



WAAMH

**Western Australian Association
for Mental Health**



annual report
2012-13



WAAMH

Western Australian Association
for Mental Health

Western Australian Association
for Mental Health Inc.

City West Lotteries House
2 Delhi Street
West Perth WA 6005

ABN: 15 165 640 637

Telephone: 9420 7277

Facsimile: 9420 7280

Email: reception@waamh.org.au

Website: www.waamh.org.au



Contents

About WAAMH	2
President's Report.....	4
Executive Director's Report	6
Our Strategic Direction	7
Leadership & Advocacy.....	10
Policy & Sector Development	12
Workforce Development & Training.....	14
Mental Health Promotion	16
Organisational Chart.....	21
Board of Management	22
WAAMH Staff.....	23
Membership.....	24
Our Members.....	26
Financial Performance.....	28
Financial Reports	
Statement by the Board, for the financial year ending 30 June 2013	30
Independent Auditor's Report	31
Auditor's Certification Statement	32
Statement of Financial Position as at 30 June 2013	33
Profit & Loss Statement for the financial year ending 30 June 2013	34
Notes to and forming part of the accounts for the year ended 30 June 2013	36
Acknowledgements & Appreciation	40

About WAAMH

The Western Australian Association for Mental Health (WAAMH) is the peak body of the community-managed mental health sector in Western Australia, with more than 100 organisational and individual members.

Community-managed organisations provide a critical network of services that support people affected by mental illness and their families, and help them live valued lives in their community.

WAAMH has been engaged in the mental health sector for more than 50 years. We advocate for effective public policy on mental health issues, deliver workforce training and sector development, and promote positive attitudes to mental health and recovery.

Our Vision

Our vision is that Western Australian community-managed mental health organisations will lead the way in supporting, and promoting the human rights of people with mental illness and their families and carers, through the provision of inclusive, well-governed community-based services focused on recovery.

Our Role

We support the development of the community-managed mental health sector, undertake systemic advocacy and representation, and influence public policy for the benefit of people with mental illness, and their families and carers. We fulfil this role by engaging in three key priority areas of work: Leadership, representation and advocacy; Sector development and training; and Mental health promotion.

Community-managed organisations provide a critical network of services that support people affected by mental illness and their families, and help them live valued lives in their community.



The Community Managed Mental Health Sector

The community managed mental health sector provides supports and services to individuals, their families and key supporters, and in doing so makes a valuable contribution to the mental health and wellbeing of Western Australians.

Community managed organisations understand community and its importance to health, wellbeing and recovery. They play an important role in mental health promotion, the early identification of individuals, families and key supporters who need support, the delivery of supports and services, treatment and prevention because:

- Recovery and community based strategies go hand in hand. Communities are where people are welcomed, form relationships, are accepted, valued and give, as well as receive support.
- The sector is ideally placed to address stigma and isolation by reaching out to marginalised people and linking them to people within local services and supports where relationships, based on trust and mutual respect, can be established.
- Community managed services are 'local' and focused on the needs of people in their 'patch'. Diverse and robust relationships and connections can be developed with a wide range of stakeholders close to where people live. These connections facilitate shared care and support and create linkages that reduce the likelihood of gaps in services and supports.
- Community managed services can focus on prevention, anticipate problems that may risk someone's hospital admission or re-admission to specialist services, and support people who are discharged from hospital, clinics or prison.

President's Report



In this my final president's report after five years in the role I will not overstate the performance of WAAMH this past year, but neither will I sell it short. There is much to celebrate just as there is much to learn from critical reflection. The mental health

reform agenda is the main yardstick by which to review the year; a continuing reform agenda to be shaped by many stakeholders, pre-eminent amongst which must be people with mental health concerns, their families and carers. There are multiple elements to this evolving agenda so naturally WAAMH has undertaken multiple responses for its part, many of which began in previous times and continued or were completed in this current period. The pages of this report will detail some of those, for you the reader to make your own assessment of our performance.

Vision

In the course of this year WAAMH has reworked its vision and strategic foci. As part of this process we developed a set of principles to guide the implementation of our work plan (refer to page 9). We can look at this list and feel there is a beacon lighting a journey into the future or we can take on the lens of each of the principles and cast our eye over the organisation and all its activities at governance and operational levels. The former option can result in a degree of complacency while the latter can be more challenging, perhaps even uncomfortable but ultimately more fruitful. I would like to think that we at WAAMH this year have inclined more to the latter option.

One area in which there is always room for greater learning is acknowledging the centrality of people who live with mental health concerns and their carers – their participation, their expertise, their experience and their views – while at the same time finding a place for the insight and knowledge of the service practitioner and leaders. It is my view that it is at the conjunction of both these that the best of mental health reform will be achieved.

On the Political Front

This was a fertile field in 2012/13, partly because of the state election in February but also because the snail-paced review of the Mental Health Act crept onto the corner of the screen. Then there was the review that wasn't of the Criminal Law (Mentally Impaired) Act 1996 for which WAAMH led a broad community advocacy to the state government involving local, national and international participants. The tardiness of these reviews, while hard to believe, will require our further engagement in the months ahead.

National Endeavour

Both state and federal governments are major players in mental health. WAAMH has continued to be active at the national level. It materially supports and is active within Community Mental Health Australia – the national peak of local peaks – and participates in the advocacy role of the Mental Health Council of Australia. The emergence of the National Disability Insurance Scheme and its conjunction with My Way, is a major issue confronting people who live with mental health issues requiring the support of the community. WAAMH is part of a state Ministerial Reference Group and actively engages in the conversation to crack open a potentially monolithic NDIS focus on disability to achieve a high level of responsiveness to people with a lived experience and their families and carers.



Governance

The constitutional reform adopted at the 2012 AGM has served WAAMH well this past year. At the Board we have also undertaken performance evaluation during the year. One area of focus leading up to this 2013 AGM has been to improve the election process for directors. We have sought to provide the voting membership with more details about people standing for election so they can exercise a more informed vote than may have been possible in the past.

Regrets

I have a couple of regrets as I leave this role. The first is what I see as a shortcoming right across the mental health sector to promote more relationship with the natural world in the recovery process. Multiple international and national policy documents make no reference to the potential role of a relationship with nature in mental health and well-being. Neither could I find any reference to nature in our own state Mental Health 2020 policy, a document which will guide mental health reform in this state for this decade. Yet the connection between recovery and nature is recognised and evidenced based. Why is this gap so? Why do we lack an appreciation of the connections that nature teaches which are healing and life-giving?

This leads to my second regret. This is the lack of engagement by the community services sector generally with the ecological crisis and the responsibility of their organisation for environmental sustainability. Every natural life system of planet earth is under threat, yet we cannot find a link between this potential catastrophe and the service goals, processes and governance of our organisations. I would suggest that this reflects a general malaise in our dominant Australian societal culture of disconnection from nature, from its affirmation of life, its intercommunion processes of collaboration and interdependence, all of which work together to give hope. And isn't hope the energy of recovery?

Acknowledgements

Our collaboration with the Mental Health Commission has continued on numerous fronts with many positive outcomes achieved. It is difficult to capture in few words the fullness of our relationship with Eddie Bartnik and the many Commission staff with whom we relate. Mutual respect, openness and a strong sense of working together go part of the way.

We all know that the locus of the effectiveness of an organisation is in the vitality and competence of the people fulfilling their respective roles. It is with confidence that I can say WAAMH has been well served by its directors. In particular I want to acknowledge the enormous contribution of Sandra Vidot and Joe Calleja whose terms of office conclude with this AGM. They have both brought an expansive vision to the Board, challenging in its many dimensions and priorities and guided by the principle of service in the role. On behalf of the Membership, thank you Sandra, thank you Joe.

Finally to the staff team led by Rod Astbury: Let me tell you they have put in. They have worked with competence and commitment, holding to the vision of people with mental health issues achieving recovery for themselves. They will face the challenge of continually increasing the competence of WAAMH, and their own individually, that the dynamic nature of the reform agenda will require. It has been a delight to engage with you and I thank you for your great effort.

I extend my very best wishes to the future Board of WAAMH and the staff team.

John Gherardi

Executive Director's Report



It is hard to imagine a period in which so many major environmental developments are in play that will significantly influence the future of the community mental health sector. The Stokes review of discharge practices in the

mental health system and the state government's subsequent initiation of a ten-year service plan, the re-election of the Barnett government, the progress of the Mental Health Bill, the progress towards a National Disability Insurance Scheme with mental health included and the imminent federal election are all major events for the sector.

In this context the completion by the Board and Executive of WAAMH's strategic plan 2013-15 is a significant development as it provides clear signposts for the organisation to navigate through these changes.

I think WAAMH has responded well to the challenge we set twelve months ago to build real infrastructure for the sector to respond to the environment of change. The major body of work that we have delivered in the past year that can be seen in this report, from our advocacy on legislative reform, campaigning for enlightened policy change, developing a strategic direction for the sector, building service systems and intelligence, providing development and training opportunities, supporting innovative programs and creatively promoting positive attitudes to mental health will strengthen the sector and bring real benefits to people with mental health issues and their families.

As the activities of the federal government have become increasingly significant, I am pleased that WAAMH has substantially supported its national peak body Community Mental Health Australia and its partner body the Mental Health Council of Australia in engaging with the national agenda and ensuring it reflects the core competence the community sector has in the delivery of recovery-oriented services, in countering stigma and discrimination and in promoting positive attitudes to social inclusion for people with mental health issues and their families.

I'm also proud of way WAAMH has gone about all its activities and the commitment it has shown to the principles of Recovery and to working in partnership with consumers and families and with the real experience of people with lived experience of mental health issues at its centre.

I'd like to thank the WAAMH team who have again shown their passion and commitment to our work, and look forward to another exciting year of achievements in 2013/4.



Rod Astbury

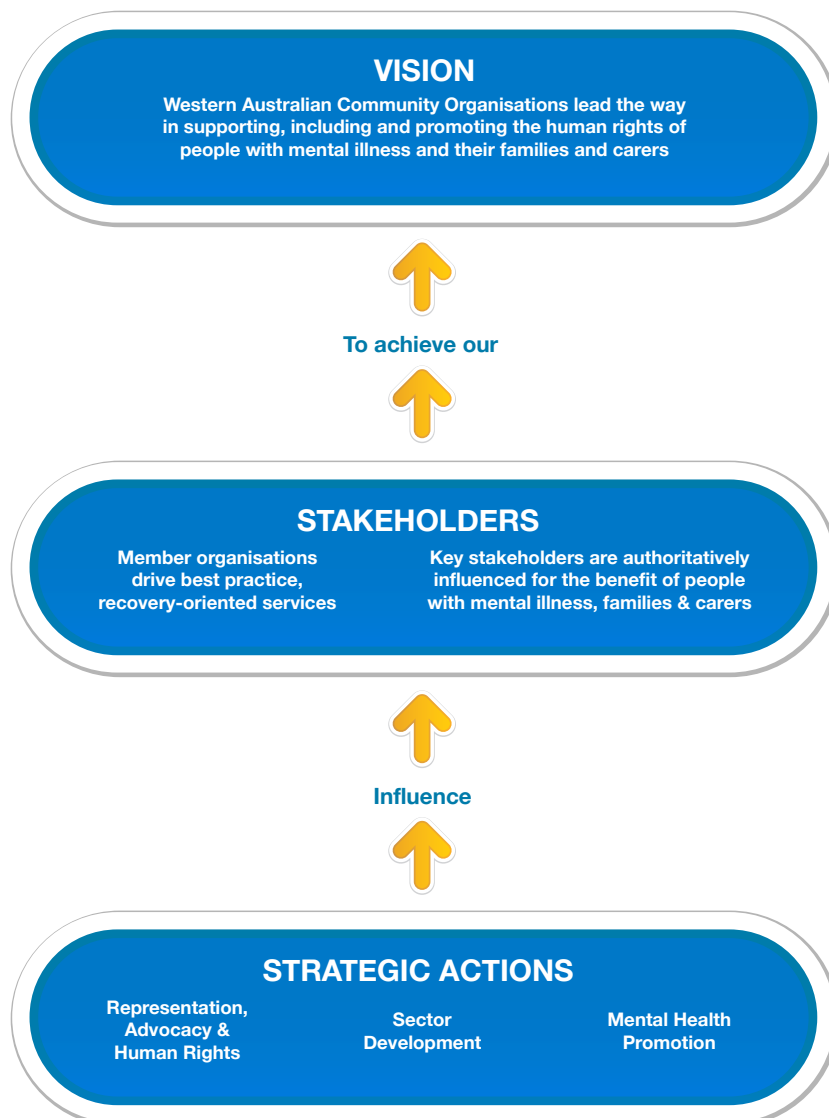


Our Strategic Direction

In 2012/13 the Board and Executive set the strategic direction for WAAMH for the three year period from 2013/14 to 2015/16.

The strategy can be viewed in two parts; outward directed strategic actions that influence key stakeholders to achieve the Associations vision, and core processes, comprising the membership base, guiding principles, finances, people and systems that drive these activities.

WAAMH's Outward – Directed Activities



Our Strategic Direction

WAAMH's Core Processes

Enable us to execute our strategic actions



Enabling Resources



Our...

and our...

Built on our...

PEOPLE AND SYSTEMS

Recovery-focussed people with leading edge skills, knowledge & attributes

Quality, fit for purpose systems and facilities

FINANCE

Secure financial base

Diverse income sources

GUIDING PRINCIPLES

- Recovery Orientation
- Human Rights
- Social Inclusion
- Personalisation & Choice
- Best Practice

REPRESENTATIVE MEMBERSHIP

- Size
- Geography
- Client Group
- Structure
- Sector
- Role
- Consumer & Carer

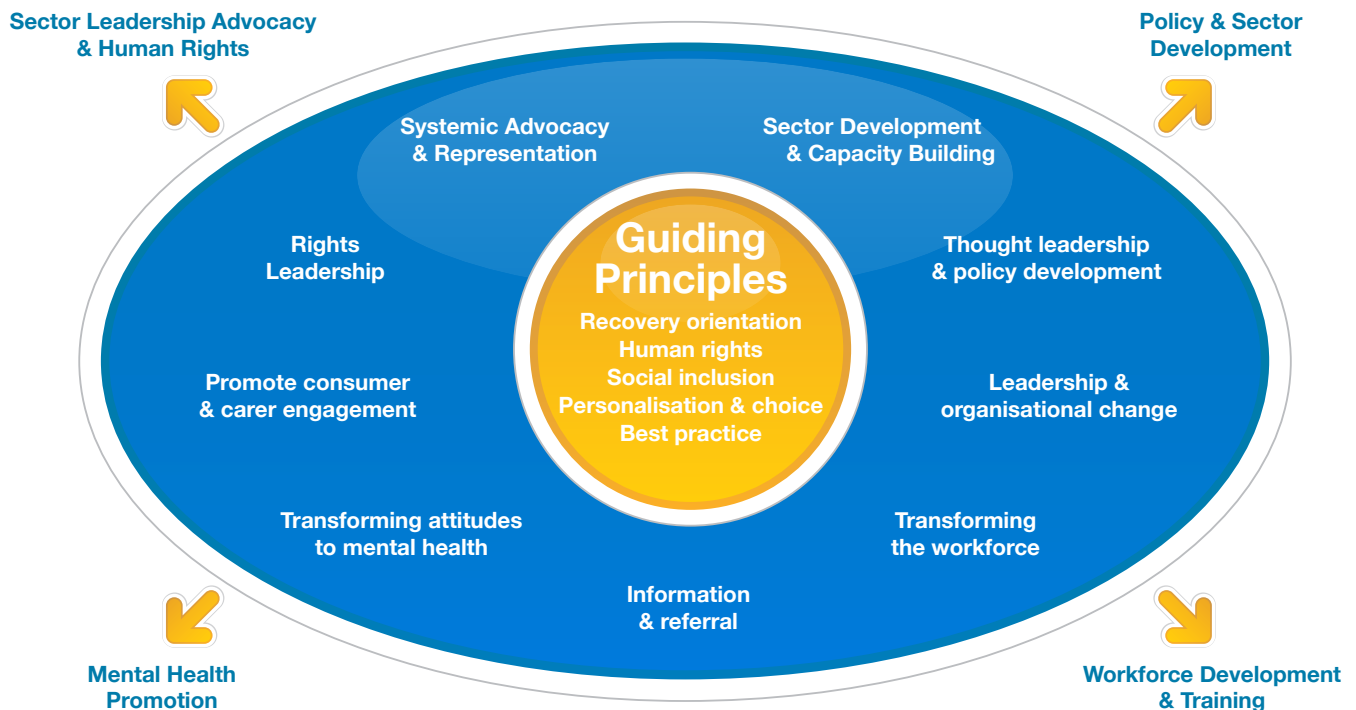


WAAMH engages in three key priority areas of work which is captured in the graphic below:

- Leadership, representation and advocacy; by drawing on the expertise and experiences of our members, consumers and carers to advocate locally and nationally for effective public policy on mental health and human rights issues.
- Sector development; by supporting the sector to deliver recovery-oriented, person-centred and family-inclusive services, through policy development, capacity building, and targeted workforce development and training activities.
- Mental health promotion; by promoting positive attitudes and informed dialogue about mental health.

WAAMH's Core Activities 2013-15

Lead the way in supporting, including & promoting the human rights of people with mental health issues & their families



Leadership & Advocacy

By drawing on the expertise and experience of our members, consumers and carers, WAAMH advocates locally and nationally for effective public policy on mental health issues. By representing our members and acting as a united voice, we have the capacity to influence and inform federal, state and local governments how policies affect people living with a mental illness.

In the 2012/13 financial year, we undertook the following Leadership & Advocacy activities:

- Sector Forum: *Readiness for Reform*
July 2012
- Sector Forum: *Perspectives on Reform*
February 2013
- Criminal Law Act Campaign
- 2013/14 pre-Budget Submission
- NDIS Bill 2012 Submission
- Mental Health Bill 2012 Submission
- Justice Reinvestment Report

Forums

In July 2012 WAAMH held a two day forum (*Readiness for Reform*) in partnership with the Mental Health Commission (MHC) with funding from the Fostering Partnerships Program to inform the sector about the **Economic Audit Committee** reforms. There were 79 individuals representing 47 organisations who attended the forum.

WAAMH hosted a **sector forum** on February 25 (*Perspectives on Reform*), attended by approximately 130 sector representatives. The forum included presentations and discussions on the current mental health environment (Commissioner Eddie Bartnik); individualized funding (Theresa Williams); the Sector Mapping Report (Barbara Gatter and Colin Penter); and a pre-election panel discussion (Hon Helen Morton, Hon Alison Xamon and Keith Wilson AO). Feedback received during our evaluation of the sector forum rated it as 'excellent' or 'good' by more than 80% of respondents.

Planning has commenced on the **second sector forum** for 2013, to be held on October 30, which will have the theme 'Building Blocks of Reform'. It will focus on resourcing and capacity building for change and will officially launch the Sector Strategic Framework, the online service directory and new WAAMH website.



Submissions

WAAMH also contributed to a substantial campaign for an immediate, transparent and genuinely consultative review of the **Criminal Law (Mentally Impaired Accused) Act** in the lead up to the state election culminating in the publication of a full page advertisement in *The West Australian* newspaper supported by more than 25 organisations and 70 individuals. Both major political parties committed to conducting a transparent review of the Act and WAAMH welcomes the subsequent initiation of this process by the re-elected government.

During the financial year, we prepared the community mental health sector **2013/14 Pre-Budget** submission and in partnership with the WA Peaks Forum's peak body organisations, contributed to the Western Australian Council of Social Service (WACOSS) pre budget submission for the WA community sector.

Further, WAAMH prepared a submission on the **National Disability Insurance Scheme Bill 2012** and a submission on the **Mental Health Bill 2012**.

WAAMH contributed to a report, in collaboration with WACOSS and the Western Australian Network of Alcohol and other Drug Agencies (WANADA), promoting **justice reinvestment** as an effective and efficient approach to justice and community safety. The report was released during the state election campaign and subsequently presented on the topic to the Senate Standing Committee Constitutional Affairs Committee.

By representing our members and acting as a united voice, we have the capacity to influence and inform federal, state and local governments how policies affect people living with a mental illness.

Policy & Sector Development

WAAMH supports the mental health sector to develop recovery orientated, person-centred, and family-inclusive services through sharing its expertise, fostering collaboration, delivering targeted workforce development and professional training courses. WAAMH also coordinates unique projects to implement support services for individuals with mental illness to gain meaningful employment, as a vehicle for recovery and social inclusion.

In the 2012/13 financial year, we undertook the following Sector Development activities:

- Sector Strategic Framework report
- Sector Mapping project
- Website contract awarded
- Joint mental health and other drugs directory
- Partners in Recovery tender process
- Agency Partnership project
- Looking Forward project
- Outcome Measurement project
- TheMHS 2014 steering committee formed
- Individual Placement & Support

WAAMH supports the mental health sector to develop recovery orientated, person-centred, and family-inclusive services through sharing its expertise, fostering collaboration, delivering targeted workforce development and professional training courses.

Reports

The final draft of the **Sector Strategic Framework** report was presented at a steering committee meeting on June 14 and the report will be finalised in July 2013. A resource kit will be developed to accompany this report.

WAAMH and WANADA have scoped the **joint directory of mental health and alcohol and other drug services** and WANADA has engaged a project officer to take carriage of this work. The joint directory is envisaged to take the form of a combined hard copy, online and web app format.

WAAMH facilitated the sectors engagement with the **Partners in Recovery** tender process; ensuring the sector was fully involved in all eight WA regions, true partnership proposals resulted and that models consistent with recovery were developed. All regions presented a tender, with seven regions represented by Medicare Local as the lead agency, one with Richmond Fellowship of WA as the lead and all with Community Managed Mental Health organisations as consortium partners.



Projects

Barbara Gatter and Colin Penter presented on the **sector mapping** project at the Sector Forum hosted by WAAMH on the February 25. The contract for the development of the **web directory** and IT network has been awarded to Eduka Inc, with expected completion by August 2013.

WAAMH has developed a tool kit to accompany the Partnering Ahead report of the **Agency Partnership Project** which will be available on the upgraded WAAMH website.

WAAMH has engaged with the *Looking Forward Project* to develop the capability of the sector to respond effectively with Aboriginal people with mental issues, their families and communities.

The near final draft of the **Fostering Partnerships – Outcomes Measures Project** has been provided to the taskforce and a forum is planned to introduce the material to sector stakeholders. The expected date for completion of the project is October 2013.

Individual Placement & Support

WAAMH continues to promote the development of the Individual Placement & Support competitive employment model in WA and hosted an IPS showcase on April 11, attended by 48 Disability Employment Services and public and community-managed Mental Health Service representatives. Strong momentum has gathered for partnerships between public mental health services and disability employment providers on IPS since the April showcase, with two metropolitan and two regional partnerships substantially underway. WAAMH has established a strong relationship with the Head of Social Inclusion and Recovery Research, Dr Geoff Waghorn at the Queensland Centre for Mental Health Research, to support data collection and analysis of the program.

TheMHS 2014

WAAMH is providing coordination support to the TheMHS 2014 conference which will be held in Perth. The first formal Steering Group meeting was held in December 2012. Seven monthly Steering Group workshop meetings have been held so far. Membership of the group includes people with a lived experience of mental illness, family members, carers, clinicians, support staff, peer workers and managerial staff from the public, private and community sectors, and staff from the Mental Health Commission. The conference theme has been identified, *What We Share Makes Us Strong* and the development of the conference poster is in its final stages.

Workforce Development & Training

WAAMH offers a range of courses targeted to meet specific needs in the mental health sector and is committed to providing training opportunities to enhance the skill development of the mental health workforce.

In the 2012/13 financial year, we undertook the following Training activities:

- Support Needs Analysis
- Trainers Network Group
- eLearning program
- Certificate IV graduation
- New training courses

WAAMH has convened a sector reference group to advise and contribute to a sector wide **Support Needs Analysis** to address the workforce development and training gaps within the sector with a focus on the coming two years. The report is in final draft form and will be communicated to the sector early in the new financial year.

WAAMH initiated a **Trainers Network Group**, providing an opportunity for trainers to meet to share ideas and resources, discuss training matters, avoid duplication of training, introduce new initiatives and provide support.

A collaborative group of community managed and public mental health service providers are working on the development of an on-line **eLearning** orientation program for mental health workers in the CMO sector.

During this financial year WAAMH launched the Reception Responses course for frontline staff to learn appropriate responses for difficult situations.

Certificate IV Graduation

WAAMH hosted a graduation ceremony in March for the 2012 Certificate IV in Mental Health intake.

At the event held at Kings Park, 33 students graduated and guests from Wodonga Tafe and Vicserv were invited to attend.

New training courses for 2013/14

The Mental Health and Behaviour Interventions one day interactive course has been developed to assist workers in recognising and understanding mental illness symptoms and how to support positive behaviours.

The Applied Suicide Intervention Skills Training (ASIST) two day workshop is for caregivers who want to feel more comfortable, confident and competent in helping to prevent the immediate risk of suicide.

WAAMH offers a range of courses targeted to meet specific needs in the mental health sector and is committed to providing training opportunities to enhance the skill development of the mental health workforce.



Facilitated Training

Training topic	Sessions	Participants	Outline
National Standards for Mental Health Services WAAMH	3	45	Provides participants with a background to the National Standards for Mental Health Services, and a breakdown of each of the ten standards. It focusses on the principles of recovery oriented mental health practice.
Working with Aboriginal People Waarlitj Consultants	3	41	Interactive full day workshop provides real life practical information and strategies in working in a culturally sensitive, respectful and effective way with Aboriginal people, including Recovery Oriented MH Practice.
Social Inclusion Inclusion WA	4	62	Experiential workshop whereby participants discuss real and practical methods that enable them to assist people with mental illness to form meaningful connections in their community. Explores the realities of enhancing community presence, participation, choice and contribution while enabling individuals to engage in valued social roles.
Mental Health First Aid Holistic First Aid	5	62	Two day course equips participants with the skills and resources to be able to recognise and respond to someone with an existing or developing mental health disorder.
Reception Responses Holistic First Aid	3	51	This course is designed for reception and admin staff on the frontline of every organisation and equips them in how to respond to persons who may be distressed, angry or upset that contact the organisation.
Engaging Consumers in Services Fay Jackson	1	38	This evening presentation by Fay Jackson director of Vision in Mind focussed on how to engage consumers in service delivery.
Certificate IV in Mental Health WAAMH partnership with Vicserv and Wodonga Tafe	17	58	National qualification developed and tailored in conjunction with Vicserv and Wodonga Tafe that makes up part of the Community Services training packages. The course consists of eighteen face-to-face training days delivered in blocks of two days over a nine month period. Provides options for a career path in Community Services and Health.

Mental Health Promotion

WAAMH's longest running and most recognisable annual event is Mental Health Week, but we are also actively involved in the ongoing promotion of positive attitudes towards mental health.

WAAMH provides resources and materials to promote positive attitudes towards mental health and wellbeing in the workplace and schools, and advice on how to better respond to the challenges mental health issues present. We aim to educate the community about being mentally healthy, increase awareness of mental health issues and reduce stigma associated with mental illness.

In the 2012/13 financial year, we undertook the following Mental Health Promotion activities:

- Mental Health Week
- Event Coordination
- Media Engagement
- Developed MHW theme and branding
- School Engagement
- Information and Referral Services
- Collaboration

We aim to educate the community about being mentally healthy, increase awareness of mental health issues and reduce stigma associated with mental illness.

Mental Health Week

WAAMH, in partnership with the Mental Health Commission coordinates Mental Health Week in Western Australia.

Mental Health Week is a national event and is held every October to coincide with World Mental Health Day (10 October). It is an opportunity to promote awareness about mental health and wellbeing.

Mental Health Week is a wonderful example of what can be done through strong partnerships. We successfully engaged with the mental health sector and the broader community, while encouraging government and corporate organisations to participate.

WAAMH coordinated the opening and closing ceremonies, facilitated state-wide activities and events, developed, maintained and distributed the calendar of events and promotional materials, and implemented a state-wide communications strategy.

- Since the very first Mental Health Week, the focus has been to raise awareness surrounding mental health and WAAMH has increasingly engaged the community.
- As mental health and wellbeing has become increasingly recognized as an important part of the social and emotional structure of everyday life, there has been an increasing demand to provide education to all sectors.
- Through Mental Health Week, we identified an opportunity for mental health services to engage with the wider population of WA, encourage people to recognise simple steps to keep mentally healthy and promote discussion.
- Organisations keep approaching WAAMH to offer advice, support and training.



- Through Mental Health Week, and continued mental health promotion, WAAMH will maintain its peak body status endorsing positive mental health outcomes and informing the community.
- WAAMH recognises that each sector plays an important role in supporting Mental Health Week.
- WAAMH is perfectly placed to be able to support its membership, invite participation from schools and the workplace, to better develop its resources.
- We are on the cusp of linking the corporate, government and community sector to promote positive mental health messages and to encourage people to 'talk about mental health and wellbeing' openly.
- 2012 marked a very successful Mental Health Week with attendance very high at most events and general feedback very positive. Comments have been taken on board for various initiatives for 2013 and a continued opportunity to bring our communities together to promote mental wellbeing everywhere.

Through Mental Health Week, and continued mental health promotion, WAAMH will maintain its peak body status endorsing positive mental health outcomes and informing the community.

Opening Ceremony

WAAMH was invited to use the The Arts and Mental Health Network's inaugural 20x20 Art Exhibition as a launch pad for Mental Health Week. The Official Opening was attended by Mayor Henderson – City of Subiaco; Hon Minister Helen Morton; Eddie Bartnik, Commissioner for Mental Health; Rod Astbury, Executive Director of WAAMH; and Glenn Mitchell, 2012 Ambassador. The Arts and Mental Health Network is made up of Creative Expression Centre for Arts Therapy, DADAA, Ruah Mental Health, St John of God Community, Headspace Fremantle, North Metro Specialist Aboriginal Mental Health Service, and Joondalup/Clarkson Day Therapy.

Closing Ceremony

WAAMH and Music Feedback presented Soundblast! The Minister officially closed mental health week with the opening of the inaugural Soundblast event, and the launch of the 2012 Music Feedback CD/DVD. It is estimated approximately 2000 people connected with the event throughout the afternoon. More than 300 CD/DVDs were given away; 150 MHW resource bags with information specifically aimed at young people and 40 concert t-shirts were sold, used as prizes, or given away.

Mental Health Promotion

2012 Theme

Celebrate Connect Grow

The theme of this year's Mental Health Week was very well received. As New South Wales Mental Health Association were further ahead with their Mental Health Month planning, WA approached NSW MHA to discuss the possibility of adopting its theme, Celebrate, Connect, Grow.

Celebrate: the positive events in your life, as well as the strengths and values that have helped you through more challenging times

Connect: with others by paying attention to your close relationships, or by reaching out and making new friends

Grow: by expanding your horizons and trying something new that creates meaning and purpose for you.

Inaugural MHW activities

This year marked the launch of Turn Blue 4 a Day in the Murray Street Mall, where blue balloons were released and Mental Health Week bags were handed out containing information and resources.

This is the first year we had a Mental Health Week Ambassador, Glenn Mitchell and WAAMH hosted the first Central Park Speaker Series, with the support of GESB. Speakers included representation from Brain Ambulance, LifelineWA, MAN (Men's Advisory Network) and Ruah Mental Health. Stress Less tips were developed for the first time and distributed on posters.

Attendance

Attendance at events was successful and we were amazed at the volume of people seeking information on mental health and wellbeing. At Turn Blue 4 A Day, there were more than 2000 people in the vicinity who actively participated with the stalls. The inaugural Soundblast event in Fremantle attracted around 2000 people wondering through to listen to the music and collect information. The Opening Ceremony Art Exhibition in Subiaco drew more than 150 people and approximately 120 people attended the Central Park Speaker Series throughout the week.

This year marked the launch of Turn Blue 4 a Day in the Murray Street Mall, where blue balloons were released and Mental Health Week bags were handed out containing information and resources.



Media

The West Australian published the first Mental Health Week liftout in partnership with WAAMH, which was distributed in the newspaper on Monday 1 October, 2012.

This liftout was of no financial outlay to either WAAMH or the Commission – with exception to individual advertising – and was totally reliant on 40% paid advertising. The successful result was a very informative 12-page lift-out.

In addition to the Mental Health Week liftout, WAAMH was actively involved with the Media Planet, Mental Health in WA lift-out in *The West Australian*, published on Monday 13 May.

Video footage from the perspective of a carer, a consumer and recovery, sourced from Mental Health Week 2012 has been developed into three stories. These will be uploaded to YouTube and displayed on the WAAMH website to be used as a resource in training and also to share the experience of living with a mental illness.

A Celebrate, Connect, Grow DVD was also produced which will be an excellent tool for future promotion.

Collaboration

WAAMH attended a meeting of state mental health week sponsoring organisations in February, hosted by Mental Health Commission Australia, to share capacity nationally in MHW 2013. Regular teleconferences were held to work towards collaborating a strong mental health week nationally. Planning activity is underway for Mental Health Week 2013. A steering committee has been formulated with representatives from the sector actively participating.

WAAMH attended a one-day workshop on the direction of men's health in WA, hosted by the Men's Advisory Network. A report outlining the results will be released in August.



Mental Health Promotion

School and Workplace Engagement

WAAMH participated in the Positive Schools Conference in May 2012 and was overwhelmed with interest from teachers wanting to promote Mental Health Week and receive free school resource packs. Discussions have begun with educators to prepare resources for mental health and wellbeing within the school structure. The poster competition was launched with enthusiastic engagement and entries have been arriving in good numbers. It has also appeared in the ED section of *The West Australian*.

By establishing relationships with primary, secondary and tertiary schools and the workplace, we have discovered the passion and need for everybody to find out about mental health, and importantly how to recognise symptoms and help.

Research and anecdotal evidence tell us that mental health and wellbeing in schools and the workplace are now high policy priorities for changing behaviours. These groups are seeking some simple yet structured information to offer to students, teachers, employees and through to management.

Mental Health Week is a strong vehicle enabling WAAMH to promote mental health-related material, and facilitate events and activities to support schools recognise mental health issues and solutions.

WAAMH has developed *entry-level* material for parents and teachers to be distributed in August, 2013 and plans to release '10 Tips to Stay Mentally Healthy at Work' later this year.

Information and Referral Services

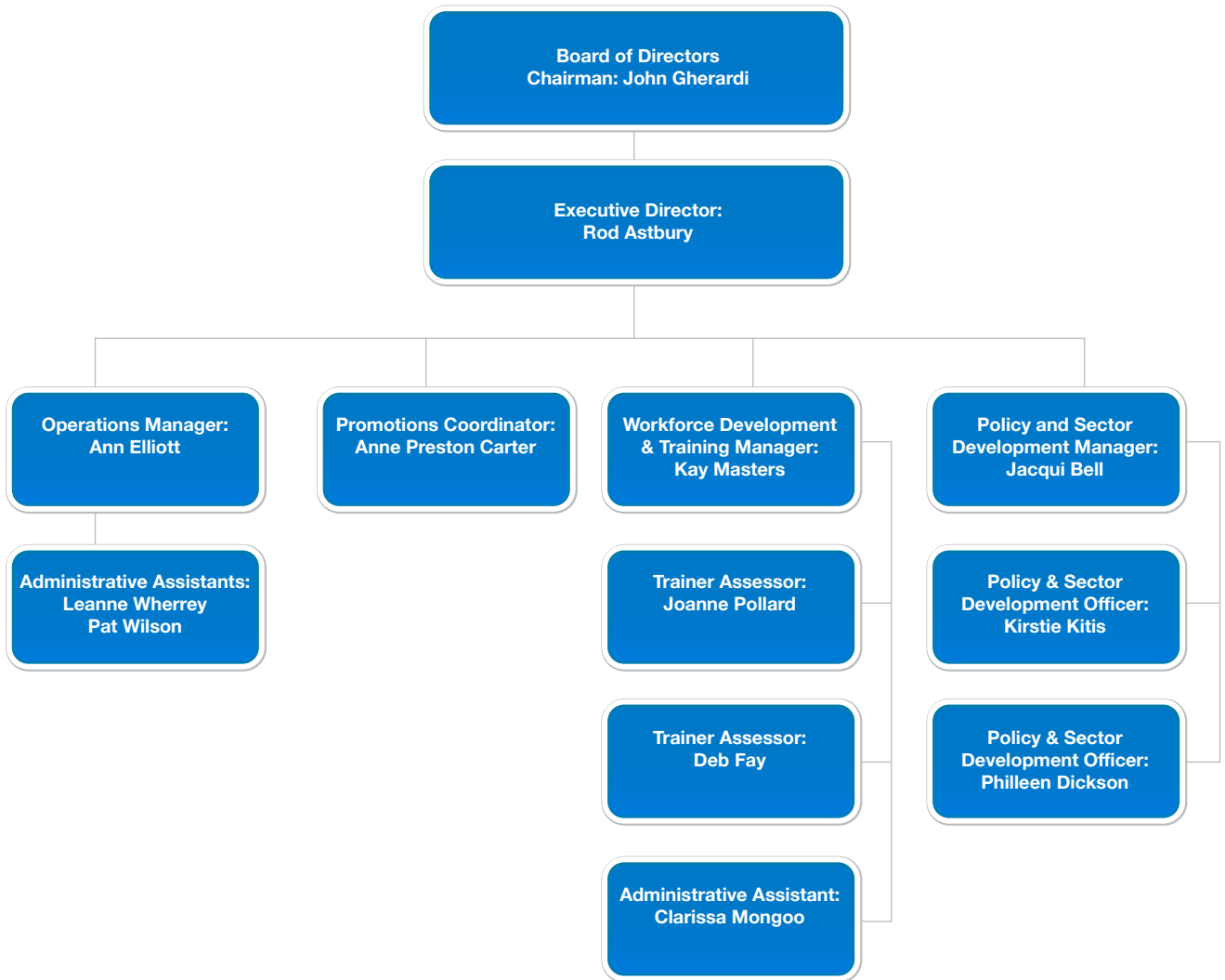
Between the period from July 2012 to June 2013, 77% information and referral contacts were made by telephone and 9% were through emails and our website. Of the calls, 31% were from carers, family or friends, 36% were from consumers and 33% came from health professionals, students and others.

The majority of the contacts were requesting assistance for general adult mental health issues. The main issues recorded from carers, family members and consumers over the 12-month period included frustration over a lack of central servicing available, being referred to many different organisations and the lack of advocacy and legal advice regarding treatment, care and social needs to help with individual requirements.

As mental health and wellbeing is recognised more as an important part of the social and emotional structure of everyday life, there has been an increasing demand to provide education to all sectors.



Organisational Chart



Board of Management

Current Board members



John Gherardi
President &
Chief of Finance



Marita Walker
Perth Home
Care Service
Vice President



Rod Astbury
Secretary



Sandra Vidot
Mental Illness
Fellowship of WA
(CEO)



Sue Ash
Uniting Care West
(CEO)



Simone Hosgood
Ruah Community
Services (Executive
Manager)



Joe Calleja
Richmond
Fellowship of WA
(CEO)



Pamela Gardner
Bay of Isles
Community
Outreach Inc.
Esperance



Mick Geaney
Mercy Care
(Executive
Director)



Kerry Hawkins
Carer
Representative



Jacqui Carter
Consumer
Representative



Sinead Flaherty
Perth Inner City
Youth Service

The members of the WAAMH Board are elected by our member organisations at the Annual General Meeting in October every year. Board members serve a two year term.

Departures

Lorrae Loud – LAMP Inc.
(to October 2012)

Yvonne Pallier – Vincentcare
(to October 2012)

Coralie Flatters – Rise
(to October 2012)

Board members attendance

	Meetings Attended	Possible Meetings
John Gherardi	10	11
Sue Ash	7	11
Corralie Flatters	4	5
Simone Hosgood	11	11
Sandra Vidot	8	11
Marita Walker	11	11
Pamela Gardner	10	11
Lorrae Loud	2	5
Joe Calleja	9	11
Jacqui Carter	10	11
Yvonne Pallier	3	5
Kerry Hawkins	6	6
Mick Geaney	3	6
Sinead Flaherty	2	4



WAAMH Staff

Current Staff members



Rod Astbury
Executive Director



Jacqui Bell
*Policy & Sector
Development
Manager*



**Rhianwen
Beresford**
Project Officer



Leanne Cato
*Training
Administration
Assistant*



Philleen Dickson
*IPS State Project
Lead*



Ann Elliott
*Operations
Manager*



Deb Fay
Trainer & Assessor



Kay Masters
*Workforce
Development &
Training Manager*



Sue Nye
*Policy & Sector
Development
Manager*



Joanne Pollard
Training Officer



**Anne Preston
Carter**
*Promotions
Coordinator*



Leanne Wherry
*Administration
Support Officer*



Ann White
*TheMHS 2014
Coordinator*



Patricia Wilson
*Administration
Support Officer*

Departures

Kirstie Kitis
Policy and Sector Development Officer

Abby Phillis
Policy & Sector Development Manager

Clarissa Mongoo
Workforce Development & Training Assistant

Student Placement

Janine Lockart (*Behavioural Science Internship,
The Notre Dame of Australia, Sept – Nov 2012*)

Volunteer

Greg Hambleton
Website Support

Membership

A high rate of membership is essential in order for WAAMH to fulfill its leadership role in representing the community managed mental health sector. WAAMH aims to achieve representative membership by size, geography, client group, structure, sector and role, and of consumers and carers.

Benefits of Membership

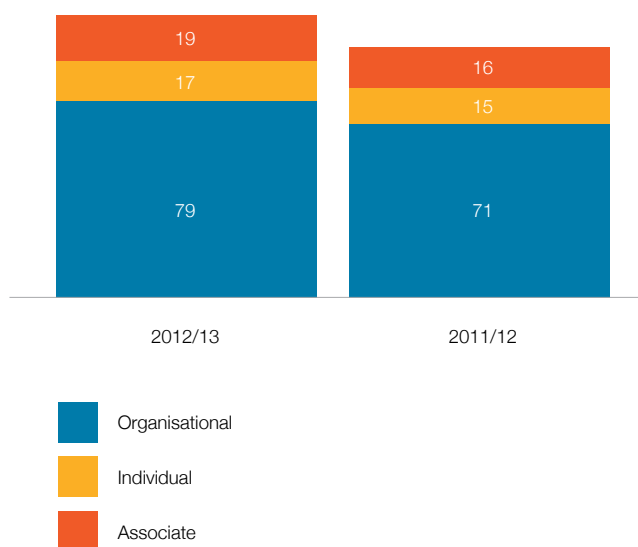
Members of the Western Australian Association for Mental Health provide a range of services and receive many benefits.

- Connect with their peers and stay up to date with other members' initiatives and events
- Acquire new skills and share ideas with other organisations in the mental health sector
- Foster collaboration and create strategic partnerships
- Receive our monthly newsletter with all the latest information on what's happening in the sector
- Discounted rates to attend WAAMH's training courses
- Feature their logo on WAAMH's website and list their contact details in our Service Directory
- Advertise their organisation in the media during Mental Health Week at a discounted rate
- Access a wide variety of promotional materials, brochures, reports and fact sheets
- Receive resources for identifying and managing mental health issues in schools

- Obtain resources for enhancing positive mental health and wellbeing in the workplace
- Be represented at sector forums and workshops
- Have their view heard by a peak body representing the community managed mental health sector, and presented to parliament
- Alongside other members, their membership in WAAMH enables us to demonstrate a united sector
- On their behalf, we exhibit an independent and representative voice when influencing the issues of the sector to those who make funding decisions for services for people with mental illness and their carers

Total membership increased by 11% in the year to June 30th 2013 with growth in membership across the three major membership categories:

Year on Year Membership

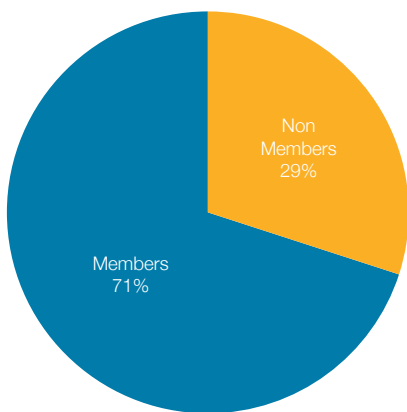




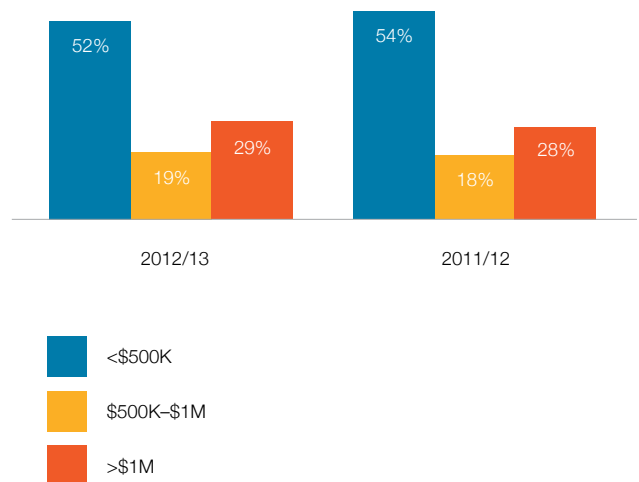
WAAMH member numbers comprised 71% of the total number of community managed mental health services identified by the sector mapping project¹.

There has been some increase in the proportion of medium and large organisational members from 46% in 2011/12, to 48% in 2012/13. This most likely reflects an increase in the funding level of existing members rather than a change in organisational membership.

Proportion of WAAMH Members in Service Directory



Members by Size



1. As there is not a direct correlation between organisational structures between the service directory and WAAMH's membership, this is a proxy measure of penetration.

Our Members

Organisational Members

55 Central Inc.
Access Housing Australia Limited
Aftercare
Albany Outreach Support Service
Alzheimer's Australia WA Ltd.
Angelhands Inc.
Anglicare
ASeTTS
Australian Red Cross
Baptistcare Inc.
Bay of Islands Community Outreach Inc.
Bunbury Pathways 92 Inc.
Carers Association of WA
Casson Homes
Centrecare Inc.
CLAN WA
Collie Family Centre
CoMHWA Inc.
COMIC WA
Community First Int.
DADAA
Drug Free Attention Difficulties Support
Enable Southwest Inc.
Even Keel Bi Polar Disorder Support Association
Foundation Housing
Fremantle GP Network
Fremantle Multicultural Centre
Fremantle Women's Health Centre
Fresh Start Recovery Program
From the Heart WA
Fusion Australia (WA)
Gosnells Womens Health Service Inc.
Great Southern Community Housing Association
GROW (WA)
June O'Connor Centre – Subiaco
LADS of WA (Inc.)
LAMP Inc.
Life Without Barriers
LifelineWA (Living Stone Foundation)
Mental Health Carers Arafmi (WA) Inc.
Mental Illness Fellowship of WA Inc.
MercyCare
Midland Women's Health Care Place
Midwest Community Living Assoc
Mission Australia
Multicultural Services Centre of WA
Neami National
Outcare Incorporated
P.D. Leading Enterprises
Pathways Farm Inc.
Perth Home Care Services
Perth Inner City Youth Service
Perth North Metro Medicare Local
Relationships Australia WA Inc.
Richmond Fellowship of WA Inc.
Rise
Ruah Community Services
Share&Care Community Services Group Inc.
SIDS and Kids WA Inc.
Southern Cross Care (WA) Inc.
St Bartholomews House – East Perth
St John of God Health Care Inc.
St Jude's Hostel
St Patricks Community Support Centre
Support In Site
Tanderra Men's Hostel – Salvation Army





TenderCare
 The Salvation Army Bridge House
 The Samaritans Inc.
 Uniting Care West
 Uniting Church Community Outreach Service
 Vincentcare
 WA Aids Council
 Wanslea Family Services
 Women's Health & Family Services
 Women's Healthworks
 Workpower Incorporated
 Youth Focus
 Zonta House Refuge Association Inc.

Associate Members

Armadale Health Service
 Association for the Blind WA
 Blooming Minds
 Cyrenian House
 Health and Disability Services Complaints Office
 Holyoake
 Homecare Options
 Homecare Services
 Interchange Inc.
 Intework Incorporated
 Kimberley Mental Health & Drug Services – WACHS
 My Place Foundation
 North Lake Senior Campus
 North Metropolitan Area Health Services
 Perth Central and East Metro Medicare Local Ltd
 Professional Vocational Services
 South Metro Area Health Service
 WACHS – Wheatbelt Region
 Work Focus Group

16 Individuals Associate Members

(Not listed for privacy reasons)

Reciprocal Members

Community Housing Coalition of WA
 WANADA
 Youth Affairs Council Of WA

Honorary Life Members

Denise Bayliss
 Bob Hetherington O.A.M.
 Helen Lynes
 Keith Wilson



Financial Performance

WAAMHs financial objectives are to build a secure financial base and to diversify its income sources.

Objective: Build a secure financial base

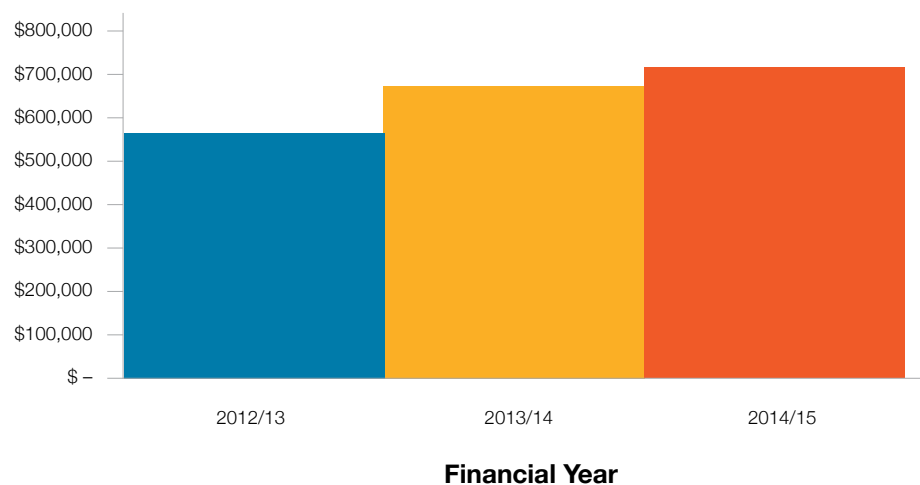
WAAMH has engaged in a three year contract with the Mental Health Commission from July 2013/14 with significant growth in its core funding base.

58% of WAAMHs income in 2012/13 was from non-recurrent funding. From 2013/14, as major funded projects are completed, WAAMH will transition to a funding base focussed more on ongoing activity.

Objective: Diversify Income Sources

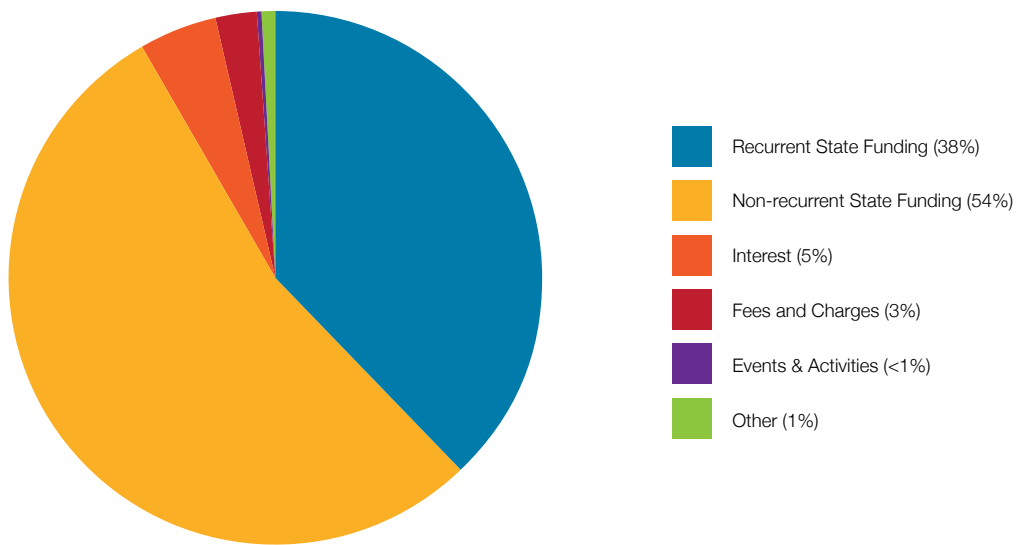
Over 90% of WAAMHs income in 2012/13 was from recurrent and non-recurrent funding, overwhelmingly sourced from a single funder, attention is already focussed on diversifying WAAMHs income base into the future.

Base Funding Chart 2012/13 to 2014/15

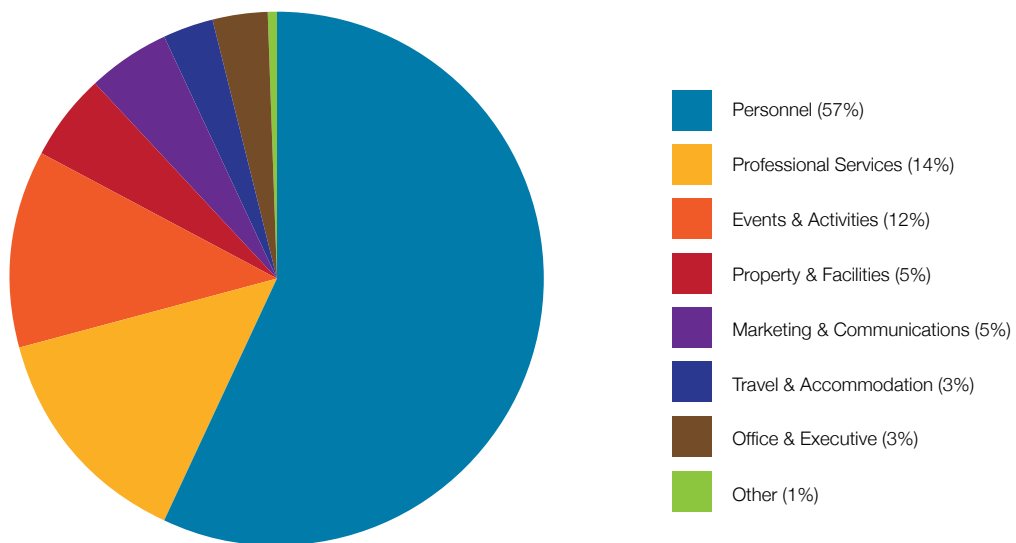




Funding Income Chart 2012/13



Funding Expenditure Chart 2012/13



Statement by the Board for the financial year ending 30 June 2013

WA ASSOCIATION FOR MENTAL HEALTH Inc.


Statement by the Board for the year ended 30/6/13


The Board of the WA Association for Mental Health Inc. has determined that the Association is not a reporting entity. The Board has determined that this Special Purpose financial report should be prepared in accordance with the accounting policies outlined in Note 1 to the accounts.

In the opinion of the Board of the WA Association for Mental Health Inc:

1. The Statement of Financial Position and the Statement of Financial Performance give a true and fair view of the state of affairs and the financial result of the Association for the year ended 30 June 2013.
2. At the date of this statement, there are reasonable grounds to believe that the Association will be able to pay its debts as and when they fall due.

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


President


Vice President

26.09.2013
Date

Perth, Western Australia

Independent Auditor's Report

RAY WOOLLEY PTY LTD ACCOUNTANTS

PRINCIPAL:
RAY WOOLLEY (C.A. 1076182) (1981)
PHONE: (08) 9561 6146
FAX: (08) 9561 6192
EMAIL: raywool@inet.net.au

17 RUSSELY GROVE
YANCHEP
WA 6035

WESTERN AUSTRALIAN ASSOCIATION FOR MENTAL HEALTH INC.

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF WESTERN AUSTRALIAN ASSOCIATION FOR MENTAL HEALTH INC.

We have audited the accompanying financial report, being a special purpose financial report, of Western Australian Association for Mental Health Inc. (the association), which comprises the committee's report, the assets and liabilities statement as at 30 June 2013, the income and expenditure statement for the year then ended, notes comprising a summary of significant accounting policies and other explanatory information, and the statement by members of the committee.

Committee's Responsibility for the Financial Report

The committee of Western Australian Association for Mental Health Inc. is responsible for the preparation of the financial report, and has determined that the basis of preparation described in Note 1 is appropriate to meet the requirements of the Associations Incorporations Act (WA) and is appropriate to meet the needs of the members. The committee's responsibility also includes such internal control as the committee determines is necessary to enable the preparation of a financial report that is free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on the financial report based on our audit. We have conducted our audit in accordance with Australian Auditing Standards. Those standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the association's preparation of the financial report that gives a true and fair view, 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. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the committee, as well as evaluating the overall presentation of the financial report.

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

Opinion

In our opinion, the financial report presents fairly, in all material respects, the financial position of Western Australian Association for Mental Health Inc. as at 30 June 2013 and its financial performance for the year then ended in accordance with the accounting policies described in Note 1 to the financial statements, and the requirements of the Associations Incorporations Act (WA).

Basis of Accounting and Restriction on Distribution

Without modifying our opinion, we draw attention to Note 1 to the financial statements, which describes the basis of accounting. The financial report has been prepared to assist Western Australian Association for Mental Health Inc. to meet the requirements of the Associations Incorporations Act (WA). As a result, the financial report may not be suitable for another purpose.

Ray Woolley Pty Ltd
Ray Woolley
Registered Auditor No 16396
8 September 2013

17 Russley Grove
Yanchep
WA 6035

Auditor's Certification Statement

RAY WOOLLEY PTY LTD ABN 30 616 227 297 ACCOUNTANTS

PRINCIPAL:
RAY WOOLLEY (C.A. 4006435, 41000)
PHONE: (08) 9561 6146
FAX: (08) 9561 6192
EMAIL: rayw@rmet.net.au

17 RUSSELY GROVE
YANCHEP
WA 6035

WESTERN AUSTRALIAN ASSOCIATION FOR MENTAL HEALTH INC.

AUDITOR'S CERTIFICATION STATEMENT

Mental Health Commission

I hereby certify that, in my opinion, the information reported in the attached Income Statement for the year ended 30 June 2013 is based on proper accounts and present fairly in accordance with applicable Accounting Standards and other mandatory professional reporting requirements in Australia, the financial transactions for the year then ended and the payments in the statement are in accordance with the terms and conditions of the Service Agreement with the Mental Health Commission.

AUDITOR

Signature:



Full Name:

Raymond Arthur Woolley.

Name of Organisation:

Ray Woolley Pty Ltd.

Membership:

Registered Company Auditor No: 16396

Date:

8 September 2013

Statement of Financial Position as at 30 June 2013

Note		2013 \$	2012 \$
Current Assets			
Cash	2	1,988,299	2,378,169
Receivables	3	16,897	31,797
Total Current Assets		2,005,196	2,409,966
Non-current Assets			
Controlled Fixed Assets	4	7,455	-
Total Non-current Assets		7,455	-
Total Assets		2,012,651	2,409,966
Current Liabilities			
Payables	5	86,850	121,756
Prepaid Funding	6	1,203,997	1,873,310
Employee Provisions	7	58,927	34,995
Total Current Liabilities		1,349,773	2,030,061
Non-Current Liabilities			
Employee Provisions	7	20,101	18,034
Total Non-Current liabilities		20,101	18,034
Total Liabilities		1,369,874	2,048,094
Net Assets		642,777	361,872
Equity			
Accumulated Funds	8	642,777	361,872
Total Equity		642,777	361,872

Profit & Loss Statement for the financial year ending 30 June 2013

	2013	2012
	\$	\$
INCOME		
Funding		
Service Agreements	707,959	415,939
Non-recurrent Grants	999,666	809,950
Total Funding	1,707,626	1,225,889
Operations		
Fees and Charges	47,094	19,066
Property, Facilities & Equipment	855	–
Events & Activities	5,705	6,487
Recoveries	10,852	3,434
Other Income	88,796	113,145
Total Operations	153,301	142,132
Total Income	1,860,927	1,368,021
EXPENDITURE		
Personnel		
Salaries & Wages	764,188	560,555
Employee Support	19,026	–
Non-employee Labour	117,157	53,291
Total Personnel	900,370	613,846
Operations		
Property, Facilities & Equipment	84,680	63,284
Events & Activities	189,418	51,523
Marketing	77,773	57,094
Travel & Accommodation	46,969	32,754
Other Expenses	940	520
Total Operations	399,779	205,175

	2013	2012
	\$	\$
Administration & Governance		
Office & Executive	52,519	25,224
Professional Services	220,255	424,561
Financial & Insurance	7,098	4,549
	<hr/>	<hr/>
Total Administration & Governance	279,872	454,334
	<hr/>	<hr/>
Total Expenditure	1,580,021	1,273,355
	<hr/>	<hr/>
Net Surplus / (Deficit)	280,905	94,666

Notes to and forming part of the accounts for the year ended 30 June 2013

1. STATEMENT OF ACCOUNTING POLICIES

These financial statements are a special purpose financial report prepared in order to satisfy the financial reporting requirements of the Association. The committee has determined that the Association is not a reporting entity.

The financial statements are prepared on an accrual basis. They are based on historical costs and do not take into account changing money values or, except where specifically stated, current valuation of non-current assets. The accounting policies adopted are consistent with those of the previous year.

a) Furniture and Equipment

Furniture and equipment are included at cost. All fixed assets are depreciated using the straight-line method over their estimate useful lives commencing from the time the asset is held ready for use.

b) Employee Benefits

Annual Leave

The full annual leave entitlement as at 30/06/13 appears as a provision in the Balance Sheet. The provision for annual leave has been accrued in respect of all employees from the commencement of employment with the Association.

Long Service Leave

Long service leave is due at the completion of ten years service to the Association. Pro-rata being due after a period of seven years.

Sick Leave

Whilst sick leave entitlements are cumulative, employees do not receive this entitlement unless they are eligible for sick leave.

c) Funding/Grants in Advance

All grants are brought into account as income when received, unless they relate to future years in which case they are recognised as income in the year expended.

d) Risk Management

Insurance cover is consistent with contractual requirements.

The Association does not have any material interest rate or credit risk exposure.

	2013	2012
	\$	\$
2. Cash		
Cash on Hand	119	300
Operating & Cash Management A/c's	338,189	14,504
Term Deposits	1,649,991	2,307,609
Nulsen Haven Trust A/c	-	55,756
	<hr/> 1,988,299	<hr/> 2,378,169
3. Receivables (Current)		
Trade Debtors	720	-
Prepayments	14,547	17,471
Accrued Income	1,630	14,326
	<hr/> 16,897	<hr/> 31,797
4. Controlled Fixed Assets		
Plant and Equipment, at cost	41,151	31,823
Accumulated Depreciation	(33,696)	(31,823)
	<hr/> 7,455	<hr/> -

Notes to and forming part of the accounts for the year ended 30 June 2013

	2013	2012
	\$	\$
5. Payables		
Creditors and Accruals	73,419	31,544
GST Liability (net)	(2,718)	65,494
Payroll related	16,149	24,718
	<hr/> 86,850	<hr/> 121,756
6. Prepaid funding		
Project Grants in Advance	1,121,997	977,416
Department of Health	895,894	
Other Grants	82,000	–
	<hr/> 1,203,997	<hr/> 1,873,310
7. Provisions		
Short Term		
Provision for Annual Leave	58,927	24,850
Provision for Personal Leave	–	10,146
	<hr/> 58,927	<hr/> 34,995
Long Term		
Provision for LSL	20,101	18,034
	<hr/> 20,101	<hr/> 18,034

	2013	2012
	\$	\$
8. Accumulated Funds		
Accumulated Funds as at 30/06/12	361,872	267,206
Surplus / (Deficit) current year	280,905	94,666
Accumulated Funds as at 30/06/2013	642,777	361,872

Acknowledgements & Appreciation

The WA Association for Mental Health would like to thank and acknowledge individuals and organisations for their financial contribution and support during 2012/2013.

Thanks to all who assist and encourage the work of WAAMH.

Sponsorship & Grants



Service Contract



Government of **Western Australia**
Mental Health Commission



WAAMH

Western Australian Association
for Mental Health

Western Australian Association
for Mental Health Inc.

City West Lotteries House
2 Delhi Street
West Perth WA 6005

ABN: 15 165 640 637

Telephone: 9420 7277

Facsimile: 9420 7280

Email: reception@waamh.org.au

Website: www.waamh.org.au