



ANNUAL REPORT

2023 – 2024



Contents

Introduction. 1

Chair and CEO Report 2

Our Board 4

Our Executive Leadership Team 5

Chair Finance Audit Risk Committee Report. 6

Impact Statement. 8

Services 10

Our people and culture. 20

Our funding and who benefited. 22

Acknowledgements 23

Every contribution counts 24

Hallmark Hospitality tee off for charity 25

Become involved. 25

Footprints Acknowledges

The traditional owners of the land and pays respect to the Elder's past and present, and we thank them for their wisdom and guidance.

Those who share their personal experiences, both current and lived, with us. We respect and value their opinions and input, which informs our service delivery.



*Aged Care Services Officer,
Khedup chatting with
clients during a social
support group activity.*

Introduction

Since we commenced in 1991, Footprints has grown from a small Inner North City service with three staff to a diversified organisation with a dedicated workforce of nearly 280 staff and over 50 volunteers, supporting almost 8,200 clients.

280 staff
50+ volunteers
8,200 clients

We have a long history of working with the most vulnerable people residing in South East Queensland. Over the past several years our specialist response services have grown, and now extend across Queensland and into Northern New South Wales (NSW).

Our 2022–23 Annual Report, highlighted a key strategic goal of providing more services to more people in more regions. This year's report aims to build on that goal and demonstrate the impact this growth has had on our clients and the community.

How we help

We support older people to access aged care and other services enabling them to live a lifestyle of their choice

We provide holistic and personalised support and assistance to help older people to remain living in their own home and maximise their independence and choice.

We support people with disability to live independently in the community

We are a registered NDIS service provider and assist people living with a range of disabilities. We work alongside people and support them to reach their goals and live their best life. Our services are tailored to meet individual needs and aim to put more control and decision-making in the hands of the people we support.

We also assist people living with disability who are at risk of homelessness or homeless, to access a range of supports to enable them to foster and maintain connections with their local community.

We create safe spaces and offer critical resources for those navigating mental health challenges

Our mental health and community services teams comprise a wide range of professionals and people with lived experience who provide personalised support to assist an individual's mental health and recovery journey. We empower people with hope and optimism through a person centred and recovery-based approach.

We are dedicated to helping end the cycle of homelessness

Having a safe and secure place to live is a basic human right and we believe that everyone deserves to have somewhere safe and comfortable to sleep at night.

We support health with community-based solutions

We are committed to delivering high-quality, community-based support for adults to enable better health and wellbeing outcomes. Our programs enable people to build their independence and self-management so they can focus on their wellbeing.

Chair and CEO Report

The past year has been one of remarkable growth, expansion, and achievement for Footprints, enabling us to have a greater impact on the communities we proudly serve.

As we reflect on the successes of 2023–2024, it is clear that our collective dedication and commitment have allowed us to embrace new opportunities and overcome challenges with resilience and innovation.

Financial Performance

Footprints continues to demonstrate a strong financial performance, with 60% growth in the year under review. This growth has been driven by the addition of new services, including the care finder program, Social Prescribing initiatives, and taking over the delivery of the Toowoomba Housing Hub. These programs are vital as we work to meet the growing needs of our diverse communities and deliver services that make a meaningful difference in people's lives.

Workforce Strength and Innovation

Our greatest asset remains our people. The expansion of our workforce across multiple locations in Queensland and Northern New South Wales has presented new opportunities for collaboration, innovation, and the sharing of best practices. While managing a geographically dispersed team brings its challenges, it has also inspired us to refine flexible working arrangements and embrace new technologies, such as the implementation of a new Client Management System. We are committed to supporting the personal wellbeing and professional growth of our team, ensuring that they are empowered to deliver exceptional service to our clients.

Commitment to Diversity, Inclusion and Engagement

Diversity and inclusion have been key priorities throughout 2024, as we continue to cultivate an environment where every staff member feels supported, valued, and equipped to thrive. With a focus on staff engagement over the coming year, we have strengthened our Human Resources capacity by appointing a dedicated team member to further drive this agenda. We believe that by fostering an inclusive culture, we will create a workplace where everyone can contribute to our mission and vision.



Paula Holden (left)
Chair

Cherylee Treloar (right)
Chief Executive Officer

Infrastructure and System Improvements

The phased implementation of our new Client Management System, which began in 2023 and will continue into 2025, has been a significant milestone for the organisation. This system will enhance our capabilities, streamline operations, and ultimately improve the services we provide. We anticipate that the full benefits of this major system overhaul will become increasingly evident in the coming years, and we are grateful for the efforts of our project management team and super users, who have been instrumental in ensuring a smooth transition.

Quality, Regulation and Compliance

Our commitment to quality and safety has been reinforced through three major regulatory reviews in 2024, covering aged care, disability, and human services standards. We are proud to report that Footprints successfully met all requirements, a testament to the dedication of our staff to uphold the highest standards of service quality and client safety.

Government Reforms and Advocacy

In 2024, we navigated significant reforms, including the introduction of the new Aged Care Bill and the expansion of the Serious Incident Response Scheme (SIRS). Footprints has actively engaged in these developments, appointing an external consultant to facilitate our consumer advisory group, which provides valuable feedback to inform service development and quality improvement. We remain dedicated to advocating for our clients, especially in areas such as housing and homelessness, where we have expanded our support services and established new Hubs for older women at risk of homelessness.

Partnerships and Collaboration

Collaboration is at the heart of Footprints' success. This year, we would like to extend our gratitude to our partners, including Better Together, Zonta, and The Lady Musgrave Trust, among others. These partnerships enable us to deliver more holistic services and expand our reach to a broader geographic area, making a greater impact on the lives of those who need us most.

Board and Leadership

We would like to express our heartfelt thanks to Julie O'Sullivan, who has been a dedicated Chair of the Board for the past two and a half years. Julie has been an invaluable member of the Footprints family for over 15 years, bringing clinical expertise and insight to our governance. We also extend our warmest welcome to Paula Holden, who joins us as the new Chair. Paula's extensive experience in People and Culture and Governance will be a tremendous asset as we continue to grow and evolve. Additionally, we wish to acknowledge the significant contributions of Simon Vertullo, our outgoing Treasurer, and welcome our newest Board member, James (Joe) Gamblin.

Looking Ahead

As we move forward, Footprints is poised for further growth and success. The next 12 months will see us finalise our new Strategic Plan, consolidate our platforms, and deepen our impact.

With the continued support of our dedicated staff, leadership team, and partners, we are confident that Footprints will continue to be a driving force for positive change in the lives of our clients and the wider community.

We are incredibly proud of the achievements of the past year and are excited about what lies ahead as we continue this journey of growth, innovation, and service excellence.

Our Board

Paula Holden

CHAIR

Paula joined the board in November 2023 and stepped into the Chair role. She is an experienced Executive in the People and Culture discipline with leadership experience on both sides of the Board table.

Paula brings a relentless energy, drive and passion for values-based leadership. She has demonstrated her expertise across the people and culture, safety, leadership, governance and risk in both 'for purpose' and other varied, commercial environments.

Paula's most recent Board and career appointments have been enhanced by large-scale human service and community-based organisations.



Kerri Lanchester

BOARD DIRECTOR

Kerri has operated at senior levels in aged and community services for the past 30 years. Kerri's career has spanned strategic and operational leadership roles and aged care peak body membership experience. Kerri has held Board Director positions within local community care organisations and national companies.



Julie O'Sullivan

BOARD DIRECTOR

Julie has sat on the Board of Footprints for 14 years and stepped into the former Chair role in 2021 until November 2023. Throughout a professional career spanning over 25 years, Julie has served on several interest groups and committees in both health and community-based settings.



Cameron Early

BOARD DIRECTOR

Cameron is a Professional Board Director and has been since 2019 having previously served on the Seniors Advisory Board for Australian Unity Limited in 2012–2013. Cameron is currently a Member of the Board of Uniting Church in Australia (Qld Synod) – Committee for Discipline.



Lisa Pritchard

BOARD DIRECTOR

Lisa joined the Footprints Board as a volunteer Director in June 2021; she is also a member of the Footprints Quality and Risk Subcommittee. Lisa has previously held Chair, Secretary and Ordinary member roles on body corporate committees.



Joe Gamblin

BOARD DIRECTOR

Joe joined the Board in June 2024 and chairs the Finance and Audit Committee.

He is a highly experienced former CEO with extensive expertise in the community services sector. He serves as a Board Director for three not for profit organisations, including two in the educational field.



Stuart Rodney

BOARD DIRECTOR

Stuart has been a Footprints Board member since 2020. He is a seasoned commercial operator with executive level experience in the fields of Aged Care, Health Care and Supply Chain and Logistics. Currently the CEO of Mayflower. He held senior positions at Bolton Clarke, The American Hospital Dubai and Queensland Health.



Our Executive Leadership Team

Cherylee Treloar

CHIEF EXECUTIVE OFFICER

Cherylee has been the CEO of Footprints Community, specialising in community-based support and clinical services, for over a decade. In this role, she has led the organisation in providing services to older people, disabled individuals, those with mental illness, and people experiencing or at risk of homelessness. She brings strong industry knowledge and extensive strategic leadership experience and her involvement in various boards and government consultations has allowed Cherylee to contribute to significant initiatives and reforms. Under her guidance, Footprints Community has expanded its services and operations while maintaining alignment with its core mission.

Ralda Ruberry

CHIEF FINANCIAL OFFICER

Ralda has 25 years' experience as a tenured CPA in the not-for-profit sector with over 10 years as Finance Manager and more recently CFO at Footprints Community. Previous posts include Red Cross, Blue Care, Brisbane Powerhouse, Variety Children's Charity and YMCA Training (UK). Ralda holds post-graduate qualifications from the QUT School of Philanthropy and Non-Profit Studies.

Ed Zarnow

CHIEF OPERATING OFFICER

Ed is an experienced COO with over 40 years working in the not-for-profit sector including aged care, drug and alcohol and mental health. He has qualifications in health administration, facilities management and governance. Ed has a passion for working with organisations who have strong human based values and are client focused.

Jade Cronan-Thompson

CHIEF SERVICE DELIVERY OFFICER

Jade has 25 years of experience in the Human Services sector, working with people and leading teams in the delivery of services for vulnerable populations. Jade has experience working in Disability, Mental Health, Aged Care and Homelessness sectors. Jade holds a master's degree in social work and counselling, and a bachelor's degree in psychology.



*(L to R) ELT members
Ralda, Jade, Ed and Cherylee.*

Chair Finance Audit Risk Committee Report



I have much pleasure in submitting the Financial Report for the year ending 30 June 2024 for Footprints Community Ltd. (Footprints)

Footprints has continued to consolidate its financial position and is well placed to deliver the contracted services for all its programs.

Total income for the year of \$29.812 million is up 59% on the 2023 financial year with a resulting operating surplus of \$135,380.

Grant and Fee for Service income is expected to increase in 2025 and beyond with government funding contracts and service agreements in place for new and existing programs and clients.

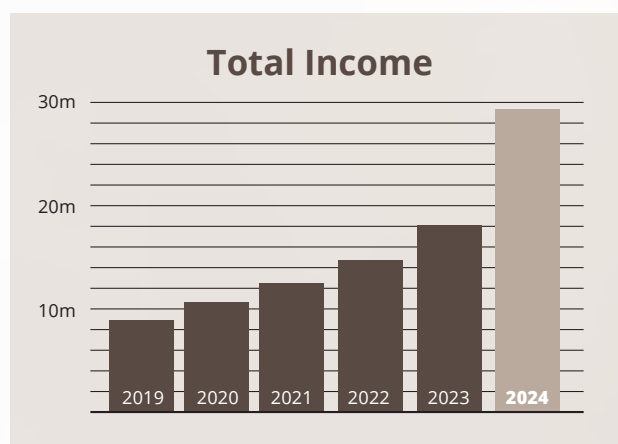
The Balance Sheet continues to reflect the solid financial position of the association. Net assets held by Footprints have increased and we have a cash holding and term deposits of \$5,118,245.

The Full Annual Audited Financial Statements are Tier 2 general purpose financial statements prepared in accordance with the *Australian Charities and Not-for-Profits Commission Act 2012*, Australian

Accounting Standards – Simplified Disclosure Requirements and have been audited by KPMG external auditors and are available upon request.

James Gamblin

Chair of Finance Audit Risk Committee
Footprints Community Ltd



Statement of Profit Or Loss And Other Comprehensive Income	2024	2023
For The Year Ended 30 June 2024	\$	\$
Grants	23,217,907	12,648,146
Fee for service	6,120,605	5,575,794
Other income	474,171	490,892
Total Income	29,812,682	18,714,832
Employee costs	23,975,931	14,637,933
Other expenses	5,701,371	3,718,850
Total Expenditure	29,677,302	18,356,783
TOTAL COMPREHENSIVE INCOME FOR YEAR	135,380	358,049

Statement Of Financial Position	2024	2023
As At 30 June 2024	\$	\$
Total Assets	11,201,406	9,906,825
Total Liabilities	7,711,816	6,552,615
NET ASSETS	3,489,590	3,354,210
TOTAL EQUITY	3,489,590	3,354,210

FOR A COPY OF THE FULL AUDITED FINANCIAL STATEMENTS PLEASE EMAIL FINANCE@FOOTPRINTSCOMMUNITY.ORG.AU

Vision

An inclusive community where individuals can maintain an independent lifestyle of their choice.

Mission

To be responsive, innovative, professional and timely in providing care and support for each client.

Values

Client centred — We actively support each client's choices, respecting their values and personal uniqueness.

Inclusion — We promote the right for individuals to access the resources they need to live safely and securely in the community.

Respect — We hold people in positive regard and treat them with courtesy and consideration.

Purpose

- 1** To promote quality of life for frail older people and younger people with disabilities, and their carers.
- 2** To actively work towards social justice.
- 3** To empower disadvantaged members of the community.
- 4** To contribute to the relief of poverty.
- 5** To complete any other charitable work or purpose for the benefit of the community.



Impact Statement

2023 – 2024



footprints
community

BETTER TOGETHER

We support older people to access aged care and other services enabling them to live a lifestyle of their choice

HOME CARE PACKAGES (HCP)

149 clients supported

COMMONWEALTH HOME SUPPORT PROGRAM (CHSP)

588 clients supported

ASSISTANCE WITH CARE AND HOUSING (ACH)

44 clients supported

HEALTHY AGEING SUPPORT (HAC)

109 clients supported

AGED CARE VOLUNTEER VISITORS SCHEME (ACVVS)

46 recipients supported

51 volunteers

637 face-to-face visits

20 phone calls

CARE FINDER

1,952 clients supported

33,388 hours of service delivery

7,906 hours of assertive outreach

We support people with disability to live independently in the community

NATIONAL DISABILITY INSURANCE SCHEME (NDIS)

215
clients supported

35,724 hours of direct support

8,307 hours of support coordination

238 hours of support coordination

83,586 kms of transport support

QUEENSLAND COMMUNITY SUPPORT SCHEME (QCSS)

38 clients supported

6,920 hours of general and homelessness support

COMMUNITY TRANSPORT

19 clients supported

417 trips provided

We create safe spaces and offer critical resources for those navigating mental health challenges

PEER-BASED GROUP SUPPORT (PBGs)

156 clients supported

WORKING TOGETHER TO CONNECT CARE (WTTCC)

87 clients supported

DIALECTICAL BEHAVIOUR THERAPY (DBT) SKILLS GROUP

187 clients supported

98% were linked to primary health
93% reported improved psychosocial
91% reported improved psychical wellbeing

RECOVERY and WELLNESS PROGRAM (RWP)

821 clients supported
82 into stable housing
38 into employment
15 onto the Disability Support Pension
8 for financial payouts
2 through the NDIS
2 into rehabilitation
1 through child reunification

REGIONAL ASSESSMENT SERVICE (RAS)

985 reviews completed
752 assessments completed

We are dedicated to helping end the cycle of homelessness

HOUSING OLD WOMEN'S SUPPORT SERVICE (HOWSS)

1,128 clients supported

133 clients supported to sustain a tenancy or successfully obtain housing

159 education and community engagement sessions held

HOMELESSNESS RESPONSE SERVICE (HRS)

652 clients supported

78 families supported into long-term housing, and motel accommodation

5295 hours of support
\$969,937 spent on brokerage

STAND UP, STEP OUT (SUSO)

207 patrons supported
1,049 instances of repeat patrons
675 showers provided
351 loads of laundry
435 provisions of emergency relief — food and toiletries

TOOWOOMBA HOUSING HUB (THH)

519 clients supported
26 families supported into motel accommodation

We support health with community-based solutions

SENIORS VITALITY HEALTH CONNECT (SVHC)

105 clients supported

97% showed health and wellbeing improvement

58% showed frailty symptom improvement

118 referrals received until 1 April 2024

SOCIAL HEALTH CONNECT (SHC)

180 referrals received

47% were older Australians

8% were from CALD backgrounds

4% were from First Nations backgrounds

CARE COORDINATION SERVICE (CCS)

208 clients supported

131 clients completed their support

74% achieved at least one goal

40% were aged over 65

30% were from CALD backgrounds

We support older people to access aged care and other services enabling them to live a lifestyle of their choice

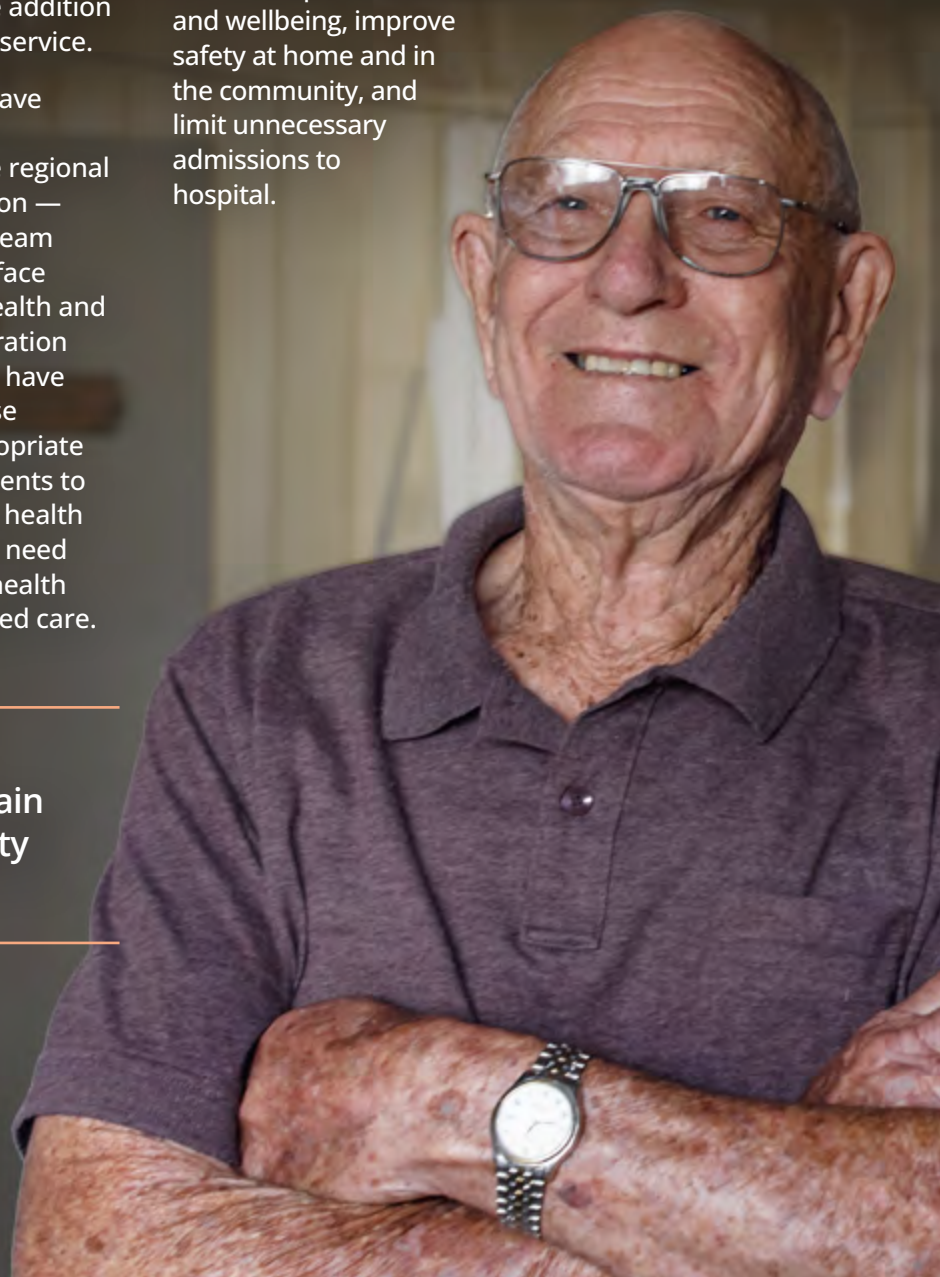
Footprint Community has a suite of aged care programs supporting older people: Commonwealth Home Support Program (CHSP), Assistance with Care and Housing (ACH), Home Care Packages (HCP), care finder program and Aged Care Volunteer Visitors Scheme (ACVVS) program.

In 2023–24, this suite expanded with the addition of our Healthy Aging Connections (HAC) service.

Since its establishment, our HAC team have utilised innovative thinking and creative approaches to support 109 clients in the regional areas of Darling Downs and West Moreton — areas often under-resourced by mainstream service provision. Many of these clients face transport and accessibility barriers to health and community services. Working in collaboration with community services, our HAC team have found inventive solutions to reduce these barriers while facilitating access to appropriate and sustainable supports, connecting clients to community groups, social networks and health services. HAC continues to minimise the need for client contact with the hospital and health system, and early entry to residential aged care.

This year, our CHSP services supported 588 clients to maintain their independence and capacity to live in their own homes.

CHSP also provides clients with vital social supports, giving them a connection to their community and reducing social isolation. Our CHSP team also plays a pivotal liaison role in the primary health space, advocating and coordinating primary health interventions to support independent living. Assisting our CHSP team is our clinical team, comprising nurses and allied health clinicians, who support clients to maintain optimal health and wellbeing, improve safety at home and in the community, and limit unnecessary admissions to hospital.



Our ACH service, also funded by CHSP, works compassionately and sensitively with clients experiencing the impacts of hoarding and squalor. This client group is highly vulnerable, and require a delicate approach, as they are often experiencing the effects of prior trauma and may be isolated from both formal and informal supports. This year, the ACH team supported 50 clients using a dual staff model, which softens a stressful decluttering process and ensures the client is well-supported throughout the process.

Our dedicated Care Managers worked with 149 HCP clients, coordinating a range of services, aids and equipment to meet their individual needs and goals. Our Care Managers work collaboratively with clients, their informal supporters, and service providers to ensure a holistic package of care, enabling our clients to live and participate in the community in a way which is meaningful for them. Where possible, our support workers are matched to clients for spoken language, culture and values to ensure clients feel comfortable and can communicate effectively.

Our ACVVS program provides an opportunity for older people with HCPs or living in residential care, to be matched to a volunteer for social support, and friendship. The program runs throughout South East Queensland and has successfully fostered companionship between clients and volunteers, providing a vital offset to loneliness and isolation.

Our care finder program supports older, vulnerable people, who would normally fall through the cracks, to access the aged care services and supports they need to live a life of dignity and ease.

Since its inception in early 2023, our care finder program has gone from strength to strength supporting around 2,000 clients in 33 Local Government Areas across Queensland and Northern New South Wales.

Footprints care finders continue to receive very positive feedback from stakeholders and clients alike.

To learn more about our Aged Care programs, visit:
footprintscommunity.org.au/services-category/aged-care



Megan pictured with Gordon during a check-in to see how Gordon is enjoying his new place.

From an uncertain future to living with dignity and ease

Meet our past care finder client, Gordon.

At the time of becoming a client, Gordon was 69 years old, and he had been living in crisis accommodation for nearly 12 months. Prior to this, Gordon had mental health concerns which lead to him being homeless and living in his car for many weeks with his long-time pet companion, Beau.

Gordon went into crisis accommodation after having an untimely fall and was hospitalised when found by passersby. Gordon was unable to have Beau with him in the crisis accommodation, and he required hospital out-patient services for on-going medical issues.

Gordon's care finder, Megan met with him at the crisis accommodation and assessed Gordon's housing options, and over a period she liaised with the Department of Housing, and advocated for Gordon to be referred to Rent Connect and the Head Lease team. Megan also linked Gordon back with My Aged Care and liaised with the local Aged Care Assessment Team to have a Home Care Package for Gordon approved as a high priority.

With Megan's support, Gordon has gone from feeling scared and alone, and not knowing what the future held for him, to being happily housed in a safe and secure private rental property managed by the Department of Housing. He was also reunited with Beau, has an aged care provider of choice, a GP and mental health provider, and ongoing support to meet his needs.

"I am so grateful for the support you (care finder) have given me", said Gordon.



We support people with disability to live independently in the community

In 2023–24, our disability services, which include our Queensland Community Support Scheme (QCSS) program and our National Disability Insurance Scheme (NDIS) program helped a diverse range of vulnerable client groups to live independently in the community.

Our QCSS program assists people with a range of disabilities, some of whom are homeless or at risk of homelessness, to access supports which enable them to foster and maintain connections with their local community. QCSS provided 38 clients with continuous and regular support.

Clients are assigned a Key Support Worker, who works with them to coordinate their supports, establishing rapport and trust which enables us to best respond to the client's individual needs. Clients who require transport to travel around their community, are supported by our Community Transport program. This year, Community Transport provided 417 trips ensuring that clients could easily attend scheduled appointments and meetings, employment and social needs. Eliminating transport as a barrier to community participation has assisted clients with social connection and meaningful activity.

Our NDIS program supports people who are marginalised and vulnerable due to psychosocial, intellectual and behavioural issues associated with their disability.

This year, we provided support to 215 clients, through 8,307 hours of support coordination, 238 hours of psychosocial recovery coaching and 35,724 hours of direct support.

Our support coordinators work closely with the client's stakeholders and advocate for the clients' needs and wishes, with informal supports, health and social services, and community groups and connections. Recovery coaching aims to stabilise the client's social situation by providing assistance with housing, financial, employment, health and social isolation issues.

Clients with non-physical disability can find themselves in crisis intermittently, whether due to mental ill-health, substance use, or housing and economic instability. Our support coordination team stay closely connected to clients who are in less stable environments. Engaging with clients and relevant stakeholders with timely and effective responses ensures the best outcomes for the client.

Our direct services team support clients to maintain their own homes and living situation, and increase independence, capacity, and confidence in daily living skills.

The team of skilled support workers also promote and support client connection and participation in their local community.

Supporting clients with psychosocial disability to develop life skills and coping mechanisms, assists them to maintain stable living situations and social connections, both of which contribute to increased mental and physical wellbeing. This results in reduced pressure on mental health teams in hospitals and health services, as clients are supported to work through times of difficulty or crisis and maintain their support networks.

To learn more about our Disability programs, visit: footprintscommunity.org.au/services-category/disability



Support Coordinator, Brian showing Craig some of the Supported Independent Living home options for his consideration.

From hospital into a Supported Independent Living home

Craig, who is 50 years old, was hospitalised for seven months following an accident that resulted in his right arm being amputated and barely any use of his left arm due to significant nerve damage.

Whilst in hospital, Craig received his first NDIS plan and was referred to Footprints for Support Coordination by the Social Work team at the Surgical Treatment and Rehabilitation Service Unit, Metro North Health.

Footprints Support Coordinator, Brian was assigned to Craig. When Craig was ready for discharge from the hospital, Brian assisted Craig to look for a Supported Independent Living (SIL) home. Craig reviewed three SIL homes with Brian's support and selected one which best suited his needs.

Brian has also worked with Craig on other areas of his NDIS plan and has linked Craig to a community service provider who will support Craig to go out into the community. Brian will also link Craig with an Occupational Therapist and other therapists now that he is settling into his SIL home.

"I am very happy with the supports from Footprints and thrilled to be out of hospital", said Craig.

We create safe spaces and offer critical resources for those navigating mental health challenges

In 2023–24, our Recovery and Wellness Programs (RWP) — North and South, Peer Based Group Support (PBGS) and Dialectical Behaviour Therapy (DBT) Group, Working Together to Connect Care (WTTCC), and Regional Assessment Service (RAS) teams touched the lives of thousands and made significant strides in providing effective mental health support to our clients.

Together, these teams worked tirelessly supported vulnerable people in their mental health journeys and in other critical areas of their lives, such as housing, employment, and long-term wellbeing.

RWP North, covers the vast area north of the Brisbane River to Caboolture, Bribie, Kilcoy, and surrounding regions; while RWP South, spans from the southern Brisbane River area down to Logan City, the Scenic Rim, and Redlands. Together they supported 821 people, providing them with comprehensive and integrated mental health care, and the necessary tools and services to navigate complex mental health challenges.

Of these, 82 clients were successfully supported into stable housing — a critical achievement that highlights Footprints commitment to holistic care. Housing stability plays a key role in mental health recovery, providing a foundation for individuals to focus on their wellbeing. Our RWP teams also supported clients into employment and financial independence, to obtain the Disability Support Pension and financial payouts, to access NDIS, rehabilitation programs, and reunification with children.

The PBGS and DBT teams provide therapeutic and skill-building groups across Brisbane's inner city, Albion, Nundah, Redcliffe, and Caboolture. These groups are facilitated by peers who have lived experience with their



own mental health journeys and are co-designed with participant and stakeholder input. They are trauma-informed, strength-based, client-led, and offer hope, empathy, and encouragement to participants on their recovery journey. Some PBGS groups focus on social connection and sharing recovery stories, while other groups allow participants to explore skills and strategies for self-care and confidence-building. DBT Skills Groups cover bio-social theory, mindfulness, interpersonal effectiveness, distress tolerance, and emotional regulation.

Our WTTCC team has provided vital support to 87 people over the financial year, focusing on integrating mental health care with broader health and wellbeing outcomes. The team's approach focuses on linking clients to primary health services and improving overall psychosocial and physical wellbeing.

Finally, our RAS team conducted 752 vital assessments and 985 reviews for 1,737 people seeking in-home support services. Assessments are crucial for determining eligibility and service needs, while reviews ensure ongoing support and adjustment to care as needed.

In February 2023, Footprints secured funding from Brisbane South PHN to develop Medicare Mental Health Centres (MMHC) in Logan and Redlands. This groundbreaking project was co-designed with the community and led by Helen Glover of Enlightened Consultants. Armed with the information obtained through the co-design process, the MMHC Project Team is creating welcoming accessible, stigma-free, walk-in spaces that feel safe and homely, and incorporate therapeutic tools to promote mental wellbeing and encourage greater community engagement. The fit out of the centres is currently underway.

From July 2024, our Mental Health Services are set to expand into the greater Mackay Region under the North Queensland PHN's Stepped Care model. This project will enhance mental health support in the region, and foster collaboration across North Queensland's mental health services. This project underscores our commitment to ensuring that communities across Queensland have access to vital mental health services.

To learn more about our Mental Health programs, visit: footprintscommunity.org.au/services-category/mental-health



On a journey of recovery

At 29 years of age, Laura experienced a relationship breakdown involving domestic violence, which led her to first-time homelessness and being diagnosed with mental health conditions. She was unemployed due to her conditions and was financially vulnerable.

She was referred to our Recovery and Wellness Program (RWP) by the Homeless Health Outreach Team at the Royal Brisbane and Women's Hospital, for psychosocial support and engagement in meaningful occupations to enhance her overall wellbeing.

During the first two months of support, Laura's Recovery Facilitator assisted her to submit a social housing application, which was approved, and schedule an intake appointment for a Queensland Homelessness Information Platform assessment and community housing referral. Laura also attended a Rent Connect appointment at the Department of Housing and has been actively applying for private rentals.

Laura was referred to our PBGS Skills Building and Chill, Chat, and Create groups, which she has been attending weekly, and she reports that she appreciates the opportunity to improve her wellbeing and connection to her community. She was also referred to our PBGS DBT program and commenced in October 2024.

RWP provided Laura with financial brokerage to move her belongings from her ex-partners house and into storage. She was linked with a bulk-billing general practitioner and provided information on bulk-billing psychologists.

Thanks to our RWP, Laura has made significant progress — her mood has improved, and she is eating and sleeping better. She has secured a private rental house and is continuing her recovery journey.

We are dedicated to helping end the cycle of homelessness

Many people are struggling to meet the ongoing affordability issues associated with private rental increases, fewer housing options available and the ongoing rise of the cost of living.

In 2023–24, our teams continued to work with clients to understand the barriers and challenges people faced which led them to homelessness. Our teams work collaboratively and in partnership with many service providers, to ensure people receive a smooth transition between services and get the support they need ... when they need it.

This year, our homelessness services grew significantly as an outcome of a successful tender for the Toowoomba Housing Hub (THH), and a substantial increase in funding for brokerage to support families, couples and singles experiencing homelessness under the Home For Queenslanders strategy by the Queensland State Government. This same funding enabled our Homelessness Response Service (HRS) and THH to grow their support teams to meet the increasing outreach support needs of 1,171 people accessing these services.

The THH is a new opportunity for Footprints, sharing a space with the Toowoomba and South West Housing Service Centre and other community sector partner organisations as a 'one-stop-shop' for people to access support when they are experiencing homelessness or at risk of homelessness.

Our Stand Up, Step Out (SUSO) service continued to provide mobile outreach support to 207 service patrons in the community, meeting them where they are.

SUSO assisted patrons with 675 showers and 351 loads of laundry and provided 145 patrons with food and toiletries 435 times.

Patrons can also have a cuppa and a chat, this gives our SUSO team an opportunity to provide patrons with information and advice, as well as support to access services relevant to their needs.

This service provides important outreach support for people who are vulnerable and sometimes very isolated, with little connection to community access points. Often SUSO is the only service people will access during the week. So, it is vital that this service is regular, ensuring patrons can remain connected and receive the continued support they need. Staff from other Footprints programs, such as Social Health Connect (SHC), Recovery Wellness Program (RWP) and Housing Older Women's Support Service (HOWSS) regularly attend the SUSO outreach visits to ensure patrons' health and wellbeing are supported and they receive the appropriate referrals and links.

HOWSS has been operating now for just under two years, and as awareness of older women's homelessness grows, the need for HOWSS continues to increase. During this year, 1,128 women accessed HOWSS seeking support with information and advice, case management, education and emotional support. Our HOWSS Community Education and Engagement team delivered 159 community engagement and education sessions to women across South East Queensland and Mackay

HOWSS client, Maria (left) with Community Education and Partnership Lead, Kylie (right).

ensuring women have the knowledge to make independent decisions about their housing options, in a safe manner, wherever they are in Queensland.

On average, the care finder program continues to receive 41 referrals per month where the client is homeless or at risk of becoming homeless. This represents 19% of all referrals received by the program.

Regions most impacted are North Brisbane, North Coast New South Wales and Central Queensland, Wide Bay and Sunshine Coast. Although the care finder program's main purpose is to help vulnerable older Australians access the aged care scheme often the client's most pressing unmet need is in relation to housing issues. Each month care finders make approximately 107 referrals to Housing and Homelessness services as well as working closely with their client to identify options and help maintain existing tenancies at risk.

To learn more about our Homelessness programs, visit: footprintscommunity.org.au/services-category/homelessness



Finding a home and rebuilding family relationships

Brenda, who is 73 years old, suffered a stroke 18 months ago. Her son came to live with her after she left hospital and he encouraged her to move into a rental property with him, his partner and their three children.

Brenda used some of her superannuation to secure a place for the family and to pay debts owed by the son's partner. After three months of living together, Brenda was asked to leave which damaged her relationship with her son.

She found accommodation at a friend's house in a nearby town, but that wasn't ideal. The house was highset, and Brenda was left with limited mobility from the stroke. Her only income was the Aged Care Pension, and she had no access to a computer or car which limited her ability to find accommodation and give her access to social activities.

Brenda reached out to HOWSS for support to source a sustainable and affordable long-term ground floor rental in the town where she had been living and to help re-establish a relationship with her son.

HOWSS assisted Brenda to source and secure an affordable one-bedroom rental unit, that has an internal layout and access that suited her needs. It has an enclosed yard for privacy and security and is close to shops.

HOWSS also sourced an affordable removalist to help her move and assisted Brenda to provide her new details to Centrelink to ensure her rental assistance was maintained.

In addition to meeting Brenda's housing needs, she was provided with emotional support and coaching which has helped her re-establish a relationship with her son.

We support health with community-based solutions

In the vibrant and diverse regions of Logan, Beaudesert, Redlands, Brisbane, Moreton Bay and Somerset, community-driven social, health and wellbeing programs play a crucial role in shaping the overall quality of life.

Three of our programs — Care Coordination Service (CCS), Seniors Vitality Health Connect (SVHC) and Social Health Connect (SHC) demonstrate the impact that tailored, social prescribing and community-based solutions can have on both individuals and the broader community.

This year, CCS celebrated its fifth year of providing a comprehensive social health program. The program, in partnership with primary health care, is designed to serve the needs of adults living with chronic health conditions and barriers to managing their health and social needs. CCS was established with the vision of bridging gaps in healthcare access, understanding and navigating Australian health and longer-term support systems such as NDIS, My Aged care and providing advocacy, health literacy, linkages and supports to vocational groups, activities, social and supported

groups. The CCS foundational approach of health collaboration, saw the program partner and collocate with 36 practices this year.

The impact the program is having on clients is significant and has demonstrated it is particularly needed by clients from CALD backgrounds. The program's collaboration with GPs across the regions has seen 208 clients being supported, of which, 30% are from CALD backgrounds where the need to navigate support systems and provide health literacy with holistic care and cultural respect is paramount.

SVHC was a 12-month program which ended in June 2024. In this period, the SVHC team supported 118 older people who had health care needs and showed signs of frailty, with early intervention initiatives to support healthy ageing in the community. SVHC provided workforce development and training to organisations and providers who work directly with clients and patients who have symptoms of frailty and partnered with Champion Health to train our Allied Health Assistants in delivering exercises and other targeted interventions. Our team hosted six informal frailTEA social connection events for people living with signs and symptoms of frailty, or their carers to attend.



Our SHC program supported 172 adults, over the age of 18 years old, living in the Caboolture and Kilcoy hospital catchments, who had unmet social needs negatively impacting on their health and wellbeing. The SHC team of Link Workers provided outreach link work to people referred either by a general practitioner, community organisation, Queensland Health, Queensland Police Service or self-referred.

SHC strives to build meaningful relationships and linkages into a person's own community. Supporting social health positively impacts people's physical, mental and emotional health and wellbeing.

In June 2024, the University of Queensland undertook a 1-year evaluation into SHC's service provision. The results of the evaluation showed:

- Link Workers successfully completed 107 client inductions from 141 referrals
- 59% of clients completed the program and 29% disengaged from the program
- The average age of clients at intake was 58 years with 63% being women
- Clients exiting the program reported a greater feeling of belonging, improved health satisfaction, a significant reduction in loneliness, and improved quality of life, psychological distress and wellbeing.

To learn more about our Community, Health and Wellbeing programs, visit:
footprintscommunity.org.au/services-category/community-health-wellbeing



Senior Link Worker, Lloyd helping Carmel do some online research into transport options.

Enhancing independence and wellbeing

Carmel, 79 years old, lives independently in her home with her dog and cat. She has been managing her care needs but faces increasing challenges as she ages.

Before connecting with Footprints, Carmel was on a Level 2 Home Care Package (HCP) but needed to move up to a Level 3 HCP due to her declining health and the onset of dementia. Difficulties with her previous service provider left her feeling socially isolated and without the assistance she needed. She also faced challenges navigating the complexities of the My Aged Care system and had concerns about her personal safety.

Carmel was referred to Footprints by her Mental Health Case Manager from Queensland Health. During 2023–24, Footprints provided Carmel with personalised and practical support. Courtney, from our Seniors Vitality and Health Connect (SVHC) program, played a key role in helping Carmel be reassessed for a Level 3 HCP. Courtney also organised a falls alarm to address Carmel's personal safety concerns, arranged a dementia clock to help her manage her daily routines, and linked Carmel with a local dementia support group to provide social and emotional support.

When SVHC was discontinued, Carmel seamlessly transitioned to the Care Coordination Service and came under the care of our Senior Link Worker, Lloyd.

As a result of Footprints support, Carmel has experienced significant improvements in her wellbeing — her personal safety has been enhanced, her social connections have improved, and she has reduced feelings of isolation. The support she received has given her peace of mind.

"In my opinion, the service I have received from Footprints has been outstanding. The support from Lloyd and Courtney went above and beyond," said Carmel Kalotai.

Our people and culture

This is an exciting time to be part of this highly respected organisation, that not only puts our clients at the heart of everything we do, but also deeply values the incredible contribution from our dedicated staff. Our success is due, in part, to our staff's commitment to enhancing our clients' quality of life, while providing service excellence.

Our Strategic Workforce Plan impact

We celebrated the completion of our inaugural 2022–2024 Strategic Workforce Plan, which has been pivotal in our organisation's success. This year's notable achievements from the plan, included:

- a 13% growth in our workforce, building on a significant 32% increase in the previous year
- a 129% increase in permanent staff roles and a reduction in both fixed-term and casual roles
- a 28% improvement in employee retention
- First Nations employees has risen to 4% over the past two years.

As we look ahead, our new Strategic Plan will guide us in setting the next phase and key priorities of our new Strategic Workforce Plan.



(L to R) ACVVS team members Jo, Lisa and Remi pictured with long-time volunteer, Martin.

Our amazing volunteers — Thank you!

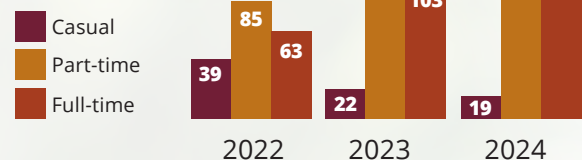
We extend our heartfelt appreciation to all our volunteers for your invaluable contribution — your kindness, compassion, and dedication. It is truly inspiring.

Since the launch of our Aged Care Volunteer Visitors Scheme (ACVVS) in mid-2023, we have welcomed over 50 new volunteers who have collectively contributed over 700 hours of service in providing friendship and companionship to older adults.

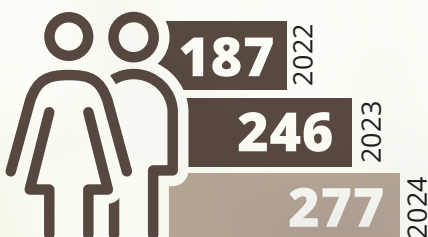
We are incredibly grateful to our ACVVS volunteers and to all our volunteers, for the time and commitment you make. Without your support, our mission would not be possible.

To learn more about our ACVVS program, visit: footprintscommunity.org.au/services/aged-care-volunteer-visitors-scheme

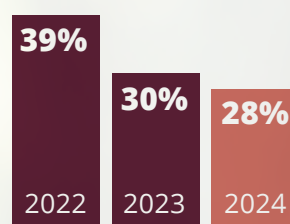
Employment Status



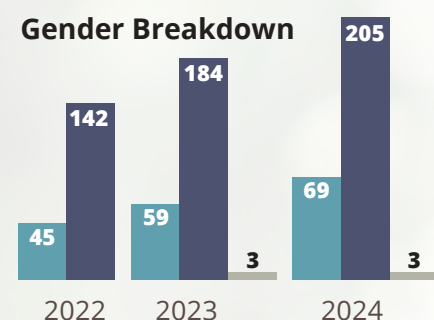
Total Number of Staff



Annual Turnover



Gender Breakdown



● Male ● Female ● Unspecified



Meet Laurie, our First Nations Consultant who brings us his cultural expertise and guidance.



Care finder team members attending the Ipswich NAIDOC Family and Cultural Celebration.

Strengthening our organisational capability development

We welcomed our new Capability Development Specialist towards the end of this year. This key role leads the development and implementation of our organisational Capability Development Strategy. The strategy will:

- provide a strong foundation for an engaged workforce with enhanced abilities, skills and knowledge
- ensure the attraction, engagement and retention of talented employees
- position Footprints an 'employer of choice' for our employees and 'provider of choice' for our clients.

To learn more about our working for Footprints, visit: footprintscommunity.org.au/work-with-us

Our unwavering passion for reconciliation

Although our Reflect Reconciliation Action Plan (RAP) officially concluded in December 2023, our RAP Working Group remains energised and passionate. The group recognises that upholding the principles of reconciliation is significant to our current employees and to grow our reputation as an employer of choice amongst First Nations people.

We are pleased to welcome Laurie Stewart as our First Nations Consultant who will guide us through the next phase of our RAP and ensure

we foster a culturally safe workplace and inclusive environment for First Nations staff and clients.

Laurie is a very proud Aboriginal family man with traditional ties to Murrawarri in North West New South Wales (NSW) and Kooma in South West Queensland. He brings his cultural expertise and strategic guidance to Footprints Community.

Keep the Fire Burning! Blak, Loud & Proud

This year, our commitment to reconciliation included:

- Staff from various programs attending the Northside NAIDOC Community Fun Day, the Logan NAIDOC Celebration, and the Ipswich NAIDOC Family and Cultural Celebration.
- Over 50 staff from our care finder team undertaking Banaam Cultural Intelligence Workshop training in Northern NSW.
- A Footprints-wide NAIDOC Week staff celebration in our Light Street Office and virtually. The celebration featured a traditional smoking ceremony, a yarning circle, an interactive art session, and 'bush tucker' inspired food and refreshments.

To learn more about our Reflect Reconciliation Action Plan, visit: footprintscommunity.org.au/plans

Our funding and who benefited

DEPARTMENT OF HEALTH AND AGED CARE (AUSTRALIAN GOVERNMENT)

CHSP & HCP: 737 people over 65 years or younger for First Nations or prematurely aged people, to live with support for wellbeing and health, in the community as they choose.

ACH: 44 people over 65 years or younger for First Nations or prematurely aged people, who are affected by hoarding and squalor, to live in safe and sanitary environments and remain connected to their community and social networks.

ACVVS: 46 older people receiving Australian Government subsidised residential aged care or home care packages who are socially isolated.

QUEENSLAND DEPARTMENT OF HOUSING

HOWSS: 1,128 women over 50 years or over 45 years for First Nations women, who are at risk of or experiencing housing distress and/or homelessness.

HRS: 652 people and families who are homeless or at risk of homelessness to move out of homelessness and have the right supports in place.

Immediate Housing Response for Families: 49 families experiencing primary homelessness (sleeping rough or in cars) with paid motel accommodation and support into appropriate long-term housing.

THH: 519 people at risk of or experiencing homelessness to obtain and maintain appropriate housing.

QUEENSLAND HEALTH

RWP – North and South: 821 people experiencing severe or persistent mental health illness, who are at risk of homelessness, reside in a boarding house, hostel, or supported or crisis accommodation.

PBGS and DBT Group Program: 343 people accessing the Footprints Community Recovery Wellness Program or the Richmond Fellowship Queensland Hospital to Home Program and require therapeutic group support.

SUSO: 207 people sleeping rough and/or at risk of homelessness, with a safe environment to shower, access laundry facilities, and access supports and services.

QUEENSLAND DEPARTMENT OF TREATY, ABORIGINAL AND TORRES STRAIT ISLANDER PARTNERSHIPS, COMMUNITIES AND THE ARTS

QCSS: 38 people under 65 years or younger for First Nations people, living with a disability, chronic illness, mental health or other condition that impacts their daily life and ability to participate in the community

Community Transport: 19 people under 65 years who are transport disadvantaged.

Primary Health Networks

BRISBANE SOUTH

CCS: 208 people over 18 years living with chronic health conditions.

SVHC: 118 people over 65 years or younger for First Nations, experiencing health care needs and showing signs of frailty.

BRISBANE NORTH

SHC: 180 people over 18 years with unmet social needs negatively impacting on their health and wellbeing.

WTTCC: 87 people seeking frequent support from Emergency Departments at the Royal Brisbane Women's Hospital and The Prince Charles Hospital.

RAS: 1,737 people over 65 years or younger for First Nations people for assessment and review, to connect with aged care service.

DARLING DOWNS AND WEST MORTON

HAC: 109 people over 65 years or younger for First Nations people, to connect to community supports and minimise unnecessary hospital or residential aged care admissions.

BRISBANE SOUTH

BRISBANE NORTH

DARLING DOWNS AND WEST MORTON

NORTHERN QUEENSLAND

NORTH COAST NSW

GOLD COAST

CENTRAL QLD, WIDE BAY AND SUNSHINE COAST

Care finder: 1,952 people over 65 years or younger for First Nations or prematurely aged people, to access the aged care services and supports needed to live a life with dignity and ease.

- **237** Brisbane South people
- **308** Brisbane North people
- **40** Darling Downs and West Morton people
- **172** North Qld people
- **189** North Coast NSW people
- **207** Gold Coast people
- **799** Central Qld, Wide Bay and Sunshine Coast people



Acknowledgements

Partnerships

- Aged and Community Care Providers Association Ltd (ACCPA)
- Australian Alliance to End Homelessness (Advance to Zero)
- Bayside Housing Service Centre
- Better Together Community Support – Atherton Tablelands
- Better Together Housing – Coast2Bay Community Housing
- Brisbane North PHN
- Brisbane South PHN
- Caboolture Neighbourhood Centre
- Country to Coast PHN
- Darling Downs and West Moreton PHN
- Deception Bay Neighbourhood Centre
- Department of Housing
- Department of Treaty, Aboriginal and Torres Strait Islander Partnerships, Communities and the Arts
- Encircle Community Services
- Gold Coast City Council
- Gold Coast PHN
- Greater Whitsunday Communities
- Healthy At Home CHSP Consortium
- Healthy North Coast PHN
- Housing for the Aged Action Group (HAAG)
- Inala Primary Care
- Kilcoy Community Wellness Hub
- Kilcoy Family Practice
- Mangrove Housing
- Marsden Family Doctors
- Moreton Bay Regional Council
- National Disability Services (NDS)
- Northern Queensland PHN
- Pebble Beach Medical Centre
- Q Shelter – Service Integration Initiative
- QSTARS
- Queensland Alliance for Mental Health
- Queensland Council of Social Service (QCOSS) (Town of Nowhere 2.0)
- Queensland Health
- Queensland Hoarding and Squalor Strategy Group
- Redlands City Council
- Richmond Fellowship Queensland (RFQ)

- Skills Hub
- Somerset Regional Council
- Sunshine Coast University
- Tenants Queensland
- The Breakfast Club Redcliffe
- The Forgotten Women
- The Lady Musgrave Trust
- Toowoomba and South West Housing Service Centre
- University of Queensland
- Wesley Mission
- World Wellness Group
- Zillmere Community Centre
- Zonta Club of Brisbane

Professional support and advice

- Norton Rose Fulbright (Pro Bono Services)
- Beacon Strategies
- Evolve Marketing
- Grantful - Barbara Brangan
- Ignition Creative
- NFP Lawyers
- Reconciliation Australia
- Tonita Taylor

Donations

- Rotary Club of Fortitude Valley
- Betty Baram
- Judith Bligh
- Greg Bruton
- Joe Buckley
- Narelle Christiansen
- Walter and Eliza Hall Trust
- Colleen Heller
- Jason Isles
- Ben Spencer

Fundraising Partners

- Hallmark Hospitality
- StreetSmart Community Grants

Every contribution counts

Every day across the country, social and economic factors continue to contribute to the growing number of people in Queensland and Northern NSW needing support. We continue to see a rise in homelessness, mental health issues, social isolation, and stresses on our aging community and those living with disability.

Here at Footprints, we try to help as many of those in need as possible. However, our funding can only do so much, and regrettably, sometimes we are unable to support everyone that needs our help.

More than ever, your generosity no matter how big or how small, whether it is donating your time, making a donation or bequest, or supporting us through a corporate sponsorship or partnership can make a difference to the lives of others.

Programs such as our SUSO mobile outreach service which provides support to people experiencing homelessness, social and/or financial hardship, rely on the generosity of local businesses, organisations and individuals to bolster the support we can provide. To the right is a small selection of the generosity extended to our SUSO service this year.

To learn more about our SUSO mobile outreach service, visit:
footprintscommunity.org.au/services/stand-up-step-out-homeless-outreach



Brendan, our SUSO Outreach Worker and bus driver with a donation from Woolworths.



Members of the Redcliff Central Lions Club with a donation of goods for SUSO.



Caboolture River Fishing & Boating Club presenting a cheque for \$2,500 to Roxy, our Marketing and Communications Manager.



Jenson, our Team Leader MHS pictured with an Animal Rescue Cooperative donation of dog food to help support SUSO patrons with companion dogs.

Hallmark Hospitality tee off for charity!

This year we want to recognise Hallmark Hospitality (Hallmark) who has made significant donations to Footprints Community over the past two years and soon to be third year.

Established in 2014, Hallmark operates 13 restaurants, bars and nightclubs across Australia, (predominantly in Brisbane and the Gold Coast). Hallmark has a perfect venue for everyone and every occasion, whether it is an intimate family dinner, corporate event or adventure into the small hours of the morning.

Hallmark is a progressive hospitality group who put hospitality excellence, quality, and people at the heart of everything they do. In 2024, Hallmark was the Queensland Hotels Association (QHA) Winner of Best Hotel Group Operator, and QHA finalists in 2023 and 2022.

In 2022, Hallmark established its annual charity event — The Annual Gold Coast Hospitality Golf Day.

Held at the Parkwood Golf Club on the Gold Coast, this 4-player team, 18-hole Ambrose event attracts delegates from across the hospitality and entertainment industries to raise much-needed funds for charity. For the past two years, funds raised were generously donated to Footprints Community and the Gold Coast Community Fund.

Footprints gratefully received \$30,000 in 2023 and \$25,000 in 2022 for our mental health programs to assist with mental health brokerage, an area often overlooked by funding models.

Our mental health programs supported 1,669 people in the last financial year, and 832 people in the previous financial year.

We sincerely thank Hallmark, for their generosity and kind support. We again look forward to being a charity partner in October 2024 along with the Men Of Business (MOB) Academy who promote workforce and career focused education for boys in Years 11 and 12.



We specialise in:

- Aged Care
- Disability Support
- Mental Health
- Community Care
- Housing and Homelessness Support

1800 FOOTPRINTS
07 3252 3400
community



Become involved

There are many ways you can get involved and support Footprints Community.

You can support Footprints through:

- Volunteering your time
- Becoming a sponsor or corporate partner
- Making a financial donation or donating items to a program
- Leaving a bequest in your will.

To learn about the different ways you can become involved and make a difference, visit: footprintscommunity.org.au/get-involved

Scott Hempel, Managing Director of Hallmark Hospitality pictured with Naomi, our Senior Manager Homelessness Programs.



✉ admin@footprintscommunity.org.au
PO Box 735 New Farm QLD 4006

🔍 footprintscommunity.org.au

☎ 1800 366 877

🖨 07 3252 3688

Awards

