

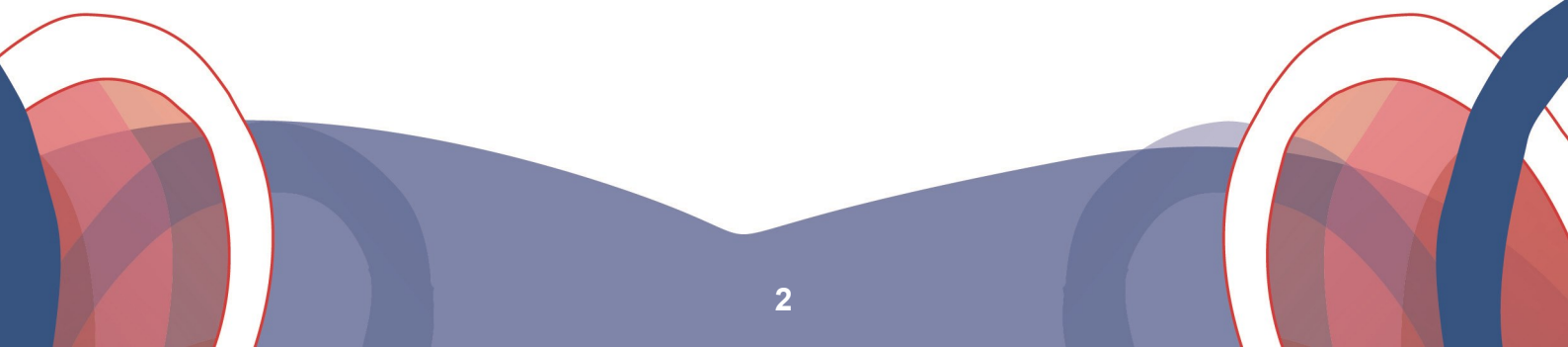


ACT
Mental Health
Consumer Network

Annual Report

2016-2017





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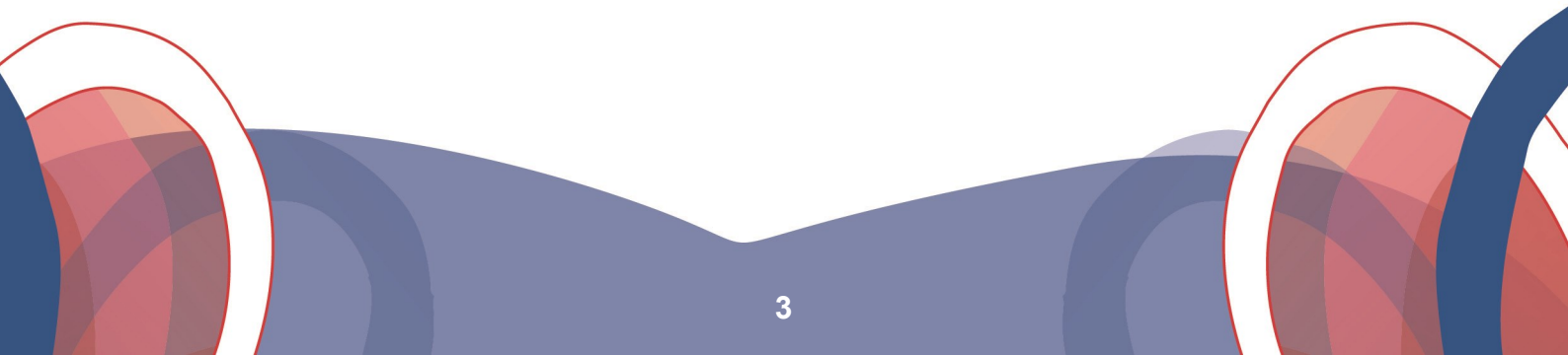
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VISION

A community of connected voices achieving positive change

STATEMENT OF PURPOSE

To advocate all means to improve and enhance services, systems and practices for consumers in the ACT by:

- ♦ Discovering and promoting the collective voice;
- ♦ Facilitating and supporting consumer participation at all levels of decision-making; and
- ♦ Ensuring a commitment to consumer driven recovery.

VALUES

- ♦ Empowerment;
- ♦ Respect;
- ♦ Courage;
- ♦ Social justice; and
- ♦ Meaningful inclusion.

GUIDING PRINCIPLES

Our guiding principles reflect our values of empowerment, respect, courage, social justice and meaningful inclusion. They reflect what Board, members and staff expect of each other in their work together and how we work with others in our representative, advocacy and collaborative capacities.

Value of lived experience

Open dialogue and advocacy

Increased self-awareness

Consumer-driven recovery

Ensure social justice and human rights are upheld

Sense of community

BOARD 2016-17

Terri Warner	Chair
Chris Corcoran	Deputy Chair
Jacqui Price	Treasurer
Dianna Smith	Secretary
Jennifer Adams	Ordinary Member
Peter Dwyer	Ordinary Member
Kerry Fry	Ordinary Member
Joanne Hargense	Ordinary Member
Michael Hausch	Ordinary Member
Adele Lewin	Ordinary Member (resigned 19 June 2017)
Chris van Reyk	Ordinary Member

STAFF

Dalane Drexler	Executive Officer
Purity Goj	Program Manager, acting Executive Officer from 24 May
Jennifer Nixon	Volunteer Coordinator
Petra Kallay	Community Education Coordinator
Joanne Hargense	Policy and Participation Coordinator (temp) from 23 May
Valan Phoenix	Administration Officer
Michael Brooks	Administrative Volunteer
Ikechukwu John Akujobi	2016 Student on Placement

TRAINING CO-FACILITATORS

Chris Corcoran
Michael Hausch
Evalyn Smith
Terri Warner
Jenny Adams

CHAIR'S REPORT

It has been another eventful year for the Network, with ongoing sectoral reforms flowing from the full roll out of the NDIS as well as structural changes at both local and Commonwealth government levels impacting on services. The Network continues to advocate strongly for 'nothing about us, without us' and I am proud to be involved with an organisation that truly models participation, co-production and inclusion as well as advocating for those principles to be embedded in mental health care at the strategic, service delivery and individual levels.

I have had the good fortune to train many of our new consumer representatives this year, and I am as ever impressed by the dedication of consumers to driving systemic change, as I am impressed with the quality and standard of the training that we provide that enables them to do this work. I encourage all members of the Network who are not yet active reps to undertake the training and become involved in systemic advocacy. The more of our voices there are, the more we will be heard and the more strongly we will be able to influence reform agendas into the future.

From a strategic governance perspective, the Network continues to be in a strong and solid position, assisted by a skilled and diverse board. I would like to thank all of the members of this year's board for their service. Their willingness to contribute their time and expertise has been of great value to the Network and I have greatly appreciated the support of the executive and general board members this year.

I would also like to thank Dalane and her team for all of their excellent work, with a special mention of Purity's exemplary period as acting Executive Officer. The office has run smoothly all year despite some staff absences and unanticipated challenges. It is a privilege to be involved with an organisation that has such a dedicated team of individuals who believe in their work and consistently deliver quality results that improve the lives of mental health consumers in the ACT.

Terri Warner

Chair

TREASURER'S REPORT

I would like to submit the auditor's report as indicating the Network's financial position for the 2016-2017 financial year .

The Network retained a modest surplus of \$15,613, with a member's funds balance of \$98,715. Major expenditure was taken during this period to provide an essential update to the data management capabilities of the organisation.

The Treasurer and Auditor are in accord that the Network retains sufficient funds to meet contingencies.

I commend Dalane for successfully managing the Network's business and projects within budget parameters.

Jacqui Price

Treasurer

EXECUTIVE OFFICER'S REPORT

The Network has successfully completed yet another year and with some great achievements.

Terri Warner completed her second year as Chair and we are deeply grateful for her high level background in governance and compliance as we worked through the lengthy process of achieving accreditation against the Australian Service Excellence Standards. This was a major piece of work that took extensive work by all staff, the Board, and Consumer Representatives and other active members. Chris Corcoran provided great support as Deputy Chair, also supporting our accreditation project with future planning. Rounding out the Executive Committee, Jacqui Price was a great support as Treasurer, and Dianna Smith provided great service as Secretary. The Executive Committee were supported in their work by our team of Ordinary Board Members Jenny Adams, Michelle Banfield, Kerry Fry, Jo Hargense, Michael Hausch, Adele Lewin and Chris van Reyk. On behalf of the staffing team, I would like to extend my sincere thanks to all Board Members for their service throughout the year.

An enormous thanks also goes to the Network's excellent team of staff who undertake a significant body of work throughout the year—well beyond what might ordinarily be expected of a part time team such as ours. In particular I would like to extend my personal thanks to Purity Goj who graciously accepted the responsibility of acting as Executive Officer from the end of May while I took long service leave to complete a project overseas. Jen Nixon, Petra Kallay and Val Phoenix all completed yet another year in their substantive roles, and we were supported by Jo Hargense who took leave from the Board to take on the temporary role of Policy and Participation Coordinator during my period of leave. We are pleased to have supported all five of the Network's staff (myself included) to undertake external education.

The entire team worked tirelessly toward the goals as set out in the Strategic Plan 2016-19, as evidenced throughout this report.

Dalane Drexler

Executive Officer



Australian Service Excellence Standards

ACT Mental Health Consumer Network Inc.

for successfully achieving

Certificate Level

Haydon
Janet Haydon

Director,

Australian Service Excellence Standards

Date: 14/11/2016



Expiry Date: 14 November 2019

MICHAEL FIRESTONE MEMORIAL SCHOLARSHIP

Every year the Network, in tandem with the Mental Health Week Awards, proudly administers and presents the Michael Firestone Memorial Scholarship. This scholarship is awarded in the memory of Michael Firestone who was both a colleague and member of the Network, as well as a fierce advocate for mental health consumers particularly around discrimination in education. Recognising mental health consumers who are furthering their education, the Scholarships are awarded to cover general education expenses such as computers, course-text and course fees.

Ordinarily we award two scholarships of up to \$500 however, in 2016, three were awarded to Chris Corcoran, Felicity Maher and Terri Warner. Chris and Terri received \$300 each to assist in payment for laptops for their studies. Felicity was awarded \$400 to pay for two cake decorating courses and she shared the results of her hard earned skills with us. We would like to congratulate the three 2016 Scholarship Winners and wish them all the best for their future studies and endeavours.



COMMUNITY EDUCATION PROGRAM REPORT

The Network's digital training resources have been embedded into our Self-Advocacy and Consumer Representation courses with great affect.

Project funding via MI Fellowship under the NDIS Capacity Building Grants allowed us to review and revise our existing NDIS peer education module, as well as develop a Peer Co-Facilitator Course. These courses were scheduled and run throughout 2016/2017.

The aim of the Co-facilitator course is to train consumers to undertake peer co-facilitation roles at the Network. There are many benefits to using a peer-led approach in co-facilitation of training (mypeer.org.au), including:

- Co-facilitation is an opportunity to see a peer in action
- Peers have credibility
- Peer-based approaches can be empowering
- Peers are an effective means of transfer of knowledge, skills and awareness
- Peer-based approaches can provide opportunities for ongoing personal development
- Peers can be positive role models



Image: Co-facilitator, Michael Hausch

Our goal is that all of the Network's courses will be co-facilitated by a paid or reimbursed, suitably skilled co-facilitator. As a result of the co-facilitation course, the Network now has seven qualified co-facilitators, four of whom co-facilitated the courses delivered during this financial year.

In this reporting period, the Network established a strong partnership with Directions ACT and provided training to consumers in the detox and transition program at Arcadia House. This was a great success and we hope to run further training in the future.

Petra Kallay
Community Education Coordinator

POLICY AND PROJECTS PROGRAM REPORT

Over the 2016-2017 financial year, the Network has strived to provide a strong consumer voice through our systemic advocacy efforts. Below is an overview of what we have been able to achieve, all our submissions can be found on our website under the Publications heading.

Consultations & Forums

- ♦ Capital Health Network;
- ♦ Secure Mental Health Unit Supported Decision Making - Link and Learn Project;
- ♦ 5th National Mental Health Plan Consultation;
- ♦ A new Assertive Youth Outreach Program;
- ♦ University Medical Leave Statute Rules;
- ♦ New Women's Mental Health Service;
- ♦ Proposed new Model of Care for Adult Mental Health Services;
- ♦ Audit of Mental Health Services;
- ♦ NDIS Consultation regarding the provision of services under the NDIS for people with psychosocial disabilities related to a mental health condition;
- ♦ Consultation regarding Restrictive Practices in ACT;
- ♦ Capital Health Network Needs Assessment; and
- ♦ Mental Health Supported Accommodation Consultation.

Submissions

- ♦ Adult Mental Health Unit Operation Procedures;
- ♦ The provision of services under the NDIS for people with psychosocial disabilities related to a mental health condition; and
- ♦ Inquiry into the employment of people with disabilities - as a result of our formal submission, the Network appeared as a witness to the Inquiry into the Employment of People with Disabilities.

Ongoing partnerships on forums and other events with organisations, including but not limited to

- ♦ MHCC ACT;
- ♦ Mental Health Week Committee;
- ♦ Carers ACT;
- ♦ ACT Health;
- ♦ Wellways;
- ♦ Capital Health Network;
- ♦ Mental Illness Education ACT;
- ♦ Purple Orange; and
- ♦ This is My Brave Australia.

I would like to take this opportunity thank all our members who contribute at forums, events, in writing and in person – without your concerted efforts the policy program would not be what it is.

Purity Goj

Program Manager

CONSUMER REPRESENTATIVE PROGRAM REPORT

The active Consumer Representatives have continued to provide excellent representation for mental health consumers during the last financial year. By participating in various meetings for organisations such as the Mental Health, Justice Health and Alcohol and Other Drugs Services (MHJHADS), National Mental Health Consumer and Carer Forum and the development of the University of Canberra Public Hospital (UCPH) Mental Health Short Stay Unit, our active Consumer Representatives ensure that the consumer perspective is at the forefront of mental health forums, working groups and committees discussions.

Ralph Nelson was congratulated in late November 2016 for his 5 years' service in the Consumer Representative Program. Executive Officer, Dalane, awarded Ralph his trophy at the last Consumer Representative Forum for 2016. Congratulations Ralph on this well-earned award.



Consumer Representatives and Board Members were invited to celebrate Volunteer Week at a morning tea held on 2nd May, with attendees enjoying lunch and cake. Without our volunteers the Network would not be able to do what it does, and so a big shout out to all of our volunteers – Consumer Representatives, Co-facilitators, administration volunteers, students and those who participate in the forums.

Having been a researcher and a public servant prior, I was interested in consumer representation because I wanted to understand and contribute to policy and advocacy in mental health as a consumer. I found the training provided by the Network engaging and it further developed my interest in the human rights issues in mental health. I have found being a consumer representative for the last three years interesting, and enjoyable, although from time to time quite frustrating. A highlight was having the opportunity to attend the Partners in Recovery National Conference in Brisbane in 2015 as a consumer representative. Overall it's been a great learning experience and I am now hoping to undertake further study in health policy focusing on mental health with a view to working in the area. ~Robert Pedlow.

Active Consumer Representatives and a member of staff have continued to visit Brian Hennessy Rehabilitation Centre and the Adult Mental Health Unit and Emergency Department Short Stay Mental Health Unit at the Canberra Hospital, visiting each unit twice in the year. In addition, we were able to include visits to Ward 2N and the Older Persons Mental Health Unit at Calvary Hospital which hadn't happened for some time. The Network coordinates these facility visits to advise current residents of what the Network does and how consumers can be involved with our activities such as training, consumer representation and discussion forums. The experience of our active Consumer Representatives who attend provides the consumer perspective to the Network's activities during these visits, which is invaluable. It was wonderful to discover that these visits are useful for the community, with some training participants advising that they heard of the Network during these visits.

The Network is very fortunate to have such a multi-skilled pool of members willing and able to donate their time to our Consumer Representative Program. In total, we had 17 Consumer Representatives actively involved in 28 committees, with one of our newly graduated Consumer Representatives from the Advocacy and Representation training starting representational duties. This equates to around 450 hours of consumer representative time, for which the Network thanks each and every Consumer Representative.

We look forward to continuing to work with the representatives on important work such as the finalisation of the UCPH – with lots of new opportunities for new and continuing Consumer Representatives.

2016-2017 CONSUMER REPRESENTATIVES

Jenny Adams	Rose Beard	Chris Corcoran
Peter Dwyer	Jane Grace	Patricia Green
Michael Hausch	Graham Jackson	Adele Lewin
David Lovegrove	Matthew Martin	Deanne Michaels
Ralph Nelson	Robert Pedlow	Evalyn Smith
Thi-Nha Tran	Terri Warner	

2016-2017 COMMITTEES

ACACIA (ACT Consumer and Carer Research Unit) Advisory Group
Adult Mental Health Services Collaborative Engagement Forum
Adult Community Health Model of Care Steering Committee
Adult Model of Care Operational Readiness Steering Group
Primary Health Strategic Reform Group (Capital Health Network)
Clinical Effectiveness Committee
Clinical System Advisory Group
Consumer and Carer Feedback and Quality Committee
Consumer and Carer Participation Framework Review Working Group
Consumer Handouts Committee
Dhulwa (Secure Mental Health Unit) Commissioning Steering Committee
Detention Exit Community Mental Health Outreach Program Partnership Committee
Health Infrastructure Program Secure Mental Health Unit Project Control Group
Mental Health Week Committee
Mental Health Act 2015 Implementation, Evaluation and Monitoring Committee
MHJHADS Corporate Governance Committee
MHJHADS Policy Procedure and Guideline Development and Review Committee
MHJHADS Publications Advisory Committee
MHJHADS Workforce Strategy, Planning, Development and Implementation Group
MHJHADS Clinical Governance Committee
National Mental Health Consumer and Carer Forum
Standard 2 - Partnering with Consumers Network Meeting
Partners in Recovery Consortium
Primary Mental Health Strategic Reform Group
Promotion, Prevention and Early Intervention Implementation and Evaluation Group
Seclusion Restraint Review Meeting
UCPH Management of a Deteriorating Patient Working Group
UCPH Project Control Group
UCPH MHJHADS Operational Working Group
UCPH Operational Commissioning Steering Committee

Jennifer Nixon
Volunteer Coordinator

CONSUMER REPRESENTATIVE REFLECTION

I have been part of the Network as Board Member and Consumer Representative for the past two years. Living with Schizophrenia, Depression and Anxiety means that it is not generally easy to be understood by others. I have had to let go of family and friendships that did not support me on my recovery journey, and this has been a loss and heartache that never stops.

It is therefore such a relief to find an organisation that seeks to promote the perspective of mental health consumers within the mental health system and in the broader community. I have felt immediately at ease with each of the staff at the Network, almost as if I didn't need to say what my specific story was because they had so much empathy and acceptance it didn't matter.

When I participated in feedback sessions and on ACT Health Committees as a Consumer Representative, I felt that my views were important and I felt encouraged to express them. I did not feel like a fish out of water, as I had felt in so many other situations, but right in the stream of things where mental illness and recovery was just part of the flow.

I encourage others who have yet to find a meeting point of like-minded individuals to contact the Network and become part of what is a very healthy and supportive organisation.

Jennifer Adams

Consumer Representative

ADMINISTRATION AND INFORMATION REPORT

As previously reported in the 2015/16 Annual Report, Val undertook formal study in and completed a Certificate IV in Work Health and Safety. Following this and in preparation for Accreditation, a significant amount of work was undertaken in formally updating the Networks policies and procedures for work health and safety to current legislation.

Over the year, the Network continued to utilise a volunteering role for administrative purposes. Michael Brooks (Brooksy) began volunteering at the Network in August of 2016, providing much needed administrative support to Val, so he was free to focus on larger administrative concerns. The Network extends a sincere thanks to Brooksy for his involvement with the Network.

Following his gaining qualifications in Work Health and Safety and overseeing volunteers in administrative support roles, Val's position at the Network grew beyond the original Administration Officer role. In recognition of this, the decision was made in April 2017 to expand the Duty Statement Role to include these new responsibilities.

Mental Health Week in 2016 saw the Network continue with an arts-based activity event. Our event 'Faces of Mental illness and Recovery', was a mask making workshop, where participants crafted a mask that reflected their mental illness and/or recovery. Whilst the event had a small turn out, all participants enjoyed their time reflecting and regressing to a state of play. The Network again retained the services of Bella Insch from Ink Brush Art Therapy for facilitating the workshop and assisting participants, and Ray Simpson from Canberra Supervision and Counselling Service to provide counselling support to participants who may have required it.



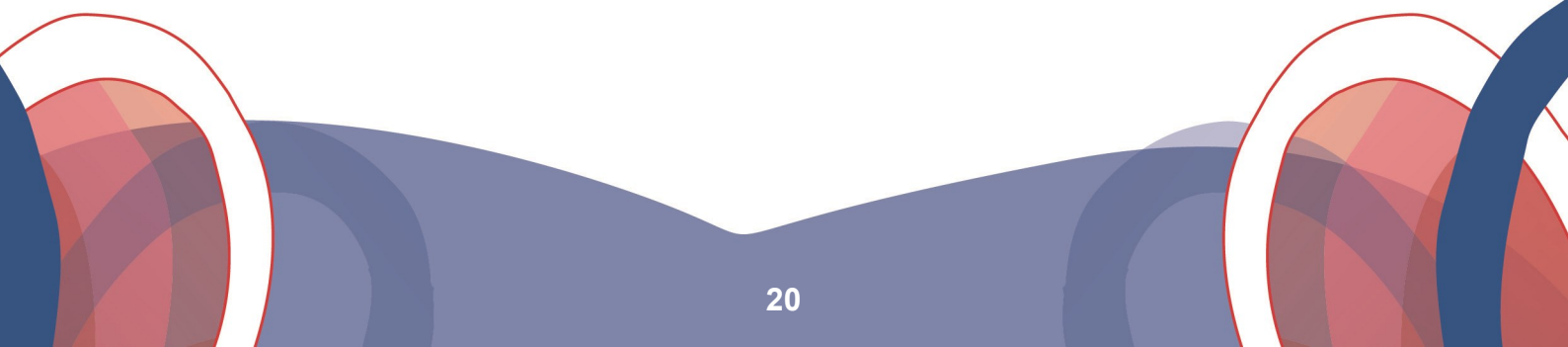
The Mental Health Week Awards Ceremony on Tuesday 11 October 2016, saw the first public display of the compilation of work that participants created at our Mental Health Week event, 'Mind the Art', in 2015. The compilation process saw additional artwork done to blend and give shape to all the individual panels. This work now resides permanently in the Member's Area at the Network office.



In March, the Network engaged Rohan Mitchell from 1024 to develop a new Ivo database for the Network's membership, administration and program requirements. While this new database was still in development, work was able to begin in populating basic data into Ivo in April. Due to the sheer amount of data and time involved in data entry, Jo Hargense was engaged to provide administration support to Val, so he could focus solely on entering membership details. Work continues on the development of Ivo and will be reported on next year.

Valan Phoenix

Administration Officer



A.C.T MENTAL HEALTH CONSUMER NETWORK INCORPORATED

Statement by the Committee

Your committee members submit the financial accounts of the A.C.T Mental Health Consumer Network Incorporated for the financial year ended 30 June 2017.

Committee Members

The names of committee members at the date of this report are:

Terri Warner	<i>Chair</i>
Chris Corcoran	<i>Deputy Chair</i>
Dianna Smith	<i>Secretary</i>
Jacqui Price	<i>Treasurer</i>
Chris van Reyk	<i>Ordinary Member</i>
Jennifer Adams	<i>Ordinary Member</i>
Jo Hargense	<i>Ordinary Member</i>
Kerry Fry	<i>Ordinary Member</i>
Michael Hausch	<i>Ordinary Member</i>
Adele Lewin	<i>Ordinary Member</i>
Michelle Banfield	<i>Ordinary Member</i>

Principal Activities

The principal activities of the Association during the year under review were to facilitate equitable access to, promote the expansion of, and to empower consumers to utilise all means to achieve and maintain better mental health. There has been no significant change in those activities during the year.

Operating Result

The operating surplus/(deficit) for the year ended 30 June 2017 was: \$ 15,613

Opinion

In the opinion of the members of the committee, the accompanying financial statements present fairly the financial position of the A.C.T Mental Health Consumer Network Incorporated as at 30 June 2017 and the results and cashflows of the Association for the year ended on that date in accordance with applicable Australian Accounting Standards and other mandatory professional reporting requirements.

It is also the opinion of the committee that, at this date, there are reasonable grounds to believe that the Association will be able to pay its debts as and when they fall due.

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

_____	_____
Signature	Signature
_____	_____
Name	Name

Dated this _____ day of _____ 2017.

A.C.T MENTAL HEALTH CONSUMER NETWORK INCORPORATED

STATEMENT of COMPREHENSIVE INCOME For the Year Ended 30 June 2017

<u>2016</u>	Income	<u>2017</u> \$
345,814	ACT Health - Operational & ERO Grants	361,963
22,727	Project Grant (MIF)	-
6,924	Sundry/Training	6,929
1,541	Interest	1,125
<u>377,007</u>	Total Income	<u>370,017</u>
	Expenses	
	Salaries & Related Costs	
235,879	Wages	233,649
22,086	Superannuation Expense	22,001
3,555	Workers Comp. Insurance	3,144
1,467	Staff Recruitment/Health & Wellbeing	2,574
980	Staff Development	3,570
2,866	Staff Clinical Supervision	2,216
1,456	Travel costs	1,147
3,751	Long Service Provision & LSL Paid	2,392
3,927	Annual Leave Provision Expense	(1,662)
<u>275,966</u>	Total Salaries & Related Costs	<u>269,030</u>
	Office Support	
14,945	Rent	15,394
2,021	Electricity & Security	1,659
3,101	Telecommunication Support	3,105
4,734	Computer Systems Support	4,753
2,242	Insurances	2,291
4,860	Depreciation	-
4,473	Miscellaneous Office Support	7,085
<u>36,375</u>	Total Office Support	<u>34,287</u>
	Administration	
1,400	Audit	1,400
621	Bank Fees & Charges	587
2,446	Postage	2,632
	Meeting Expenses	
2,902	Venue Hire for Meetings	2,696
4,396	Catering for Meetings	4,368
4,477	Honorarium/Rewards	2,581
5,109	Photocopying/Printing	4,112
10,301	Publicity	3,665
3,636	Stationery & Other Resources	1,932
934	Membership Subscriptions/ donations	877
<u>36,220</u>	Total Administration	<u>24,848</u>
	Program/Consumer Support	
2,317	Taxi /Parking	702
3,301	Consumer Reimbursement	7,809
9,685	Conference Attendance	11,779
2,500	Accreditation	3,585
1,976	Mental Health Week	2,364
<u>19,779</u>	Total Program/Consumer Support	<u>26,239</u>
<u>368,340</u>	Total Expenses	<u>354,404</u>
<u>8,667</u>	Operating Surplus (Deficit) for the Year	<u>15,613</u>

These financial statements should be read in conjunction with the attached notes.

A.C.T MENTAL HEALTH CONSUMER NETWORK INCORPORATED

STATEMENT OF FINANCIAL POSITION As at 30 June 2017

<u>2016</u>		<u>2017</u>
	Current Assets	\$
124,377	Cash at Bank	130,803
309	Cash on Hand	73
200	Sundry debtors & Accrued Income	2,544
1,149	Prepayments	6,370
<u>126,035</u>	Total Current Assets	<u>139,790</u>
	Non-Current Assets	
	Total Non-Current Assets	
<u>126,035</u>	Total Assets	<u>139,790</u>
	Current Liabilities	
10,885	Trade Creditors	11,476
9,085	Sundry Creditors & Accrued Expenses	9,623
22,962	Leave Entitlements	19,976
<u>42,933</u>	Total Current Liabilities	<u>41,075</u>
	Total Liabilities	
<u>83,102</u>	Net Assets	<u>98,715</u>
	Represented By:	
74,435	Member's Funds at Beginning of Year	83,102
8,667	Add Surplus(Loss) for the Year	15,613
<u>83,102</u>	Member's Funds at End the Year	<u>98,715</u>

These financial statements should be read in conjunction with the attached notes.

A.C.T MENTAL HEALTH CONSUMER NETWORK INCORPORATED

STATEMENT OF CASHFLOWS For the Year Ended 30 June 2017

<u>2016</u>		<u>2017</u>
	Cashflows from Operating Activities	\$
368,452	Receipts from Grants	361,963
1,541	Interest Received	1,125
6,924	Other Receipts	6,929
(352,383)	Payments to Suppliers & Employees	(363,827)
24,534	Total Cashflows from Operating Activities	6,190
	Cashflows Used in Investing Activities	
-	Capital Purchases	-
-	Total Cashflows from Operating & Investing Activities	-
100,152	Add: Cash at Beginning of Period	124,686
124,686	Cash at End of Period	
	Represented By:	
309	Cash on Hand	73
124,377	Cash at Bank	130,803
124,686		130,876
	Reconciliation of Operating Surplus with Net Cashflows from Operating Activities for the Period.	
8,667	Operating Surplus (Loss)	15,613
4,860	Depreciation	-
13,528	Operating Surplus Adjusted for Non-Cash Items	
1,090	(Increase)/Decrease in Prepayments	(5,221)
2,144	(Increase)/Decrease in Sundry Debtors & Accrued Income	(2,344)
2,569	Increase/(Decrease) in Trade Creditors	591
1,258	Increase/(Decrease) in Sundry Creditors & Accrued Expenses	537
3,946	Increase/(Decrease) in Provision for Employee Entitlements	(2,986)
24,534	Net Cashflows from Operating Activities	6,190

THE ACCOMPANYING NOTES FORM PART OF THESE FINANCIAL STATEMENTS

A.C.T. MENTAL HEALTH CONSUMER NETWORK INCORPORATED

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2017

NOTE 1: Statement of Significant Accounting Policies

This financial report is a special purpose financial report prepared in order to satisfy the financial reporting requirements of the Associations Incorporation Act 1991. The committee has determined that the association is not a reporting entity.

The financial report has been prepared in accordance with the requirements of the Associations Incorporation Act 1991.

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

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

a. Income tax

No provision has been made for income tax as the Company is exempt from taxation under Section 50-5 of the Income Tax Assessment Act 1997.

b. Fixed assets

Leasehold improvements and office equipment are carried at cost less, where applicable, any accumulated depreciation.

The depreciable amount of all fixed assets are depreciated over the useful lives of the assets to the association commencing from the time the asset is held ready for use. Leasehold improvements are amortised over the shorter of either the unexpired period of the lease or the estimated useful lives of the improvements.

c. Employee Benefits

Provision is made for the Company's liability for employee benefits arising from services rendered by employees to balance date. Employee benefits that are expected to be settled within one year have been measured at the amounts expected to be paid when the liability is settled, plus related on-costs. Employee benefits payable later than one year have been measured at the present value of the estimated future cash outflows to be made for those benefits.

d. Cash and Cash Equivalents

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

A.C.T. MENTAL HEALTH CONSUMER NETWORK INCORPORATED

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2017

e. Revenue

Government Grants

Government grants are recognised as income on a systematic and rational basis over the periods necessary to match them with the related costs.

Donations

Donation revenues are recognised when they are received.

Sale of Goods and Disposal of Assets

Revenue from the sale of goods and disposal of other assets is recognised when the association has passed control of the goods or other assets to the buyer.

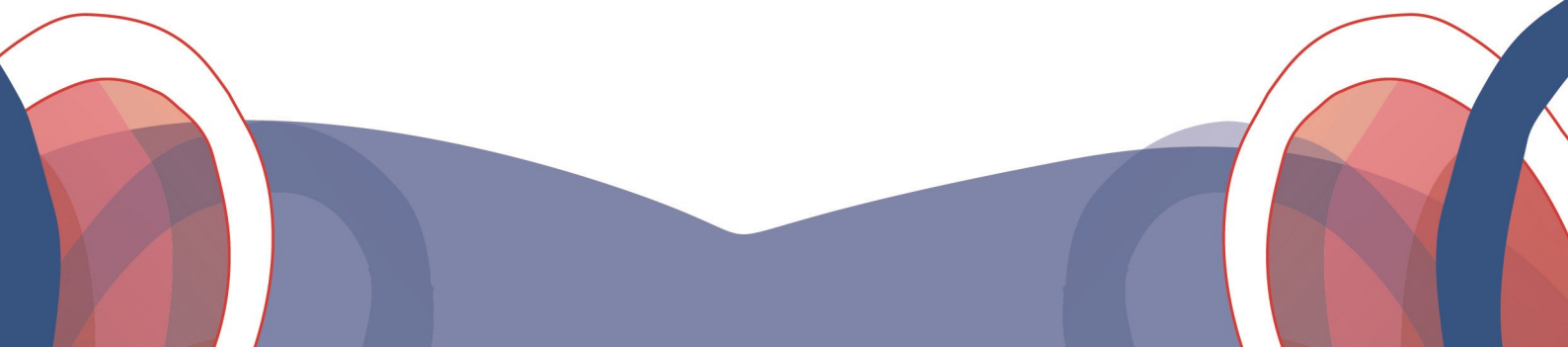
Interest revenue

Interest is recognised on an accrual basis.

f. Goods and Services Tax (GST)

Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Tax Office. In these circumstances the GST is recognised as part of the cost of acquisition of the asset or as part of an item of the expense. Receivables and payables in the balance sheet are shown inclusive of GST.

Cash flows are presented in the cash flow statement on a gross basis, except for the GST component of investing and financing activities, which are disclosed as operating cash flows.





ACT Mental Health Consumer Network
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