

ANNUAL REPORT 2020-21

Mental Health Australia is the independent peak body representing the full spectrum of mental health stakeholders and issues. This provides Mental Health Australia with a unique capacity to bring everyone to the table and create unifying opportunities. Mental Health Australia members include organisations representing people with experience of living with a mental illness or caring for someone with a mental illness, special needs groups, clinical service providers, professional bodies, public and private mental health service providers, researchers and state/territory community mental health peak bodies.

Find out more at mhaustralia.org



Mental Health Australia



Mental Health Australia acknowledges Aboriginal and/or 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 Reconciliation Action Plan.



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Ms Robyn Kruk AO
Board Appointed Director,
Mental Health Australia

From the Chair

Having endured a global pandemic for the entirety of 2020-21 that has tested every part of mental health ecosystem, our vision for mentally healthy people and mentally healthy communities has never been more important.

The pandemic has introduced pressures in our communities we could never have planned for, nor imagined. It has seen increased pressures on an already under pressure mental health system and workforce. It has stretched our advocacy efforts wide and far, and impacted on our ability to connect properly and engage in conversations and consultations on lasting reform.

It has been difficult for many, and most importantly, dealing with COVID-19 on an individual basis has added to the existing pressures on those with lived experience. Those who have needed to find care in these difficult times, and those whose voice and

contribution to co-design we value so much.

In acknowledging those with lived experience, we should also acknowledge that governments, including the health departments, have also been under pressure. We want to make particular acknowledgement of the member organisations of Mental Health Australia. They have responded to the challenges with active collaboration and early action despite operational challenges and ever increasing demands on services as the impact of the pandemic has taken hold.

Primarily focused on the physical health of our communities and rolling out vaccine programs, they have all had to respond on many fronts, including the immediate mental health needs, at a local and national level. And they have done so with record investments in mental health service delivery and programs at a national level, and bespoke state and territory-based investments aimed at helping people through and beyond the pandemic.

At Mental Health Australia we advocate at a system-level, supported by the voices of our 120 member organisations (as of 30 June), and the wider 1200 organisations they represent. We have welcomed these investments and the increased interest in the mental health of all Australians.

We have also welcomed the opportunities to keep improving our system by adopting a new strategic focus on the leadership and voices of those with lived experience, targeting the social determinants of mental health, and delivering value to members and the wider sector through collaboration, partnerships and drawing together expertise.

Delivering on this new strategic focus will be our aim for the next three years, coupled with continuing to advocate for and maximising key opportunities for implementing lasting reform such as the Productivity Commission Inquiry into Mental Health, the Royal Commission into Victoria's Mental Health System and the impending National Agreement for Mental Health and Suicide Prevention.

To my fellow Board members, thank you for your ongoing support, acumen, collaboration and commitment to constantly looking for ways to improve our mental health ecosystem. To our CEO Dr Leanne Beagley and all the staff, thank you for continuing to deliver the many programs, policy submissions and projects that add value to our members and our community. Knowing that we have continued to advocate and work towards a better mental health system for all during the most challenging of periods is testament in itself to the ongoing work and value of Mental Health Australia and the wider system we work with.



Dr Leanne Beagley
CEO,
Mental Health Australia

From the CEO

It has been a great privilege to work with our Board to lead our organisation through change and into a new era, built as it is on years of strong system advocacy at a national level. We've experienced change driven by the new strategic directions drawn from our valued membership base, change in the context within which we live and work, and change in our staff team.

The challenges that lie ahead will take shared commitment as we move forward from the pandemic response into recovery and rebuilding whilst supporting reform and innovation in a system that most desperately needs it.

As you will see from the report that follows, our policy and advocacy work has gathered strength and momentum through "policy hubs" with members and we have delivered a number of detailed formal submissions to inquiries throughout the year.

Despite moving activities online for our World Mental Health Day work we reached thousands of people through partnerships and a communication blitz. Our Embrace Multicultural Mental Health project has been funded for a further 4 years based on the important leadership provided – and still needed.

We have broadened our research partnerships and delivered projects in collaboration with The National Disability Insurance Agency, Carers Australia, Mind Australia and the Australian Housing and Urban Research Institute (AHURI), and the Digital Health Agency. We are encouraged by our work with state peaks to jointly advocate to states and territories and look forward to building on this foundation. We look forward to fruitful outcomes of our shared advocacy with the Consumer Health Forum and the Royal Australian College of General Practitioners in relation to the development of an Australian social prescribing model. I particularly draw your attention to the report from the lived experience leaders of the National Mental Health Consumer and Carer Forum and the National Register, and I thank them for sharing their wisdom and strength.

Internally we have restructured our people and financial resources to align more strongly with the strategic directions set by the Board. Mental Health Australia is in a strong financial position. Further, it is a pleasure to report on another unmodified audit result for Mental Health Australia. The audited financial statements for Mental Health Australia Limited for the year ended 30 June 2021 have been finalised and are available for download on our website.

On behalf of our team I would like to thank the Board for their leadership and encouragement. It is an honour to work with them, and with our staff team whose commitment each day is valued. Speaking of valued, this year we have farewelled Melanie Cantwell who provided strong and thoughtful leadership for more than 13 years at Mental Health Australia.

At the heart of our endeavour in the mental health ecosystem is relationships. At Mental Health Australia we value the relationships with members, partners, funders and stakeholders and we thank you for your great work and your support this year.

We are looking forward to working with you through the challenges and opportunities ahead.



ABOUT THE ARTWORK

Untitled by Melinda Brown, 2015 – Melinda Brown is a Ngunnawal woman who has worked as a counsellor, cultural trainer, artist and published author.

The Flannel Flower, an Australian native, has been chosen as the national symbol to promote mental health awareness in Australia.

The Australian bush has an inherent beauty and strength. It is also known for its extremes of weather and landscape. Varieties of the Flannel Flower are commonly found growing wild in the bush throughout Australia. The Flannel Flower, as with all native Australian plants, needs to be adaptable and enduring in order to survive.

In the same way all of us, regardless of our life circumstances, develop resilience and the ability to adapt to change, in order to maintain good mental health.

Being open and empathetic to a person's expression of distress can assist in the recovery of a person living with mental illness and change the negative attitudes of our society as a whole.

The artist describes the flannel flower in this work as being "furnished with rays" to represent hope.

STRATEGIC PLAN 2021-24

OUR VISION - mentally healthy people, mentally healthy communities

OUR MISSION - to create the best mental health system in the world, characterised by:

- Recovery.
- Accessibility, effectiveness, and efficiency.
- Person-led participation by consumers and carers.
- Policies, services, and programs that work seamlessly together.
- Mental health promotion, prevention, and early intervention.



OUR STRATEGIC PRIORITIES for 2021-2024 are to:

- Promote a national voice for those with lived experience of mental illness and for those who love and care for them.
- Highlight the social determinants for mental ill health and advocate for lasting changes across the whole ecosystem.
- Deliver value to our members and the wider mental health ecosystem.



At Mental Health Australia we aim to promote a national voice for mental health consumers and carers.

We will do this because:

- It is what people with lived experience want.
- It is the best way to get the system we need - a truly person-led system.
- It will support the effectiveness of the voice of those with lived experience.

We will do this by:

- Building a shared agenda and a collaborative approach.
- Partnering with our members to highlight innovation, influence, and leadership, of those with lived experience.



At Mental Health Australia we will highlight the social determinants for mental ill health and advocate for real and systemic change.

We will do this because:

- It is time to address these systemic issues.
- It is time to acknowledge that mental health reform is broad and means looking beyond the health system.

We will do this by:

- Prioritising our policy focus on specific social determinants, based on member feedback.
- Establishing new partnerships across government and with related sectors to move the leadership and action beyond health.
- Being the 'go to' respected voice on behalf of the mental health system for the related sectors.



OUR MEMBERS AND THE MENTAL HEALTH ECOSYSTEM



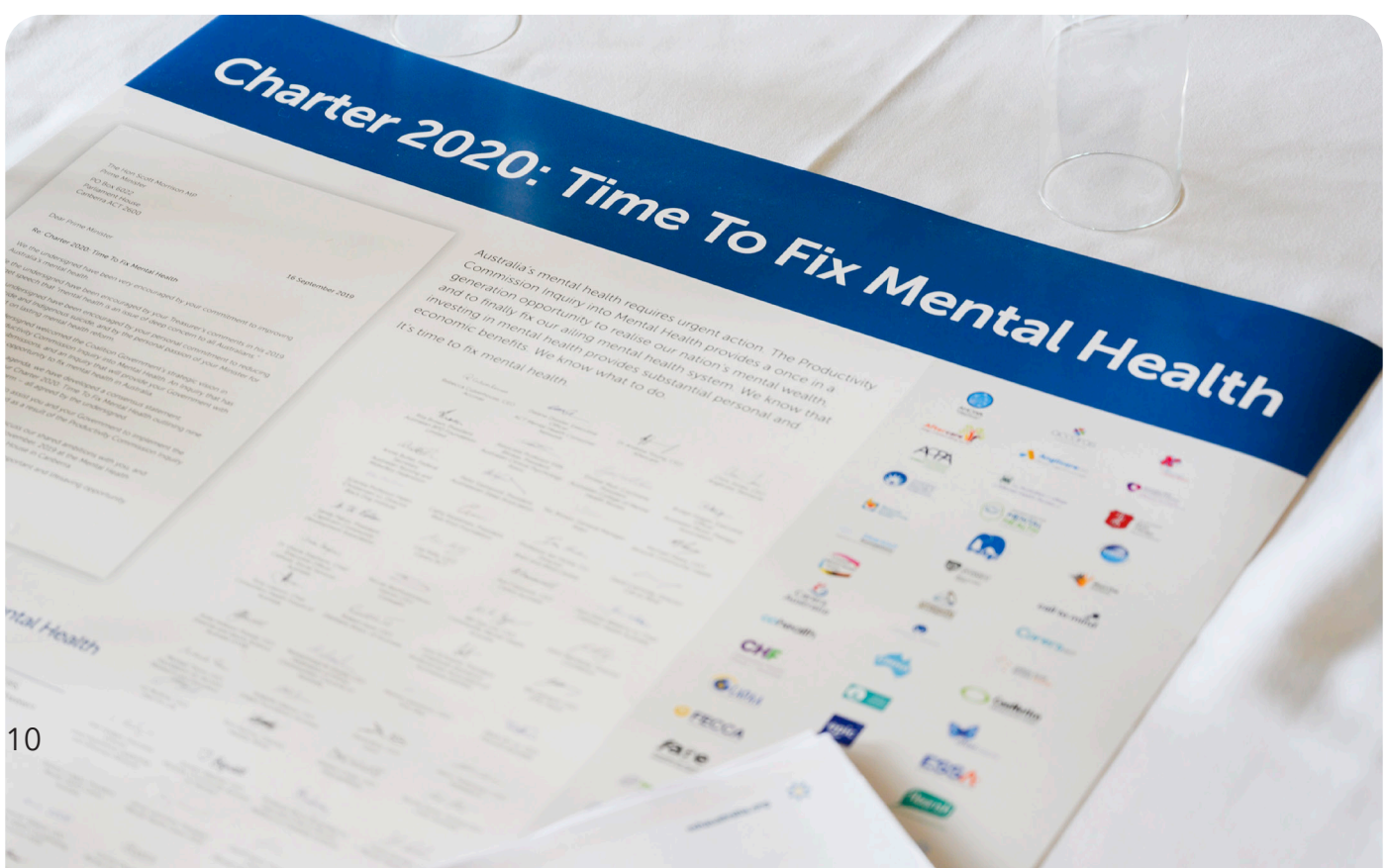
At Mental Health Australia we will deliver value to our members and the wider mental health ecosystem.

We will do this because:

- It is what members want and it's what we are here for.
- The service system must improve. Working with members and advocating with, and for them, means such improvement is at the heart of our work.

We will do this by:

- Understanding our members better.
- Collaboration and highlighting best practice.
- Forming partnerships across the mental health system.



OUR PEOPLE

Board Directors

Mental Health Australia is governed by a Board of up to ten Directors. Our Constitution requires that the Board consist of at least three and up to eight Elected Directors, and up to two Board Appointed Directors. Board Directors for 2020-21 were:

Name	Position
Robyn Kruk AO	Board Appointed Director, Interim Chair
Georgina Harman	Elected Director, Interim Deputy Chair
Cathy Andronis	Elected Director (from 10 December 2020)
Jennifer Bowers	Elected Director (to 10 December 2020)
Jeremy Coggin	Elected Director
Ashley de Silva	Elected Director
Heath Fereday	Elected Director (from 10 December 2020)
Joseph Hooper	Elected Director (from 10 December 2020)
Kym Jenkins	Elected Director (to 10 December 2020)
Janne McMahon OAM	Elected Director (to 18 September 2020)
Mark Orr AM	Elected Director (from 13 July 2020)
Carmel Tebbutt	Elected Director



Our 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, multicultural mental health, and management, planning, communications and event management and administration. Staff as at 30 June 2021 were:

Name	Position
Leanne Beagley	Chief Executive Officer
Zelma Boggis	Director, Corporate Services
Harry Lovelock	Director, Policy and Research
Lachlan Searle	Director, External Relations
JulieAnne Anderson	Interim Lead - Lived Experience Programs
Kylie Bartlett	Senior Corporate Services and Finance Officer
Danica Browne	Lived Experience Programs Officer
Amy Byrne	Corporate Services Officer
Emma Coughlan	Senior Policy and Research Officer
Ruth Das	Embrace Project Manager
Ingrid Hatfield	Senior Policy and Research Officer
Nikki Hogan	Partnerships Manager
Candice Jones	Manager Lived Experience Programs
Kathryn Sequoia	Corporate Governance Advisor
Katherine Shoemark	Policy and Research Officer
Erin Stewart	Communications Officer
Felicity Wilkins	Team Support/ Events Coordinator
Delia Witney	Human Resources Manager

OUR POLICY SUBMISSIONS

Mental Health Australia made submissions to a range of inquiries throughout 2020-21, advocating for systemic mental health reform. All submissions can be found via the Mental Health Australia website at mhaustralia.org/resources/submissions

Department of Health consultation on telehealth and mental health

July 2020

Mental Health Australia undertook a consultation regarding experiences of expanded telehealth services during COVID-19 with key mental health stakeholders including professional associations, medical and allied health practitioners and people with lived experience through the National Mental Health Consumer and Carer Forum. Mental Health Australia provided consolidated feedback to the Department of Health to help inform policy considerations in relation to the continuation of telehealth for mental health services in the context of the pandemic.

Royal Commission into Aged Care Quality and Safety public hearing

July 2020

Mental Health Australia CEO Dr Leanne Beagley appeared at a public hearing of the Royal Commission into Aged Care Quality and Safety, and provided advice about ensuring the needs of culturally and linguistically diverse communities are met, social connectedness, trauma informed care, and allied health care professionals who can provide support to older Australians. The advice emphasised the importance of ensuring people in residential aged care have access to the same mental health resources as people in the community and carers are also supported.

Department of Health consultation on the service model for adult mental health centres

August 2020

Mental Health Australia provided a detailed response to the Department of Health's consultation on the service model for adult mental health centres. The submission strongly supported the establishment of services to address the current gap in mental health services for adults experiencing complex mental health needs or crisis, and provision of a safe alternative to attending an Emergency Department for such care. The response also encouraged the development of a clearer framework on how the proposed adult mental health centres would deliver on this vision.

Pre-budget submission 2020-21 - Addendum

August 2020

In February 2020 Mental Health Australia made its original pre-budget submission outlining funding priorities across the mental health sector for the 2020-21 financial year and beyond. Mental Health Australia submitted a pre-budget submission Addendum in August 2020, addressing the impacts of the COVID-19 pandemic. The submission acknowledged the significant investment made by the Australian Government in health (including mental health) and financial support during this pandemic and made recommendations to address the long-term nature of the pandemic and resulting population mental health impacts.

Royal Commission into Violence, Abuse, Neglect and Exploitation of People with a Disability - Employment Issues Paper

September 2020

Mental Health Australia provided a submission in response to the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with a Disability's Employment Issues Paper. The submission explains the complex and bi-directional relationship between mental ill-health and unemployment. It provides a range of recommendations to ensure workplaces are mentally healthy, assist people with psychosocial disability to be appropriately supported to find and keep meaningful work and to ensure policy reflects the needs of people with psychosocial disability.

Department of Health consultation on the National Preventive Health Strategy

September 2020

Mental Health Australia made a submission to the Department of Health's consultation on the development a National Preventive Health Strategy, calling for greater inclusion of mental health. The submission argued that given the high impact of mental ill-health in Australia, the importance of prevention for reducing this impact, the inherent interconnectedness of mental and physical health, and the need to integrate mental and physical health responses, further consideration should be given to mental health in development of the National Preventive Health Strategy.

Attorney-General's Department consultation on the National Commissioner for Defence and Veteran Suicide Prevention Bills

October 2020

Mental Health Australia and Suicide Prevention Australia provided a joint submission to the Attorney-General's Department consultation on the legislation to establish a National Commissioner for Defence and Veteran Suicide Prevention. The submission supports the legislation as it sets in place a unique structure to drive accountability, transparency and systemic change to prevent suicide among serving Australia Defence Force members and veterans. The submission identifies areas of the Commissioner's role which could be strengthened, including: working with other national and jurisdictional bodies to improve data collection, prioritising strategies to mitigate the challenges veterans face in transition to civilian life, and ensuring anyone bereaved by suicide has access to postvention support.

Senate Standing Committee on Foreign Affairs and Trade Inquiry into National Commissioner for Defence and Veteran Suicide Prevention Legislation

October 2020

Mental Health Australia and Suicide Prevention Australia made a joint submission to the Senate Standing Committee on Foreign Affairs and Trade Inquiry into the National Commissioner for Defence and Veteran Suicide Prevention Legislation. The submission strongly supports the objectives of the legislation, and outlines a number of ways in which it could be strengthened in relation to: data collection, supporting a whole-of-life wellbeing approach, focusing on transition from the defence force to civilian life as a particularly vulnerable time, connecting people who are bereaved with postvention support and supporting a whole of government approach.

2020-21 Federal Budget Summary and Federal Budget Analysis

October 2020

Mental Health Australia provided a Federal Budget Summary and Analysis to members following the 2020-21 Federal Budget. The Summary and Analysis welcomed the investment in the Federal Government 2020 Budget through mental health-specific measures and further investments across the social determinants of mental health.

Department of Social Services consultation on the National Disability Strategy: Beyond 2020

October 2020

Mental Health Australia made a submission to the Department of Social Services consultation on the new National Disability Strategy. The submission makes a broad range of recommendations focussing on strengthening the voices of people with lived experience of psychosocial disability and their carers in national policy design, implementation, monitoring, and evaluation, and strengthening the strategy to ensure it is in line with the United Nations Convention on the Rights of Persons with Disabilities. It also makes recommendations to improve whole of government collaboration and improve the workforce response for people with psychosocial disability.

2021-22 Pre-Budget submission

January 2021

Mental Health Australia's 2021-22 pre-budget submission called for government action on mental health in response to the release of the Productivity Commission's Inquiry into Mental Health Final Report through:

- An implementation plan for the recommendations of the Productivity Commission Inquiry into Mental Health, informed by the mental health sector, which includes all of the Commission's recommendations and any gaps identified through the Department of Health consultation.
- An accompanying budgetary plan that includes Australian, state and territory governments' commitments to fund the Productivity Commission's recommendations over a number of funding cycles.
- An immediate investment in the 2021 Commonwealth budget to fund immediately implementable recommendations from the Productivity Commission, and ensure continuity of funding for the psychosocial service sector.

It also outlined 12 specific budget proposals addressing both systemic structural issues and specific service needs.

Department of Health consultation on the implementation of Productivity Commission Inquiry into Mental Health Final Report recommendations

February 2021

Mental Health Australia provided a submission to the Department of Health's consultation on the final recommendations of the Productivity Commission Inquiry into Mental Health. The submission supports the Productivity Commission's recommendations for priority and longer-term implementation based on its extensive consultations and economic analysis. The submission reinforced the three key priorities for implementation of the PC's recommendations outlined in Mental Health Australia's pre-budget submission regarding an implementation plan, budgetary plan and swift investment in immediately implementable recommendations.

National Mental Health Commission Draft National Children's Mental and Wellbeing Strategy

February 2021

Mental Health Australia provided a submission on the content of the draft National Children's Mental Health and Wellbeing Strategy, developed by the National Mental Health Commission (NMHC). The submission outlines a range of recommendations designed to strengthen the Strategy Actions to meet the current and future challenges of Australian children's mental health and wellbeing. These recommendations will assist the NMHC to design a strategy that influences governments to build the mental health system Australian children need: a comprehensive system of child and family supports, spanning the continuum from prevention and early intervention through to crisis responses and therapeutic interventions for those with established serious conditions.

Select Committee on Mental Health and Suicide Prevention - submission

March 2021

Mental Health Australia made a submission to the Select Committee on Mental Health and Suicide Prevention. The submission reinforced the three key priorities for implementation of the Productivity Commission Inquiry into Mental Health recommendations, as outlined in Mental Health Australia's pre-budget submission regarding an implementation plan, budgetary plan and swift investment in immediately implementable recommendations.

Joint Standing Committee on NDIS Inquiry into Independent Assessments

March 2021

Mental Health Australia, Community Mental Health Australia and the Mental Illness Fellowship of Australia provided a joint submission to the Joint Standing Committee on NDIS Inquiry into Independent Assessments. This submission reinforced the key recommendations from a position statement Mental Health Australia developed with Members in November 2020. The submission makes an offer to collaborate with the NDIA to build flexibility into the assessment process for people with psychosocial disability who will not benefit from Independent Assessments.

Department of Health consultation on the draft National Preventive Health Strategy 2021-2030

April 2021

Mental Health Australia provided a submission to the Department of Health's consultation on the draft National Preventive Health Strategy 2021-2030. The submission welcomes the inclusion of a new focus area on protecting mental health in the draft strategy. It suggests the Strategy be strengthened through inclusion of targets regarding prevention of mental ill-health.

Department of Veteran's Affairs consultation on the Terms of Reference for a Royal Commission into Defence and Veteran Suicide

May 2021

Mental Health Australia provided a response to the Department of Veteran's Affairs consultation regarding the Terms of Reference for a Royal Commission into Defence and Veteran Suicide. The submission supports the Department's proposed themes, and further called for a focus on the transition from military to civilian life, the experience of defence personnel and veterans in making claims and accessing government services, and stigma regarding mental ill-health and help-seeking. The submission strongly argued that people with lived experience should be represented at every stage and level of decision making in the Royal Commission's inquiry, and that from the outset the inquiry must be conducted with a trauma-informed approach.

2021 Federal Budget Summary and Analysis

May 2021

Mental Health Australia provided members with a Federal Budget Summary in response to the 2021 Federal Budget. The summary welcomed the Government's \$2.3 billion down payment on its response to the recommendations made by the Productivity Commission's Inquiry into Mental Health and the National Suicide Prevention Adviser's Final Advice. It also acknowledged the Government's support in full, in principle or in part of the Productivity Commission Inquiry into Mental Health. The summary provided a short analysis of the mental health related measures announced as a part of the 2021 Federal Budget.



OUR ADVOCACY AND PROJECTS



embrace

multicultural mental health

Embrace Multicultural Mental Health

Embrace Multicultural Mental Health (the Embrace Project) provides a national focus on mental health and suicide prevention for people from culturally and linguistically diverse (CALD) backgrounds. It works towards an equitable mental health system which reflects and responds well to the needs of Australia's multicultural population.

Key objectives of the Embrace Project:

- Increase participation of consumers and carers from CALD backgrounds in mental health services
- Improve outcomes for CALD mental health consumers, carers and their families
- Increase mental health awareness, knowledge and capacity in CALD communities
- Improve cultural responsiveness and diversity of the mental health workforce.

Over the past year, the Embrace Project team has engaged with Alliance partners—the Federation of Ethnic Communities' Councils of Australia (FECCA) and the National Ethnic Disability Alliance (NEDA), the CALD Mental Health Consumer and Carer Group, and the Stakeholder Group to deliver project activities. These activities included:

- Framework workshops in Sydney, Melbourne, and Brisbane
- Webinars on the Framework for Mental Health in Multicultural Australia
- Webinars for CALD community leaders
- Updating all Embrace multilingual factsheets
- Developing a radio campaign through SBS.

The past year has focussed on promoting the Framework to increase cultural responsiveness of mental health services. Workshops on the Framework have been held in all states and territories across Australia. Targeted at PHNs and mental health services, the workshops raise awareness and encourage services to implement the Framework. The Embrace Project also ran a series of webinars on the Framework, providing an in-depth look into each service module which are available on the Embrace website. More than 1,200 people have signed up to implement the Framework, across some 300 organisations, which continues to provide a comprehensive and evidence based method to support culturally responsive services.

The Embrace Project has also actively pursued individual engagement with all 31 Primary Health Networks with around one third being actively involved, including undertaking Framework activity. This has included promoting an Expression of Interest process for PHN's to receive intensive, direct support with the Framework implementation, highlighting a number of best practice approaches in different parts of Australia.

The three year funding cycle came to an end in June 2021 and an independent review of the Project was sought from Stakeholders. This review found:

- The Embrace Project was determined as being most successful in achieving its objective for the improvement of cultural responsiveness and diversity of the mental health workforce.
- The development of the Framework is considered as being one of the most significant achievements of the Embrace Project. Stakeholders stated that the Framework was an accessible tool that could be promoted to all service providers.
- The Embrace Project's website was regarded as an instrumental platform in providing adequate resources and information to people from CALD backgrounds.
- Stakeholders felt there has been an increase in mental health awareness, knowledge, and capacity in CALD communities.

The impact of the COVID-19 pandemic meant that plans to visit and deliver workshops in states and territories were transferred to online forums. The Embrace Project also provided support to CALD communities during this time through a series of videos developed by our CALD Consumer and Carer Group, and distributing multilingual information.

In May 2021, as part of the Budget Measure Prioritising Mental Health, Pillar 4: Strengthening vulnerable communities, the Government announced \$ 5.1 million for Mental Health Australia to continue to promote mental health in CALD communities over the next four years.

We are excited to build on the strong foundations the Embrace Project has achieved to date, and to further reach out to CALD communities to promote mental health literacy, whilst supporting mental health services to deliver effective, culturally responsive care.



Supporting wellbeing of carers of people with mental illness during COVID-19



Mental Health Australia partnered with Carers Australia and Mental Health Carers Australia in September 2020 to deliver this Australian Government funded project. Recognising the additional stresses the pandemic has brought for people caring for people with mental ill-health, this project aimed to support carers with additional resources and methods to look after their own mental health and wellbeing.

Working closely with a Carers Advisory Group and Carers Australia project team, Mental Health Australia managed the delivery of this project, with key activities including a social media campaign, access to the Personal Wellbeing Index self-assessment tool, delivery of free online mindfulness courses with content tailored for carers and six podcast episodes sharing peoples' experiences of caring through COVID. This project was received positively by carers across the country, and will continue to provide resources.



Advice to governments on the national agreement for mental health and suicide prevention

Mental Health Australia welcomed the Australian Government's announcement that it will develop a national mental health and suicide prevention agreement with state and territory governments. Mental Health Australia has consistently advocated for such an agreement, to clarify responsibility and accountability for delivery of mental health services. However governments are developing the agreement without public consultation with the mental health sector, and as such Mental Health Australia has undertaken to consult with the sector to develop 'Advice to governments' to inform the agreement.

Australian Digital Health Agency



In 2020-21 Mental Health Australia worked with the Australian Digital Health Agency (ADHA) to enhance its engagement with mental health consumers and carers across several of the Agency's key projects including, My Health Record, digital health in residential aged care, electronic prescriptions and active script lists.

As a part of this project, Mental Health Australia successfully undertook a robust mental health consumer and carer recruitment process for participation in consultation workshops. Mental Health Australia also provided the Agency with a range of advice in relation to stakeholder management, collaboration with mental health consumers and carers and key issues in relation to its core projects. In addition, Mental Health Australia assisted the agency to communicate about its projects through a presentation at ADHA's My Health Record Symposium on the topic of Progress and Possibilities for My Health Record and via social media and newsletter communications.



NDIS Psychosocial Community Connectors Program

Mental Health Australia partnered with the National Disability Insurance Agency to deliver a component of the National Community Connectors Program, supporting people with psychosocial disability and experience of or risk of homelessness to engage with the NDIS. Mental Health Australia commissioned seven experienced service providers across seven locations to deliver Community Connector services, with 12FTE over 11 months until 30 June 2021. In this short time, the program engaged with over 700 people with psychosocial disability, and supported over 250 people to submit an access request for the NDIS. This program has demonstrated both the need for and effectiveness of active outreach support for people with psychosocial disability facing complex barriers to engage with the NDIS and other services.

World Mental Health Day 2020

Each year, Mental Health Australia receives a grant from the Australian Department of Health to deliver a World Mental Health Day (WMHD) campaign. World Mental Health Day is an internationally recognised day for building awareness and advocacy for issues and opportunities surrounding mental health. It falls each year on 10 October. The purpose of the campaign is to:

- Promote community connection
- Encourage help-seeking
- Redress stigmatising attitudes concerning mental health and illness

The theme for WMHD was “Look after your mental health, Australia”, developed in the context of the COVID-19 pandemic. The pandemic required an adaptive response to mental health promotion because of the increased risk of stress, anxiety, and depression associated with increased uncertainty and insecurity. This response involved launching the campaign earlier in the year (March rather than October) in order to bring key tips and resources when audiences first needed them.

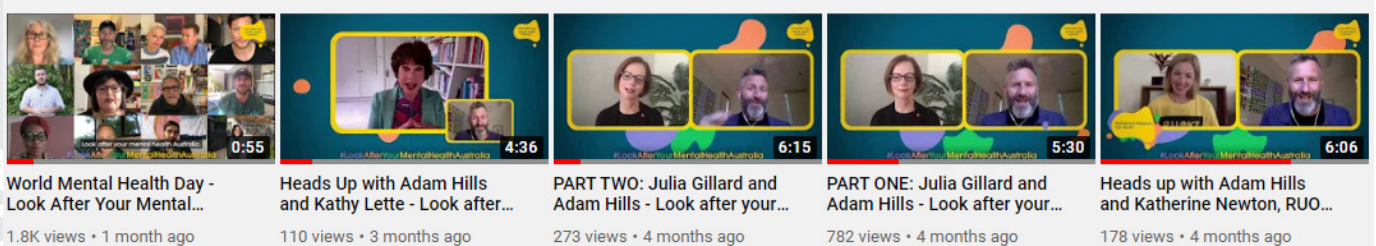


As a first for 2020, the campaign was also adapted to focus more on social media reach as in-person activities were not possible, and collateral such as posters and postcards would be unlikely to be widely seen while there was still restrictions on people congregating in communal spaces such as workplaces and schools.

Alongside our own campaign activities, Mental Health Australia partnered with 66 organisations to bring the message, “Look after your mental health, Australia” to a range of contexts and industries. Partners included member organisations as well as Bunnings, Monash Health, the NRMA, and the AFL.

Campaign highlights for 2020 included:

- Video content. The WMHD campaign produced over 50 videos of individuals speaking about their personal stories and about how they look after their mental health. Talent included celebrities, consumers, carers, and our WMHD partners.

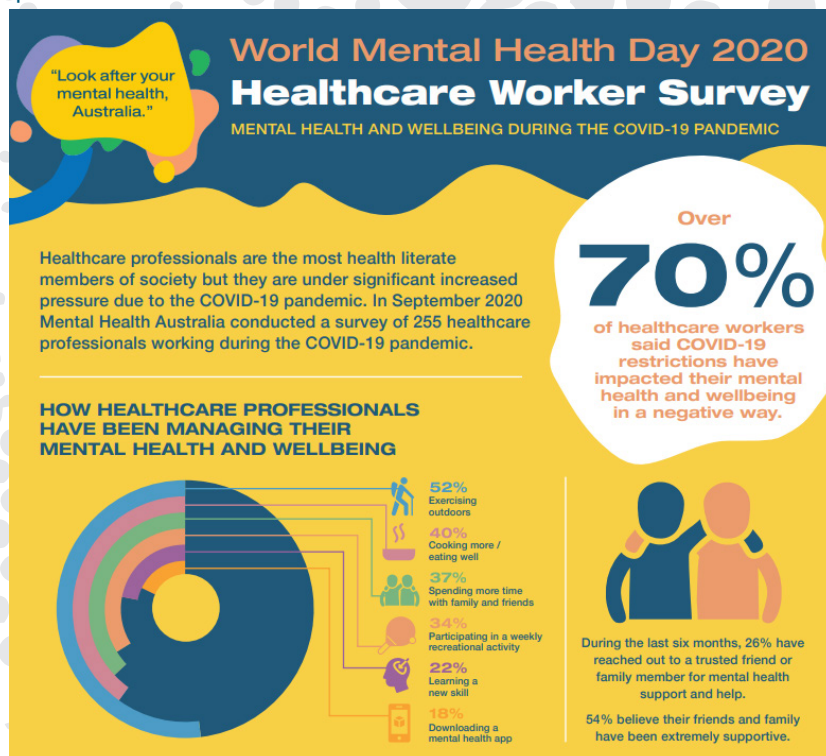


- Branded calendars. Downloadable and printable calendars of the month of October included a daily, practical suggestion about how audiences could look after their mental health. Some partner organisations adapted the calendar to be relevant to their workplaces and/or the population groups they serve.

- The LookAfterYourMentalHealthAustralia.org.au website. The website provided a key resource for people to get tips and resources for looking after their mental health, including contact information about where and how to seek help.
- Mental health promises. Via the website, WMHD encouraged people to make their own promise about how they planned to look after their mental health. These promises are fully customisable, allowing people to use their own wording and imagery salient to them. Alternatively, users could choose to make a pre-defined promise from a list of suggestions developed through previous consumer and carer feedback. Over 2000 promises were made as part of the WMHD campaign. Our CEO wrote to politicians around Australia to make their own mental health promise.
- Social media. Over 100 pieces of WMHD content such as tiles, videos, promises, and links were shared via YouTube, Facebook, Instagram, and Twitter. Much of this content was organically shared by partner organisations and Mental Health Australia invested in target advertisement to grow its reach. The hashtag #LookAfterYourMentalHealthAustralia was used over 2,000 times on Instagram and #WMHD was used over 12,000 times across all platforms. Campaign content collectively reached over 12.5 million viewers throughout the campaign.
- HEADS UP! Comedy Q&A. Comedian Adam Hills conducted a series of interviews with comedians sharing light-hearted anecdotes and tips about looking after their mental health. In addition, 600 Monash Health staff were treated to a private show featuring Dilruk Jayasinha and Claire Hooper.



- Healthcare Professionals Survey. In conjunction with the RACCP, the Pharmacy Guild of Australia, and the Australian Primary Healthcare Nurses Association, Mental Health Australia conducted a survey about the experiences of health workers related to the COVID-19 pandemic and individual mental health. The results were picked up by mainstream media which served to promote WMHD.



- LOOK UP! & "Look after your mental health, Australia". Planes carrying the message, "LOOK AFTER YOUR MENTAL HEALTH AUSTRALIA" were flown over Canberra and Sydney. Footage of the event increased social media engagement and was featured in mainstream media.
- Mainstream media coverage. The WMHD campaign was featured on The Project (Channel 10). Jam Pakt, a regular, hour-long radio program designed for First Nations audiences across Australia dedicated an entire episode to WMHD.





RESEARCH ACTIVITY

The Policy and Research Team are actively involved in a number of research activities. These include being participants on advisory groups, providing letters of support, partnering in research proposals and participation in research activities.

Activities to date include support for the following:

- Member of National Workplace Initiative Evaluation Committee led by the NMHC
- Participant in ALIVE—a national research translation centre to deliver mental health at scale in the primary care setting – led by Melbourne University Professor Victoria Palmer
- Letter of support for MRFF Coronavirus Research Response. 2020 COVID-19 Mental Health Research Grant Proposal – led by Professor Russell Roberts at CSU
- Partnership proposal - Working in Partnership to reduce barriers to health services for older people with mental illness partnership proposal Dr Simone Reppermund UNSW
- Member of MAGNET- General Clinical Trial Network proposal led by Dr Michael Berg NHMRC Senior Principal Research Fellow Deakin University
- Participant - International Collaborative Learning Network - Physical Health and Mental Health
- Participant - The impact of COVID-19 on mental health of residential aged care residents and staff: A national survey of facilities in Australia – Professor Sunil Bhar Swinburne University
- Participant - Trajectories: Mental Health and Housing Policy Options Development with MIND and AHURI
- Member of Caring Fairly Alliance – Survey of Impact of COVID19 on Carers with MIND, MIFA and MHCA
- Member – evaluation of Beyond Blue

EVENTS AND COMMUNICATIONS ACTIVITY

Grace Groom Memorial Oration

The Grace Groom Memorial Oration was delivered by Dr Brendan Murphy. For the first time in the Oration's 14-year history, it was delivered via video conference as we adapted to the COVID-19 pandemic. Brendan Murphy is the current Secretary of the Department of Health. Over a uniquely challenging year, he served as Australia's Chief Medical Officer and was at the forefront of Australia's health response to both the Black Summer bushfires and the pandemic. For his efforts, he was named ACT's Australian of the Year.



The Grace Groom Memorial Oration is one of the key annual mental health addresses for our sector, honouring the late Grace Groom, who was the CEO of the then Mental Health Council of Australia from 2002 to 2005.

The Grace Groom Memorial Scholarship was awarded to ANU doctoral candidates, Isabelle Yujuico, Hannah Sheppard and Rachelle Dawson to continue their important research in psychology and mental health.

Members Policy Forums

Mental Health Australia has continued delivering online mini members policy forums to facilitate engagement with members in key national mental health policy issues while face to face forums were not possible in a pandemic environment. Online webinars have been held regularly in 2020-21, with guest presenters including:

- Dr Gerry Naughtin, National Disability Insurance Agency, on the Psychosocial Disability Recovery Framework and the introduction of a Psychosocial Recovery Coach support item
- Mr Chris Bedford, Associate Secretary, Mental Health Division from the Department of Health on Adult Mental Health Centres
- Dr Rob Gordon, Clinical Psychologist, on bushfire recovery and trauma in the midst of a COVID-19 pandemic
- Dr Ruth Vine, Deputy Chief Medical Officer for Mental Health, on providing clinical and policy advice to the Minister for Health on critical mental health issues related to COVID-19
- Dr Stephen King and Ms Julie Abramson on the Productivity Commission Inquiry into Mental Health - Final Report
- The Hon David Coleman MP, Assistant Minister to the Prime Minister for Mental Health and Suicide Prevention, on the Federal Budget
- Mr Tom Brideson, CEO Gayaa Dhuwi (Proud Spirit) Australia on the National Aboriginal and Torres Strait Islander Suicide Prevention Strategy



Mental Health Australia also undertook to increase engagement with members in development of policy and advocacy positions, through online Members Policy Hubs. Over this period, Mental Health Australia facilitated four of these hubs with members to inform key submissions and position statements on:

- Child and adolescent mental health
- Pre-Budget submission 2021-22
- NDIS Independent Assessments
- Mental health and housing

Communications Activity

Regular media and communications activities continued to engage stakeholders. The CEO Update went out each week to around 5,000 individuals. The purpose of the Update is to showcase sector-wide news from stakeholders such as member organisations and government bodies and provide reminders of upcoming events, surveys, conferences, and other relevant resources. The CEO's blog provides commentary on both key strategic issues and topical stories pertaining to mental health and, as well as being distributed via email, is also posted on LinkedIn and the Mental Health Australia Facebook page.

Regular content was also delivered to Twitter, Facebook, Instagram, and YouTube. Over the year, Mental Health Australia's Facebook following grew from 28,000 followers to 31,000 followers, the Twitter following grew from 33,000 followers to 35,000 followers, and the Instagram following grew from 3,400 followers to 5,700 followers.

LIVED EXPERIENCE PARTICIPATION & LEADERSHIP

National Mental Health Consumer and Carer Forum

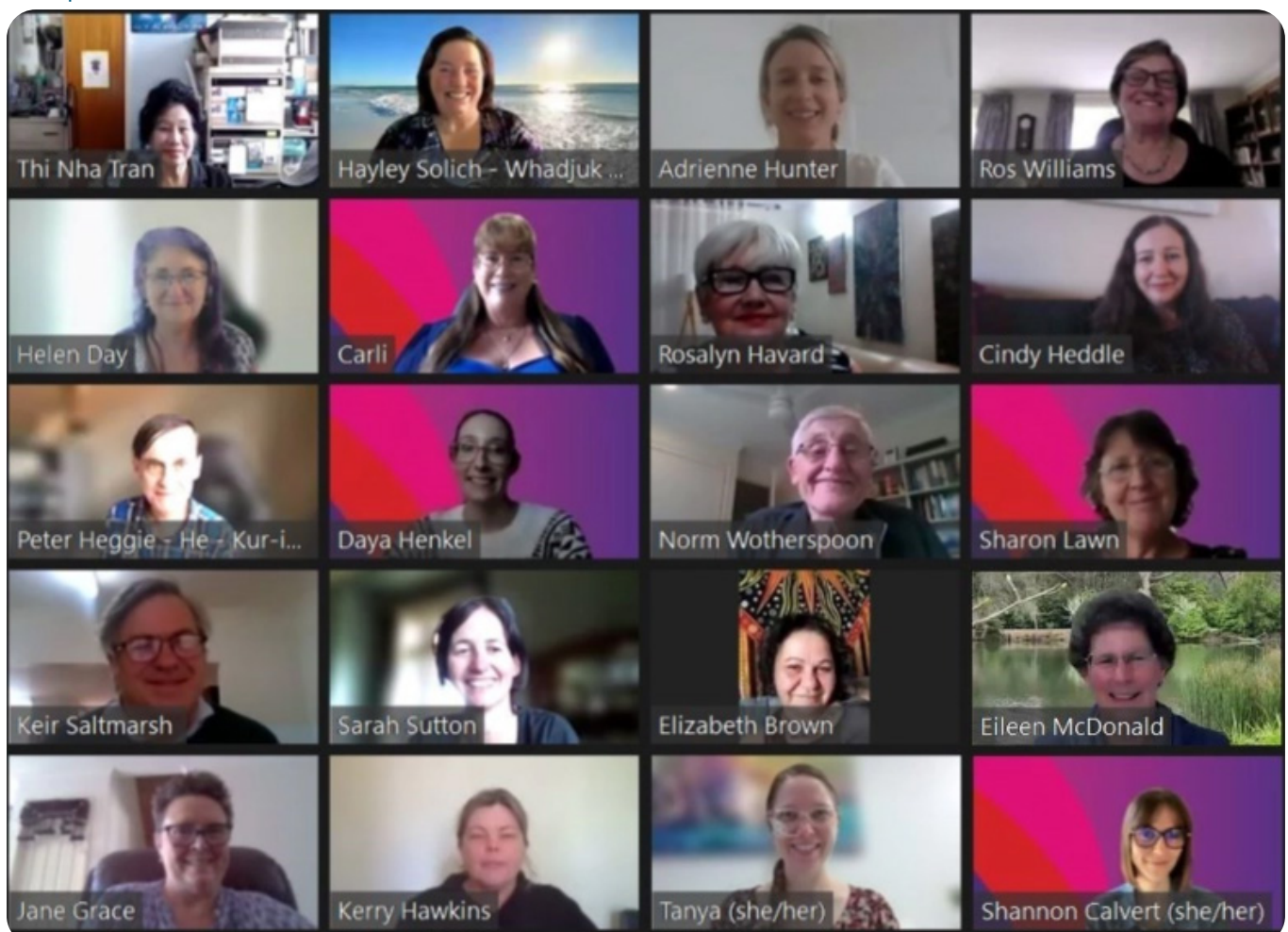


**National Mental Health
Consumer & Carer Forum**

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 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. 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 face-to-face meeting schedule continued to be impacted by the COVID-19 pandemic. Members continued to meet every six weeks via videoconference to progress their work plan.



NMHCCF work plan

The NMHCCF work plan focusses on the following five strategic priorities:

1. Advocacy
2. Consumer and Carer Leadership
3. Marketing and Communications
4. Psychosocial Disability
5. Governance

Advocacy - in mental health and psychosocial disability

During 2020/21, the NMHCCF contributed to many national consultations, reports, issues and policies:

- Response to the Royal Australian College of General Practice draft standards for prison health services
- Response to the Australian Government's consultation on Adult Mental Health Centres
- Submission to the independent review by the NDIS Quality and Safeguards Commission into the death of Ms Ann-Marie Smith
- Submission to the 2020 Review of the Disability Standards for Education 2005
- Submission to the Australian Government Department of Health in response to the Productivity Commission Inquiry into Mental Health Final Report
- Response to the Consultation Paper on the scoping and development of the National Digital Mental Health Framework
- Consultation on the Fifth Plan Action 9 draft national guidelines to improve coordination of treatment and supports for people with severe and complex mental illness and subsequent submission
- Submission to the Joint Standing Committee on the National Disability Insurance Scheme regarding the Independent Assessments program
- Submission to the Select Committee on Mental Health and Suicide Prevention
- Provision of advice to the ACSQHC regarding the National Safety and Quality Mental Health Standards for Community Managed Organisations
- Participation in focus groups to review the Recovery-Oriented Framework for NDIS
- Presentation to the NDIS Provider Practice Health Alerts - Disability Sector Consultative Committee.

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

The NMHCCF has reviewed all its current publications and revised 17 Advocacy Briefs and Position Statements, developed two new advocacy briefs and a Discussion Paper on Lived Experience Research. This work will be concluded by August 2021. The NMHCCF publications are also available online.

Consumer and Carer Leadership

During 2020/21 the NMHCCF has had a particular focus on consumer and carer leadership. Specific activity in this area included:

- Finalisation of the Combined Lived Experience Voice project where the NMHCCF led a national project, using a co-design process, to discuss the development of a national combined mental health lived experience voice. This project was funded by the Mental Health Principal Committee. In light of the recommendation from the Productivity Commission to establish national peak bodies the NMHCCF agreed that no further work on this project was required at this time.
- The NMHCCF entered a partnership with the National PHN Mental Health Lived Experience Engagement Network (MHLEEN) to progress three projects to enhance consumer and carer leadership skills, knowledge and capacity. The projects, which will be concluded during early 2022 include:
 - Development of a clearing house, of mental health consumer and carer leadership-related knowledge and leadership initiatives throughout Australia.
 - Co-designing a Mental Health Lived Experience Governance Framework and Toolkit to guide organisations and jurisdictions when engaging with people with lived experience.
 - Formal lived experience expertise training programs.

Partnerships with Agencies and Organisations

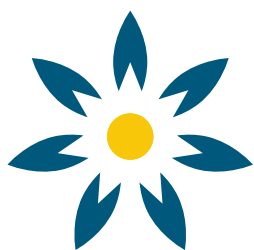
The NMHCCF strengthened its partnerships with the National Mental Health Commission, Mental Health Australia, and the Australian Federation of Disabilities (AFDO) in 2020-2021. This included regular meetings between the Forum co-chairs and Christine Morgan, CEO of the National Mental Health Commission and the Forum co-chairs and Leanne Beagley, CEO of Mental Health Australia. Members participated in consultation processes, webinars and product launches. Members of the Executive also participated in AFDO member policy workshops.

In 2020, the NMHCCF received funding from the Department of Social Services via AFDO to promote and raise awareness of psychosocial disabilities and promoting and supporting the participation of people with psychosocial disability in the Disability Royal Commission.

In late June 2021, the NMHCCF received funding from the National Mental Health Commission (NMHC) to undertake a research project to develop an evidence base on levels of mental health carer distress associated with the COVID-19 pandemic and gathering data on mental health carer self-care and coping strategies. The project is due for completion in June 2022.

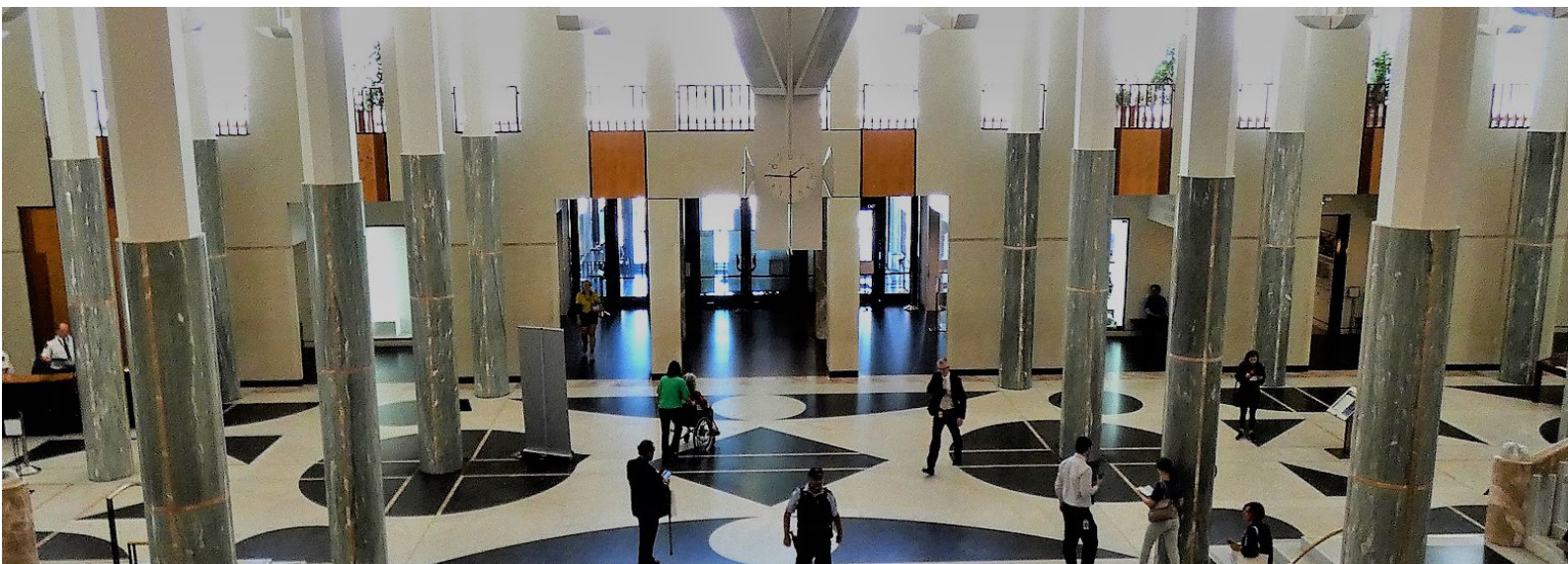
Marketing and Communications

The main activity has been the development of a new website for the NMHCCF. The new website will enhance the information provided on the website to promote the work of the Forum, assist organisations seeking consumer and career representation, provide a central repository for lived experience information and resources and a member's area for ease of access to forms, meeting papers and the like, as well as, to facilitate member meetings, discussion and decision-making processes.



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 participate in national committees, boards, planning groups and national forums as consumer or carer representatives.



Consumer and Carer Representation from the NMHCCF and the National Register

During 2020/21, 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:

- Australian Institute of Health and Welfare
 - Mental Health Information Strategy Standing Committee
 - National Mental Health Performance Sub-Committee
- Mental Health Australia
 - NDIS Psychosocial Community Connector Program Advisory Group
 - Policy Hub for NDIS Independent Assessments
 - Mental Health Carers Advisory Group for Carers Australia's Carers of people with a mental illness: COVID-19 project
 - Australian Digital Health Agency consultation opportunities
- Mind Australia - Trajectories Policy Development Working Group
- Australian Department of Health
 - National Mental Health Workforce Strategy Working Groups
 - National Initial Assessment and Referral Project Expert Advisory Group
- Community Mental Health Australia - Assisting Communities through Direct Care Project Steering Committee and Working Groups
- Victorian Department of Health and Human Services - Mental Health Professional Online Development Program Content Development Advisory Group
- Australian College of Mental Health Nurses - Education and Accreditation Committee
- Australian Commission on Safety and Quality in Health Care - Patient Advisory Group

Annual Issues and Opportunities Workshop

Mental Health Australia hosts an Annual Issues and Opportunities Workshop for Members of the National Register, the NMHCCF, and the Embrace Project CALD Mental Health Consumer and Carer Group. 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.

Due to the COVID-19 pandemic, a series of webinars has been held instead of a two-day face-to-face workshop. The theme 'Consumer and Carer Leadership in a Time of Crisis – Social, Environmental & Political' provided a relevant, thought-provoking program and opportunities to advance participants' voices as consumers and carers. Webinars held in 2020/21:

- July 2020 - The State of Play at Mental Health Australia with Dr Leanne Beagley CEO
- October 2020 - Disability, Leadership and Human Rights with Rosemary Kayess
- November 2020 - Using Values and Frames to Motivate Change with Common Cause Australia
- December 2020 - Lived Experience Research with Dr Michelle Banfield from the Lived Experience Research Unit, Australian National University
- January 2021 - National Outcomes and Casemix Collection with Australian Mental Health Outcomes and Classification Network
- February 2021 - Human Rights Advocacy and Sport with Craig Foster

The Annual Workshop Working Group, consisting of members of the NMHCCF, National Register and the Secretariat, are now working on face-to-face events to be held as soon as is safe and practicable.



National Mental Health Workforce Strategy Taskforce Project



The Australian Government is developing a National Mental Health Workforce Strategy (NMHWS, the Strategy) to identify key workforce challenges and actions to support the effective provision of mental health services across Australia. The Strategy is considering the quality, supply, distribution and structure of the mental health workforce.

The Taskforce was initiated in 2020 and oversees the development of the Strategy and includes members with expertise in mental health, economics, and training and education, as well as representatives from key stakeholder groups. The Mental Health Australia CEO is a member of the Taskforce.

Mental Health Australia's project was to support the participation of consumers and carers with lived experience in the Taskforce processes across mental health workforce priority areas during 2020.

There was a working group for each of these priority areas and in addition to consumer and carer representation on these groups, reports out of each will be used in the consumer and carer input and consultation sessions.

Mental Health Australia conducted two facilitated half-day online consumer and carer roundtable meetings related to the NMHWS working groups' reports and the draft Strategy, and provided administrative support and sitting fee payments for consumers and carers to participate in these roundtables. These representative opportunities were offered to members of both the NMHCCF and the National Register.

Mental Health Australia coordinated selection of consumer and carer representatives to participate in:

- The first roundtable relating to the NMHWS Working Group Reports - 10 consumer and carer representatives, held 5 November 2020. We worked with consultant assistance and the NMHWS working groups' chairs to facilitate the first roundtable. The consultant prepared a report of the roundtable recommendations.
- The second roundtable relating to the Draft National Mental Health Workforce Strategy - 15 consumer and carer representatives, held 22 June 2021. We worked with consultant assistance and the NMHWS chairs to facilitate the first roundtable. The consultant prepared a report of the roundtable recommendations.

MENTAL HEALTH AUSTRALIA MEMBERS

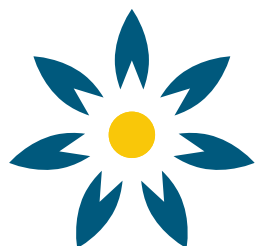
Mental Health Australia advocates on behalf of a wide range of people who are working to improve the mental health and wellbeing of all Australians. This includes consumers and carers, practitioners, service providers, researchers, and policy makers.

Our members make a vital contribution in helping to fulfil our advocacy role and ensuring a united voice is heard in the development of key national mental health reform priorities. It is through their engagement and advice across the spectrum of issues facing our mental health ecosystem that we can be confident of our authority to advocate and influence as the national peak.

As at 30 June 2021, Mental Health Australia had 72 Voting Members and 49 Non-Voting Members.

ACT Mental Health Consumer Network	Mental Health First Aid Australia
Anglicare Tasmania	Mental Health Partners
Anxiety Recovery Centre Victoria	Mental Health Professionals Network
Arafmi	Mental Health Victoria
Australian Association for Developmental Disability Medicine	Mental Illness Fellowship of Australia
Australian Association of Social Workers	Mentally Healthy WA
Australian BPD Foundation	Mentis Assist
Australian Clinical Psychology Association	Micah Projects
Australian College of Mental Health Nurses	Mind Australia
Australian Counselling Association	National Aboriginal Community Controlled Health Organisation
Australian Kookaburra Kids Foundation	National LGBTI Health Alliance
Australian Psychological Society	National Rural Health Alliance
Australian Red Cross	Neami National
Australian Rotary Health	NT Mental Health Coalition
Batyr Australia Limited	Occupational Therapy Australia
Being - Mental Health & Wellbeing	On The Line
Beyond Blue	Open Minds
Bipolar Australia	Orygen
Black Dog Institute	Ostara Australia Limited
Black Swan Health	OzHelp Foundation
Blue Knot Foundation	Pathways SouthWest Inc
Brain and Mind Centre	Perinatal Anxiety and Depression Australia
breakthru	Primary & Community Care Services
Brisbane North PHN	Psychosis Australia Trust
Butterfly Foundation	Psychotherapy and Counselling Federation of Australia
Care Connect	Queensland Alliance for Mental Health
Carers ACT	Queensland Centre for Mental Health Research
Carers Australia	R U OK?
Catholic Social Services Australia	ReachOut Australia
Catholic Care NT	Relationships Australia
Catholic Care Victoria	Richmond Fellowship of Australia
Central Coast Family Support Service Inc	Royal Australian College of General Practitioners
Centre for Mental Health Research (ANU)	Royal Flying Doctor Service of Australia
CoHealth	Ruah Community Services
Connections	Rural & Remote Mental Health
Consumers of Mental Health WA	SANE Australia
Converge International Ltd	Society for Mental Health Research
Dementia Australia	Soldier On Australia
Dietitians Australia	Speech Pathology Australia
Eating Disorders Queensland	Spiritual Health Australia
Emerging Minds	Star Health Group
Employee Assistance Professional Assoc of Australasia	Stride
Exercise & Sports Science Australia	Suicide Prevention Australia
FearLess Outreach	SuperFriend
Flourish Australia	Tandem
Gidget Foundation Australia	TeamHEALTH
GROW	The MindShift Foundation
Headspace	The Movember Foundation
HelpingMinds	The Pharmacy Guild of Australia
JobCo Employment Services Inc	The Royal Australian and New Zealand College of Psychiatrists
Junaya Family Development Services	TheMHS Learning Network
LAMP	Tully Support Centre
Lifeline Australia	University of Newcastle - Centre for Rural & Remote Mental Health
Lived Experience Australia	Victorian Mental Illness Council
Lutheran Services	WA Association for Mental Health
Marathon Health	WayAhead - Mental Health Association NSW
McAuley Community Services for Women	Wellways
Mental Health Carers Australia	Wise Employment
Mental Health Coalition of SA	Women's Information, Support and Housing in the North
Mental Health Community Coalition ACT	YouTurn Youth Support
Mental Health Coordinating Council	
Mental Health Council of Tasmania	

FINANCE, AUDIT, AND RISK MANAGEMENT REPORT



Mental Health Australia Ltd

ABN 57 600 066 635

Financial Statements

For the year ended 30 June 2021

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 2021, I declare that, to the best of my knowledge and belief, there have been no contraventions of:

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

A handwritten signature in black ink that reads 'RSM'.

RSM AUSTRALIA PARTNERS

A handwritten signature in black ink that reads 'GED Stenhouse'.

GED STENHOUSE
Partner

Canberra, Australian Capital Territory
Dated: 23 November 2021

THE POWER OF BEING UNDERSTOOD
AUDIT | TAX | CONSULTING

RSM Australia Partners is a member of the RSM network and trades as RSM. RSM is the trading name used by the members of the RSM network. Each member of the RSM network is an independent accounting and consulting firm which practices in its own right. The RSM network is not itself a separate legal entity in any jurisdiction.

RSM Australia Partners ABN 36 965 185 036

Liability limited by a scheme approved under Professional Standards Legislation

Mental Health Australia Ltd
Statement of Comprehensive income
For the year ended 30 June 2021

	2021	2020
	\$	\$
Revenue	4,610,003	4,119,332
Expenses		
Consultancy and accounting expenditure	(516,515)	(651,729)
Employee costs	(2,108,987)	(2,183,757)
Marketing and fundraising	(125,206)	(91,152)
Meeting costs	(68,186)	(135,151)
Office and administration costs	(330,759)	(334,309)
Other expenditure	(83,343)	(93,255)
Sitting fees	(51,177)	(21,880)
Sub-contractors (Community Connectors Program)	(916,351)	-
Travel	(33,344)	(118,127)
Depreciation	(16,081)	(37,770)
Depreciation - right-of-use asset	(241,733)	(234,588)
Interest - lease liability	(21,611)	(31,211)
	(4,513,293)	(3,932,929)
Total Comprehensive income for the Year	96,710	186,403

Mental Health Australia Ltd
Statement of financial position
As at 30 June 2021

	2021	2020
	\$	\$
Assets		
Current assets		
Cash and cash equivalents	3,923,384	2,449,583
Trade and other receivables	90,298	158,957
Other financial assets	124,728	2,062,060
Other assets	53,764	83,134
Total current assets	<u>4,192,174</u>	<u>4,753,734</u>
Non-current assets		
Property, plant and equipment	42,954	23,297
Right-of-use asset	263,169	469,177
Total non-current assets	<u>306,123</u>	<u>492,474</u>
Total assets	<u>4,498,297</u>	<u>5,246,208</u>
Liabilities		
Current liabilities		
Trade and other payables	394,712	303,156
Contract liabilities	1,191,751	1,775,319
Current tax liabilities	70,474	100,603
Provisions	110,613	243,271
Lease liability	254,567	228,070
Total current liabilities	<u>2,022,117</u>	<u>2,650,419</u>
Non-current liabilities		
Provisions	37,951	29,001
Lease liability	22,536	247,805
Total non-current liabilities	<u>60,487</u>	<u>276,806</u>
Total liabilities	<u>2,082,604</u>	<u>2,927,225</u>
Net assets	<u>2,415,693</u>	<u>2,318,983</u>
Equity		
Retained earnings	<u>2,415,693</u>	<u>2,318,983</u>
Total equity	<u>2,415,693</u>	<u>2,318,983</u>

Mental Health Australia Ltd
Statement of changes in equity
For the year ended 30 June 2021

	Retained earnings	Total equity
	\$	\$
Balance at 1 July 2019	2,132,580	2,132,580
Surplus attributable to members of the Company	186,403	186,403
Balance at 30 June 2020	2,318,983	2,318,983
Balance at 1 July 2020	2,318,983	2,318,983
Surplus attributable to members of the Company	96,710	96,710
Balance at 30 June 2021	2,415,693	2,415,693

Mental Health Australia Ltd
Statement of cash flows
For the year ended 30 June 2021

	2021	2020
	\$	\$
Cash flows from operating activities		
Receipts from customers	4,515,060	4,837,821
Payments to suppliers and employees	(4,827,698)	(4,143,598)
Interest received	37,304	55,389
Lease interest paid	(21,611)	(31,212)
Net cash (used in)/provided by operating activities	(296,945)	718,400
Cash flows from investing activities		
Purchase of property, plant and equipment	(35,738)	(18,386)
Proceeds from disposal of term deposits	2,062,060	-
Net cash provided by/(used in) investing activities	2,026,322	(18,386)
Cash flows from financing activities		
Lease liability paid	(255,576)	(209,542)
Net cash (used in) financing activities	(255,576)	(209,542)
Net increase in cash and cash equivalents	1,473,801	490,473
Cash and cash equivalents at the beginning of the financial year	2,449,583	1,959,110
Cash and cash equivalents at the end of the financial year	3,923,384	2,449,583

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 2021. 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 statements

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.

Statement of comprehensive income

The Company's operations for the year to 30 June 2021 resulted in a surplus of \$96,710 (2020: surplus of \$186,403). 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 \$4,610,003 (2020: \$4,119,332). Key grants continue with additional funding from the National Disability Insurance Agency for a NDIS related project. Rental Income and Other Income decreased to \$337,603 (2020: \$388,826).

Total expenses for the year were \$4,513,293 (2020: \$3,932,929). The largest increases included: Sitting fees \$51,177 (2020: \$21,880); Sub-Contractors \$916,351 reflecting the costs associated with the NDIS related project. Meeting Costs of \$68,186 (2020: \$135,151); Travel \$33,344 (2020: \$118,127) decreased this year in the pandemic environment.

Statement of financial position

Total assets decreased to \$4,498,297 in 2021 (2020: \$5,246,209). Cash and Cash Equivalents increased this financial year \$3,923,384 (2020: \$2,449,583) reflecting the current cycle of existing the grants and sequencing year on year.

Total liabilities decreased to \$2,082,604 in 2021 (2020: \$2,927,226). As at 30 June 2021, Mental Health Australia Net Assets were \$2,415,693 (2020: \$2,318,983).

Statement of changes in equity

The Total Equity increased \$96,710 to \$2,415,693 in 2021 (2020: \$2,318,983), 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 maintaining of current grant programs and historical sequencing.

NOTE 3. Economic dependency

The Company receives significant financial support from the Department of Health in the form of grant funding. The core funding contract with the Department of Health for the year ending 30 June 2021 commenced on 1 July 2019 and expires on 30 June 2022

Mental Health Australia Ltd
Notes to the financial statements
30 June 2021

NOTE 4. Events after the reporting period

The Directors are not aware of any significant events since the end of the reporting period with the exception of the possible effect of the novel coronavirus (COVID-19) pandemic and the related impact on the Company's future results or operations. Like every Company, Mental Health Australia has had to develop new ways of working in a pandemic environment and continues to manage its response and consider appropriate methods to meet its contracted deliverables and its vision and mission.

No other matter or circumstance has arisen since 30 June 2021 that has significantly affected, or may significantly affect the Company's operations, the results of those operations, or the Company's state of affairs in future financial years.



Ms Robyn Kruk, Director
Dated: 18 November 2021



Ms Georgina Harman, Director
Dated: 18 November 2021

INDEPENDENT AUDITOR'S REPORT ON THE CONCISE FINANCIAL REPORT TO THE MEMBERS OF MENTAL HEALTH AUSTRALIA LIMITED

Opinion

We have audited the Concise Financial Report of Mental Health Australia Limited, which comprises the Statement of Financial Position as at 30 June 2021, 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 2021.

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*.

Basis for Opinion

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 November 2021.

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 November 2021



Mental Health Australia

mhaustralia.org
Mental Health Australia Ltd
ABN 57 600 066 635