



AQA Annual Report 2023

Growing with our community



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About us.

AQA was established in 1987 by a group of people with quadriplegia who saw a need for improved access to information, support and employment opportunities for people living with a spinal cord injury.

Today, AQA has grown into a strong and diverse community. We support each other to live full and enriching lives by sharing our knowledge and lived experience of a range of complex physical disabilities, through our services, our resources, and our relationships.



Acknowledgment of Country



AQA acknowledges that we live and work on lands stolen from the oldest continuous culture on earth. While our office is on the lands of the Wurundjeri people of the Kulin Nation, we live and work on First Nations lands across Victoria. We acknowledge that sovereignty was never ceded, and that this was, and always will be, Aboriginal land. We pay our deepest respect to Elders past and present, and we thank them for holding wisdom and caring for country.

We also acknowledge that AQA's work of building a more caring and inclusive society - where everyone has the resources they need to live well - follows in the footsteps of a long and ongoing struggle of First Nations peoples across the continent to be afforded the self-determination, respect and resources they need to live well.





Purpose, Vision, **Strategy.**

Our purpose

is to resource people to live well.

Our vision

is an inclusive community where people have access to the resources they need to meet the challenges of change and live fully.

Our strategy:

1. CREATE EXPERIENCES THAT EMPOWER OUR CLIENTS

Using insights from the lived experience of our community, we develop services that build our client's capacity and independence in new and more effective ways. We continually work to expand the reach of our services, in rehabs and in community.

2. EMPOWER OUR PEOPLE TO BE MORE EFFECTIVE

Our people are qualified, prepared and supported for the work they do, and encouraged to find meaning and pride in that work. Our work environment is safe and respectful.

3. BUILD OUR SUSTAINABILITY

Our governance and management systems are aligned with our purpose and strategy, and our financial and business processes are efficient and responsive. We seek out and nurture relationships that resource our strategy.

CEO & Chairperson message.

by **Peter Trethewey, CEO**
and **Michelle O'Sullivan, Chairperson**

Welcome to our 2023 Annual Report, an opportunity to share the many achievements of the organisation and our approach to the challenges and opportunities of our operating environment

It's said that "A ship in a harbour is safe, but that is not what ships are built for".

For AQA the last three years has been about building our capability to offer services and experiences of value that have a positive impact on the community we are here to serve.

This year we recommitted to our strategy of building capability in order to scale our impact. This strategy is threefold:

- Creating opportunities that empower our clients and community
- Empowering our people to be more effective
- Building our sustainability through efficient business systems and processes, and good governance.

We invite you to take a look at these developments and as you do, to connect them back to our purpose, to what our ship is built for – we exist to resource people to live well.

To highlight just a few:

INSIGHTS

We've commenced a community consultation and participation project to ensure insights we are gaining from our community are drawn from the broadest, most diverse lived experience we can access. We look forward to the continuous outputs of this project influencing What we do, How we do it, and Where our voice can and should be heard.

INNOVATION

We are completing several multi-year Capacity Building projects supported by the Transport Accident Commission and the Federal Information Linkages and Capacity Building program. We have partnered with organisations like Austin Health and Monash University to co-design and test innovative interventions, including peer led capacity building services such as wheelchair skills training, resilience and goal setting training.



VISIBILITY

We have lifted our visibility and content in social media and online with the launch of a consolidated AQA website and an expanded social media presence. This content is now reaching people who were previously unaware of our services and activities.

CAPACITY

We are now 18 months since the go live phase of our digital transformation, and all our significant systems are now cloud based. We remain so impressed by the uptake of these new systems by our Support Workers and Staff, with most people reporting many common transactions are easier than previous manual processes.

We have commenced the enhancement phase of our transformation: connecting data across business systems to improve efficiency in processes, improve analytics and report capacity in order to generate business insights.

CHALLENGES

This year has presented some particular challenges as the result of a significant reduction in our Home and Community Based Services activity and subsequently in service revenue. Activity was affected by the passing of several clients and by challenges in securing workforce to grow the service and maintain our service promises around reliability and client choice and control.

With a significant reduction in activity based revenue, while maintaining the investment we have made in our capability across Systems, Processes and People we report a net deficit for the year. While challenging, we are not alone in this result, with many other disability service delivery organisations also reporting significant losses for the year.

We remain confident we will work our way back to a surplus as there is demand for the services offered by AQA, and these service types are considered core to most NDIS and TAC plans. We have invested in the upskilling of our Support Workers to deliver the Complex and High Intensity supports that our community are looking for.

We continue to receive enquiries from people seeking reliable, capable services. Demand for our Support Coordination and Allied Health Services remains strong. Our Community Engagement model offering a service suite that includes practical disability supports from Support Workers with planning, information, referral and community connection support, assessment & prescription and personal development training – all informed by lived experience, differentiates AQA from other more transactional providers.

Finally, we would like to thank all the people of AQA who have contributed to our purpose this year. Every achievement, whether in design, development or delivery is the result of the creativity and efforts of our people: Directors & Committee Members, Staff, Volunteers and our development partners. We invite you to take a look through the Annual Report for 2023.


MICHELLE O'SULLIVAN
CHAIRPERSON AQA


PETER TRETHEWEY
CEO AQA

Board Reports.

Strategy Committee.

by Joe Rose'Meyer
Convenor of Strategy & Innovation Committee



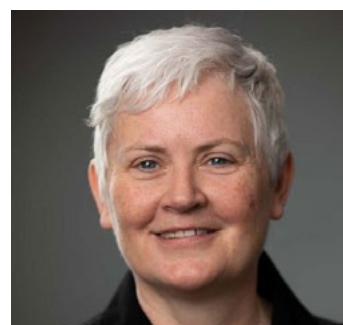
This year's focus incorporated the Strategy Committee and the CEO and Finance Committee agreeing to pursue a much more considered and conservative approach to financial year 2022-2023.

The Strategy consistently discussed and reviewed Services Reports giving insights into Services & Community Participation and Engagement, as well as AQA Community Profile. People & Culture, AQA People Plan and Recruitment Strategy formed part of the committee's purview.

We welcomed Emma to the committee to add a breadth of experience and insights, with her work being presented to the board. A special thanks to Annie Lillywhite for all her hard work and Annie will be a great loss to the committee, myself and AQA. Thanks to Mario, Brydie and Shane for their commitment and participation in our committee. Looking forward to a bright 2024. We take this time to wish all a very merry Christmas and a safe New Years.

Governance Committee.

by Michelle O'Sullivan
Governance Sub-Committee Chair



During the financial year of 2022-2023, the committee met twice to discuss key governance issues. This year also saw our independent member, Greg Schinck, step down after many years of service. We thank Greg for his oversight, sector knowledge and attention to tracking to our work plan.

Our key discussions have formed around ensuring overall Board and sub-committee attendance by reviewing the reports supplied by AQA. This ensures our Directors are maintaining their attendance and diligence. The Committee also considers Board skill mix and new members.

In addition, the CEO attended one of our meetings to provide input regarding organisational matters. This enabled the Governance Committee to provide direct feedback to Peter regarding areas of interest such as the partnership framework. Thanks to the David Schreuder for his continued support and membership of this sub-committee.

Risk & Quality Committee.

by **Kylie Thitchner**
Convenor of Quality & Risk Committee

The Risk and Quality Committee oversees the systems of risk management, quality assurance, and the systems for compliance with relevant legal and regulatory requirements.

This year's highlights have included:

RISK MANAGEMENT

We have commenced the implementation of a new system to manage Incident & Injury processes, and our OHS Risks Register. The Platform will enable more accessible, user friendly online reporting and improved monitoring and analysis of Incidents / Injury, Feedback and Complaints. Trends will be easily identified to provide opportunities to improve services.

MANDATORY DISCLOSURES

There were no mandatory disclosures, serious incidents, or complaints this reporting period.

REGULATORY COMPLIANCE

AQA completed a thorough Quality & Safeguards Audit process and maintains our NDIS Registered Provider Certification.

The assessment looks at key areas of AQA Management and Operations, including:

- Governance Structure ie; Board related policies, procedures and reports
- Organisation Management Structure ie; policies, procedures that apply to the whole organisation
- Screening, Recruitment and Compliance of Staff
- Supervision and performance of staff



- Training and development of staff
- Client assessment and on boarding
- Client plans and document
- High Intensity Supports and related documentation

The assessment reviews Policies and Processes to ensure they meet the quality indicators and then looks for evidence of how this is implemented to ensure we do what we say we do.

The assessors were impressed at the quality of our policies, procedures, processes and the huge amount of development we have underway.

They were able to see the transformation we have undergone and while there were gaps in what we could evidence today, we were able to respond to all of this showing work in progress or as part of our continuous improvement plans.

AQA received a number of minor non-conformities all of which provide an opportunity for improvement, and are now resolved.

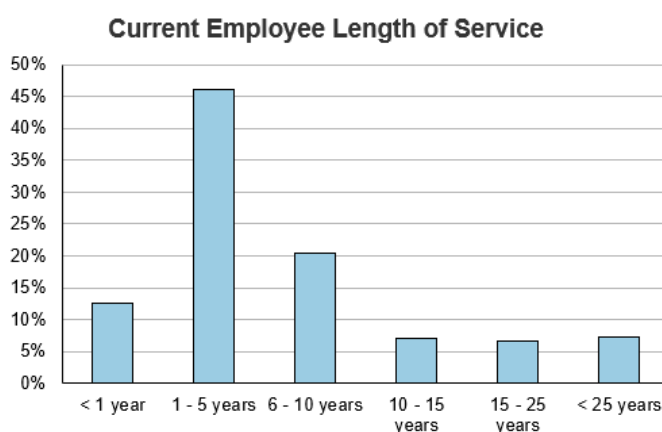
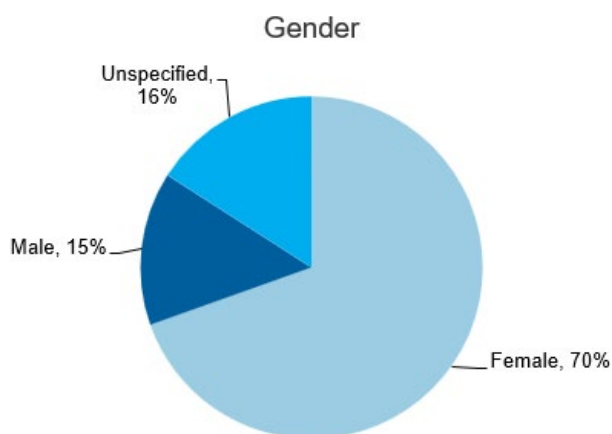


Our People.

Our people are diverse. They bring a rich and broad range of experience, perspectives and skills to our clients, mission and purpose. A healthy spread of demographics including age, cultures, abilities, backgrounds, experience and length of service, enables our workforce to be open to new and creative ideas, supports increased productivity, and most importantly enhances community and client engagement.



327 Support Workers
52 Office Based Staff
38 Volunteers
78 New employees



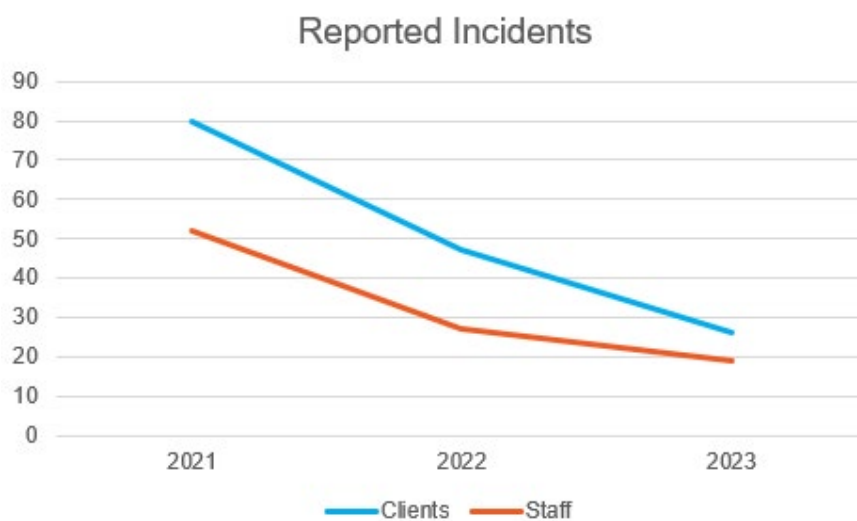
KEY INITIATIVES

- Achieved certificate of compliance with the Workplace Gender Equality Act 2012 including implementation of an Internal Audit Policy and Schedule to ensure ongoing compliance.
- Developed and rolled out a Casual Conversion Toolkit, enabling team leaders and staff to understand and engage with this initiative.
- Introduced the Business Partner Model to enhance the partnership and collaboration with Support Services.
- Commenced the customisation of Recruit App Dashboards to enable a data driven approach to talent acquisition planning and tracking.

Health, Safety and Wellbeing.

The goals of this portfolio are focused on broadening the wellbeing framework proactively wrapped around staff members, in order to achieve a safe, respectful, and empowered workforce. This year has seen a transformation from 'Safety' to 'Health, Safety and Wellbeing'. This involves approaching risk management from a more holistic perspective, seeking to improve not just physical, but also psychological outcomes, for our employees and clients.

The number of client and staff workplace incidents is showing a downward trend over the past three years.



As with the previous two years, the largest portion of reported incidents in 2023 to-date relate to incidents requiring medical attention (38% to-date 2023, 39% in 2022, 36% in 2021).

In late 2023, a new incident reporting system will be introduced to the organisation. This aims to streamline the incident reporting process and increase its accessibility to all workers. It is expected that this will improve our understanding of the breadth of incidents, near misses, and other risk factors impacting our work processes. This will in turn facilitate the strengthening of our risk management strategies.

Workplace Relations.

Our AQA Collective Agreement has been identified as being a 'Zombie Agreement', according to the Fair Work Commission, which would require the agreement to be 'sunset', terminated in December 2023, however AQA has applied to the Fair Work Commission to extend this termination date and decided to commence bargaining to re-negotiations a new Enterprise Agreement which will cover all Support Worker employees.

Empowering our People.

Over the last 12 months we have transformed the way in which induction is delivered, combining online and face-to-face resources to ensure our training program meets the unique needs of our clients, and our Support Workers are equipped to provide these supports in line with the NDIS skill descriptors.

The face-to-face session provides Support Workers information and skills specifically around bowel and urinary supports, Autonomic Dysreflexia, manual handling and medication. Annual refresher training has also been added to complement our existing suite of online resources. There have been 78 inductees so far in 2023. Our High Intensity Support policy, procedures and training have been developed to ensure all our Support Workers are capable of delivering best practice supports to our clients, including those with complex and high intensity support needs.

A future focus on organisational development, change management and diversity and inclusion aligns People, Culture & Capability with AQA's Strategic Growth Plan.

Future Focus 2024 – 2026.

- Unifying the team to ensure consistency in approach, advice and support for leaders and employees.
- Enabling AQA's strategic imperative #2 - Empower our people to be more effective.
- Empowering each other to move from a reactive and transactional state to a proactive and strategic state.
- Delivering a People, Culture & Capability (PC&C) business partnership approach with AQA leaders.
- Innovating and preparing for the future workforce expansion partnered with the Services Growth Plan.
- Promoting the value of the PC&C team to AQA stakeholders.



Our Capability.

Digital Transformation.

A year in, our digital transformation is now solidly established. This new digital infrastructure is empowering our staff by easing their access to information, providing real-time insights and self-service reporting tools. For our clients, their day-to-day engagement with us has been significantly streamlined.

We are now focussing on the user journey and user experience, ensuring these new processes respond to user needs. In this post implementation phase we're working with different users to understand what they need and what they can do with the current system. Where we have identified gaps or inefficiencies, we are exploring what the best system or app to support that process is.





Effective **Communication.**

Over the last year we've been building our capacity to communicate with our community in more targeted and engaging ways. This uplift has meant more people are hearing about supports that are relevant to them, in forms that are meaningful to them.

Our new digital infrastructure has allowed us to gather fine-grained engagement data on the stories, resources and supports that our community are finding helpful, which informs future content development. The targeting capacity of our email campaign platform has allowed us to increase the volume and relevance of our communication, without overloading any particular segment of our community.

Our social media presence has been significantly revitalised and expanded, with heavier use of visually-oriented content driving engagement, and platform-tailored content reaching increasingly diverse audiences.

In 2023 we launched a refreshed Services Guide, with a focus on introducing (or reintroducing) ourselves in a way that was accessible and engaging.



25 698

People reached on social media (May - Nov)

55% Open
7.1% Click

Average rates for email campaigns (Jan - Nov)



New Services Model.

After careful consideration of feedback from our clients and Support Workers about what's most important to them in the way supports are delivered, we've made some changes to our Home and Community Based Services Model. These changes will help us to continue to meet our client's expectations for reliable, flexible and customisable supports, while also ensuring we attract a workforce to deliver those supports.

Among some of the changes are charging a slightly higher rate for our High Intensity & Complex Supports, no longer providing standalone domestic supports, and packaging sleepover shifts with four hours of support.

Mobile Support Workers.

For many of our clients, a one or two hour shift neatly maps onto their support needs, and maximises their funding. As most of the sector lifts their shift minimums to three hours, we've started deploying Mobile Support Workers to help us continue to offer one and two hour shifts.

Instead of having regular clients and hours, Mobile Support Workers fill vacant shifts, and work bundles of smaller, one or two hour shifts, spread within regions of Melbourne. As well as meeting our client's needs for short shifts, this initiative increases our ability to deliver responsive support and reliable programs.

NDIS Certified.

We seek out the rigorous assessment of our services and service delivery model that NDIS certification represents for two reasons. One, achieving the high standards required by certification is inline with our core values of Integrity and Excellence. And two, the certification process is resonant with our understanding of Health and Safety as inextricably linked with delivering quality supports.

Our commitment to our employees' health, safety and wellbeing at work is one and the same with our commitment to providing our clients with high-quality, empowering and safe supports. The comprehensive remit of the NDIS certification process acts as an accountability tool, in service to our high expectations of our Health, Safety, Quality and Risk standards, to our continued holistic conception of those standards, and to our clients and prospective clients.

Community Consultation.

AQA has a long history of using insights from lived experience to inform what we do and how we do it. Whether it's our staff, volunteers or community members, flows of experience and knowledge are constantly moving through our collective understanding, mixing with insights from research and our workforce to improve our practices and resources.

This year, we launched our Community Consultation & Participation Framework. This framework aims to bring more coordination and intentionality to the way we connect with our diverse community, and involve people with lived experience in decision making, priority setting, and in identifying relevant issues. This widened and deepened consultation will help us test assumptions and challenge practice, test ideas and inform the design of future services.



Our Impact.



346
Clients

379
Staff

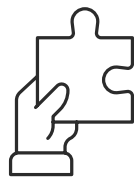
1168
Community
Members

38
Volunteers



202,000 hrs

of Home & Community Based Supports



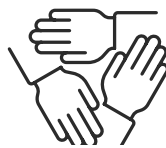
3275 hrs

of Occupational Therapy



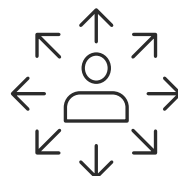
5391 hrs

of Support Coordination



705 hrs

of Skill & Capacity Programs



66

Community Network Events



449 hrs

of Peer Support





Home & Community Based Supports.

AQA's Home and Community Based Services delivers supports to clients in their homes, workplaces, educational institutions, and the broader community. Clients who need support in managing their daily personal care, routine tasks and activities, enabling them to build their independence and pursue their goals.

We deliver supports in partnership with our clients. These partnerships are rooted in trust, respect, collaboration and transparency, and are the framework through which we provide high quality, tailored supports that empower the people who receive them.

Our training program is industry leading, extending well beyond an initial induction to include regular development as we refine our processes and techniques, driven by insights from our community's lived experience. High Intensity & Complex Supports are our speciality, and all our Support Workers are trained to provide them. Depending on a client's needs, we also offer further customised training.

Recognising the critical nature of many of the supports we deliver, we have an After Hours support service who work to backfill any last minute shift cancellations.



Occupational Therapy.

Our Occupational Therapy (OT) team support clients to participate in activities that are meaningful to them, such as taking care of themselves (or others), working, volunteering, accessing the community and participating in social activities, hobbies and events.

We believe in the importance of a person-centred approach to OT - we work collaboratively with our clients to co-design solutions that help them achieve their goals. Our practice is heavily informed by lived experience, drawn from both within our OT team and our wider community.

This year we've acquired a plinth to enhance our assessment capacity. This is a unique inclusion for a community organisation, and allows us to support clients with highly complex physical needs - both directly and indirectly, as the plinth is open for anyone to use with their own clinician.

Support Coordination.

The Support Coordination team at AQA prides themselves in being client-focused, transparent in approaches and diverse in knowledge and experience.

Our Support Coordinators stem from various backgrounds of Social Work, Psychology and Health sciences. Our team deals with a variety of complex and unique cases that require forward-thinking, creativity and collaborative approaches to achieve participant goals.

That spirit of collaboration and creativity allows our team to empower our clients, build a holistic understanding of their needs, and deliver increasingly effective interventions for them. From hospital discharges, to clients who are incarcerated, to housing and crisis situations and much more, the SC team contributes to the support of significant changes in participants' lives.



Peer Support.

Our Peer Support is delivered by both trained staff and volunteers with lived experience of disability. Our Peer Mentors share their experience, knowledge and time to support people in rehab as they come to terms with their injury, in their community as they transition back home, and during any hospital admissions post-injury.

We've had a peer support presence at the Royal Talbot rehab centre for decades, but more recently we've been building connections with rehabs at Caulfield, Monash, Kingston, Mercy, Royal Childrens and St. George's hospitals. Leading on from the findings of the Best Life project, which investigated better ways to support young men living with SCI (see p.19), we're

looking at partnering Peer Support with Allied Health in rehabs, where Peer Mentors would sit in on patient's sessions to lend their expertise.

Recognising the need for ongoing informal peer support among some in our community, we've begun encouraging people to drop into the AQA office for casual chats over lunch or coffee, and the chance to meet other staff with lived experience.

A particular focus this year has been on strengthening the compliance and training requirements of our volunteers, ensuring the support we deliver is safe and effective.



Skill & Capacity Building.

We offer a range of services and activities for people living with complex physical disabilities to develop the tools to live well, however that looks for them.

These tools are informed by the accumulated pool of lived experience in our community - a collective resource that every participant is involved in growing, whether actively or unconsciously.

To develop these services and activities, we listen carefully to our community's needs - incidentally through our relationships, and intentionally through wider consultation. We then involve people with the most relevant lived experience to help design interventions that meets that need, whether that's staff, volunteers, or community members.

This process has led to an expanding range of peer led supports, delivered in a variety of forms. It's also meant we're increasingly engaging with people who experience disability outside of SCI.

Through reflective practice we strengthen our ability to build genuine connections with people in our community, and deliver services, activities and resources that aren't just effective, but are delivered at a time in their journey where they're most able to benefit.

Examples of our evolving peer-led activities this year:

- Staying Away from Home workshop
- Personal Development course
- Regional Victoria wheelchair skills event
- Women's Skills For Independence course
- Webinars on subjects of interest



Community Networks.

Our peer-led Community Networks operate across Victoria, with seven networks meeting monthly. These networks offer people living with complex physical disability the opportunity to connect, learn, explore and have fun with others who've shared similar life experiences.

By facilitating these spaces where people feel safe to freely share their experiences, knowledge and skills, we facilitate our community to resource and support each other. By having access to the wider AQA community, network members are connected to a wealth of other peer-led resources and services.

That process of mutual support through social connection empowers our community and can act as a gateway for people to recognise how much they have to offer.

For regional members, it can also be a gateway out of feelings of social isolation. These benefits of this social connection and mutual support also extends to family and friends, who often join network meetings.

We take a collaborative approach to shaping the networks, seeking input from network members on what subject-matter experts they'd like to hear from, what activities or sports they'd like to try, and where and how they'd like to meet.



Research:

Better supporting young men with SCI.

Men under 35 are overrepresented in the SCI community, and they are often not well equipped to seek or accept support.

Recognising this, AQA, Austin Health Spinal Cord Service and behavioural research specialists from Behaviourworks at Monash University proposed a project to the TAC. Later known as Leading Your Best Life, the project would investigate how we can better support young men challenged by traumatic spinal cord injury in managing their health and wellbeing.

The project got started in January 2020, and earlier this year the project published its findings.

KEY FINDINGS

Connection before content

To be open to receiving and benefitting from supports, young men need to feel like they're being met where they're at, by people who are genuinely interested in their experience, and who are committed to forging an authentic connection.

Critical role of lived experience

Here's Alyse Lennox, the project's senior researcher, speaking on the importance of connecting young men with people who have lived experience of SCI:

'There is currently a lack of people living with spinal cord injury working in the hospital and rehabilitation settings, which limits opportunities for newly injured individuals to understand what might be possible in the future.





'Participants reported that it can be difficult to relate to able-bodied professionals who are trying to model skills or provide support, and noted the difference it made when advice and information was delivered from those they could relate to.'

In their own time, not before

Our CEO Peter Trethewey, a report co-author, reflected that readiness for skill and capacity building support often doesn't fit within the hospital recovery timeline, and that there's a lack of funded opportunities for those kinds of support when people have returned to the community.

'There is a need to acknowledge that people living with spinal cord injury are on a journey and, as such, our support systems must provide opportunities for the development of skills when people are ready to engage in the community,' said Peter.

THREE INTERVENTIONS

Building on these learnings, the project designed and trialled three interventions:

1. Immersive Communication Skills Training

Idea: What if we surround people living with SCI with people who understand how to engage & connect with them?

Looks like: Building clinicians skills at

developing a rapport, and seeding an understanding of what might be meaningful and relevant to the people they work with.

2, Partnering for Success.

Idea: What if we provide people living with SCI with contextual examples of what is possible?

Looks like: Pairing allied health clinicians and people with lived experience of spinal cord injury in a partnership to co-facilitate therapy sessions in the rehab setting.

3. Community-Based Wheelchair Skills.

Idea: What if we provide the flexibility for people living with SCI to learn skills and try things when it is meaningful to them?

Looks like: Evaluating the impact of peer-led, community-based wheelchair skills sessions and follow-up peer coaching on skills, confidence, independence and community participation.

If you're interested in learning more about the outcomes of these interventions, or the resources the project has produced, head over to [BehaviourWorks Australia's webpage](#) on the project.



Story: What Peer Support means to me.

By Ben Gruter, AQA Peer Mentor

Although it was ten years ago, I still remember the first time I met with one of the AQA Peer Support Mentors. What struck me was nothing he said or did, but the fact that he was wearing street clothes.

In the four months since I was admitted to the Austin, and then to the Talbot, all the people I saw in wheelchairs were wearing the rehabilitation uniform – tracky-daks and a T-shirt.

Seeing a wheelchair user dressed in the way I had previously dressed pulled me up short and made me focus on life after rehab and on the many ways, both big and small, I was going to have to get used to living that life.

I had four fantastic mentors during the sixteen months I was in hospital and rehab.

We talked about all sorts of things from vehicle conversions to bowel care, from dealing with funding bodies to negotiating with employers.

Even when we were just chatting, I found our conversations uplifting and helpful. They were easy conversations because I didn't have to explain how things were with me. My mentors, having had similar experiences, knew, and could tell me what worked for them and where to get help and assistance.

Apart from the street clothes, what also struck me was that every one of my mentors had recovered from their spinal cord injury (some much more debilitating than my T5 injury) to live fulfilling and useful lives.

Not only that, some were very high achievers in their fields. Over time I was to meet doctors, engineers, business people, journalists, farmers and tradies who you would think could no longer practice their occupation, all continuing to succeed in their personal, professional and work lives.

Even now, after all this time, I am in awe of what some of my spinal cord injured friends have achieved.

Four or five years ago at the urging of my wife, who thought I was getting too slack, I became a peer support mentor. After initial training at AQA I embarked on my first visit to the Talbot.

It was my first time back in five or six years. Going back that first time was not easy and I was very nervous about approaching people. All that passed when I was having those easy conversations that only people who have shared a life changing experience can enjoy.

I have heard a lot of familiar stories, but everyone is an individual and everyone

approaches recovery in their own way. I am glad to help where I can. Not that I am a do-gooder. I get as much out of being a mentor as hopefully those who I mentor get out of the program.

The last three years have been very difficult for the Peer Mentoring Support programme. For a long time we were unable to go into the Austin or Talbot and we had to do mentoring by telephone with those who were there during that terrible time.

AQA and the Austin are now trying to revitalise the program. I would urge everyone to consider it. Everyone can make a difference and you never know what is going to help someone on the path to recovery. It may even be the clothes you wear.

If you are interested in joining the Peer Mentoring Support program contact Naz Erdem or Josh Hose on 9489 0777 at AQA.



Events

Visit our Events page to see what's coming up and how to get involved.

News

Visit our News page for resources and community stories.

Subscribe

Visit our website and subscribe to hear about the latest news and events in our community, and to receive our quarterly magazine.

More Information

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🌐 www.aqa.org.au



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