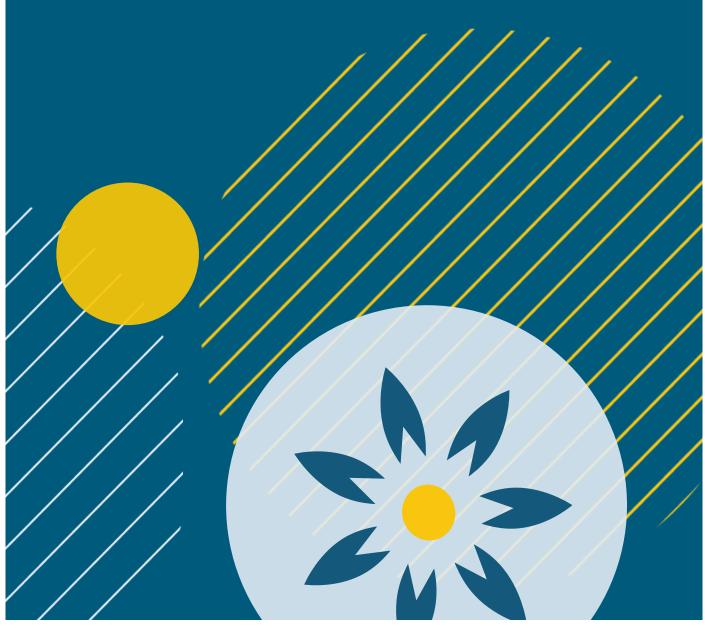
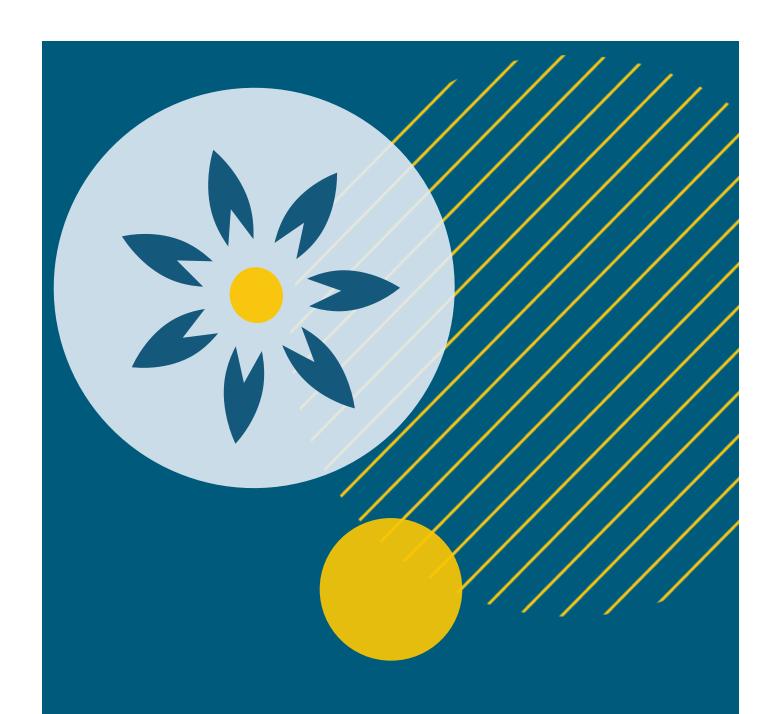
Mental Health Australia ANNUAL REPORT 2018/19





Mentally healthy people, mentally healthy communities

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Our Vision

Mentally healthy people, mentally healthy communities

Our Mission

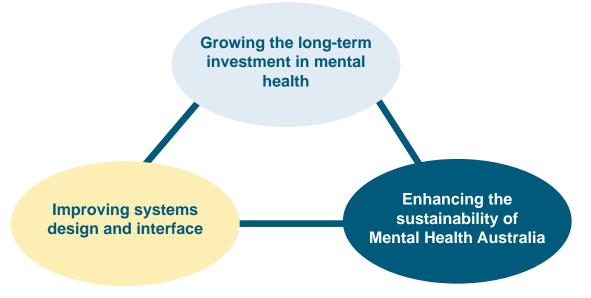
To create the best mental health system in the world, characterised by:

- » Full and meaningful participation by consumers and carers
- » Priority given to mental health promotion, prevention and early intervention
- » Recovery orientation
- » Seamless integration and coordination of policies, services and programs
- » Accessibility, effectiveness and efficiency.

Our Objectives

As the national peak body for mental health, Mental Health Australia works to advocate for a better mental health system for all Australians and a better operating environment for service providers.

To deliver on our vision, and to continue representing and promoting the interests of our Members and the Australian mental health sector, our work over the coming years will focus on the following core objectives:



Strategic Plan

Mental Health Australia Strategic Plan 2018-2019

2018-2019

OUR VISION

mentally healthy communities Mentally healthy people,

OBJECTIVES

INVESTMENT IN MENTAL HEALTH **GROW THE LONG-TERM**

FEDERAL BUDGET INVESTMENT TARGET 2019/ POST-ELECTION

Develop and deliver a detailed campaign to provide the rationale for new investment in mental health

IMPROVE SYSTEMS DESIGN AND INTERFACE

PROVIDE INPUT TO AND SUPPORT MAJOR

INVESTMENTS IN MENTAL HEALTH Including prosecuting Investing to Save report recommendations

MAINTAIN AND ADVANCE **ADVOCACY INFLUENCE**

mental health system through participating To highlight and fix gaps within the in major government inquiries

Develop and deliver an election campaign strategy

PRE-ELECTION STRATEGY

to highlight key concerns for members,

key mental health issues by electorate, with

a focus on marginal electorates

Continue to influence stakeholders to engage with consumers and carers

CONSUMER AND CARER CO-DESIGN

Continue establishing strong relationships that PRIMARY HEALTH NETWORKS

rocus on mental health

MENTAL HEALTH AUSTRALIA SUSTAINABILITY OF

REVENUE AND RESOURCE CAPABILITY MAINTAIN AND INCREASE OUR OWN

beyond current funding cycle. Undertake projects Secure core funding and key major projects that support our strategic objectives

CONTINUOUS QUALITY IMPROVEMENT ADMINISTRATIVE SYSTEMS OF GOVERNANCE AND

ROBUST AND HEALTHY ORGANISATIONAL CULTURE AND STAFF PERFORMANCE



Mental Health Australia

From the Chair and CEO

A once in a generation opportunity beckons for the mental health of all Australians.

This is a phrase we have used often since the Productivity Commission Inquiry into Mental Health¹ was first announced in late 2018, mainly because this Inquiry has the potential to guide real and lasting reform. Its recommendations will be delivered at a time when governments at all levels are listening, and looking to act, and the need for reform is recognised by so many Australians.

Mental Health Australia is honoured to continue to support and work with key consumer and carer groups whose representatives are so often at the forefront of reform. The constructive and considered input of lived experience is invaluable to us as a sector, and to policy makers at all levels.

This year we were pleased to add representatives from the Embrace Multicultural Mental Health Project to our ongoing relationships with the National Mental Health Consumer and Carer Forum (NMHCCF) and the National Register of Mental Health Consumer and Carer Representatives. We look forward to continuing our work with these important consumer and carer voices.

Throughout 2018 and 2019 we have also enjoyed a strong working relationship with the Productivity Commission as we provided a conduit to inform Members and stakeholders of the Inquiry process, opportunities and

procedures involved. Our policy and advocacy work included three submissions to the Productivity Commission Inquiry and has subsequently helped set the scene for our Charter 2020: Time To Fix Mental Health.

For our Members, and for the wider mental health community, we have continued to play an active role on a number of national mental health advisory groups and committees, including co-chairing the Primary Health Network (PHN) Advisory Panel on Mental Health, participating in the Department of Health's Mental Health Reform Stakeholder Group, the National Disability Insurance Agency's National Mental Health Sector Reference Group, the Independent Hospital Pricing Authority's Stakeholder Advisory Committee, and the Australian National Advisory Council on Alcohol and Drugs, among many others.

Following the return of the Multicultural Project last year, June 2018 marked the launch of a new name, brand and website. Embrace Multicultural Mental Health² represents a partnership with the Federation of Ethnic Communities' Councils of Australia and the National Ethnic Disability Alliance. The Embrace Project will continue to develop and promote the Framework for Mental Health in Multicultural Australia and educate service providers on how best to deliver and focus on mental health and suicide prevention for people from culturally and linguistically diverse backgrounds.

¹ Productivity Commission Inquiry into mental health https://www.pc.gov.au/inquiries/current/mental-health#draft

² Embrace Multicultural Mental Health https://mhaustralia.org/national-multicultural-mental-health-project

In October 2018, we delivered another extremely successful World Mental Health Day campaign with support from more than 700 organisations nationwide to raise awareness, reduce stigma and encourage help seeking, including a national partnership with Bunnings Warehouse.

Other events included our Members Policy Forums, an outstanding sold-out Grace Groom Memorial Oration by Tracey Spicer AM in November 2018, and our Parliamentary Advocacy Day in March 2019, as well as additional and ongoing advocacy as the nation prepared for a Federal Election.

The early Federal Budget³ in April 2019 highlighted increases in funding for a number of mental health services and initiatives, and saw increased attention for mental health reform from the Treasurer, Minister for Health and the Prime Minister. This intent continued following the Coalition election win in May.

Hearing the Government talking seriously about, and taking action to reach, a goal of zero suicide is another key indicator that, along with the Productivity Commission Inquiry, the timing is right for real reform.

Closer to home, Mental Health Australia faced a huge challenge and sought judicial review of a decision made by the ACT Long Service Leave Authority regarding registration under the Long Service Leave (Portable Schemes) Act 2009 (ACT). The 18-month process proved fruitful in July 2019 with Justice Verity McWilliam handing down her ruling in favour of Mental Health Australia on all matters and awarding us costs. The decision set a precedent for similar peak body NGOs based in the ACT and would not have been possible

if it was not for our strong internal governance and sound policies and processes in place.

As an organisation that often delivers well beyond its capacity and output, this was an example of our continued success and ability to perform professionally and productively under pressure. On that note, we would like to thank the dedicated and hardworking staff who are small in number but large in productivity and influence, and also our dedicated Board Directors who are all prepared to continue to advocate for mental health reform on a daily basis.

Finally, thank you again to those consumers and carers, Members and other stakeholders who help us drive and deliver our reform agenda to achieve our shared vision of mentally healthy people, and mentally healthy communities.







Frank Quinlan
CEO

³ 2019 Federal Budget Summary https://mhaustralia.org/media-releases/2019-federal-budget-summary

Our Members

As the national peak body representing the mental health sector in Australia, Mental Health Australia advocates on behalf of a wide range of people who are working to improve the mental health and wellbeing of all Australians. This includes consumers and carers, practitioners, service providers, researchers and policy makers.

Our Members play a vital role in helping to fulfil our advocacy role and ensure a united voice is heard in the development of key national mental health reform priorities. We thank our Members for their continued support.

As at 30 June 2019 Mental Health Australia had 68 Voting Members and 52 Non-Voting Members. A full list of Members can be found below.

Voting members:

Aftercare

Australian Association for Developmental

Disability Medicine

Australian Association of Social Workers

Australian Clinical Psychology Association

Australian College of Mental Health Nurses

Australian Counselling Association Inc.

Australian Psychological Society

Australian Rotary Health

Batyr Australia Limited

Beyondblue Limited

Black Dog Institute

Blue Knot Foundation

Brain and Mind Centre

Carers Australia

Catholic Health Australia

Catholic Social Services Australia

Centre for Mental Health Research (ANU)

Council for Intellectual Disability

Dementia Australia

Dietitians Association of Australia

Dnet People Like Us

Emerging Minds

GROW

Headspace

Lifeline Australia

Mental Health Carers Australia

Mental Health Coalition of SA Inc

Mental Health Community Coalition ACT

Mental Health Coordinating Council

Mental Health Council of Tasmania

Mental Health First Aid Australia

Mental Health Professionals Network

Mental Health Victoria

Mental Illness Fellowship of Australia

Mind Australia

National Aboriginal Community Controlled

Health Organisation

National I GBTI Health Alliance

National Rural Health Alliance

Neami National

NT Mental Health Coalition

Occupational Therapy Australia

On The Line

Orygen, The National Centre of Excellence in

Youth

Ostara Australia Limited

Psychotherapy and Counselling Federation of

Australia (PACFA)

Perinatal Anxiety and Depression Australia

(PANDA)

Private Mental Health Consumer Carer

Network

Psychosis Australia Trust

Queensland Alliance for Mental Health Queensland Centre for Mental Health

Research

R U OK? Foundation ReachOut Australia Relationships Australia

Richmond Fellowship of Australia Royal Australian College of General

Practitioners

Royal Flying Doctor Service of Australia

Rural & Remote Mental Health

SANE Australia

Society for Mental Health Research

Soldier On Australia

Speech Pathology Australia Suicide Prevention Australia The Butterfly Foundation

The Pharmacy Guild of Australia TheMHS Learning Network Inc

The Royal Australian and New Zealand College

of Psychiatrists

United Synergies Ltd

WA Association for Mental Health

Non-Voting Members:

ACT Mental Health Consumer Network

Anglicare Tasmania Inc

Anxiety Recovery Centre Victoria

Arafmi Ltd Artius Group

Australian Red Cross

Being - Mental Health & Wellbeing

Black Swan Health

breakthru

Brisbane North PHN

Care Connect Carers ACT CatholicCare NT

Centacare Catholic Family Services

Centacare, Catholic Diocese of Ballarat Inc

Central Coast Family Support Service Inc

CoHealth Connections Consumers of Mental Health WA (CoMHWA)

Converge International Ltd

Employee Assistance Professional Assoc of

Australasia

Exercise & Sports Science Australia (ESSA)

FearLess Outreach Flourish Australia HelpingMinds Lutheran Services

JobCo Employment Services Inc Junaya Family Development Services

LAMP Inc

Lives Lived Well Marathon Health

McAuley Community Services for Women

Mental Health Partners Mentally Healthy WA

Mentis Assist Open Minds

Pathways SouthWest Inc Richmond Wellbeing

Ruah Community Services

Star Health Group

Tandem

The MindShift Foundation
The Movember Foundation

TeamHEALTH

Tully Support Centre

University of Newcastle - Centre for Rural &

Remote MH

University of Sydney

Victorian Mental Illness Council VMIAC

WayAhead - Mental Health Association NSW

Wellways

Wise Employment Ltd

Women's Information, Support and Housing in

the North

Voting Members



Non-Voting Members



Our People

Board and Staff

Mental Health Australia is governed by a Board of up to ten Directors. The Board must consist of at least three and up to eight Elected Directors, and up to two Board Appointed Directors.

Board Directors for 2018/19 were:

NAME	POSITION
Jennifer Westacott (to 3 August 2019)	Board Appointed Director, Chair
Robyn Kruk	Board Appointed Director, Deputy Chair (to 2 August 2019) Interim Chair (from 3 August 2019)
Dr Jennifer Bowers (from 26 November 2018)	Elected Director
Jeremy Coggin (from 26 November 2018)	Elected Director
Patrick Hardwick (to 2 November 2018)	Elected Director
Georgina Harman	Elected Director
Geoff Harris (to 26 November 2018)	Elected Director
Robyn Hunter (from 26 November)	Elected Director
Dr Kym Jenkins (from 26 November 2018)	Elected Director
Janne MacMahon OAM	Elected Director
Christine Morgan (to 26 February 2019)	Elected Director
Jonathan Nicholas (to 26 November 2018)	Elected Director
Arthur Papakotsias (to 21 December 2018)	Elected Director
Sam Refshauge (to 26 November 2018)	Elected Director
Carmel Tebbutt (from June 4 2019)	Elected Director

Mental Health Australia CEO and Board, November 2018: Left to Right: Frank Quinlan, Jennifer Westacott, Jennifer Bowers, Arthur Papakotsias, Robyn Kruk, Kym Jenkins, Janne McMahon, Georgie Harman, Christine Morgan



Secretariat Staff

Mental Health Australia's success depends on the experience and dedication of its staff. The team combines extensive skills in business, governance, policy and program development, and management, planning, communications and event management and administration.

Staff as at 30 June 2019 were:

NAME	POSITION
Frank Quinlan	Chief Executive Officer
Melanie Cantwell	Deputy Chief Executive Officer & Company Secretary
Harry Lovelock	Director, Policy and Projects
Kylie Wake	Director, Consumer and Carer Programs
Lachlan Searle	Director, External Relations
Felicity Wilkins	Executive Assistant / Communications and Events Coordinator
Emma Coughlan	Acting Manager, Policy and Projects
Anna Siddall	Communications Officer
Michelle Wickson	Corporate Services Manager
Kylie Bartlett	Finance and Corporate Services
Delia Witney	Human Resources Manager
Kathryn Sequoia	Projects Officer
Amy Byrne	Corporate Services Officer
Ruth Das	National Multicultural Mental Health Project — National Project Manager
Kaitlin Saunders	National Multicultural Mental Health Project – National Policy and Project Officer
Charlene Singh	National Multicultural Mental Health Project – National Project and Administration Officer
Victoria Wilson	NMHCCF/National Register — Executive Officer
Danica Browne	NMHCCF/National Register – Administration/Project Officer

Consumer and Carer Participation and Leadership

National Mental Health Consumer and Carer Forum

The National Mental Health Consumer and Carer Forum (NMHCCF) is a combined national voice for mental health consumers and carers. Members listen, learn, influence and advocate in matters of mental health reform. The NMHCCF is currently auspiced by Mental Health Australia.

Membership of the NMHCCF is comprised of one consumer representative and one carer representative from each Australian state and territory, and representatives from identified population groups and national consumer and carer organisations. In 2018/19, a consumer representative and carer representative from the Culturally and Linguistically Diverse (CALD) Mental Health Consumer and Carer Group from the Embrace Multicultural Mental Health Project joined the NMHCCF.

NMHCCF Members represent mental health consumers and carers on a large number of national bodies, such as Government committees and advisory groups, professional bodies and other consultative forums and events. Members use their lived experience, understanding of the mental health system and communication skills to advocate and promote the issues and concerns of consumers and carers.

The NMHCCF met three times face-to-face in 2018/19: October 2018, March 2019 and June 2019. Reports from the October 2018 and March 2019 meetings are available at: www.nmhccf. org.au/content/reports-meetings. The June 2019 meeting focused on working group activities and no meeting report was required.

In 2018/19 the NMHCCF contributed to the following national consultations, reports, issues and policies:

- » Senate Community Affairs References Committee Public Hearing accessibility and quality of mental health services in rural and remote Australia
- » Submission in response to the Senate Community Affairs References Committee inquiry to the My Health Record
- » Submission in response to the Productivity Commission Inquiry into Mental Health
- » Online feedback to the draft National Mental Health and Suicide Prevention Information Priorities 3rd edition
- » Four consultations (by teleconference) with the Productivity Commission regarding the Productivity Commission Inquiry into Mental Health
- » Consultation (by teleconference) regarding the Implementation review of the Pharmacy Trials Program

Copies of public submissions are available on the NMHCCF website, www.nmhccf.org.au.

In February 2019, the Mental Health Principal Committee (MHPC) , which provides funding to the NMHCCF, increased its membership to include a consumer and a carer representative – the Co-Chairs of the NMHCCF. The NMHCCF Co-Chairs attended the March and June 2019 MHPC meetings.

In 2018/19, NMHCCF Members also participated in the following:

- » 2nd Annual NDIS Conference and Mental Health Conference (panel member)
- » Australian Rural and Remote Mental Health Symposium (keynote speaker)
- » The Mental Health Services (TheMHS) Conference
- » Consumers Health Forum Ministerial roundtable
- » Everymind steering group for carers online program development
- » Productivity Commission Mental Health Policy Network member teleconference (hosted by Mental Health Australia)
- » PHN Cooperative national collaboration on PHN mental health commissioning teleconference
- » Australian Digital Health Agency Mental Health Forum
- » Mental Health Australia events:
 - * Grace Groom Memorial Oration
 - * Members Policy Forum
 - * Parliamentary Advocacy Day.

The NMHCCF Executive during 2018/19 were:

Consumer Co-Chair	Lorraine Powell (WA Consumer representative)
Carer Co-Chair	Emma Donaldson (Blue Voices Carer representative) until March 2019 Eileen McDonald (NSW Carer representative) from April 2019
Deputy Consumer Co-Chair	Lyn English (SA Consumer representative)
Deputy Carer Co-Chair	Elida Meadows (TAS Carer representative) until June 2019
Ordinary Consumer Member	Heather Nowak (CHF Consumer representative)
Ordinary Carer member	Katrina Clarke (VIC Carer representative)

National Register of Mental Health Consumer and Carer Representatives

The National Register is made up of 60 mental health consumer and carer representatives from around Australia. These representatives are available to sit on or participate in national committees, boards, planning groups and national forums as consumer or carer representatives.

During 2018/19, the consumer and carer selection panel (NMHCCF Co-Chairs and the consumer and carer nominees on the Mental Health Australia Board) selected consumer and carer representatives from the NMHCCF and National Register for the following new opportunities:

- » Department of Health Million Minds Advisory Panel
- » National Mental Health Commission
- » National Mental Health Research Strategy Steering Committee
- » Face-to-face meetings to guide the development and delivery of the Consumer and Carer Guide
- » Roundtable of peer workforce leaders to provide independent and expert advice on the potential scope of peer work guidelines
- » Australian Clinical Psychology Association (ACPA) Presenters at ACPA 9th annual conference
- » Australian Mental Health Outcomes and Classification Network
- » The Child and Adolescent Mental Health Information Development Expert Advisory Panel
- » Primary Health Networks Your Experience of Service Reference Group
- » Australian Commission on Safety and Quality in Health Care
- » Certification Framework for Digital Mental Health Services Advisory Group
- » Inclusion of mental health specific medication complications in the hospitalacquired complications list panel meeting
- » Roundtable to provide advice on the review of the sentinel event Suspected Suicide of a Patient in an Acute Psychiatric Unit/Ward
- » National Health and Medical Research Council (NHMRC) NHMRC special initiative in mental health research roundtable
- » Brisbane North PHN PHN Cooperative national mental health stakeholders roundtable
- » Australian Health Ministers' Advisory Council Safety and Quality Partnership Standing Committee
- » Mental Health Coordinating Council teleconferences about improving access to the NDIS through the reimagine.today website

Annual National Register and NMHCCF Issues Forum/Workshops

Mental Health Australia hosts an Annual Issues and Opportunities Workshop for Members of the National Register and the NMHCCF. This year, members of the Embrace Project consumer and carer group were also invited to attend.

These workshops aim to further develop the representative skills of mental health consumers and carers already participating in national policy initiatives. In particular, the workshops are designed to develop representatives' advocacy, policy development and leadership skills. The workshops also provide important networking opportunities for representatives.

The 2019 Annual Issues and Opportunities Workshop was held in Melbourne in May 2019 and was attended by 66 mental health consumer and carer representatives. The theme 'Uniting our Voices – People, Policy & Purpose' provided a thought-provoking program and opportunities to advance participants' voices as consumers and carers.

Notes from the Annual Workshop:



Artist: Jasper Potter, Picture This Creative

Our Policy Submissions

Mental Health Australia developed a number of submissions throughout 2018/19, covering a range of national mental health issues. This year we focused in particular on a substantial contribution to the Productivity Commission Inquiry into Mental Health. All submissions can be downloaded from the Mental Health Australia website at www.mhaustralia.org.

SUBMISSION TO THE PRODUCTIVITY COMMISSION'S NATIONAL DISABILITY AGREEMENT REVIEW

August 2018

In this submission, Mental Health Australia argued a National Disability Agreement must be maintained to ensure all governments in Australia commit to, and are held accountable to the Australian people for, addressing the support needs of people with psychosocial disability.

The submission highlighted the large number of people who will need psychosocial services outside of the National Disability Insurance Scheme, and that a revised national agreement should provide clarity around the roles and responsibilities of governments to provide services for this cohort.

SUBMISSION TO THE ROYAL COMMISSION INTO MISCONDUCT IN THE BANKING, SUPERANNUATION AND FINANCIAL SERVICES INDUSTRY

October 2018

This submission responded to the Royal Commission's questions regarding policy issues raised in the September 2018 hearings into the conduct of insurers and superannuation providers.

The submission described how people with mental health issues experience problems accessing the insurance market on fair terms. Mental Health Australia proposed regulatory and other solutions, including greater enforcement and monitoring of the current requirements on insurers under the *Disability Discrimination Act 1992 (Cth)*.

Our submission also discussed the link between actuarial data and underwriting practices, which the Royal Commission did not have capacity to consider during its hearings.

PRE-BUDGET SUBMISSION

December 2018

Our 2019/20 pre-Budget submission drew on the Investing to Save report prepared by KPMG for Mental Health Australia, to make specific recommendations to improve the mental health of our community, and provide economic and productivity gains for business and Government.

In this submission we argued for expansion and re-orientation of mental health services to meet need, and outlined targeted areas for investment to achieve both positive health and social outcomes for people experiencing mental health issues and economic returns for the Government.

Our recommendations were:

- » Provide community-based assertive outreach to people who have attempted suicide
- » Expand community-based psychosocial support programs
- » Expand the peer workforce
- » Provide cognitive based therapy and other interventions for children and young people
- » Increase uptake of e-mental health early intervention services
- » Work with employers to improve workplace mental health and wellbeing
- » Permanently embed arrangements for ongoing and active co-design with consumers and carers.

SUBMISSION TO THE ROYAL COMMISSION INTO AGED CARE QUALITY AND SAFETY

March 2019

In this submission Mental Health Australia highlighted the current structural arrangements which impede the provision of timely and appropriate identification and treatment of mental health conditions in older Australians. We also recommended particular areas of focus for the Royal Commission to improve care of older Australians.

We urged the Commission to consider mechanisms to increase access to mental health services for older Australians by extending eligibility for GP Mental Health Treatment Plans to older people in residential care, support for mental health professionals to provide care in residential aged care settings, providing funding for psychosocial support services for residents of aged care facilities, and delivering greater access for older people to community based psychosocial supports to complement other services.

SUBMISSION TO THE PRODUCTIVITY COMMISSION INQUIRY INTO MENTAL HEALTH

APRIL 2019

In Mental Health Australia's first submission to the Productivity Commission Inquiry into Mental Health, we welcomed the Inquiry with hope because of its unique focus on the impact of mental health on economic and social participation.

We called upon the Productivity Commission to produce a final report which addresses:

- » The suite of mental health services and programs required to meet anticipated need
- » Administrative structures required to underpin this suite of services
- » The social determinants of mental health.

To assist the Inquiry, our submission provided advice to the Productivity Commission about how to target its Inquiry in relation to these areas. Mental Health Australia continued to assist the Inquiry with further briefings and submissions throughout 2019.



Prime Minister The Hon Scott Morrison MP and Senator The Hon Michaelia Cash host a forum at Parliament House with small representatives to ensure small businesses, particularly sole traders, have the best access to mental health tools

Our Advocacy and Projects

Embrace Multicultural Mental Health: The National Multicultural Mental Health Project

The National Multicultural Mental Health Project provides a national focus on mental health and suicide prevention for people from CALD backgrounds and builds on the work of previous national projects in this important area.



The key objectives of the project are:

- » A culturally responsive and diverse mental health workforce which is supported to deliver culturally and linguistically inclusive practice
- » CALD consumers and carers effectively participate at all levels of mental health service planning, delivery and evaluation
- » Improved outcomes in access, coordination across the continuum of care, quality and

safety for CALD mental health consumers, carers and their families

» Increased mental health awareness, knowledge and capacity in CALD communities via culturally inclusive promotion, prevention and early intervention initiatives.

Mental Health Australia staff meet with consumers and carers of the Multicultural Mental Health Project in Canberra

The Project has undertaken an extensive consultation process with CALD consumers, carers and service providers to create a new name and brand. The resulting Embrace Multicultural Mental Health Project (the Embrace Project),

reflects the values of inclusivity, warmth and support for individuals, families and communities from CALD backgrounds seeking support in mental health, as well as advocating for mental health services to embrace diversity and flexible service delivery. As part of this process new branding has been incorporated into all project material including the website, promotional material and communications.

The Embrace Project has also seen a re-development of the Framework for Mental Health in Multicultural Australia. The Framework has been redeveloped with input from an expert Steering Group into a series of online standalone modules and reflection tools. The modules are designed to support services in assessing and designing activities to improve cultural responsiveness, and are supported by numerous tools, resources and links which provide

additional resources. A series of workshops will be held in each state and territory to promote the Framework and provide information and guidance on applying the Framework within mental health services.

The new Embrace website is a national hub of resources, information, and guidance in multicultural mental health. It provides multilingual information and resources to people from CALD backgrounds as well as tools, resources and the Framework for service providers. The Embrace website also hosts webinars and online forums to support frontline mental health services.

Other key activities of the Embrace Project have been:

- » Regular collaboration and meetings with Alliance Members FECCA and NEDA
- » Quarterly meetings with the Project Stakeholder Group
- » Quarterly meetings with the Project CALD Consumer and Carer group
- » Regular meetings and engagement with key services such as Primary Health Networks, Transcultural Mental Health services, and state and territory mental health services.

Additional targeted activities will be undertaken over the course of the Embrace Project. Further development and national promotion of the Framework for Mental Health in Multicultural Australia is a key priority along with building mental health literacy amongst culturally and linguistically diverse communities.

More information on the project is available at: www.embracementalhealth.org.au.



Mental Health Australia has undertaken extensive consultation to identify obstacles people with severe, complex and enduring mental illness face in accessing psychosocial services through the National Disability Insurance Scheme (NDIS). In early 2019, Mental Health Australia worked with the National Disability Insurance Agency (NDIA) to establish a Psychosocial Disability Stream Working Group to develop solutions to address these barriers.

Mental Health Australia has been an active member of the Working Group, alongside consumer, carer and service provider representatives. The Working Group has agreed on three key focus areas in establishing the NDIS Psychosocial Disability Stream:

- » Addressing episodic need
- » Providing assertive outreach
- » Improving linkages and referrals.



Optimising NDIS Psychosocial Supports

In partnership with a number of its member organisations, Mental Health Australia undertook a project to bring together (for the first time) service level data to create a picture of the supports available to people with psychosocial disability in community-based programs prior to the NDIS. This provided a rich evidence base to support the design and delivery of optimal psychosocial support services through the NDIS. The project resulted in a detailed report and list of recommendations, published on the Mental Health Australia website in October 2018.

Mental Health Australia negotiated with the NDIA to establish a new working group to review the data outlined in the report alongside NDIA data to identify gaps and issues. This work can then help to inform future Typical Support Packages available to NDIS participants with psychosocial disability, to provide people with optimal services to support participation and inclusion.



Health professionals, psychosocial disability and NDIS project

Mental Health Australia was engaged by the Department of Social Services (DSS) to identify how health professionals can be better supported to assist consumers with psychosocial disability to access the NDIS. Mental Health Australia began with a desktop analysis followed by consultation with health professionals by our clinical member organisations.

Mental Health Australia identified common issues underlying barriers to access, centring on the lack of information and clarity around eligibility criteria, and the role of health professions in supporting applications for the NDIS.

Mental Health Australia also sought the views of health professionals about initiatives that will work best for them to help consumers have a better NDIS access experience. These issues and recommendations have been outlined in a project report published on the Mental Health Australia website.



National Disability and Carer Alliance

Mental Health Australia has been a member of the National Disability and Carer Alliance since 2017. The Alliance was first formed in 2009 by National Disability Services, Carers Australia and the Australian Federation of Disability Organisations. The Alliance developed the Every Australian Counts campaign, which mobilised strong public and political support for a national scheme to support people with disability.

Mental Health Australia continued to work with Alliance Members to advocate for, and inform the implementation of, the NDIS for people with psychosocial disability.



Productivity Commission Mental Health Policy Network

In January 2019, Mental Health Australia held its first meeting of the Productivity Commission Mental Health Policy Network to create a forum to assist Members with their submissions to the Inquiry. Through this forum we facilitated discussion on the progress of the Inquiry, the major policy issues in the Commission's issues paper (released in early 2019) and the draft report (to be released at the end of October 2019). Productivity Commission Assistant Commissioners attended a Network meeting and emphasised the Commission's commitment to ensuring the Inquiry results in tangible reform that will improve the mental health of all Australians.

The Network developed key criteria for the sector and the Productivity Commission to consider. These criteria included embedding co-design, agreed priorities for implementation, effective governance and finance arrangements, and addressing social determinants of health.



Mental Health Australia members and guests celebrating Harmony Day at our Members Policy Forum in March 2019



In April 2019, the CEO used his CEO Update editorial to call for a Federal Election campaign without bullying, name calling, trolling and other mentally unhealthy behaviours (from candidates, the media, stakeholders and voters alike). Mental Health Australia wrote to leaders of the major parties asking for their commitment to eight key measures as part of our Election Platform. Our Election Report Card provided stakeholders with a summary of party responses as well as list of further general mental health announcements made during the election campaign.

In May 2019, the CEO Update editorial focused on the Federal Election debate and how both leaders had mentioned the importance of mental health and suicide reduction, but had not

(at that time) announced any systemic reform agenda. In June 2019, the CEO Update editorial focused on a speech by Prime Minister Scott Morrison as an impetus to rally the sector to #FixMentalHealth.



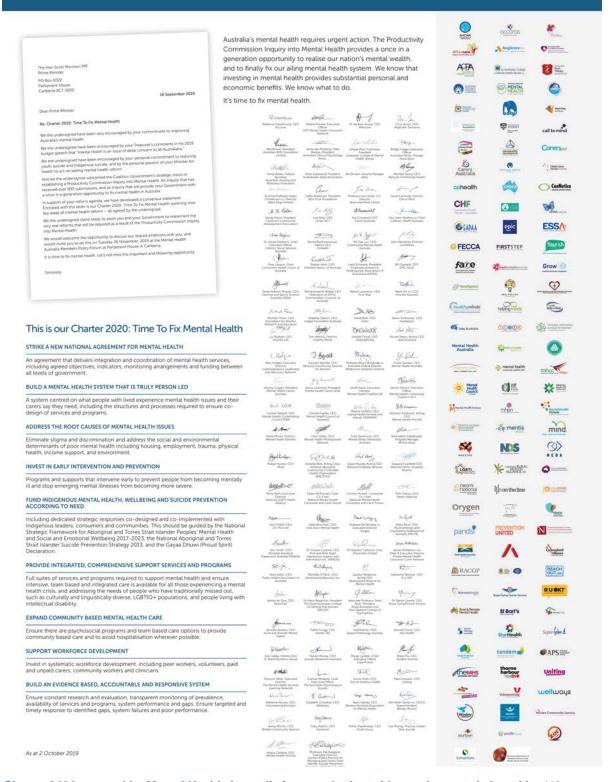
Mental Health Australia's letter to Prime Minister The Hon Scott Morrison MP in the lead up to the Federal Election 2019



Mental Health Australia commenced the Charter 2020: Time To Fix Mental Health campaign in 2018/19 to build support and more effectively implement reform and influence the Australian Commonwealth, state and territory governments in relation to the Productivity Commission's proposed mental health reforms. This campaign was aimed at gaining support of the mental health sector, other stakeholders and the broader public in aligning the push for mental health reform.

Kicking off the campaign, Mental Health Australia developed Charter 2020 through consultation with member organisations, to outline high level areas of agreed reform. Over 110 organisations added their logo in support for the Charter. The Charter outlines key issues for governments to act on in response to the Final Report of the Productivity Commission Inquiry into Mental Health, due to be handed to Government in May 2020. Mental Health Australia has planned a range of future campaign activities.

Charter 2020: Time To Fix Mental Health



Charter 2020, created by Mental Health Australia in consultation with members, and signed by 110 members and stakeholder organisations



The 2018 World Mental Health Day (WMHD) campaign was again a huge success and for the second consecutive year used the theme 'Do You See What I See?' to shed a positive light on mental health and help reduce stigma.

To build on the success of WMHD 2017, and to leverage the well-established following for enhanced engagement in 2018, this year's campaign aimed to challenge negative perceptions and encourage a positive view of mental health by once again asking people to make a #MentalHealthPromise.

Following 2017 campaign feedback and focus testing in the lead up to the 2018 campaign, additional workplace mental health resources were developed to provide organisations with new material to promote help seeking behaviour and highlight World Mental Health Day 2018 as a day to look at mental health in a more positive light.

As a result, the campaign received unprecedented support from businesses, community groups, charitable organisations, prominent Australians and the general public including:

- » A record number of individual mental health promises
- » A record number of partnerships
- » More than 700 organisations and businesses supporting the campaign through the distribution of hard copy and digital campaign materials.

Campaign Highlights

BUNNINGS WAREHOUSE

Working with senior executive staff at Bunnings Warehouse, Mental Health Australia was able to distribute more than 20,000 World Mental Health Day badges to staff in over 300 stores nationwide. We also partnered to run a successful Guinness World Record Attempt in the Bunnings carpark in Wagga Wagga. Bunnings has already



World Mental Health Day 2018 Partners outside Bunnings Wagga Wagga

started to plan opportunities for next year's campaign and their Safety and Wellness Manager addressed Mental Health Australia Members at the Parliamentary Advocacy Day in November 2018. With increased lead time and planning, the Bunnings partnership is a huge opportunity for the World Mental Health Day campaign in 2019 and beyond.

ADDITIONAL PARTNERSHIPS

The WMHD 2018 partnership program was the most successful to date. Mental Health Australia established a record 46 formalised partnerships with organisations, businesses, community groups and charities across a range of sectors including mental health, banking and finance, health and wellness, and sports. Some of our biggest partners included Parkrun (over 485,000 Members and volunteers nationally) and Playgroups Australia (over 200,000 families involved in community playgroups around the country).

SUPPORTERS

More than 700 individuals and organisations from across the country ordered promotional material for World Mental Health Day 2018. Campaign posters, postcards and badges were delivered to schools, universities, healthcare providers, government departments, community groups and centres, corporations, supermarkets, fashion retailers and city councils across Australia.

FOCUS ON WORKPLACE MENTAL HEALTH

In response to independent feedback received on the 2017 campaign which suggested workplaces were looking for more direction on how to tackle and promote employee mental health, the 2018 campaign focused on workplaces as a key audience. A workplace-specific poster was developed with suggested promises and ways to look after mental health at work. A set of social media share graphics were also developed to integrate with workplace wellbeing programs, promote mentally healthy workplaces, and increase the uptake of WMHD campaign messages, simultaneously

increasing campaign reach and visibility.

SOCIAL MEDIA

A range of visual and written content was developed for WMHD 2018 and made available to supporters, partners and the public via an online resource page. Partners were provided a Partner Pack designed to make it easier to get involved and support the social media campaign.



Original postcards designed by InkLab, distributed as advertisement for the World Record Attempt in Wagga Wagga on World Mental Health Day

The hashtag #mentalhealthpromise featured in over 1,500 posts on Instagram and over 2,500 tweets on Twitter. #WMHD2018 was mentioned over 4,000 times across Twitter, Facebook and Instagram. The main campaign video for 2018 had a combined social media reach of more than 30,000.

WAGGA WORLD RECORD EVENT

Mental Health Australia in partnership with Bunnings Warehouse, Wagga Wagga City Council, Triple M Riverina and the Healthy Tradie Project held an event in Wagga Wagga to bring attention to the issue of mental health in regional and rural communities. This attempt to break the Guinness World Record for the most people wearing high-vis in one location drew an impressive crowd of 1,242 people and proved successful in raising mental health awareness throughout the Riverina region, engaging more than 50 local community groups.

PROMISES

The #MentalHealthPromise drive was a continued success in 2018 with over 3,500 promises submitted on or around 10 October, bringing the online promise total to over 23,500 since the site went live in 2013. The ability for individuals to engage with the campaign via a digital promise online, and then being able to share that promise via social media, is a clear example of stigma reduction and making a personal commitment to engage with the campaign.



A #MentalHealthPromise made at 1010.org.au by former Prime Minister and Chair of Beyond Blue, Ms Julia Gillard AC

MEDIA & HIGH-PROFILE PROMISES

Media coverage was extensive during the campaign period, from national coverage on Sky News to a more targeted approach for the Wagga Wagga Guinness World Record Attempt. A total of 1,727 media reports mentioned World Mental Health Day with a potential cumulative audience of 10.4 million Australians, and an advertising space rate valued at \$5,879,691. Promises were submitted by several high-profile Australians including former Prime Minister The Hon. Julia Gillard AC, Olympians and state and federal Members of Parliament.

Our Events and Communications Activity

Grace Groom Memorial Oration

The Grace Groom Memorial Oration was delivered in November 2018 by prominent media personality and gender rights advocate Tracey Spicer OAM to a sellout audience at the National Gallery of Australia. An Australian ambassador for the #MeToo movement, Tracey's experiences of gender-based discrimination and its impact on mental health made for a memorable and moving Oration. The night also featured the awarding of the Grace Groom Memorial Scholarship to ANU postgraduate student Aliza Hunt to undertake challenging and novel research on the mental health status of older adults in Indonesia.



Journalist Tracey Spicer, presenting the Grace Groom Memorial Oration in November 2018



Tracey Spicer and Jennifer Westacott presenting ANU student Aliza Hunt with the 2018 Grace Groom Memorial Scholarship

List of Grace Groom Memorial Orators

2007 - Professor Ian Hickie AM

2008 - The Hon Nicola Roxon MP

2009 - Professor Geoff Gallop AC

2010 - Professor Pat McGorry AO

2011 - Craig Hamilton

2012 - Jessica Rowe AM

2013 - Jennifer Westacott

2014 - Vice Admiral Ray Griggs AO,

2015 - Professor Mike Slade

2016 - The Hon Jeff Kennett AC

2017 - The Hon Greg Hunt MP

2018 - Tracey Spicer OAM

Parliamentary Advocacy Day and Members Policy Forums

Following the Grace Groom Memorial Oration, more than 90 Members, delegates and stakeholders attended our Parliamentary Advocacy Day and Members Policy Forum at Parliament House in Canberra. Delegates met with some 20 Senators and Members of Parliament and also heard from Minister for Health The Hon Greg Hunt MP, Minister for Social Services The Hon Paul Fletcher MP, Shadow Minister for Mental Health The Hon Julie Collins MP and Senator Deborah O'Neill.



Minister for Health The Hon Greg Hunt MP speaking at the Mental Health Australia Parliamentary Advocacy Day at Parliament House in November 2018



Jennifer Westacott thanks Senator Deborah O'Neill and The Hon Julie Collins MP for attending the 2018 Parliamentary Advocacy Day at Parliament House in Canberra

The March 2019 Members Policy Forum at Old Parliament House was an opportunity for more than 80 delegates to hear from Productivity Commission Assistant Commissioner Rosalyn Bell on how best to prepare submissions to the Productivity Commission ahead of the April 2019 deadline. This event also provided an opportunity for Members and stakeholders to hear from Minister for Health The Hon Greg Hunt MP (by video), Senator Deborah O'Neill and Senator Rachel Siewert.

Communications Activity

Regular media and communications activities continued to engage stakeholders, with the distribution of more than 45 Weekly CEO Update e-newsletters to more than 4,300 stakeholders. A key piece of regular and informative content for Members, stakeholders and individuals in the sector, the Weekly CEO Update is augmented by regular content delivered on social media – Twitter, Facebook, YouTube and Instagram – to a combined potential audience of more than 45,000. In addition to these communication channels, Mental Health Australia also distributed several media releases to stakeholders and the mainstream media on a range of diverse issues. These can be accessed via the Mental Health Australia website.

Our Business

Mental Health Australia and the ACT Long Service Leave Authority

After nearly two years of uncertainty, Mental Health Australia sought judicial review of a decision made by the ACT Long Service Leave Authority (the Authority) regarding whether we were required to be registered under the Long Service Leave (Portable Schemes) Act 2009 (ACT) (the Act).

The Act provides a legislative scheme which enables employees in the community sector industry to transfer, and thus retain, their long service leave entitlements when they move to another employer in the same industry.

Mental Health Australia had received conflicting advice from the Authority since the commencement of the Scheme in July 2010 and was seeking clarification as to its employer obligations. The matter was heard in the Supreme Court of the ACT on 16 May 2019 (Mental Health Australia Ltd v Registrar, ACT Long Service Leave Authority).

In a legal process that was time consuming, and heavily reliant on sound governance, policy and processes especially in relation to employment and human resources, the ability to argue our case was strengthened by our professionalism, diligence and preparation.

The Court found our routine governance materials and practices were in very good shape; our Constitution accurately reflected our work, Position Descriptions were clear and up to date, Annual Performance Review processes were current, and our membership database was also accurate.

It should also be noted the decision to take this matter to Court was never about disputing the idea of a portable long service leave scheme for ACT employees, but more so that we had received conflicting advice from the Authroity and were alarmed that the funds we had contributed to the scheme were not being spent on the long service leave entitlements of Mental Health Australia staff, or former staff.

The Supreme Court found the ACT Long Service Leave Authority had denied Mental Health Australia due process (it used the word "injustice"), and declared that with correct interpretation of the law, Mental Health Australia (and organisations like us) are not subject to its powers.

On 19 July 2019, Justice Verity McWilliam handed down her ruling in favour of Mental Health Australia on all matters, most materially:

» Mental Health Australia was denied procedural fairness in relation to the Authority's decision-making processes.

» The Authority had misconstrued the Act and Mental Health Australia did not fall within the definition of an employer for the community sector industry within the meaning of the Act.

Mental Health Australia will receive legal costs as awarded by the Court, and will also finalise the refund of contributions paid to date. It should also be noted that the ACT Long Service Leave Authority did not appeal the decision.

Mental Health Australia remains committed to ensuring the long service leave entitlements of its staff through national legislation.

Gender Equality and Workforce Diversity and Inclusion

Mental Health Australia embraces diversity, equality, respect and inclusion. These are integral to our culture which is founded on the values of equity, social justice, inclusiveness, collaboration, tolerance and understanding of diversity.

Representation of our Workforce

The representation of Mental Health Australia's workforce continues to demonstrate a strong commitment towards gender equality, most notably at the Board and management level.

As at 30 June 2019:

Workplace Profile	Community Service - Mental Health Australia											
Occupational	Full t	ime	%	Part	time	%	Cas	ual	%	Total		%
Category	Female	Male	Female	Female	Male	Female	Female	Male	Female	Female	Male	Female
Board	8	1	89			N/A			N/A	8	1	89
Executive management	2	3	40			N/A			N/A	2	3	40
Management	3		100	1		100	1		100	5	0	100
Project Officers	3		100	1		100			0	4	0	100
Administration Staff	2		100	2		100			0	4	0	100
TOTAL	18	4	82	4	0	100	1	0	100	23	4	85

Our Diversity and Inclusion Journey

2012	Introduce Equal Employment Opportunity focus through the implementation of the EEO Management Plan Continued employer funded Paid Parental Leave	2013	Introduction of Equal Opportunity Discrimination and Harassment Policy Appointed first Equity & Diversity Officer	2014	Increased focus on flexible working Established Reconciliation Action Plan working group Statement of Commitment to develop Reconciliation Action Plan
2015	Developed first Reflect Reconciliation Action Plan	2016	Evolving from diversity to inclusion. First LGBTI Inclusion Plan implemented	2017	CEO became the organisation's nominated LGBTI Champion Statement of commitment to equity diversity and inclusion
2018	New Reflect Reconciliation Plan introduced	2019	Introduction of Workplace Adjustment Guidelines Established protocols for Acknowledgement of Country for meetings and events at Mental Health Australia sites	2020 and beyond	Establish and implement new Equity, Diversity and Inclusion Plan focused on continuing to build an inclusive culture that embraces the diversity of our people and communities now and into the future

Our commitment to diversity and inclusion is demonstrated through strategies, policies and initiatives. In 2018/19 these included:

- » Training and awareness programs for all employees including the delivery of a Transgender and Intersex Workshop
- » Learning opportunities for all employees to increase understanding and appreciation of Aboriginal and Torres Strait Islander cultures, histories and achievements. In accordance with key commitments contained in our Reflect Reconciliation Action Plan, the establishment of protocols for Acknowledgement of Country for meetings and events at Mental Health Australia sites
- » Permanently installing Aboriginal, Torres Strait Islander and Rainbow (LGBTiQ) flags in our office and on our website
- » Recognising and celebrating events of national significance to Aboriginal and Torres Strait Islander (NAIDOC week, Reconciliation Day), CALD (Harmony Day) and LGBTIQ communities (Wear it Purple Day) to promote awareness and inclusion
- » Taking positive measures to attract a diverse pool of candidates by highlighting employment opportunities with equity target group members and media
- » Employee access to a broad range of flexible working arrangements: according to our 2018 employee survey, 88 per cent of employees agreed their working time is flexible so they can manage their work and caring responsibilities
- » Introduction and promotion of Workplace Adjustment Guidelines to ensure an accessible and inclusive workplace is provided for people with a disability
- » A strong focus on the promotion and management of mental health and psychological wellbeing, recognising psychological safety underpins an inclusive culture.

Measuring our Organisational Health

Mental Health Australia conducted its third biennial employee satisfaction and engagement survey. The results highlighted Mental Health Australia continues to have a highly engaged workforce. This year the survey had an increased emphasis on psychological health and wellbeing with employee views and concerns being used to inform planning, policies and programs for staff.

Work Health and Safety

Mental Health Australia had an excellent result this year with no lost time injuries or workers compensation claims.

The prevention and management of aggression and violence in the workplace was a key safety initiative implemented during the year. A new policy and trauma-informed checklist for events was introduced. Online training was also undertaken by staff to develop their skills and capabilities to employ the right thinking and behaviours aimed at de-escalation when dealing with occupational threats and aggression.

Mentally Healthy Workplace Initiatives

Mental Health Australia has continued its strong focus on health and wellbeing and engaged an external consultant to undertake a detailed psychological review of our workplace, with a particular focus on how we can better prevent the risk of psychological harm.

Under our corporate health program, 'Health in Mind', employees undertook activities to enhance their physical and mental wellbeing. These included preventative health measures such as influenza vaccinations, corporate subsidy for individual health and fitness activities, and workstation assessments. Mental Health First Aid and First Aid training was also conducted, and employees participated in events arranged on national health observance days. Mental Health Australia's Employee Assistance Program continued to be available and promoted to all employees and their immediate families.

Finance, Audit and Risk Management Report

The audited financial statements for Mental Health Australia Limited for the year ended 30 June 2019 have been finalised and are available for download at www.mhaustralia.org.

At the Annual General Meeting in 2018, members endorsed the appointment of RSM Australia as the Auditors of Mental Health Australia. This is the third year RSM Australia have conducted the audit.

The financial statements to 30 June 2019 were prepared in accordance with Division 60 of the Australian Charities and Not-for-profits Commission Act 2012, the Corporations Act 2001 and the Australian Accounting Standards – Reduced Disclosure Requirements. The Auditor's independent report states the financial statements gives a "true and fair view" of the company's financial position and performance during the financial year and complies with Australian Accounting Standards.

Mental Health Australia is in a strong financial position. During this financial year, we secured an increase to our core Commonwealth grant. This now better reflects the level of work and resourcing needed for the significant work we have been pursuing, and will continue to pursue, towards better outcomes and quality mental health services and supports for consumers and carers across Australia. This includes our work on the National Disability Insurance Scheme and with Primary Health Networks.

Mental Health Australia's operations for the financial year resulted in a surplus of \$439,769 (2018: loss of \$13,983). We had budgeted for a surplus of \$113,519 in 2018/19. The major reason for this stronger result was timing of receipt of the additional core grant funds referred to above. These funds were received from the Australian Government Department of Health very late in the financial year, impacting positively on the surplus result.

Total operating revenue was \$4,276,977 (2018: \$3,478,270) and total operating expenditure was \$3,837,208 (2018: \$3,492,253).

As at 30 June 2019, Total Assets of Mental Health Australia Limited were \$4,274,589 (2018: \$3,649,882) and Total Liabilities were \$2,142,009 (2018: \$1,957,071). Total Equity was \$2,132,580 in 2019 (2018: \$1,692,811), represented by Working Capital of \$2,235,346 (2018: \$1,653,952), Property, Plant and Equipment of \$42,683 (2018: \$76,044), and Non-Current Liabilities (provision for employee entitlements) of \$145,449 (2018: \$37,185).

In this financial year, operating and project grants received of \$3,565,532 (2018: \$2,826,097) represented 83% (2018: 81%) of the total revenue received. These funds were received from

the Australian Government Department of Health; the Australian Government Department of Social Services; the National Mental Health Commission; and state and territory governments supporting the NMHCCF to undertake its activities. These funds were expended to achieve the outcomes required in the various contracts.

In the course of the year, and in the interests of our staff and the broader national peak not-for-profit sector, Mental Health Australia sought judicial review of a decision made by the ACT Long Service Leave Authority (the Authority) regarding whether Mental Health Australia was required to be registered under the Long Service Leave (Portable Schemes) Act 2009 (ACT) (the Act).

In July 2019, Justice Verity McWilliam handed down her ruling in favour of Mental Health Australia on all matters, most materially:

- » Mental Health Australia was denied procedural fairness in relation to the Authority's decision-making processes.
- » The Authority had misconstrued the Act and Mental Health Australia did not fall within the definition of an employer for the community sector industry within the meaning of the Act.

Mental Health Australia is in the process of pursuing the legal costs it was awarded by the Court, and finalising the refund of contributions paid to date.

When Mental Health Australia is in good financial health it makes us better able to advocate for and support our members. The Finance, Audit & Risk Management Committee commend the financial result and recommend the financial statements to the Mental Health Australia Limited members.

Georgie Harman

Chairperson, Finance, Audit and Risk Management Committee

Concise Financial Statements

Mental Health Australia Ltd

ABN 57 600 066 635

Concise Financial Statements For the year ended 30 June 2019



RSM Australia Partners

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AUDITOR'S INDEPENDENCE DECLARATION

As lead auditor for the audit of the financial report of Mental Health Australia Limited for the year ended 30 June 2019, I declare that, to the best of my knowledge and belief, there have been no contraventions of:

- the auditor independence requirements of the Charities and Not-for-profits Commission Act 2012 in relation to the audit; and
- any applicable code of professional conduct in relation to the audit.

RSM Australia Partners

Ged Stenhouse Partner

Dated: 23 September 2019

Canberra, Australian Capital Territory

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Mental Health Australia Ltd Concise Statement of profit or loss and other comprehensive income For the year ended 30 June 2019

	2019	2018
	\$	\$
Revenue	4,276,977	3,478,270
Expenses		
Travel	(106,762)	(149,150)
Other expenditure	(128,209)	(69,199)
Meeting costs	(178,614)	(146,673)
Sitting fees	(95,665)	(79,322)
Marketing and fundraising	(127,970)	(100,208)
Employee costs	(2,115,056)	(1,989,748)
Office and administration costs	(497,109)	(432,076)
Consultancy and accounting expenditure	(475,060)	(472,505)
Depreciation	(112,763)	(53,372)
	(3,837,208)	(3,492,253)
Total Comprehensive (loss) income for the Year	439,769	(13,983)

Mental Health Australia Concise Statement of financial position As at 30 June 2019

	2019	2018
	\$	\$
Assets		
Current assets		
Cash and cash equivalents	1,959,110	2,365,628
Trade and other receivables	159,462	101,480
Other financial assets	2,061,387	1,061,387
Other assets	51,947	45,343
Total current assets	4,231,906	3,573,838
Non-current assets		
Property, plant and equipment	42,683	76,044
Total non-current assets	42,683	76,044
Total assets	4,274,589	3,649,882
Liabilities		
Current liabilities		
Trade and other payables	1,749,174	1,578,506
Current tax liabilities	1,551	113,614
Provisions	245,835	227,766
Total current liabilities	1,996,560	1,919,886
Non-current liabilities		
Provisions	145,449	37,185
Total non-current liabilities	145,449	37,185
Total liabilities	2,142,009	1,957,071
Net assets	2,132,580	1,692,811
Equity		
Retained earnings	2,132,580	1,692,811
Total equity	2,132,580	1,692,811

Mental Health Australia Ltd Statement of changes in equity For the year ended 30 June 2019

	Retained surpluses	Total equity
	\$	S
Balance at 1 July 2017	1,706,794	1,706,794
Loss attributable to members of the entity	(13,983)	(13,983)
Balance at 30 June 2018	1,692,811	1,692,811
Balance at 1 July 2018	1,692,811	1,692,811
Surplus attributable to members of the entity	439,769	439,769
Balance at 30 June 2019	2,132,580	2,132,580

Mental Health Australia Ltd Concise Statement of cash flows For the year ended 30 June 2019

	2019	2018
	\$	\$
Cash flows from operating activities		
Receipts from customers	4,526,306	3,696,271
Payments to suppliers and employees	(3,929,832)	(2,458,029)
Interest received	76,410	46,002
Net cash provided by (used in) operating activities	672,884	1,284,244
Cash flows from investing activities		
Purchase of property, plant and equipment	(79,402)	(5,927)
Payments for investments	(1,000,000)	_
Net cash used in investing activities	(1,079,402)	(5,927)
Net increase (decrease) in cash and cash equivalents	(406,518)	1,278,317
Cash and cash equivalents at the beginning of the financial year	2,365,628	1,087,311
Cash and cash equivalents at the end of the financial year	1,959,110	2,365,628

The above statements should be read in conjunction with the accompanying notes

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Mental Health Australia Ltd Notes to the financial statements For the year ended 30 June 2018

NOTE 1. Basis of Preparation of the Concise Financial Report

The concise financial report of Mental Health Australia Ltd (the Company) is an extract from the full financial report for the year ended 30 June 2019. The concise financial report has been prepared in accordance with Accounting Standards AASB 1039: Concise Financial Reports, and the Australian Charities and Not-for-profit Commission Act 2012 (Cth).

The financial statements, specific disclosures and other information included in the concise financial report are derived from, and are consistent with, the full financial report of the Company. The concise financial report cannot be expected to provide as detailed an understanding of the financial performance, financial position and financing and investing activities of the Company as the full financial report. A copy of the full financial report and auditor's report is available from the Mental Health Australia website.

The presentation currency used in this concise financial report is Australian dollars.

NOTE 2. Discussion and analysis of the financial statement

This discussion and analysis is provided to assist Members in understanding the concise financial report. The discussion and analysis is based on the company's financial statements and information contained in the concise financial report. This information has been derived from the full financial report of Mental Health Australia Limited. Mental Health Australia strengthened its financial position allowing the Company to continue to maintain its staffing profile and meet its strategic objectives. Additional core grant funds were received very late in the financial year, impacting on the surplus result.

Statement of comprehensive income

The company's operations for the year to 30 June 2019 resulted in a surplus of \$439,769 (2018: loss of \$13,983). From a strong financial base (see below), Mental Health Australia strengthened its financial position allowing the Company to continue to maintain its staffing profile and meet its strategic objectives.

Overall total income for the year was \$4,276,977 (2018: \$3,478,270). Key grants included funding for the national multicultural mental health project, a multi-partner-funded project and Department of Social Services-funded projects relating to the NDIS, as well as additional core funding to support our work on the NDIS and with PHNs. Rental Income and Other Income increased to \$530,818 (2018: \$504,875).

Total expenses for the year were \$3,837,208 (2018: \$3,492,253). The largest increases included: Employee Costs of \$2,115,056 (2018: \$1,989,748); and Meeting Costs of \$178,614 (2018: \$146,673), which reflected the multicultural mental health project that had a number of external workshops and associated costs.

Statement of financial position

Total assets increased to \$4,274,589 in 2019 (2018: \$3,649,882). Cash and Cash Equivalents increased this financial year largely reflecting government grant funding received towards the end of the financial year, which was unable to be fully expended by 30 June 2019 and has been recognised in retained earnings.

Total liabilities increased to \$2,142,009 in 2019 (2018: \$1,957,071). As at 30 June 2019, Mental Health Australia Net Assets were \$2,132,580. Subsequent to year end, all funds previously paid into the ACT Long Service Leave Scheme less any drawdowns were returned to the entity.

Statement of changes in equity

The Total Equity increased \$439,769 to \$2,132,580 in 2019 (2018: \$1,692,811), being the addition of the net surplus for the year.

Statement of Cash Flows

Cash flows indicate a net increase in Cash and Cash Equivalents. An increase in cash flows from operating activities occurred primarily through the increases in grant funding outlined above, particularly for those grants that were received very late in the financial year.

Ms Robyn Kruk, Director

Ms Georgina Harman, Director

Dated: 18 September 2019



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TO THE MEMBERS OF MENTAL HEALTH AUSTRALIA LIMITED

INDEPENDENT AUDITOR'S REPORT ON THE CONCISE FINANCIAL REPORT

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We have audited the Concise Financial Report of Mental Health Australia Limited, which comprises the Statement of Financial Position as at 30 June 2019, the Statement of Profit and Loss and other Comprehensive Income, Statement of Changes in Equity, Statement of Cash Flows for the year then ended, and related notes, derived from the audited financial report of Mental Health Australia Limited (the Company), for the year ended 30 June 2019.

In our opinion, the accompanying Concise Financial Report complies with Accounting Standard AASB 1039 Concise Financial Reports and Australian Charities and Not-for-profits Commission Act 2012.

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities section of our report. We are independent of the Company in accordance with the auditor independence requirements of the Australian Charities and Not-for-profits Commission Act 2012 and the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 Code of Ethics for Professional Accountants (the Code) that are relevant to our audit of the concise financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Concise Financial Report

The Concise Financial Report does not contain all the disclosures required by the Australian Accounting Standards. Reading the Concise Financial Report and the auditor's report thereon, therefore, is not a substitute for reading the audited financial report and the auditor's report thereon. The Concise Financial Report and the audited financial report do not reflect the effects of events that occurred subsequent to the date of our report on the audited financial report.

The Audited Financial Report and Our Report Thereon

We expressed an unmodified audit opinion on the audited financial report in our report dated 23 September 2019.

Responsibilities of the Directors for the Concise Financial Report

The Directors of the Company are responsible for the preparation of the concise financial report in accordance with Accounting Standard AASB 1039 Concise Financial Reports, and the Australian Charities and Not-for-profits Commission Act 2012, and for such internal control as management determines is necessary to enable the preparation of the Concise Financial Report.

The Directors are responsible for overseeing the Company's financial reporting process.

Auditor's Responsibility

Our responsibility is to express an opinion on whether the Concise Financial Report, complies in all material respects, with AASB 1039 Concise Financial Reports based on our procedures, which were conducted in accordance with Auditing Standard ASA 810 Engagements to Report on Summary Financial Statements.

RSM Australia Partners

Ged Stenhouse Partner

Canberra, Australian Capital Territory Dated: 23 September 2019

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Melinda Brown

Untitled, 2015, Oil on Canvas

Mental Health Australia acknowledges Aboriginal and Torres Strait Islander peoples and communities as the traditional custodians of the land we work on and pay our respects to elders past, present and emerging. Mental Health Australia is committed to reconciliation in Australia through day-to-day work and our Reflect Reconciliation Action Plan (RAP).





As an inclusive organisation we also celebrate people of all backgrounds, genders, sexualities, cultures, bodies and abilities.



Mental Health Australia also acknowledges the continuous advocacy efforts and co-design by mental health consumers and carers, past and present.

