- Profile of smoking and young people in NSW;
- Best practice approaches when working with marginalised young people;
- Short term effects of smoking;
- Brief intervention strategies; and
- Useful smoking cessation resources.

Project participants (that is, those people who attended the training workshops) included: nurses, youth health workers, job network officers, youth workers, drug and alcohol counsellors, health promotion and education officers, juvenile justice officers, post-release support workers, case workers, service coordinators and managers, Aboriginal health workers and social work tertiary students who work with marginalised young people.

Evaluation of the training workshops identified that the workshop content were well received by participants, with the majority noting increased knowledge of youth smoking related issues and supportive resources and tools, and increased confidence to incorporate smoking cessation strategies into routine service delivery and care work practice. Participants also indicated that the workshops met their training needs in regards to tobacco control when working with young marginalised people and identified intention to address smoking related issues with their clients in the future.

Research Project Efficacy of youth health service provision among young people with mental health problems in NSW

Following in-principle notification of funding from *beyondblue* towards the Research Project *Efficacy of youth health service*

provision among young people with mental health problems in NSW, NAYH employed research consultant, Dr Mindy Sotiri, to further develop the proposal, outline ethics proposal and consult with project partners and key stakeholders in regards to project development.

In January 2010, NAYH received official funding and contractual arrangements from *beyondblue* for the Project, and following consultation with the Brain and Mind Research Institute (BMRI), NAYH submitted the Project's Ethic's Proposal to Sydney South West Area Health Service – RPA Research Development Office in June 2010. Following receipt of ethics approval, the Project will commence in July 2010.

The BMRI continue to be a research partner with this Project.

The Comprehensive Process (CQP) Project

NAYH received funding from the NSW Health Department in late 2005 to auspice the Comprehensive Quality Process (CQP) project. Part One of Phase One of the CQP Project has been completed.

In November 2007, contracted consultants, Bruce Callaghan and Associates, released the CQP Final Report, Part One – Phase One which documented the following results:

- a) In regards to the young people accessing youth health services:
- over two thirds were over 16 years of age;
 - the majority presented with factors that inhibited them from accessing mainstream health services, such as cultural background, disability, sexual orientation, unemployment, education and accommodation instability; and the
 - The majority presented with one or more health-related problems such as chronic diseases, physical/emotional/sexual safety, substance abuse (in particular alcohol and other drug use), unsafe sexual health practices, mental health and primary health issues.
- b) In regards to the impact of the youth health services, the pilot program identified that, of the young people accessing the youth health services:
- over 70% exhibited positive outcomes in regards to their health status;

- nearly 100% achieved positive improvement in regards to environmental challenges (such as education, employment and accommodation) that previously inhibited them from accessing mainstream health services; and
- Over half showed improvement of personal strengths (such as problem solving; living skills, sense of self and sense of purpose) that will assist them in managing their lives during difficult circumstances.

These results strongly demonstrate that youth health services are significantly impacting on the health and well being of marginalised, at risk and homeless young people.

Based on the above results, the Final Report by Bruce Callaghan and Associates outlined the following recommendations:

- a) Development of key performance indicators for young people accessing youth health services at an individual and service level;
- b) Development of an integrated cross stream case management/data collection tool that would enable the collection of data/key performance indicators to be measured and a standard collection system to be established for the youth health sector. This can be achieved through further investment into the CQP Project for adaptation of the draft tool developed and trailed in 2006;
- c) Establishment of a common intake and collection system that would undoubtedly add value to the sector and enhance service management. The collection system developed through CQP could be used effectively for case management with youth health services and enable to collection of youth specific information which could inform early intervention/prevention service development and reporting requirements. It would also provide data to assess local service management and consistently monitor the impact of the sector;
- d) Adoption of identified key performance indicators and factors as identified in CQP for youth specific services.

This would allow for continuous quality improvement and service monitoring across the sector and facilitate service delivery which meets identified outcomes.

NAYH considers it very important that potential measures and tools are developed in conjunction with the youth health sector to reflect the complexity and diversity of the services delivered. As such, NAYH looks forward to taking the CQP Project into its next phase (dependent on funding) to further develop and implement a data collection tool and system.

The CQP project was originally due for completion in mid 2007 but funding and the complexity of the issues and the large number of partners involved has resulted in the project being due for completion in 2008 to 2009. From November 2008, NAYH began investigating funding opportunities for the next phase of the Project.

In 2009, NAYH allocated funds from the Association's core budget to fund a Scoping Project to investigate changes and developments within the field of key performance indicators and data collection in youth health service provision in NSW. The Scoping Project will be conducted in consultation with the youth health sector to identify recommendations for project development.

From December 2009 to March 2010 NAYH undertook recruitment for a part time Project Officer to oversee the Scoping Project. When recruitment did not identify a preferred candidate, in April 2010, the NAYH Board nominated for the NAYH Executive Officer position to be expanded to full time to coordinate the Scoping Project. The Scoping Project will now commence in July 2010.

The 'Getting it Right' Report

NAYH first released the Getting it Right report in September 1999. The report provides a historical background to the development of youth health services in NSW; offers a conceptual framework for thinking about health issues; and explores the implications for practice of this theory of the social determinants of health.

NAYH continues to promote the report and make it downloadable from the NAYH website, www.nayh.org.au.



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‘Working with Young People: Ethical and Legal Responsibilities for Health Workers’ Resource

NAYH continues to promote and make available the ‘Working with Young People: Ethical and Legal Responsibilities for Health Workers’ resource in response to requests for information and assistance from the youth health and mainstream health sector regarding clarification on the legal and ethical issues surrounding working with young people. Issues of particular concern related to confidentiality, informed consent and reporting of underage sexual activity. The resource is available on the NAYH website, www.nayh.org.au for members and the youth sector to download.

Policy, Advocacy and Support

AIM 3: To represent, advocate for, and support the Youth Health Sector and youth health issues at all levels

The Association continued to forge strong links and contacts in the youth and youth health sectors across NSW. The relationship with the Youth Health Services across NSW is of key importance to ensure the direction and work of the Association is relevant, informed and positively impacts on the young people within NSW.

Youth Health Services and the NSW Youth Health Council (NYHC)

The Executive Officer had regular contact and meetings with the Youth Health Services in NSW and provided support, advice and disseminated information where appropriate. The Executive Officer attended the NSW Youth Health Council (NYHC), which is the Youth Health Services’ network and meets bi-monthly.

The NYHC serves as an opportunity for the NAYH to directly liaise with member organisations, identify sector needs and feedback information regarding NAYH strategies and projects. Projects and services provided by NAYH are often identified through NYHC meetings. Examples include the joint submission between NAYH and NYHC regarding new homelessness legislation in NSW and young people (submitted in August 2009). NAYH also regularly provides feedback to the NYHC regarding projects and services being

conducted by the Association. There is a strong opportunity for NAYH to link more closely with the NYHC to develop NAYH’s planning processes.

NAYH continues to play a strong role in advocating on behalf of the needs of the Association’s members and the youth health sector, and ongoing support and contact with the youth health sector underpins much of the work the Association does. In 2009/10 NAYH experienced an increase in requests for advocacy and support to communicate with Area Health Service Executive Management and NSW Health. NAYH also received demands for current literature and research regarding evidence based best practice service delivery in youth health, in particular prevention and early intervention strategies; and provision of up-to-date resources, referral, research and information. In response, in April 2010, NAYH published the Position Paper: Best Practice in Health Service Delivery in Youth Health.

Position Papers, Submissions and Conference Presentations

The Association continued to work on a series of Position Papers, which outline the views of the Organisation and aim to provide support, information and resources to NAYH’s members and the general public about a range of health issues in relation to young people. As mentioned above, in April 2010, NAYH published the following Position Paper: *Best Practice in Health Service Delivery in Youth Health* and continued to make the following Position Papers available to the youth health sector:

- Young People and Approaches to their Health and Well being
- Young People and Access to Health Services;
- Access to Barriers to Mainstream Health Service for Young People;
- Young people and sexuality; and
- Sexual Health.



In addition, from July 2009 to June 2010, NAYH wrote the following submissions on behalf of the youth health sector in NSW:

- **NSW Homelessness Legislation** (August 2009);
- **Parity Magazine October Edition** (October 2009) - *Responding to the health and well being needs of homeless and marginalised young people in NSW – where are we going?*
- **Housing NSW Youth Action Plan** (January 2010)
- **NSW Youth Health Policy** (January 2010)
- **NSW Kids Caring Together Discussion Paper** (February 2010)

The above position papers and submissions were disseminated and made available to NAYH Members and the NSW Youth Health Sector.

In regards to conference presentations, in 2009-10 NAYH presented at the following youth health related conferences and/or workshops:

- **ARACY National Conference** – Prevention Pays, 2 to 4 September 2009, Melbourne. Presentation title: *Best practice service delivery when working with marginalised young people*
- **Youth Homelessness Matters Conference** (convened by YAA), Tweed Heads, 12 to 14 October. Presentation title: *Meeting the health and wellbeing needs of homeless and at-risk young people: effective health service delivery in NSW*
- **NSW Tobacco Control Network Workshop** (convened by the Cancer Council NSW), Sydney. Presentation title: *Young marginalised people aged 12 to 25 years in NSW*

Dual Diagnosis Activities – co morbid substance use and mental health issues

Dual Diagnosis continues to be a significant area, which has been identified as requiring advocacy on behalf of young people, their families and service providers. The Association continues to culminate information and develop relationships with organisations and departments who can support and/or influence better outcomes for young people with dual diagnosis.

NAYH Grant Program

In 2009-10 NAYH continued to support its members through the provision of the Association's Grant Program. The NAYH Grant Program consists of NAYH Small Grants, as well NAYH Capacity Building Grants which were introduced in 2009. The NAYH Grant Program are made possible by the accumulation of the Association's own funds and and voluntary payments from Dr Melissa Kang (who is paid to write responses as 'Dolly Doctor').

NAYH Small Grants

In 2009-10, NAYH offered two grants to the value of \$2200 each (GST inclusive) for innovative projects in youth health. Applications to the 2009/10 Small Grants Program closed on 19 October 2009. A total of 7 applications were received and discussed by the NAYH Small Grants Committee. The successful applicants for 2009/10 were:

- **Mission Australia Triple Care Farm – Fork to Fork Project**
- **Uniting Care Mental Health Mt Druitt (headspace) – Heart to Art Project**

NAYH Capacity Building Grants

Introduced in 2009, *NAYH Capacity Building Grants* aim to build the capacity of the youth health sector through the provision of financial support to attend professional development opportunities such as conferences and training workshops. In 2009-10, NAYH awarded three Capacity Building Grants to the following recipients:

- **High St Youth Health Service**
- **Family Planning - The Warehouse: National Men's Gathering, Newcastle**
- **Youth Accommodation Association**

Membership, Communication and Promotion

AIM 4: To enhance and maintain NAYH's profile and increase its membership base and communication channels.

Information and Referral Requests

The Association continued to receive a broad range of requests for information on youth health and to promote projects and events relevant to the youth health sector. The Association received a large number of inquiries regarding Membership, Small Grants, information regarding best practice in youth health and the Legal and Ethical Issues for *Health Workers Working with Young People* resource.

For the period of July 2009 to June 2010, NAYH responded to enquires pertaining to youth, mental, sexual, alcohol and other drug health service and information, NAYH Projects, legal issues, developmental issues and policy and advocacy.

Membership

In 2009/10 membership to the Association continued to be promoted and NAYH continued to maintain and increase its membership of over 100 financial members. Members included Non-government Organisations, Government

Organisations and individuals with an interested and commitment to youth health. The Association continues to use the money raised from membership fees to fund the annual Small Grants Program, demonstrating the Association's continued commitment to support innovative and essential projects impacting the health of young people throughout NSW.

Newsletters / E-News

From July 2009 to June 2010, NAYH continued to disseminate monthly NAYH E-news and electronic updates to all members by email. NAYH E-News contains information about current research, publications and resources, employment opportunities, projects, funding opportunities, events and training workshops and conferences in regards to youth health. NAYH E-News provides current information to members and saves services from receiving multiple emails throughout the week.

In January 2010, NAYH introduced a new look and feel to NAYH E-news, consistent with the new NAYH website, through the use of an online software program called *Constant Constant*. NAYH to more effectively showcase news items and provide live links to the NAYH and other websites. Monthly NAYH E-news continues to be user-friendly and the diversity of the information is highly appreciated.

The screenshot displays the NAYH Online Community website. At the top left, the text reads "NSW ASSOCIATION FOR YOUTH HEALTH". At the top right is the NAYH logo. A search bar is located at the top left of the main content area. On the left side, there is a vertical navigation menu with the following items: HOME, NEWS AND EVENTS, ABOUT NAYH, PUBLICATIONS AND RESOURCES, NAYH GRANTS, RESEARCH, YOUTH HEALTH SERVICES, NSW YOUTH HEALTH COUNCIL, and LINKS. The main content area is titled "NAYH Online Community" and shows a date of "November 02, 2010, 04:22:57 PM". Below this, there is a login prompt: "Welcome, Guest. Please login or register." followed by input fields for username and password, a "Forever" session length dropdown, and a "Login" button. Below the login fields is a "News:" section with a search bar and a "Search" button. At the bottom of the main content area, there is a "Warning!" box that states: "Only registered members are allowed to access this section. Please login below or register an account with NAYH Online Community." and includes a "Login" button. A navigation bar at the bottom of the main content area contains links for HOME, HELP, LOGIN, and REGISTER.



Website and name

In 2009 NAYH commenced review and redevelopment of the Association's website based on feedback from NAYH members and the youth health sector.

At the NAYH 2009 Annual General Meeting, NAYH launched the Association's new website and name: *NSW Association for Youth Health*. The new name received support from the youth health sector, as it was felt that the term "youth" was more encompassing of the age range 12 to 25 years than "adolescent".

Based on feedback received from members and the youth health sector, the new NAYH website, www.nayh.org.au, includes up-to-date information regarding youth health, including resources and publications, directory of youth health services, links to useful organisations and services, and information regarding the NAYH Grant Program. New features of the NAYH website include NAYH Members Online Community (members only section) which provides NAYH members with exclusive access to a library of resources and publications, jobs in youth health, NAYH E-news and opportunities to connect with other NAYH members.

Together with the new name and website, the Association launched also a new logo and branding.

NAYH activities, events and publications are continued to be promoted on the website. The new features and additional information included on the site have enhanced the website's use as a communication and support tool to NAYH members and the youth health sector in NSW. The site also continues to be an avenue for recruitment of new members and promotion of the Association's work and job opportunities.

Based on feedback received from the NAYH website host, the website received a total of 252, 601 hits from July 2009 to June 2010. This is an average of approximately 21, 050 hits per month. Breakdown of monthly hits reported are:

MONTH	HITS
July 2009	21, 909
August 2009	25, 933
September 2009	26, 865
October 2009	23, 507
November 2009	23, 244
December 2009	13, 624
January 2010	15, 709
February 2010	14, 243
March 2010	21, 413
April 2010	20, 235
May 2010	25, 913
June 2010	20, 006

NSW ASSOCIATION FOR YOUTH HEALTH

SEARCH...hit enter

- HOME
- NEWS AND EVENTS**
- ABOUT NAYH
- PUBLICATIONS AND RESOURCES
- NAYH GRANTS
- RESEARCH
- YOUTH HEALTH SERVICES
- NSW YOUTH HEALTH COUNCIL
- LINKS

News & Events

NEW REPORT: HEALTH AND WELL BEING OF YOUNG AUSTRALIANS

The Australian Institute of Health and Welfare (AIHW) has recently released the new report, *Health and Wellbeing of Young Australians: indicator framework and national indicators*. This bulletin outlines the reporting framework and key national indicators that will be the basis of the report *Young Australians: their health and wellbeing 2011*, scheduled for release in 2011. The bulletin presents 71 key national indicators, along with brief justifications explaining the relevance and importance of the indicators to young people's health and wellbeing.

To download the report please visit the [AIHW website](#).

FIRST INTERNATIONAL YOUTH MENTAL HEALTH CONFERENCE 2010

Organisational Management, Risk Management and Quality Improvement

AIM 5: To build and maintain the organisational, risk management and quality improvement structures of NAYH.

Funding

The Association received three-year funding for the period of 2008-2011 from NSW Health.

Staffing

The Association retained all staffing positions from July 2009 to June 2010 – this included Emma Marshall as Executive Officer and Shannon Elliott as administration support (0.8 FTE and 0.2 FTE respectively). External book-keeping was continued throughout 2009-10 by Bob Cassall and Ben Rajah from Busy Bookkeeping and Alza Investments Pty Ltd. Management Committee

The Association continued to have a strong team of volunteers who sat on the Management Committee to oversee the governance and operations of the organisation. In 2009 – 2010 the Management Committee members were:

- Mr Anthony Stralow (President July 2009 to present) – Senior Policy Officer, SAAP Strategy, Policy and Planning Unit, NSW Department of Community Services;
- Ms Cheryl Davenport (Vice President July 2009 to present) –, South Eastern Sydney and Illawara Area Health Service
- Mr Mark Morris (Secretary July 2009 to present) – Health Promotion Officer, Family Planning NSW;
- Ms Amanda Webster (Ordinary member December 2009 to present) – Area Health Coordinator, South Eastern Sydney and Illawarra Area Health Service
- Ms Kristen Day (Ordinary member July 2009 to present) – Program Manager, Southern Youth and Family Services;
- Mr Michael Cummings (Ordinary member July 2009 to present) – Acting Service Manager, High St Youth Health Service;
- Ms Susie Purcell (Ordinary member July 2009 to present) – Clinical Service Integration Manager, headspace Macarthur/Southern Highlands (MCSH)
- Mr George Mudford (Ordinary member December 2009 to present) – Operations Manager, Youth Accommodation Association

The NAYH Management Committee met monthly during 2009 to 2010 to oversee NAYH's Business Plan implementation, Occupational Health and Safety policies and procedures, financial accountability, and staffing issues. Management Committee members and other interested members of NAYH provided support and assistance to the NAYH Executive Officer in developing and/or reviewing programs such as NAYH's Position Papers; the Small Grants program; Policies and Procedures; Financial Planning; and so forth.

Quality Improvement Processes

The Association continued to uphold quality improvement processes in 2009-10. The following policies and procedures were upheld in 2009-10: Volunteer Policy; Grievance and Disciplinary Policy; Code of Conduct Policy; Recruitment and Selection Policy; Supervision requirements for EO policy; Occupational Health and Safety Hazard Report Form; Occupational Health and Safety Policy and Procedure; Occupational Health and Safety Rating Procedure; Occupational Health and Safety Emergency Action Plan and NAYH orientation Manual.

Facilities

In 2009 to 2010, the Association maintained its location at the Brain and Mind Research Institute (BMRI) Building Camperdown. This move secured NAYH's sole location until June 2011 and improved staff amenities, provided a distinct and credible office space and promoted links with other service sectors, particularly in the area of youth mental health. Relevant resources were maintained and updated to improve NAYH's ability to connect with its members (e.g. teleconference equipment and laptop).



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