



Harm Reduction Victoria 2022 AGM Minutes

Date/time of meeting	Wednesday 8 February 2023, 4-5:30PM	
Location of meeting	Meeting held Hybrid, Zoom & In-person at HRVic Office (299-305 Victoria Street, Brunswick VIC 3056)	
Attendees	<p>Board Rob Dwyer, President Penny Hill, Vice President Peter Higgs, Treasurer Katia Lallo, Secretariat Gaby Bruning</p> <p>Staff Sione Crawford - Member Nick Wallis - Member Jess Holcombe - Member Brit Chapman - Member Samantha Jones - Member Christian Vega Jane Dicka - Member Snowy Primmer - Member Nadia Gavin (x2) - Member Frank Bees Amelia Berg - Member Ally Anketel</p>	<p>Attendees Steven – Member Deanne Buckley - Member Edita Kennedy - Member Craig Harvey - Member Ginny McKinnon Leora Robertson - Member Lara Anderson - Member Danny Jeffcote Kelly S Craig Gary Morris Fiona</p>

Harm Reduction Victoria 2022 AGM Minutes

	Nick Kent - Member Ben Yonson - Member Caro Weidner - Member Matthew Plumb – no Sarah Lord Jimmy Harrington	
Guests		
Apologies	Tony Wyatt, Steph Tzanetis	
Time meeting commenced	4PM	

Agenda item/topic	Discussion/Motion	Moved	Seconded	Outcome
1. Welcome & Acknowledgement	Robyn Dwyer, Board President and AGM chair welcomes everybody to the HRVic 2022 Annual General Meeting. Introduces herself as a member of the HRVic board since 2011, and the last 6 years as the chair of the board and AGM. Acknowledges the traditional owners and custodians of the Wurundjeri lands on which she was hosting the meeting and all the lands on which AGM participants were meeting. She paid her respects to Elders, past, present, and emerging and extended this respect to all First Nations peoples joining us online. Merri Bek which means rocky country- the council recently changed it's name to Merri Bek. Also acknowledges the traditional owners and custodians of the land.			
2. Declaration of Conflicts of interest	None			
3. Minutes of 2021 AGM	To accept the minutes from the previous AGM, held on the 8 th of December 2021, as a true and accurate recording of the meeting.	Sam Jones	Jane Dicka	All in favour. RD declared the motion carried.
4. President's Report	Link to Annual Report was posted in the chat. Thanks to HRVic staff, volunteers. Annual report reflects HRVic's ability to adapt to change and align their work with the needs of the community and enhance the lives of people with living experience. All of our work is possible as people with lived and living experience. Stuff about HRVic staff, teams and volunteers			

Harm Reduction Victoria 2022 AGM Minutes

Agenda item/topic	Discussion/Motion	Moved	Seconded	Outcome
	<p>Thank stakeholders and partners</p> <p>Thank you to the highly productive and supportive relationships with the department of health</p> <p>Thank you to fellow board members- monthly zoom meetings to fulfil governance requirements</p> <p>Farewell to outgoing board member Jarrod McMaugh and thanks to him for his time, knowledge and experience.</p> <p>Opportunity to welcome new members with 1x leaving- will get to that later</p> <p>The org is in great shape to meet the challenges of coming years</p>			
<p>5. CEO Report</p>	<p>Acknowledge Jarrod's contribution- we will continue working with him on advocacy</p> <p>Welcome everybody, thank you for coming, strange to do it on zoom once again</p> <p>AR will have more detail about each of the programs</p> <p>This year has been a test to everyone's resilience</p> <p>The reporting period covers time where there were outbreaks and lockdowns.</p> <p>Despite Covid the year was overall one of reconnection</p> <p>Restricted during the period on face to face peer work</p> <p>Fundamental changes with the mental health commission</p> <p>Major international conference coming to Melbourne</p> <p>Renovated a warehouse to be a community organisation hub</p> <p>Moved from 13 to 23 staff</p> <p>HRI conf coming to Melb in April- Vic gov and DH funded a scholarship program to get living experience peer workers to the conference and give them the opportunity to be involved in those conversations. Nick Kent has been brought into the team to develop as coherent as possible a policy platform leading into the conference- to highlight that HRVic is a leading voice on stigma. Ongoing process. We want to coordinate the things we say and repeat it so it sinks in. Structural reforms like the royal commission. What is a drug user org in 23, 24 and 25. HRVic has a proud history of diversity in our communities, but we could do more to be more diverse. HRVic can lead the broader network on cultural diversity. What is harm</p>			

Harm Reduction Victoria 2022 AGM Minutes

Agenda item/topic	Discussion/Motion	Moved	Seconded	Outcome
	<p>reduction? Is it inclusive enough on diversity? What will make our org more welcoming to a wider group?</p> <p>Policy- Nick Kent, lucky to have someone with big picture mind to consider policy and a longer term process for strategic process</p> <p>PAMS-Phone line has never been busier, more funding</p> <p>FUSE- Christian and Matt hired, supporting the workforce of people with lived and living experience. Christian and Amelia to do a workshop at VAADA on cultural safety on Friday</p> <p>DW- Undergone a number of changes, NW is coordinator, Bee stepped down, Ally and Liam staff, DW regularly work through the lack of understanding of HR that law enforcement has,</p> <p>HPT- Delivery of It's Your Right Campaign- Jane, Brit and Caro. Partnering with St Vincents and Burnet Institute</p> <p>COMMS- Sam Jones has helped us more than doubled our social media engagement</p> <p>DOPE- Naloxone more available, online naloxone training once a month</p> <p>Org Services- Jess, Snowy and Ben, move to new office outlined by Jess in our Annual Report. Thanks to Jess!!</p> <p>Thank you to our funders</p> <p>Also, thanks to board for sanctioning our spendings</p> <p>New space to be a community hub as well as space for other orgs like Vixen and SSDP. Soon to all be able to work from this space</p>			
<p>6. Treasurer's Financial Report 2021-2022</p>	<p>Peter Higgs (Treasurer) Peter's first year as treasurer for HRVic- elected at 2021</p> <p>Dr Chooi Beh - Chartered Accountant conducted the 2021/22 audit. He delivered a satisfactory report with no concerns raised regarding organisational management of finances. Harm Reduction Victoria is able to pay all of its debts as and when they become due and payable.</p>	<p>Peter Higgs</p>	<p>Katia Lallo</p>	<p>All in favour. PH declared motion moved</p>

Harm Reduction Victoria 2022 AGM Minutes

Agenda item/topic	Discussion/Motion	Moved	Seconded	Outcome
	<p>Income of over \$2 million. Big chunk from state govt. About 60% or so spent on paying staff and rest is allocated to programs. Plenty of resources. Much stronger financial position than has been historically</p> <p>Worked with AIVL and Burnet Institute which have both provided funding</p> <p>Increased our surplus to a little over \$100,000 more than it was last year- about \$850,000 in total</p> <p>Been a successful year for the org and we're in a strong financial position.</p> <p>Sione- worth noting that we've referred to our new premises most of the funding was done by HRVic's funds over years so our reserve will drop a little bit next financial year we were able to pay for the renovations because we have had such successful previous years.</p> <p>Investment into staff and the org and community.</p>			
7. Appointment of Auditors for 2022-2023 Financial Year	Motion to appoint CH Accountants as auditors for 2022	Peter Higgs	Jane Dicka	All in favour
8. Board Vacancies	<p>3 vacancies and 3 nominations.</p> <p>RD asks nominees to introduce themselves</p> <ol style="list-style-type: none"> 1. Katia Lallo- Been on HRVic board for 3 years. Would love to serve another year on the board. Background as a community lawyer. 2. Tony Wyatt unable to attend RD spoke on behalf- Experienced in governance like financial management. Tony also been connected with pharmacotherapy and has expertise. He's keen to contribute to HRVic. 3. Craig Harvey- Previous board member in 2016. Deep admiration for HRVic work happy to be involved. Worked in HR since late 90s, in Aus since 2006- a lot of time worked in pharmacotherapy and currently works in Geelong and can provide a rural perspective. <p>Because there are the same number of vacancies and nominees, we don't need a vote. Unless there are any objections to any of the nominees from members. Nominees deemed elected.</p> <p>Congratulations</p>			
9. Other Business	None			

Harm Reduction Victoria 2022 AGM Minutes

Agenda item/topic	Discussion/Motion	Moved	Seconded	Outcome
<p>10. Guest Speaker- Steph Tzanetis</p>	<p>Steph Tzanetis former employee of HRVic and current employee of CAHMA as a Peer Worker at CanTEST (Health and Drug Checking Service) in Canberra. A recording but happy to be contacted if anyone has any follow up questions. Acknowledgement of Country.</p> <p>CanTEST is a partnership- lead agency is Directions health working with Harm Reduction Australia’s Pill testing Australia and CAHMA which is the peer-based organisation in the ACT. They also have the ACT government and ANU as partners. ACT government funds and ANU is doing the independent evaluation that’s lead by Anna Olsen and also the chemists from the ANU chemistry dept.</p> <p>CanTEST opened 19th July 2022- Chris CAHMA, Dr David Caldicott the clinical lead of CAHMA, Minister for Health- Rachel Stephen-Smith, CEO of Directions Health- Bronwyn Hendry. First fixed site drug checking service in Australia. Opened largely by evaluations of festival pilots delivered by Pill Testing Australia at Groov’n the Moo (GTM) in 2018 (Toni Makkai et al) and 2019 (Anna Olsen et al). Service design, whether festival based or at the fixed site, has always included peer workers e.g. DanceWize volunteers at GTM. The peer education element has been retained in CanTEST.</p> <p>CanTEST Service Journey- a person walks into the CanTEST site which is in a multi-story building which has other services such as family planning, mammograms and NSP. CanTEST service is open to the public on Thursdays from 10am-1pm and Fridays 6pm-9pm. Slightly more popular on Friday evening but no overall pattern other than the number of people accessing the service is increasing. When the person first walks in they are asked to put their phone in a locker for privacy (hopefully to be removed), they are asked to sign a waiver form- paper based form which is put in a locked postbox- the main takeaway from the waiver is that regardless of the information you can get from the testing results you can’t get a guarantee of safety, the outcome of someone using a substance is always dependent on a number of factors. You’ll be greeted by AOD counsellors or peer workers who are part peer educator and part research assistant. All of the data is kept in Red Cap which is a clinical trial software. First step you create an avatar or codename that is not identifiable to you, you are asked to also provide the day of your birthdate (e.g. for 4th of July you would put 04) and you choose your favourite colour this is to help link up data if the person returns. If someone can’t remember or doesn’t want to choose the same things they don’t have to. There is also an optional pre-test survey, they then do the testing, there will then be the opportunity for AOD interventions and harm reduction education, and a post test survey which are all optional. Other health intervention possible on site are to see a nurse (you don’t have to do the drug testing),</p>			

Harm Reduction Victoria 2022 AGM Minutes

Agenda item/topic	Discussion/Motion	Moved	Seconded	Outcome
	<p>there's more capacity to do more tests (e.g. blood tests, STI screening) on the Thursday rather than the Friday for the nurse.</p> <p>FTIR testing: Starts by weighing the sample by taking a photo of it on a doc that gives an indication of scale. Then you would get a spectra that is unique to the chemical which is compared to those in a database with 10s of 1000s of chemicals. Tiny sample put on a diamond plate and putting an infrared light on it. Fourier-transform infrared spectroscopy (FTIR) is quantitative not qualitative- an indication of a substance and a score out of 1000 for confidence. >750= high confidence, 600-750= lower confidence, <600= low confidence. It gets complicated if there are more than one substance involved generally the FTIR testing can only indicate up to 2 components and they need to make up at least 5% of the sample tested. All FTIR samples are retained for subsequent analysis by the ACT Govt Analytical Laboratory (ACTGAL) for quality assurance. Info sharing between ACTGAL and ANU was really important for both of their methods.</p> <p>A piece of equipment which is new to the fixed site service that wasn't present at the GTM pilots is the Ultra-Performance Liquid Chromatography-Photo-Diode Array (UPLC-PDA) analysis. Supplied by analytical partner Water Australia, separates compounds using liquid chromatography. Detects compounds using UV- visible spectroscopy. Identify and quantify 10 target drugs. Detect but not identify non-targeted drugs. A running race where the amount of time it takes a substance to go through a column tells you what substance it is. UPLC targeted compounds are morphine, heroin, amphetamine, methamphetamine, MDMA, MDA, PMA, MDEA, Ketamine, Cocaine- if you have a substance that is something not targeted- you'll still have a peak, but you won't know what that is. This can be followed up with GC-MS testing afterwards. If people are returning to the service a week or 2 later there may be additional information. Working on a multi-disciplinary team including chemists is interesting and challenging- scientific analogies used very useful and can improve harm reduction messaging and refine health promotion messages.</p> <p>Fentanyl Test Strips (FTS) work like a rapid antigen test. Detect the presence of fentanyl but what is important is the dilution ratio, claimed limit of detection for fentanyl is 20 ng/mL. Lateral flow immunoassay for the detection of fentanyl and fentanyl derivatives. Involves dissolving 1mg of drug sample in 1mL of water (1 mg/mL), dip test for 10-15 seconds and develop for 5 mins. Note a test band (T) disappears when drug is present, control band (C) must be present (e.g., opposite of a COVID RAT).</p>			

Harm Reduction Victoria 2022 AGM Minutes

Agenda item/topic	Discussion/Motion	Moved	Seconded	Outcome
	<p>Follow up GC-MS analysis</p> <p>Combination of UPLC and FTIR. Step 1- Like UPLC, Gas chromatography (GC) splits samples up into components like UPLC, each peak is a separate substance. Step 2- Like FTIR Use mass spectrometry (MS) to generate a spectrum which is matched against an international library to identify substance. It can identify very small components of mixtures like benzos in pressed pills, identify novel research chemicals as the libraries are more expansive than FTIR and identify most unknown peaks in a UPLC sample. It cannot give results in less than half an hour or be deployed in a small, carpeted room, having an aircon on. May not be able to get results with less than 5% of a sample.</p> <p>CanTEST is on Facebook, Instagram, Twitter and has a subreddit and you can see a snapshot of each month- number of tested substances by kind of substance, purity- e.g. cocaine purity is quite low compared to cocaine, also tracks trends. More than 600 samples tested.</p> <p>CanTEST detected a fluorinated ketamine derivative that had not been detected on the illicit market before.</p> <p>First red alert at the service was in December of 2022 and it was a counterfeit Oxycodone pill where a novel opioid which is essentially stronger and more risk than fentanyl was detected. Another thing that has been highlight by drug checking is all the different fillers present.</p> <p>Lactose: milk sugar in MDMA pills and powders, likely easy to press, Creatine: pre-workout seen in many things, readily available and generally safe white powder, Dimethyl sulfone (MSM): food additive & anti-inflammatory seen in MDMA due to it's crystalline appearance and ease of pressing, Sucrose/glucose/inositol: sugar seen in many things, generally safe white powders, Caffeine: simulant commonly seen in cocaine for it's stimulant effect and Procaine/lidocaine/benzocaine: local anaesthetics commonly seen in cocaine and ketamine for numbing effect. Results for 'peanut' or 'licorice' are just general detections of starchy fillers, unlikely to be any peanut or licorice present.</p> <p>Check out the interim report which is currently out which provides an evaluation of the first 3 months of CanTEST service delivery and we are awaiting the final report which will dive a little deeper into the service.</p>			

Time meeting closed	5:16PM
Chair signature	-----/-----/-----

Harm Reduction Victoria 2022 AGM Minutes