

# 2022-2023

## Annual Report

The peak body  
for mental health  
in Victoria

[mhvic.org.au](http://mhvic.org.au)



**MentalHealth  
Victoria**

Collaboration • Knowledge • Leadership



## Mental Health Victoria

Mental Health Victoria Ltd (ABN 79 174 342 927) is a public company limited by guarantee.

Our registered office is located at 6/136 Exhibition Street, Melbourne 3000.



### Charitable status, tax concessions and fundraising

Mental Health Victoria Ltd is registered with the Australian Charities and Not-for-profits Commission (ACNC) as a Public Benevolent Institution (PBI).

The Australian Taxation Office (ATO) has endorsed the company as an Income Tax Exempt Charity. As a result, it receives income and certain other tax concessions, along with exemptions consistent with its status as a PBI which relate to Goods and Services and Fringe Benefits taxes. Mental Health Victoria is also endorsed by the ATO as a Deductible Gift Recipient (DGR)



### Acknowledgement of Country

*We acknowledge the Wurundjeri people of the Kulin nation on whose lands we work, and the Traditional Owners of Country represented by all our members.*

*We pay our respects to Aboriginal and Torres Strait Islander cultures and to Elders past and present. We recognise the continuing connection to lands, waters and communities of Aboriginal and Torres Strait Islander communities, and that sovereignty has never been ceded.*

### Acknowledgement of those with Lived and Living Experience of mental health vulnerability

*We acknowledge also those with whom we work who have lived and living experience of mental health vulnerability.*

*We thank them for sharing their knowledge and expertise, recognising that their voices are vital to improving and strengthening the mental health system.*



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# Statement from the Board Chair and Chief Executive Officer

**Damian Ferrie**  
Chair



**Marcelle Mogg**  
CEO



**In delivering a powerful keynote address to our 2022 Mental Health Victoria annual general meeting, our patron Professor Allan Fels AO made the important point that setting the vision for reform is easier than the implementation.**


**It was timely advice, as we embarked on the third year of reform emerging from the landmark Royal Commission into Victoria's Mental Health System, amid continuing workforce challenges and ever-increasing demand for services.**

As the sector moves into the deep work of system reform, at Mental Health Victoria we continue to work to meet the spirit, ambition and urgency of the Royal Commission's recommendations, and the expectations of our community for real and substantive change across the system. Retaining a focus on system reform is critical while continuing to advocate for the sustainability of services as they deliver much needed care across the community.

To that end, Mental Health Victoria has worked through the year to build effective, mutually respectful relationships across the sector, to apply evidence-based rigour to proposals, advocate for pressing reforms and resourcing, and find constructive ways through difficult conversations.

One strong example of that work was the publication of *The First 100 Days: Mental health sector briefing to an incoming Victorian Government*, developed in the leadup to the 2022 Victorian election and informed by widespread consultation. That included over 50 targeted forums and interviews, multiple detailed surveys, and the *Our Reform* event we co-hosted in September 2022 with Tandem and the Victorian Mental Illness Awareness Council (VMIAC) which brought together more than 500 leaders and key stakeholders.

One of the most exciting developments in our work this year has been the focus on growing the lived experience workforce. We have been proud to play a role in crucial development and training through the provision of the Certificate IV in Mental Health Peer Work and as the Statewide Coordinator of the Peer Cadet Program, as well as building capacity through our engagement and projects within the Lived and Living Experience Workforce Development program.



Mental Health Victoria has also worked closely with the Department of Health Mental Health and Wellbeing Division to ensure that the work of reform is sequenced to deliver continuity of current services, support for workforce transition, expanded access to care and support and sustainability of service providers.

However, key among the challenges the sector faces are ongoing workforce shortages that mean services are too often in a state of crisis when endeavouring to meet demands for care. We hope and expect that the next iteration of the Mental Health Workforce Strategy may signal future investments. We have warned that, without action on workforce development now, the State Government will be hard-pressed to meet its own election commitment to double the mental health workforce by 2031, leaving mental health care for Victorians at significant risk.

We have also called on the Federal Government to step up and address the structural limits on the university and TAFE systems that impede workforce growth. With global competition for mental health care workers, we must have long term solutions in place to grow and sustain a workforce that is equipped to provide new models of care and support.

Also at a federal level, we are aware of the continuing structural failure of the National Disability Insurance Scheme to meet the care and psychosocial support needs of thousands of Victorians.

While pleased to have been able to advocate successfully for a two-year continuation of State Government funding of the Early Intervention Psychosocial Support Response (EIPSR) program in partnership with our members, we remain concerned that there is no long term solution in place between the State and Federal Governments to ensure continuity of care and support for the thousands of Victorians who rely on these services to remain well and live lives of independence and dignity.

As we come to the end of the first phase of reform, we have an opportunity to measure our progress as a sector against the vision set out as part of the Royal Commission recommendations.

It is important that, following the energy and activity that has marked the first phase of reform, we take the opportunity now to ensure that we are on track and are prioritising the issues that are critical to realising real and substantive change across the system.

Reflecting on the questions the sector has begun to address in the past year, it feels very much like a moment when reform will either be advanced or missed: a time when, as a sector, we come together to have the hard, candid and respectful conversations necessary to determine pathways for change, or that we shy away from the challenge.

Over the past year, Mental Health Victoria itself has continued to grow and develop as an organisation, most recently amending its constitution, with the overwhelming support of its members, to enable the appointment of Board members in line with a skills-based matrix. The Board proposed this change at a Special General Meeting of members on 27 June.

**Finally, we extend our sincere thanks to members of the Board, to our staff and to our partners across the sector for their dedicated work and support through the year, and to our patron Professor Allan Fels AO and ambassador Professor Pat McGorry AO for their continued support and wisdom.**

**We are grateful for the achievements of 2022-2023 and look forward to our continued work together.**

**Damian Ferrie**, Board Chair  
**Marcelle Mogg**, CEO

# Policy and Engagement



**The ongoing implementation of ambitious and complex reforms arising from the Royal Commission into Victoria's Mental Health System remained the focus of policy work for the Victorian mental health and wellbeing sector this year, requiring much consultation, mature conversations, and strong analysis and advocacy.**

**The challenging reform process continues to take place amid significant workforce issues which require urgent attention at both state and federal levels. One of the legacies of the COVID-19 pandemic has been the extraordinary and sustained demand on services amid high levels of workforce fatigue and structural workforce supply limitations.**

Through the year Mental Health Victoria was again central to providing advice, policy guidance, and convening sector consultations on major reform initiatives, including the passage of the *Mental Health and Wellbeing Act 2022 (Vic)* and State Budget processes.

We undertook a range of initiatives before and after the State Budget to ensure close collaboration with our membership and networks so we could strongly advocate on sector priorities and support services through a time of challenge and transition. That included an online members forum to discuss priority issues, and a comprehensive pre-budget submission to Government which identified key concerns, particularly for programs facing funding cessation and expiration of agreements.

We were broadly gratified to see a State Budget that, in a tough fiscal environment, represented a commitment to stability for the sector while ongoing reforms continue to mature. We welcomed confirmation of an additional year of funding for the Mental Health and Wellbeing Hubs, for which we had long advocated.

The Budget also contained thoughtful decisions in response to our calls for a comprehensive approach to transition planning, as we move from legacy programs and establish new and diverse models of care across the sector. This has given us hope that the Government is listening and is prepared to work collaboratively with the sector in meeting the challenges ahead. Mental Health Victoria has been calling for:

- An urgent review of commissioning processes, and the establishment of co-commissioning approaches to Commonwealth and State-funded services.
- Support for the sector while it is in a period of structural transition, to avoid the loss of much needed workforce, services and expertise, particularly when these are located in smaller and specialist providers.
- A coherent, whole-of-government strategy for community managed mental health.

However, several key levers of reform remained untouched by the State Budget, most notably workforce reforms and significant capital investments.

To support those goals, we have worked in partnership with the Victorian Alcohol and Drug Association (VAADA) and the Workforce Innovation and Development Institute (RMIT) to identify options to help address workforce issues facing the sector, and with the Australian Psychological Society to identify workforce solutions, particularly on easing restrictions currently limiting the many hundreds of Victorian students seeking to complete their professional training in order to be eligible for registration.

The policy team was commissioned to undertake sector-wide consultation on partnerships between mental health and wellbeing non-government organisations (NGOs) and public mental health services in the delivery of transformed Area Mental Health and Wellbeing Services. The team also worked with the Department of Health on a strategic framework to support mental health and aligned organisations facing funding uncertainty due to system-wide changes to funding and commissioning.

We also consulted on and participated in work on the elimination of seclusion and restraint, the development of helpline channels, implications from the Royal Commission for women and LGBTIQ consumers, and specific considerations faced by alcohol and other drugs service providers, as well as with the Family Violence Multi-Agency Risk Assessment and Management (MARAM) framework with regard to the implications for mental health consumers, carers and service providers.

Mental Health Victoria is also a member of the Statewide Trauma Service Advisory Group, helping to establish this new service which will provide leadership and practice guidance in the delivery of trauma-informed care.

We were also selected as a key partner in the Department of Health's implementation support project to ensure that the mental health and wellbeing sector was appropriately trained and educated about the impending commencement of the new *Mental Health and Wellbeing Act 2022 (Vic)*.

Mental Health Victoria is leading the work to engage community mental health providers, primary care leaders and NGOs, ensuring that staff at every level of the sector are trained in how the new Act either changes their legal obligations or – in some cases – covers them for the very first time. Our brief of work focuses on provision of education and information with regard to the scope of the Act.

This body of work will complement the embedded practitioner network being established across Area Mental Health Services and will incorporate a universal eLearn platform. Mental Health Victoria will be closely involved in the governance of this platform and on several other related initiatives being led by the Department.

## Sector networks

Mental Health Victoria facilitates policy and advocacy via two major sector networks.

### **Victorian Mental Health Peaks Network (VMHPN)**

The Victorian Mental Health Peaks Network (VMHPN) is a network of peak bodies in the mental health and wellbeing sectors. It was established in 2018 to analyse and develop strategies to improve Victoria's mental health system.

The VMHPN regularly brings together key stakeholders to discuss issues relevant to Victoria's reform agenda and the implementation of state and federal initiatives. The VMHPN provides valuable input into all of Mental Health Victoria's major submissions and publications.

### **Service Reform Advisory Network (SRAN)**

Established in 2021, the Service Reform Advisory Network (SRAN) is a network of service providers, other organisations and stakeholders, with an interest in providing input on the Royal Commission into Victoria's Mental Health System reforms associated with service provision and design. The SRAN currently consists of 57 member organisations, who meet approximately quarterly, aligning with relevant reform or sector activities.

### **Lived and Living Experience Advisory Group (LLEAG)**

As outlined by the Royal Commission into Victoria's Mental Health System, lived and living experience must be embedded across all parts of the reformed mental health and wellbeing system. Since 2020, Mental Health Victoria's Lived and Living Experience Advisory Group (LLEAG) has provided valuable input into our advocacy, policy, training, research, events, projects and other activities.

Chaired by Ingrid Ozols AM, the LLEAG comprises individuals with exceptional insight, knowledge and experience of mental health and wellbeing from a lived and living experience perspective. LLEAG members meet regularly to strengthen Mental Health Victoria and identify areas of prioritisation for our work and strategy.

# Publications and Submissions



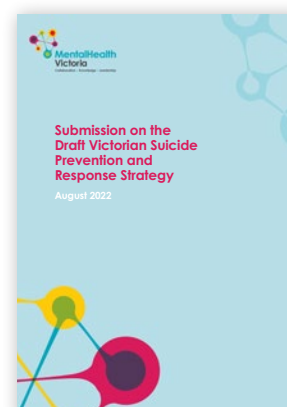
**Mental Health Victoria makes regular submissions to Federal and State Governments based on consultation with our members and networks.**

We have contributed several confidential and unpublished submissions in 2022-2023 to the Victorian Government regarding Royal Commission reform. This has included a report on partnerships between mental health and wellbeing non-government organisations (NGOs) and public services in the delivery of transformed Area Mental Health and Wellbeing Services (AMHWS).



## **Submission on the Draft Victorian Suicide Prevention and Response Strategy (August 2022).**

This joint submission with Suicide Prevention Australia and On the Line welcomed 'towards zero suicides' as the appropriate vision for the Strategy, which we noted comes at a critical juncture, as Victoria emerged from the pandemic and compounding natural disasters. However we urged a number of recommendations on priority populations and areas, trauma, risk factors and workplaces, resources, aftercare, safe spaces, whole-of-government focus and accountability, and standards.

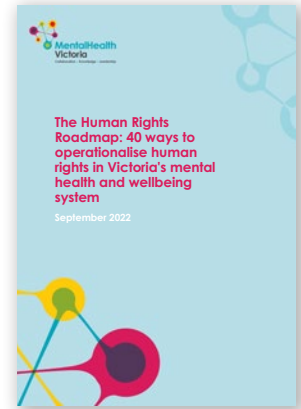




## **The Human Rights Roadmap: 40 ways to operationalise human rights in Victoria's mental health and wellbeing system** (September 2022).

This joint report with the Castan Centre for Human Rights Law provided a suite of pragmatic recommendations that are intended to ensure that Victoria's current and future mental health and wellbeing systems are based on a commitment to promote and uphold human rights and to focus on the promotion of good mental health and wellbeing.

Its overarching recommendations to legislators and policy makers are for: the 'continuous reorientation' of Victoria's mental health and wellbeing systems towards human rights-based approaches; practical supports to ensure that reforms to law and policy translate into practice and culture; and robust strategic oversight of Victoria's mental health reform agenda. It was launched as part of the *Our Reform* conference in September 2022.



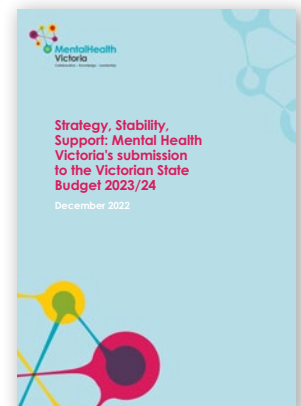
## **The First 100 Days: Mental health sector briefing to an incoming Victorian Government** (November 2022).

This briefing, published ahead of the 2022 Victorian election, sought to provide a guide to an incoming State Government for its first 100 days in office to strengthen the strategic approach to mental health reform, strategy, and investment throughout the next term of government. It was underpinned by detailed and widespread consultation across the Victorian mental health and wider community and adjacent sectors, including over 50 targeted consultations and interviews, and multiple detailed surveys. Its advice is clustered into six thematic areas: strategy, spending, support where it is most needed, sustainability, sequencing and skills.



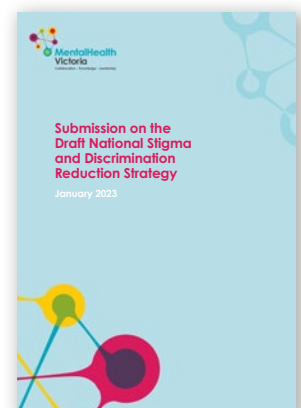
## **Strategy, Stability, Support: Mental Health Victoria's submission to the Victorian State Budget 2023/24** (December 2022).

This submission built on the findings and solutions identified in our The First 100 Days report (above). Presenting a suite of 30 State Budget recommendations, it sought to identify the most pressing service gaps and risks to service continuity, using a needs-based analysis, detailed sector consultation, and analysis of emerging data and trends. Key recommendations, including an additional year of funding for the Mental Health and Wellbeing Hubs and calls for a comprehensive approach to transition planning, were reflected in the May 2023 State Budget.



## **Submission on the Draft National Stigma and Discrimination Reduction Strategy** (January 2023).

Mental Health Victoria commended the National Mental Health Commission for developing the Draft National Stigma and Discrimination Reduction Strategy but proposed a number of recommendations including to strengthen its language, scope and vision, ensure the diverse lived and living experience workforce is supported and embedded in the strategy and to clarify and define actions for key population groups. We also recommended a greater alignment with human rights frameworks and legislation, developing clear steps for data collection, monitoring and evaluation of outcomes and developing a practicable timeframe and implementation plan in consultation with key stakeholders.



# Events

**Mental Health Victoria was pleased in 2022-23 to co-host events that brought together stakeholders from across government, and the mental health and other sectors.**



## **Working Better Together (July 2022)**

In an historic partnership, Mental Health Victoria and the Victorian Alcohol and Drug Association (VAADA) co-hosted the AOD and Mental Health Collaborative Service Providers' Conference on 18 July 2022, under the theme: *Working Better Together: A shared vision for AOD and Mental Health.*

## **Our Reform (September 2022)**

Mental Health Victoria, Tandem and VMIAC co-hosted the *Our Reform* sector-wide conference and CEO Breakfast on 6 September 2022, the first major in-person gathering of the sector post-COVID. Launched by Victoria's Minister for Mental Health, Gabrielle Williams, it brought together almost 500 sector leaders, government officials, consumers, carers, and other stakeholders to critically examine and reflect on successes and challenges at the 18-month mark of Victoria's Mental Health Royal Commission reform and implementation process.

Lived experience leaders, policy makers, clinicians, and eminent system reform and human rights experts led a series of challenging, interactive, and detailed discussions on the work achieved to date and the substantial road ahead. It was a unique event held in the leadup to the 2022 Victorian state election, which informed recommendations to government on how implementation could be strengthened throughout 2023 and beyond.

The event featured the launch of Mental Health Victoria's new report, prepared in partnership with the Castan Centre for Human Rights Law, *The Human Rights Roadmap: 40 ways to operationalise human rights in Victoria's mental health and wellbeing system.*



(L-R)  
**MHV CEO, Marcelle Mogg,**  
**Tandem CEO, Marie Piu,**  
**Minister for Mental Health, Gabrielle Williams**  
**and VMAC CEO, Craig Wallace**

# Workforce Development and Learning



## Lived and Living Experience Workforce Training Workstream Coordination

Mental Health Victoria is proud to have been funded by the Department of Health to engage a Workstream Coordinator for the Lived and Living Experience Workforce (LLEW) Training Workstream. This project has required facilitating relationship building activities and collaboration meetings between the nine participating organisations. These agencies continue to collaborate on training initiatives for LLEW and capitalise on the shared knowledge and expertise as they grow organisational capacity to support the Lived and Living Experience Workforce specifically.

## Peer Cadet Program

Mental Health Victoria continues to lead the implementation and project management of the Peer Cadet Program. This is a collaboration between the Department of Health and community organisations with the intention of increasing the number of dedicated lived and living experience positions in the workforce while providing a supportive and structured environment for learning. The Peer Cadet Program offers an opportunity for people with lived and living experience to enter paid employment while undertaking the Certificate IV in Mental Health Peer Work within a participating community mental health organisation.

Victoria's Minister for Mental Health Gabrielle Williams hosted the graduation event to honour the 30 Peer Cadets who are the first to graduate from the program. As well as celebrating their achievements, it marked the first occasion the entire cohort was able to meet socially, given the program commenced during lockdown restrictions.

Mental Health Victoria had 154 applications for the second year of the Peer Cadet Program, this time working with nine partner agencies (an increase from six previously).

## Living and Lived Experience Workforce (LLEW) Leadership Development Grants

Mental Health Victoria has made a substantial contribution to the growth and development of the lived and living experience workforce through initiatives in training, organisational support, supervision, ongoing learning, and career pathways. We engaged in the following projects over the last year.

The Lived Experience Workforce Grants program was conducted by Mental Health Victoria on behalf of the Victorian Department of Health to provide training and courses that support the professional development of lived experience workers employed in the mental health community services sector. It was renamed and expanded this year to include clinical, community, AOD and harm reduction services with a focus on leadership development. Mental Health Victoria awarded 40 grants at a maximum value of \$5,000 per recipient. This initiative was part of the \$2.2 million of funding provided by the Department of Health for the lived and living experience workforce.

Another initiative within the LLEW funding included Mental Health Victoria's engagement in the partnerships and training workstreams of the LLEW organisational capacity project. We were engaged to facilitate relationships and resource sharing between nine key agencies within the LLEW Partnership Program. The Department of Health funded a position within Mental Health Victoria to coordinate meetings and discussions around training the lived and living experience workforce.



### Certificate IV Mental Health Peer Work Program

In collaboration with Wodonga TAFE, Mental Health Victoria led two cohorts of students in the Certificate IV in Mental Health Peer Work program. Our April 2023 intake attracted our highest level of interest, with over 50 prospective students submitting expressions of interest. With the unique requirement of students needing to be working or volunteering in the sector to be accepted into the course, we have been able to expand our relationships and support for organisations committed to developing a lived experience workforce while simultaneously upskilling the workforce.

In addition, Mental Health Victoria was able to improve the content and processes in the Certificate IV program, creating a more informed and appropriate course for students from a range of lived experience backgrounds.

### Workforce Development Training

In 2022-2023, Mental Health Victoria continued to provide workforce development training. We delivered and/or partnered with education providers to offer a range of courses, including:

- Mental Health First Aid
- Foundations of Peer Work
- Courageous Conversations
- Introduction to Motivational Interviewing
- CALM Suicide Prevention

Mental Health Victoria's workforce development training upskills the lived and living experience workforce, educates leaders on inclusion and diversity, and highlights the importance of mental health and wellbeing in professional settings and within people's own lives. Training is available to individuals as well as organisations.

# Members and Supporters

Anxiety Recovery Centre Victoria (ARCVic)

APMHA Healthcare

At Home Assistance

Australian Community Support Organisation (ACSO)

Australian Psychological Society

Ballarat Community Health

Barwon Disability Resource Council

Breakthru (Parramatta)

Cairnmillar

Call to Mind

Cancer Council Vic

Carers Victoria Limited

Carrington HealthAbility Community Health Service

Catholic Social Services Victoria

CatholicCare Victoria

Clarity Health Care

Clarable

cohealth

Community Access

DPV Health Limited

Drummond Street Services

EACH

Eating Disorders Victoria

ermha365

First Step

Flourish Australia

Foundation House

Gateway Health

GenU Karingal St Laurence

Golden City Support Services

Grampians Community Health

GROW Victoria/Tasmania

Guidestar Life

IPC Health

Jesuit Social Services

Knox City Council

Lifeline Australia

Lighthouse Health and Support Services

LivingWorks Education (Australia)

Mallee Family Care

McAuley Community Service for Women

Mental Health First Aid International

Mentis Assist

Merri Health

Min Park Social Work

Mind Australia

Mitchell Suicide Prevention Network

Neami National

North Western Melbourne Primary Health Network

One in Five

OnSide (Live Life Connect)

On The Line Australia

Outlook Employment

PANDA

Peninsula Mental Health Services

Ranges Community Health

Royal Australian and New Zealand College of Psychiatrists

Relationships Australia (Victoria)

Sacred Heart Mission

SANE Australia

South West Healthcare

Spiritual Health Association

Sport and Life Training

St Mary's House of Welcome

Star Health

Tandem

Taskforce Community Agency

The Alfred Hospital

The Centre for Muslim Wellbeing

The Compassionate Friends Victoria

The First Step

Thera Farms Australia

Thorne Harbour Health

Turning Point Alcohol and Drug Centre

Uniting Vic.Tas

Upper Murray Family Care

VincentCare Victoria

Victorian Mental Illness Awareness Council (VMIAC)

Wellways

West Wimmera Health Services

Women's Health In the North (WHIN)

Youth Live4Life

Your Community Health

### Supporters 2022-2023

Ann Gallagher

Debbie Rees

Ebrahim Al-Abed

Emily Unity

Soula Thuring

Jazmin Pursell

Kirstie Edwards

Ky Millar

Lara Anderson

Lisa Cecil

Michael Dixon

Narelle Hocking

Peter McDonald

Rod Catterall

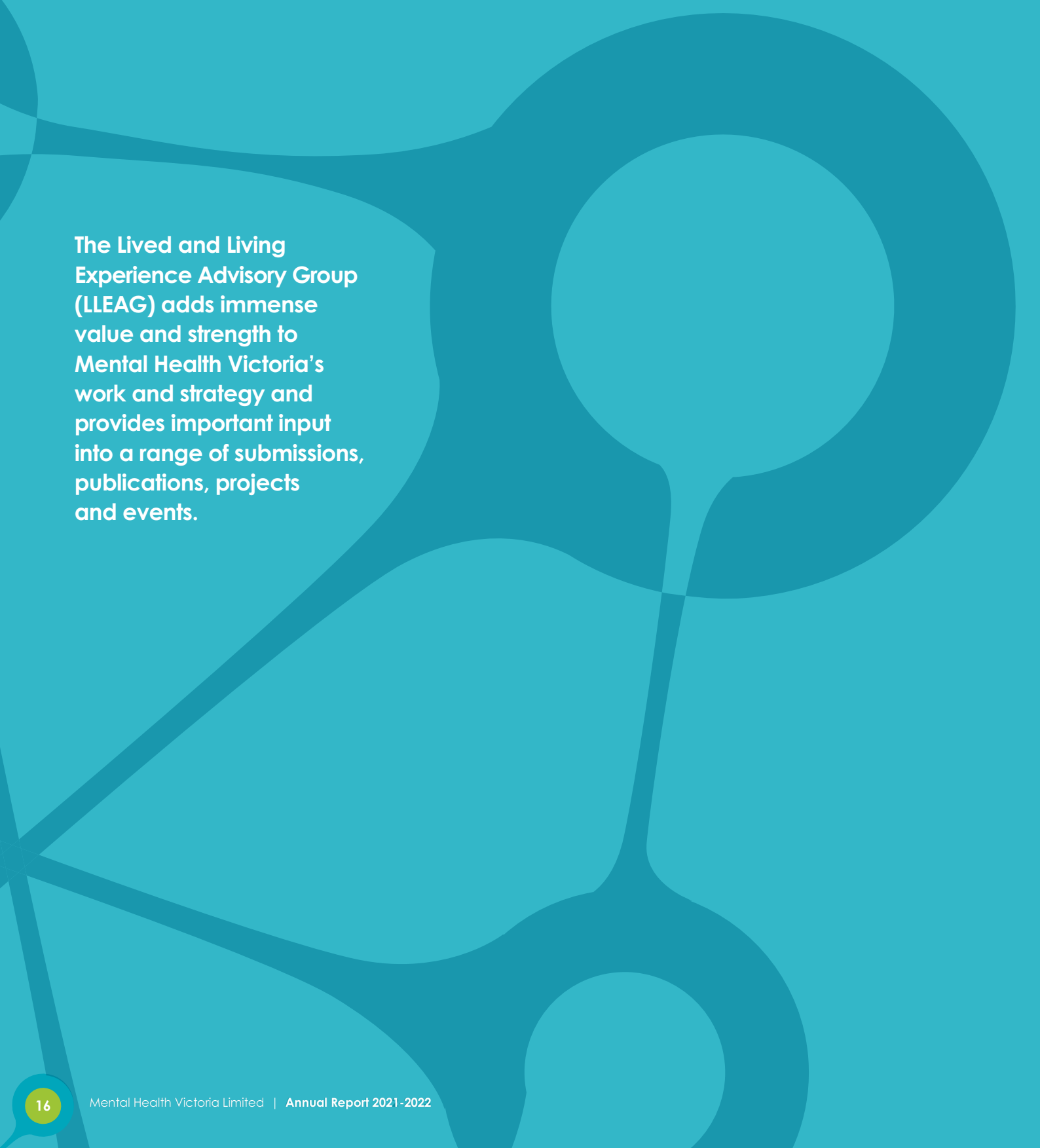
Sharon Mason

Tim Wilson

# Lived and Living Experience Advisory Group



The Lived and Living Experience Advisory Group (LLEAG) adds immense value and strength to Mental Health Victoria's work and strategy and provides important input into a range of submissions, publications, projects and events.







**Ingrid Ozols AM**  
Chair

**Ingrid is a mental health and suicide prevention living experience consultant, workplace and workforce educator, and founding director of Mental Health at Work (mh@work), a boutique consultancy offering decades of experience and services in advocacy and clinical and non-clinical workplace capacity and capability building.**

Underpinning all her work is a collaborative co-production philosophy, driven by consumer and carer voices, walking alongside each of our community members on their journey to being kind and compassionate champions of mental health and suicide prevention.



**Dave Peters**

**Dave is Co-chair of the Equally Well Alliance, Neami National's Research and Evaluation Committee and Consumer Co-chair of the new National Centre for Research Translation IPP-Committee (ALIVE), among other roles.**

He uses the insights drawn from accessing and navigating the service system to consult on service design/improvement, guest lecture for allied health students, and contribute to curriculum development and research projects.



**Jo Rasmussen**

**Jo Rasmussen is a national award-winning mental health advocate, whose most recent role was the Mental Health Data Analysis and Engagement Lead at Murray Primary Health Network.**

Jo is also a mental health consumer representative at the local, state and national level, and has been involved in projects such as the development of Head to Health, a Commonwealth Department of Health initiative.



**Fiona Browning**

**Fiona is a lived/living experience consultant who is passionate about improving the outcomes for people whose lives have been impacted by mental health challenges, distress and other associated experiences.**

She combines in her work today over 30 years personal lived/living experience and 20 years working in clinical and community health. Currently employed at Peninsula Mental Health Service as the Transformation Lived Experience Specialist, she has also recently worked as a consultant/facilitator with Wellways and does independent lived and living experience consulting with her own business, M.A.D. (Make a Difference) Independent Consulting.



**Daniel Bolger**  
(Jun 2022-Dec 2022)

**Daniel is a proud Noonuccal Aboriginal man who has been working in the Aboriginal community since 2014.**

He is passionate about helping Aboriginal people live the best life they can. He shares his personal story with mental health issues and drug addiction to inspire people to create positive changes in their life. Daniel currently works at Dardi Munwurro as the East Gippsland Coordinator.



**Imbi Pyman**  
(Jun 2022-Feb 2023)

**Imbi is passionate about improving support for families and those caring for anyone suffering from mental illness.**

She is a proud mum. Her youngest son, Jonah, now nearly 20, was brutally bullied, groomed and sexually assaulted at school when he was 12 and now suffers complex PTSD as a result. Imbi and her husband Trevor have advocated for access to appropriate and effective treatment.

# Governance

**Mental Health Victoria Ltd is governed in accordance with the *Corporations Act 2001 (Cth)*, the *Australian Charities and Not-for-profits Commission Act 2012 (Cth)*, the *Constitution of Mental Health Victoria Ltd*, and the *Board Governance Charter*.**

Our approach to corporate governance is based on a set of values and behaviours that underpin day-to-day activities, provide transparency, and protect the interests of stakeholders.

**The Mental Health Victoria Board comprises up to 11 non-executive, unpaid Directors. The functions reserved for the Board and those delegated to management are formally documented in the Board Governance Charter, Director Letter of Appointment, and Delegation to Chief Executive policy.**

In 2022-23, Mental Health Victoria farewelled Ms Maggie Toko and Professor Steve Moylan following their respective appointments to the newly established Victorian Mental Health and Wellbeing Commission and the Victorian Mental Health Collaborative Centre. We thank both Maggie and Steve for their contribution to Mental Health Victoria and wish them success in their new roles.

**The following directors were in office through the period 1 July 2022 – 30 June 2023:**



*Our Patron*  
**Professor  
Allan Fels AO**



*Our Ambassador*  
**Professor  
Patrick McGorry AO**



**Damian Ferrie** *Board Chair, CEO, Better Health Network*

Damian has held executive leadership roles in health, housing and urban renewal within the public and not-for-profit sectors. His career has been focused on tackling social, economic and health equity.

Damian is the CEO of Better Health Network (BHN). BHN is the result of a merger which brought together three community health services in the south eastern region of Melbourne. His work is focused on prevention, harm reduction and primary health. He has initiated many place-based interventions to build community capacity through partnerships with community, government and the for-purpose sectors. He is president of the Victorian Council of Social Service (VCOSS) and deputy chair of North Western Melbourne PHN.

**Board Term:** 2017 to present **Chair Term:** 2018 to present **Deputy Chair Term:** 2018



**Christopher McDermott** *Deputy Chair, Barrister*

Christopher is a member of the Victorian Bar and has a broad civil law practice. He specialises in employment and industrial law, anti-discrimination law, human rights and administrative law. Christopher is the Secretary of the Victorian Bar's Indigenous Justice Committee, a member of the Industrial Bar Association Committee, the Australian Bar Association's Diversity and Inclusion Committee, and the Victorian Bar's LGBTIQ Working Group (which he helped to establish).

**Board Term:** 2018 to present **Deputy Chair Term:** 2022 to present



**Amanda Bond** *CEO, CareChoice*

Amanda is an executive leader with more than 25 years of experience in health, aged care, disability services and health insurance, and has held executive roles at Peninsula Health, Australian Unity and Medibank Private. She is CEO of CareChoice, which specialises in 24-hour disability programs for people with multiple and complex needs across Victoria. Amanda holds a Bachelor of Social Science (Psychology) and Graduate Diploma of Psychology (Adv), EMBA, GAICD, and is Director and Vice-President of The Compassionate Friends Victoria.

**Board Term:** 2023 to present



**Tom Dalton** *CEO, Neami National*

A lawyer by training, Tom has worked in mental health for nearly 30 years, in government, clinical services and now the community mental health sector. He was CEO of Forensicare before being appointed CEO at Neami National. Tom is committed to ensuring that the voices of consumers, carers and service providers are reflected in policy development and service delivery. In previous roles, he has led organisational change to embed recovery-focused and recovery-oriented services.

**Board Term:** 2019 to present



**David Frost** *Chief Financial Officer, Australian Institute for Teaching & School Leadership*

David has previously served in CFO roles for Neami National, Alzheimers Australia and Bayside Medicare Local, as Acting Director-Corporate Services for the Melbourne Primary Care Network, General Manager for the Manningham General Practice, CEO for Cestria Coaching, and Director and Honorary Treasurer for Travellers Aid Australia. David is a finance professional and is a Fellow of Chartered Accountants Australia and New Zealand.

**Board Term:** 2020 to 2023 (on leave as of 27/04/2023)



**Karenza Louis-Smith** *CEO, ermha365*

Tertiary qualified with a BA (Hons) in Youth and Community work, Karenza is CEO at ermha365, which works for people who are challenged with complex mental health and disability issues. She has extensive leadership experience with for-purpose organisations in Australia and the United Kingdom over 25 years. Her unique perspective includes her own lived experience of mental ill health as a young person, and she has participated in intensive leadership development with the Global Leadership Foundation and Leadership Victoria.

**Board Term:** 2019 to present



**Tassia Michaleas** *CEO, Merri Health Ltd*

Tassia has extensive experience in the not-for profit and community sector and commenced her career in community health in 1996. She holds a Bachelor of Economics, a Bachelor of Social Work and a Master of Business Administration, is an Associate Fellow of the Australian College of Health Service Management and a Graduate of the Australian Institute of Company Directors.

**Board Term:** 2017 to 2023 (on leave as of 27/04/2023)



**Professor Richard Newton** *Consultant Psychiatrist, Peninsula Health Mental Health Service*

Richard is an Adjunct Clinical Professor at Monash University, former Clinical Director of the Peninsula Health Mental Health Service and has a private practice specialising in eating disorders. He is an Honorary Principal Fellow at the University of Melbourne, with current or past board roles with Wellways, Wandi Neridas, the Butterfly Foundation, and the World Association of Psychiatric Rehabilitation Australia. He has published over 75 peer-reviewed articles or book chapters and teaches a Masters-level course in Structured Psychotherapy at the University of Melbourne and an Advanced Training course in cognitive behavioural therapy (CBT).

**Board Term:** 2018 to present



**Associate Professor Simon Stafrace** *Program Director, Alfred Mental & Addiction Health*

As well as his role at Alfred Health, Simon holds an honorary appointment as Clinical Adjunct Associate Professor at Monash University and is Chair of the Community Collaboration Committee of the Royal Australian and New Zealand College of Psychiatrists (RANZCP). Simon recently completed a secondment to the Victorian Department of Health as Chief Adviser from 2020-22. In that role, he contributed to the Royal Commission into Victoria's Mental Health System and was a member of the senior executive team tasked with early implementation of its recommendations, and the establishment of Mental Health Reform Victoria and the Division of Mental Health and Wellbeing.

**Board Term:** 2018 - 2019, 2023 to present



**Peter Pynta GAICD** *Principal Consultant, Global, Neuro-Insight Pty Ltd*

Peter has worked in the media, advertising and research business for the past 33 years, in a career that has spanned media, client solutions, research and consulting roles. He has specialised in the development of business units that provide consumer research and media insights to a range of global brands. Prior to working with Neuro-Insight, Peter built his career in companies like News Corporation, Nielsen, the Ten Network and the Nine Network.

**Board Term:** 2019 - 2021, 2023 to present



**Paul Ramadge** *Director and International and Alliances Practice Lead, Wells Advisory*

Paul is a noted Australian journalist and knowledge-sector leader. He was Editor-in-Chief of *The Age*, a Vice-Chancellor's Professorial Fellow at Monash University, Director of the Australia-Indonesia Centre and Managing Director of The PLuS Alliance which brings together leading universities to seek solutions to pressing global challenges, including in health and mental health. He is Chair of The Dolphin Research Institute in Victoria.

**Board Term:** 2021 to present



**Professor Steven Moylan** *Clinical Director of Mental Health, Drugs and Alcohol Services, Barwon Health*

Steve is Clinical Director of Mental Health, Drugs and Alcohol Services with Barwon Health and Professor with Deakin University School of Medicine. He has strong interests in medical leadership and governance, in addition to clinical care and research in psychiatry. Steve is Chair of On The Line and a director of The Victorian Collaborative Centre for Mental Health and Wellbeing.

**Board Term:** 2021 to 2022 (Resigned 8/12/2022)



**Maggie Toko** *Assistant Commissioner, Mental Health Complaints Commission*

Maggie is a former CEO of the Victorian Mental Illness Awareness Council (VMIAC), the Victorian peak body for mental health consumers. She has also worked in the areas of homelessness, youth, sexual assault, and drug and alcohol use. Maggie has taught the RMIT Diploma in Mental Health for Indigenous students and been a consumer consultant with Reach Out Southern Mental Health. She started the first Youth Hearing Voices group in Victoria and continues to support and encourage youth leadership. Maggie works within a human rights framework and has a lifelong commitment to ending injustice.

**Board Term:** 2020 to 2023 (Resigned 1/03/2023)

# Financial Report

For the Year Ended 30 June 2023

ABN: 79 174 342 927

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**Mental Health Victoria Limited**  
ABN: 79 174 342 927

# Directors' Report

For the Year Ended 30 June 2023

Your Directors present this report on Mental Health Victoria Limited for the financial year ended 30 June 2023. In order to comply with the provisions of the Australian Charities and Not-for-profits Commission Act 2012 (ACNC Act), the Directors report as follows:

## Directors

The names of each Director during the year and to the date of this report are listed below.

**Mr Damian Ferrie**

**Mr David W Frost**

**Mr Christopher McDermott**

**Mr Tom Dalton**

**Mr Peter Pynta** (appointed 01 May 2023)

**Ms Karenza Louis-Smith**

**Professor Richard Newton**

**Ms Tassia Michaleas**

**Ms Amanda Bond** (appointed 11 May 2023)

**Assoc Prof Simon Stafrace** (appointed 14 May 2023)

**Mr Paul Ramadge** (resigned 04 August 2023)

**Ms Maggie Toko** (resigned 24 March 2023)

**Prof Steve Moylan** (resigned 13 December 2022)



## Objectives

Mental Health Victoria Limited (MHV) is the peak body for mental health and wellbeing in Victoria. Our purpose is to ensure that people living with a mental illness or psychological distress can access effective and appropriate treatment and community support to enable them to participate fully in society.

### The strategic objectives of MHV are:

1. To ensure mental health remains a top priority for federal and state governments so everyone can access the care they need.
2. To expand and diversify our service provision to offer services and products that provide real value for stakeholders and reinforce our sustainability and independence.
3. To build a strong organisation as an enabler to deliver on our purpose and vision.

## Strategy for Achieving the Objectives

### To achieve these objectives MHV will:

- Build our profile as the independent voice for mental health and wellbeing
- Raise the profile and develop the capacity and capability of the lived and living experience and mental health workforce
- Mature and grow our public policy and research programs to achieve national reach and influence
- Diversify our income profile and limit its dependency on any one source of funds
- Provide extensive opportunities for the mental health and wellbeing sector to come together to collaborate and share knowledge
- Ensure a workplace culture that reflects our core values and provides a supportive and cohesive work environment

## Principal Activities

MHV is in constant dialogue with stakeholders across the sector, people with lived and living experience, policymakers, and other experts to develop strategic partnerships, new policy offerings and re-develop its training services to meet sector and broader market needs. The Annual Report outlines the operational activities that will contribute and/or culminate in the achievement of the organisation's strategic objectives.

## Operating Results

The net surplus from continuing operations amounted to \$39,021 (2022: surplus of \$77,454).

## Significant Changes in the State of Affairs

There were no significant changes in the state of affairs of the Company other than those referred to in the accounts and notes thereto.

## Likely Developments

The likely future developments in the operations of the Company are the continuation of the principal activities set out in this report.

## Events subsequent to the end of the reporting period

No matters or circumstances have arisen since the end of the financial year that have significantly affected or may significantly affect the operations of the Company, the result of its operations or the state of affairs of the Company in future financial years.

There have been no material non-adjusting events after the reporting date, nor has any information been received about conditions at reporting date that have not been included in this report.

## Contributions on winding up

In the event of the company being wound up, ordinary members are required to contribute a maximum of \$10 each. Associates of MHV are not required to contribute. The total amount that members of the company are liable to contribute if the company is wound up is \$110, based on 11 current ordinary members.

## Auditor's Independence Declaration

A copy of the auditor's independence declaration as required by Section 307C of the Corporations Act 2001 is set out on page 26.

### On behalf of the Board



**Damian Ferrie**  
(Board Chair)



**Tom Dalton**  
(Chair - Finance, Audit & Risk Committee)

Dated this 1st day of November 2023.



Shepard Webster & O'Neill Audit Pty Ltd  
Certified Practising Accountant, Authorised Audit Company  
ABN: 89 154 680 190

### Auditor's Independence Declaration

To Mental Health Victoria Limited,

In accordance with the requirements of section 60-40 of the *Australian Charities and Not-for-Profits Commission Act 2012*, as lead auditor for the audit of Mental Health Victoria Limited for the year ended 30 June 2023, we declare that, to the best of our knowledge and belief, there have been:

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

Dated at Frankston on the 1<sup>st</sup> day of November 2023

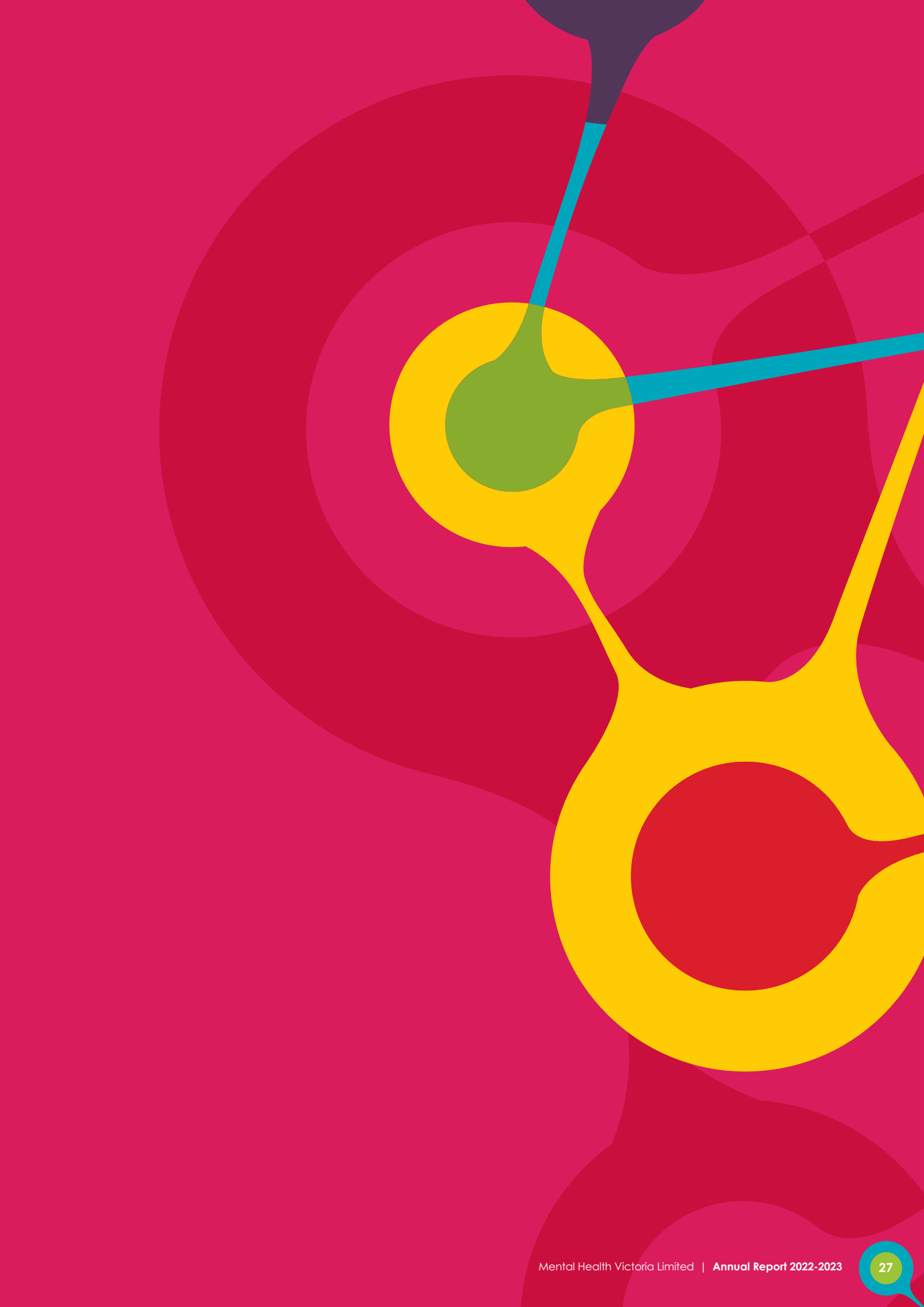
SHEPARD WEBSTER & O'NEILL AUDIT PTY LTD  
Certified Practising Accountant  
Authorised Audit Company No 415478  
31 Beach Street Frankston 3199, PO Box 309 Frankston Victoria 3199  
Telephone (03) 9781 2633 – Fax (03) 9781 3073  
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DAVID A SZEPFALUSY  
DIRECTOR



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Standards Legislation



## Statement of Profit or Loss & Other Comprehensive Income

For the Year Ended 30 June 2023

|  | Note | 2023             | 2022             |
|--|------|------------------|------------------|
| <b>Continuing Operations</b>                                       |      | \$               | \$               |
| <b>Income</b>  |      |                  |                  |
| Grant Funding  |      | 2,292,861        | 2,198,027        |
| Training & Conference income                                       |      | 281,620          | 362,204          |
| Membership Fees  |      | 139,191          | 124,986          |
| Sponsorship  |      | 10,909           | 15,000           |
| Interest Received  |      | 7,782            | 1,806            |
| Donations  |      | 1,348            | 1,134            |
| Sundry Income  |      | 805              | -                |
| Gain / (Loss) on Disposal of Assets                                |      | 423              | 18,827           |
| <b>Total Income</b>  |      | <b>2,734,939</b> | <b>2,721,984</b> |
| <b>Less Expenses</b>   |      |                  |                  |
| Salaries & Related Costs   |      | 1,639,940        | 2,011,451        |
| Training & Conference costs  |      | 544,757          | 288,982          |
| Rent & Overhead Costs  |      | 117,391          | 135,060          |
| General Expenses   |      | 184,593          | 92,111           |
| Policy Costs   |      | 48,162           | 47,862           |
| Project Fees   |      | 105,817          | -                |
| IT Costs   |      | 30,924           | 45,116           |
| Depreciation & Amortisation  |      | 24,334           | 23,948           |
| <b>Total Expenses</b>  |      | <b>2,695,918</b> | <b>2,644,530</b> |
| <b>Operating Surplus / (Deficit) From Continuing Operations</b>    |      | <b>39,021</b>    | <b>77,454</b>    |
| <b>Other Comprehensive Income</b>                                  |      |                  |                  |
| Items that may be reclassified subsequently to profit or loss      |      | -                | -                |
| Items that will not be reclassified subsequently to profit or loss |      | -                | -                |
| <b>Total Comprehensive Income</b>                                  |      | <b>39,021</b>    | <b>77,454</b>    |

# Statement of Financial Position

As at 30 June 2023

|                                      | Note | 2023             | 2022             |
|--------------------------------------|------|------------------|------------------|
|                                      |      | \$               | \$               |
| <b>Current Assets</b>                |      |                  |                  |
| Cash and Cash Equivalents            | 2    | 4,059,119        | 3,226,886        |
| Trade & Other Receivables            | 3    | 5,989            | 40,149           |
| Other Assets                         | 4    | 1,306            | 103,752          |
| <b>Total Current Assets</b>          |      | <b>4,066,414</b> | <b>3,370,787</b> |
| <b>Non-Current Assets</b>            |      |                  |                  |
| Security Deposits                    | 5    | 22,717           | 22,717           |
| Plant & Equipment                    | 6    | 7,973            | 25,036           |
| <b>Total Non-Current Assets</b>      |      | <b>30,690</b>    | <b>47,753</b>    |
| <b>Total Assets</b>                  |      | <b>4,097,104</b> | <b>3,418,540</b> |
| <b>Current Liabilities</b>           |      |                  |                  |
| Trade & Other Payables               | 7    | 287,345          | 283,980          |
| Grants in Advance                    |      | 2,743,493        |                  |
| Provisions                           | 8    | 34,164           | 302,860          |
| <b>Total Current Liabilities</b>     |      | <b>3,065,002</b> | <b>2,426,755</b> |
| <b>Non-Current Liabilities</b>       |      |                  |                  |
| Employee Entitlements                | 8    | 1,296            | 129,687          |
| <b>Total Non-Current Liabilities</b> |      | <b>1,296</b>     | <b>129,687</b>   |
| <b>Total Liabilities</b>             |      | <b>3,066,298</b> | <b>2,426,755</b> |
| <b>Net Assets</b>                    |      | <b>1,030,806</b> | <b>991,785</b>   |
| <b>Equity</b>                        |      |                  |                  |
| Retained Earnings                    |      | 1,030,806        | 991,785          |
| <b>Total Equity</b>                  |      | <b>1,030,806</b> | <b>991,785</b>   |

## Statement of Changes in Equity

For the Year Ended 30 June 2023

|  | Note | 2023             | 2022           |
|--|------|------------------|----------------|
| Equity   |      | \$               | \$             |
| <b>Retained Earnings</b>                                 |      |                  |                |
| Opening Balance  |      | 991,785          | 914,331        |
| Operating Surplus / (Deficit) From Continuing Operations |      | 39,021           | 77,454         |
| Other Comprehensive Income                               |      | -                | -              |
| <b>Closing Balance</b>                                   |      | <b>1,030,806</b> | <b>991,785</b> |
| <b>Total Equity</b>                                      |      | <b>1,030,806</b> | <b>991,785</b> |

## Statement of Cash Flows

For the Year Ended 30 June 2023

|  | Note      | 2023             | 2022             |
|--|-----------|------------------|------------------|
|  |           | \$               | \$               |
| <b>Cash Flows From Operating Activities</b>                  |           |                  |                  |
| Receipts from Members and Customers                          |           | 2,863,763        | 2,720,249        |
| Payments to Suppliers and Employees                          |           | (2,032,041)      | (1,909,412)      |
| Interest Received  |           | 7,782            | 1,806            |
| <b>Net Cash Provided By / (Used In) Operating Activities</b> | <b>9b</b> | <b>839,504</b>   | <b>812,643</b>   |
| <b>Cash Flows From Investing Activities</b>                  |           |                  |                  |
| Payments for Property, Plant & Equipment (Net)               |           | (7,271)          | (13,422)         |
| <b>Net Cash Provided By / (Used In) Operating Activities</b> |           | <b>(7,271)</b>   | <b>(13,422)</b>  |
| <b>Net Increase / (Decrease) in Cash Held</b>                |           | <b>832,233</b>   | <b>799,221</b>   |
| <b>Cash at the Beginning of Financial Year</b>               |           | <b>3,226,886</b> | <b>2,427,665</b> |
| <b>Cash at the End of Financial Year</b>                     | <b>9a</b> | <b>4,059,119</b> | <b>3,226,886</b> |

# Notes to the Financial Statements

For the Year Ended 30 June 2023

## Note 1 – Summary of Significant Accounting Policies

The principal accounting policies adopted in the preparation of the financial statements are set out below. These policies have been consistently applied to all the years presented, unless otherwise stated.

### New or Amended Accounting Standards and Interpretations Adopted

The Company has adopted all of the new or amended Accounting Standards and Interpretations issued by the Australian Accounting Standards Board ('AASB') that are mandatory for the current reporting period.

The adoption of these Accounting Standards and Interpretations did not have any significant impact on the financial performance or position of the Company.

### Basis of Preparation

In the Directors' opinion, the Company is not a reporting entity because there are no users dependent on general purpose financial statements.

These are special purpose financial statements that have been prepared for the purposes of complying with the *Australian Charities and Not-for-profits Commission Act 2012*. The Directors' have determined that the accounting policies adopted are appropriate to meet the needs of the members of Mental Health Victoria Limited.

These financial statements have been prepared in accordance with the recognition and measurement requirements specified by the Australian Accounting Standards and Interpretations issued by the Australian Accounting Standards Board ('AASB') and the disclosure requirements of AASB 101 'Presentation of Financial Statements', AASB 107 'Statement of Cash Flows', AASB 108 'Accounting Policies, Changes in Accounting Estimates and Errors', AASB 1048 'Interpretation of Standards' and AASB 1054 'Australian Additional Disclosures', as appropriate for not-for-profit oriented entities, with the exception of the following, where the Company has elected not to apply the recognition:

- AASB 15 'Revenue from contracts with customers' & AASB 1058 'Income of Not-for-Profit Entities'; and
- AASB 16 'Leases'.

### Historical cost convention

The financial statements have been prepared under the historical cost convention, except for, where applicable, the revaluation of financial assets and liabilities at fair value through profit or loss, financial assets at fair value through other comprehensive income, investment properties, certain classes of property, plant and equipment and derivative financial instruments.

### Critical accounting estimates

The preparation of the financial statements requires the use of certain critical accounting estimates. It also requires Management to exercise its judgement in the process of applying the Company's accounting policies. The areas involving a higher degree of judgement or complexity, or areas where assumptions and estimates are significant to the financial statements, are disclosed in Note 1 (n).

### (a) Comparative Figures

When required by Accounting Standards, comparative figures have been adjusted to conform to changes in presentation for the current financial year.

### (b) Taxation

The Company is exempt under Division 50 of the Income Tax Assessment Act 1997 as a non-profit organisation. As such, no allowance has been made for Income Tax.

# Notes to the Financial Statements

## Note 1 - Summary of Significant Accounting Policies (Continued)

### (c) Property, Plant and Equipment (PPE)

Plant and equipment are measured on the cost basis less depreciation and any impairment losses.

The carrying amount of plant and equipment is reviewed annually by Directors 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 that will be received from the assets' employment and subsequent disposal. The expected net cash flows have been discounted to their present values in determining recoverable amounts.

In the event the carrying amount of plant and equipment is greater than the recoverable amount, the carrying amount is written down immediately to the estimated recoverable amount. A formal assessment of recoverable amount is made when impairment indicators are present (refer to Note 1 (d) for details of impairment).

Plant and equipment that have been contributed at no cost, or for nominal cost, are recognised at the fair value of the asset at the date it is acquired. Leasehold improvements is carried at cost less, where applicable, any accumulated depreciation.

### Depreciation

The depreciable amount of all fixed assets including buildings and capitalised lease assets, but excluding freehold land, is depreciated on a straight-line basis over the asset's useful life to the Company commencing from the time the asset is held ready for use.

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

Website development costs are amortised over the useful life of the website commencing from the date when the website is ready for use.

The depreciation rates used for each class of depreciable assets are:

| Class of Fixed Assets         | Depreciation Rate |
|-------------------------------|-------------------|
| Office, Furniture & Equipment | [10 - 33%]        |
| Leasehold Improvements        | [20 - 50%]        |

The assets' residual values and useful lives are reviewed, and adjusted if appropriate, at the end of each reporting period.

An asset's carrying amount is written down immediately to its recoverable amount if the asset's carrying amount is greater than its estimated recoverable amount.

Gains and losses on disposals are determined by comparing proceeds with the carrying amount.

These gains or losses are recognised in results from Continuing Operations in the period in which they arise. When revalued assets are sold, amounts included in the revaluation surplus relating to that asset are transferred to retained surplus.


### Non-compliance with Accounting Standards

During the year, and in prior years, various assets have been purchased for projects by using project funding. In such cases, a provision for Equipment Reserve has been established, which records the written down value of the assets that have been funded by project income. As the fixed assets are depreciated, an amount is recognised as revenue in the Statement of Profit or Loss and Other Comprehensive Income to reduce the provision to the new written down value of the funded assets.

### (d) Impairment of Assets

At the end of each reporting period, the Company reviews the carrying amounts of its tangible and intangible assets to determine whether there is any indication that those assets have been impaired. If such an indication exists, the recoverable amount of the asset, being the higher of the asset's fair value less costs of disposal and value in use, is compared to the asset's carrying amount. Any excess of the asset's carrying amount over its recoverable amount is recognised immediately in results from Continuing Operations.





Where the future economic benefits of the asset are not primarily dependent upon the asset's ability to generate net cash inflows and when the Company would, if deprived of the asset, replace its remaining future economic benefits, value in use is determined as the depreciated replacement cost of an asset. Where it is not possible to estimate the recoverable amount of a class of asset, the Company estimates the recoverable amount of the cash-generating unit to which the asset belongs.

Where an impairment loss on a revalued asset is identified, this is debited against the revaluation surplus in respect of the same class of asset to the extent that the impairment loss does not exceed the amount in the revaluation surplus for that same class of asset.

#### **(e) Cash and Cash Equivalents**

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

#### **(f) Trade and Other Receivables**

Accounts receivable and other debtors include amounts due from customers and any outstanding grant receipts. 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.

Accounts receivable are initially recognised at fair value and subsequently measured at amortised cost using the effective interest method, less any provision for impairment. Refer to Note 1(d) for further discussion on the determination of impairment losses.

#### **(g) Revenue**

All grant income is recorded without assessing whether a contract is enforceable and whether it has sufficiently specific performance obligations. Accordingly, this does not comply with AASB 15 'Revenue from Contracts with Customers', or AASB 1058 'Income of Not-for-Profit Entities'. Instead the Company generally recognises revenue across the life of a program based on expenses incurred in running the program. The following is also how the Company recognises revenue, which is consistent with prior years.

Non-reciprocal grant revenue is recognised in the Statement of Profit or Loss and Other Comprehensive Income when the Company obtains control of the grant, it is probable that the economic benefits gained from the grant will flow to the Company and the amount of the grant can be measured reliably.

If conditions are attached to the grant which must be satisfied before it is eligible to receive the contribution, the recognition of the grant as revenue will be deferred until those conditions are satisfied.

When grant revenue is received whereby the Company incurs an obligation to deliver economic value directly back to the contributor, this is considered a reciprocal transaction and the grant revenue is recognised in the Statement of Financial Position as a liability until the service has been delivered to the contributor, otherwise the grant is recognised as income on receipt.

The Company receives non-reciprocal contributions of assets from the government and other parties for zero or a nominal value. These assets are recognised at fair value on the date of acquisition in the Statement of Financial Position, with a corresponding amount of income recognised in the Statement of Profit or Loss and Other Comprehensive Income.

Donations and bequests are recognised as revenue when received.

Interest revenue is recognised when received.

Revenue from the rendering of a service is recognised upon the delivery of the service to the customers.

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

#### **(h) 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 Company during the reporting period, which remain unpaid. The balance is recognised as a current liability with the amounts normally paid within 30 days of recognition of the liability.

# Notes to the Financial Statements

## Note 1 - Summary of Significant Accounting Policies (Continued)

### (i) Goods and Services Tax (GST)

Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Taxation Office (ATO). Receivables and 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 assets and liabilities statement.

### (j) Employee Provisions

#### Short-term employee benefits

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

Short-term employee benefits are measured at the (undiscounted) amounts expected to be paid when the obligation is settled.

The Company obligations for short-term employee benefits such as wages, salaries and sick leave are recognised as part of accounts payable and other payables in the Statement of Financial Position.

Contributions are made by the Company to an employee superannuation fund and are charged as expenses when incurred.

### (k) Provisions

Provisions are recognised when the Company 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.

### (l) Leases

Payment for the lease or rental of fixed assets where substantially all of the risks and rewards of ownership of the asset remain with the lessor, are expensed when incurred (and the asset is not recognised on the balance sheet). The contractual commitment for the use of this type of asset (generally a rental or lease agreement) is not recognised as a liability. As such, recognition and measurement requirements of AASB 16 'Leases' are not complied with.

Leases of property plant and equipment, where substantially all the risks and benefits incidental to the ownership of the asset (but not the legal ownership) are transferred to the Company, are classified as finance leases.


Finance leases are capitalised by recording an asset and a liability at the lower of the amounts equal to the fair value of the leased property or the present value of the minimum lease payments, including any guaranteed residual values. Lease payments are allocated between the reduction of the lease liability and the lease interest expense for that period.

Leased assets are depreciated on a straight-line basis over the shorter of their estimated useful lives or the lease term. 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.

### (m) Current and non-current classification

Assets and liabilities are presented in the Statement of Financial Position based on current and noncurrent classification.

An asset is classified as current when: it is either expected to be realised or intended to be sold or consumed in the Company's normal operating cycle; it is held primarily for the purpose of trading; it is expected to be realised within 12 months after the reporting period; or the asset is cash or cash equivalent unless restricted from being exchanged or used to settle a liability for at least 12 months after the reporting period. All other assets are classified as non-current.



A liability is classified as current when: it is either expected to be settled in the Company's normal operating cycle; it is held primarily for the purpose of trading; it is due to be settled within 12 months after the reporting period; or there is no unconditional right to defer the settlement of the liability for at least 12 months after the reporting period. All other liabilities are classified as non-current.

Deferred tax assets and liabilities are always classified as non-current.

### **(n) Critical Accounting judgements, estimates and assumptions**

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the reported amounts in the financial statements. Management continually evaluates its judgements and estimates in relation to assets, liabilities, contingent liabilities, revenue and expenses. Management bases its judgements, estimates and assumptions on historical experience and on other various factors, including expectations of future events, management believes to be reasonable under the circumstances. The resulting accounting judgements and estimates will seldom equal the related actual results.

The judgements, estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities (refer to the respective notes) within the next financial year are discussed below.

#### *Estimation of useful lives of assets*

The Company determines the estimated useful lives and related depreciation and amortisation charges for its property, plant and equipment and finite life intangible assets. The useful lives could change significantly as a result of technical innovations or some other event. The depreciation and amortisation charge will increase where the useful lives are less than previously estimated lives, or technically obsolete or non-strategic assets that have been abandoned or sold will be written off or written down.

#### *Impairment of non-financial assets other than goodwill and other indefinite life intangible assets*

The Company assesses impairment of non-financial assets other than goodwill and other indefinite life intangible assets at each reporting date by evaluating conditions specific to the Company and to the particular asset that may lead to impairment. If an impairment trigger exists, the recoverable amount of the asset is determined. This involves fair value less costs of disposal or value-in-use calculations, which incorporate a number of key estimates and assumptions.

#### *Employee benefits provision*

As discussed in Note 1, the liability for employee benefits expected to be settled more than 12 months from the reporting date are recognised and measured at the present value of the estimated future cash flows to be made in respect of all employees at the reporting date. In determining the present value of the liability, estimates of attrition rates and pay increases through promotion and inflation have been taken into account.

# Notes to the Financial Statements

## Notes to the Financial Statements

For the Year Ended 30 June 2023

|  | 2023             | 2022             |
|--|------------------|------------------|
|  | \$               | \$               |
| <b>2 Cash and Cash Equivalents Current</b>   |                  |                  |
| Cash at Bank   | 4,059,119        | 3,226,886        |
|  | <b>4,059,119</b> | <b>3,226,886</b> |
| <b>3 Trade &amp; Other Receivables Current</b>                                     |                  |                  |
| Trade Debtors  | 2,597            | 16,844           |
| Sundry Debtors   | 3,392            | 23,305           |
|  | <b>5,989</b>     | <b>40,149</b>    |
| <b>4 Other Assets Current</b>  |                  |                  |
| Prepayments  | 1,306            | 100,109          |
| Refundable Deposits  | -                | 3,643            |
|  | <b>1,306</b>     | <b>103,752</b>   |
| <b>5 Security Deposit Non-Current</b>  |                  |                  |
| This security deposit is held as a guarantee for the rental of the office premises | 22,717           | 22,717           |
|  | <b>22,717</b>    | <b>22,717</b>    |
| <b>6 Plant and Equipment Non-Current</b>   |                  |                  |
| Plant and equipment at cost  | 89,799           | 86,929           |
| Less: Accumulated Depreciation   | (81,826)         | (62,719)         |
|  | <b>7,973</b>     | <b>24,210</b>    |
| Intangible assets at cost  | 50,943           | 50,943           |
| Less: Accumulated Amortisation   | (50,943)         | (50,117)         |
|  | -                | <b>826</b>       |
| <b>Total Plant and Equipment</b>   | <b>7,973</b>     | <b>25,036</b>    |
| <b>7 Trade &amp; Other Payables Current</b>  |                  |                  |
| GST, FBT and PAYG Payable  | 178,663          | 193,367          |
| Trade Creditors and Accrued Expenses   | 76,580           | 90,613           |
| Superannuation Payable   | 26,381           | -                |
| Corporate Credit Card  | 5,721            | -                |
|  | <b>287,345</b>   | <b>283,980</b>   |

|  | 2023          | 2022           |
|--|---------------|----------------|
|  | \$            | \$             |
| <b>8 Employee Entitlements Current</b> |               |                |
| Annual Leave                           | 34,164        | 173,173        |
| Long Service Leave                     | -             | 129,687        |
|  | <b>34,164</b> | <b>302,860</b> |
| <b>Non Current</b>                     |               |                |
| Long Service Leave                     | 1,296         | -              |
|  | <b>1,296</b>  | <b>-</b>       |
| <b>Total Employee Entitlements</b>     | <b>35,460</b> | <b>302,860</b> |

## 9 Notes to the Statement of Cash Flows

### (a) Reconciliation of Cash

|              |           |           |
|--------------|-----------|-----------|
| Cash at Bank | 4,059,119 | 3,226,886 |
|--------------|-----------|-----------|

### (b) Reconciliation of Cash Flows from Operations with Operating Surplus

|  |        |        |
|--|--------|--------|
| Operating Surplus From Continuing Operations | 39,021 | 77,454 |
|--|--------|--------|

### Non Cash Flows in Operating Surplus

|              |        |        |
|--------------|--------|--------|
| Depreciation | 24,334 | 23,948 |
|--------------|--------|--------|

### Changes in Assets and Liabilities

|  |                |                |
|--|----------------|----------------|
| Decrease in Trade and Other Receivables      | 136,606        | 71             |
| (Decrease) in Trade and Other Payables       | 906,943        | 762,258        |
| (Decrease)/Increase in Employee Entitlements | (267,400)      | (51,088)       |
|  | <b>839,504</b> | <b>812,643</b> |

## 10 Lease Commitments

### Being for Rent of Office Premises & Photocopier

Operating lease commitments neither capitalised in the accounts nor treated as ROU assets and lease Payable:

|  |              |               |
|--|--------------|---------------|
| - not later than one year                        | 6,891        | 82,695        |
| - later than one year but not later than 5 years | -            | 6,891         |
|  | <b>6,891</b> | <b>89,586</b> |

The property lease (Part Level 6 of the Building situated at 136 Exhibition Street, Melbourne, Victoria 3000) expires on 31 July 2023.

As leases have not been prepared to comply with accounting standards measurement and recognition, they remain 'off-balance sheet' and are consequently disclosed in this note as a commitment.

## 11 Remuneration of the Auditor

|                                   |              |              |
|-----------------------------------|--------------|--------------|
| Audit of the Financial Statements | 7,350        | 7,000        |
| Other Services                    | -            | -            |
|                                   | <b>7,350</b> | <b>7,000</b> |

# Notes to the Financial Statements

## 12 Members' Guarantee

On 27th June 2023, a Special General Meeting was held to pass a motion to adopt a new constitution which names the directors as the only members of the company. The historical members are now deemed as associates.

The Company is incorporated under the *Corporations Act 2001* and is a company limited by guarantee. If the Company is wound up, the constitution states that each member is required to contribute a maximum of \$10 towards meeting any outstanding obligations of the Company. At 30 June 2023, the members of the organisation were the 11 Members.

## 13 Events subsequent to the end of the reporting period

No matters or circumstances have arisen since the end of the financial year that have significantly affected or may significantly affect the operations of the Company, the result of its operations or the state of affairs of the Company in future financial years.

There have been no material non-adjusting events after the reporting date, nor has any information been received about conditions at reporting date that have not been included in this report.

## 14 Economic Dependence and Going Concern

The Board and Management have identified funding diversity as a key priority for the organisation as it realises its strategic plan. The Company has been historically dependent on Victorian Government core grant funding for a significant portion of its income. This income is supplemented by affiliation fees, event revenue (e.g., from conferences), and training services. As part of its continued focus on sustainability, the Board and Management continue to develop opportunities for revenue diversification and growth in line with the Mental Health Victoria purpose and strategy. Mental Health Victoria Ltd is in a position whereby it can continue to operate as a going concern after 30 June 2023.

## 15 Company details

The registered office and principal place of business is:

Level 6, 136 Exhibition Street,  
Melbourne Victoria 3000.

PO Box 18032 Collins Street East  
Melbourne Victoria 8003.

# Directors' Declaration

For the Year Ended 30 June 2023

The Directors have determined that the Company is not a reporting entity. The Directors have determined that these special purpose financial statements should be prepared in accordance with the accounting policies described in Note 1 to the financial statements.

In the opinion of the Directors, the financial report as set out on pages 24 to 41:

1. Give a true and fair view of the financial position of Mental Health Victoria Limited as at 30 June 2023 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 financial statements and the requirements of the *Australian Charities and Not-for-profits Commission Act 2012*; and
2. At the date of this statement, there are reasonable grounds to believe that Mental Health Victoria Limited will be able to pay its debts as and when they fall due.

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



**Damian Ferrie** (Board Chair)



**Tom Dalton** (Chair - Finance, Audit & Risk Committee)

Dated this 1st day of November 2023.



Shepard Webster & O'Neill Audit Pty Ltd  
Certified Practising Accountant, Authorised Audit Company  
ABN: 89 154 680 190

**Independent Audit Report  
to the Members of Mental Health Victoria Limited  
ABN: 79 174 342 927**

**Report on the Audit of the Financial Report**

**Opinion**

We have audited the financial report of Mental Health Victoria Limited, 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 Statement of Cash Flows for the year then ended, notes comprising a summary of significant accounting policies and other explanatory information, and the Directors' declaration.

In our opinion, the accompanying financial report Mental Health Victoria Ltd has been prepared in accordance with Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012*, including:

- (i) giving a true and fair view of the Company's financial position as at 30 June 2023 and of its performance for the year then ended; and
- (ii) complying with Australian Accounting Standards to the extent described in Note 1, and Division 60 of the *Australian Charities and Not-for-profits Commission Regulation 2013*.

**Basis for Opinion**

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

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

**Emphasis of Matter – Basis of Accounting**

We draw attention to Note 1 to the financial report, which describes the basis of accounting. The financial report has been prepared to assist the Company to meet the requirements of the *Australian Charities and Not-for-profits Commission Act 2012*. As a result, the financial report may not be suitable for another purpose. Our opinion is not modified in respect of this matter.

**Information Other than the Financial Report and Auditor's Report Thereon**

The Directors of the Company is responsible for the other information. The other information comprises the information included in the Company's annual report for the year ended 30 June 2023 but does not include the financial report and our auditor's report thereon. Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon. In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

**Responsibilities of the Directors for the Financial Report**

The Directors of the Company 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 requirements of the *Australian Charities and Not-for-profits Commission Act 2012* and is appropriate to meet the needs of the members. The Directors' responsibility also includes such internal control as the Directors 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.



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Shepard Webster & O'Neill Audit Pty Ltd  
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**Independent Audit Report (Continued)  
to the Members of Mental Health Victoria Limited  
ABN: 79 174 342 927**

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

The Directors of the Company are responsible for overseeing the Company's financial reporting process.

**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 the 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 the 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 the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Company's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Directors.
- Conclude on the appropriateness of the Directors' 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 Company'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 Company 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 Directors 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.



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**Independent Audit Report (Continued)  
to the Members of Mental Health Victoria Limited  
ABN: 79 174 342 927**

Dated at Frankston on the 1<sup>st</sup> day of November 2023

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DAVID A SZEPFALUSY  
DIRECTOR



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Mental Health Victoria acknowledges the Aboriginal and Torres Strait Islander peoples as traditional custodians of the land on which it operates. We pay respect to Elders past, present and emerging, and value the rich history, unbroken culture and ongoing connection of Aboriginal and Torres Strait Islander people to country.

Mental Health Victoria acknowledge those people touched directly and indirectly by mental health vulnerabilities, trauma, suicide and neurodiversity, and their families, kin, friends and carers. We acknowledge the ongoing contribution of those people in the mental health sector.

Mental Health Victoria values diversity. We advocate for a safe and inclusive society for all people, regardless of their ethnicity, faith, disability, sexuality, or gender identity, and uphold these values in all we do.



# MentalHealth Victoria

*Collaboration • Knowledge • Leadership*



# MentalHealth Victoria

*Collaboration • Knowledge • Leadership*

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**Contact:**

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