

Annual Report

2020-2021



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We wish to acknowledge and thank our supporters and partners:



For the
wellbeing
of Tasmanians

Strategic Plan

VISION: By 2023 we are the 'go to' experts and leaders in reproductive and sexual health clinics and education services.

MISSION: We enable choices that improve the reproductive and sexual health of the Tasmanian community through sustainable clinical services, education and advocacy.

VALUES:

EXCELLENCE

- Leadership
- Research and Evidence

EQUITY + EQUALITY

- Advocacy
- Accessibility
- Social Justice

INTEGRITY

- Honesty and Ethical Behaviour
- Drive and Accountability

COLLEGIALITY

- Openness and Respect
- Collaboration and Trust

COMMUNITY OUTCOMES:

- Increase access to a full, safe and effective range of reproductive and contraceptive options
- Reduce rates of teenage pregnancy
- Reduce rates of sexually transmitted infections
- Increase age-appropriate reproductive and sexual health literacy
- Increase access to information, training and education to support respectful relationships
- Improve health promotion and advocacy that benefit relationships, and the reproductive and sexual health of Tasmanians

STRATEGIC ENABLERS:

1. EXCELLENT CULTURE, PEOPLE AND PRACTICE

1.1 CULTURE: Our values, attitudes and outlooks support best practice service delivery

1.2 PEOPLE: We invest in talent and relationships to provide quality services

1.3 PRACTICE: We embrace continuous improvement and adapt positively to change

2. CLIENT FOCUSED SERVICES

2.1: CLINICS: Our expanding range of clinic services are highly valued by a diverse range of Tasmanians

2.2: EDUCATION: Our SRH education services are highly valued by schools; by organisations seeking SRH professional development; and agencies requiring individual casework

2.3: ADVOCACY: Our SRH advocacy results in positive and meaningful change for Tasmanians

3. FINANCIAL VIABILITY AND GROWTH

3.1: EFFICIENCY: Our services achieve the right balance between controlling cost, maintaining quality and meeting demand

3.2: SUSTAINABILITY: We offer new and expanded services that meet demonstrated demand and manage risk

3.3: DIVERSIFICATION: Our services are generating a surplus that enables growth and long-term service planning

4. EFFECTIVE AND ACCOUNTABLE ADMINISTRATION

4.1: BUSINESS PROCESSES: We have the systems in place to ensure quality, meet client needs and achieve financial goals

4.2: RESOURCES: We have the right staff, knowledge, facilities and equipment, in the right place, at the right time

4.3: GOVERNANCE & ACCOUNTABILITY: We have clear strategic direction and are transparently accountable to our members and stakeholders

Chair and CEO's Report

It is impossible to review the last year without pausing to reflect on the amazing work of our Board, staff, volunteers and community stakeholders who have worked tirelessly in keeping our sexual and reproductive health services relevant for Tasmanians.

From a service delivery perspective, we achieved the following during the year:-

- Refurbished our Glenorchy premises with great feedback from our clients, staff and stakeholders
- Invested and recruited to key positions including Regional Medical officers, Marketing and Communications Officer and a People and Culture Specialist
- Delivered expert sexual and reproductive clinical services to over 14,100 people
- Delivered age appropriate, evidence-based programs to over 9,200 students and over 380 service professionals
- Rolled out a new brand and visual design that better supports access to services including a new website and associated information and resources that are consumer friendly
- Continued to advocate for sexual and reproductive health rights particularly access to Termination of Pregnancy

Other key highlights of the year included:

- Positive staff engagement scores across all 11 key engagement areas
- A continued focus on good governance including further refinement of our clinical governance focus through activities championed by the Clinical Governance Committee
- Revised our Balanced Scorecard approach to monitoring achievements against our Strategic Plan with a focus on measuring staff and community outcomes.

FPT operates from a sound financial position. This year our auditors commended FPT on paying down all of its loans to FPWA. This has allowed the Board to consider and approve investment activities to progress our strategic outcomes including significant facilities upgrades in Hobart.

FPT continues to be a respected voice for women on Termination of Pregnancy (ToP). We continue to partner with the University of Tasmania and the National Health and Medical Research Council on research to improve the evidence base and practice for this service. We were encouraged by the Tasmanian Government's move to make surgical Termination of Pregnancy accessible through the public hospital system. This is something FPT has lobbied Government for a number of years, and we welcome this improved access across the state.

Our work in the community this year has been acknowledged by the Tasmanian Department of Health who have funded additional services for FPT. Our Budget Priority Statement had a focus on taking some strain off the public health system, by reducing some of the wait times in the area of women's health and we are pleased about what this means for the resultant services roll out.

Equity of access has been at the forefront of our work across this year; from national meetings with Family Planning Alliance Australia; submissions to Governments and the development and expansion of our services and information.

Finally, we would like to thank staff and the Board for their continued dedication to FPT's objectives and for the positive difference they create for Tasmanians which is showcased in this year's Annual Report.

Greg Winton
Board Chairperson

Cedric Manen
CEO

Our Board

Greg Winton

Greg joined the Board this year and recently accepted the position as Chairperson. He was the General Manager/Chief Executive Officer for a number of Councils in Western Australia and Tasmania.

Greg was a member of the Australian Institute of Management, a member of the Australian Institute of Company Directors and a Branch President/Board member of Local Government Professionals Tasmania. Greg concluded his professional career in 2021.

His particular interest in health matters was piqued during a stint in the northwest of Tasmania where he championed a holistic health and wellbeing community education program.

Colin Allen (Deputy Chair)

Colin joined the Board in 2012 and is Chair of the Finance, Audit & Risk Management Committee. Colin is founding director of his own company established in 1999 providing consulting services in business development, encompassing strategic development, marketing, operations, governance, finances and risk.

Colin has a Bachelor of Business (B.Bus), is a Fellow of the Australian Institute of Company Directors (FAICD) and Member of the Institute of Management Consultants (MIMC) and the Institute of Managers and Leaders (IML).

Kathryn Hansson

Kathryn joined the Board in 2015 and is currently the Chair of the Governance, Remuneration and Nominations Committee and a member of the Finance, Audit & Risk Management Committee.

Kathryn is the Leader of Technical Capability at TasNetworks with extensive experience in vocational education and training and project and business management. Kathryn has also established and operated two successful small businesses and holds a Masters of Marketing.

Alexandra McKeand

Alex joined the Board in 2019 and is a marketing and communications specialist, with proven skills in brand development and business strategy. She has worked in multiple industries and organisations including TasPorts, MyState Ltd., AMAC Consulting and Tourism Tasmania, developing brand positioning strategies to leverage opportunities and increase business awareness.

Alex is also on the Board of Directors of Fahan School, and is currently employed at Blundstone Australia as Group Communications and Global Brand Services Manager.

Joe Mullavey

Joe joined the Board in 2014. He is currently on the Finance, Audit & Risk Management Committee and is a member of the Medical Advisory Group.

Joe is a solicitor at Page Seager Lawyers. He was admitted as a legal practitioner in 2008 and practices primarily disputes regarding employment matters.

Elysse Blain

Elysse Blain joined the Board at the start of 2021 and is a member of the Finance, Audit & Risk Management Committee.

Elysse has strong experience in the field of corporate financial management and project management, with experience across various industries including telecommunications, mining, oil and gas, logistics and construction.

Elysse is CPA qualified with skills to assist businesses establish operational control processes of improve transparency of their performance results.

Craig White

Craig joined the Board in 2017 and chairs the Clinical Governance Committee. He has degrees in Medicine and Business Management and gained wide healthcare experience including as a major public hospital CEO, State Chief Health Officer and Chief Medical Officer ahead of retiring in 2015.

Craig's current other Board membership includes The Pinnacle Foundation (providing educational scholarships and mentoring support to young LGBTIQ+ adults) and Possability (a major disability services provider). Past roles include membership of the National Health & Medical Research Council, inaugural Victorian Ministerial Advisory Council on LGBTIQ+ Health and leading Australia's first national policy development for bloodspot screening of newborns.

Gerry Plunkett

Gerry joined the board in November 2020, having previously been a Board Member of Family Planning Tasmania in the mid-'90s and then had to resign she then became a member of the Education team. Previously, Gerry was a member of the Board at Ability Employment for 10 years.

Gerry trained as a high school teacher and has worked in the regular classroom, as a resource teacher for students (and teachers...) with behavioural issues, and later with students with special needs.

Gerry has worked with Adult Education, Adult Literacy and for the last 20 years with TAFE in partnership in Industry delivering qualifications in Food Processing, Lab Operations, Training and Leadership.

Glenorchy Site Refurbishment



Health Minister the Hon. Sarah Courtney MP officially opened our new clinic room in Glenorchy with CEO Cedric Manen on 18 March 2021.

This new clinic room has increased our capacity to deliver services by 50% and provides a better experience for our clients.



Leadership and Advocacy

FPT advocated for better access to SToP, particularly during the pandemic and also successfully advocated with other Family Planning organisations for changes to accessing telehealth Medicare rebates for SRH patients.

74
staff



throughout the year



of our clinic clients hold a concession card



14,175
clinic visits

9,241 students

accessed our education programs



National Condom Day 2021



FPT partnered with Sexual Health Quarters for National Condom Day 2021, to promote the use of condoms & safer sex practises



New website & brand

New FPT website was launched in March, with improved accessibility. Visit fpt.org.au.



287



people with additional needs accessed one-to-one educative and therapeutic support

Family Planning Tasmania 2020 - 2021

Feature – SRH health rights are human rights

Sexual health rights are at the core of everything we do at Family Planning Tasmania.

We strongly believe that accessing quality sexual and reproductive healthcare and education is a fundamental human right. This belief is underpinned by international human rights frameworks that Australia is signatory to, such as the Universal Declaration of Human Rights, and the UN Sustainable Development Goals. As signatory to these frameworks, Australians are bound by them.

Though our mission speaks directly to the reproductive and sexual health of the Tasmanian community, we at Family Planning Tasmania are informed by the global context. We are global citizens, and what is happening on the global stage is inherently linked to our practise, including shifting global attitudes to sexual and reproductive health.

Sustainable Development Goals

The central idea behind universal human rights is just that; they are universal. Each person on Earth is given human rights at birth and should enjoy their human rights equally.

Unfortunately, this is not always the case in practise. Marginalised groups often do not experience human rights in the same way as privileged populations, and this is particularly true of health rights.

At Family Planning Tasmania, we follow the United Nations Sustainable Development Goals, with three being especially relevant to our business.

These are:

Goal Three: Good health and well-being;

Goal Four: Quality Education; and

Goal Five: Achieve gender equality and empower all women and girls.

Goal three is about ensuring healthy lives and promoting well-being for all at all ages. Sexual health and wellness is not just about treating issues as they arise, but also about experiencing sexuality as fulfilling, empowering

and pleasurable. This is demonstrated through our clinical and education services.

Goal four is to ensure inclusive and equitable quality education and promote lifelong learning opportunities for all. This speaks directly to our clinic and education services, with our aim to provide quality relationships and sexuality education to every Tasmanian.

Goal five is achieve gender equality and empower all women and girls. This goal speaks to our advocacy efforts to empower not just all Tasmanian women and girls, but our efforts in advocating on the local, national and global stage.

Players on the Global Stage

Family Planning Tasmania has been strong in our efforts advocating for the sexual and reproductive health rights of both Tasmanians and our global family. Family Planning Tasmania is a part of the International Planned Parenthood Federation (IPPF), a global collective of Family Planning organisations who stand shoulder to shoulder in their support of each other and share resources.

2020-2021 has seen that in some places, rights have progressed. Argentina, a predominately Catholic country, and a country of significant influence in Latin America, voted in favour of legalising termination of pregnancy in December 2020. This achievement came after years of campaigning by grassroots feminists, who sought to enshrine this right in law.

The President said providing free and legal terminations up to the 14th week of pregnancy was a matter of public health, as “every year around 38,000 women” are taken to hospital due to unsafe terminations, and that “since the restoration of democracy (in 1983) more than 3,000 have died (as a result of unsafe abortion)”. These statistics demonstrate the need for access to safe terminations, as restricting access to safe termination does not stop people accessing terminations, it merely stops people accessing safe termination of pregnancy.

While rights were progressed in Argentina, rights have been restricted or diminished in other countries, including two global superpowers- The United States and China.

In China, since the one child policy was enacted in the 1980s, there have been alarmingly high levels of forced termination including very late-term, involuntary sterilisation, infanticide and abandoned newborns. The Government of China says these practices have prevented 400 million births. In 2021, the Chinese Government has noted that the One Child Policy has led to a declining birth rate and population growth, so is now restricting access to termination “for non-medical reasons”.

In 2021, Texas wound back the rights of Texans to access safe termination of pregnancy, by banning termination after six weeks, and requires at least two visits to an abortion care facility. This bill is called Senate Bill 8. Pregnancy is dated to the last period, so many women do not realise they are pregnant until after the six-week mark, effectively barring their access to termination of pregnancy.

The effects of this ‘abortion ban’ are far-reaching, with the US Supreme Court set to review the landmark case of Roe v Wade, which set the precedent allowing termination access across the United States, at time of writing.

The way forward is not to change policies on women’s bodies. It’s to provide education and empowerment, to empower women to make informed choices about their own bodies.

This is the framework and solution presented in the Sustainable Development Goals, and the platform we follow at Family Planning Tasmania.

How is this relevant to us?

At Family Planning Tasmania, we live the United Nations Sustainable Development goals in everything we do. Our core business is around empowerment, education, access to high quality clinical services and advocating for equality.

2021 has been a good reminder that we cannot take our rights for granted at any time. We must never be complacent, even when celebrating

advances in human rights and safe access and enjoyment of these rights. It is important to pay attention to the global context and look to and support our International Planned Parenthood Federation (IPPF) colleagues, especially when they face challenges to their human rights protections.

Pregnancy, childbirth and raising a child can be difficult at the best of times, with babies who are loved and wanted. To force a person to endure this at-times traumatic experience, to force them to carry an unwanted pregnancy, is an infringement on their fundamental human rights. Equally, to force a woman to get an abortion, or forced sterilisation, breaches her human rights. Everyone should decide what they do with their body. Women and girls should be empowered to make sexual and reproductive choices with their own bodies.

How have we lived these goals in 2020/2021?

The 2020/2021 has been a year of strong advocacy to advance health rights by Family Planning Tasmania.

In December 2020 & June 2021, CEO of FPT Cedric Manen co-chaired the Tasmanian Sexual and Reproductive Health Collaborative Group (SRHCG) meetings. The SRHCG is a group of 11 government and non-government agencies who are committed to ensuring the sexual and reproductive health needs of Tasmanians are adequately met. The key focus areas of the group in 2021 have been: better access to SToP; continued focus on contraceptive options; improved testing and treatment of STI’s; better regional support for SRH services.

In November 2020, FPT contributed a submission to the Health Consumer's Network, a network which empowers and protects patients in the healthcare system.

In January 2021, FPT contributed to a consultation with the Tasmanian Law Reform Institute on how the law should deal with ‘conversion therapy’, that is, the practices in some faith communities to try and change the sexual orientation and gender identities of LGBTQ+ people.

In February our Regional Medical Officer (South), Dr Catherine Moul, represented Family Planning Tasmania at the first Australian Contraception and Abortion Primary Care Practitioner Support (AUSCAPPS) expert advisory group meeting. AUSCAPPS is based on a successful Canadian model that has supported GPs, pharmacists and nurses working in primary care to deliver LARC and MTOP services.

In March, FPT had our first ever research paper published in a journal, the Australia Journey of Primary Health. The journal article was published in Online Early Access, allowing equal and free access to our research. The research paper is titled *Termination of Pregnancy in Tasmania: Access and service provision from the perspective of general practitioners* and was led by two FPT doctors, who surveyed Tasmanian GPs about termination of pregnancy in Tasmania.

This March, we submitted our Budget Priorities Statement to the Tasmanian Government, to increase our service capacity and take some of the strain off the public health system.

Also in March, FPT made a formal submission in response to the Tasmanian Child and Youth Wellbeing Framework Discussion Paper, a paper to improve outcomes for children, focusing on their wellbeing.

In April there was a strong community reaction to Australian Government-released videos in navigating intimate relationships on schools. FPT co-signed a letter to Federal Education Minister Alan Tudge in partnership with all the FPAA organisations in response to these videos, platforming our expertise in this area.

FPT in May joined other Family Planning and Planned Parenthood organisations across the world in a call to end the Global Gag rule. The Global Gag rule prohibits foreign nongovernmental organisations (NGOs) who

receive U.S. global health assistance from providing legal abortion services or referrals, while also barring advocacy for abortion law reform—even if it's done with the NGO's own, non-U.S. funds. The policy allows access to abortion only in cases of rape, incest, or when a woman's life is at risk.

In May, FPT met with and provided evidence and perspectives to the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability. This was informed by our case work with people with disability and/or additional needs.

June was a particularly strong month for advocacy for FPT. CEO Cedric Manen represented FPT at the Family Planning Alliance Australia (FPAA) Directors' meeting. One of the key discussion points was the response to changes in the Australian curriculum that impacts on how Family Planning organisations deliver their programs in school settings.

Also in June, FPT joined other FPAA and International FP organisations in endorsing the HLM 2021 Civil Society Declaration, a declaration for better prevention, diagnosis, treatment of HIV/AIDS set out in the 2016 Political Declaration on HIV/AIDS. The Declaration notes there is a crisis in HIV response.

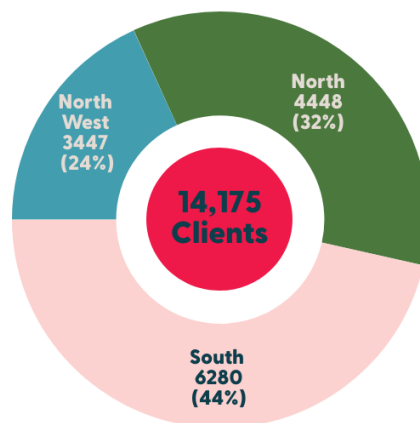
Representations made by FPT in 2020/2021 in conjunction with FPAA around access to telehealth have resulted in changes to government policy, which will mean more people can now access this service should they need to (particularly if another COVID-19 outbreak occurs).

2020–2021 has been a salient reminder that we must never take our rights for granted, and must continue to sustain our efforts in progressing the rights of all Tasmanians, and our joint ventures in progressing the rights of all global citizens.

Clinics

Client services

7.5% increase in client numbers despite 8 week Glenorchy clinic shut down for renovations.



Priority populations

- 62% Low socio-economic
- 42% Rural and Regional
- 38% Youth
- 9% Overseas born
- 6% Aboriginal
- 43% Concession Card holders

Top 3 reasons for clinic visits



Professional Education and Training

This year we continued in our mission to enhance the capacity of health professionals to deliver sexual and reproductive health services through activities including:

- General practice training for four extended skills Registrar placements
- Implanon training for 45 Tasmanian health professionals around Tasmania
- IUD training for five doctors.



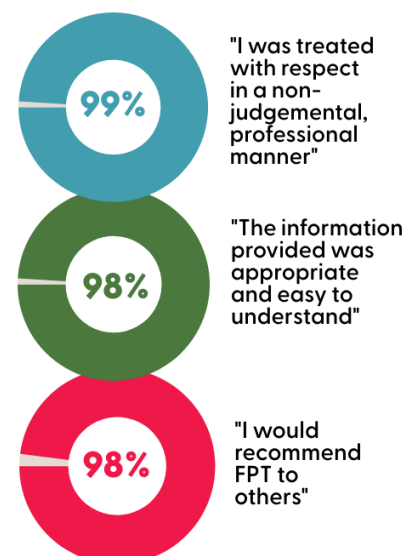
Our new look Glenorchy clinic, launched in March

Client feedback

Client feedback is invited through an SMS that is sent to clients after their appointment. There are specific questions to answer and the option of providing free text comments. This feedback allows FPT to evaluate services and client satisfaction.

"Family Planning are an excellent, necessary, brilliant organisation. No judgements. Absolute respect. Empathy. Knowledge. Kindness... Your doctors make me feel human, safe, heard."

- Clinic Client



Clinic Leadership Team

FPT appointed two Regional Medical Officers and one Lead Nurse to strengthen its clinical leadership and governance work.

The new team is focused on supporting and mentoring new clinical staff, infection control, updating policies and procedures, providing clinical training and engaging with external stakeholders and media to help ensure our services are known and understood within Tasmania.



Budget Priority Submission

In March 2021, FPT provided our Budget Priority Submission to the Tasmanian Government detailing how we could help relieve the strain on public hospital waiting lists in key areas: colposcopy, disability support, ultrasound and prolapse and pessary fittings.

We were delighted that the Tasmanian Government committed to funding the proposal and providing \$348k for training and equipment required to roll out or expand these services.

This submission outlined how an increase in services provided by FPT could take the strain off the public healthcare system in Tasmania.



Prioritising Long Acting Reversible Contraception (LARC)

993

993 IUDs were inserted between 1 July 2020 and 30 June 2021.

Up from 756 in 2019-2020 means an increase of 31%. IUD remains an increasingly popular form of contraception and to help meet demand, FPT trained an additional 4 of its own GPs to insert IUDs during this period.

Pessary Consults



115%

since July - December 2020



Medication Termination of Pregnancy

384 MTOPs were accessed this year. This demonstrates that demand for this service is constant and FPT now typically has the capacity to provide the service to most women that need it.

LARC (Long Acting Reversible Contraception) insertion rate post MTOP remains over 30%, reflecting the time and effort clinicians spend discussing the benefits of LARC pre-and post-medication.

384

MTOPs accessed

Over 30%

LARC insertion rate post-MTOP (compared to 11% National Average)

New Pessary Service

In September, we appointed a specialist gynecologist, Dr Sue Keating. With Dr Keating's assistance, we provided prolapse and incontinence assessment and ring pessary insertion training to our doctors and nurses across the state.

This service was prioritised as it's not offered widely by GPs and waiting times to be assessed in a public hospital can be as long as six months. Following the training and subsequent promotion of the service, our pessary service clients increased by 115% in six months.

Outreach Clinics



During 2020-21, Family Planning Tasmania continued to provide clinical outreach services in partnership with organisations to meet the needs of our priority populations. Outreach clinics included:

- Doctor clinic at Mary Hutchinson Women's Prison – increased from once a month to once a fortnight
- Doctor clinics run cooperatively with Pulse Youth Health Service, focusing on young people – three clinics a fortnight.
- Pilot doctor clinic at Headspace Devonport – a once a fortnight for six months to assess demand.

Education & Training

Growing Up Program sees an increase in parental attendance



The Growing Up Program remains a cornerstone of Family Planning Tasmania's relationships and sexuality education programs. FPT also delivers a follow-up program to reinforce the learning of students with a disability.

Parent/carer attendance overall has increased significantly with nearly 4 times as many parents compared to last reporting period, equating to 400 parents attending sessions, this period. This was for a cohort of 9,241 students. FPT is exploring options to further increase engagement with parents.

Pregnancy Counselling

Most participants agreed our social safety and childhood sexual development professional learning program, increased their skills and strategies for promoting social and sexual safety for children.



"Great delivery of program. Helped children feel at ease and able to ask questions. and they did. Content (was) excellent"

"Soooo good. The grade 3s need to learn about puberty because its happening for some already.

And the crushes and interrelationships are starting. Excellent presentation of age-appropriate content."

People with additional needs



FPT provided 352 individual education or intervention sessions for people with additional needs this year.

These sessions address a broad range of respectful relationships and reproductive and sexual health topics, and are always tailored to the needs of the client.

Requests and referrals come from a wide range of services, including the Tasmanian Health Service, the Guardianship Board, the Department of Justice, schools, parents, and disability services.

Wider benefits for The Growing Up Program

Our presence in the school when delivering a Relationships and Sexuality Education program stimulates discussion around the relationships and sexuality education adults had themselves when they were younger.

Teaching staff will seek out educators in the staffroom or classroom to discuss sexual health in relation to themselves and/or their friends/family. FPT Educators are able to outline the services provided by FPT and encourage people to obtain further support. Usually, people were unaware of the service that FPT offered or did not know of the options available in the greater community. Educators are often met with amazement and delight at the discovery of the period/light bladder leakage underwear by staff at every school we attend.



150

Secondary and College students participated in our Relationships and Sexuality Education

SoSAFE! Professional Learning



38

People have received training in SoSAFE! this year including family members, teachers, teacher assistants, disability support workers, psychologists and social workers.

SoSAFE! promotes social safety for people with moderate to severe intellectual disability or Autism Spectrum Disorder.

The program uses a standardised framework of concepts, symbols and visual lesson materials to teach the type and degree of communicative and physical intimacy appropriate with different groups of people in an individual's life.

The program also teaches strategies for moving into intimate relationships in a safe and measured manner.

This year, all educators were upskilled in SoSAFE!, meaning an increased capacity to deliver this vital program.

100

100% of participants agreed our SoSAFE! professional learning program increased their skills and strategies for promoting social and sexual safety for people with an intellectual disability.

Health Promotion and Professional Learning

36

Health Promotion and Education activities including information sessions, workshops and expos.



3

GP education/information sessions in GP Practises on MToP, contraception and our new ring pessary fitting service.



2

Workshops for Early Childhood Workers to train them in Social Safety and Childhood Sexual Development.



Improving Tasmanian lives

"Knowing we can make such a difference in young peoples' lives by providing them with accurate age appropriate information helping them to make better, more informed choices about their health and their lives is the reason I work at FPT."

- FPT Educator



"Very well delivered. Made all students feel comfortable and engage with the program positively."

"Really impressed with topics covered, the comfortable and supported nature of the sessions."

"Well managed with our very young class."

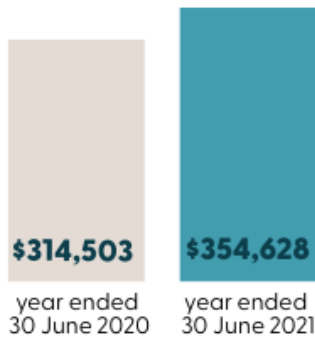


-Primary School Teachers, Growing Up Program.

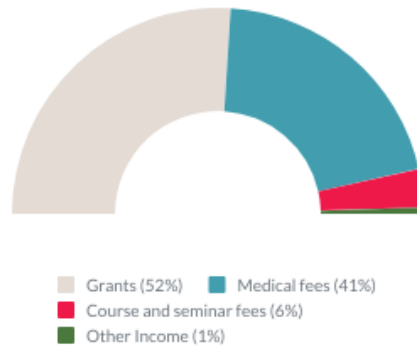
High Quality, Evidence-based and Accessible

Resources

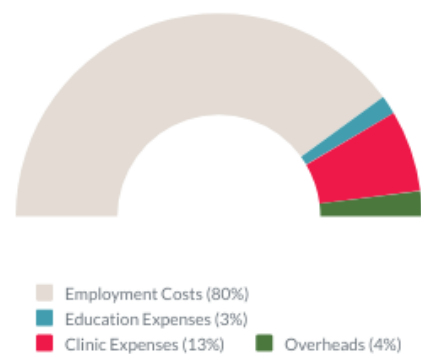
Surplus



Income Sources



Major Expenses



In the last 5 years

In 2020-21 grant funding constituted 52% of operating income, and self-generated funding 48%

↑ 39%

Total Income

↓ 5%

Education Fees-for-service

↑ 92%

Clinic Fees-for-service

FPT employed 74 staff during 2020-21



15 Education Staff

72

Female

2

Male

4

Full-time

18

Part-time

52

Casual



11 Nurses and
32 Doctors

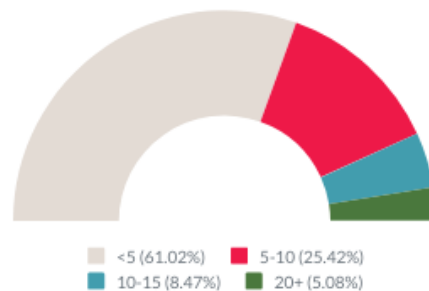


12 Administrative
Staff



4 Managers

Years of Service



FPT staff have a total of 281 years service with the organisation.

The average length of service with us is more than 5 years.

COVID-19 Government Assist



JobKeeper:
70% FPT staff eligible
FPT eligibility ended
Sept 2020



Without COVID-19 Govt
Assistance FPT had an
operating surplus of \$62,234

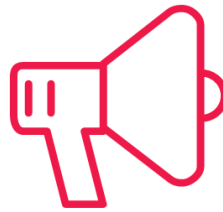
Our total equity is positive and we continue to invest in staff and projects

Health Promotion & Advocacy

Advocacy

FPT became a key partner with the Australian Contraception and Abortion Primary Care Practitioner Support (AUSCAPPS) expert advisory group.

FPT provided 12 instances of advocacy in 2020/2021 including two Royal Commissions, state-based, national and international advocacy and the open access publication of key research undertaken by FPT doctors.



Health Promotion



FPT has prioritised building new Health Promotion partnerships with key providers in the Tasmanian health field.

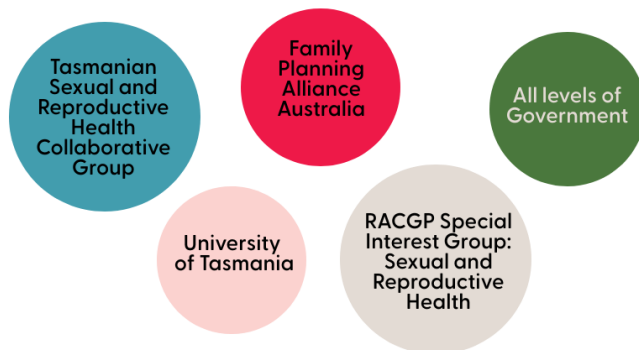
This has helped FPT reach new audiences and tailor health promotion messages more effectively.

Increased media presence strengthens FPT advocacy

In the 2020-2021 period, there were five stories about Family Planning Tasmania featured in the media, including on the most listened-to program on talkback radio- Mornings with Leon Compton on ABC Radio, in The Advocate and The Examiner, and on 7 Nightly News and ABC TV news.



Relationships and Networks



16 Partnerships, Committees and Advisory Bodies



Activities with 50 key organisations

New Brand & Visual Design

A new logo and matching visual elements were developed to make FPT more current and relevant to our audience.

The three arms of our organisation are represented by three shapes, and three corresponding colours.

Family Planning Tasmania.
CLINICS | EDUCATION | ADVOCACY



Education



Clinics



Advocacy

GP Research published in Australian Journal of Primary Health

FPT partnered with UTAS to investigate Tasmanian GPs attitudes on medication termination of pregnancy and the research was published by the CSIRO in May 2021. The journal article is titled 'Termination of Pregnancy in Tasmania: Access and service provision from the perspective of general practitioners and is freely available through open access publishing. It is the first published research from FPT.

National Condom Day

14 February

Health promotion events were held to promote National Condom Day, particularly to younger audiences. FPT partnered with Sexual Health Quarters in WA to produce this collateral.

Venues included Hellyer College and University of Tasmania campuses and CEO Cedric Manen spoke on ABC Radio.



Health Promotion Activities 2021



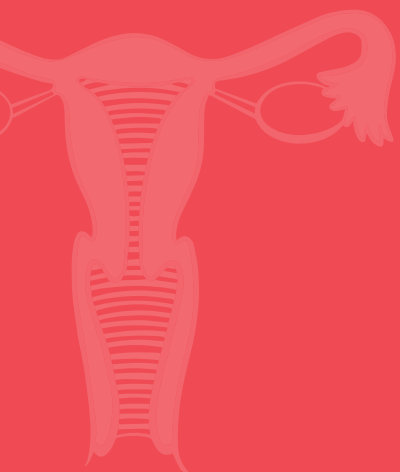
Life Members

Jean Perkins	1975
Dr Valerie Davenport	1979
Prof Colin Wendell-Smith AO	1981
Sue Williams	1982
Dr Eric Cunningham-Dax	1985
Pat Hewitt/Mavromatis	1985
Jill Roberts	1986
Topsy Evans	1989
Jean Hearn	1992
Dr Helen Cutts	1993
Helen Fotheringham	1994
Jan von See	1995
Nancy Jiracek	1996
Dr Graham Riddoch	1996
Jo Crothers	1996

Prue Lake	1997
Nick Toonen OAM	2000
Margot Kingston	2002
Dr Pauline Carruthers	2002
Paul Duncombe	2004
Helen Bird	2006
Esme Murphy	2010
Dr Christine Bush	2012
Virginia Thorold-Smith	2012
Joan Dolbey	2013
Professor Ian Lewis AO	2014
Julie Downie	2015
Liz Ling	2016
Dr Claire Roberts	2017
Dr Mary Kille	2018
Dr Susan Carruthers	2019

List of Acronyms

Acronym	Explanation
CALD	Culturally and Linguistically Diverse
CEO	Chief Executive Officer
CMT	Clinical Management Team
DOE	Department of Education
DOH	Department of Health
ETHP	Education, Training and Health Promotion
FPAA	Family Planning Alliance Australia
FPT	Family Planning Tasmania
GP	General Practitioner
IPPF	International Planned Parenthood Federation
IUD	Intrauterine Device, e.g. Mirena, copper intrauterine device
LARC	Long-Acting Reversible Contraception
MAG	Medical Advisory Group
MCS	Manager Clinical Services
MD	Medical Director
MToP	Medication Termination of Pregnancy
ODOO	FPT electronic data capture system
RACGP	The Royal Australian College of General Practitioners
RSE	Relationships and Sexuality Education
SETAC	South East Tasmanian Aboriginal Corporation
SEIFA	Socio-Economic Indexes for Areas
SToP	Surgical Termination of Pregnancy
ToP	Termination of Pregnancy
UTAS	University of Tasmania



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