



Mental Health & Wellbeing
Consumer Advisory Group

Annual Report 2017



Artwork by Jo Bailey- Presented at Being's 'Recovery in Art' Exhibition in 2017

"Art therapy provided a focus for self-reflection and gave me an unanticipated sense of meaning and satisfaction. Art helped me express the inexpressible, and acted as a container to help make sense of my inner experience. The process of painting enables me to play and to self-soothe through the sense of touch, texture, movement and colour. My art has allowed my shame to BE! I can find freedom in BEING - creating and feeling in the moment."

Being

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BEING is a not for profit
organisation which receives core
and funding from the Mental
Health Commission of NSW

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Being



About us

BEING is the independent, state-wide peak organisation for people with a lived experience of mental illness (consumers). We work with consumers to achieve and support systemic change.

Our vision

Our vision is for all people with a lived experience of mental illness to participate as valued citizens in the communities they choose.

Our purpose

BEING's purpose is to ensure that mental health consumer views are heard by policy makers, service providers and the community.

Our values

The lived experience of people is fundamental to all that BEING does and our work is underpinned by a commitment to upholding international human rights.

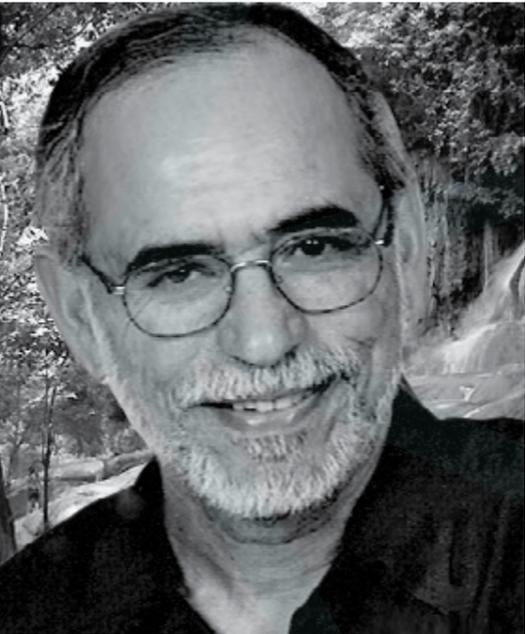
Being holds the following values:

- Respect and dignity for all to enable inclusion
- Social justice and equity to ensure participation
- Belief in recovery to make it possible for every individual to recover
- Integrity to ensure transparency and accountability
- Fidelity to ensure the legitimate representation of the views of consumers

Our guiding principles

- Principles of recovery underpin all our work
- Recognition of the importance of a holistic approach
- Collaboration and team work
- Flexibility, responsiveness and innovation
- Consultative and participatory processes that have consumers at the centre
- Promoting equity and positive images to address discrimination and prejudice
- Being accessible and approachable for all
- Promoting professionalism and quality practice

A note from the chairperson



It is with great pleasure that I present Being's annual report for 2016-2017.

This year has been marked with some challenges: the recruitment of a new CEO, Organisation review by the Commission's consultant, resignation of some board members, appointment of casual board members and turnover of staff members.

On behalf of the Board of Trustees I would like to express our appreciation for the contribution and service of resigned board members: Rosanne Feneley, Jodie Ingram, Mandy Miles and Virginia Divall.

Equally, I express our appreciation for the given commitment and accepting the casual appointment by Tim Heffernan (former Chair), Anne Frances (former Chair), Larry Billington and James Nguyen, who also had to resign recently due to workload commitment.

Also we are so grateful to our former Commissioner John Feneley for sparing one of his pivotal staff members, Sage Green, to act in the position of the CEO

for about 3 months to enable the appropriate recruitment process of the new CEO, and for this we are equally grateful to Sage for her sincere effort in sailing the ship close enough to land for the new CEO to take charge of future navigation.

I am also grateful to Kat Gill (Vice Chair) and our new Commissioner Catherine Lourey for assisting myself in recruiting the new CEO Irene Gallagher. Irene brings with her a wealth and depth of experience, skills, integrity and rich passion for the cause of Being's MH advocacy. Irene also served as the Chairperson of Being for the first half of this year 2017.

Some of the challenges likely to be experienced during 2018 are:

- Investigating the pros and cons of changing Being's Governance structure, including a relevant new constitution and board structure, to increase Being's relevance in the sector.
- Increasing our support to the MH sector, by engaging with other relevant organisations, providing our MH advocacy expertise and skills and generating relatively additional funds to increase our financial sustainability and improve our longevity in the sector.
- Supporting and embracing the MH peer-work movement in NSW and nationally as an extension of our advocacy initiatives.
- Strengthening the Collective Purpose (CP) partner relationship.

These are some of the challenges one can foresee so far and no doubt as we proceed with the year ahead other challenges may present themselves to us, and for

this we will be seeking selected skilled board members, initially on a casual basis to assist us in meeting all challenges we may be presented with.

To all the current Board members, Katherine Gill, Sunny Hemraj, Robyn Maurice, Bani Adams, Tim Heffernan and Anne Frances - thank you for your continued commitment to the Board of Being.

To the CEO and all staff of Being and CP - thank you for your continued effort in enhancing the reputation of Being and particularly in keeping all Being members progressively well informed of MH relevant news and events through periodical electronic news issues.

To all Being's members, on behalf of the Board of Trustees and staff, I take this opportunity to offer our gratitude for your continued support and faith entrusted in the Board and staff and assure you of our endeavour to enhance further the strategic objectives of Being through the year ahead of 2018.

An amazing year for Being: CEO's Report

Dear friends, colleagues, brothers and sisters

The journey over the 2016-2017 period has been one of duality, the commencement of meaningful and purposeful projects and yet one of significant changes here at Being.

Upon reflecting on the meaningful and purposeful work of Being, 2016 saw the completion of the Arabic video resource project, Into the Light. This project was extraordinarily important as it helped to raise the issues that people from Arabic-speaking communities wanted to highlight around the importance of talking about psychological health and wellbeing.

Our work has also seen a focus on increasing our presence in the community and creating a dynamic online community that is keen to provide feedback. We have had huge success in further developing our relationships with people who experience mental health issues across the state and consulted with 431 people in the April-June 2017 period. This is the highest number of people consulted in NSW CAG/Being history that we are aware of. The consultations have also spanned across regional areas including the Central Coast, Nowra, Blue Mountains and Coffs Harbour.

The large number of people consulted means that the Being team is well resourced with feedback across a range of topic areas and able to be very responsive to any requests for input into influencing decision making processes and providing the voice of people with lived experience to the mental health sector. When faced with a request for feedback on a topic that we may not have covered, our

enthusiastic online community has responded to our online surveys to inform our advice. In this financial year, we provided much feedback through submissions and written advice and we hope to double this in the next year.

Some of the areas of consultation has included:

- Recovery Forum consultation Advocacy in the area of NDIS.
- Peer worker consultation in the Central Coast
- Mental health services consultation in the mid-North Coast
- African community leaders consultation
- NDIS consultation in Sydney

A further highlight of the year was Kirsten's trip to New York for the UN Conference of States Parties, which provided the team with a better understanding of international rights law.

Whilst we celebrate so many wonderful aspects of the year, we also had some significant changes with the team at Being as we farewelled Ka Ki Ng, Rachael Laidler, and Karina Ko, all of whom also contributed immensely to the organisation over the past few years. We also farewelled long standing CEO Dr Peri O'Shea as she moved on to pursue other endeavours, and welcomed Sage Green, who took on a seconded position from the Mental Health Commission of NSW to take up the role of Acting CEO for a four-month period. Although we are sad to see each of our wonderful staff go, we also share in their excitement in taking on the next chapters in their lives. We were also saddened to lose a great friend, Jean Mackay, and this in particular had a huge effect on the staff and the organisation. We will long

remember Jean for her passion her commitment to the organisation.

I would also like to thank our current staff who have made the year a success. To Emma, Elena, Jaime and Kirsten, a big thank you for all of your passion and drive in working for and with people with lived experience of mental health issues.

Although I have only been in the role of CEO for the past few months, I am excited for what the year ahead holds for Being, as we build upon the foundations set, working to create innovation, influence and change, and to bring the lived experience voice to the forefront of the mental health sector.



How Being Works

Who we are

The purpose of Being is to make sure the voices of people with lived experiences of mental health issues are heard and respected by government and services. We are the independent, state-wide peak body for people with lived experience of mental health issues and have been active since 1994 (previously as NSW Consumer Advisory Group - NSW CAG).

Our goal is to transform the system so people can participate in their communities as full citizens and access respectful, evidence-based services. This access is every person's human right. We know that people are the experts on what works for them, and their views. Opinions and lived experience expertise are the key to a working mental health system. The voice of lived experience must be fundamental to decision-making at all levels.

"Nothing about us without us"

At its core, our work involves talking to people about their experience of mental health issues and mental health services. We do this through our consultations, surveys, public forums and research, and use this information to lobby the government and mental health services for changes to legislation, policy and service delivery. We work closely with other mental health organisations, such as the Mental Health Commission of NSW, Mental Health Carers NSW, and Wayahead to increase the impact of our advocacy. We strive to provide a strong, informed and diverse voice for people who experience mental health issues in NSW.

We are committed to building the capacity of people to represent themselves wherever possible. We support people to speak about their experiences, offer tools to help people do their own Individual and systemic advocacy, and use the stories and information people share with us to influence stigma, discrimination and prejudice.

By supporting people and advocating for participation, we recognise the value of lived experience leadership. We are continually inspired by the passion and dedication of people with a lived experience of mental health issues, and know that we are stronger together.

"...Stop being so afraid. Don't even call us consumers, just call us people. Let us have our citizenship. We're here to take it. We have so much to give you, let us give it to you. You are lost without us!"

Fay Jackson

Membership

Members of Being play an important role in driving and guiding the direction of the organisation. We are so grateful to work with this passionate, inspiring group, and are grateful for our members' ongoing contributions and support.

Being's membership has grown significantly over the past year, with 53 new members joining us. We now have a total of 402, made up of 371 members and 31 associate members.

Members participate in Annual General Meetings and Special General Meetings, and are able to vote in the trustees to the Being board. Being offers membership to people who self-identify as having a lived experiences of mental health issues, and associate membership to anyone else who is interested in our work. If you would like to find out more about becoming a member of Being, visit our website at: www.being.org.au.





Our staff

The staff and volunteers who have worked at Being over the past year are:

- Adla Abushanab – Project Support Officer, Arabic Mental Health Resource Project
- Angela Cui – Policy and Research Volunteer
- Elena Sutcliffe – Policy Officer
- Emma Corcoran – Policy and Operations Assistant
- Jaime Comber – Policy Officer
- Jean Mackay – Communications and Administrative Officer
- Ka Ki Ng – Senior Policy Officer
- Karina Ko – Policy Officer
- Kirsten Gibbs – Policy Officer
- Loretta Picone – Project Volunteer
- Margaret Thiering – Casual
- Matt Pasternak – Communications Officer
- Peri O’Shea – Chief Executive Officer
- Rachael Laidler – Events and Projects Officer
- Sage Green – Acting Chief Executive Officer
- Samantha Eid – Project Assistant
- Shay Gilbert – Casual
- Susan Horsley – Casual

Being also farewelled Ka Ki Ng, Karina Ko and Rachael Laidler this year. A massive thank you to Ka Ki, Karina and Rachael for their significant contribution to Being, and we wish them all the best in their new roles.

Our Board

Being is governed by a Board comprising a minimum of seven and maximum of 11 trustees. At least 75% of Being’s Board is comprised of people with lived experience of mental health issues. The role of the Board is to govern the organisation, primarily through setting the strategic vision and monitoring Being’s process toward the strategic goals set.

Over the past year, Being’s Board has experienced significant change. During this time the board composition saw a total of 12 Board members contribute to the organisation at varying stages. Together they have brought a wealth of lived experience and a diversity of skills to the organisation.

They were:

- Fayez Nour (Chairperson and Secretary)
- Kate Gill (Deputy Chairperson)
- Sunny Hemraj (Treasurer)
- Bè Adam
- Irene Gallagher
- James Nguyen
- Jodie Ingram
- Larry Billington
- Mandy Miles
- Robyn Maurice
- Rosanne Feneley
- Virginia Divall

We thank the 2016-17 Board for their vision, commitment and service to Being, and the community.



Advocacy highlights from the year

Understanding the impact of the NDIS

Throughout the last year we have included the NDIS as a focus area of advocacy. Being supports the principles underlying the NDIS. People with a disability have the right to realise their full potential for participation in society and exercise choice and control to achieve their goals. The NDIS has the potential to be a steering ship in promoting recovery orientated and evidence-based practice.

The feedback we received about the NDIS frequently mentioned a lack of information available about the NDIS, particularly for psychosocial disability. Many commented that the application process is long and bureaucratic, and people are likely to be declined unless they have an advocate assisting with the process. There appears to be inconsistency with National Disability Insurance Agency (NDIA) planners and very few have mental health training.

People also spoke about how the NDIS it can be a positive, life changing experience. Once an individually funded package is approved, there appears to be more support than what was offered previously, showing the great potential the NDIS has to help improve the lives of people with psychosocial disability. We continue to work with people with psychosocial disability, disability organisations and government agencies to help ensure the needs of people with psychosocial disability are understood and addressed by the NDIS.

Consultation

- NDIS and mental health consultations
- Online survey
- Survey in response to submission
- Consultation about NDIS at Recovery Forum

Feedback

- Submission to Joint Standing Committee on the provision of services under the NDIS for people with psychosocial disability
- Presented feedback at hearing for Joint Standing Committee on the provision of services for people with psychosocial disability

Communication

- Published position statement on the NDIS
- Abstract submitted to TheMHS on NDIS (accepted) and the national NDIS and mental health conference

Mental health across the lifespan

For children and young people

Being is proudly representing young mental health consumers and young peer workers to a range of government and non-government organisations.

This year we conducted a consultation with young people in an adolescent inpatient mental health facility. They were able to provide us with valuable insights into what is important to them in terms of their mental health, along with ways to improve the inpatient experience. We continue to be an active member of the Children and Youth Mental Health Subcommittee in the Ministry of Health, and we will be able to use the knowledge gained through the consultation to inform our policy work in this area. We are continuing to support a consumer

advocate to attend an advisory group to provide expert advice on the drafting of a Family Focused Recovery Framework, and the draft framework is near completion.

Throughout late 2016 and early 2017 Being's former CEO, Peri O'Shea and other Being staff supported the development of a new peer workforce at the NSW Headspace Youth Early Psychosis Program in Western Sydney. This fantastic project was truly led by young people engaged with headspace, and saw young people with a lived experience of mental health issues write the framework for peer work under which the Early Psychosis Program would operate in the future. This initiative stands as an example of great collaboration between Being, youth mental health services and the community they support.

For older people

Being is an ongoing member of the Older Persons' Mental Health Working Group at the Ministry of Health. Through this group, we are able to have input and learn about

developments in policy and services for older people. As part of our work in this area,

we continued to participate in the Benchmarking Forums held by the Ministry of Health for Specialist Mental Health Services for Older People.

Using the results of our survey of older people, which asked about experiences of ageing with mental health issues, and what people expect from services in order to "live well in later life," we submitted feedback to the Mental Health Commission of NSW's 'Living Well in Later Life – A Case for Change' report and consensus statement.



Reaching out to people and communities: consultations & surveys

This year we talked with hundreds of people with a lived experience of mental health issues in NSW through our surveys, social media and our in-person consultations.

The information we gathered highlights some major changes still needed in our mental health services. This includes:

- A deep commitment to and implementation of recovery principles and human rights, particularly treating people with respect, kindness and as experts on their own experience.
- Changing processes so that people receive clear and transparent information, and are able to make informed decision about their care.

It also confirmed some broad cultural changes needed to ensure people living with mental health issues are treated as valued members of our community:

- People felt mental health stigma is gradually decreasing, and were encouraged by media coverage that highlighted consumer perspectives. However many people still reported significant stigma, including in the workplace, their communities and in services. This was particularly the case in some communities, who urgently need more education and early intervention.
- Things like housing, employment and connection to community are the building blocks of a meaningful life. We heard that a person's recovery journey depends on much more than just effective mental health services.

I've always felt as though there are secrets - that I don't know everything that is being said, or that I'm not trusted with knowing about my health. Transparency is so important in developing trust. I think this really needs to be highlighted. If you treat us as dependent and incompetent, it's hard to grow. If you respect us, trust us, and value us, we'll show you our best. - Consumer, 2017 survey

We know that our community is a diverse one, and that people face different issues depending on factors such as their recovery journey, their culture, their age and their unique experiences. Some examples were:

- The importance of culturally appropriate mental health services that understand the needs and experiences of a particular community, for example a culturally diverse community with many lived experiences of racism and trauma.
- Challenges facing people who are eligible for the NDIS, such as a lack of outreach, a confusing and lengthy application process, and a lack of information about what services are available.

We are deeply grateful to everyone who took the time to generously share their experiences and ideas with us. This information is at the core of our work, and we have used it when producing submissions, sitting on committees, and in guiding the advocacy we do every day.

Consultations:

- May 2017 – Recovery Forum consultation
- June 2017 – Peer worker consultation in the Central Coast
- June 2017 – Mental health services consultation in the mid-North Coast
- June 2017 – African community leaders consultation
- June 2017 – NDIS consultation in Sydney

Surveys:

- September 2016 – Pathways to Community Living
- February 2017 – Experiences with the NDIS
- April 2017 – Living well in later life: Older people and mental health
- April 2017 – Mental health services and data collection, monitoring and reporting
- May 2017 – Language used in mental health
- June 2017 – 2017 Federal Budget
- June 2017 – Leaving hospital and being supported in the community
- Ongoing – NDIS Feedback

Connecting with African Community Leaders

In June 2017 Elena and Jaime met with African community leaders to talk about mental health. The African Mental Health Learning Circle are a group brought together by STARTTS to raise awareness about mental health issues in African communities. We were thrilled to meet with this passionate and dedicated group about the issues they identified and their vision for the future.

One of the main things we discussed was stigma around mental health, and how difficult it can be to start conversations about mental health issues when it is seen as 'the end'. Investing in education about mental health is a vital part of challenging this stigma. We also talked about the lack of counsellors and psychologists providing culturally appropriate services, and the importance of training people in trauma-informed care. This is particularly a challenge in African communities, where people come from 54 different countries and many cultures, but are often treated as a single group.

Finally, the group told us how frustrating it is when you see the need for change but your voice is not heard by policy-makers. We hope to continue to work with them to fight for this change.

Out and about in the community

"It was wonderful to have so many people stop and share with us"



Holding stalls at events is a great way to show the work we do and connect with people in different communities and settings.

We held seven stalls this year, with three in Mental Health Month. Mental Health Month is held in October each year in NSW and is coordinated by WayAhead Mental Health Association of NSW.

At the Wellness Walk organised by the Sunflower Foundation we were excited to be joined by a team of 20 supporters in walking across the Sydney Harbor Bridge to promote Mental Health and to increase understanding in order to breakdown discrimination.

More recently, we held a stall at the WayAhead Mental Health Expo in Chatswood. We asked people "What does mental health mean to you?" and people offered a fantastic range of answers. For some people it meant "rest and relaxation" or "time with family", and for others it was about "hope" and "having a purpose". It was wonderful to have so many people stop and share with us (even the Mental Health Commissioner John Feneley!).

Making use of technology

This past year Being has been ramping up its communication with members and the community. We have revamped the format of the E-News and it is now fortnightly, and we have received a lot of positive feedback. We currently have 1,118 subscribers and counting!

We have also been increasing our social media use and we are having record highs of engagement and likes on Facebook. Over the past year we have increased our page likes by 200 to 837, and we are regularly getting high numbers of post likes, shares and comments.



Advocating for peoples priorities and views: submissions, committies & communications

Our submissions

- Review of the Guardianship Act 1987 Paper 2, Paper 4, Paper 5 and Paper 6 – NSW Law Reform Commission
- The provision of services under the NDIS for people with psychosocial disabilities related to a mental health condition - Joint Standing Committee on the NDIS
- Shaping our future – letter to the new Disability Discrimination Commissioner
- NDIS Costs - Productivity Commission – joint submission with the Disability Network Forum
- Management of Healthcare Delivery in NSW – Public Accounts Committee

Review of the Guardianship Act submissions

This past year the NSW Law Reform Commission has been looking at ways they can change the Guardianship Act. This has come about due to the UN Convention on the Rights of Persons with Disabilities. Article 12 is about people having the right to equal recognition before the law, and this has led to many countries revising their Guardianship laws to ensure people with a disability or mental health issues have autonomy over their decisions.

When people are deemed to not have capacity, through disability or mental health issues, their right to make their own decisions about their medical treatment, finances, living situation and other important life choices is taken away and given to a substitute guardian. We know that many people with mental health issues feel this is discriminatory and that they should be able to make those decisions independently. We also know that many people feel their capacity to make decisions fluctuates, and any laws about guardianship need to take this into account.

We made a number of submissions to the review, and covered things such as a supported decision-making system, fluctuating capacity, seclusion and restraint, forced medical decisions, advanced care plans or wellness plans, a public advocate for people with guardians, the issues with the mental health act and guardianship, and language around disability and guardianship. We look forward to reading the Law Reform Commission's final report.

Committees Being was involved with

- Australia Coalition to End Loneliness
- Australian OPCAT Network
- Children and Youth Mental Health Sub-Committee
- Clinical Advisory Council
- Community Living Supports (CLS) and Housing and Accommodation Support Initiative (HASI) Peak Stakeholders Forum
- Health and Education CAMHS committee
- Health Equity Alliance (NCOSS)
- Mental Health Program Council
- Mental Health Promotion Reference Group
- Mental Health workforce plan advisory committee
- MH-C & YP Family Focused Recovery Framework Advisory Group
- MHDA Root Cause Analysis
- NCOSS Disability Network Forum
- NSW Ombudsman Disability Roundtable
- Older Persons Working Group
- Transfer of Care review committee
- Your Experience of Service committee
- Consumer Sub Committee to Program Council (MOH)

Transfer of Care Committee

We know that transitioning between services or care providers, for example when leaving hospital, can be a difficult and stressful time for people. Earlier this year Being was given the opportunity to help make this transition smoother by contributing to a review of the Transfer of Care policy.

We wanted to make sure the voices of people with a lived experience were at the core of the review process right from the beginning. To make this happen, we ran a survey in June 2017 to find out about people's experiences and the changes they wanted to see. Four main issues came up repeatedly:

- Communication – people wanted more information
- Inclusion – people wanted to be included in planning
- Insufficient consideration of practical concerns – people were often discharged without consideration of their home situation or supports
- Connection to appropriate services

We took this information back to the committee, and it was used in development of the new draft policy. It has given us a strong foundation to positively influence this policy, and to use in other policy conversations relating to transfer of care, discharge and leave.

Our 2017 budget response

In June 2017 the NSW government launched its new budget. We were pleased to see an increase in funding for mental health services, which demonstrated that the government recognised the overwhelming impact of mental health issues on our community. However, much of the new funding flowed to business as usual rather than mental health reform and early intervention. The largest component of new funding was over \$45 million to improve hospital services, despite it being well established that people with mental health issues have better experiences when provided with care in the community.

We were particularly excited to see the government recognising the pivotal role of peer workers in mental health recovery with increased dedicated funding. In our budget response we urged the government to continue investing in peer workers, both in hospital and community settings.

Overall, the budget delivered a much-needed boost in mental health funding. However, to people living with mental health issues in NSW this is only a drop in the ocean in regards to the need for further financial investment in services, and the cultural change required to really make our mental health support services recovery orientated and trauma-informed.

You can read our full budget response, with more information on mental health services, housing, the NDIS, young people and culturally and linguistically diverse communities, on our website.

Supporting and facilitating participation of people with a lived experience

Experts by Experience: our new Speakers Bureau

In May, in collaboration with our Collective Purpose partners Mental Health Carers NSW, we launched our consumer and carer speaker initiative, the Experts by Experience Speakers Bureau.

The Bureau seeks to link consumer and carer speakers with opportunities to participate meaningfully in changing the hearts and minds of mental health services. The initiative also aims to upskill consumers and carers to tell their story in a safe and effective way.

Being and Mental Health Carers NSW are often approached by services to identify people who can speak at conferences, tell their story for written or video resources, or participate in committees or projects. Through the Speakers Bureau, we have created a cohesive list of interested people who have relevant experience and skills around sharing their story, as well as people who would like to gain access to resources to hone these skills.

So far the Speakers Bureau has received great feedback from both participants and event organisers, and we're looking forward to offering our speakers some fantastic new training opportunities in the coming year!

Amplifying the voices of people with lived experience

NSW Health Creating Positive Cultures of Care

In May 2017 Kirsten and Elena assisted NSW Health to find and support consumers to attend a panel that they ran for staff in all mental health units in NSW on reducing seclusion and restraint. NSW Health organised for experts in this area from the United States to come and deliver training to staff on how to create a different hospital environment and mental health system, that in turn reduces violence, seclusion and restraint. Panel members consisting of carers, and consumers who had experienced seclusion or restraint while in hospital, were encouraged to share their stories, and tell staff the impact that those experiences had on their mental health.

Aged Care channel

In early 2017 Elena worked with Aged Care Channel (ACC) to find people with a lived experience of Bipolar or Schizophrenia to participate in a program called 'Mental Health: Living with a Condition'. Originally, they were looking for one or two people to share their lived experience, however after speaking with people they decided on four and had a fantastic day of filming. The program is in its final stages of production.

Consumer Journeys

In July 2016 COORDINARE, the South Eastern Primary Health Network, engaged Being to document mental health consumers' stories to highlight areas of strength and weakness within the mental health system in south-eastern NSW. This will enable COORDINARE to use real life experiences for planning, development and commissioning of services.

Being interviewed consumers between August and October 2016. One carer and seven consumers were interviewed and photographed, and their stories were written from those interviews. Three consumers and one carer were filmed, and their stories were made into short videos. These participants were from all over the South East of NSW and each had their own unique story to tell.

Daniel's Story:

Nicki introduced me to SPECTRUM (run by Headspace), which started off as a gay, lesbian and transgender group, but now it's just sort of an all-inclusive youth group. We meet up on the every second Monday, and we'll have a chat about what is in our head-space. If someone's had family issues, or they've just had a rough week we're sort of all there to talk with each other. Other times we have special guests. We had a businessman who identifies as gay and he's like a part of our group, and listens to us and gives us advice.

A lot of us are still in the closet and we haven't told our problems to anyone because of that, so it is good to come in and know that you're welcome, it's a safe place. You don't have to worry about being persecuted. We're all equal at SPECTRUM, and it doesn't matter what you identify as or who you are. When I came out at SPECTRUM I was really nervous because I didn't know how everyone would respond and it was a big deal. But it was really good because nobody treated it like it was a big deal, they were all supportive. I struggled with social skills before I went to SPECTRUM. Broadening my horizons and finding out I could actually be pretty good in a conversation was good. I just needed support to do it.

I like that part of Headspace, and I think the other part is the people are really friendly, they treat you as a person and don't put you in a box.



Fighting stigma and sharing resources: Our projects and events

2017 Recovery Forum: Shaping the Landscape of Mental Health Services

For our Recovery Forum this year we travelled down to Shoalhaven to explore the theme ‘Shaping the landscape of changing mental health services’.

It was a pleasure to spend a day with such passionate, informed people, discussing mental health services and the issues that matter most to people living with mental health issues in that area.

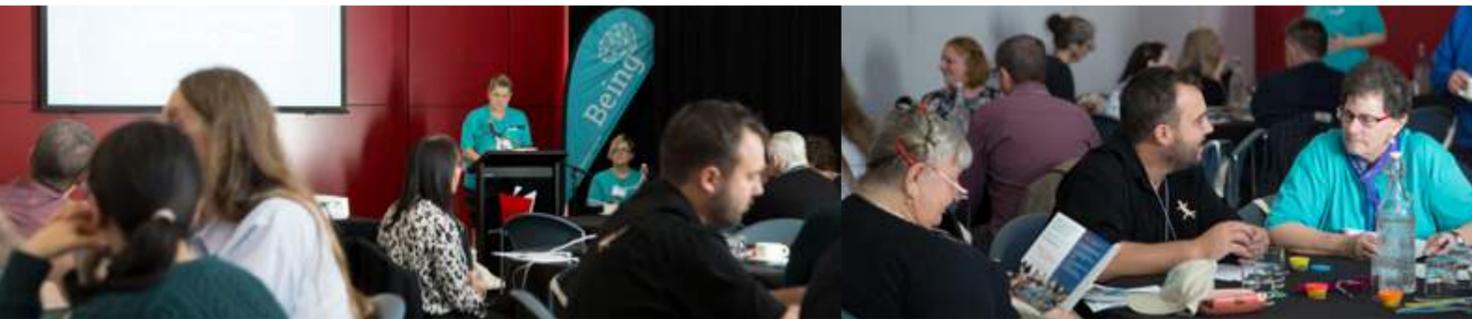
At the beginning of the day we heard from Jaime with an

introduction to systemic advocacy and the work Being does. Next, we wanted to highlight the power of lived experience and showed sections of the 2016 TheMHS videos that resonated with us. They were Robin Youngson’s talk on ‘The heart of healing – a compassionate approach to mental illness’ and Joe Macdonald’s talk on ‘Clarity and complexity: being a non-binary Transgender Person’.

One of the highlights of the day was the panel discussion on experiences of local service design

and delivery focusing on consumer participation and co-design. Thank you to all our wonderful panel members: Jon Strang, Chris O’Sullivan, Helen Backhouse, Shane Bentley and Tina Kenny.

In the afternoon we got into four groups to talk about different topics (the NDIS, issues facing young people, human rights, and living well in later life). We finished off the day with self-care techniques, freshly baked scones and some networking.



“Friends: How do you cope when your friend has bipolar disorder”

Another exciting event hosted by Being was the launch of Julia Busquets’s book “Friends: How Do You Cope When Your Friend Has Bipolar Disorder”. The book is a handy guide for the friends of those who are diagnosed with Bipolar Disorder. The launch included a book signing and a reading by Julia. Congratulations to Julia on the launch of her book.



Lived Experience Ideas Exchange



We were thrilled to hold our first Lived Experience Ideas Exchange in October at the Collective Purpose conference rooms.

The event brought together consumer advocates, policy makers and service providers in the mental health sector to network, share information on new initiatives and discuss opportunities for collaboration. Thirty people attended the event and 13 people presented their initiatives.

The day included a mix of presentations and workshops, covering a diversity of initiatives, many of which were consumer-driven and led. Some were already up and running, and were inviting more people to join, while others were in the early stages of being developed, and were

seeking feedback from people to help it grow. In an open and inviting environment, there were opportunities for people to catch up with presenters, explore options for working together and meet new people.

We would like to thank the following people for presenting their initiatives:

- Professional Practice Academy – Joanna Wilson and Luke Carey
- BEYOND IGNITION – Nat Ellis
- Introducing Peer Workforce into Youth Early Psychosis headspace – Marko Turner and Gillian Abadines
- Critical Perspectives on ‘Madness’ Reading Group – Natalia Jerzmanowska and Sarah Roffey
- Thrive – Erin Higgins
- calmEQ – Julia Busquets

- Lived Experience Project: establishing a framework for participation, influence and leadership – Sage Green and Jenna Roberts
- Recovery-Oriented Practice Evaluation Service (ROPES) – Bè Aadam
- Peer Work in Australia – Jae Radican

“It ignited ideas in my mind about how I can contribute and use my lived experience in a positive way, being supported, educated and access/utilise great training opportunities”
(Attendee, 2016)

Into the Light: An Arabic Resource on Psychological Health

In 2016 Being developed a three-part video resource in Arabic called ‘Into the Light’. The resource aims to engage the Arabic-speaking communities in NSW on psychological health, distress and seeking help, in a way that is relevant, useful and culturally appropriate.

The resource was produced in partnership with Arabic-speaking communities and those who work closely with them. We created a three-part video resource to cover the key perspectives that people identified as



important, from Arabic migrants who have experienced psychological distress themselves, mental health professionals and Arabic religious representatives.

The videos are in Arabic with English subtitles and are available to view on the Being YouTube account and website. A DVD with all three videos is available for free on request. We will continue to promote the resource and work with Arabic-speaking communities on mental health.

Connecting consumers and the sector

Consumer Workers' Forum

The 2016 Consumers Workers' Forum was held on the 24 and 25 November at the Mercure hotel in Sydney. The annual Consumer Worker's Forum brings together the state's public mental health peer workers (Consumer Workers). The 2016 Forum was attended by 85 Consumer Workers over the two day period, representing 12 of the 15 LHDs and Specialty Health Networks in NSW.

The 2016 Forum included addresses from guest speakers in the mental health sector, professional development workshops and a range of presentations from Consumer Workers across NSW.

Thank you to this year's guest speakers: Guest Speakers

- Fay Jackson, NSW Deputy Mental Health Commissioner
- Karin Lines, Executive Director of the Mental Health Branch
- Jae Radican, NSW Mental Health Peer Workforce Coordinator

The event received great feedback, with many comments outlining the value of the forum in "fostering hope" and "connecting with fellow Consumer Workers".

Systemic Advocacy Training

In October 2016, we delivered our three-day consumer advocacy training at the NSW Health Education and Training Institute. The course, facilitated by Dr Peri O'Shea, is suitable for beginners who are just starting out, as well as consumers who are already working in the space and may want to brush up on their advocacy skills or fill in the gaps with insight that has not been presented in other settings.

We are pleased to see more people becoming engaged in the mental health consumer advocacy space. HETI continues to run consumer advocacy training, so anyone interested in this training should contact Being.

Speaking to organisations about consumer perspectives

CAMHS

Benchmarking Forum on consumer participation In May Kirsten presented to a NSW Health Children and Adolescent Mental Health Benchmarking Forum on consumer participation and ways to include young consumers in the design of programs and services. She was able to provide detailed information on what consumer participation is, what an ideal LHD consumer participation framework might look like, and how Being can support NSW Health Child and Adolescent Mental Health services with their consumer participation. This was very well received and many of the people in attendance have been coming to Being to get further advice as they are all keen to have young people involved.

New Horizons

In February Rachael and Kirsten were invited to visit New Horizons and speak with all the staff about some of Being's work. Rachael spoke about the various events and projects that Being organises, including the Consumer Worker's Forum, the Recovery Conference and Recovery in Art. Kirsten outlined Being's Policy Advocacy process, spoke about the work that the policy team was up to. The staff of the HASI program that is run out of New Horizons were particularly interested in what consumers had to say about housing issues. It was a great opportunity to share what consumers have said with service providers, who can then use that feedback in their workplaces.

Being at the TheMHS 2016

The 2016 TheMHS Conference was held in Auckland, New Zealand.

We were able to offer sponsorship for four Board members – Bani Aadam, Kate Gill, Sunny Hemraj, and Virginia Divall – and three consumer applicants – Mahlie Jewell, Andrew Loxton and Jess English – to attend, alongside Peri.

The theme of the conference was People: authenticity starts in the heart, a theme which aimed to focus attention on everyone involved in the mental health system, from individuals who use services, to their family and whānau, service providers, and community members.

We're glad to report that everyone we supported to attend provided great feedback about the conference, and found it a hugely valuable experience.

Being at the UN

This year Being had an exciting opportunity to focus on human rights for people with a lived experience of mental health issues.

We received a grant from the Department of Social Services and the Australian Human Rights Commission to send a staff member to attend the 10th Conference of States Parties to the United Nations Convention on the Rights of Persons with Disabilities (CRPD) in June. Kirsten from the policy team attended as a member of Australia's Civil Society Delegation, made up of people from different Disabled Persons Organisations (DPOs) and Non-Government Organisations who work in this area.

The Conference is held each year for countries that have signed the convention to meet and discuss the progress they are making in implementing the convention, and to discuss various aspects of the convention.

Some of the key side events that Kirsten attended were:

- Mental Health, Human Rights, and Alternative Supports.
- Media and Persons with Disabilities: How to change attitudes through media
- Participation of persons with disabilities in political and public life
- I decide therefore I am – the new human rights paradigm for persons with disabilities
- CRPD article 12 implementation – realising the right to legal capacity with disabilities
- How establishing partnerships with multiple different types of stakeholders helps to increase access to the political process.

Some key learnings Kirsten has come back with are: the differences internationally in definitions around mental health issues and psycho-social disability, how mental health is covered in the CRPD, and ways to ensure that people with a lived experience benefit from the rights afforded in the convention, ways people

with disabilities and their representative organisations can be involved in the political process, creative ways of breaking down stigma in society through the use of media, and a lot of detailed information about how different countries are working to implement Article 12 and change their Guardianship Laws.

There was a lot of time for networking, and Kirsten met people from all over the world who work in disability and mental health and human rights. She has also forged strong relationships with the other civil society, and Government delegates, and we are already planning how Being can be involved in future conferences either as attendees or by influencing some of the agenda in the pre-planning stage.



John Feneley reflects on his time as Mental Health Commissioner

In July, Collective Purpose welcomed John Feneley to our offices for a celebration of his time as Mental Health Commissioner. While he was here, John sat down with Kirsten and Emma to discuss his time at the Commission.

When discussing the lessons he's learnt during his time as Commissioner, John told us that the most significant thing was that the mental health community is an incredibly welcoming one, regardless of the difficulties that many of the people within it continue to experience. "I didn't necessarily expect that. I thought it'd be more of an uphill battle. But over the last five very years I've discovered that I get a lot of energy and drive from others working in this space." This incredible energy continued to inspire John throughout his tenure. "Whenever I felt doubt or wondered how hard we should push on something, I found that just by spending time with the sector I'd come away feeling charged and confident again."

We also asked John about the Commission's work, and he noted that focusing on "what needs to be done, as opposed to who needs to do it" and ensuring a whole of government and whole of community approach, have been key. He also discussed the importance of true co-design, collaboration and understanding – not just with people with lived experience of mental health issues and their carers, but also between agencies. These priorities were captured in Living Well, the Commission's 10-year plan for mental health reform, which was adopted by the NSW Government in December 2014. Developed with the help of the community and a

strong commitment to co-design, John told us that the focus of the plan was on collective impact. John said he'd seen evidence of its uptake on his travels throughout NSW, observing "Local Health Districts and local communities picking up Living Well and using that as their authority and their license to take actions that will lead to long term change, which is just tremendous."

In terms of future opportunities for the sector, one thing John emphasised was the importance of acknowledging the influence of trauma on people's mental health and ensuring that services, as well as wider systems, are put in place to prevent trauma from occurring. He also believes there's an opportunity for services, including those funded through federal Primary Health Networks or state-based Local Health Districts, to better tailor their support to local communities' needs, as flagged in Living Well. "There's only one railway track when you're talking about service delivery for people, and State and Commonwealth governments have to both be on that together to make sure that people get that service."

The biggest challenge looming on the horizon, John said, is the change to how community-based mental health services are funded. "With the roll out of the National Disability Insurance Scheme, many community-managed organisations are having to completely change their business model. The NDIS has the potential to be a wonderful support but we are going to have to keep an eye on what the changes mean not just for people who experience mental health issues or psychosocial disability, but for the ability of services to meet their needs. The move to individual support packages is a huge change for service providers."



While John's term is coming to an end, he expressed his wish that people working in the mental health sector keep striving for a more effective, safer, kinder mental health system. "Don't give up. We have made great leaps and bounds, and that's what you need to hold on to. People are becoming more receptive to lived experience as expertise, for example, because it's a matter of common sense that if you want to know about something, ask the person who's experienced it."

John also highlighted that we need to be more accepting of difference, and acknowledge that mental health issues are just a part of being human. "An experience of mental illness does not have to define your whole life, or be the end of the story for you. If we provide appropriate supports, and always work to support recovery, there's very high hopes for our community."

To read the full interview, please visit the Being website.

Looking forward to next year 2017-2018

Just as this last year has been jam-packed representing people with a lived experience of mental health issues, the Being team is currently working hard on a variety of issues. Some key things we will be working on this coming year are:

- The review by NSW Health of Seclusion and Restraint in mental health units. We will be sending in our submission in late September and attending subsequent consultations representing and supporting consumers.
- Continuation of our work on the NDIS, and producing information for people with a lived experience of mental health issues who access the NDIS.
- The launch of the 'There's no place like home' report'.
- Continued work on Human Rights and the UN Convention on the Rights of Persons with Disabilities.
- Development of a suite of training packages for both people with lived experience of mental health issues and the industry sector.
- Further development of the peer workforce, including work on the Peer Workforce Framework, development of a Peer Supervision model for rollout across NSW, and introductory training for people seeking work as a peer worker.
- Presentations at TheMHS in late August on the Into the Light Project, Consumer Participation, and the NDIS.
- Working with Mental Health Carers NSW to develop a joint position statement on Consumer Participation, including a set of sector minimum standards for remuneration for consumer participation.
- The launch of the Policy Advocacy Framework.
- The launch of our brand new Being website.
- The Peer Workforce Framework.
- Review of Border to Border: Visions of Hope.
- Continuation on further submissions of position statements and reports.

We will continue to travel around NSW to consult with consumers about issues that are important to them, and how we should best advocate for people with lived experience of mental health issues in NSW.

Financial Reports

NSW CONSUMER ADVISORY GROUP - MENTAL HEALTH INC
ABN 82 549 537 349

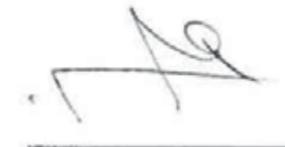
STATEMENT BY MEMBERS OF THE COMMITTEE

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

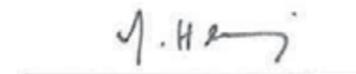
In the opinion of the Committee the financial report:

- (a) Is in accordance with the Australian Charities and Not-for-profits Commission Act 2012 (ACNC Act); and
 - (i) Presents a true and fair view of the financial position of NSW Consumer Advisory Group - Mental Health Inc. as at 30 June 2017 and its performance for the year ended on that date.
 - (ii) comply with Australian Accounting Standards to the extent outlined in Note 1 and the Australian Charities and Not-for-profits Commission Regulation 2013;
- (b) At the date of this statement, there are reasonable grounds to believe that NSW Consumer Advisory Group - Mental Health Inc. Inc. will be able to pay its debts as and when they fall due.

This statement is made in accordance with a resolution of the Committee and is signed for and on behalf of the Committee and in accordance with subsection 60.15(2) of the Australian Charities and Not-for-profits Commission Regulation 2013.



Fayeze Nour
Chairperson



Sunny Hemraj
Treasurer

SYDNEY,
Date: 22/11/17

NSW CONSUMER ADVISORY GROUP - MENTAL HEALTH INC
 ABN 82 549 537 349

AUDITOR'S INDEPENDENCE DECLARATION

Auditor's Independence Declaration to the Committee Members of NSW Consumer Advisory Group - Mental Health Inc, under section 60-40 of the Australian Charities and Not-for-profits Commission Act 2012 (ACNC Act)

I declare that to the best of my knowledge and belief, during the year ended 30 June 2017 there have been:

- (a) no contraventions of the auditor independence requirements of section 60-40 of the ACNC Act in relation to the audit, and
- (b) no contraventions of any applicable code of professional conduct in relation to the audit.


THOMAS DAVIS & CO.


J.G. RYAN PARTNER
 Chartered Accountants

Sydney
 Date: 22 November 2017

NSW CONSUMER ADVISORY GROUP - MENTAL HEALTH INC
 ABN 82 549 537 349

STATEMENT OF FINANCIAL POSITION
AS AT 30TH JUNE 2017

	Notes	2017 \$	2016 \$
Current assets			
Cash assets	5	212,228	189,859
Receivables	6	27,585	29,649
Other assets	7	43,970	34,746
Total current assets		<u>283,781</u>	<u>234,254</u>
Non-current assets			
Other assets	8	80,000	80,000
Property, plant and equipment	9	3,301	5,879
Total non-current assets		<u>83,301</u>	<u>85,879</u>
Total assets		<u>367,082</u>	<u>320,133</u>
Current liabilities			
Payables	10	127,468	31,255
Provisions	11	11,396	60,168
Total current liabilities		<u>138,864</u>	<u>91,423</u>
Non-current liabilities			
Provisions	11	-	20,623
Total non-current liabilities		<u>-</u>	<u>20,623</u>
Total liabilities		<u>138,864</u>	<u>112,046</u>
Net assets		<u>228,218</u>	<u>208,087</u>
Members Funds			
Retained funds	16	228,218	208,087
Total Members Funds		<u>228,218</u>	<u>208,087</u>

The Statement of Financial Position should be read in conjunction with the notes to the financial statements.

DETAILED INCOME STATEMENT
FOR THE FINANCIAL YEAR ENDED 30TH JUNE 2017

	2017 \$	2016 \$
Revenue		
Core Funding (NSW) Health	581,364	590,091
Interest Received	4,893	35
Management Fees	-	2,327
SACS ERO Funding	30,032	-
Project Grants	111,787	58,836
Other Income	21,699	49,644
Reimbursements / Cost recoveries	27,719	117,807
	<u>777,494</u>	<u>818,740</u>
Expenditure		
Accounting Fees	-	70
Advertising & Promotion	3,009	4,950
Assets Purchase <\$500 (OEN-C)	-	500
Audit Fees	4,700	4,600
Bank Charges	317	364
Board Governance Expenses	15,702	24,749
Busi Planning Reporting & Eval	-	1,500
Conferences, Events and Forums	81,310	37,046
Consultations	3,873	7,200
Co-location Expenses	166,523	148,604
Computer Expenses	14,013	866
Consultancy/Contractors Fees	8,800	24,471
Depreciation Expenses (FF&OE)	2,578	2,684
Donations - Asylum seeker	100	-
Employment Support & Supervision	1,800	3,109
Fees and Permits	579	-
Filming	5,362	10,655
Health & Safety	-	79
Insurance General (all)	385	2,403
Management Fees	13,107	6,698
Meeting Expenses	870	1,479
Membership Fees Paid	2,635	1,022
Postage, Freight & Courier	328	164
Printing & Stationery	6,542	6,447
Publication & Inform Resources	91	20
S&W - Annual Leave	5,088	20,504
S&W - LSL Wages	-	2,460
S&W - Recruitment Expense	1,916	1,624
S&W - Personal/Carers Lve	10,473	11,473
S&W - Superannuation Employ Exp	30,284	42,184
S&W - Workers Compensation Ins	1,863	2,070
W&S - Wages & Salaries	327,124	434,414
W&S - MHC Secondment	40,212	-
S&W - Provision Exp Annual Lve	(11,294)	11,304
S&W - Provision Exp LSL <12m	(4,658)	5,342
S&W - Provision Exp LSL >12m	(11,763)	172
Staff Amenities	1,624	62
Telephone Fax & Internet Charge	6,651	8,857
Training & Development (staff)	4,714	4,592
T&A - Staff & Subsistence	21,752	14,231
T&A - MVA Allowance (payroll)	-	1,287
T&A - Meal Allowance (payroll)	660	793
Volunteers Cost	93	-
	<u>757,363</u>	<u>851,049</u>
	<u>20,131</u>	<u>(32,309)</u>

The Detailed Income & Expenditure Statement should be read in conjunction with the attached disclaimer.

STATEMENT OF CASH FLOWS
FOR THE FINANCIAL YEAR ENDED 30TH JUNE 2017

	Notes	2017 \$ Inflows (Outflows)	2016 \$ Inflows (Outflows)
Cash flows from operating activities			
Cash Receipts		774,679	882,577
Cash payments to suppliers and employees		(732,312)	(929,410)
Net cash provided by / (used in) operating activities	13(b)	<u>42,367</u>	<u>(46,833)</u>
Cash flow from investing activities			
Payments for property, plant and equipment		-	-
Net cash provided by / (used in) investing activities		<u>-</u>	<u>-</u>
Cash flow from financing activities			
Advance to collective purpose		-	(100,000)
Net cash provided by / (used in) financing activities		<u>-</u>	<u>(100,000)</u>
Net increase / (decrease) in cash held		42,367	(146,833)
Cash at the beginning of the financial year		169,859	316,692
Cash at the end of the financial year	13(a)	<u>212,226</u>	<u>169,859</u>

The Statement of Cash Flows should be read in conjunction with the notes to the financial statements.

STATEMENT OF PROFIT OR LOSS AND OTHER COMPREHENSIVE INCOME
FOR THE FINANCIAL YEAR ENDED 30TH JUNE 2017

	Notes	2017 \$	2016 \$
Revenue from ordinary activities	2	777,494	818,740
Expenses from ordinary activities:			
Employee expenses	3	(389,245)	(531,547)
Other expenses from ordinary activities	3	(368,118)	(319,502)
Surplus / (deficit) from ordinary activities before income tax expense		20,131	(32,309)
Income tax revenue / (expense) relating to ordinary activities	4	-	-
Surplus / (deficit) from ordinary activities after income tax expense		20,131	(32,309)
Other Comprehensive Income		-	-
Total Comprehensive Income for the Year		20,131	(32,309)

The Statement of Profit or Loss and Other Comprehensive Income should be read in conjunction with the notes to the financial statements.

INDEPENDENT AUDITOR'S REPORT

TO THE MEMBERS OF NSW CONSUMER ADVISORY GROUP -
MENTAL HEALTH INC
ABN 82 549 537 349

Opinion

We have audited the financial report of NSW Consumer Advisory Group - Mental Health Inc., which comprises the statement of financial position as at 30 June 2017, the statement of profit or loss and other comprehensive income, statement of changes in members' funds and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, and the statement by members of the committee.

In our opinion, the financial report of NSW Consumer Advisory Group - Mental Health Inc. has been prepared in accordance with Division 60 of the Australian Charities and Not-for-profits Commission Act 2012, including:

- (a) giving a true and fair view of NSW Consumer Advisory Group - Mental Health Inc.'s financial position as at 30 June, 2017 and of its financial performance for the year then ended; and
- (b) complying with Australian Accounting Standards to the extent described in Note 1 and the Australian Charities and Not-for-profits Commission Regulation 2013.

Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Report section of our report. We are independent of the association in accordance with the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110: Code of Ethics for Professional Accountants (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

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

Emphasis of Matter - Basis of Accounting and Restriction on Distribution and Use

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 NSW Consumer Advisory Group - Mental Health Inc.'s financial reporting responsibilities under the Australian Charities and Not-for-profits Commission Act 2012. As a result, the financial report may not be suitable for another purpose. Our opinion is not modified in respect of this matter.

Responsibilities of the Members of the Committee for the Financial Report

The members of the committee 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 to the financial report is appropriate to meet the needs of the requirements of the Australian Charities and Not-for-profits Commission Act 2012 and is appropriate to meet the needs of the members. The members of the committee responsibility also includes such internal control as the members of 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 members of 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 members of the committee either intend to liquidate the association or to cease operations, or have no realistic alternative but to do so.

Auditor's Responsibilities for the Audit of the Financial Report

Our 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 this financial report.

As part of an audit in accordance with Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We 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 our 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 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 members of the committee.
- Conclude on the appropriateness of the members of the committee' 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 we conclude that a material uncertainty exists, we are 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 our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the association 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.

We communicate with the members of the committee regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Thomas Davis & Co.

THOMAS DAVIS & CO.

J.G. Ryan

J.G. RYAN PARTNER

Chartered Accountants

SYDNEY,
Date: 22 November 2017

Liability Limited by a scheme approved under professional standards legislation.



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