# 2015 ANNUAL REPORT



Mental Health Carers ARAFMI NSW Inc.

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Implementation of

#### Who We Are

The Mental Health Carers ARAFMI Inc. ('Arafmi') is a non-government organisation that provides advocacy and support for families, relatives and friends of people who experience mental illness, living in NSW.

#### What We Do

ARAFMI provides relevant information and training and supports systemic advocacy for families and friends of people living with a mental illness or disorder. ARAFMI's aim is to assist mental health carers to achieve their aspirations of improving:

- the recognition, inclusion, and support for the families and friends of the consumers of mental health services; and,
- the services and outcomes for people with experience of mental illness, (the people the carers are caring for).

Apart from consumers of services, carers in particular need of improved services include:

- Carers in rural NSW
- Carers of Aboriginal and Torres Strait Islander descent
- Carers from non-English speaking backgrounds
- Young carers, especially siblings and children of people living with a mental illness.

#### **Our History**

ARAFMI was formed in Sydney in 1975 by Margaret Lukes, (1915 - 2011) a social worker with the NSW Mental Health Association, as the 'Association of Relatives and Friends of the Mentally Ill'. The first support group was made up of concerned relatives and friends who identified the need for a service that would specifically support carers of people with experience of mental illness.

It was based on the principles of self-help and mutual support to build on the strengths of families, and improve their quality of life by improving their capacity to cope and giving them hope.

ARAFMIs soon started in a number of regional areas in NSW: Central Coast, Hunter, Illawarra and these organisations continue to provide services and support to carers. A series of support groups were established by member volunteers across NSW. The movement quickly spread to the other States and the Northern Territory, and ARAFMI became the primary provider of support to families and friends of people with a mental illness in Australia.

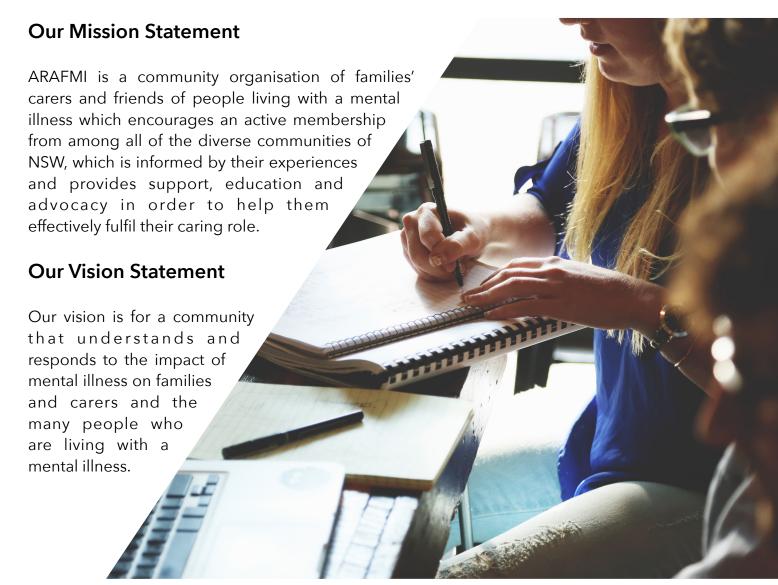
Across its membership and its history - including the present time - volunteers have been a vital part of the organisation. There have been many dedicated members whose work to lessen the impact of mental illness has stood out, and who have sustained ARAFMI's vision.

#### A New Responsibility - Peak Body for NSW Mental Health Carers

In January 2009 'ARAFMI' was appointed by the NSW Minister for Health as the 'Peak Body' in NSW representing the families and carers of people living with a mental illness. This role has continued in collaboration with the NSW Mental Health Commission after its creation in 2012.

As such we have been given the responsibility to undertake the following activities on behalf of carers:

- Conduct regular consultative work across the state to obtain representatives views, experiences and issues of mental health carers.
- Increase the level of advice about the directions of NSW Health, the NSW Government and the Australian Government on mental health issues.
- Increase the level of carer advice and input to NSW Health mental health policy directions and on planning and service delivery issues.
- Increase the level of comprehensive, balanced, systemic advocacy on behalf of mental health carers in the delivery of mental health services in NSW



#### **Aims and Objectives**

- 1. ARAFMI will be a voice for families and carers of people with a mental illness in order to encourage government to acknowledge and incorporate families and carers into mental health policy
- 2. To assist in family and carer focused research and application of its findings for the benefit of families and carers of people living with a mental illness
- 3. ARAFMI recognises and respects the dedication that all families, carers and friends have for those for whom they care; and will support them in their efforts that those for whom they care shall receive proper support and care from mental health services.
- 4. ARAFMI values the experience and knowledge of families and carers and will ensure their full participation in the planning and evaluation of ARAFMI's services.
- 5. ARAFMI will endeavour to:
  - inform mental health professionals and the community of the challenges faced by families and carers of people living with mental illness;
  - encourage mental health professionals and the community to respect the knowledge and rights of families, carers and those for whom they care;
  - encourage mental health professionals to include families and carers in the planning of their loved ones' treatment and care.
- 6. ARAFMI will endeavour to lessen the stigma and isolation suffered by people with mental illness, their families and friends by taking every opportunity to educate and inform the community.
- 7. ARAFMI will collaborate with mental health professionals and community services that provide support to families, carers and friends of people living with a mental illness and will refer people to these services and organisations as needed and appropriate.
- 8. ARAFMI will provide opportunities for families and carers of people living with a mental illness to discuss their situation and benefit from the mutual support of others in similar circumstances in order to help families and carers understand that they are not alone.
- 9. ARAFMI will provide opportunities for community participation and social interaction for families and carers that have become socially isolated.
- 10.ARAFMI is conscious of the diversity of families and carers in the community and aims to help them in their caring role regardless of culture, language, gender, age, or whether or not they choose to become members of ARAFMI; while appropriately respecting cultural differences and special needs.



This process allowed the Board, staff and PAC members to better consider the role of the peak body for mental health carers in the mental health system in the context of reviewing the progress against the Strategic Plan and that Plan's ongoing relevance. After the successful 2014 Review, the Board has undertaken a wider ranging ongoing planning process over the course of 2014-2015.

The revision of the Mission, Vision, Aims and Objects and considered the inclusion of a 'Values' statement in the Constitution, agreed in the last review have been

further refined and amendments will be considered at the 2015 Annual General Meeting.

In particular, the Board has summarised the Vision of ARAFMI as:

'Inclusive Communities; Connecting Carers",

and the Mission of ARAFMI as:

#### 'Empowering Carers for Mental Health'.

The more in depth approach to this strategic planning has also encompassed reviewing funding sources and opportunities and priorities for the future development of the organisation including projects and programs; particularly in the context of the Collective Purpose project now being implemented between our partner organisations, Way Ahead, (Mental Health Association NSW) and Being, (NSW Mental Health and Wellbeing Consumer Advisory Group).





Jonathan Harms, CEO

#### **CEO Report 2015**

Mental Health Carers ARAFMI Inc., (ARAFMI), has enjoyed another successful year as peak body and systemic advocate for the carers of people with lived experience of mental illness in New South Wales, amid many positive developments for mental health carers and the mental health sector in NSW as a whole. In particular, the NSW Mental Health Commission launched the much anticipated NSW Strategic Plan for Mental Health on the 15<sup>th</sup> of December 2014 with Premier Mike Baird and the Ministers for health and mental health; who also announced \$115 million in

additional funding to help to start the implementation of reform; an excellent start. As the Commission found that mental ill health equates to around 14% of the impact of illness in NSW, we can only hope that further announcements will help us achieve increases in funding for mental health services which will make the resources commensurate with this need (given mental health services only currently receive 8% of healthy funding).

ARAFMI's own ongoing Strategic Planning exercise by the Board has helped to focus the organisation's activities for future development in an often difficult funding environment and on the collaborations and partnerships most likely to assist that process. Importantly the Board has identified the engagement of other Community Managed Organisations (CMOs) which support and advocate for mental health carers, as well as those that support carers or people with experience of mental ill health (or the risk of it) in other key sectors; such as education and training (for younger people), and aged care or older persons community organisations (for older people). Thus this year ARAFMI has invited key partners onto the existing mental health carer Peak Advisory Committee ('PAC') successful pioneered in the previous year), including Carers NSW, Carer Assist and Northside Community Forum (Carer Program). We thank our new partners and hope to ensure we are helping inform them of developments and adding value to their own advocacy in the sector. We intend to invite or accommodate more such organisations as our capacity is enhanced by experience in future.

We have also created supplementary Committees to focus on key committees and projects from NSW Health's Mental Health Drug and Alcohol Office ('MHDAO') and Mental Health Commission. Thus we now have an Older Persons PAC, a Younger Persons PAC and will launch the Alcohol and Drug PAC in 2015 - 2016. This has provided a great source of feedback and for ARAFMI as well as MHDAO and the MH Commission and will help us build the across sectoral engagement around mental health and carer issues called for by the Strategic Plan for Mental Health, which the Commission will give the first yearly report on in 2015.

We also help successful events including the 2<sup>nd</sup> Mental Health Carer Support Worker Forum, attended by over 110 people from across NSW and the 'Champions for Change' consultation for the Commission to better understand how to support carers to be effective advocates for mental health reform.

I would like to thank everyone who has contributed to this success, including our Board elected in October 2014, (and those appointed subsequently), and to our key partner organisations such as Way Ahead and Being; now working with us on the Collective Purpose project to enhance our facilities and improve the quality of our corporate services through a shared services collaboration. Other important partners include (but are not limited too) our national peak ARAFMI Australia (Jane Henty), the Institute of Psychiatry, (Rhonda Loftus), Bradfield Park Carer program, Partners in Recovery and more prosaically ENerds, our IT provider and Bridges Accountants our financial services provider. All have gone the extra mile to support ARAFMI and that allows ARAFMI to go further in supporting mental health carers in NSW!

Finally I would like to thank our staff, students and volunteers, current and retired, whose unpaid or underpaid efforts go so far to make our organisation possible! Many thanks again!

#### Jonathan Harms

CEO, Mental Health Carers ARAFMI Inc



Anne Stedman, Presiden

#### **Presidents Report 2015**

Welcome to all, and a very big thank you to all the staff, volunteers and students that have contributed to the continuing growth and development of our organization over the past year. I would also like to extend thanks to our major funding body, the Mental Health Commission of NSW and our collaborative partners Being and Way Ahead (MHA).

We continue to work together to advance the cause of MH Carers and people with lived experience of mental illness and to contribute our collective knowledge to improve mental health services and create a more mentally healthy community. It has been a time of change and development for our organisation. The extension and renovations of our business premises and the formation of the Collective Purpose Hub have been major changes undertaken to improve the range of services, funding sources and administrative efficiency aligning with our strategic mission.

Our CEO, Jonathan Harms, has worked tirelessly to navigate the changes in organisational structures, whilst maintaining his presence at vital meetings and contributing to policy reform and advocacy for mental health carers. The Peak Board and CEO have worked on the Strategic Plan 2015-2017 to incorporate and manage the opportunities and challenges of the next few years. On behalf of the Board I would like to make mention of, and thank, Anne Rouse, Committee member, for driving this process in an enthusiastic, sensitive and professional manner.

This year has been a busy, challenging, and, most rewarding one for me. Along with the election to President of NSW ARAFMI, I continued as President of the Board of Hunter and also took on the role as President of Central Coast ARAFMI. Whilst this is an unprecedented situation, I feel my roles have enabled the ARAFMI organisations to communicate openly and work collaboratively to further strengthen the essential support, information, advocacy, policy reform services we deliver to support mental health carers in a sizeable region of NSW. The next stage is to develop a more formal MoU between the Peak and branches to strengthen the ARAFMI organisations' opportunities within the upcoming NSW Health's State-wide Tendering process.

In the ever-changing Health and funding landscape in which we find ourselves, my role at the Hunter involved guiding change management through the period of incorporation and organisational restructure as well as developing productive relationships with the major stakeholders in the region. Considerable focus has been turned to the Hunter area as a trial site for the NDIS and I have attended many Community of Practice Forms by MHCC and NDIA and am heartened by the positive outcomes already achieved through the participation and knowledge sharing gained from this trial period.

This information and engagement has not only been around the consumer and carer perspective but also organisational readiness and adaptation. Central Coast ARAFMI is in a very strong position to take advantage of increased funding opportunities through the roll out of the NDIS and is also engaged in Strategic Planning exercises to enable the branch to continue its unique service delivery on the Central Coast as well as prepare for changes in the funding landscape. As part of our strategic mission we will endeavour to broaden our range of services to the wider NSW Mental Health carer community, both through ARAFMI service branches and through the Peak's Advocacy and Training, utilising our improved organisational structure and technological capacity.

#### **Anne Stedman**

President, Mental Health Carers ARAFMI Inc

## 2014 /15 MHC ARAFMI Team (Staff, Volunteers and Student Placements)

<u>STAFF</u>	<u>STUDENTS</u>	<u>VOLUNTEERS</u>
1. Caitlin Bambridge	1. Ellen Willis	1. Ross Davey
2. Nikki Day	2. Nicole Wallace	2. Caroline Tamer
3. Micheal Broadhurst	3. Emma Thomas	3. John Bear
4. Lynette Anderson	4. Natasha Seo	4. Ross Cadamy
5. Richard Baldwin	5. Vivian Kukubor- King	5. Alex Freeman
6. Edward Curtis	6. Susana Hatava	6. Kay Healy
7. Sue Gates	7. Ruth Davey	7. Kym Hunter
8. Jonathan Harms	8. Salvador Datu	8. Ray Moss
9. Laura Knight	9. Cosme Moya	9. Ye Rong
10. Audra O'Grady	10. James Fox	10. Leahkena Suos
11. Angelique Parras	11. Fatima Tanana	11. Pauline Ferkula
12. David Peters	12. Amanda Mullen	12. Anthea Stylianakis
13. Lynda Walton	13. Jessica Hainsworth	13. Nadia Campbell
14. Martin Searle	15. Alex Hamilton	14. Peter Li
16. Peter Heggie	17. Saida Yesmin	15. Ray Moss
18. Bi Yun Huang	19. Karen Knight	16. Elizabeth Espinosa
20. Amelia Martinez	21. Amanda Skropidis	17. Lynda Walton
	22. Marsha Hubbard	18. Melody Sgro
	23. Sarah Zordan	19. Eileen McDonald
	24. Siew Leong	
	25. Annaliese Mayday	
	26. Zafer Yalcin	



#### MHC ARAFMI Australia Report

This year was a year of consolidation for Mental Health Carers ARAFMI Australia (MHCAA). We have worked hard to strengthen our organisation as a whole, as well as continuing to raise the voice of mental health carers.

Our outcomes/significant achievements since the March meeting have included:

- \$10,000 from Lundbeck to provide advice and input into their project.
- We have a new indigenous rep on the MHCCF- Simon Williams. ARAFMIWA is sponsoring him on our behalf.
- Our office is now been well established at Mind Australia's central office in Heidelberg, Melbourne. Their significant infrastructure has further strengthened our operational platform.

#### Identification of emerging issues and/or risks:

- Continuing reliance on members to funding and support MHCAA.
- National Carer Survey and helpline is still to be enacted.

#### Other ARAFMI(or formerly Arafmi) organisations around Australia have also been very active:

- Tasmania's Carer Voices Project: I attended the launch and has promoted the project through her networks.
- Mind and ARAFMIWA's A practical guide for working with carers of people with a mental illness in Australia Project has commenced.
- ARAFMIWA changed its name to: Helping Minds.
- ARAFMI's Paper Medication and Mental Illness- A Carer's Perspective. We promoted the paper to the MHA Pharma Collaboration.
- In addition ARAFMI collaborated on a number of submissions on Welfare Reform (including carer payments) to the federal government.
- Victoria: Mind's Economic Study of Mental Health Carers, and Mind's literature review on the NDIS: Awaiting release of documentation to promote. Have used some of the draft content already in presentations to carers about the NDIS.

#### MHCAA NDIS Advocacy

MHCAA NDIS working group has been commenced. As a result of the meeting a draft briefing paper about NDIS carer items was distributed to members.

CEO of MHCAA, Jane Henty met with Jan McLucas twice to discuss issues relating to NDIS and participated in 3 key external NDIS working groups:

- Barwon Mental Health Carer NDIS working group (led by Tandem- the peak body for mental health carers in Vic)
- Diverse Groups/Supported Decision Making Working Group (led by MHC)
- Mental Health Carer NDIS Project PAG meeting (led by Carers Aust.)

ARAFMI Australia plans to use the findings from the 3 projects described below to develop an advocacy paper. The projects include:

- 1. The national mental health carer survey (Mind & MHCAA)
- 2. Economic impacts of mental health carer (Mind)
- 3. Literature review on the impacts of individualised packages on mental health carers (overseas).

#### Mental Health Carer Peak Advisory Committee Chair Report

Another busy year has simply flown by. However, I think much has been achieved in Mental Health. First of all I would like to congratulate Jonathan and the amazing team at ARAFMI for the many excellent initiatives they have created in 2015 eg:

- Partnering with the Mental Health Association & CAG
- The Carers Support Workers Forum
- Champions for Change
- Collective Purpose / Partners in Change
- The best & most informative newsletter in MH
- Plus a myriad of other projects

A big thank you to Jonathan & Matt Keighery (Way Ahead) for the video they made regarding "Friends of Acute Units". (YouTube: https://www.youtube.com/watch?v=ATIZPwFmgGg)



Sandra McDonald PAC Chair

Your support for this special project was very much appreciated. I am impressed by the determination and willingness to partner with others that has occurred in 2015. Drawing together has created a truly strengths based organisation that can continue to spearhead change. Moving forward together could have been this year's slogan! I can't wait to see how far forward we reach in 2016 – exciting times ahead I think!

#### Sandra McDonald

PAC Chair Mental Health Carers ARAFMI Inc.

Mental Health Carer Peak Advisory	Younger Persons Carer Peak	Older Persons Carer Peak Advisory
<u>Committee</u>	Advisory Committee	<u>Committee</u>
Angela Milce, Carers Assist	Lauren Robinson	Ms Jill Faddy OAM
Doug Sewell	Nicole Thomas	Mr Peter Trebilco OAM ED
Eileen McDonald	Jangle Tolley	Ms Sharon McGee
Erika Balance	Noni Hollond	Richard Baldwin
Jacquelin Hochmuth	Tara Ibrahim	Carolina
Jenny Learmont	Eileen Burke	Susan Humphries
Judy Nicholas	Laura Knight	Caitlin Bambridge
Katherine Stone, Carers NSW	Caitlin Bambridge	Edward Curtis
Kathy Hawdon	David Peters	Lynda Walton
Kristine Havron		
Lynette Anderson		
Pauline Ferula		
Peter Trebilico		
Rob Wellman		
Sandra McDonald		
Satu Beverley		
Sheila Peel		
Snow Li, Northside Community Forum		
Tony Humphrey		

#### **ARAFMI Programs and Projects for 2014 - 2015**

ARAFMI is involved in a range of programs and projects advocating for NSW mental health carer's on issues of concern. This last year has seen ARAFMI re-focus our energies to meet the demands of such a mixed and varied range of commitments. All projects and programs were reviewed to ensure they meet the vision, mission and value statements of ARAFMI. We have been very fortunate to have been able to recruit and increase the work place capability of to meet our current and future commitments to carers of NSW.

#### Programs and Projects for 2014 - 2015

- ARAFMI Carer Community Connection Helpline
- Collaboration with Partners in Mental Health; Collective Purpose Project
- ARAFMI Strategic Plan and Business Planning
- ARAFMI Branch Committee Recruitment, Strategic and Business Planning
- Mental Health Commission collaboration including Consultations for Empowerment of Carers to Strategic Plan; Champions for Change
- Carer Peak Advisory Committee (PAC);
  - Younger Persons PAC
  - Older Persons PAC
- 2nd Mental Health Carer Support Worker Forum
- Mandarin Speakers Carer Support Group (North Ryde)
- Delivery of Mental Health First Aid and other Training and Information Presentations
- Development and Pilots of Carer Advocacy Training
- GLBTI Champions Project
- MHCC NDIS Forums

Partners in Change

- Development of Carer Reference Group with St Vincents
- National Advocacy and Joint submissions in partnership with ARAFMI Australia
- Participation in management of ARAFMI Australia (especially on welfare reform and the NDIS)
- Expert Reference Group on the Review of the Mental Health Act (MHDAO)
- Collaboration with Institute of Psychiatry in clinical and community education resource development
- Development and Review of Pamphlets for Carers
- MHCC Peer Worker Scholarships Assessments
   Participation in Mental Health Drug and Alcohol Committees (see below)
   Mental Health Clinical Advisory Council

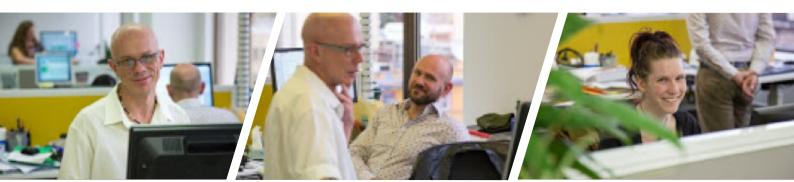


Small Steps

#### **ARAFMI's Community Engagement Activities**

ARAFMI has certainly experienced an exciting time of growth and expansion within its general media section during the financial year of 01 July 2014 to 30 June 2015.

ARAFMI's major media outlets include our 'Carer Community Connections' telephone help-line service, our website, our Facebook page, our weekly sector e-newsletters and our partnership with SANE Australia on the SANE Online Forums.



David Peters, Carer Connection Helpline Coordinator and Laura Knight Y-PAC Project Officer

#### ARAFMI 'Carer Connection' HELPLINE

Our 'Carer Community Connections' telephone service received a total of 371 calls during the period, with 968 referrals being made from these calls. This is an average of almost 3 referrals per call to other organisations which shows ARAFMI not only providing a thorough referral service throughout NSW but also supporting many other mental health related services across the state. Telephone calls received by ARAFMI during this financial year period consisted of around 30% being referred by other agencies, and over 35% being received from regional areas. This not only shows ARAFMI having a strong and positive presence in the mental health sector but also maintaining some good reach into other, more remote areas within the state that do not have as much abundant access to mental health services as those in the metropolitan areas.

The ongoing trend that ARAFMI has monitored for a number of years now is that the majority of carers who seek help appear to be middle aged females, who are either the parent or partner of the person they care for, which is a middle aged male. Interestingly though, almost half (45%) of callers did not identify as the carer of the person and ARAFMI wonders if this cohort, while not formally identifying as carers, are in fact "hidden carers" who still perform the remarkable task of caring for a loved one. Overall, ARAFMI appears to be providing a good service to carers who require a first point of contact into the NSW Mental Health system, by offering support and information by way of effective referrals to other services and organisations that can meet their needs.

#### ARAFMI HELPLINE - Free Call 1800 655 198 or (02) 9332 0700

#### Website

ARAFMI's website has been steadily growing over the course of the financial year, and we believe this is one of the most prominent areas of sector recognition we have. At the beginning of July 2014, ARAFMI created a brand new website, and since that time has received 57,075 views, with an average of 210 views per day. ARAFMI's website is updated daily with sector news and events from various services and organisations throughout NSW, thus providing a solid platform for all mental health services to bind together and work more cohesively.



ARAFMI's Facebook page is another great example of the organisation reaching out to many people across the state, and in the case of Facebook, across the country as well. During the year July 2014 - June 2015, Arafmi's Facebook page received

a total of 121,677 instances where people logged on and viewed any content associated with the page. There was also 108,863 instances where people logged on and viewed, shared or commented on any of the page posts. At July 2014, ARAFMI had a total of 693 members or 'likes' to the page and this figure increased to 846 as at June 2015.

#### Carer Support Worker and Carer Peak Advisory Committee Weekly Emails

Our weekly sector e-newsletters are also a vital component of ARAFMI's general media activities. The e-newsletters consist of upcoming events within the mental health sector, specific reports and articles of interest, and updated newsletters from other organisations that ARAFMI promotes. The lists of recipients for these newsletters are added to and updated regularly, and includes members from our Peak Advisory Committees, Carer Support Workers and a register made up of Carers from across NSW. As at June 2015, ARAFMI is sending weekly e-newsletters to a total of 411 people, mainly carers and carer support workers throughout NSW and across the country. These include the members of ARAFMIs mental health carer Peak Advisory Committees (PACs).

#### SANE Australia / ARAFMI On-Line Carer Forum

Finally, ARAFMI is pleased to continue its ongoing relationship with SANE Australia on the online Sane Forums. In July 2014, ARAFMI became a partner with SANE Australia in providing these forums, which have become an integral part of Arafmi's media activities, and can be accessed from Arafmi's website. The Carers Forums consists of thousands of carers across Australia and provides a safe, anonymous peer support platform in which carers can discuss with each other issues that both directly and indirectly affect them in their caring role. At the end of June 2015, data has shown that a total of 11,305 people had visited the forums through ARAFMI's website.

This Forum is available through a link on the ARAFMI Website and can be found at: http://Arafminsw.saneforums.org/

Overall, Mental Health Carers ARAFMI Inc. is very pleased with its media activities throughout the financial year period of July 2014 - June 2015. We feel we are meeting the needs of, and connecting with many carers across NSW. Furthermore, we are pleased to announce that we have not only met our target for this last financial year, but far exceeded even our own expectations. We look forward to another successful year at ARAFMI.

#### **ARAFMI Peak Advisory Committees**

ARAFMI Peak Advisory Committee (PAC) has now been established and contributing to the needs voice of carers in NSW. The PAC was recruited from among carer activists with a wealth of experience and insight into the issues of mental health carers issues.

The primary aim of this committee is to provide the link between ARAFMI Board, management and staff to:

- provide advice of carer experience and views to help inform ARAFMI's feedback to the sector and the Mental Health Commission on mental health and carer issues
- to identify projects, activities and advocacy issues for ARAFMI; and,
- facilitate the regular exchange of carer views on topics about which ARAFMI is asked for comment.

The PAC has experimented with sub committees to address specific topical subjects and with regular guest speakers before meetings.

PAC members now number 35, including younger and older carers and carers from CALD and indigenous backgrounds.



The PAC elected Sandra McDonald of 'Beautiful Minds' in South West Sydney as its second Chair. PAC Members also receive a regular weekly email providing updates about events, development and opportunities for carer engagement within the sector, as well as minutes and other PAC documents.

The PAC has furnished much valuable input which has been incorporated into various submissions and policy documents that ARAFMI has assisted with through various standing Committees of special Project Committees convened by the Mental Health Drug and Alcohol Office of the Ministry of Health (e.g. the 'Advanced Care Planning' guidelines project

and the 'Physical Care of Mental Health Consumers Policy Directive riew').

In addition to advising ARAFMI on consultation strategies and advocacy issues the PAC Members participated in the Strategic Planning day to review ARAFMI's Vision, Mission Aims and Objects and Values Statement.

The Terms of Reference of the PAC are being reviewed annually to help refocus attention on the specific standing Committees in particular ARAFMI provides carer input into and to also help identify ways ARAFMI can support to undertake practical support for their local services and to be activists in their own local communities.

#### @ARAFMI Weekly Newsletter

In order to promote internal communication and to keep staff and other stake holder advised of Arafmi's regular activities, ARAFMI has developed a regular weekly email to staff which is also posted on the website and which includes a report from the CEO. ARAFMI also reviews a large number of newsletters and receives a large number of invitations for carers and others to participate in events as well as advice of new resources and opportunities for personal development or participation in advocacy activities.

#### Consultations and Events in 2014 - 2015

#### Second ARAFMI Mental Health Carer Support Worker Forum 2014

The 90 William Street, Woolloomooloo. ARAFMI convened teleconferences with the Carer Support Worker Forum contact list to help develop the objectives and design the event. Funding was received from the Australian Government through the Mental health Council of Australia's conference funding programme which helped to fund the event including providing assistance to carers and consumers to attend by providing support for travel and accommodation.



Mental Health Carer Support Worker Forum 2014 at the Boulevard, Woolloomooloo

From the 111 Carer Support Workers registered across rural, remote and metropolitan NSW, we had a total of 84 attendees on the day.

Presentations on the day were delivered from;

- Mental Health Carers ARAFM Inc. CEO, Jonathan Harms
- Carer Advocates A carers perspective & Self-care and Carer Support Workers
- Mental Health Commission of NSW
- Centre of Excellence in Peer Support (CEPS) ARAFEMI Victoria
- Carers NSW Support for Carers in the Workplace
- NSW Department of Family & Community Services NSW Carer Strategy 2014-2019
- Carer Assist Carer Recovery and Evidence Based Education for Carers 'Recovery Model'
- The NSW HealthCare Complaints Commission how to make a complaint about mental health care and what happens next.
- Welfare Rights of NSW Carer Allowance / Carer Payments/DSP
- Mental Health Coordinating Council Certificate IV in Mental Health Peer Work

Carer and Carer Support Workers attending were happy with the recognition of their important role and gave positive feedback which will allow even more relevant and engaging Forums to be held in future.

#### **Champions for Change Consultation**

The aim of the 'Champions for Change' (first stage) is to be able to identify the best means of engaging people in the advocacy and the implementation systemic and cultural changes envisaged by the NSW Strategic Plan in the mental health system and across health and human services in NSW.

This project responded to a call from the NSW Mental Health Commission to consult and advise about the ways in which consumers of mental health services and their carers could become 'Champions for Change' This event was funded by the Mental health Commission and was conducted in collaboration with Northside Community Forum at Hornsby RSL. ARAFMI particularly thanks Snow Li from Northside for her assistance with this project.

A preliminary survey on the Strategic Plan had been administered to a large group of carers at a respite event with Northside Community Forum earlier this year. However, the funding provided by the Mental Health Commission of New South Wales allowed this further, specific consultation to take place. In addition a number of other methods of engaging carers beyond the face to face event were trialled.

The event was held in the Hornsby RSL on the 24th of June and was attended by 76 people. The survey to be administered was developed after extensive discussion by 'Being' and largely adopted with adaptations for the carer audience to make results more comparable. This survey was also made available on line.

As a result of responses, ARAFMI was able to recommend that details of all Community and Carer Reference or consultation groups operated by all Local Health Districts, Public Health Networks, Health Services and other health services and government departments be collected and made available to people wanting to become active in reform in their local area so that participation is as accessible as possible for the widest possible section of the community.

ARAFMI also suggested that new models must be suggested by the Commission and supported by health services generally to help mobilising the community behind mental health and related reform.

#### Training and Information Presentations 2014-2015

During the financial year 2014/2015, ARAFMI was involved in both facilitating and delivering many training sessions to carers, consumers and some clinicians other community members.

These included accredited training courses such as the 2-day Mental Health First Aid course, which was delivered by a qualified trainer and assessor on 2 separate occasions. The aim of this training is to educate people on how to deal with someone experiencing a mental health crisis. On both of these occasions, ARAFMI had up to 20 people in attendance, and received very positive feedback.



In April 2015, ARAFMI also held the first of their Systemic Advocacy training sessions. This training was delivered by a qualified trainer and assessor on staff, who also researched this training course. The aim of this training is to discuss and implement effective advocacy strategies for making positive change. ARAFMI received excellent feedback from this training, and has since further developed the training into a full 2-day systemic and individual training course, which is being delivered to other organisations within the mental health sector throughout NSW.

Furthermore, ARAFMI delivered their Carer Support Workers Forum in August 2014 to around 100 carers and support workers from across NSW. This training consisted of many professional speakers, delivering their thoughts on effectively working in the most positive way when caring for someone with a mental illness. The second day of this forum consisted of the Open Dialogue training, which is training on a Finnish method of supporting people with mental illness, and often those experiencing schizophrenia and psychosis.

Lastly, Mental Health Carers ARAFMI provides ongoing in-house training to all new staff, students and volunteers that are welcomed into the organisation. This training consists of methods of dealing with people in crisis, namely dealing with distressed callers over the telephone. This training is delivered to every staff member that commences with ARAFMI, with the aim of ensuring all staff are adequately trained in mental health issues and dealing with people in distress. According to our records, we have delivered this training to 16 new staff, students or volunteers during the financial year period of 2014/2015.

Mental Health Carers ARAFMI Inc. prides itself not only on its research and advocacy strengths, but also on achieving greater community awareness by delivering and facilitating relevant training in order to ensure the best possible level of skill and knowledge is maintained within the sector.

#### Partners in Change

Since 2006 ARAFMI has co-located with our partners Being (formerly NSW Consumer Advisory group) and the Mental Health Association NSW, calling ourselves the 'Partners in Mental Health'.

In December 2013 this collaboration took a significant step forward with the decision to examine the possibility of sharing corporate services between the organisations while also refurbishing the premises and revamping our Information Technology platforms. This would allow us to access cutting edge technology for advocacy and outreach as well as enhancing the quality of corporate services.

This lead to the establishment of a mental health 'hub' located in the current premises but open to more non-government organisations in the mental health and wellbeing and related sectors. We have called this hub, Collective Purpose and the refurbishment of the premises was conducted between march and April 2015.

The IT upgrade is nearly complete and the pioneering of shared services in finance, human resources and administration is ongoing. We Intend to open this up to other organisations If successful in July 2016.



#### 2015 COMMITTEE'S REPORT

Your committee members present their report on the association for the year ended 30 June 2015.

#### **Committee Members**

The names of the committee member in office at the date of this report are:

ANNE STEADMAN (President)
JENNY LEARMONT (Vice President)
FAYEZ NOUR (Treasurer)
TESS DELLAGIACOMA (Secretary)
ANNE ROUSE
KRISTINE HAVRON
MARY LOU CARTER
JUDY NICHOLAS

#### **Principal Activities**

The principal activities of the company during the financial year were to provide support and advocacy for families with mental illness or disorder. ARAFMI reaches out with friendship and understanding to all those lives that are touched by mental illness. Our aim is to maintain and improve existing levels of support and crisis resolution to all relatives and friends of people with a mental illness.

There were no significant changes in the nature of the associations principal activities during the financial year.

#### **Operating Results**

The loss of the association for the financial year amounted to \$3,646

#### **Indemnifying Officers or Auditor**

No indemnities have been given or insurance premiums paid, during or since the end of the financial year, for any person who is or has been an officer or auditor of the association.

Signed in accordance with a resolution of the Members of the Committee:

Committee Member

ANNE STEADMAN (President)

Committee Member

JENNY LEARMONT (Vice President)

Dated this 22 day of

2015

#### FINANCIAL REPORT FOR THE YEAR ENDED 30 JUNE 2015

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#### INCOME AND EXPENDITURE STATEMENT FOR THE YEAR ENDED 30th June 2015

	2015 \$	2014 \$
INCOME		
Conference Reimbursement	4,656	23,489
Donation Received	25,953	26,148
Grant Income	365,514	393,826
Interest Received	2,322	2,752
Membership	568	587
Other Revenue	22,010	8,749
TOTAL INCOME	421,023	455,551
EXPENSES		
Accountancy & Bookkeeping	13,060	12,173
Amortisation - Other	499	-
AGM & Annual Reports	1,500	-
Auditors Remuneration - Fees	5,590	5,577
Bank Charges & Interest	266	513
Consultants	5,582	5,946
Conference & Catering	6,615	17,344
Depreciation	8,115	3,167
Entertainment & Donations	540	1,906
Events & Workshops	12,426	1,954
Filing Fees	98	513
Holiday Pay Entitlements	(34)	6,680
Insurance & Workers Comp	9,198	9,462
Lease & Overheads - PiMH	19,376	1 122
Postage Printing, Stationary & Copier	1,038	1,123 22,334
Programs, Resources & Training	18,363	2,940
Service Promotion	2,070 100	1,310
Sponsorship	100	6,000
Staff Other	_	1,000
Staff Training	2,198	5,571
Storage & Removal	770	
Subscriptions & Membership	8,384	8,018
Superannuation Superannuation	24,002	28,444
Telephone & Internet	7,829	7,113
Travel & Accommodation	10,136	16,495
Web Hosting	-	155
Wages & Fringe Benefits	264,601	318,176
TOTAL EXPENSES	422,322	483,914
OPERATING LOSS	1,299	28,363
NON-OPERATING INCOME AND EXPENSES		
Non Operating Expenses		
Loss on Sale of Fixed Assets	1,892	-
Prior Year Adj	455	-
•		
	(2,347)	
OPERATING LOSS	3,646	28,363

The accompanying notes form part of these financial statements

#### INCOME AND EXPENDITURE STATEMENT FOR THE YEAR ENDED 30th June 2015

	2015 \$	2014 \$
Retained Profits at July 1	64,244	92,414
<b>Transfers From Reserves</b> General Reserve Transfer In/(Out)	321	193
PROFIT AVAILABLE FOR APPROPRIATION	60,919	64,244
RETAINED PROFITS	60,919	64,244

The accompanying notes form part of these financial statements

#### ASSETS AND LIABILITIES STATEMENT AS AT 30 JUNE 2015

	NOTE	2015	2014 \$
CURRENT ASSETS			
Cash Assets	4	96,934	88,145
Other	7 _	5,452	25,919
TOTAL CURRENT ASSETS	_	102,386	114,064
NON-CURRENT ASSETS			
Property, Plant and Equipment	5	11,212	6,314
Intangible Assets	6 _	2,000	
TOTAL NON-CURRENT ASSETS	_	13,212	6,314
TOTAL ASSETS	_	115,598	120,378
CURRENT LIABILITIES			
Trade and Other Payables	8	40,112	41,212
Provisions	9 _	14,567	14,601
TOTAL CURRENT LIABILITIES	_	54,679	55,813
TOTAL LIABILITIES	_	54,679	55,813
NET ASSETS	-	60,919	64,565
EQUITY			
Reserves	10	-	321
Retained Profits	11 _	60,919	64,244
TOTAL EQUITY	_	60,919	64,565

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30th June 2015

#### NOTE 1 - STATEMENT OF SIGNIFICANT ACCOUNTING POLICIES

The financial statements are special purpose financial statements prepared in order to satisfy the financial reporting requirements of the NSW Associations Incorporation Act 2009. The committee have determined that the assoication is not a reporting entity.

The financial report has been prepared on an accruals basis and is based on historical costs and does not take into account changing money values or, except where stated, current valuations of non-current assets. Cost is based on the fair values of the consideration given in exchange for assets.

The following is a summary of the material accounting policies adopted by the association in the preparation of the financial report. The accounting policies have been consistently applied, unless otherwise stated.

#### **Impairment of Assets**

At the end of each reporting period, the committee assesses whether there is any indication that an asset may be impaired. The assessment will consider both external and internal sources of information. If such an indication exists, an impairment test is carried out on the asset by comparing the recoverable amount of that asset, being the higher of the asset's fair value less costs to sell and its value-in-use, to the asset's carrying amount. Any excess of the asset's carrying amount over its recoverable amount is immediately recognised in profit or loss statement.

#### **Accounts Receivable and Other Receivables**

Accounts receivable are recognised initially at the transaction price (i.e. cost) and are subsequently measured at cost less provision for impairment. Receivables expected to be collected within 12 months of the end of the reporting period are classified as current assets. All other receivables are classified as non-current assets.

At the end of each reporting period, the carrying amount of accounts receivable and other receivables are reviewed to determine whether there is any objective evidence that the amounts are not recoverable. If so, an impairment loss is recognised immediately in profit and loss statement.

The accompanying notes form part of these financial statements

#### NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30th June 2015

#### Property, Plant and Equipment

Each class of property, plant and equipment are carried at cost or fair value less, where applicable, any accumulated depreciation.

#### **Property**

Freehold land and buildings are measured on the fair value basis, being the amount for which an asset could be exchanged between knowledgeable willing parties in an arm's length transaction. It is the policy of the association to have an independent valuation every three years.

The revaluation of freehold land and buildings has not taken account of the potential capital gains tax on assets acquired after the introduction of capital gains tax.

#### Plant and equipment

Plant and equipment are measured on the cost basis.

The carrying amount of plant and equipment is reviewed annually by the committee to ensure it is not in excess of the recoverable amount from these assets. The recoverable amount is assessed on the basis of the expected net cash flows which will be received from the assets employment and subsequent disposal. The expected net cash flows have not been discounted to their present values in determining recoverable amounts.

#### Depreciation

The depreciable amount of Plant and Equipment and Motor Vechicles are depreciated on a dimishing value method over their useful lives to the association commencing from the time the asset is held ready for use.

Leasehold improvements are amortised over the shorter of either the unexpired period of the lease or the estimated useful lives of the improvements.

#### Leases

Leases of fixed assets where substantially all the risks and benefits incidental to the ownership of the asset, but not the legal ownership, are transferred to the association are classified as finance leases. Finance leases are capitalised, recording an asset and a liability equal to the present value of the minimum lease payments, including any guaranteed residual values. Leased assets are depreciated on a straight line basis over their estimated useful lives where it is likely that the assocation will obtain ownership of the asset or over the term of the lease. Lease payments are allocated between the reduction of the lease liability and the lease interest expense for the period.

Lease payments for operating leases, where substantially all the risks and benefits remain with the lessor, are charged as expenses in the periods in which they are incurred.

Lease incentives under operating leases are recognised as a liability and amortised over the life of the lease term.

The accompanying notes form part of these financial statements

#### NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30th June 2015

#### **Employee Benefits**

Provision is made for the association's liability for employee benefits arising from services rendered by employees to balance date. Employee benefits together with benefits arising from wages and salaries and annual leave, have been measured at the amounts expected to be paid when the liability is settled plus related on-costs.

Contributions are made by the association to employee superannuation funds and are charged as expenses when incurred.

#### **Accounts Payable and Other Payables**

Accounts payable and other payables represent the liabilities at the end of the reporting period for goods and services received by the association that remain unpaid.

Accounts payable are recognised at their transaction price. Accounts payable are obligations on the basis of normal credit terms.

#### **Revenue and Other Income**

Revenue from the sale of goods is recognised upon the delivery of goods to customers.

Revenue is measured at the fair value of the consideration received or receivable after taking into account any trade discounts and volume rebates allowed. For this purpose, deferred consideration is not discounted to present values when recognising revenue.

Interest revenue is recognised on a proportional basis taking into account the interest rates applicable to the financial assets.

Grant and donation income is recognised when the entity obtains control over the funds, which is generally at the time of receipt.

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

#### Goods and Services Tax (GST)

Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Tax Office. In these circumstances the GST is recognised as part of the cost of acquisition of the assets or as part of an item of the expense. Receivables and payables in the statement of financial position are shown inclusive of GST. The net amount of GST recoverable from, or payable to the ATO, is included with other receivables or payables in the balance sheet.

#### **Provisions**

Provisions are recognised when the association has a legal or constructive obligation, as a result of past events, for which it is probable that an outflow of economic benefits will result and that outflow can be reliably measured.

Provisions recognised represent the best estimate of the amounts required to settle the obligation at the end of the reporting period.

#### Cash and Cash Equivalents

#### NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30th June 2015

Cash and Cash equivalents include cash on hand, deposits held at-call with banks, other short-term highly liquid investments with original maturities of three months or less, and bank overdrafts. Bank overdrafts are shown within borrowings in current liabilities on the balance sheet.

	2015 \$	2014 \$
NOTE 2 - REVENUE		
Revenue from Continuing Operations		
Interest	2,322	2,752
Grants Received Other	365,514 31,177	393,826 50,224
Oulci		
TOTAL REVENUE	399,013	446,802
Interest from: Other Persons	2,322	2,752
Other reisons	2,322	2,732
NOTE 3 - ITEMS INCLUDED IN PROFIT		
Expenses		
Depreciation Non Current Assets	8,115	3,167
Amortisation of Non-Current Assets		
Other	499	-
Remuneration of Auditor		
Audit or Review	5,590	5,577
Rental Expense on Operating Leases	10.0=4	
Lease & Overheads - PiMH Net Loss on Disposal of	19,376	-
Property, Plant and Equipment	1,892	-
NOTE 4 - CASH ASSETS		
Cash in Hand	(211)	110
Cash at Bank	97,145	88,035
	96,934	88,145
NOTE 5 -PROPERTY PLANT AND EQUIPMENT		
Plant & Equipment - at Cost	21,892	35,583
Less Prov'n for Depreciation	10,680	29,269
	11,212	6,314
	11,212	6,314

The accompanying notes form part of these financial statements

#### NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30th June 2015

	2015 \$	2014 \$
NOTE 6 - INTANGIBLE ASSETS		
Website Website - Accum Amortisation	2,499 (499)	<u>-</u>
	2,000	
NOTE 7 - OTHER ASSETS		
Current GST on Acquisitions Payroll Clearing Account Prepayments	109 361 4,982 5,452	1,727 24,192 25,919
NOTE 8 - TRADE AND OTHER PAYABLES		
Current Other Creditors Accrued Expenses Fringe Benefits Payable GST on Supplies	13,583 25,253 1,276 ————————————————————————————————————	13,295 21,105 1,126 5,686 41,212
NOTE 9 - PROVISIONS		
Current Provision for Employee Leave	14,567	14,601
Aggregate Employee Benefit Liability	14,567	14,601
NOTE 10 - RESERVES		
General Reserve		321
Movements during the year		
General Reserve Opening Balance General Reserve	321 (321)	514 (193)
Closing Balance		321

The accompanying notes form part of these financial statements

#### NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30th June 2015

	2015 \$	2014 \$
NOTE 11 - STATEMENT OF CHANGES IN EQUITY as at 30 June 2015.		
Opening Retained Profits (Accumulated Losses)	64,244	92,414
Net Profit/(Loss)	(3,646)	(28,363)
Transfer to Reserves General Reserve Transfer	321	102
In/(Out)	321	193
Closing Retained Profits (Accumulated Losses) at the End of the Financial Year	60,919	64,244

#### NOTE 12 - ASSOCIATION DETAILS

The registered office of the company is: Mental Health Carers ARAFMI NSW Inc. SUITE 501  $80\ \text{WILLIAM}$  STREET EAST SYDNEY 2011

The principal activities of the company were MENTAL HEALTH.

#### 2015 COMMITTEE'S DECLARATION

The committee have 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.

The committee of the association declare that:

- 1. The financial statements and notes, as set out on pages 1 to 9:
  - (a) comply with Accounting Standards as detailed in Note 1 to the financial statements and the Associations Incorporations Act 2009; and
  - (b) give a true and fair view of the association's financial position as at 30 June 2015 and of its performance for the year ended on that date.
- In the committee's opinion there are reasonable grounds to believe that the association will be able to pay its debts as and when they become due and payable.

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

Member

ANNE STEADMAN (President)

Member

JENNY/LEARMONT (Vice President)

Dated this

day of

2015





## INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF MENTAL HEALTH CARERS ARAFMI NSW INC. A.B.N.70 653 824 650

We have audited the accompanying financial report, being a special purpose financial report, of Mental Health Carers ARAFMI NSW (Non-reporting) Inc (the Association) which comprises the committee's report, the assets and liabilities statement as at 30 June 2015, the income and expenditure statement for the year then ended, notes comprising a summary of significant accounting policies and other explanatory information

#### Committee's Responsibility for the Financial Report

The committee of Mental Health Carers ARAFMI NSW Inc. is responsible for the preparation and fair presentation 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 Incorporation Act NSW 2009 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 and fair presentation of a financial report that is free from material misstatement, whether due to fraud or error.

#### Auditors' 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 auditors' 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 and fair presentation of the financial report 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 entity'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.

Liability limited a scheme approved under Professional Standards Legislation.

## INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF MENTAL HEALTH CARERS ARAFMI NSW INC. A.B.N.70 653 824 650

#### **Auditors' Opinion**

In our opinion, the financial report of Mental Health Carers ARAFMI NSW Inc. presents fairly, in all material respects the financial position of Mental Health Carers ARAFMI NSW Inc. (Non reporting) as of 30 June 2015 and of 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 Incorporation Act NSW 2009.

#### Basis of Accounting and Restriction on Distribution

Without modifying our opinion, we draw attention to Note 1 of the financial report, which describes the basis of accounting. The financial report has been prepared to assist the Association (Non-reporting) to meet the requirements of the Associations Incorporation Act NSW 2009. As a result, the financial report may not be suitable for another purpose.

Name of Firm:	GOSS & CLARKE Chartered Accountants
Name of Partner:	Ronald George Goss
Address:	Level 6, 10 Spring Street, Sydney.
Dated :	28th October 2015.

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