



VMIAC
by and for consumers

VMIAC ANNUAL REPORT

2021-2022

our vision is a world

where all mental health consumers stand **proud**, live a life with **choices** honoured
rights upheld, and these principles are embedded in all aspects of society.



VMIAC works across Victoria and acknowledges, and pays respect to the past, present, and future Traditional Custodians and Elders of this nation and the continuation of thousands of years of cultural, spiritual and educational practices of Aboriginal and Torres Strait Islander peoples.

We acknowledge that this land was never ceded, and we support the Uluru Statement from the Heart.



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ABOUT VMIAC

VMIAC is the Peak Victorian non-government organisation for people with direct lived experience of mental health issues or emotional distress. VMIAC's membership comprises individuals with direct lived experience as well as associate members who are allies.

VMIAC engages in a number of activities including:

- Individual, group and systemic advocacy
- NDIS information and support
- NDIS appeals and reviews
- Royal Commission into Mental Health in Victoria
- Disability Royal Commission
- Policy and Research

VMIAC receives recurrent funding from both the Commonwealth and Victorian State Governments. The State Department of Health and Human Services provides the bulk of our funding to enable us to undertake most of our work. The Commonwealth Department of Social Services provides funding to deliver an advocacy service to people who live in rural and regional Victoria.

Our Vision

A world where all mental health consumers stand proud, live a life with choices honoured, rights upheld and these principles are embedded in all aspects of society. **VMIAC aims to achieve our vision by:**

- Honouring mental health consumer diversity
- Providing advocacy for mental health consumers
- Advancing mental health consumer workforce and leadership
- Delivering information and training to the community
- Enabling mental health consumer driven education and research
- Developing strategic partnerships

Our Guiding Principles

VMIAC's work is premised on the following beliefs:

- People's experiences are respected and valued
- People are expert in their own lives
- People have a right to self determination
- People have capacity to make genuine choices,
- People should be safe, respected, valued, and informed free from coercion
- People's diversity is embraced

COMMITTEE OF MANAGEMENT

Members of the Committee of Management for the 2021-2022 year:

Chairperson

James Horton

Deputy Chair

Dr. Chris Maylea

Treasurer

Ali Pain

Secretary

Tom Wood

Ordinary Members

Simon Katterl

Hamilton Kennedy

Rebecca Egan

Elvis Martin

Emily Unity

Ian Watts

Lyn Macleod

Nicole Lee

Committee members have also contributed to sub committees that form part of the VMIAC governance structure:

- Finance Audit and Risk Management sub committee
 - Quality Improvement Working Group
- Human Rights Strategic Advocacy sub committee
- Membership sub committee
- Consumer Research sub committee

VMIAC Staff

Alycia, Anaru, Andy, Bertie, Bryony, Chantelle, Charlotte, Craig, Dom, Erandathie, Fiona, Frankie, Franky, Gabriel, Hannah, Hiwan, Janel, John, Kate, Lauren, Lisa, Liz, Lizzie, Matthew, Melinda, Narelle, Neil, Piume, Robin, Romy, Sar, Sharon, Shellie, Shinnelle, Shweta, Taylor, TJ, Tricia, and Xan.

CHAIR'S REPORT

Let me begin by commending VMIAC's staff and leadership. The workload and expectations presented by the implementation of the Victorian Government's mental health reforms have been extraordinarily challenging and unrelenting, and we should all be rightfully proud of their efforts.

I would also like to thank our Committee of Management (COM), sub-committees, and working groups for their contributions.

To our members, on behalf of the COM, I thank you for your support. We appreciate that the busyness of the mental health reforms which engulf us, for many, do not translate to your day-to-day service experiences. But know that change is coming, and that VMIAC is playing its part.

The recommendations of the Royal Commission into Victoria's Mental Health System in 2021, and their adoption by the state government, signalled the end for a deeply flawed mental health system.

This year, the process of reforming and rebuilding the system began in earnest. While we may have anticipated the government's will and willingness to invest in change, I do not believe we could have anticipated its first-year timetable.

In an address I gave at Mental Health Victoria's 'Our Reform' conference this year, I described the pace of reform as brutal. Brutal because, as VMIAC's Chair, that is how I view the pressure it has placed on our organisation, its leadership, and its staff. Welcome to a time of "be careful of what you wish for."

Undoubtedly, the Royal Commission has presented us with possibilities unimaginable but a few years ago. No other place has embarked on mental health reforms of this scale and breadth.

The opportunity which VMIAC has been afforded is generational, one which we are not likely to see again in our lifetimes. With it comes great responsibility to honour all lived and living experiences, and to recognise our obligations to all who face distress and mental health challenges.

These times call for a profound reimagining of VMIAC's place and role in reforming the mental health landscape. As COM, leadership, staff, and members, we have important questions to ask of ourselves – their answers may offer exciting possibilities but may also take us outside our comfort zones.

Our reimagining needs to focus on who we are as a movement, and how we use this historic opportunity to advocate for many others still on the margins. That consumers have a seat at a table is a good thing, but who still does not? Whom do we stand for, and who believes that we stand for them?

We must embrace the activism of communities that already experience exclusion, discrimination, and poorer outcomes in the mental health system, such as First Nations peoples, LGBTIQ+ communities, people with a physical or sensory disability, or those from refugee and asylum-seeker backgrounds.

We must stand in solidarity with groups whose experiences of mental health and wellbeing have been shaped by trauma and survival, such as victims of domestic violence, institutional abuse, or climate change (survivors of fires, floods, and other natural disasters).

In doing so, we will not only build wider participation and a stronger movement but also reignite our radical tradition. If we do not, we risk losing our relevance.

At the heart of VMIAC's identity must be the capacity to negotiate the tensions between partnering the bureaucracy and fostering the kind of constructive rebellion needed to change it.

How will we engage 'within the system,' but also fiercely advocate for the wellbeing of the people most affected by these reforms? How will we remain true to our commitment to human rights as we work to influence policy? How will we engage with and educate an activist membership? How will we diversify our funding to support our mission and vision?

Now, we must prepare to revisit and challenge our own thinking, to go back to the drawing board. What are we, and why? Whom do we represent, and how? These are questions that, over the coming months, we will need to consider as we set about developing our next Strategic Plan.

At this momentous time, we have momentous steps to take. Steps which will require us to draw on VMIAC's legacy, but not be captive to it. We will need to reach out into the unfamiliar, but not be threatened by it. We must be vulnerable to exploring preferred futures without denying others.

Doing so will shape how our leadership team represents us and engages with a rapidly changing sector and will ensure that we are governed in a way which aligns with who we need to become.

There will be much to do in the coming months, not only for VMIAC's leadership, staff, and Committee of Management, but also for our membership.

In the spirit of kindness and compassion, I invite you to join us on this journey.

– James Horton



CEO'S REPORT

I thank the leadership team and all VMIAC staff, as well as our Committee of Management (COM) and sub-committees – it is a privilege to work with such dedicated people to deliver our priorities.

The pace of reform following the Mental Health Royal Commission has been frenetic. The Commission calls for reforms to be designed and delivered by people with lived experience, and while VMIAC has been working beyond capacity towards this end, much of our work has yet to publicly bear fruit.

Next year, we hope a few of our collaborations with the Department and stakeholders will be launched. We eagerly anticipate the new Victorian Collaborative Centre for Mental Health and Wellbeing (VCC), a new State-wide Trauma Service (STS) and the new Lived Experience Residential Service (LERS).

VMIAC used our voice to inform many aspects of these reforms to ensure they best serve our members' needs and lived and living experiences. At the same time, we continued to advocate and support our members, as outlined below:

Advocacy: Despite increased levels of caller distress resulting in longer call times to work through issues, our Advocacy team has supported consumers through concerns ranging from issues around treatment plans and medications, stigma within service delivery and the wider community, to accessing the complaints systems of the Police and health services, and securing continuity of support services.

Engagement: Only formed this year, our Engagement team has worked to grow VMIAC's membership, develop our first Reconciliation Action Plan (RAP), and manage our enhanced Consumer Register to support some 140 consumers lend their voices of lived experience to initiatives. The team also facilitated a new delivery format for CHECK-IN, for some 136 community members.

NDIS: Our NDIS team delivered the NDIS Information and Support Program to help members with issues of funding, access to services, housing insecurity and homelessness, poor

service delivery, and declined supports, to name a few. The NDIS Appeals Program advocated for some 66 people appealing decisions about their disability support funding through Internal NDIS reviews and Administrative Appeals Tribunal. The DRC team helped 47 consumers make submissions to the Disability Royal Commission.

Policy and Research: Our Policy and Research team worked on several projects flowing on from the Royal Commission to influence systemic reform, while producing a third Seclusion and Restraint report, providing advice to government on the Mental Health Act, making a submission to the Standing Committee Inquiry into General Issues Around the Implementation of the NDIS, supporting the Victorian Eating Disorders Strategy, creating new consumer resources, and penning Policy Position Papers.

Positively, due to sharp focus on reform, we have grown from an under-resourced team to a much greater capacity. Still, we only just manage the mounting expectations on us of a growing number of programs of increasing scope and complexity, and we are likely to grow again next year.

Next year, we start work on our strategic plan for the four years ahead. This will include a brand refresh to reflect shifts in our thinking, our orientation, and the new expectations of us. We will also mature our structures and processes to introduce greater accountability for performance across VMIAC.

Our renewed VMIAC research strategy will be released in 2023, and we will implement this strategy to ensure that consumer research innovates around the needs of diverse communities and priority populations who are so often underrepresented in systems thinking.

Finally, we aim to launch our first Reconciliation Action Plan next year, as we consolidate and nurture existing relationships and engage more widely with First Nations peoples and organisations. This will form the centre plank of our new community engagement strategy, also currently in development.

Despite our achievements and plans, I believe VMIAC can always do better. The year was challenging for all at VMIAC as we were pushed to our limits to fulfil to our new role as advocates for lived experience communities within the reform processes

while responding to new and increased demands.

Amid all this busy-ness, I worry that we may not been as attentive to you, our members. Thank you for your patience and understanding as we grappled with an evolving landscape, focused on urgent demands, and trialled fresh systems, processes, and initiatives.

Our growing pains aside, VMIAC remains the same organisation at our activist heart. However, we now need to mature with our circumstances. We will retain our activism, but it must take a sharper form that is more intentional, considered, and effective.

We will strengthen our movement through diversity, to be seen in our Committee of Management, our sub-committees, our staff, and our membership. We will mature as a movement that respects our need to work within the system, but retain the nous to agitate when needed to provide the catalyst for change.

As we strike this new balance, we ask you to trust us that some things will not change.

VMIAC will always advocate for the wellbeing of people with lived experience of mental health distress and trauma. We will abide by our commitment to human rights. And we will continue to listen to our members and seek your views, especially at this time of change.

Please do join us for another year of building a better world for people with lived and living experience from all their diverse communities.

– Craig Wallace



ADVOCACY

The Advocacy team continues to provide both Individual and Systemic advocacy for consumers, ensuring their voices are heard across a multitude of platforms. As we emerge from the covid environment we have been working within, there has been increased opportunities to get out into the community at stalls and events as well as forums for collaboration and consultation.

We continue to note an increase in the level of distress of consumer calls and therefore length of time the calls are taking to work through and identify the advocacy issue. This has resulted in an increase of time spent providing warm referrals, and sourcing and referring out to other services for ongoing supports wherever possible. We are working on further resourcing our website to include more self-advocacy tools and resources to assist people looking to self-advocate, or to support individual advocacy.

Some of the recurring themes continue to be as follows:

- Lack of adequate collaboration with consumers, in relation to their treatment plans or preferences. In particular, issues around medication management continue to be a consistent theme, with consumers reporting lack of consideration of previous history and potential harm, and no explanation of what medication they are taking or any potential side effects.
- Stigma within service delivery and the community associated with particular diagnoses.
- A difficulty navigating or accessing complaints systems for health services, with services often having inauthentic engagement in the process.

- We have additionally seen an increase in calls about the Police complaints system and processes. The overarching theme being people feeling unheard and dehumanised by the mental health system.
- The ongoing challenges facing both consumers and advocates, is the fractured and difficult to navigate support services with eligibility criteria which does not allow for continuity or 'wrap around' assistance. The lack of continuity serving to retraumatise people who are having to repeat stories and relive traumas in the process.
- Additional barriers being significant wait times to access services, for both immediate support and ongoing support, as well as identifying available services to provide ongoing support, as there is a clear lack of adequate services available.

POLICY

The policy team have had a stimulating and challenging year of interesting projects all brought about through the Royal Commission reforms. The pace of reforms has required the Policy team to allocate resourcing to balance reform project establishment while also representing VMIAC at executive level across a diverse range of key reform projects with producing policy outputs alongside VMIAC staff across programs.

While this created the positive impact of the Policy team having greater access to influence systemic reform and decision making, it has also created the challenge of balancing this against member and community engagement in policy development.

Despite these challenges, we have been able to derive a great deal of policy input from our consumer program data, our consumer sector stakeholders, system stakeholders, consumer register participants/experts, our networks of consumer and lived experience researchers and activists.

As the reforms start to slow and go through review processes, the policy team looks forward to establishing new and innovative ways to translate the experiences and ideas of members and communities into VMIAC policy work. We anticipate a pivot back to a growing capacity to design a range of events in partnership with VMIAC's community engagement team for members and community so they can continue to shape our policy advice to Government.

This includes the views and experiences of communities we have not typically been able to lift voices of in the past.

Some of our outputs this year have included:

- a third Seclusion and Restraint report
- comprehensive advice to policy makers and government on the Mental Health Act
- Regulation and Oversight of the Mental Health System – VMIAC policy platform
- Supporting the visioning of the Victorian Eating Disorders Strategy
- The creation of a new consumer resource “Your Rights When Being Apprehended Under the Mental Health Act”
- Written and in person advocacy to Subcommittee on the Prevention of Torture and other Cruel, Inhuman or Degrading Treatment or Punishment regarding their visit to Australia and Victorian mental Health facilities
- Submission to the Standing Committee Inquiry into General Issues Around the Implementation of the NDIS
- VMIAC Policy Position Paper #8: Discrimination & Mental Health

A range of joint platforms on the rights of people in private congregate care, women accessing mental health support experiencing family violence and the need for improved police oversight to ensure the safety of people with a mental illness.

RESEARCH

VMIAC has supported several research projects over the last 12 months and formalised stronger relationships with universities.

This has resulted in an increase of Memorandum of Understanding's (MOU) with a range of partners and the development of workplans oriented around:

- existing opportunities of the reform environment
- enabling the voice of Lived Experience researchers
- supporting consumers who are seeking pathways to enter research fields

The latter has recently guided support provided to a lived experience research PhD student with Melbourne University undertaking projects within the VMIAC research sub-committee.

The recruitment of a new member of the research and policy team has commenced to aid VMIAC's growing relationships and suite of research projects. This role will play a crucial role holding research area 'business as usual' while we also establish additional projects related to the range of mental health reform entities with research scope.

The VMIAC research strategy has been amended to reflect these developments and is now due to be released in 2023.

We are excited to finally get implementation of this strategy underway and look forward to ensuring that consumer research innovates in particular around the priorities of diverse communities and priority populations so often underrepresented in systems thinking.



NDIS

VMIAC has three distinct programs under NDIS: the NDIS Appeals, NDIS Information and Support, and the Disability Royal Commission programs. Kirsty entered this role in August of 2022 and is grateful to be stepping in to work with such a resourceful and intelligent team. Each of these programs is staffed by people with lived or living experience of mental illness or distress and are resourced through Federal and State funding.

In August, Kirsty attended the NDIS Jobs and Skills Summit at Parliament House, at the invitation of Bill Shorten. This was the first event hosted by the new Minister for the NDIS and was a positive step forward in creating a more consultative process with people living with disability or supporting those with disability. This summit was a chance for key stakeholders and NDIS participants to share their expertise in how the NDIS and job markets can be shaped to support an increase in the number of people with disability in the open job market.

We have worked alongside the Private Congregate Care (PCC) Alliance in writing a submission to the Australian National Audit Office (ANAO) concerning whether the NDIS effectively supports NDIS participants who reside in PCC settings, including Supported Residential Services, who require assistance with daily life activities.

In August we welcomed TJ into the Disability Royal Commission (DRC) team. TJ works alongside Romy to assist consumers to write and complete their submissions to the DRC. More information can be found about the DRC program below.

The Information and Support service has been providing support to consumers who are engaged with, or participants of the NDIS scheme. The team consists of Anaru, Lizzy and Melinda. The Appeals team has continued to provide advice, advocacy, and support to NDIS participants who are seeking to appeal decisions made by the NDIS at the Administrative Appeals Tribunal. This team consists of Kate, Matthew and Melinda. More information can be found about the NDIS Appeals program below.

The teams have come together to advocate for change within the NDIS and disability systems through systemic advocacy and invaluable support to NDIS participants and people living with disability.

NDIS Information and Support Program

This peer worker-delivered service assists people who are living with a psychosocial disability that find the NDIS and disability providers inaccessible without the support of independent advocacy. The difficulties experienced by consumers and participants can be compounded by trauma, language and/or communication barriers, isolation, severe anxiety, or confusion regarding the complexities present in navigating the NDIS. As a result of the presence of these complexities, participants and consumers can find themselves in situations where they feel vulnerable, alone, and without the appropriate support and information they require to fully utilise the NDIS. It is in these circumstances that our NDIS Information and Support team can assist with bridging the gap with support, education and information that can build a person's capacity to self-advocate and achieve their goals.

This program is funded as a short-term, task-oriented service, however many people we support have NDIS issues that are complex and multi-faceted, requiring recurring periods of support.

As our Information and Support team is small and consists of only two funded positions, we do not have the required capacity to meet the high demand that exists within the community for our services.

The scope of advocacy provided by our team include:

- Supporting consumers to build skills around self-advocacy and the NDIS
- Collating and reviewing medical and allied health reports and evidence of disability
- Supporting participants through the planning meeting process
- Assisting participants to review decisions made by the NDIA
- Understanding and explaining disability rights and NDIS legislation
- Crisis mitigation, including relationship breakdowns with clients and service providers, disengagement with services, or invoicing disputes
- Complaint escalation through the Mental Health Ombudsman or Quality & Safeguards commission
- Liaising with Local Area Coordinators and NDIA planners
- Referrals to mental health services and NDIS Access Programs where appropriate
- Information provision
- NDIS Access Requests where other mainstream supports are not an appropriate option

NDIS CONT.

There have been several key issues surrounding the NDIS that have continued to impact the livelihood and wellbeing of participants and consumers throughout the year, with new barriers continually emerging.

The scope of issues we regularly assist with include, but are not limited to:

- Inappropriate or insufficient funding for supports, assistive technology, therapy, meals, travel, accommodation, and assistance animals
- Inappropriate access to support coordinators and thin markets for Support Coordination services with expertise in psychosocial disability
- Finding appropriate support services to fully utilise plans
- Housing insecurity, homelessness, and poor living conditions in existing Specialist Disability Accommodation (SDA), Supported Residential Services (SRS) or Supported Independent Living (SIL) properties
- Poor service delivery from NDIA and NDIS service providers
- Limited-service availability in rural and regional areas
- Limited accessible information or support for culturally and linguistically diverse communities
- Sub-standard and culturally inappropriate supports for Aboriginal communities
- Limited support for NDIS-related distress
- Plan reviews conducted on-the-spot or with little notice
- Supports being declined by the NDIA without appropriate justification

Our NDIS Information and Support Program has found that too often there is a clear disconnect between the funding and allocation of supports contained in NDIS plans and the needs of NDIS participants.

Across the NDIS sector there remains a profound lack of understanding, knowledge, skills, and experience to successfully engage with NDIS participants who have a psychosocial disability. Significant change needs to be made to ensure the scheme is equipped to appropriately support and engage with people who experience psychosocial disability.

As VMIAC is a lived experience organisation, consumers who have otherwise disengaged with services due to service trauma have indicated a stronger sense of trust and willingness to engage when working with our team, identifying the sense of mutuality, empathy and understanding as a key aspect in building their own confidence and self-advocacy skills.

This year our information and support team assisted an estimated total of 68 consumers. Due to the multifaceted nature of each enquiry, reasons for referral and outcomes are varied and multiple.

Disability Royal Commission

Launched in April 2019, the Victorian Government's Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability (Disability Royal Commission; DRC) is accepting submissions from mental health consumers, carers, groups, and organisations until 30 December 2022. The DRC aims to better protect people with disability from misconduct and maltreatment across a range of settings and contexts – a feat that Australia's disability sector has so far failed to accomplish.

The DRC's sixth progress update was released on 6th of September 2022, detailing the submission progress and public hearings held by the DRC in the first six months of 2022, and the large numbers of people who have experienced violence, abuse, neglect and/or exploitation in a system built to protect and support them. Our brief summary of the Disability Royal Commission 6th progress report can be found on our website. This progress report, along with its predecessors, marks a step towards positive change and long-awaited reform for people with a disability.

VMIAC is committed to supporting people with psychosocial disability to have their voices heard in the DRC. The DRC provides an opportunity for mental health consumers to address the harms and barriers they have experienced, have a say in their future treatment, and hold systems, services, and individuals to account. We hope that the DRC will result in real change and reform within the disability sector. As such, our Disability Royal Commission advocates are providing support to consumers with their submissions until 30th December 2022. Our DRC team works alongside consumers to produce submissions in a format and timeframe that is accessible and meaningful to them, with a particular focus on Victorians living in rural and regional areas. Unfortunately, the COVID-19 pandemic has presented a substantial barrier to outreach efforts with rural and regional communities. However, we continue to provide support by email, phone, post, video conferencing, and with in-person consultation where appropriate.

To date, VMIAC has received over 100 enquiries relating to DRC submission support, held several information and support sessions, and successfully supported 47 consumers with their submissions.

You can learn more about our DRC Submission Support at <https://www.vmiac.org.au/royal-commission-into-violence-abuse-neglect-and-exploitation-of-people-with-disability>.

NDIS Appeals Program

The NDIS Appeals Program provides advice, advocacy and support to NDIS participants seeking to appeal decisions made by the NDIS in relation to the funding of their disability supports within the NDIS. The team also supports people who have applied to access the scheme but have had their access request denied by the NDIS.

During the past year, our service has been in extremely high demand due to the spike in the numbers of people requesting Internal NDIS Reviews and External AAT Appeals, paired with a backlog of cases waiting to be heard at the AAT.

With a change in government, there has been some changes made in the AAT process to clear up some of the backlog. This has led to an increase in the number of cases that are being settled. Unfortunately, this has not led to a decrease in the support required as unrepresented participants are seeking short-term engagements and advice on settlement offers. Even with the increased AAT settlements, demand for appeals advocacy far exceeds supply.

In the 2021-22 fiscal year the NDIS Appeals team assisted 66 people seeking appeals advocacy support. Reviewing these enquiries and ensuring that proper processes are followed has been a major undertaking. This work included phone calls, emails, meetings, reviewing documentation, consultations, and referrals to other services where required.

The NDIS Appeals advocates contributed to joint standing committee submissions, and regularly participate in several forums focused on identifying and addressing systemic issues to ensure these can be raised and fed back to the NDIA. We have also worked with IMHA to assist in the development of a Self-Advocacy for the NDIS Web Tool.

Without adequate levels of funding for legal services to employ enough lawyers to meet demands for legal support in AAT appeals, NDIS participants are left without adequate representation and support throughout the AAT process. Consequently, our Appeals advocates now face increased workloads as they represent their clients at the AAT for a greater amount of time, in what are increasingly complex cases. Despite all this, VMIAC's NDIS Appeals advocates have worked extremely hard to produce great outcomes for many clients that have received our services. This includes supporting people with a psychosocial disability to successfully appeal decisions around their access to the NDIS as well as supporting NDIS Participants to successfully appeal decisions relating to the inclusion of desperately needed funding and supports within their NDIS plans.

It is our hope throughout the year to create stronger networks with other NDIS advocacy organisations to continue working to systemic change within the NDIS system to ensure that people living with a psychosocial disability have equitable and safe access to appropriate disability supports. The DRC team will continue working with consumers to ensure they are able to complete their submissions prior to the DRC closing.



ENGAGEMENT TEAM

VMIAC history is deeply grounded in grassroots organizing and activism. VMIAC has long championed the need for consumers' voices and expertise to envisage the creation of not just mental health system, but a society where people's rights are understood, upheld, respected, and valued.

The recommendations of the Royal Commission offer consumers the 'promise' of:

- our human rights being understood and upheld
- our expertise being acknowledged and cemented in the mental health system
- a mental health system which does not cause harm
- choice, including non-medical models and interventions such as meditation
- social change as we know structural forces continue to influence our mental health, access to services and experience with services.

The Engagement team are mindful when engaging with consumers who straddle a 'divide'. This divide is the gulf between the historical and the contemporary experiences of consumers whilst we await the change promised by the Royal Commission. VMIAC finds itself placed in a complex environment as we seek to honor the past, and hand on to the promise of what the future may deliver for consumers. We do so, knowing the rights of many consumers continue to be violated and many experience harm with the system.

In early 2022 VMIAC formed the Engagement team. This reflected VMIAC's vision and commitment to our membership.

Directing resources to engaging people with lived experience reflects a commitment to:

- Grow our membership
- Increase our assertive engagement of members

- Elevate the expertise of consumers within the community, the government, and the mental health system
- Ensure our membership has strong representation from First Nation and/or people of color
- Reach and engage young people, older consumers, and people living in regional and rural Victoria
- Start to build relationships with community members who have and continue to experience structural marginalization such as those with a disability, refugee and asylum seekers, people experiencing homelessness, people who are LGBTQIA+ and criminalization

The Engagement team's key responsibilities include:

- Developing VMIAC's first Reconciliation Action Plan (RAP)
- VMIAC's Membership
- CHECK-IN
- VMIAC's Consumer Register

VMIAC's Reconciliation Action Plan

VMIAC's commenced the development of our first RAP. In recognition that we have not always privileged the acknowledgement of historical (and current) injustices experienced by First Nation's people, we are developing a 'Reflect' RAP. We intend to use the forthcoming year to consolidate and nurture pre-existing relationships with First Nation's people and organizations. We also intend to prioritize the assertive engagement with First Nation people and organizations. It is vital that this fundamental commitment is woven into the core of the community engagement strategy that is currently in development.

Examples of our efforts in 2021/22 include partnering with VACCHO for the release of the Seclusion and Restraint Report which found Aboriginal and Torres Strait Islander people represent 3.5% of all inpatients, but 5.3% of all seclusions (VMIAC, 2022: 9).

The Engagement Team also held a Truth Telling event, screening the Warragal Creek Massacre Documentary which provided a somber insight into the violent history of colonialism and the

continued erasure of history from a First Nation perspective and experience. The Yarning Circles following the screening offered attendees the opportunity to share, discuss and listen to diverse perspectives to further develop and enrich our organizational allyship. We look forward to continuing to show up as an ally and calling for justice for First Nation's people in the coming year.

VMIAC's Members of the peak body for consumers in Victoria

We've felt the weight of our members' expectations this year. On behalf of our members, we've long "been banging on the door" demanding to be let into spaces where decisions were made on consumers' behalf. Following the Royal Commission, VMIAC has access to decision makers and decision-making spaces. Examples include reviewing the new Mental Health Act and the development of Our Agency. It has not always been easy to navigate our members expectations, hopes and sometimes competing ideas about how VMIAC should be pursuing its role in this new landscape. We recognize it is vitally important to hear from Members about their hopes and expectations for VMIAC. We intend to spend more time listening in 2022/23.

In this context, the team has been thinking about and attempting to run activities online and in person that sustain a resilient consumer community, and which connect VMIAC with members.

Some examples of this include:

- Hosting the 2021 Awards where 16 awards were given to consumers in recognition and celebration of their contributions
- Holding Monthly Members meetings with guest speakers, appearance of our CEO and member of Committee of Management or VMIAC team members
- Engaging with local and rural grassroots organizations to connect their community members to paid opportunities via the consumer register and ensure marginalized voices are heard and valued in the Mental Health reform.
- Delivering the first Governance Training Program with the intention of increasing the confidence of consumers to step into newly created governance role



ENGAGEMENT TEAM CONT.

Consumer Register, elevating consumers lived and living experience

The Consumer Register (the Register) plays a key role in ensuring consumers use their lived experience to redesign, rebuild and reimagine Victoria's mental health system. Whilst the Register has operated since 2018, the scale, volume and demands for consumers to use their lived experience via the Register this year increased exponentially. The demands upon the Register have often been unrelenting and timelines unforgiving.

The pace of the Royal Commission recommendations has left us wondering whether the stated aims of the Royal Commission are being lost in a haze of activity. In response VMIAC has advocated for trauma informed timelines and processes, and to varying degrees we've been heard and accommodated. The Department of Health's commitment to work in partnership with VMIAC to engage consumers wishing to use their lived experience gives us reason for cautious optimism our advocacy is not in vain.

Working in a frenetic environment means VMIAC, and the Engagement team haven't always got things right. In the spirit of acknowledging this the Engagement team wishes to extend our thanks to members of the Register. Your generosity, patience, commitment, and dedication as we introduce/trial new systems, processes, and activities has not gone unnoticed.

Activities and outputs we are proud of over 2021/2022 include:

- 40+ consumers joined the Register
- 140+ times consumers used their lived experience via the Register between January and June 2022

CHECK-IN, responding to community

"It's not that you fixed me, but our weekly or fortnightly conversations gave me a perspective. And it was very helpful." – Community member accessing CHECK-IN

"Communication and mutual support is key to being empowered. That's what I experience at CHECK-IN" – Consumer

Funded between 2020 and 2021, VMIAC CHECK-IN team delivered a peer-supported self-advocacy program. The program incorporates art and narrative therapy alongside the peer support for consumers (community members). CHECK-IN's work aligns with recommendations handed down as part of the Royal Commission into Victoria's Mental Health System, to improve access to services that are responsive to a range of lived experiences.



CHECK-IN is structured to allow community members to put together their own stories of navigating challenging times. Our approach allows people to recognize their own strengths, to reflect on times they have overcome difficulties, and to identify the supports walking alongside them. Importantly, the program strives to recognize and challenge power structures as they emerge in their work with community members and the service system.

In June 2021- June 2022 the CHECK-IN program continued to respond to community members struggling with the complexities of the COVID-19 pandemic. CHECK-IN Team focused on collaborating with several community organizations and facilitators.

Partnerships includes:

- North Western Melbourne Primary Health Network (NWPHN)
- HeadtoHelp (H2H) hubs
- Y-CHANGE
- Lived Experience Peers employed within the mental health system
- Mei Lai Swan for trauma informed yoga
- Walter Donnelly and Brianna Bone for Wayapa Wuurk immersions

These partnerships enabled CHECK-IN to co-develop programs which adapted to different lived experiences of community members. The activities supported community members to engage in practices strengthening their relationship with embodied experiences via earth-based mindfulness practices, where community members can explore their connection to the land, they live on with the intention of boosting their wellbeing.

Community members reported accessing the program for a range of experiences. Reasons included connecting and re-connecting with the program due to changes in their personal situations across the year. Areas they wanted to undertake advocacy on/receive support with include financial insecurity, lack of social support, connection with others with a lived experience, lack of access to trauma informed support, chronic health issues and disability, stigma, experiences of racism at work, and challenges related to working in peer work and consumer workforce roles.

Highlights in 2021-2022 include

- Supporting 136+ community members
- 6% identified as Aboriginal and/or Torres Strait Islander
- 27% identified as culturally and linguistically diverse
- 17% of CHECK-IN participants were based in rural and regional locations

- 39% of participants identified as LGBTQIA+
- Working with H2H hubs to pilot CHECK-IN within a non-consumer led setting including recruitment, training and support of two peer workers and delivery of Organizational Readiness Training
- Connecting with young people (aged 18 to 30) using their lived and living experience at Y-CHANGE
- Developing the 12 weeks 'Chapters' program by and for Lived Experience Workforce (LEW) to provide a space of connection, solidarity and to access peer support for themselves
- Creation of collective document honoring the wisdom of consumers and encourages connections between experiences 'We are wiser than we know, knowledge and skills from peer support program CHECK-IN'.

With the end of lockdowns funding from the Victorian Government's Keeping Victorians Connected and Supported – Mental Health and Wellbeing Coronavirus Response Package ceased. Recognizing the need for the program to continue, VMIAC with support of community members advocated for funding to continue. We highlighted the positive impact the CHECK-IN program has on individuals' wellbeing, sense of connection and ability to self-advocate.

Our efforts were successful with a late reprieve. The new iteration of CHECK-IN in 2022-2023 is founded on the learnings and reflections gathered over the program's two-year life span. Its delivery method includes individual peer support, weekly online drop-in peer groups, and a monthly in-person social meet-up. Once a month, participants are invited to co-facilitate the drop-in group.

“It was nice feeling that our work and experiences were valued, to the point that there was a program specifically created for us.” – Lived Experience Peer Worker

CONSUMERS LEADING IN GOVERNANCE

The Consumers Leading in Governance pilot program is the first specialist governance training program for consumers in Australia. It is developed by and for consumers – it is ground-breaking! VMIAC, as the peak consumer body in Victoria, is proud to have initiated this governance capacity building program as a first step.

In handing down its recommendations in the final report, the Royal Commission was unequivocal that the new mental health system must have legitimate and respected consumer leadership to ensure tangible change in the system. At VMIAC we agree that meaningful change will not occur unless consumers are at the forefront of the new system.

The Consumers Leading in Governance pilot program was developed in response to this call for consumer leadership. The program will build and strengthen the capacity of consumer leaders to have a powerful and influential presence at Board and senior leadership level.

The program is six months long. It offers participants both theoretical and practical learning experiences. A critical component of the training is that we have placed the consumer perspective lens on governance. In addition to the key governance training components such as financial literacy, risk, and strategy, the pilot program also addresses power imbalances that we believe currently exist in almost every governance arrangement.

The placement component of the program requires participants to observe three board and/or sub-committee meetings to understand how the learnings from the program can be applied in board rooms. It is also designed to build relationships and increase access to potential board positions.

Thirty-one high calibre consumer leaders were recruited to the program from a large pool of strong applications. The training program was delivered online twice to two groups of participants.

We received overwhelming support from the sector, with more than twenty organisations sponsoring participants, offering placements, and partnering as content providers. This is demonstrative of the need and timeliness of this program, and the widespread recognition of this across the sector. We are excited to be partnering with

subject matter and sector experts, many of whom are working pro bono to support the program and deliver this unique training to consumers. In offering placements, organisations are also able to build their readiness and capacity to support consumer leadership in partnership with VMIAC.

The volume and quality of applicants further emphasised for us the urgent need for leadership training tailored to consumers, and the importance of scaling up this program to full maturity in the next two to three years to develop and strengthen consumer leadership in Victoria.



CONSUMER WORKFORCE

VMIAC's Consumer Workforce Liaison was employed in Oct 2021 to partner with the Department of Health on whole of Mental Health Workforce Reforms arising from the Royal Commission into Victoria's Mental Health System. This includes working on the LLE Workforces Reforms.

There was also a complementary role created at Tandem that the VMIAC liaison works closely with. The VMIAC Liaison provides the Consumer Perspective whilst the role at Tandem provides the Family-Carer-Supporter Perspective.

The Liaison has represented VMIAC on the LLEW Scholarships Advisory Group. The scholarships are funding for LLEW to undertake primarily leadership and management courses that will contribute to their LLEW careers. The Liaison had a significant voice and influence in the development of this scholarship program, its parameters and requirements. The Liaison gave significant advice and feedback on the creation of the application form, ensuring it was clear and LLEW 'friendly' and inclusive. The Liaison was on the panel reviewing applications for the first round and giving feedback to applicants.

The Liaison represented VMIAC on the LLEW Data Project Advisory Group. The Liaison gave substantial advice on the development of the content and structure of the survey for LLEW about their workplace experiences and survey for Organisations about their attitudes towards the LLE Workforces. The results of the surveys were confidentially shared with the Advisory Group for comment but have not yet been publicly released.

The Liaison assisted VMIAC to secure a range of projects related to the LLEW Development Program led by the Department and has since been on the Collaborative Group of nine agencies that the projects have been spread across. VMIAC will assist in the coordination and/or delivery of various training: eCPR, Hearing Voices Approach, Alternatives to Suicide and Consumer Perspective Supervision Training. VMIAC will be coordinating the development of the Community of Practice for Consumer Consultants. VMIAC will be creating a bank of Consumer LLE Workforce Position Descriptions. VMIAC also has funding for research, register participation and consumers in governance. To begin these projects, VMIAC is in the process of recruiting a Consumer Workforce Team, which the Liaison will then be a part of.

The Liaison has also assisted the Department in the creation of the Mental Health and Wellbeing Workforce Strategy, which is now released, through participation in the Lived and Living Experience Workforces Advisory Group (LLEWAG). The Liaison was also consulted around the development of the Mental Health and Wellbeing Workforce Capability Framework and has had continued and significant input into the development of the content and structure of the Outcome Statements connected to this Framework. The Liaison is now part of the newly created Capability Framework Advisory Group. The Workforce Strategy and Capability Framework relate to whole of workforce but clearly include the LLE Workforces.

The collaboration of the Liaison with the complementary Workforce Lead role at Tandem, on the above workforce reforms, has been considerable. The Liaison and the role at Tandem are part of the same working groups, advisory groups and panels and meet once a week to prepare their work and debrief.

The Liaison presented and facilitated a workshop at the Our Reform Conference with the Tandem Workforce Lead and a CLEW representative, titled 'Lived and Living Experience Workforce Reforms, Gaps and Improvement Ideas'. The Liaison also presented with the Tandem Workforce Lead and the Principal Project Officer in the Workforce Growth Team at the Department of Health at the 2022 TheMHS Conference - titled 'Lived experience perspectives central to mental health workforce reform in response to Victoria's Royal Commission recommendations.'

VMIAC AWARDS

The 2021 VMIAC Awards was an exciting event that celebrated consumers and their allies and the work they have done to champion the rights and lived experience of their peers. As lived experience consumers, our voices have often been ignored, or outright silenced, by systems that have refused to treat us as the experts of our own lives, experiences, and identities, and it is with the VMIAC Awards that we brought together consumers, allies, and organisations to address that silence.

2021 was also an exciting year for the VMIAC Awards in many other ways. This year marked the release of the Royal Commission into Victoria's Mental Health System, a ground-breaking report that for the first time put lived experience voices at the forefront of the future of Victoria's Mental Health System. This change has gone a long way to legitimise lived experience voices within the sector, and start creating a world where there is truly, "Nothing About Us, Without Us." This was also the first Awards we hosted entirely online, and dealt with the teething tech issues, but also possibilities, and accessibility, that comes with that change. Overall, it was an amazingly well received event. We are now proud to share with you the highlights of the night's festivities, and the names of our winners and highly commended nominees.

The 2021 Lifetime Achievement and Lifetime Ally Award

The Lifetime Achievement and Lifetime Ally Award are in recognition of the groundbreaking U&I Project. Originally a Participatory Action Research Project begun in the early 90s, The U&I Project laid the groundwork for a lot of the consumer research in Victoria that influences organisations like VMIAC to this day.

In acknowledgment of this work, The Lifetime Achievement and The Lifetime Ally Awards were awarded this year to the five main contributors of the report including;

Merinda Epstein (Lifetime Achievement)
Ross Findlay (Lifetime Achievement)
Yoland Wadsworth (Lifetime Ally)

The 2021 Human Rights Award
Winner
Heidi Everett

Winner
Jodie Fisher

The 2021 Intersectional Advocacy Award
Winner
Tamara Lovett

Highly Commended
Francis Acquah

The 2021 Consumer Worker of the Year (Community) Award
Winner
Bianca Childs

Highly Commended
Tyson Hill

The 2021 Consumer Worker of the Year (Clinical) Award
Winner
Neelam Rai

Highly Commended
Sue Belmore

The 2021 CAG (Consumer Advisory Group) Award
Winner
Youth Advisory Council – headspace: Greensborough

- Lita Ansell
- Jamison Davies
- Kate Byriell
- Madeleine Cameron
- Gloria Rapisard

Highly Commended
MIND Lived Experience Advisory Team

- Carolynne White
- Anna Lampugnani
- Vassie Dandanis
- Amy Falconer
- Clara Chapman
- Samantha Martin
- Jim Brewer

The 2021 Ally of the Year Award
Winner
Helen Makregiorgos

Highly Commended
Jessica Anson

TREASURERS REPORT

2021/22 has been a productive year for VMIAC, resulting in a strong operating position. VMIAC has continued its navigation of COVID19 by using online platforms for consumer consultations, advocacy and enabling staff to effectively work from home.

VMIAC's financial operations have resulted in an audited surplus of \$952,868 reflected in the Statement of Profit and Loss report for the year ended 30 June 2022, with the following notable items -

- A bequest from Kenneth Holt of \$212,652, a long time VMIAC member who contributed greatly to the consumer workforce through his work at Latrobe Regional hospital and in his active membership of the Consumer workforce and mutual support days at VMIAC in previous years.
- VMIAC has doubled in size with the increase in core funds provided by the Department of Health and the recurrent agreement in place for VMIAC's core funding.

VMIAC's Balance Sheet indicates –

- A continued healthy cash position with an audited figure of \$2,482,381 of income carried forward into 2021/22. This includes unspent grant funds from Commonwealth and State grants that are earmarked for services and programs in 2022/23. An example is the \$1.1 M dedicated to the lived and living experience workforce grants from the Department of Health. Further funds carried over includes Recommendation 29 from the Royal Commission which is about the Lived and Lived Experience Agency of \$408,500

- The Equity section of the Balance Sheets indicates VMIAC's operations have generated \$1,846,193 of value in the organisation. Kenneth Holt's bequest is therefore currently sitting in retained surplus. We are still using a portion of the retained surplus to support a PhD with Melbourne University; the facilities upgrade project and the organisation development project.

Financial areas of focus for the coming year will include -

1. VMIAC's Risk Management profile and minimising all aspects of organisational risk
2. Continuing regular Program & Project reviews to analyse progress and ensure maximum impact and full utilisation of our budgets.
3. Reviewing Budgets to ensure appropriate resources are allocated to ensure effective operation into a "Covid Normal" future.
4. Updating VMIAC's strategy and delivering projects which achieve VMIAC's vision.
5. Continuing to maximise return on funds



Ali Pain
VMIAC Treasurer
27th October 2022

FINANCIAL STATEMENTS

Victorian Mental Illness Awareness Council

ABN 28 642 080 520

Financial Statements

For the year ended 30 June 2022

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VICTORIAN MENTAL ILLNESS AWARENESS COUNCIL
ABN 28 642 080 520

STATEMENT OF PROFIT OR LOSS AND OTHER COMPREHENSIVE INCOME
FOR THE YEAR ENDED
30 JUNE 2022

	Note	2022 \$	2021 \$
Revenue from ordinary activities	2	4,251,277	2,641,855
Employee benefits expense		(2,640,776)	(2,023,078)
Depreciation and amortisation expense		(8,689)	(9,472)
Amortisation of right of use asset - leased offices		(34,703)	(38,246)
Finance costs		(4,136)	(6,889)
Consultants fees		(136,678)	(125,261)
Direct program expenses		(114,210)	(78,113)
Rent and rates		(6,622)	(5,550)
Other expenses from ordinary activities		<u>(352,595)</u>	<u>(223,838)</u>
Surplus before income tax expense		952,868	131,408
Income tax expense	1(h)	-	-
Other comprehensive income (net of tax)		<u>-</u>	<u>-</u>
Total comprehensive income after income tax expense for the year		<u><u>952,868</u></u>	<u><u>131,408</u></u>

The accompanying notes form part of these financial statements.

VICTORIAN MENTAL ILLNESS AWARENESS COUNCIL
ABN 28 642 080 520

STATEMENT OF FINANCIAL POSITION
AS AT 30 JUNE 2022

	Note	2022 \$	2021 \$
CURRENT ASSETS			
Cash and cash equivalents	3	4,957,934	2,223,188
Trade and other receivables	4	76,659	10,286
TOTAL CURRENT ASSETS		<u>5,034,593</u>	<u>2,233,474</u>
NON-CURRENT ASSETS			
Property, plant and equipment	5	99,028	146,850
TOTAL NON-CURRENT ASSETS		<u>99,028</u>	<u>146,850</u>
TOTAL ASSETS		<u>5,133,621</u>	<u>2,380,324</u>
CURRENT LIABILITIES			
Trade and other payables	6	448,014	187,223
Income in advance	7	2,482,381	915,690
Provisions	8	137,713	97,961
Lease liability	9	38,068	39,837
TOTAL CURRENT LIABILITIES		<u>3,106,176</u>	<u>1,240,711</u>
NON-CURRENT LIABILITIES			
Income in advance	7	142,840	142,768
Provisions	8	714	20,179
Lease liability	9	37,698	83,341
TOTAL NON-CURRENT LIABILITIES		<u>181,252</u>	<u>246,288</u>
TOTAL LIABILITIES		<u>3,287,428</u>	<u>1,486,999</u>
NET ASSETS		<u>1,846,193</u>	<u>893,325</u>
MEMBERS' FUNDS			
Retained Surplus		1,846,193	893,325
TOTAL MEMBERS' FUNDS		<u>1,846,193</u>	<u>893,325</u>

The accompanying notes form part of these financial statements.

VICTORIAN MENTAL ILLNESS AWARENESS COUNCIL
ABN 28 642 080 520

STATEMENT OF CHANGES IN EQUITY
FOR THE YEAR ENDED
30 JUNE 2022

	Retained Earnings	Total
	\$	\$
Balance at 1 July 2020	761,917	761,917
Surplus attributable to the entity	131,408	131,408
Other comprehensive income	<u>-</u>	<u>-</u>
Balance at 30 June 2021	893,325	893,325
Surplus attributable to the entity	952,868	952,868
Other comprehensive income	<u>-</u>	<u>-</u>
Balance at 30 June 2022	<u><u>1,846,193</u></u>	<u><u>1,846,193</u></u>

The accompanying notes form part of these financial statements.

VICTORIAN MENTAL ILLNESS AWARENESS COUNCIL
ABN 28 642 080 520

STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED
30 JUNE 2022

	Note	2022 \$	2021 \$
CASH FLOWS FROM OPERATING ACTIVITIES			
Receipts from government and sponsors		5,430,099	2,190,916
Other grants, donations and sundry income received		511,684	46,010
Payments to suppliers and employees		(3,160,683)	(2,484,423)
Interest received		<u>764</u>	<u>1,181</u>
Net cash provided by/(used in) operating activities	10	<u>2,781,864</u>	<u>(246,316)</u>
CASH FLOWS FROM INVESTING ACTIVITIES			
Payments for purchase of plant and equipment		(6,200)	(5,800)
Proceeds on sale of assets		<u>-</u>	<u>-</u>
Net cash used in investing activities		<u>(6,200)</u>	<u>(5,800)</u>
CASH FLOWS FROM INVESTING ACTIVITIES			
Repayment of lease liabilities		<u>(40,918)</u>	<u>(39,662)</u>
Net cash used in investing activities		<u>(40,918)</u>	<u>(39,662)</u>
Net cash increase/(decrease) cash held		2,734,746	(291,778)
Cash at the beginning of the year		<u>2,223,188</u>	<u>2,514,966</u>
Cash at the end of the year	3	<u><u>4,957,934</u></u>	<u><u>2,223,188</u></u>

The accompanying notes form part of these financial statements.

VICTORIAN MENTAL ILLNESS AWARENESS COUNCIL
ABN 28 642 080 520

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED
30 JUNE 2022

Note 1: Statement of Significant Accounting Policies

Financial Reporting Framework

The Committee has determined that the Association is not a reporting entity because it is unlikely there are users of these financial statements who are not in a position to require the preparation of reports tailored to their information needs.

Accordingly, these financial statements have been prepared to satisfy the Committee's reporting requirements under the *Australian Charities and Not-for-profits Commission Act 2012*. The Association is a not-for-profit entity for financial reporting purposes under Australian Accounting Standards.

Statement of Compliance

The financial statements have been prepared in accordance with the mandatory Australian Accounting Standards applicable to entities reporting under the *Australian Charities and Not-for-profits Commission Act 2012*. These special purpose financial statements comply with all the recognition and measurement requirements in Australian Accounting Standards except for those specified in AASB 15 *Revenue from Contracts with Customers* and AASB 1058 *Income of Not-for-Profit Entities* as in accounting for income, recognition of all grant income has been deferred until the related expenses are incurred without assessing whether there are enforceable performance obligations to transfer a good or service to a third party which are sufficiently specific to know when the performance obligation has been satisfied. Refer to Note 1(f) Revenue below.

Basis of Preparation

The financial statements, except for the cash flow information, have been prepared on an accrual basis and are based on historical costs unless otherwise stated in the notes. The material accounting policies adopted in the preparation of these financial statements are presented below and have been consistently applied unless stated otherwise. The amounts presented in the financial statements have been rounded to the nearest dollar.

Impact of COVID-19

VMIAC has not experienced any significant financial impacts in the 2022 Financial year due to the extraordinary circumstances relating to COVID 19.

Operationally, staff are and will continue to be working from home, face to face program delivery has decreased, however all identified necessary face to face support is continuing as required. As with all businesses, many of the normal practices carried out by VMIAC were altered to ensure safe continuous service for staff and clients, resulting in an increase in expenditure associated with PPE and IT equipment to support remote working and delivery.

COVID has resulted in an expansion of business practices for VMIAC, resulting in a small increase in funding for the Financial year. It is anticipated that as Community needs continue to increase next financial year, VMIAC will be successful in delivering these services, offering an increase in opportunities for VMIAC.

VMIAC received the Government cashflow boost and does not have any debt / loans that it is not be able to service in the normal manner through this period and holds sufficient cash reserves to meet all short-term operating costs. The Board do not believe COVID-19 will have an impact on VMIAC's ability to continue as a going concern.

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED
30 JUNE 2022

Note 1: Statement of Significant Accounting Policies (cont.)

a. Cash and Cash Equivalents

Cash and cash equivalents includes cash on hand, deposits held at call with banks, and other short-term highly liquid investments with original maturities of three months or less.

b. Property, Plant and Equipment

Leasehold improvements and office equipment are carried at cost less, where applicable, any accumulated depreciation or amortisation.

The depreciable amount of all property, plant and equipment is depreciated over the useful lives of the assets to the Association commencing from the time the asset is held ready for use. Leasehold Improvements are amortised over the shorter of either the unexpired period of the lease or the estimated useful lives of the improvements.

c. Employee Entitlements

Short-term employee benefits

Provision is made for the Association's obligation for short-term employee benefits. Short-term employee benefits are benefits (other than termination benefits) that are expected to be settled wholly before 12 months after the end of the annual reporting period in which the employees render the related service, including wages, salaries and sick leave. Short-term employee benefits are measured at the (undiscounted) amounts expected to be paid when the obligation is settled.

The Association's obligations for short-term employee benefits such as wages, salaries and sick leave are recognised as part of current trade and other payables in the statement of financial position.

Other long-term employee benefits

Provision is made for employees' long service leave and annual leave entitlements not expected to be settled wholly within 12 months after the end of the annual reporting period in which the employees render the related service. Other long-term employee benefits are measured at the present value of the expected future payments to be made to employees. Expected future payments incorporate anticipated future wage and salary levels, durations of service and employee departures and are discounted at rates determined by reference to market yields at the end of the reporting period on government bonds that have maturity dates that approximate the terms of the obligations. Upon the remeasurement of obligations for other long-term employee benefits, the net change in the obligation is recognised in profit or loss as part of employee benefits expense.

The Association's obligations for long-term employee benefits are presented as non-current provisions in its statement of financial position, except where the Association does not have an unconditional right to defer settlement for at least 12 months after the end of the reporting period, in which case the obligations are presented as current provisions.

d. Provisions

Provisions are recognised when the Association has a legal or constructive obligation, as a result of past events, for which it is probable that an outflow of economic benefits will result and that outflow can be reliably measured. Provisions are measured at the best estimate of the amounts required to settle the obligation at the end of the reporting period.

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED
30 JUNE 2022

Note 1: Statement of Significant Accounting Policies (cont.)

e. Impairment of Assets

At the end of each reporting period, the Association reviews the carrying values of its tangible and intangible assets to determine whether there is an indication that those assets have been impaired. If such an indication exists, the recoverable amount of the asset, being the higher of the asset's fair value less costs to sell and value in use, is compared to the asset's carrying amount. Any excess of the asset's carrying value over its recoverable amount is recognised in the statements of profit or loss and other comprehensive income.

f. Revenue

Revenue is measured at the fair value of the consideration received or receivable after taking into account any discounts.

Grant Income

All grant income has been deferred upon receipt and not recognised as revenue until the related expenses are incurred, without assessing whether enforceable performance obligations exist. This does not comply with AASB 15 *Revenue from Contracts with Customers* or AASB 1058 *Income of Not-for-Profit Entities*. This policy has been adopted to ensure grant income from all sources is consistently recognised.

Interest Revenue

Interest revenue is recognised using the effective interest rate method, which for floating rate financial assets is the rate inherent in the instrument.

Donations

Donation income is recognised when the Association obtains control over the funds which is generally at the time of receipt.

All revenue is stated net of the amount of goods and services tax (GST).

g. Goods and Services Tax (GST)

Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Taxation Office (ATO). Receivables and payable are stated inclusive of the amount of GST receivable or payable. The net amount of GST recoverable from, or payable to, the ATO is included with other receivables or payables in the assets and liabilities statement.

h. Income Tax

The Association is exempt from paying income tax by virtue of Section 50-45 of the *Income Tax Assessment Act, 1997*. Accordingly, tax effect accounting has not been adopted.

i. The Company as Lessee

At inception of a contract, the Association assesses if the contract contains or is a lease. If there is a lease present, a right-of-use asset and a corresponding lease liability is recognised by the Association where the Association is a lessee. However, all contracts that are classified as short-term leases (lease with remaining lease term of 12 months or less) and leases of low value assets are recognised as an operating expense on a straight-line basis over the term of the lease. Initially the lease liability is measured at the present value of the lease payments still to be paid at commencement date. The lease payments are discounted at the interest rate implicit in the lease. If this rate cannot be readily determined, the Association uses the incremental borrowing rate.

VICTORIAN MENTAL ILLNESS AWARENESS COUNCIL
ABN 28 642 080 520

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED
30 JUNE 2022

Note 1: Statement of Significant Accounting Policies (cont.)

i. The Company as Lessee (cont.)

Lease payments included in the measurement of the lease liability are as follows:

- fixed lease payments less any lease incentives;
- variable lease payments that depend on an index or rate, initially measured using the index or rate at the commencement date;
- the amount expected to be payable by the lessee under residual value guarantees;
- the exercise price of purchase options, if the lessee is reasonably certain to exercise the options;
- lease payments under extension options if lessee is reasonably certain to exercise the options; and
- payments of penalties for terminating the lease if the lease term reflects the exercise of an option to terminate the lease.

The right-of-use assets comprise the initial measurement of the corresponding lease liability as mentioned above, any lease payments made at or before the commencement date as well as any initial direct costs. The subsequent measurement of the right-of-use assets is at cost less accumulated depreciation and impairment losses. Right-of-use assets are depreciated over the lease term or useful life of the underlying asset whichever is the shortest.

Where a lease transfers ownership of the underlying asset or the cost of the right-of-use asset reflects that the Association anticipates exercising a purchase option, the specific asset is depreciated over the useful life of the underlying asset.

	2022	2021
	\$	\$
Note 2: Revenue from ordinary activities		
Operating grants	3,738,901	2,594,807
Other income	511,684	46,010
Interest received	692	1,038
	<u>4,251,277</u>	<u>2,641,855</u>
Note 3: Cash and cash equivalents		
Petty cash	490	728
Cash at bank	4,814,604	2,079,692
Term deposit held for restricted purposes - VMIAC Awards - Estate of DJ Western	142,840	142,768
	<u>4,957,934</u>	<u>2,223,188</u>
Note 4: Trade and other receivables		
Trade and sundry receivables	70,072	200
Rental bond	5,000	5,000
Prepaid expenses	1,587	5,086
	<u>76,659</u>	<u>10,286</u>

VICTORIAN MENTAL ILLNESS AWARENESS COUNCIL
ABN 28 642 080 520

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED
30 JUNE 2022

	2022	2021
	\$	\$
Note 5: Property, plant and equipment		
Furniture and equipment - as cost	124,706	118,506
Less accumulated depreciation	<u>(113,383)</u>	<u>(107,523)</u>
	<u>11,323</u>	<u>10,983</u>
 Motor vehicles - as cost	 30,893	 30,893
Less accumulated depreciation	<u>(22,686)</u>	<u>(21,303)</u>
	<u>8,207</u>	<u>9,590</u>
 Leasehold improvements - at cost	 57,705	 57,705
Less accumulated depreciation	<u>(47,611)</u>	<u>(46,165)</u>
	<u>10,094</u>	<u>11,540</u>
 Right of use asset - premises at 1/22 Aintree Street Brunswick East	 177,055	 187,685
Less accumulated amortisation	<u>(107,651)</u>	<u>(72,948)</u>
	<u>69,404</u>	<u>114,737</u>
 Total property, plant and equipment	 <u><u>99,028</u></u>	 <u><u>146,850</u></u>
 Note 6: Trade and other payables		
<i>Current</i>		
Trade creditors and other accruals	87,745	38,523
Payroll liabilities payable	91,192	74,002
GST liability	<u>269,077</u>	<u>74,698</u>
	<u><u>448,014</u></u>	<u><u>187,223</u></u>
 Note 7: Income in advance		
<i>Current</i>		
Unspent grant funds - Commonwealth and State	<u><u>2,482,381</u></u>	<u><u>915,690</u></u>
 <i>Non-Current</i>		
VMIAC Awards Trust - Estate of DJ Western	<u><u>142,840</u></u>	<u><u>142,768</u></u>

VICTORIAN MENTAL ILLNESS AWARENESS COUNCIL
ABN 28 642 080 520

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED
30 JUNE 2022

	2022	2021
	\$	\$
Note 8: Provisions		
<i>Current</i>		
Employee entitlements - annual leave	107,752	87,678
Employee entitlements - time in lieu	15,239	2,526
Employee entitlements - long service leave	14,722	7,757
	<u>137,713</u>	<u>97,961</u>
<i>Non-Current</i>		
Employee entitlements - long service leave	<u>714</u>	<u>20,179</u>
Note 9: Lease Liability		
<i>Current</i>		
Lease liabilities	<u>38,068</u>	<u>39,837</u>
<i>Non-current</i>		
Lease liabilities	<u>37,698</u>	<u>83,341</u>
During 2021 the Company entered into a lease for office premises at 1/22 Aintree Street Brunswick East. The lease is due to expire in June 2024.		
	2022	2021
	\$	\$
Note 10: Reconciliation of cash flow from operations with surplus ordinary activities after income tax		
Surplus after income tax expense	952,868	131,408
<i>Non-cash flows in surplus:</i>		
- Depreciation and amortisation	43,392	47,718
- Interest	4,136	6,889
<i>Changes in assets and liabilities:</i>		
- Decrease/increase trade and sundry receivables	(66,373)	6,268
- Increase/decrease trade and other payables	260,791	(7,820)
- Increase/decrease income in advance	1,566,763	(409,962)
- Increase/decrease provisions	20,287	(20,817)
Net cash provided by/(used in) operating activities	<u>2,781,864</u>	<u>(246,316)</u>

VICTORIAN MENTAL ILLNESS AWARENESS COUNCIL
ABN 28 642 080 520

STATEMENT BY MEMBERS OF THE COMMITTEE
FOR THE YEAR ENDED
30 JUNE 2022

The Committee has determined that the Association is not a reporting entity and that this special purpose report should be prepared in accordance with the accounting policies outlined in Note 1 to the financial statements.

In the opinion of the committee of Victorian Mental Illness Awareness Council Inc.:

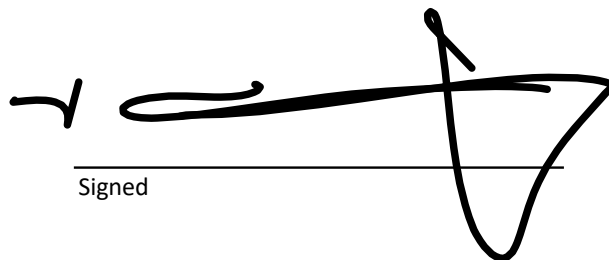
- a) the financial statements and notes of Victorian Mental Illness Awareness Council Inc. are in accordance with the *Associations Incorporation Reform Act (Vic) 2012* and the *Australian Charities and Not-for-profits Commission Act 2012*:
- i. giving a true and fair view of its financial position as at 30 June 2022 and of its performance for the financial year ended on that date; and
 - ii. complying with the *Australian Charities and Not-for-profits Commission Regulation 2013*; and
- b) there are reasonable grounds to believe that Victorian Mental Illness Awareness Council Inc. will be able to pay its debts as and when they become due and payable.

This statement is made in accordance with a resolution of the Committee and is signed for and on behalf of the Committee by:

Ali Pain
Signed



Dated: 21 October 2022



Signed

Dated: 21 October 2022

VICTORIAN MENTAL ILLNESS AWARENESS COUNCIL
ABN 28 642 080 520

**AUDITOR'S INDEPENDENCE DECLARATION UNDER SECTION
60-40 OF THE AUSTRALIAN CHARITIES AND NOT-FOR-PROFITS COMMISSION ACT 2012**

In accordance with the requirements of section 60-40 of the *Australian Charities and Not-for-profits Commission Act 2012*, as auditor for the audit of Victorian Mental Illness Awareness Council Inc. for the year ended 30 June 2022, I declare that, to the best of my knowledge and belief, there have been:

- i. no contraventions of the auditor independence requirements of the *Australian Charities and Not-for-profits Commission Act 2012* in relation to the audit; and
- ii. no contraventions of any applicable code of professional conduct in relation to the audit.



Sean Denham

Dated: 24 October 2022
Sean Denham & Associates
Suite 1, 707 Mt Alexander Road
Moonee Ponds VIC 3039



SEAN DENHAM
A S S O C I A T E S

**INDEPENDENT AUDIT REPORT TO THE MEMBERS OF
VICTORIAN MENTAL ILLNESS AWARENESS COUNCIL**

Opinion

I have audited the accompanying financial report, of Victorian Mental Illness Awareness Council Inc., which comprises the statement of financial position as at 30 June 2022, statement of changes in equity, statement of cashflows and the statement of profit or loss and other comprehensive income for the year then ended, notes comprising a summary of significant accounting policies and the certification by members of the committee.

In my opinion, the accompanying financial report of Victorian Mental Illness Awareness Council Inc. has been prepared in accordance with Div 60 of the *Australian Charities and Not-for-profits Commission Act 2012 (ACNC Act)* including:

- a) giving a true and fair view of the Association's financial position as at 30 June 2022 and of its financial performance for the year then ended; and
- b) complies with Australian Accounting Standards to the extent described in Note 1 to the financial statements, and the requirements of the *Associations Incorporation Reform Act 2012 (Vic)* and Div 60 of the *Australian Charities and Not-for-profits Commission Regulation 2013*.

Basis for Opinion

I conducted my audit in accordance with Australian Auditing Standards. My responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Report section of my report. I am independent of the association in accordance with the *Associations Incorporation Reform Act 2012 (Vic)* 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 my audit of the financial report in Australia. I have also fulfilled my other ethical responsibilities in accordance with the Code.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

Emphasis of Matter - Basis of Accounting

We draw attention to Note 1 to the financial report, which describes the basis of accounting. The financial report has been prepared for the purpose of fulfilling the association's reporting responsibilities under the *Associations Incorporation Reform Act 2012 (Vic)* and the *Australian Charities and Not-for-profits Commission Act 2012*. As a result, the financial report may not be suitable for another purpose. My opinion is not modified in respect of this matter.

Responsibility of the Committee for the Financial Report

The committee of the association are responsible for the preparation of the financial report that gives a true and fair view and have determined that the basis of preparation described in Note 1 of the financial report is appropriate to meet the requirements of the *Associations Incorporation Reform Act 2012 (Vic)* and the *Australian Charities and Not-for-profits Commission Act 2012* and the needs of the members. The committee's responsibility also includes such internal control as the committee determine is necessary to enable the preparation of a financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the committee are responsible for assessing the association's ability to continue as a going concern, disclosing, as applicable, matters relating to going concern and using the going concern basis of accounting unless the committee either intend to liquidate the association or to cease operations, or have no realistic alternative but to do so.

Auditor's Responsibility for the Audit of the Financial Report

My objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes my opinion.

Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of the financial report.

As part of an audit in accordance with Australian Auditing Standards, I exercise professional judgement and maintain professional scepticism throughout the audit. I also:

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for my opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the association's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the committee.
- Conclude on the appropriateness of responsible entities' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the association's ability to continue as a going concern. If I conclude that a material uncertainty exists, I am required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify my opinion. My conclusions are based on the audit evidence obtained up to the date of my auditor's report. However, future events or conditions that may cause the to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.

I communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that I identify during my audit.



Sean Denham

Dated: 24 October 2022
Suite 1, 707 Mt Alexander Road
Moonee Ponds VIC 3039


VICTORIAN MENTAL ILLNESS AWARENESS COUNCIL

CERTIFICATE BY MEMBER OF THE COMMITTEE

I James Horton, of 301/77 Nicholson St, Brunswick East, VIC 3057, certify that:
(name) (address)

a. I attended the annual general meeting of the Association held on 24/11/2022.
(date)

b. The financial statements for the year ended 30 June 2022 were submitted to the members of the Association at its annual general meeting.



Committee member

Dated: 07/12/2022





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