



ANNUAL REPORT 2012-13

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GOALS

To provide accountable broad representation that is informed, valued and supported by the Network;

To provide proactive systemic advocacy from a Consumer perspective;

To work collaboratively with other organisations and mental health Consumers;

To create and build a supportive environment within the organisation and outside which is empowering to mental health Consumers; and

To govern the Network in a responsible and sustainable way.

BOARD 2012-13

Julie McMahon	Chair
Ben Matthews	Deputy Chair
Jennifer Nixon	Secretary
Peter Dwyer	Treasurer
Vicki da Silva	Ordinary Member (to June 2013)
Kerry Fry	Ordinary Member
Phillip Green	Ordinary Member
Charmaine Honey-Rose	Ordinary Member
Jacqui Price	Ordinary Member
Michael Schmohl	Ordinary Member (until September 2013)
Keah Woodgate	Ordinary Member (until June 2013)
Andrew Fish	Ordinary Member (from July 2013)
Jon Kroschel	Ordinary Member (from July 2013)

STAFF

Dalane Drexler	Executive Officer
Amanda Davies	Program Manager
Stephanie Shu-jen	Community Education Coordinator (to 21/01/13)
Susan Corbett	CRP Coordinator (to 08/02/13)
Purity Goj	CRP Coordinator (from 27/02/13)
Nith Mang	Program Administrator (contract from 21/05/13)
Valan Phoenix	Administration Officer (from 09/07/12)
Kari Griffiths	Administration Officer (contract from 15/04/13)
Sophie Maria	Administration Officer A/g (to 06/07/12)

VISION

More recovery for more people

MISSION

With us not to us – facilitating an environment of collaboration and mutual respect within the mental health sector wherein mental health consumers are empowered to represent, advocate and engage in policy dialogue.

VALUES

Our values reflect our guiding principles of social justice, integrity, respect, empowerment and compassion. We view our values as essential nutrients for the health of our organisation. Our values reflect what staff, committee and members expect of each other in their work together and how we work with others in our representative, advocacy and collaborative capacities.

CHAIR'S REPORT

Most, if not all of us mental health consumers have experienced tremendous suffering and injustice because of the mental health system, and even worse, by individuals within that system. Some has been unintentional due to not listening and learning from the consumer voice, but what has hurt the most is willful ignorance from people who insist they know better and still treat us unkindly, even cruelly. Because of the imbalance of power due to the negatively perceived status of mental health consumers, some people in authority such as mental health workers have in the past and still do, get away with this. I, and numerous other mental health consumers I know, have experienced this, even in recent times. As is so often said within mental health circles, we may forget who you are or what you did, but we will never forget how you made us feel.

We have lost homes, possessions, family, friends, pets, careers, income and emotional growth, as well as years or even decades of our lives. There is no amount of compensation which could make up for what we have been through (although it would certainly help!).

Nelson Mandela is a man who, as a humanitarian activist against racism, was wrongly accused of murder then unjustly imprisoned under torturous conditions for decades, in order to stop his successful activism against apartheid. He sustained permanent damage to his health including lung disease and partial blindness. He had every right to seek retribution for himself and others, or at least compensation. He chose a better way, of cooperation with his former oppressors in order to ensure a more equitable society for both the just and the unjust, in the hope that the unjust would learn from the just.

The mental health profession is increasingly consulting mental health consumers in the decisions that affect them. For example, new service provision such as the second Secure Mental Health Unit Model of Care and Facility Planning. Their attitudes have been changing to realise that mental health consumers do make significant and invaluable contributions from their unique perspectives.

This gradual process sometimes seems too slow, but mental health consumers are increasingly influencing government policy and procedure to ensure a more therapeutic society for themselves and others. Try not to get disheartened in persevering. For we are seeing more and more results which will one day lead to us being the key stakeholders in the mental health system. After all, the government vision is for a consumer driven, consumer led mental health service by the year 2020.

I would like to thank Deputy Chair Ben Matthews for so capably standing in for me as Chair when needed. I have learnt a lot from his management skills and from his unique way of positively interacting with consumers. I have also benefited tremendously from Jon Kroschel's lifetime of experience as a grass roots mental health consumer advocate. I was saddened by Michael Schmohl's resignation from the Board as his contribution behind the scenes was very useful. I also miss Michael's adorable Assistance Dog - Dozer. I also appreciated Jacqui Price's innovative and compassionate advice. Thank you to all the other Board members, listed at the front of this publication, for serving on the Board, especially Vicki da Silva and Keah Woodgate who unfortunately had to resign before the end of their term. I am grateful to the office staff, especially Dalane, Amanda, Purity and Val, for their support and tolerance.

Julie McMahon

EXECUTIVE OFFICER'S REPORT

As has been the case in previous years, 2012-13 was an eventful and productive financial year at the Network.

I would like to take this opportunity to thank this year's Board members who effectively governed the organisation. Regular attendance at Board meetings, plenty of fruitful and constructive discussion, and a general willingness to play such an important role all led to positive results at the Network. In particular, my thanks go to Julie McMahon and Ben Matthews who worked collaboratively at the Network's helm to ensure communication was clear and the Network was faring well under effective leadership.

A special acknowledgement goes out to the Network's team of hard working, dedicated staff. Amanda Davies (Program Manager) continued to be an effective lead staffer whose knowledge, experience and patience is well received and appreciated by all at the Network. The Consumer Representative Program Coordinator role again underwent some change during the year, with Susan Corbett moving on to full time employment elsewhere. We were also very sad to see Stephanie Shu-jen make the move interstate in January from her role as Community Education Coordinator. This did however open the way for an adjustment to the team to bring the education and volunteer programs back together following three years of separation. Purity Goj joined the team in February to take up this combined role and has so far proven a worthy asset at the Network. In early July Valan Phoenix was employed in the role of Administration Officer following Keah Woodgate's earlier departure. For part of the year Val undertook a volunteer opportunity overseas so for that brief period we were pleased to welcome Kari Griffiths who provided excellent relief during his absence. In May a new position was created to provide administration support to the program coordinators, and Nith Mang was employed in this role on a contract basis to assist us with properly scoping the needs of this role into the future.

Throughout the year the Board and staffing team have worked hard towards achieving the Network's goals within the Strategic Plan 2010-13. Some of the many ways this has been achieved are:

Priority 1: Build and sustain organisational capacity at a staff and committee level

The Network's internal policies have been under a constant state of review, with one of more new or revised policies endorsed at each Board meeting. This process will continue as part of our ongoing quality improvement goals. In particular, the suite of CRP policies and procedures that were created late in the last financial year are working effectively to assist our volunteers and coordinators alike.

The Constitution which was reviewed and revised in October 2011 is working very well to date, with Board members, staff and members alike reporting that this document is clear, consistent and easily applied - as any good constitution should be.

As outlined above, change has taken place within the Network's key roles. The CRP Coordinator duty statement was revised to incorporate the training roles, and a duty statement created for the new Program Administrator position.

Priority 2: Grow the membership of the Network

The Network's membership continued to grow with 259 primary members during the period, as well as 46 associate members. We are keen to see these numbers continue

to increase and welcome new members at any time who are then able to access the range of information and supports the Network has to offer.

Throughout the year, our main source of increasing new culturally and linguistically diverse memberships was through the ART course where we have a good proportion of consumers from CALD backgrounds participating. Participants of the course become members of the Network and to date a number of CALD ART graduates have become Consumer Representatives, while others participate in other ways such as forums and attending Drop-In.

Following the introduction of our new website people are able to apply for membership online. This system is rarely used by consumers who tend to attend for Drop-In or training and complete hard copy membership forms, however it is more frequently used by people and organisations seeking associate membership.

The new membership forms that were created around mid-2012 are working well. They include spaces for new members to identify their areas of interest and communication preferences. The membership database keeps clear documentation for members in a private and confidential manner that ensures, as far as possible, that members receive all appropriate information they wish to receive.

Members meetings have been held in the form of the Peer Roles Working Group. Attendance at these group meetings varies however even when we have small numbers, useful discussion is always held.

Priority 3: Grow, promote and support the Consumer representative program

Over the past year or so a strong framework has been developed to provide appropriate supports and development opportunities for Consumer Representatives. This includes the full suite of CRP policies which was rounded off by the CRP Mentoring Policy in February. Please see the attached CRP Report for further information on the CRP.

The CRP framework is working very well to date with monthly recruitment and appointments made through the CRP Steering Committee.

Wendy Kipling has approached the Network and would like to work closely with us throughout the design and implementation of the NDIS, known by the end of the financial year as 'DisabilityCare'.

Further information relating to the work of the CRP and policy and projects program can be found in the respective reports within this annual report.

Priority 4: Develop outreach and collaboration

The Network had high hopes of commencing site visits within the ACT's bed-based mental health facilities during the financial year. This was originally scheduled to begin in February however due to changes in staffing both at the Network and in ACT Health the start date has been postponed and is expected to commence in the next financial year.

The Network recently attended the MHCC/MHCA National Mental Health State Consultation Workshop at Rydges Capital Hill. We were well represented by Amanda, Purity, David Lovegrove, Michael Schmohl and me and the day was full of very solid discussion which should lead to positive results.

I participated in selection panels for three different jobs on behalf of the Network and Consumers. The first was the Operational Director of ACT wide mental health services - for which Bruna Aloisi was the successful candidate. The second and third were the Research Fellow (Consumer) and Research Assistant (Carer) at the ACT Mental Health Consumer and Carer Research Unit based at the ANU. I am pleased to report that both candidates unanimously selected for appointment are Network members - Dr Michelle Banfield as the Research Fellow and Ms Aine Tierney as Research Assistant. We are very pleased with this results overall.

A list of events and opportunities Network Board members, staff and volunteers have attended is detailed later in this document.

This of course brings us to the end of the 2010-13 strategic plan and at June 30 processes were nearing completion for the development of the 2013-16 Strategic Plan. The new document sees the four priority areas narrowed to three key priorities:

Grow and strengthen advocacy grounded in consumer lived experience;
Increase, engage and support the membership; and
Further develop organisational capacity.

I would like to take this opportunity to thank Cathy Moore who facilitated the Board and staff planning day to ensure positive outcomes and a pleasant day was had by all.

It has been my pleasure to be with the Network for another year and I look forward to my work with the Board, staff and members over the coming year.



Dalane Drexler
Executive Officer

FINANCE REPORT

The Network finished the financial year in a good financial position, evidenced by our annual audit, attached at the end of this annual report.

We would like to thank Lesley Hyndal who continues to provide exceptional service to the Network in the regular keeping of our financial needs and the preparation for our annual audit.

Further, we would like to thank Peter Dwyer for his service as Treasurer during the period. Peter always tried his best to understand the juxtaposition of small amount of funds and large numbers of competing tasks that the Network, and many other not-for-profits, struggle with every day.

The Network's income came predominantly in the form of our recurrent ACT Health funding grant which continues to be a much needed and much appreciated funding source. Overall we had an income of \$324,534 for the financial year 2012-13 and ended the year with a small surplus of \$11,989 which leaves the Network with a balance of \$80,951 to round out the year.

CONSUMER REPRESENTATIVE PROGRAM REPORT

Over the 2012-2013 financial year, the Network has continued to support Consumer Representatives taking part in government and non-government committees and other opportunities. We seek to ensure consumer views are a central part of policy proposals, implementation and development as we work towards achieving our aim of bringing about a higher standard of health care in the mental health sector.

The Network's commitment to continual quality improvement to ensure ongoing effectiveness has seen further changes to policies and procedures for the Consumer Representative Program. These changes include a new Consumer Representative Program Mentoring Policy which aims to provide a mentor for new consumer representatives for the first three committee meetings they attend. This is intended to ensure new consumer representatives receive appropriate and adequate supports during the early phases of their representative work.

From our pool of over 50 members eligible to be Consumer Representatives, we had 24 consumer representatives actively involved in Act Health and other committees. We would like to extend a big thank you to all consumer representatives and eligible consumer representatives for their hard work and their continued involvement in the Consumer Representative Program. We are very fortunate to have such a multi skilled pool of members; we continue to work hard to train more consumer representatives through our training.

2012-2013 CONSUMER REPRESENTATIVES

Adele Lewin	Maureen McInerney
Bradley Foxlewin	Michael Schmohl
Charmaine Honey-Rose	Patricia Green
Colin Hales	Peter Dwyer
David Lovegrove	Ralph Nelson
Faye Digby	Ruth Dunnicliff-Hagan
Jane Grace	Sarah Sadler
Jon Kroschel	Sarah Shepherd
Julie McMahon	Sarah Stringer
Kerry Fry	Thi-Nha Tran
Leila Lines	Tony Fitzgerald
Matthew Martin	William Barreda

2012-2013 COMMITTEES

ACT Health

- Access and Acute Collaborative Engagement Forum
- Adolescent and Young Adult Mental Health Inpatient Unit User Group
- Bimberi User Group
- Child and Adolescent Mental Health Services Executive Reference Group
- Clinical Effectiveness Committee
- Community Health Centres Executive Reference Group
- HIP Project Control Group
- MHJHADS Executive Strategy and Business Planning Committee
- MHJHADS Information Management and Technology Committee
- MHJHADS Risk Management Committee
- MHJHADS Safety and Quality Committee
- MHJHADS Consumer and Carer Participation Action Plan Working Group

- Mental Health Act Review Advisory Committee and its working groups
- Mental Health Services Plan Executive Strategic Oversight Group
- Mental Health Services Plan Strategic Oversight Group
- Policy and Standard Operating Procedure Development and Review Committee
- Promotion, Prevention and Early Intervention Implementation and Evaluation Working Group
- Publications Advisory Committee
- Seclusion and Restraint Review Meeting
- Smoke Free Environment Initiative Monitoring and Review Committee
- Suicide Prevention, Implementation and Evaluation Working Group
- University of Canberra Public Hospital Executive Reference Group

Other

- ACT Crime Prevention and Community Safety Forum
- ACT Medicare Local Community Advisory Committee
- ACT Medicare Local Mental Health Advisory Committee
- Housing and Support Initiative Advisory Committee
- Mental Health Community Coalition (ACT) Consumer and Carer Workforce Development Steering Committee
- Mental Health Community Coalition (ACT) Qualifications Strategy Development & Implementation Group
- Mental Health Consumer and Carer Research Advisory Group
- Mental Health Recovery Group ACT
- Mental Health Week Planning Committee
- Mindscapes Festival Working Group
- National Mental Health Consumer and Carer Forum
- Private Mental Health Consumer and Carers Network (Australia)
- Woden Community Service Transitions to Recovery Advisory Group
- Women's Centre for Health Matters Women and Mental Health Working Group

ADVOCACY AND REPRESENTATION TRAINING

During the reporting period, two terms of the full Advocacy and Representation Training course, and two additional Self-Advocacy courses were delivered with a total of 29 participants engaging in the program. The course continues to contribute to the expanding volunteer base of the Network's Consumer Representative Program. Graduating participants from the ART course have gone on to become Consumer Representatives, nominate for the Network's Board, and to co-facilitate sessions of ART which are great outcomes!

ART Course Structure

ART Module 1: Self-Advocacy

Session 1: *Introduction and Self-Esteem*

Session 2: *Self Expression*

Session 3: *Self Confidence and Self Reliance*

Session 4: *Self Determination*

Session 5: *Self Development*

ART Module 2: Consumer Advocacy

Consumer Advocacy: *In Context*

Consumer Advocacy: *A Map of Democracy*

Consumer Advocacy: *Social Justice Principles*

Consumer Advocacy: *Committee Skills*
Consumer Advocacy: *Recovery Principles*

Since the end of the reporting year, work has commenced to review and update the ART Course, to this end we thank all members who have participated in the Forums or have provided valuable suggestions along the way.

Purity Goj
CRP Coordinator

POLICY AND PROJECTS PROGRAM REPORT

The Network continues to provide a strong Consumer voice on policy issues through the participation of Consumer Representatives on committees, working with community sector partners and providing input to inquiries and consultative processes at the ACT and national levels. We work formally and informally to ensure that Consumers are a valued part of the design and implementation of mental health policy and services.

During the reporting year we have continued to build relationships with other community sector organisations, including ACTCOSS, HCCA, WCHM, MHCCACT and Carers ACT, working collaboratively on policy issues, where appropriate, to maximise our influence. We have also engaged with national initiatives and reforms, particularly through the MHCA.

The Network made formal submissions on policy areas including:

- Review of the Mental Health (Treatment and Care) Act 1994 – Submission on Second Exposure Draft
- Review of the Mental Health (Treatment and Care) Act 1994 – Submission on First Exposure Draft
- 2nd Consultation Draft: National Recovery-Oriented Mental Health Practice Framework
- Exposure Draft: Public Advocate (Official Visitors) Amendment Bill 2012

The ACT's review of the Mental Health (Treatment and Care) Act continued to be an important focus, with consideration of a first and second exposure draft during the reporting year. The Review Advisory Committee met a number of times, as well as working groups which were convened by ACT Health to work through the detail of issues. Forums were held at the Network for each exposure draft, to provide information to members and seek input. The Network participated actively in discussions between Review Advisory Committee members, seeking to ensure that the new Act will give maximum recognition to the rights of consumers to make their own decisions. Disappointingly, we now understand that a Bill is unlikely to be introduced into the ACT Assembly until around mid 2014.

We also continued to provide comments and input to ACT Health through committees, working groups and by direct contact. These have covered diverse aspects of current operations, as well as ongoing changes to ACT Health's operations, such as the restructure of mental health services. We have sought to work closely with ACT Health to ensure that its services place the interests of consumers front and centre.

Much work has been done to provide constructive feedback on the Adult Mental Health Unit, while its Model of Care was being implemented. While there have been concerns about a range of issues, including implementation of the smoke free policy, staffing levels and training and access to facilities such as exercise equipment in the new Unit, the new Unit is a marked advance on the old PSU, and the Network will continue to work with ACT Health to improve the service it provides to consumers.

A significant issue for consumers in the ACT has been the implementation of a smoke-free policy in ACT Health mental health facilities. The Network continues to be disappointed that ACT Health has taken a discriminatory approach to its smoke-free policy, implementing it for mental health consumers by prohibiting them from smoking and also encouraging doctors not to grant leave to allow a person to go to a designated

smoking area, while other health consumers are able to access designated smoking areas. The Network acknowledges that smoking is a public health issue and supports measures to assist consumers to quit. We also acknowledge that the Project Officer from ACT Health has attended on a number of occasions to receive feedback from members. The Network does not support the discriminatory way in which ACT Health has implemented its policy.

Health Infrastructure Projects such as the University of Canberra Public Hospital, Community Health Centres and the Secure Mental Health Unit continue to require significant resources, particularly as the timeframes are often very short. The Network has devoted considerable resources to keeping up with the many strands of infrastructure projects, and the often fairly opaque processes by which they are developed.

Preparing for the introduction of the National Disability Insurance Scheme (NDIS) in the ACT, commencing from 1 July 2014, has been a focus throughout the year. The Network has worked closely with the ACT NDIS Taskforce to raise awareness of the NDIS among people living with mental illness, and in the reporting year began preparations for a range of activities in the second half of 2013. The Network has also established a working group looking at options and models for peer workers. This will feed into preparations for the NDIS, as well as more broadly exploring avenues to expand the peer workforce in the ACT.

In addition, we have continued to review and update our internal policies.

Amanda Davies
Program Manager

INFORMATION, EDUCATION AND TRAINING

Drop-Ins and Other Events Hosted

- Review of the Mental Health ACT community consultation and meetings related to this consultation;
- Seven events about the ACT's mental health Smoke-free Initiative;
- 2nd Consultation on Draft Recovery Framework and associated meetings;
- Clinical Redesign Project Forum;
- mindDog Forum;
- Recovery MH Roadmap;
- Mental Health Week Project Drop-In;
- ACT Medicare Local Focus Group;
- Lifeline Focus Group;
- Two Review of the MH Act Consultations;
- DisabilityCare Consultation/Conversations;
- Review of the Admin Model in Community Health Centres Forum; and
- All Things CALD Drop-In

Participation in Conferences, Training and Other Events

- 22nd The Mental Health Services (TheMHS) Conference
- TheMHS Summer Forum
- Mental Health Council of Australia (MHCA) World Mental Health Day Press Club Luncheon
- MHCA Grace Groom Memorial Lecture
- MHCA Members Policy Forum
- OzHelp ASIST and SafeTalk
- Senior First Aid
- Volunteer Management Course
- Launch of Mental Health Week Expo
- Mental Health Week Committee
- Selection Panel for ACT Health vacancies
- Community Development Network (CDNet) Working Group
- Budget Meetings
- MHCC ACT Budget Forum
- Comorbidity Interagency Day
- Community Mental Health Managers and EOs Group
- ACTCOSS Board Basics Training
- Consumer and Carer Caucus
- Youth Coalition's Comorbidity Bus Tour
- Mental Health Recovery ACT - Mindscapes Music and Arts Festival
- ACT Multiple Enterprise Agreement (MEA) Forum
- Mental Health Foundation Christmas in July
- ACTCOSS Conference
- Mary O'Hagan events
- Mental Health Week Bowling Competition
- Partners in Recovery events

- Griffin Centre Tenants' Meetings
- Mindscapes Committee
- MHCC events including Mental Health Act forum for service providers, sector development workshops, budget forum, community forum on smoking ban, workforce strategy events
- Community Services Directorate Survey Meeting
- Mental Health Commissioners Breakfast
- Navigating the Mental Health System
- Council of Non-Government Organisations (CONGO) Meeting
- Australian Services Union meeting on MEA and Equal Pay Case
- NDIS Consultations and other related activities;
- CEO Sleepout (volunteering);
- ACT Mental Health Sector Strategic Planning Day;
- ANUPA Forum 'Has the model of a Human Rights prison worked in the ACT?'
- Volunteer Symposium
- Suicide Prevention Forum
- Men's Suicide Prevention Forum
- HCCA Consumer Reps Training
- Promoting Recovery Course
- Stigma Training
- Fundamentals of Working Cross Culturally Training
- No2 Bullying Conference
- Mental Health First Aid
- Applied Suicide Intervention Skills Training

Joint Forums and Partnerships

- ACT Quarterly Consumer, Carer and Community Forums (with MHCCACT, ACT Health Division of MHJH&ADS and Carers ACT)
- ACT Mental Health Consumer Scholarships Scheme
- MIEACT and 2XX Opening Minds Radio Show – quarterly shows participation
- Self-Advocacy course co-funded by ACT Disability, Aged and Carer Advocacy Service
- Partnership to run an ART – Self-Advocacy course at Canberra Alliance for Harm Minimisation and Advocacy
- Hosting CDNet Working Group meetings
- Hosting TRec Working Group meetings
- Co-organising/facilitating CDNet WG Forum: Building a Mentally Healthy Workforce
- Consumer and Carer MH Research Unit Advisory Group (including recruitment for Fellow/Research Assistant)
- Working with MHCA about National Consumer Organisation
- Working with ACT Medicare Local on Partners in Recovery
- Joint meetings of staff with HCCA