An Overview

Light at the end of the tunnel

Work and Development Orders and hepatitis C elimination:

Reducing fines, improving health, and helping people turn their lives around

Developed by: EC Australia II Work and Development Order Expert Advisory Group

September 2026

EC Australia
Partnering to eliminate hepatitis C

Burnet
reach for the many

> …that dim light at the end of the tunnel was a little brighter…

> …what started out as a desperate need for a WDO ended up being a life-saving event for me…

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Acknowledgement of Country

Burnet Institute board, staff and students recognise the Traditional Owners and Custodians of the land on which we live and work. We are proud to acknowledge the Boon Wurrung people of the Kulin Nations as the Traditional Owners and Custodians of the land on which our head office is located and recognise their strong and ongoing connection to Country. Recognising the ongoing impact of colonisation and intergenerational trauma on Aboriginal and Torres Strait Islander Peoples, our position as a leading medical research institute demands that we strengthen our commitment to close the gap in health outcomes.

Stacey Edwards (Taungurung/Boon Wurrung/Bunurong)
'Bunjil The Creator' 2021, acrylic on canvas.

About the artwork

Bunjil is the creator of the Kulin Nations. He takes the shape of a wedge-tailed eagle. Any guests of the Kulin Nations have to follow 2 rules: to obey the laws of Bunjil, and to not harm the children or land of Bunjil.

This artwork was created through The Torch, a not-for-profit organisation that provides art, cultural and arts industry support to First Nations people currently in, or recently released, from Victorian prisons.

Acknowledgement of People with Living and Lived Experience

We acknowledge all the people who have lost their lives to hepatitis C and liver disease.

We acknowledge, thank, and recognise all people and communities with living and lived experience of hepatitis C, and particularly people with living and lived experience of injecting drug use, who contribute to the work of hepatitis C elimination, and their crucial efforts in reducing harm to their communities.

Real people and real lives give meaning to the work that progresses us towards hepatitis C elimination, and in fighting the negative effects of stigma and criminalisation.

Executive summary

Work and Development Orders (WDOs) are government-approved schemes operating in several Australian states that help some people with unpaid fines to reduce their debt by completing approved activities, including health care and treatment. In some states, people can resolve $1,000 or more per month in fines by engaging with health services.

The schemes are voluntary and designed for people experiencing serious financial hardship, mental illness, serious addiction to alcohol or other drugs, homelessness, or disability, and who are unlikely to pay off their fines through conventional means.

This resource focuses specifically on the use of WDOs as part of hepatitis C elimination. It explores how health professionals and services can use WDOs to engage people in marginalised communities into testing and treatment. A full course of hepatitis C treatment typically takes around three months, meaning someone could clear $3,000 or more in fines while being cured of the disease.

Many people living with hepatitis C face complex, competing priorities, like finding safe accommodation, food and clothing, and navigating financial and legal pressures. Meeting such fundamental needs often means hepatitis C is rationally deprioritised, particularly because it can be asymptomatic. Many people try to avoid the legal system, at the same time struggling with fines and debts that can contribute to losing their licence, car registration or income, and sometimes imprisonment.

Work and Development Orders are a practical tool that deliver both health and economic benefits. They can help people address several priorities at once, by enabling them to reduce their fines while improving their physical and mental health, and build greater agency and wellbeing.

WDO Sponsors, which can include nurses, GPs, and other health services, apply for and oversee a person's WDO (including an agreed treatment plan), and then submit monthly progress reports.

The document is primarily aimed at health professionals and services that work with people living with, or at risk of, hepatitis C, and especially those services unfamiliar with WDOs who are considering becoming a WDO Sponsor. It provides an accessible, general overview of how WDOs work across Australia, highlights priority populations of people affected by hepatitis C (including Aboriginal and Torres Strait Islander people, people who inject drugs, and people experiencing homelessness) who could benefit from WDOs, and offers practical guidance on getting started, with links to relevant portals and resources in each state and territory.

Who is this resource for?

This is a general outline of Work and Development Order (WDO) schemes in Australia. It is not intended as detailed guidance on how each scheme works, that information is available from each scheme.

It is primarily intended for organisations, staff and health professionals (who work with people living with/at risk from hepatitis C, and their affected communities) and who are new to WDOs and interested in being a WDO Sponsor.

It provides some basic, general information about how the WDO schemes work.

It includes some tips and things to think about when getting started with WDOs.

It includes some links to useful information and resources, including relevant WDO websites and portals in each state or territory with a scheme.

What are Work and Development Orders?

Work and Development Orders (WDOs) are schemes that can help some people pay off their fines-related debts by completing agreed activities, including health care and treatment.

In 2026, WDO schemes operate in NSW and Queensland, as well as in Victoria and WA (where they are called Work and Development Permits) and the ACT (called Work or Development Plans).

WDOs are a proactive way to help some people with fines and who can't pay them off due to serious financial hardship. WDOs can assist services to engage with clients in a different way, helping them to relieve the pressure from fines (and the interest that compounds when fines go unpaid) while attending to crucial health care and treatment in return.

Who can use a WDO?

Someone with debts arising from fines and who is experiencing serious or acute financial hardship, which means they are unlikely to pay off their fines. WDOs are voluntary, people choose to use them, they are not court-imposed.

What types of activities do WDOs cover? In general, they include:

Unpaid work or **volunteering**

Completing a **training** or **education course**

Engaging in **health care or treatment**

Receiving **counselling**

Completing a **mentoring program**

Engaging in health care or treatment is likely to be the most relevant activity for people and services engaging in hepatitis C testing and treatment, and related health care.

The way health care and medical or mental health treatment activity is described under a WDO differs a little in each jurisdiction. As examples, see the NSW ***Work and Development Order Guidelines 2024*** **by NSW Legal Aid** (Fact Sheet 2.6, p.3) or in Victoria the ***Attorney-General's Work and Development Permit Guidelines 2024*** (p.9). You will need to check the arrangements in your state or territory.

How does someone start a WDO?

By contacting an approved WDO Sponsor (e.g., community organisation, health service, or health professional, like a nurse, who works with WDOs) to discuss their situation and activities they might do under a WDO. If it is workable, for the person and the WDO Sponsor, the Sponsor applies for a WDO to be approved by the government agency overseeing the scheme (e.g., in NSW, this is Revenue NSW).

Each state or territory has a list of approved WDO Sponsors that people can talk to about a WDO. In Queensland WDO Sponsors are called 'Hardship Partners'.

How long does a WDO last?

A WDO may last until the person pays off all their fines, until they have completed their agreed activities, or until the person decides they don't want to continue with the agreed activity.

How much in fines is 'paid off' through WDO activities?

The rates at which fines are resolved or 'paid off' vary between activities and between states.

However, for approved health care or treatments the rate is generally around $1000 per month. This rate is applicable in NSW, QLD, VIC and the ACT.

Any activities completed before a WDO is approved are not counted.

Can WDOs be varied or extended?

In most schemes, if the person agrees, a WDO Sponsor can apply to add or change activities within the WDO. Changes must be agreed by the government agency overseeing the scheme.

This means sometimes a person might work off some of their fines by completing one activity or health care intervention, and then complete another, and pay off further fines.

How does someone finish a WDO?

By completing their agreed activities or by paying off their fines in total. During the WDO, the WDO Sponsor is required to report back to the government agency, usually monthly, on the person's progress and on completion of activities.

In some states, the person gets a certificate of recognition for completing their WDO.

What happens if someone doesn't attend or complete their WDO activities?

Generally, WDO Sponsors support and encourage people to complete their agreed activities. There is often some flexibility in managing things.

However, if someone stops doing their activities, or doesn't follow their approved treatment plan, the WDO Sponsor would need to report this to the relevant government agency. Depending on the situation, the WDO may be suspended or cancelled.

Who plays what role in a WDO?

In general terms:

- **The Person with a fines-related debt** agrees on the activities or the health care they will undertake, with their WDO Sponsor, and follows their plan to complete these activities,
- **The WDO Sponsor** sets up and applies for the WDO, they support the person during their activities, and reports to the relevant government agency on progress, including completion of the WDO,
- **The government agency** approves applications for individual WDOs (to ensure they comply with the scheme), approves applications from organisations and services to become WDO Sponsors, sets the rules and produces guidance and forms to assist people and WDO Sponsors working with WDOs, and oversees the scheme overall.

Here is **a useful overview of the NSW WDO scheme from Legal Aid NSW (June 2024)**.

Case study: J's story

J lives in a small regional community in NSW. It has limited transport and access to services in town, with only one bus out in the early morning, and one back in the late afternoon. J is the sole carer for his elderly mother. He is responsible for taking her to appointments, getting medications and groceries, and many other things.

J had over $20,000 in fines. Because of non-payment, he had lost his driver's license and car registration. The bulk of J's fines came from repeatedly driving without a license, and driving an unregistered car, mostly because he was trying to fulfill his carer responsibilities for his Mum.

J initially contacted the local Needle and Syringe Program (NSP) for bulk deliveries to his place. He seemed depressed and anxious, saying he'd been using heroin and other substances much more than usual. He could see no way of paying off his mounting fines, feeling it was likely he'd accrue more due to his carer's role. He was supplied with Naloxone and offered a test for hepatitis C. The NSP also offered him the opportunity of a Work and Development Order (WDO), to help address his fines, while getting a health check for hepatitis C, which he eagerly accepted.

Following initial health engagement, J cleared $2000 off his fines, and his hepatitis C results came back as negative. With access to further health services he needed, J paid off another $5,000 in fines.

J expressed how vital NSP services had been for him, and that they saved his life. Prior to the WDO, he said he'd been thinking of suicide due to the overwhelming financial stress. He said, "there was no light at the end of the tunnel".

J now has his license back, and his car is registered. He is far more relaxed about driving without the fear of incurring more fines. He has voluntarily commenced on a private Methadone program through his local GP, and reports that his substance use has decreased significantly. As a result, he now has more money in his pocket.

J was so inspired by the support he got from the WDO program that he has reached out to organisations to pursue work opportunities for himself, and to support other people in similar situations, as a peer.

Today, J is a different man. He is far more relaxed and even cracks some really bad 'dad' jokes. His whole demeanour is lighter. In his words. "Life is looking x%&# great!'

Without a WDO in place, such a positive outcome was most unlikely.

Priority populations and WDOs

WDOs are a tool that can help some people from marginalised communities who are at risk from hepatitis C and who are struggling to manage debts they can't pay off. This might include people from Aboriginal and Torres Strait Islander communities, people experiencing homelessness, people who inject drugs, people with serious mental illness, and people in prison.

Examples in practice

The NSW scheme offers many examples of WDO Sponsors working successfully with people who face multiple and complex challenges. As highlighted in the NSW publication **WDO News** – there is the work of community-based WDO Sponsors such as the **Warrawong Residents' Forum in the Illawarra region**, and the work of **Corrective Services NSW helping some people in prisons by using WDOs**.

WDOs already have backing

The potential for WDOs to help some people in priority populations has been examined before.

The **Australian Law Reform Commission (ALRC)** looked at how WDOs can assist **Aboriginal and Torres Strait Islander people**, who are dealing with the burden of fines-related debts, in its **2018 Report 'Pathways to Justice'** (section 12, 'Fines and Drivers Licences').

The ALRC's report notes:
"The ALRC makes recommendations to increase the efficacy and decrease the harm caused to Aboriginal and Torres Strait Islander people by the imposition of fines. These include decreasing the size of fines, limiting the issue of infringement notices, **the nationwide adoption of Work and Development Orders (WDOs) based on the New South Wales (NSW) model**, and the provision of a discretion to skip driver licence suspension where the person in fine default is vulnerable, supported by statutory guidelines for state debt recovery agencies. These are not standalone recommendations and, together with the abolition of imprisonment, seek to make fine systems and fine enforcement regimes fairer and more responsive to the circumstances of Aboriginal and Torres Strait Islander people, especially in regional or remote locations." (12.4, p.381, emphasis added).

At 12.44 in the ALRC report (p.392-3):
"The ALRC encourages states and territories to... introduce the NSW model of voluntary WDOs."

In its 2016 report ***Debt Set Unfair: Social Housing, Debt and Homelessness***, Homelessness NSW notes the positive role of WDOs in helping some people who experience homelessness.

"One SHS provider told Homelessness NSW, WDO's 'give a feasible option to clients experiencing financial hardship. It gives relief from financial hardship and removes their negative classification at the same time, so they can move towards stable accommodation. It has the added benefit of often re-engaging clients with services'. One person experiencing homelessness said being on a WDO 'lets you give something back to the community and you don't always feel like a drain on the system'". (p.16).

Which states and territories have a WDO-type scheme?

	NSW	QLD
Is there a WDO-type scheme?	Yes	Yes
What are they called?	Work and Development Orders	Work and Development Orders
What types of fines do they cover?	Court Fines Penalty Notices	Court Fines Infringement Notices
Is health care and treatment an approved activity?	Yes (includes 'medical or mental health treatment' / 'drug or alcohol treatment')	Yes (includes 'medical, mental health and substance use disorder treatment')
Are there eligibility requirements the person needs to meet?	Yes The person is: ▪ 'Experiencing mental illness ▪ intellectual disability or cognitive impairment ▪ a serious addiction to drugs, alcohol or volatile substances ▪ homelessness ▪ acute economic hardship.'	Yes The person: ▪ 'Can't pay (the) debt due to financial hardship, mental illness, domestic and family violence, homelessness, intellectual and cognitive disability, and substance use disorder.'
How much can someone pay off?	Up to $1000/month	Up to $1000/month
Is there more information about the WDO scheme?	Yes	Yes

WA	VIC	ACT
Yes	Yes	Yes
Work and Development Permits	Work and Development Permits	Work or Development Plans
Court Fines	Infringement Notices	Traffic and Parking Infringement Notices only
Yes (includes 'medical or mental health treatment' / 'treatment for an alcohol or drug use problem')	Yes (includes 'treatment given by a doctor, nurse or psychologist' / 'drug and alcohol treatment' / 'counselling by a social worker or occupational therapist under a mental health plan')	Yes (includes 'getting treatment for a physical or mental illness, disorder or disability' / 'getting alcohol and other drug treatment')
Yes The person is: ▪ 'Experiencing financial hardship ▪ (has) been or might be subjected or exposed to family violence ▪ (has) a mental illness ▪ (has) a disability ▪ (is) homeless ▪ (is) experiencing alcohol or drug use problems ▪ (is) experiencing another type of hardship.'	Yes The person is: 'Experiencing, one of the following: ▪ a mental or intellectual disability, disorder or illness ▪ an addiction to drugs, alcohol or a volatile substance ▪ homelessness ▪ family violence ▪ acute financial hardship.'	Yes The person: ▪ 'Has a mental or intellectual disability, or mental disorder ▪ has a physical disability, disease or illness ▪ has an addiction to drugs, alcohol or another substance ▪ is a victim of domestic violence ▪ is homeless, living in crisis or in transitional or supported accommodation.'
$70/hour	6.6 penalty units/month (to 30 June '26 = $1,343/month)	Up to $1000/month (limited to traffic and parking fines)
Yes	Yes	Yes

Currently, there are no equivalent WDO schemes in South Australia, Tasmania, or the Northern Territory.

How WDOs can help people living with hepatitis C

Getting started: who can be involved?

WDOs can help some people living with hepatitis C who have unpaid fines and cannot pay them off. They risk having their car registration and driver's licence suspended. A burden that can negatively affect their health, mental health, well-being, and life choices.

A treating health professional (e.g., nurse) or a health service, if they are an approved WDO Sponsor, can help someone living with hepatitis C to set up a WDO. Then, they can support and monitor their treatment and care under the WDO.

Reduce fines while accessing health care

A WDO offers a constructive way for some people to reduce, or even clear, their fines while engaging in necessary health care (e.g., hepatitis C testing, liver function testing, liver health, prescription and monitoring of hepatitis C anti-viral treatment etc).

Depending on the state or territory, someone can 'pay off' up to $1,000 per month in fines by completing approved health care or treatment.

Starting with hepatitis C screening and care

If someone has risk factors for hepatitis C, they might begin their health care activity (under a WDO) with hepatitis C screening and treatment. In three months, they could be cured of hepatitis C, significantly reduce their longer-term risk of liver disease and liver cancer, while simultaneously clearing a meaningful portion of their fines.

From the perspective of a WDO Sponsor working with people at risk of hepatitis C, the general steps might look like this:

- If not already a WDO Sponsor, the health service registers to become an approved WDO Sponsor (or, if the service directs them to an approved WDO Sponsor, the person living with hepatitis C could connect with that sponsor),
- Develop a health care or treatment plan with person (the client),
- As part of the WDO application, highlight that the person is taking part in a medical treatment or assessment plan. In NSW, there is no need to submit the plan to the WDO portal as part of the application process,

Case study: S's story

S returned to volunteer with the Needle and Syringe Program (NSP) after a cancer diagnosis, following medical advice to stay engaged and active. Having had a positive previous experience with the service, he reconnected with the program and was introduced to the WDP.

At the time, S had accumulated fines totalling $9,360 and felt too anxious to make contact due to concerns about enforcement action. Through his volunteering at the NSP, he was able to reduce this debt by over $4,000 under the WDP, significantly easing his stress and giving him a greater sense of stability.

While the remaining balance of more than $5,000 could not be addressed through the WDP, because it had progressed to the highest level of fines enforcement, S was supported to apply for a time-to-pay arrangement. As a result, he is now making manageable fortnightly payments and is on a realistic pathway to regaining his licence.

This process has not only reduced his anxiety, but also restored a sense of control and hope for the future.

- Support the person to follow their treatment plan (as part of their approved WDO), and provide a monthly report on progress to the relevant government agency. In NSW, this reporting is usually general and does not mention hepatitis C or other details,
- Treatment plans and interventions follow accepted clinical practice and need. For engagement around hepatitis C testing and treatment this could look like:
  - Test for hepatitis C (anti-body and confirming RNA), provide harm reduction and other health education
  - Provide test results, and start treatment if the person is hepatitis C positive
  - Monitor treatment (usually a 3-month course of anti-viral medication)
  - Explore other health care issues and refer for assessment/care, as needed
  - Test for hepatitis C cure, and support linkage for other health care.
- Submit final report and close the WDO on completion of treatment, if hepatitis C is the sole health care issue. Or apply for a change to the WDO to include other health care interventions, as agreed with the person as part of their treatment plan.

In several states, testing and treatment for hepatitis C could reduce a person's fines by $3000 or more.

Further health care

Where clinically appropriate, a WDO can be amended (with approval from the relevant government agency) to support further health care while paying off fines. For example:

- screening and treatment for other blood-borne viruses and sexually transmitted infections (BBVSTIs), such as hepatitis B, HIV, or syphilis
- referral to a GP or specialist for other health care issues
- referral to alcohol and other drug (AOD) services for counselling or treatment
- referral to mental health services, particularly for people who are disengaged from care due to homelessness or other circumstances.

Examples in practice

This integrated health care approach is used successfully by the **Mid-North Coast Liver Clinics and North Coast HIV and Related Programs (HARP) service in NSW** – where hepatitis C, BBVSTI and liver health services work closely with AOD and other health services.

The use of WDOs in primary care, to support people experiencing hardship, is recognised by the WA Primary Health Alliance and associated Primary Health Networks.

"The WA Government's Work and Development Permit (WDP) Scheme offers an alternative pathway for people experiencing hardship to reduce or eliminate their court fines by participating in activities or treatment provided by approved sponsors, including their GP.

For example, GPs can sponsor patients through recording their participation in mental health, drug, or alcohol treatment." (**GP Connect News, Sept 2021**)

The longer-term impact

Over time, engagement with health services through a WDO can provide someone with both health and economic benefits. They can improve their physical and mental health, and develop greater agency over their well-being, while also reducing their fines.

For hepatitis C, WDOs can be a useful tool by linking someone with a health condition that is often asymptomatic (until later stages of disease involving serious liver disease and liver cancer) with timely testing and treatment. It can help someone prioritise their hepatitis C care, often a niggling health issue that is easily ignored, by harnessing their motivation to reduce or clear fines.

Things to consider

WDOs do require some additional work by services. This includes applying to become a WDO Sponsor to start with, creating and submitting a WDO for approval, monitoring progress, and monthly reporting.

The amount in fines that someone can resolve will depend on the types of activity they undertake, their ongoing needs, the size of their debt, and the capacity of their WDO Sponsor to support them through different activities or health care and treatment plans.

The WDO schemes differ slightly between states and territories. It is important to refer to the details of your local scheme – perhaps also reach out to a local WDO Sponsor for guidance and tips, or maybe they could support you with putting together your first few WDOs.

WDO sponsor story

HIV and Related Programs (HARP) team, NSW North Coast Local Health District

Many of our participants have experienced stigma and discrimination in health care settings which have created barriers for them when they need help and support. Becoming a WDO sponsor has provided our service with a resourceful way to reach out and engage vulnerable community members in a safe and non-judgemental space to discuss health care and treatment.

(WDO Guidelines 2024, NSW Legal Aid, Fact Sheet 1.2, p.3)

Case Study: D's story

In a small NSW town, the COVID-19 pandemic led to the loss of D's business. He was left dependent on Centrelink payments and unable to meet his financial obligations, including some traffic fines that he was unable to pay, resulting in the suspension of his driver's license. A chance conversation with an employment provider raised the idea of Work and Development Orders, something D had never heard about.

D did his own research into potential WDO Sponsors, but unable to drive, he was limited by geography. However, he identified a provider within walking distance from his home. He made contact. They looked at options. Once again, almost by chance, the provider mentioned a local nurse who might be able to help. But to see the nurse, D had to find a lift into the nearest large town to visit the hospital, which he did the next day. He said that travelling to the hospital to see a nurse, to engage in a WDO, was like a "dim light at the end of the tunnel (becoming) a little brighter".

After searching all over the hospital, in what felt like looking for a needle in a haystack, D was about to give up trying to find the nurse, when she spotted him in a courtyard. In her clinic, setting up the WDO involved a lot of questions, some of them quite uncomfortable, but D persevered. He wasn't giving up on that light at the end of the tunnel. D's first step was to have a hepatitis C test, which helped him pay $1000 off his fines.

Not long afterwards, D got a phone call, from another nurse at the service, to tell him he had tested positive for hepatitis C. His initial reaction was shock – "I was shattered and disappointed in myself". D knew a bit about the virus and how "untreated it slowly but surely destroys the liver, usually unnoticeably, until the liver fails and a transplant is needed – failing that, you die". At this stage, D was unaware that treatments for hepatitis C had improved.

D went back to the hospital. There were lots more questions and tests, and information, and medication. D said he felt a little sick at the beginning but was determined to complete the treatment "not just for my sake, but to eliminate the possibility of me passing it on to others". He finished treatment, and was cured of hepatitis C.

Meanwhile, as a result of his other blood tests, the health team picked up another worrying result, his kidney count was down. As D puts it "a normal person's is 65 (mine was) 4...I was at the doctor's the next day".

Now that D's fines have been reduced and his health improved, his reflections on the pivotal role that his WDO played in this transformation are insightful.

> "What started out as a desperate need for a WDO ended up being a life-saving event for me, and all those that I potentially could have unwittingly passed it on to in the future...because I became a patient of the clinic, the remainder of my fines were paid out. Wow, while I was grateful for that, I cannot put into words how truly grateful I am for the medical help I received.

D has gone on to find full-time employment as a manager. He continues to build a stable and positive future.

The light at the end of the tunnel was well worth following, and it was a WDO that helped D to make that journey.

In 2019, the WDO scheme won a NSW Premier's Award for 'tackling longstanding social challenges', by shining a light on the significant stress that fines can have on the most vulnerable members of the community.

NSW

Since 2011/12, more than **305,000 WDOs have been approved** across NSW, leading to more than

$429m

in fines-related debts being cleared.

More than 29,700 WDOs **(with a debt value of ~$95M)** were approved in NSW during 2024/25.

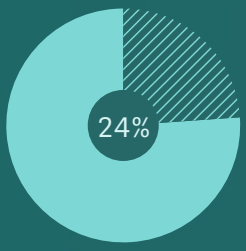
62%

of WDOs involved health care or treatment.

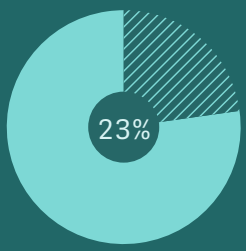
In 2025, **health care or treatment** was the most common WDO activity, representing

38%

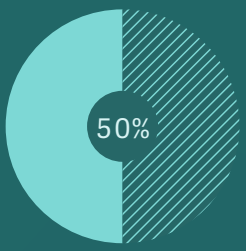
of all WDOs.



In 2024/25, 24% of WDOs were taken up by **Aboriginal and Torres Strait Islander people** – that's more than 7000 WDOs. Around 1,400 of these WDOs involved health care or treatment.



Twenty-three percent of WDOs were taken up by people who are from **Culturally and Linguistically Diverse communities**, with a debt value of more than $13.5M. More than half of these WDOs involved health care or treatment.



In 2025, around 1,700 (or 50%), of more than 3,300 Approved WDO Sponsors in NSW, **are health practitioners**.

WA

By May 2026

$13m+
Value of cleared fines

5k+
WDPs completed

271
Registered sponsors

In June 2026, **133** of the 576 listed WDP Sponsors in WA were offering **'medical or mental health treatment' and/or 'drug or alcohol treatment'**.

VIC

In June 2026

108
of the 581 listed WDP Sponsors in VIC were offering **'drug and alcohol counselling'**.

Some services offer treatment by an accredited health practitioner (including a Social Worker or Occupational Therapist), but this is described as **'in accordance with a mental health plan'**.

Some tips when starting out

A Western Australian perspective on things to think about with WDPs…

- Does the person meet the eligibility criteria for the scheme?
- Does your organisation have the capacity to meet their needs and activity requirements for a WDP?
- How many people can your organisation support in ways that benefits them, not the organisation?
- Get the person's permission to share their personal information with key organisations in the scheme.
- In WA, for example, this includes the Department of Justice, the Aboriginal Legal Service of WA, and Legal Aid. Also, WA has a pre agreement form to help explain the WDP process and outline the hours needed to address someone's fines.
- Participation in the WDP scheme can increase engagement with people who may otherwise be disengaged from services. It can strengthen ongoing relationships.
- Not everyone will want to participate in a WDP.

…and on how to get started?

- In WA, for example, an application to become a WDP Sponsor is submitted through the eCourts portal, along with the required documentation (e.g., ABN, insurance, OHS information, activities offered, and AHPRA registration details if you are a medical/health practitioner).
- Applications to become a WDP Sponsor in WA are assessed within 10 days.
- Once approved, your organisation receives login access to the online portal.
- To apply for a WDP for someone in WA, your organisation needs the person's customer reference number (issued by the Court) – either directly from the person, or from the WA Department of Justice on their behalf (this can take up to 3 days).
- Any hours of activity completed before a WDP is approved are not counted.
- Your organisation manages a person's completed hours under the WDP, and may request approval for additional activities, through the portal.
- Your organisation must maintain accurate records of supervised activities under the WDP. Unsupervised hours cannot be counted.
- If your organisation refers someone to a third-party for additional activities, as the WDP Sponsor, your organisation must ensure the third party meets the WDP Sponsor eligibility requirements, and will record the completed supervised hours.

For more information about becoming a WDP Sponsor in WA, see this useful **Fact Sheet from Legal Aid Western Australia**.

Some links, tools and resources that might help

NSW

Main link: Work and Development Orders (WDOs)

- Finding a WDO sponsor: Search WDO sponsor | NSW Government
- WDO Guidelines (NSW): WDO guidelines
- About WDOs (video):
- WDO case study (video): HERE
- WDO dashboard (NSW data on WDOs): apps09.revenue.nsw.gov.au/customerservice/forms/dashboard/wdo

WDO Portal (NSW): Revenue NSW

QLD

Main link: Work and development orders | Your rights, crime and the law | Queensland Government

- SPER fact sheet: Work with a hardship partner to reduce your SPER debt
- Finding a 'hardship partner' (WDO sponsor): Find a hardship partner | Your rights, crime and the law | Queensland Government
- Pack to become a 'hardship partner' – HERE

WDO Portal (QLD, once signed up as a hardship partner): Queensland Government (SPER)

VIC

Main link: Work and development permit scheme | Department of Justice and Community Safety Victoria

- WDP consent form (to apply for a WDP): Interactive Consent Form 2024.pdf
- Finding a WDO sponsor: WDP Sponsor Search
- WDP Guidelines (VIC): Work and Development Permit Guidelines and consent form 2024.pdf
- WDP data (VIC): Annual reports on the infringements system | Department of Justice and Community Safety Victoria

WDO Portal (VIC): Work and Development Permit Scheme (documents, videos etc)

ACT

Main link: Ways to pay a fine (infringement) - Access Canberra

- WDP application pack and client form: WDP application pack
- Finding a WDP Approved Provider (2026 list): 2026 Approved Work and Development Program providers list
- If you want to become a WDP Approved Provider: Work or development plan program providers - Access Canberra
- WDP application form (to become a provider): Application for a Work or Development Program
- WDP Guidelines (ACT): Nil?

WDO Portal (ACT): Nil?

WA

Main link: Work and Development Permit Scheme

- Finding a WDP Sponsor (WA): Register of approved sponsors - WDPS
- Client brochure: Work and Development Permit Scheme - Client Brochure
- Fact sheet if you want to become a WDP Sponsor: Work and Development Scheme - Sponsor Application Fact Sheet
- WDP Sponsor Guide: Work and Development Permit Scheme - Guide for Sponsors
- WDP pre-agreement form: Work and Development Permit (WDP) Pre-agreement Form
- WDP Guidelines (WA): Work and Development Permit Guidelines 2020

WDP portal (WA): eCourts Portal Home - eCourts Portal

Our partners

peer based harm reduction wa

SAhrps SA Harm Reduction Peer Services A program of Hepatitis SA

ntahc

NSW GOVERNMENT North Coast Population & Public Health Directorate

TASMANIAN HEALTH SERVICE

The Royal Melbourne Hospital

We also appreciate the insights, collaboration, and support given so readily by a range of organisations in creating this resource, including:

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- Hepatitis QLD
- Biala-Roma Street Clinic, Queensland Health,
- NSW Dept of Communities & Justice, and
- Work and Development Order Service, Legal Aid NSW

About EC Australia

The Eliminate Hepatitis C Australia (EC Australia) partnership was established in 2019. It brings together people with living and lived experience, community organisations, health services, government, and researchers and implementation scientists to help build a framework for Australia's response to the elimination of hepatitis C as a public health threat by 2030.

Further information

For further information, please contact:

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EC Australia
Partnering to eliminate hepatitis C

Burnet
reach for the many