

Mental Health Carers NSW

ANNUAL REPORT 22 – 23



**Mental Health
Carers NSW**



About MHCN

Our Vision & Mission

MHCN is the peak body for mental health carers in NSW. Founded as ARAFMI in 1974 by Margaret Lukes, a social worker; she believed there needed to be more support for families, friends and carers of people living with a mental illness.

Mental health carers are people who support friends, partners, members of their family, kinship groups or communities, when they experience mental illness.

Mental Health Carers NSW Inc. is the peak body in NSW for mental health carers, advocating for a vision of safe and competent mental health services and systems that recognise and respect carers as partners in care planning and delivery, to achieve recovery.

MHCN's Mission is to support, empower, capacity build, and advocate with mental health carers to ensure their voices and experiences are heard.



MHCN Strategic Plan 21 – 23

1. Influence Policy Leadership & Reform

- 1.1 Maintain and develop new strategic relationships with service providers, policy makers and community partners, and advocate for increased engagement of carer experience and representation in reform and governance processes.
- 1.2 Support mental health carer advocacy, participation, and leadership in policy, co-design and service delivery processes.
- 1.3 Draw attention to the importance of mental health carer voices and lived experience.
- 1.4 Advocate for a mental health system that is accessible and inclusive, providing a safe partner in care to mental health carers.

2. Community, Mental Health & Carer Services Development

- 2.1 Raise awareness of the value of increased capacity in the mental health and carer support sector.
- 2.2 Promote, recognise, respect and engage carer lived experience in policy, systemic and service reform.
- 2.3 Reduce stigma and improve social inclusion of mental health carers by informing and educating the sector and community.
- 2.4 Promote the role and voice of mental health carers in mutual support, carer peer workers and lived experience workers.

3. Promote Mental Health Carer Capacity in Care, Advocacy & Governance

- 3.1 Enhance the capacity and knowledge of mental health carers to navigate the system through information, resources, training and peer support.
- 3.2 Foster innovation in research by collaborating with and facilitating relationships between mental health carers, researchers, and sectors.
- 3.3 Lead by example through engaging with mental health carers as partners in mutual support, advocacy and governance.
- 3.4 Develop new ways for carers to engage and participate in MHCN and sector activities, to increase awareness and recognition of carer experiences and expertise.

4. Continuous Organisational Development & Improvement

- 4.1 Create a Mental Health Carer Advocacy Network supported by a diverse stakeholder engagement strategy to reflect the diversity of mental health carers in the NSW and provide opportunities for them to share their stories and experiences.
- 4.2 Foster co-design within MHCN through a Co-design Committee and Governance Committee to support the promotion of MHCN, its programs, advocacy, training and resources.
- 4.3 Identify sustainable funding resources to remove cost as a barrier to carer engagement and participation and to achieve organisational sustainability.
- 4.4 Review MHCN's engagement, advocacy, programs and systems for continuous improvement and accreditation.



**Mental Health
Carers NSW**



Message from Board: MHCN President, Jenny Learmont



Jenny Learmont AM, Hon MD President

I should like to begin with a personal reflection.

2022–2023 has been a very successful year for Mental Health Carers NSW (MHCN) as it fulfils its role as the NSW peak mental health carer NGO. I believe the extraordinary achievements of MHCN confirm the dictum articulated by the Roman Senator Seneca, who observed: “It is not because things are difficult that we do not dare, it is because we do not dare, that things are difficult.”

Today MHCN is ensuring the carer voice is now heard on an ever-increasing range of and number of issues relating to carers. This situation was helped by a funding grant to MHCN from the NSW Ministry of Health specifically to redress the gap in information specifically targeted at carers relating to the Mental Health Act.

The accomplishments of the past year are due in no small measure to the dedication, commitment and sheer hard work of our CEO Jonathan Harms and his wonderful staff. MHCN operates on a very slim budget with a small staff, and because of our limited

resources is often under enormous pressure to complete tasks; they are indeed all “brave of heart”, and they punch well above their weight. I should like to take this opportunity to thank the staff of MHCN and Board members for their dedication throughout the year.

The year has seen an excellent collaboration developing between MHCN and BEING on common issues relating to both consumers and carers. Under their new leadership, BEING organised a very instructive Governance training day shared with both Boards and their CEOs.

Throughout the year, MHCN had a highly experienced and talented executive finance committee and a very strong and committed Board supporting the CEO and his team resulting in a highly collaborative year-long effort by all.

In addition, our Senior Peer Trainer and Facilitator successfully engaged with external stakeholders and delivered MHCN information sessions to Carer NSW Peer support groups on the Central Coast and Newcastle by Zoom. The number of face to face and online training sessions is growing steadily for the MHCN Information and Capacity Development and Stakeholder Engagement training sessions. In 2023 MHCN training material was either co-reviewed and or co-designed and is now readily available on MHCN’s website. The training is promoted through the Family and Carer Mental Health Program deliverers as well as carer support groups.



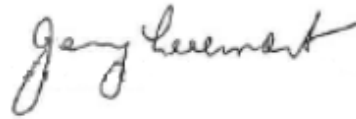
An important development during the year was the production of ten brochures for carers covering the Mental Health Act and the NSW Mental Health Tribunal (MHRT). These brochures are on the MHCN website, and a limited print-run of hard copy brochures has been made available to service providers. As a member of the MHRT who sits on tribunal hearings in a separate role as a carer, I was very concerned at the lack of information that was available for carers and I am delighted that MHCN has produced accessible, user friendly, carer information.

The year saw MHCN grow the Mental Health Carer Advocacy Network (MHCAN). This is the primary program and method by which MHCN is seeking to expand the breadth and depth of its engagement with as many mental health carers as possible across NSW. The MHCAN holds monthly Zoom meetings with the purpose of providing a space for carers, families, and friends to meet each other, talk with MHCN about issues they face at the grass roots levels, and discuss possible solutions and share tips and supports. It is also a space for MHCN's Carer Peer Network Facilitator to share information about MHCN in its role as the NSW Peak Carer Advocacy NGO.

MHCN worked with web developers and rebranded and launched a new look website and social media. MHCN now has consistent branding, as well as a consistent presence on social media including Facebook and Twitter, with our engagement and followers growing steadily.

MHCN had its mid-accreditation assessment during the year, and received excellent feedback from the accreditors. This process involved an enormous amount of work, and the staff are to be congratulated on an outstanding result. MHCN is now working towards re-accreditation in June 2024.

Finally, I would like to thank the Mental Health Commission and our funding body the Ministry for Health for their ongoing support and recognition of the essential role MHCN plays as the NSW Mental Health Peak organisation.



Jenny Learmont AM, Hon MD
President



MHCN CEO, Jonathan Harms

The 2022–2023 Financial year has been both a difficult, but also a rewarding one for Mental Health Carers NSW Inc. (formerly ARAFMI NSW). In the first part of this year, 2022, funding for a number of MHCN projects was set to come to an end. The significant funding for the development of the Mental Health Carers Advocacy Network ('MHCAN') and Register by the Mental Health Commission came to an end in July 2022, and the funds for the development of training for carers under the Information Linkages and Capacity ('ILC') program was also due to expire, as were the funds provided by NSW Health for the development of information resources for carers under the Family and Carer mental Health Program ('FCMHP').

However, MHCN was fortunate to receive additional funds to continue the information resource development from NSW Health, thanks to the foresight and support of NSW Health staff, such as Fran Frino, the coordinator of the FCMHP, (in fact having nearly 3 times that level of funds provided by a subsequent contract to also print and translate resources co-designed with carers, and develop six more titles in response to additional needs identified through MHCN's co-design process).

MHCN was also fortunate to receive an extension of contract and additional funds from the ILC program to continue to deliver the training so ably developed by our co-designers and peer trainers under the original project.

While the Mental Health Commission was not able to provide additional funds for the MHCAN, MHCN was invited to tender for funds to deliver systemic advocacy for people with psychosocial disability under the Disability Advocacy Futures Program, ('DAFP') which has allowed us to continue to develop our outreach to carers and their loved ones, now explicitly also in regard to non-Health public services funded by the state government in NSW.



Jonathan Harms, CEO

As it is well known that 80% of the support people with serious and persistent mental health concerns do not relate to treatment, (and often involve the kinds of supports carers must otherwise provide), this is a significant step forward in the scale and scope of MHCN's advocacy.

In addition, funds have also been obtained from the DCJ's DAFP program to develop and deliver more advanced training for the advocates with and for lived and loved experience. As a result of these additional sources of funds being found, MHCN's funding will for the first time exceed \$1million dollars per year, an excellent result given the grim tidings we had in June.

While gearing up to expand MHCN's capacity to undertake this additional training and advocacy has not been easy, in an environment of workforce shortages and MHCN's own growing pains, MHCN and its team have demonstrated flexibility and resilience in continuing to persevere in the face of all challenges to advocate for the support needed for people who experience mental distress and psychosocial disabilities, ably assisted by excellent, skilled and highly committed staff and volunteers (especially our Board members) both long term and those who have had a shorter engagement with MHCN.



I thank you all and acknowledge that I, more than anyone, have learned much and recognised the need to learn even more from our wonderful lived experience advocates and workers if we are ever to truly create a world fit for the meek to inherit. We shall learn our lessons and continue to fight the good fight for the carers of NSW, and the people they love and cherish, until our system is routinely able to ensure that anyone who needs it can get the support they need from their community in order to achieve their recovery. Many thanks to all those who have helped us in this mission, and may we be even more worthy of your support by how we conduct ourselves now and in the coming years!



Jonathan Harms, CEO



Influence Policy, Leadership & Reform



The core aim of the Policy and Advocacy team (PAT) is to influence policy reform and the decisions of leaders by collecting the lived experience of mental health carers (and their loved ones and their advocates) and acquainting decision makers with the impacts their decisions have made and will make on that experience through 'systemic advocacy'. We advocate for governments and service provider organisations to be responsive to the needs of mental health carers, including family and kinship members or people experiencing mental health concerns or psychosocial disability. We also seek to improve systems for their loved ones, because what the consumer needs is what the carer wants; and the best help the carer can get are services for their loved ones which are accessible, effective, safe, fair and adequately funded to do their vital work.

Over the 2022 - 2023 Financial year, PAT has undertaken a range of continuing activities to advocate with mental health carers in systemic reforms.

Disability Advocacy Futures Project (DAFP)

To better meet the 80% of supports needed that people with psychosocial disability require that do not relate to treatment, MHCN sought and won funding for a project by the Department of Communities and Justice (DCJ) to undertake systemic advocacy on behalf of people with psychosocial disability under the Disability Advocacy Futures Program to:

- Develop escalation pathways for systemic issues and develop a psychosocial disability program (DAFP) to advocate to state funded, non-mental health services; and
- Draft a Psychosocial Disability Advocacy Platform.

To this end MHCN has:

- Undertaken extensive planning, retaining Simon Katterl as consultant for an initial scoping stage of the project.
- Supported the recruitment and training of the Housing and Mental health Lived Experience Committee with the Public Interest advocacy Centre (PIAC), and helped host a joint meeting with the Homelessness Committee.



- Participated regularly in the NSW Disability Advocacy Network meetings and undertaken outreach to develop plans as well as to inform submissions made to the NDIS Review and other related advocacy (e.g. correspondence to the Attorney General and the NSW Trustee and Guardian).

Carers Information Resources

- MHCN has received two separate grants from the NSW Ministry of Health to complete information resources for mental health carers concerning several topics. Funding was initially provided in 2021-22 and additional funding was received in 2022-23.
- These projects arose from the realisation within the Ministry of Health that there was a gap in information specifically targeted at mental health carers. Also, there were no standard information resources available for carers of people receiving care under the Mental Health Act and for use within the Family and Carer Mental Health Program.
- Following extensive consultation with carers and service providers the first tranche of this project identified the need for ten brochures explaining different aspects of the mental health system and how mental health carers are impacted by the Act. These completed brochures are available from the website of MHCN, and a limited print run of hard copy brochures has been made available to service providers.
- The second tranche of this project is producing an additional 7 information resources. The process of development was overseen by a Steering Committee with mixed membership including mental health carers and both government and non-government service providers.

Carers of Forensic and Corrections Patients Network meetings:

We convened 10 meetings in collaboration with Erika Ballance, Family and Carer Consultant, Justice Health and Forensic Mental Health. The meetings included presentations and a consultation with carers:

- Focus Group Consultation: Mental Health Training Project, by Jennifer Chen, Program Manager, Legal Aid NSW, and Dr Piers Gooding, Senior Research Fellow, Melbourne Law School, University of Melbourne.



- Presentations + QnA
 - *The Official Visitors Program*, by Dr Terry Kirkpatrick, Official Visitor, Official Visitors Program
 - *Review of the Forensic Mental Health Services Policy*, by Dr Vindya Nanayakkara, Co-Director Forensic Mental Health and Nikki Maloney, Director, Planning, Performance and Regulation, Mental Health Branch
 - *Designated Carer and Principal Care Provider*, by Erika Ballance, Family & Carer Consultant from Justice Health & Forensic Mental Health Network
 - *Inspector of Custodial Services Official Visitor Program*, by Beverley Ryan, Official Visitor, Inspector of Custodial Services NSW Communities and Justice
 - *Housing and Accommodation Support Initiative (HASI) Plus*, by Karen De Mar, Principal Policy Officer, Supported Living Team, Mental Health Branch, and Vanessa Clarke, Senior Policy Officer, Supported Living Team, Mental Health Branch, NSW Health
 - *Role of the Lay Advocate*, by Linda Rodrigues, Lay Advocate, Mental Health Advocacy Service of Legal Aid, NSW

Other activities by PAT included:

- Continuing to represent mental health carers on the NSW Mental Health Program Council. This Council is run by the NSW Ministry of Health and includes all the directors of mental health services in local health districts across NSW and representatives from key organisations.
- Representing mental health carers in various groups, including the Intellectual Disability and Mental Health Advisory Group, Family Focused Recovery Implementation Reference Group, and Safeguards Advisory Committee.
- Completed a detailed submission for the \$500,000 Carers Investment Program (CIP) 2023–25 Grant offered by the Department of Communities and Justice.

This grant would have funded a comprehensive education program for service providers on how to incorporate mental health carers in assessment and care planning for people receiving mental health care. The Department cancelled the program prior to making any decisions on the grant applications.

- Participated in:
 - Community Treatment Order review by the NSW Mental Health Commission.
 - Trauma Informed Care Community of Practice.
 - Restorative and Just Learning Culture Symposium.
 - Standing committees overseeing older persons mental health services in NSW.
 - Workshop to review the food provided in mental health units.
 - Review of medication management in HASI and CLS facilities
 - NSW Mental Health Living Longer Steering Committee.
 - Tackling Tobacco Mental Health Steering Committee.
- Provided advice to the NSW Ministry of Health on:
 - Proposed minor amendments to the Mental Health Act NSW 2007 and Regulations. We provided detailed advice on the current Regulations as part of the statutory review of the Regulation by the Ministry.
 - The review of forms used under the NSW Mental Health Act 2007.
 - The lack of progress in implementing the reforms concerning seclusion and restraint. In association with Being, we have strongly advocated concerning this important reform. The reform process was initiated following the 2017 review of seclusion and restraint practices in NSW but reporting on progress with implementation of the reforms ceased in late 2019.

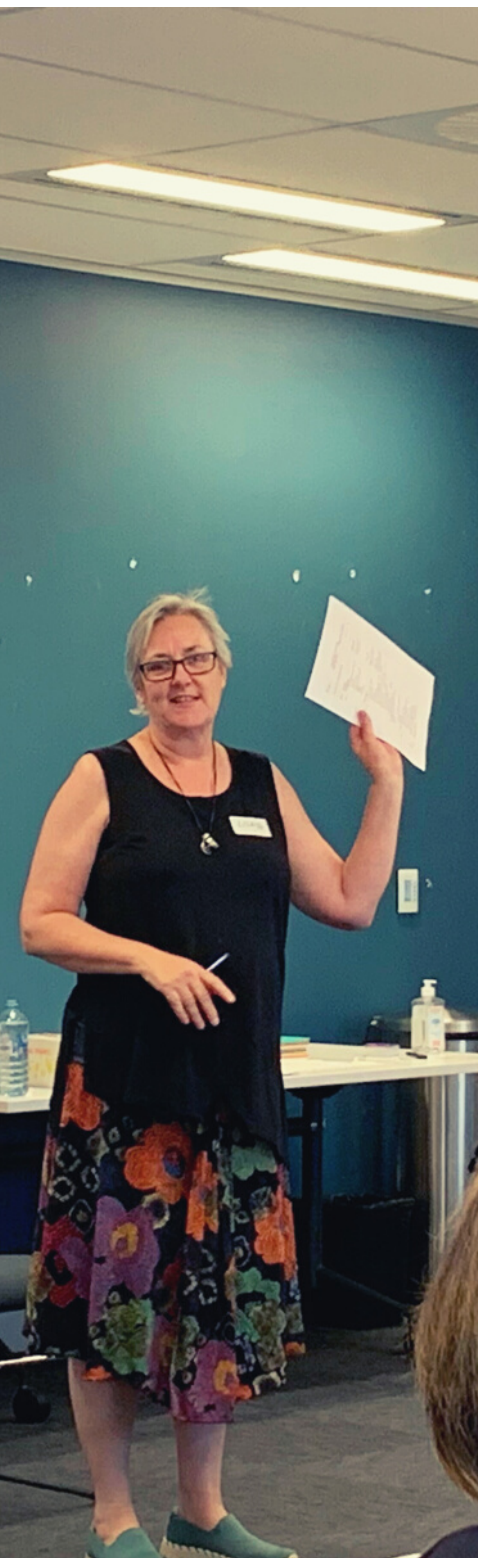




- Draft Embedding Hybrid Virtual Care in Clozapine Treatment Model of Care
- Held focus groups of carers on a range of topics:
 - For NSW Health on the forms used across the mental health system to notify consumers and carers of actions taken under the Mental Health Act NSW 2007.
 - For the NSW Audit Office as part of their review into the NSW Guardianship Act.
 - As part of the Carers Information Resources Project.
 - On food services in NSW Mental Health Facilities as part of the Ministry of Health's review.
 - On the subacute and non-acute inpatient services model of care framework.
- Made the following submissions and grant applications:
 - To the NDIS Review
 - To the *Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability*.
 - Provided comments on the draft *Hybrid Virtual Clozapine Model of Care in consultation with carers*.



Community, Mental Health & Carer Services Development



The Capacity Development Team is focused on the second of the four pillars of our Strategic Plan – to promote mental health carer capacity in care, advocacy, and governance.

The Capacity Development Team (CDT) consists of Katie Jones (Capacity Development Project Officer), Anne Stedman (Senior Carer Peer Trainer), Jodie Roberts (Carer Peer Trainer & Project Officer), Jade Curran (Engagement Coordinator), Laura Knight (Business & Organisational Manager), with administrative assistance from Alex Brown (Administration Officer).

The main project that the CDT team has been working on is the Information, Linkages and Capacity (ILC) project, funded by the Department of Social Services (DSS) under the Individual Capacity Building Program (ICBP).

This project involved co-reviewing and co-designing five training courses with carers of someone with a lived experience of psychosocial disability, then delivering 45 sessions of those courses over two years.

The Project has been extended, meaning we will be able to deliver up to 60 internal sessions across the 22/23 and 23/24 financial year on ZOOM and in person, as well as deliver the sessions externally to different organisations and carer groups across NSW.

The 5 courses as part of this project are 'Recovery Oriented Practice', 'Inclusive Care Planning', 'Users Guide to the NSW Mental Health System', 'The Caring Journey' and 'Navigating Carer Support Systems'.

This year, we have delivered some live sessions on ZOOM and in person in MHCN's office, including User's Guide to the NSW Mental Health System, Recovery Oriented Practice, and Inclusive Care Planning, which were facilitated by Anne Stedman. The sessions have proved to be quite popular now that we are able to deliver sessions in person again after COVID19.



Our other major training project was funded by the NSW Mental Health Commission, as part of our Mental Health Carer Advocacy Network (MHCAN).

We were funded to co-review 3 advocacy capacity development training courses and produce these courses into online, on demand modules as well as deliver them in person and on ZOOM.

The 3 new courses include 'Purposeful Storytelling' (discusses sharing lived experience safely), 'Healthy Boundaries' (discusses the importance of setting and maintaining healthy boundaries) and 'Carers & Advocacy: Foundations' (discusses the basics of advocacy).

We look forward to being able to deliver these 3 new courses in person and on ZOOM in the 23/24 financial year, as well as to external carer groups and organisations.

All our 8 training sessions are available as on-demand modules and have continued to be popular for those unable to attend training sessions on ZOOM or in person due to barriers such as location, caring duties, or work and study. Our on-demand modules can be completed in your own time, at your own pace.

If you haven't already, have a look at MHCN's website and check out all of our upcoming training sessions on ZOOM and in person, as well as our self-paced modules here: <https://www.mentalhealthcarersnsw.org/learn/training-and-education/>



Promote Mental Health Carer Capacity in Care, Advocacy & Governance



The Network Register and Stakeholder Engagement Team's work is focused on the third of the four pillars of our Strategic Plan – on the development of community, mental health, and services.

We have continued running our free Mental Health Carer Advocacy Network, (MHCAN) and associated Register, the development of which was originally funded by the NSW Mental Health Commission. The MHCAN Register is the main way for carers to directly engage with MHCN. Joining the Register gives you free membership of MHCN and access to our weekly email, our activities and resources. Through the MHCAN, MHCN aims to provide opportunities for carers, kin, families, and friends to join in our advocacy for a better mental health system, to build their skills in care and advocacy, access resources and information, and connect with each other for mutual support and raise awareness of the benefits of including lived experience in policy and service design and reform.

The Mental Health Carer Advocacy Network Register Team consists of Alyce Cannon (Program Manager), and Douglas Holmes (Carer Peer Facilitator). The Stakeholder Engagement Team (SET) consists of Laura Knight (Business & Organisational Manager), Gabbie Lynch (Stakeholder Engagement Officer), Jade Curran (Stakeholder Engagement Officer), with administrative assistance from Alex Brown (Administration Officer).

It has been yet another busy and fun year for MHCN's community engagement activities this financial year.

Our key achievements for the project this year have been:

- We increased our membership to nearly 400 carer members and organisational members from across NSW.



- We continued to run our bi-monthly Peak Speaks webinar program, which covered a range of topics including:
 - Carers as Leaders – hosted by Verge Collaborative/The Leader's Way, with special thanks to Nat Ellis.
 - Young Carers – hosted by Little Dreamers, an organisation focused on supporting young carers.
 - Navigating the Carer Gateway – hosted by the Benevolent Society.
 - Tuning into Carer Lived Experience – our special Carer's Week Peak Speaks webinar which was a panel that included NSW Mental Health Commissioner, Catherine Lourey, Mental Health Coordinating Council Principal Policy Advisor, Corinne Henderson, Suicide Prevention Australia Senior Policy Adviser, Caitlin Bambridge, Carer Peer Trainer and Carer Lived Experience Representative, Anne Stedman, Carer Lived Experience Representative, Andrew Pryor.
 - Mateship and Men Who Care – hosted by Greg Smith, Men Care Too Founder and Lived Experience Carer Representative, Phil Coller, Lived Experience Carer Representative, and Dr. Neil Hall, a senior academic from Western Sydney University and social work practitioner with significant experience as a practitioner with men and boys, and the Lead Academic for the University's Men's Health Information & Resource Centre.

A big thank you to all of our guest speakers and organisations who have been a part of Peak Speaks over the last year.

We continued to send out our News from the Network Newsletter, our quarterly newsletter where we share stories written by carers about their experiences, artworks, carer services spotlights, and self-care tips.

The Carer Connections Meetings & Central Coast Carer Connections Meetings, run by our Carer Network Facilitator, Douglas Holmes OAM, continued to meet monthly with groups of carers looking to advocate, engage in mutual support, and connect with each other. These meetings have been valuable resources for MHCN to hear directly from carers about issues close to them, which we then incorporate into our policy strategy. Connecting numerous carers and lived experience representatives to organisations and researchers for consultation and ensuring that representatives are paid appropriately for their time.

We were lucky to host a range of events and get involved in community engagement activities, which included hosting a stall at Carers NSW Carer's Day Out event, hosting a creative workshop for carers on their caring journey with art therapist Lisa McArthur-Edwards and Anne Stedman, and hosting a fun online trivia for Carer's Week which included goody bags being sent out to carers and a prize for the winner of the trivia. We had the opportunity to visit some carer groups run by Carers NSW on the Central Coast where we spoke about the work that MHCN does and the different ways that carers can get involved in our work.

We also continued to send out our popular regular weekly e-newsletter, the Mental Health Carers Weekly Digest.



Continuous Organisational Development & Improvement

Our Business and Organisation Support Services Team (BOSS) is focused on the last of our four key pillars of the Strategic Plan – continuous organisational development and improvement.

The team consists of Jonathan Harms (CEO), Laura Knight (Business & Organisational Manager), Cyril O'Connor (HR Officer), and Alex Brown (Administration Officer).

The 22/23 financial year has seen us welcome several new staff members to the team at MHCN, and we sadly said goodbye to a few as well.

In November last year, we said goodbye to Katie Jones, who moved onto an exciting role at the Department of Communities and Justice (DCJ). Katie was the lead of the CDT team and has completed some tremendous work in running co-review and co-design activities with carers to develop MHCN's training and education program – the 5 ILC project training sessions, as well as the 3 MHCAN training sessions. Katie will be sorely missed but we wish her the best of luck in her new role at the DCJ.

In January, we also said goodbye to Gabbie Lynch, who moved to sunny WA for a full-time role at Headspace now that she has completed her social work studies. Gabbie did some fantastic work in running MHCN's Peak Speaks webinar program, News from the Network newsletter, and community and stakeholder engagement activities. Gabbie's enthusiasm and vibrant nature will truly be missed at MHCN.

Alyce Cannon, the team leader of the MHCAN and SET teams, moved to Greece to continue her PhD studies. Alyce was pivotal in leading the Mental Health Advocacy Network Project, through the development and implementation stages. Alyce continues to work with us in a remote consultancy role as our Research and Project Development Consultant and will soon return to a coordinating role for the Disability Advocacy Futures Program project to develop a Psychosocial Disability Advocacy Platform.

We said hello to 4 new staff members in 2023, Alex Brown, our new Administration Officer, Katie Thorburn, our new Policy Manager, Jade Curran, our new Engagement Coordinator and Rachael Laidler, our new Policy Officer.





MHCN continues to work towards organisational process improvement through the accreditation process that we began back in February 2021. At the end of 2022 we met with the accreditors for our mid-accreditation assessment to speak about our progress since undertaking accreditation. After we undertook the 2-day interview process last year, QIP gave us some recommendations on things we can improve upon to make sure MHCN is working to the best of its ability. We have spent the last 2.5 years implementing some of these recommendations, and now MHCN is planning for the next accreditation cycle assessment in June 2024.

Madeleine Fabian resigned from her role as Ordinary Board Member (OBM) in October 2022. We would like to thank Maddy for her work on the Board of MHCN. Maddy has been a longstanding Board Member and supporter of MHCN, originally as our secretary and then moving to the OBM role. She will certainly be missed.

At the AGM in November last year, we welcomed Raja Gopalan to the Board as an Ordinary Board Member. Raj has over 30 years' experience in the IT and telecommunications industry in Australia, as well as being a carer for his daughter. Raj is passionate about carer's welfare and believes in continuous improvement of current mental health system systems. We are excited to welcome Raj on board with us.

Jenny Learmont continued as Board President, Lynda Walton as Vice President, Andrew Pryor as Treasurer, and Chris Avent as Secretary. MHCN's Ordinary Board Members are Catherine Wendell, Robert Wellman, Robyn Carmody, Yolande Williams, and Raja Gopalan. MHCN would like to thank our Co-Design and Governance Committee members, carers, stakeholders, our funders, Board, staff, students, volunteers, and donors for a very exciting 2022 – 2023 financial year.





Donate:

By making a donation to MHCN, you will have the opportunity to aid carers and families of individuals who live with a mental health condition with support and understanding. Find out how to donate by contacting us.

Sign up to our e-newsletter:

Sign up at the bottom of our website by clicking here, or contact us.

Become a member of our free Mental Health Carers Advocacy Network!

www.mentalhealthcarersnsw.org/advocacynetwork/



**Mental Health
Carers NSW**



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**MHCN
ANNUAL REPORT 2023**



MENTAL HEALTH CARERS ARAFMI NSW INC.
A.B.N. 70 653 824 650

FINANCIAL REPORT

For the year ended

30TH JUNE 2023

MENTAL HEALTH CARERS ARAFMI NSW INC.
A.B.N. 70 653 824 650

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MENTAL HEALTH CARERS ARAFMI NSW INC.
A.B.N. 70 653 824 650

COMMITTEE'S REPORT

Your committee members submit the financial report of the Mental Health Carers ARAFMI NSW Inc. (Non-reporting) for the financial year ended 30 June 2023.

Committee Members

The name of each member of the committee who held office at anytime during the year and up to the date of the report;

Jenny Learmont (President) - re-elected President 17 November 2022
Andrew Pryor (Treasurer) - re-elected Treasurer 17 November 2022
Lynda Walton (Vice-President) - re-elected Vice-President 17 November 2022
Chris Avent (Secretary) - re-elected 18 November 2021
Madeleine Fabian - re-elected 18 November 2021 / retired 17 November 2022
Rob Wellman - re-elected 17 November 2022
Catherine Wendell - re-elected 18 November 2021
Yolande Williams - appointed 28 April 2022 / elected 17 November 2022
Robyn Carmody - appointed 28 April 2022 / elected 17 November 2022
Raj Gopalan - elected 17 November 2022

Principal Activities

The principal activities of the association during the financial year were to provide support and advocacy for the families with mental illness or disorder. Mental Health carers ARAFMI NSW Inc. 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.

Significant Changes

No significant changes in the nature of these activities occurred during the year.

Operating Result

The surplus for the association amounted to \$189,493.

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

President:


Jenny Learmont

Treasurer:


Andrew Pryor

Dated:

26/10/2023

MENTAL HEALTH CARERS ARAFMI NSW INC.
A.B.N. 70 653 824 650

**STATEMENT OF PROFIT OR LOSS AND OTHER COMPREHENSIVE INCOME
FOR THE YEAR ENDED 30TH JUNE 2023**

	Notes	2023 \$	2022 \$
REVENUE			
INCOME			
Donations received		25,093	25,089
Grants received		524,116	515,068
Other grants		517,736	296,734
		<u>1,066,945</u>	<u>836,891</u>
OTHER INCOME			
Interest received		180	139
Government stimulus COVID-19 support		-	60,058
Other revenue		-	47,339
		<u>180</u>	<u>107,536</u>
TOTAL INCOME		<u>1,067,125</u>	<u>944,427</u>
EXPENDITURE			
Accounting fees		29,750	28,340
Auditor's remuneration		4,450	4,200
Advertising		6,545	1,877
Bank charges and fees		458	297
Carers accommodation and travel		300	573
Carers sitting fees		19,819	15,781
Consultancy fees		98,659	25,473
Computer and IT expenses		16,102	25,264
Depreciation		86,879	92,008
Events and workshops		2,232	815
Filing fees		-	203
General expenses		4,197	3,693
Grants provided		462	-
Insurances		17,178	12,956
Interest expense		5,398	9,828
Legal fees		742	4,500
Postage		606	1,089
Printing, stationery and copier		20,823	3,117
Programs, resources and training		1,927	2,121
Wages and fringe benefits		473,736	581,197
Staff training and welfare		11,567	5,044
Subscriptions and memberships		20,099	23,311
Superannuation contributions		49,850	55,243
Telephone and internet		3,010	2,978
Travelling and accommodation		2,843	1,061
		<u>877,632</u>	<u>900,969</u>
Profit / (loss) before income tax		<u>189,493</u>	<u>43,458</u>
Income tax expense	1(h)	-	-
Profit / (loss) after income tax		<u>189,493</u>	<u>43,458</u>
Other comprehensive income		-	-
Total comprehensive income for the year		<u>189,493</u>	<u>43,458</u>

The statement of profit or loss and other comprehensive income should be read in conjunction with the notes to the financial statements.

MENTAL HEALTH CARERS ARAFMI NSW INC.
A.B.N. 70 653 824 650

STATEMENT OF FINANCIAL POSITION
AS AT 30TH JUNE 2023

	Notes	2023 \$	2022 \$
Current assets			
Cash and cash equivalents	3	1,195,933	880,469
Trade and other receivables	4	18,428	12,962
Other	5	33,964	40,837
Total current assets		<u>1,248,325</u>	<u>934,268</u>
Non-current assets			
Property, plant and equipment	6	-	375
Right-of-use assets	7	57,670	144,174
Total non-current assets		<u>57,670</u>	<u>144,549</u>
Total assets		<u>1,305,995</u>	<u>1,078,817</u>
Current liabilities			
Trade and other payables	8	113,602	71,994
Contract liabilities	9	660,313	570,127
Employee provisions	10	50,279	55,961
Lease liabilities		65,752	92,234
Total current liabilities		<u>889,946</u>	<u>790,316</u>
Non-current liabilities			
Employee provisions	10	12,866	9,059
Lease liabilities		-	65,752
Total non-current liabilities		<u>12,866</u>	<u>74,811</u>
Total liabilities		<u>902,812</u>	<u>865,127</u>
Net assets		<u>403,183</u>	<u>213,690</u>
Equity			
Retained funds		403,183	213,690
Total equity		<u>403,183</u>	<u>213,690</u>

The statement of financial position should be read in conjunction with the notes to the financial statements.

MENTAL HEALTH CARERS ARAFMI NSW INC.
A.B.N. 70 653 824 650

STATEMENT OF CHANGES IN EQUITY
AS AT 30TH JUNE 2023

	Retained earnings	Total equity
	\$	\$
Changes in equity		
Balance at 1 July 2021	170,232	170,232
Profit/(loss) for the year	43,458	43,458
Other comprehensive income	-	-
Balance at 30 June 2022	213,690	213,690
Profit/(loss) for the year	189,493	189,493
Other comprehensive income	-	-
Balance at 30 June 2023	<u>403,183</u>	<u>403,183</u>

The statement of changes in equity should be read in conjunction with the notes to the financial statements.

MENTAL HEALTH CARERS ARAFMI NSW INC.
A.B.N. 70 653 824 650

STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 30TH JUNE 2023

	Notes	2023 \$ Inflows (Outflows)	2022 \$ Inflows (Outflows)
Cash flows from operating activities			
Cash receipts from customers		1,154,390	939,718
Cash payments to suppliers and employees		(741,474)	(830,170)
Interest received		180	139
Interest paid		(5,398)	(9,828)
Net cash provided by / (used in) operating activities	12(b)	407,698	99,859
Cash flow from investing activities			
Payments for property, plant and equipment		-	(4,521)
Net cash provided by / (used in) investing activities		-	(4,521)
Cash flow from financing activities			
Repayment of leases		(92,234)	(85,422)
Net cash provided by / (used in) financing activities		(92,234)	(85,422)
Net increase / (decrease) in cash held		315,464	9,916
Cash at the beginning of the financial year		880,469	870,553
Cash at the end of the financial year	12(a)	1,195,933	880,469

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

MENTAL HEALTH CARERS ARAFMI NSW INC.
A.B.N. 70 653 824 650

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30TH JUNE 2023

Note 1 - Statement of significant accounting policies

Financial Reporting Framework

The financial statements are special purpose financial statements prepared for use by the committee of the association. The committee members have determined that the association is not a reporting entity.

The financial report has been prepared with the mandatory Australian Accounting Standards applicable to entities reporting under the Australian Charities and Not-for-profits Commission Act 2012 (ACNC Act), in accordance with the Associations Incorporations Act (NSW) 2009 and the significant accounting policies discussed below, which the committee have determined are appropriate to meet the needs of the members.

Statement of Compliance

The financial statements have been prepared in accordance with the mandatory Australian Accounting Standards applicable to entities reporting under the Australian Charities and Not-for-profits Commission Act 2012, the basis of accounting specified by all Australian Accounting Standards and Interpretations, and the disclosure requirements of Accounting Standards AASB 101: Presentation of Financial Statements, AASB 107: Cash Flow Statements, AASB 108: Accounting Policies, Changes in Accounting Estimates and Errors, AASB 1031: Materiality and AASB 1054: Australian Additional Disclosures.

The association has concluded that the requirements set out in AASB 10 and AASB 128 are not applicable as the initial assessment on its interests in other entities indicate that it does not have any subsidiaries, associates or joint ventures. Hence, the financial statements comply with all the recognition and measurement requirements in Australian Accounting Standards.

Basis of Preparation

The financial statements have been prepared on an accruals basis and are based on historic costs and do not take into account changing money values or, except where specifically stated, current valuations of non-current assets.

The following specific accounting policies, which are consistent with the previous period unless otherwise stated, have been adopted in the preparation of this financial report.

Accounting Policies

(a) Property, plant and equipment

Leasehold improvements, plant and equipment is brought to account at cost less, where applicable, any accumulated depreciation and provision for impairment.

The depreciable amount of all plant and equipment is depreciated over the useful lives of the assets of 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.

(b) Leases

Leases are recognised under Accounting Standard AASB 16: Leases. Applicable leases whether finance or operating in nature are to be recognised on the statement of financial position as liabilities with corresponding right-of-use assets. These leases are measured at their net present values and include future lease payments under an option where that option is reasonably expected to be taken up. The leases are amortised on a straight-line basis over the term of the lease. For operating leases that do not need to meet the requirements under this standard being leases that are less than 12 months or of minor values, and where substantially all the risks and benefits remain with the lessor, these are recognised as expenses over the term of the lease.

The lease liabilities are measured at the present value of the remaining lease payment. The association's incremental borrowing rate as at 1 July 2019 was used to discount the lease payments.

MENTAL HEALTH CARERS ARAFMI NSW INC.
A.B.N. 70 653 824 650

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30TH JUNE 2023

Note 1 - Statement of significant accounting policies (continued)

(c) Revenue recognition

The association is first required to determine whether amounts received are accounted for revenue as per AASB 15: Revenue from Contracts with Customers or Income as per AASB 1058: Income for Not-for-Profit Entities.

Funding arrangements which are enforceable and contain sufficiently specific performance obligations are recognised as revenue under AASB 15. Otherwise, such arrangements are accounted for under AASB 1058, where upon initial recognition of an asset, the entity is required to consider whether any other financial statement elements should be recognised (eg financial liabilities representing payable amounts), with any difference being recognised immediately in profit or loss as income.

Revenue is measured at the fair value of the consideration received or receivable. The company recognises revenue when the amount of revenue can be reliably measured, it is probable that future economic benefits will flow to the entity and specific criteria have been met for each of the company's activities as described below. All revenue is stated net of the amount of goods and services tax (GST).

Grants, donations and bequests

Contributed assets

If the association receives assets from the government and other parties for nil or nominal consideration in order to further its objectives, these assets would be recognised in accordance with the recognition requirement of other applicable standards (AASB 9, AASB 16, AASB 116 and AASB 138).

On initial recognition of an asset, the association recognises related amounts (being contribution from owners, lease liabilities, financial instruments, revenue or contract liabilities arising from a contract with a customer).

The association recognises income immediately in profit and loss as the difference between the initial carrying amount and the asset and the related amount.

Operating grants and donations

When the association receives operating grant revenue or donations, it assesses whether the contract is enforceable and has sufficient specific performance obligations in accordance with AASB 15. When both these conditions are satisfied the association identifies each performance obligation relating to the grant, recognises a contract liability for these obligations and recognises revenue as it satisfies its performance obligations.

Where the contract is not enforceable or does not have sufficiently specific performance obligations the association either recognises the asset received in accordance with the requirements of other applicable accounting standards, recognises related amounts or recognises income immediately in profit and loss as the difference between the initial carrying amount of the asset and the related amount.

If a contract liability is recognised as a related amount above, the association recognises income in profit and loss when or as it satisfies its obligations under the contract.

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

Other revenue is recognised when the right to receive the revenue has been established.

(d) Impairment of non-financial assets

At the end of each reporting period, the committee reviews the carrying amounts of assets to determine whether there is an indication that those assets have been impaired. If such an indication exists, an impairment test is carried out by comparing the recoverable amount of the asset, being the higher of the asset's fair value less costs of disposal and value in use, to the asset's carrying amount. Any excess of the asset's carrying amount over its recoverable amount is recognised as an impairment in the profit or loss and other comprehensive income statement.

MENTAL HEALTH CARERS ARAFMI NSW INC.
A.B.N. 70 653 824 650

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30TH JUNE 2023

Note 1 - Statement of significant accounting policies (continued)

(e) Employee provisions

Provision is made for the association's liability for employee entitlements arising from services rendered by employees to balance date. Employee entitlements expected to be settled within one year, together with entitlements arising from wages and salaries, annual leave and long service leave which will be settled after one year, have been measured at their nominal amount.

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

(f) Provisions

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

(g) Trade and other payables

Trade and other payables represent the liability outstanding at the end of the reporting period for goods and services received by the association during the reporting period that remain unpaid. The balance is recognised as a current liability with the amounts normally paid within 30 days of recognition of the liability.

(h) Income tax

The association is exempt from income tax under section 50-50 of the Income Tax Assessment Act 1997.

(i) Cash and cash equivalents

Cash includes cash on hand, deposits held at call with banks, and other short-term highly liquid investments with short-term maturities.

(j) Good and services tax (GST)

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

(k) Trade and other receivables

Trade receivables and other debtors include amounts due from customers and donors. 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.

(l) Economic dependency

The association's continuing operations are dependent on the receipt of government grants for financial support.

(m) Financial instruments

Initial recognition and measurement

Financial assets and financial liabilities are recognised when the entity becomes party to the contractual provisions to the instrument. For financial assets, this is equivalent to the date that the association commits itself either purchase or sell the asset (trade date accounting is adopted).

Financial instruments are initially measured at fair value plus transaction costs except where the instrument is classified "at fair value through profit or loss", in which case transaction costs are expensed to profit or loss immediately.

MENTAL HEALTH CARERS ARAFMI NSW INC.
A.B.N. 70 653 824 650

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30TH JUNE 2023

Note 1 - Statement of significant accounting policies (continued)

(m) Financial instruments (continued)

Trade receivables are initially measured at transaction price if the trade receivables do not contain significant financing components.

Classification and subsequent measurement

Financial instruments are subsequently measured at fair value, amortised cost using the effective interest method, or cost. Where available, quoted prices in an active market are used to determine fair value. In other circumstances, valuation techniques are adopted.

Amortised cost is calculated as the amount at which the financial asset or financial liability is measured at initial recognition less principal repayments and any reduction for impairment, and adjusted for any cumulative amortisation of the difference between the initial amount and the maturity amount calculated using the effective interest method.

The effective interest method is used to allocate interest income or interest expense over the relevant period and is equivalent to the rate that exactly discounts estimated future cash payments or receipts (including fees, transaction costs and other premiums or discounts) through the expected life (or when this cannot be reliably predicted, the contractual term) of the financial instrument to the net carrying amount of the financial asset or financial liability. Revisions to expected future net cash flows will necessitate an adjustment to the carrying amount with a consequential recognition of an income or expense item in profit or loss.

Fair value is determined based on current bid prices for all quoted investments. Valuation techniques are applied to determine the fair value for all unlisted securities, including recent arm's length transactions, reference to similar instruments and option pricing models.

As per AASB 9 an expected credit loss model is applied, and not an incurred credit loss model as per the previous applicable standard (AASB 139). To reflect changes in credit risk, this expected credit loss model requires the association to account for expected credit losses since initial recognition.

AASB 9 also determines that a loss allowance for expected credit loss be recognised on debt investments subsequently measured at amortised cost or at fair value through other comprehensive income, lease receivables, contract assets, loan commitments and financial guarantee contracts as the impairment provision would apply to them.

In the case of financial assets carried at amortised cost, loss events may include: indications that the debtors or a group of debtors are experiencing financial difficulty default or delinquency in interest or principal payments; indications that they will enter bankruptcy or other financial reorganisation; and changes in arrears or economic conditions that correlate with defaults.

If the credit risk on a financial instrument did not show significant change since initial recognition, an expected credit loss amount equal to the 12 month expected credit loss is used. However, a loss allowance is recognised at an amount equal to the lifetime expected credit loss if the credit risk on that financial instrument has increased significantly since initial recognition, or if the instrument is an acquired credit-impaired financial asset.

The association has adopted the simple approach under AASB 9 in relation to trade receivables, as the loss allowance is measured at the lifetime expected credit loss.

The association reviewed and assessed the existing financial assets at the beginning of the year. It was determined that there was no significant change in credit risk from the date they were initially recognised and no adjustment was required.

MENTAL HEALTH CARERS ARAFMI NSW INC.
A.B.N. 70 653 824 650

**NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30TH JUNE 2023**

Note 1 - Statement of significant accounting policies (continued)

(m) Financial instruments (continued)

Derecognition

Financial assets are derecognised where the contractual rights to receipt of cash flows expire or the asset is transferred to another party whereby the entity no longer has any significant continuing involvement in the risks and benefits associated with the asset. Financial liabilities are derecognised where the related obligations are discharged, cancelled or have expired. The difference between the carrying amount of the financial liability, which is extinguished or transferred to another party, and the fair value of consideration paid, including the transfer of non-cash assets or liabilities assumed, is recognised in profit or loss.

(n) New and Amended Accounting Policies

The association has assessed all new and amended accounting standards issued and effective for the current financial reporting period. None of these have had any material impact on the financial statements.

	2023	2022
	\$	\$
Note 2 - Revenue		
Donations received	25,093	25,089
Grants received	524,116	515,068
Other grants	517,736	296,734
Interest received	180	139
Government stimulus COVID-19 support	-	60,058
Other revenue	-	47,339
	<u>1,067,125</u>	<u>944,427</u>

Note 3 - Cash and cash equivalents

Cash on hand	268	268
Bendigo bank	2,344	1,718
Bendigo bank - operating account	641,241	329,964
Bendigo bank - account (bequest)	40,267	40,263
Bendigo bank - term deposit (bequest)	511,813	508,256
	<u>1,195,933</u>	<u>880,469</u>

Note 4 - Trade and other receivables

GST receivable	8,936	6,211
Trade debtors	9,492	6,751
	<u>18,428</u>	<u>12,962</u>

Note 5 - Other

Deposits	22,665	23,440
Prepayments	11,299	17,397
	<u>33,964</u>	<u>40,837</u>

MENTAL HEALTH CARERS ARAFMI NSW INC.
A.B.N. 70 653 824 650

**NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30TH JUNE 2023**

	2023 \$	2022 \$
Note 6 - Property, plant and equipment		
Office furniture and equipment - at cost	26,546	28,086
Less: accumulated depreciation	<u>(26,546)</u>	<u>(27,711)</u>
	-	375
Total property, plant and equipment	<u>-</u>	<u>375</u>

Note 7 - Non-current assets - Right-of-use assets

The association's lease relates to leased premises which is recognised under AASB 16 in the statement of financial position.

Leased buildings	353,226	353,226
Accumulated amortisation	<u>(295,556)</u>	<u>(209,052)</u>
Net carrying amount	<u>57,670</u>	<u>144,174</u>
	Leased buildings	Total
	\$	\$
Balance at the beginning of the period	144,174	144,174
Additions	-	-
Depreciation charge	<u>(86,504)</u>	<u>(86,504)</u>
Closing net book amount	<u>57,670</u>	<u>57,670</u>

AASB 16 related amounts recognised in the statement of profit or loss

Amortisation charge on right-of-use assets	86,504	86,504
Interest expense on lease liabilities	5,398	9,828

Note 8 - Trade and other payables

Other creditors and accruals	34,561	24,029
GST Payable	41,402	17,299
PAYG Withheld	16,233	12,755
Superannuation payable	<u>21,406</u>	<u>17,911</u>
	<u>113,602</u>	<u>71,994</u>

Note 9 - Contract liabilities

Grants in Advance	108,248	21,620
Bequests in trust	<u>552,065</u>	<u>548,507</u>
	<u>660,313</u>	<u>570,127</u>

A bequest was received in the 2020 period from the Estate of Eunice Lonergan amounting to \$538,447. This bequest is held in trust by MHCN and the funds and interest earned are to be applied for the purposes set out in the bequest. The balance of the bequest funds at year end was \$552,065.

MENTAL HEALTH CARERS ARAFMI NSW INC.
A.B.N. 70 653 824 650

**NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30TH JUNE 2023**

	2023	2022
	\$	\$
Note 10 - Employee provisions		
Current		
Provision for annual leave	21,944	30,756
Provision for long service leave	<u>28,335</u>	<u>25,205</u>
	<u>50,279</u>	<u>55,961</u>
Non-current		
Provision for long service leave	<u>12,866</u>	<u>9,059</u>
	<u>12,866</u>	<u>9,059</u>

Note 11 - Related party transactions

The Association did not engage the services of any committee members during the current or previous year.

Note 12 - Cash flow statement

(a) Reconciliation of cash

Cash at the end of the financial year as shown in the statement of cash flow is reconciled to the related items in the statement of financial

	2023	2022
	\$	\$
Cash on hand	268	268
Cash at bank and on deposit	<u>1,195,665</u>	<u>880,201</u>
	<u>1,195,933</u>	<u>880,469</u>

(b) Reconciliation of cash provided by / (used) in operating activities

Profit / (loss) for the year	189,493	43,458
<i>Non-cash flows in operating surplus</i>		
Depreciation and amortisation	86,879	92,008
<i>Changes in assets and liabilities</i>		
(Increase) / decrease in trade debtors	(2,741)	21,324
(Increase) / decrease in other receivables and deposits	4,148	(9,246)
Increase / (decrease) in trade and other payables	41,608	(24,308)
Increase / (decrease) in contract liabilities	90,186	(25,894)
Increase / (decrease) in employee provisions	<u>(1,875)</u>	<u>2,517</u>
	<u>407,698</u>	<u>99,859</u>

Note 13 - Events subsequent to balance date

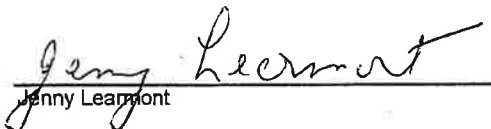
No matters or circumstances have arisen since the end of the financial year which significantly affected or may significantly affect the operations of the association in financial years subsequent to the financial year ended 30 June 2023.

MENTAL HEALTH CARERS ARAFMI NSW INC.
A.B.N. 70 653 824 650

ANNUAL STATEMENTS GIVE TRUE AND FAIR VIEW OF FINANCIAL POSITION AND PERFORMANCE OF
INCORPORATED ASSOCIATION

We, Jenny Learmont and Andrew Pryor, being members of the committee of Mental Health Carers ARAFMI NSW Inc. (Non-reporting) certify that:

The statements attached to this certificate give a true and fair view of the financial position and performance of Mental Health Carers ARAFMI NSW Inc. (Non-reporting) during and at the end of the financial year of the association ending 30 June 2023.

President: 
Jenny Learmont

Treasurer: 
Andrew Pryor

Dated: 26/10/2023

MENTAL HEALTH CARERS ARAFMI NSW INC.
A.B.N. 70 653 824 650

STATEMENT BY MEMBERS OF THE COMMITTEE

The committee members 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.

In the opinion of the committee members;

1. The financial statements and notes satisfy the requirements of the Australian Charities and Not-for-profits Commission Act 2012 (ACNC Act).
2. At the date of this statement, there are reasonable grounds to believe that Mental Health Carers ARAFMI NSW Inc will be able to pay its debts as and when they fall due.

This declaration is made in accordance with a resolution of the committee and is signed in accordance with subsection 60.15(2) of the Australian Charities and Not-for-profits Commission Regulation 2022.

President:


Jenny Leermont

Treasurer:


Andrew Pryor

Dated:

26/10/2023



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MENTAL HEALTH CARERS ARAFMI NSW INC.
A.B.N. 70 653 824 650

AUDITOR'S INDEPENDENCE DECLARATION

Auditor's Independence Declaration to the Committee Members of Mental Health Carers ARAFMI NSW 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 2023 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.

THOMAS DAVIS & CO.

J.G. Ryan

J.G. RYAN PARTNER

Chartered Accountants

Sydney

Date: *26 October 2023*

A member of



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INDEPENDENT AUDITOR'S REPORT

TO THE MEMBERS OF MENTAL HEALTH CARERS ARAFMI NSW INC.

Opinion

We have audited the financial report of Mental Health Carers ARAFMI NSW Inc, which comprises the statement of financial position as at 30 June 2023, the statement of profit or loss and other comprehensive income, statement of changes in equity and the statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, and the committee members certification.

In our opinion, the financial report of Mental Health Carers ARAFMI NSW Inc, has been prepared in accordance with Division 60 of the Australian Charities and Not-for-profits Commission Act 2012 and the Associations Incorporations Act 2009 (NSW) , including;

- (a) giving a true and fair view of the entity's financial position as at 30 June, 2023 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 2022 and the Association Incorporations Regulations 2022.

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 entity in accordance with the ethical requirements of the Accounting Professional and Ethical Standards Committee'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 the entity's financial reporting responsibilities under the Australian Charities and Not-for-profits Commission Act 2012 and the Associations Incorporations Act (NSW) 2009. 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 Committee Members for the Financial Report

The committee members of the entity 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, the Associations Incorporations Act 2009 (NSW) and is appropriate to meet the needs of the members. The committee members' responsibility also includes such internal control as the committee members determine is necessary to enable the preparation of a financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

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

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Sydney 2000 Sydney 2001 F: (02) 9231 6792



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 our 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 entity's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the committee members.
- Conclude on the appropriateness of the committee members' 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 entity'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 entity 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 committee members 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.


J G Ryan Partner

Chartered Accountants

SYDNEY,

Date: 26 October 2023

Liability limited by a scheme approved under Professional Standards Legislation