Membership application form

About NADA

The Network of Alcohol and other Drugs Agencies (NADA) is the peak organisation for non government alcohol and other drugs services in NSW. We advocate for, strengthen and support the sector. As a member driven peak body, NADA's decisions and actions are informed by the experiences, knowledge and concerns of its membership.

We represent close to 100 organisational members that provide a broad range of alcohol and other drugs services including health promotion and harm reduction, early intervention, treatment and continuing care programs. Our members are diverse in their structure, philosophy and approach to alcohol and other drugs service delivery.

Together, we work to reduce the harms related to alcohol and other drugs use across the NSW community.

NADA values

Integrity	NADA operates with fairness and transparency to maintain an independent voice
Respect	NADA is respectful of the culture, views and experiences of the sector
Inclusion	NADA values diversity and ensures our approach is equitable and accessible
Collaboration	Collaboration is central to NADA's operation

Benefits of membership

Members gain access to a range of services provided by NADA, as well as the opportunity to contribute to the development of the non government AOD sector.

Stay informed
- Member eUpdate–*email news bulletin*
- Advocate–*quarterly digital magazine*
- Website focused on communication with members
- Regular forums to share information with members, stakeholders and other industry bodies

Policy and advocacy
- Promotion of members' views and needs through policy submissions and program development
- Sector representation at government, policy and industry forums

Sector, organisation and workforce development
- Workforce, service and organisational development grants
- Projects and resources to build quality organisations and provide quality services
- Brokerage of training and development opportunities
- Organisation planning support

Member contribution
- Governed by members
- Voting rights at board elections and annual general meetings (AGM) for appointed delegate
- Contribute to policy submissions and project development
- Advisory group participation
- Inform NADA's advocacy and programs

Information technology
- Access to NADAbase, and support for client treatment and outcomes data

Networking
- Conferences
- Regular forums and events
- Support for partnership development

Membership

Membership eligibility

An organisation is qualified to be a member of NADA if the organisation
- agrees with the objects of NADA (detailed in the [NADA Constitution](#))
- is a not for profit, non government organisation
- is a body formed or incorporated within the state of New South Wales or the Australian Capital Territory, and
- has as its primary mission or purpose, or other mission or purpose, to reduce the alcohol and drug related harm to individuals, families and the community
- provides evidence based drug and alcohol services and has a formal QI program in place and/or is accredited under an acceptable QI provider

Membership categories

Member

The organisation's primary mission or purpose is to reduce alcohol and drug related harm to individuals, families and the community.

Associate member

The organisation's primary mission or purpose is other than to reduce alcohol and drug related harm to individuals, families and the community, but whose broader mission or purpose includes this.

As a member

You can expect NADA to
- advocate for and represent all members
- provide services for all members
- value the diversity of the non government alcohol and other drugs sector
- be responsive and provide advice to all members, and
- respect members' privacy and confidentiality.

You are expected to
- contribute to non government alcohol and other drugs sector representation and development where possible
- respect the diversity and range of views across the non government alcohol and other drugs sector
- appoint a delegate to represent and vote at the NADA AGM
- pay membership fees when due, and
- use NADAbase for MDS/COMS client data collection as per the NADAbase user agreement (if appropriate).

Membership fees

Membership fees are calculated on your service/organisation's AOD annual gross turnover. If you are applying for an associate Membership, we require your service/organisation's annual gross turnover that is specific to AOD. Fees are payable per financial year, that being July 1 to June 30. For those joining partway through the year, pro rata fees will be applied.

Member income	Annual membership fee (includes GST)
Under $250,000 or unfunded	$200
$250,000 to $500,000	$420
$500,000 to $1,000,000	$700
$1M to $3M	$900
Over $3M	$1100

N/MDS data management

NADA provides data collection, reporting and support to all NADA member organisations as part of their membership through NADAbase. NADA also reports client data on behalf of member organisations that are State and/or Commonwealth funded against an assigned NMDS and/or NSW MDS code as part of the membership fees.

Return by post
NADA Membership
PO Box 1266 Potts Point NSW 1335

Return by email to admin@nada.org.au.
For more information about membership, phone
02 9698 8669 or email admin@nada.org.au.

Service and organisation details

Service name	Type here
Organisation name	Type here
Postal address	Type here
Street address	Type here
Phone	Type here

Phone	Type here	Fax	Type here

Website	Type here

Local health district	Choose an item.	Aboriginal community controlled Check one only	☐ Yes ☐ No

Member type Check one only	☐ We are a specialist AOD service ☐ We provide a range of services, that includes AOD
Service or program overview *Provide a brief summary of your drug and alcohol program and the type of support offered.*	
Why do you want to become a NADA member?	

Membership fees

Membership fees are calculated on your service/organisation's AOD annual gross turnover. If you are applying for an associate Membership, we require your service/organisation's annual gross turnover that is specific to AOD.

AOD annual gross turnover Check one only

☐ Under $250,000 or unfunded   ☐ $250,000 to $500,000   ☐ Over $500,000 to $1M
☐ $1M to $3M   ☐ Over $3M

Delegate details

Members and associate members are entitled to appoint one delegate per incorporated entity to represent it and vote at meetings of the association. An alternate delegate may be nominated to represent it and vote at meetings of the association.

Nominate a delegate to represent your organisation and vote at the AGM. The delegate will receive formal communication regarding significant sector events and the AGM.

Delegate

Name	Type here
Title Check one only	☐ Mr ☐ Mrs ☐ Ms ☐ Mx ☐ Dr
Position	Type here
Direct phone	Type here
Service phone	Type here
Mobile number	Type here
Email	Type here
I wish to receive Check all that apply	☐ Formal communication ☐ Advocate–*quarterly digital magazine* ☐ Member eUpdate–*email news bulletin*

Other contact details

Nominate other contacts for the purposes of communicating with NADA.

Primary contact The primary contact may be the delegate or another nominated person.

Name	Type here
Position	Type here
Direct phone	Type here
Service phone	Type here
Mobile number	Type here
Email	Type here
I wish to receive Check all that apply	☐ Formal communication ☐ Advocate–*quarterly digital magazine* ☐ Member eUpdate–*email news bulletin*

Secondary contact

Name	Type here
Position	Type here
Direct phone	Type here
Mobile number	Type here
Email	Type here
I wish to receive Check all that apply	☐ Advocate–*quarterly digital magazine* ☐ Member eUpdate–*email news bulletin*

Administration or Accounts contact

Name	Type here
Position	Type here
Direct phone	Type here
Mobile number	Type here
Email	Type here
I wish to receive Check all that apply	☐ Advocate–*quarterly digital magazine* ☐ Member eUpdate–*email news bulletin*

Service profile

Please complete the following details so NADA can provide targeted services for our members. If you are applying for an associate membership please ensure the details given are AOD specific to your service/organisation.

What is the core business of your service? Check only the most relevant

☐ Counselling	☐ Withdrawal management (detoxification)
☐ Rehabilitation activities	☐ Maintenance pharmacotherapy (opioid)
☐ Maintenance pharmacotherapy (non-opioid)	☐ Consultation activities
☐ Support and case management	☐ Involuntary treatment
☐ Assessment	☐ Information and education

Harm reduction and other services Check only the most relevant

☐ Health promotion	☐ Community development	☐ School-based programs
☐ Peer education	☐ Needle and syringe program	☐ Family support
☐ Living skills programs	☐ Policy	☐ Research

Service delivery setting Check only the most relevant

☐ Community/Outpatient	☐ Inpatient	☐ Residential
☐ Home	☐ Correctional	

Priority population Check only the most relevant

☐ Men	☐ Injecting drug users
☐ Women	☐ Homeless
☐ Young people	☐ People with comorbid mental health and AOD
☐ Aboriginal/Torres Strait Islander	☐ Culturally and linguistically diverse communities
☐ Families	☐ People connected to, or from the criminal justice system
☐ Parents with children	☐ Gay, lesbian, bisexual, transgender, intersex

Other Type here

Source of funding Check all that apply

State	Commonwealth	Other
☐ NSW Health ☐ Local Health District	☐ DoH NGOTGP ☐ DoH SMSDGF	☐ Client contribution ☐ Private/Philanthropic

☐ Family and Community Services	☐ DP&MC IAS	**Other** Type here
☐ Criminal Justice	☐ Dept of Social Services	
	☐ Primary Health Network	

Staff numbers

Number of staff (in terms of full time equivalent positions)		
☐ 5 or fewer	☐ 6 to 30	☐ Over 30

Other service description Optional

Is there a better way to describe your service?
Type here

Quality improvement

Is your service or organisation engaged in a formal quality improvement/accreditation program? Check one only			
☐ No	☐ Yes, with QIP	☐ Yes, with ACHS	**Yes, with another provider** Type here

If you ticked 'yes' above, have you gained accreditation? Check one only	
☐ No	☐ Yes

If you ticked 'yes' above, please provide your accreditation details	
Year accredited YYYY format	Type here
QI standard Please provide details e.g. ASES, ACHS or other	Type here

Membership endorsement

All applications for membership must be endorsed by one current NADA member delegate. A list of members can be found at www.nada.org.au, or contact NADA for recommendations.

	Endorsement one
Organisation name	Type here
Contact name	Type here
Position	Type here
Signature	
Date	Click here for calendar

Authorisation

Authorisation for NADA membership application approved by your organisation's executive.

Name	Type here

Position	Type here
Signature	
Date	Click here for calendar

☐ This service/organisation agrees to abide by the NADA membership rights and responsibilities as detailed in the NADA Constitution.

☐ This service/organisation has provided a copy of the certificate of registration for a not for profit, non government organisation.

☐ This service/organisation agrees to NADA posting member details on the NADA website. This is limited to organisation name, suburb, telephone and website. We do not include street location, funding or individual contact details.

For office use only

Approval process

Receipt of applications sent to applicant Check one only			
Date	Click here for calendar	**Format** ☐ Letter	☐ Email

NADA Board approval Check one only			
Date	Click here for calendar	**Approved** ☐ Yes	☐ No
		Membership type ☐ Member	☐ Associate member

Member fee invoice sent	
Date	Click here for calendar

NADAbase

Support Check one only

NADA has initiated support for data management	☐ **Yes, on** Click here for calendar	☐ No
NADAbase logins have been issued	☐ **Yes, on** Click here for calendar	☐ No

Logins

Name	Type here	Email	Type here
Name	Type here	Email	Type here
Name	Type here	Email	Type here
Name	Type here	Email	Type here

Online tutorial and support Check one only

Access to NADAbase online training and support is provided on completion of a written agreement with NADA and names and email details are provided.

Has ongoing support been approved?	☐ Yes ☐ No
Written NADAbase user agreement completed	☐ Yes ☐ No
Has ongoing support been requested?	☐ Yes ☐ No

If you ticked 'yes' above, make a note of support
Type here