



NSW CONSUMER ADVISORY GROUP – MENTAL HEALTH INC (NSW CAG)

**ANNUAL REPORT
2006-2007**

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About NSW CAG

Vision

Our vision is empowered mental health consumers and carers who experience their rights to respect, dignity and self-determination every day.

Mission

NSW CAG's Mission is to:

- Provide independent representation and a strong, informed voice for the diversity of consumers and carers in NSW in state policy and service development, implementation and evaluation;
- Ensure empowerment of consumers and carers through education across all sectors of the community;
- Articulate and defend the rights of consumers and carers;
- Work in partnership with all stakeholders in mental health to achieve best practice in mental health care for all.

Key Areas of Work

- NSW CAG has representatives who sit on various State and Federal committees. This ensures that the views of mental health consumers and carers in NSW are heard.
- NSW CAG provides feedback to the NSW Department of Health, Mental Health and Drug and Alcohol Office as it develops policy that relates to consumers and carers.
- NSW CAG develops and works on projects that relate to consumer and carer participation in the mental health sector.
- NSW CAG provides information to consumers, carers and others via mail, E-mail, and our website. This includes a free newsletter NSW CAG INFO_LINK and our weekly E-news. People can receive this information by joining NETWORK NSW. People can also ask for information to be distributed and can contribute to the newsletter.
- NSW CAG seeks the views of consumers and carers in NSW on mental health issues using various means including the newsletter.
- NSW CAG holds and promotes conferences, seminars and forums of interest to consumers and carers that provide information and facilitate discussion about mental health issues.



Chairperson's Report

This year has seen a tremendous growth in NSW CAG'S activities. We have co-located to new premises in William Street, East Sydney with ARAFMI and the Mental Health Association of NSW. This has proven to be a wise move as we share a resource centre and board room with equipment we could not have afforded on our own. The staff enjoys superior office space and facilities which makes for a happier working group. We have three new staff members working on the MH-CoPES project, Karen Oakley, Rebecca Doyle and Francesca Corcoran, all of whom are very welcome to the existing NSW CAG team of Gillian Malins, Yvette Cotton and Maureen O'Keeffe.

This financial year has seen us involved in many new initiatives under the guidance of Gillian. A key focus for NSW CAG has been the consultative process to NSW CAG's work; for without knowing what our constituents want we cannot reflect their ideas and wishes. These consultations have taken place across the state and at our William Street premises on such diverse topics as the forum regarding the National Standards for Mental Health Services to the review of the forensic provisions of the Mental Health Act.

Our Newsletter has improved tremendously and gone from a biannual to a quarterly edition, and the E-news has received a really good response from correspondents of network members who wish to raise concerns or issues of importance from other organisations which is of benefit to all.

We are in good financial shape although still on our old funding regime. We hope to have increased funding to expand our staffing levels in order to provide a more exciting service to consumers and carers.

This is my final annual report as I am retiring at the AGM in October. I'd like to thank all those with whom I have been involved over the past five years for their generosity of help and spirit during my time on the Board, it has been a pleasure to serve and see NSW CAG grow exponentially over the time.

Finally, I wish to congratulate and thank the staff and, in particular, Gillian Malins for the hard work and extra effort they have put into NSW CAG to make it the organisation it is today.

Anna Saminsky



Executive Officer's Report

The 2006 – 2007 financial year has been an exciting time of consolidation, review and a lot of activity for the NSW Consumer Advisory Group. We started to year with our move to our new premises at 501/80 William St Sydney. The move took up much of the staff's time and energy during the latter parts of 2006, but by now, we are well and truly settled in.

A wonderful feature of our new location is the Resource Centre which we share with the Mental Health Association (MHA) and ARAFMI. Together, we were successful in securing funding through the infrastructure grants program from NSW Health, through the Mental Health Coordinating Council to purchase fresh new furniture to make the centre a really welcoming resource facility for consumers, carers, and other's interested in mental health.

With the start of 2007, we were able to focus renewed energy into our consultative work – the real base of everything that NSW CAG does. Working to ensure we are listening to people right across the state is a critical aim for us. During 2007 we held a number of consultation forums relating to a number of different important issues, including the review of the National Standards for Mental Health Services, the review of the forensic provisions of the Mental Health Act, and to inform our submission to the Senate Community Affairs Committee Inquiry into Mental Health Services in Australia. We consulted with people not just from Sydney and its surrounding areas, but also visited Orange, Tamworth and Queanbeyan during that time. We look forward to continuing this work, getting to more parts of the state to include as many voices and views of people using mental health services as we possibly can in our work.

A key part of the work that NSW CAG does is act as a bridge between consumers, carers and the state government. Our consultation work is the way we gather information to take to the government; our newsletter and e-news are two of the important things we have in place to make sure information flows from the government and our organisation back to consumers and carer across NSW. To provide a stronger information sharing service, we increased the production of our newsletter from a biannual publication, to a quarterly publication. We encourage everyone who receives the newsletter to contribute as well. This year, we have also changed the way we pass on information via email, and developed a weekly e-news system. This means we can be more organised in the way we pass information on, and you receive one weekly update from us instead of many emails about different things. We have received a lot of positive feedback about the e-news, and plan to continue with this new system.

Throughout the financial year we have also been engaged in a number of projects, many working with partners from other organisations. Some projects, like *Understanding Research* and *An introduction to helping people with drug and alcohol and mental health problems* were education focused, specifically aiming to equip consumers and carers with knowledge and skills to be involved in mental health service reform, evaluation and delivery. Education and training to build understanding and capacity for participation is one of the areas NSW CAG plans to strengthen over the coming years. I would like to thank all of the partners we have

worked with during the year. Our organisation continues to learn and grow from these relationships.

During 2006-07 the Board and staff have been active in reviewing the organisation's future direction, and considering our structure and operation. This is ongoing work, and we have been lucky to receive funding through the infrastructure grants program from NSW Health, through the Mental Health Coordinating Council, to engage a consultant to assist us in developing our new strategic plan.

Resources continue to be a challenge for NSW CAG. We have an extremely small group of dedicated staff, and so regularly find ourselves limited in what the organisation can achieve as a statewide body. To do justice to the views of consumers and carers around the state, we know that much stronger resourcing is needed. We are committed to working to increase the resources directed to consumer and carer participation and input, and have a vision of a much larger staff including more consumers and carers who work to consult with people across the state more regularly, and represent the views of people using mental health services in NSW. We are looking at a number of strategies for NSW CAG to increase our capability over the coming years.

Finally, it has been a great pleasure to welcome several new staff to our team this year; Karen Oakley began work early in the 2006-07 period as the MH-CoPES Project Officer, and Rebecca Doyle joined her as Research Assistant. In 2007 Susan Palmer also joined this team on a casual basis, as did Francesca Corcoran. We have also been fortunate to be able to access the support of Acrief Martono, who has worked on a temporary basis assisting with expertise in database development on the project. The MH-CoPES team has done a fantastic job this year with the project. MH-CoPES has achieved the goals set for this period, and is well on track for its completion over the coming 18-months. I would also like to thank and acknowledge the partners who have been working with NSW CAG, particularly consumers and the services in Orange and Ryde. I want to congratulate the whole team of staff and the Board; it has been a busy and challenging year for NSW CAG, but an enormously successful year in which we have achieved a lot.

Dr. Gillian Malins



People behind NSW CAG

NSW CAG Board

July 2006- October 2006

Anna Saminsky – Chair
Brenda Spencer
Kerrie Dissegna
Jenny Mackellin
Jenny Coleman

November 2006 - June 2007

Anna Saminsky – Chair
Jenny Mackellin
Brenda Spencer
Allison Kokany
Tony Turner
Rhordon Balthazaar (from January 2006)



NSW CAG Staff

Gillian Malins – Executive Officer
Karen Oakley – MH-CoPES Project Officer (from September 2006)
Rebecca Doyle – MH-CoPES Research Assistant (from September 2006)
Francesca Corcoran - Research and Administration Assistant (casual) (from April 2007)
Susan Palmer – Research Assistant (casual) (from January 2007)
Yvette Cotton – Communications Officer
Maureen O’Keeffe – Administration Officer
Acrief Martono – Temporary worker (from May 2007)



NSW CAG Projects

Mental Health Consumer Perceptions and Experiences of Services (MH-CoPES) Stage 2

Considerable work has been undertaken during this financial year on Stage 2 of the MH-CoPES Project. During this stage of the Project, the MH-CoPES Framework for consumer evaluation of mental health services, including the MH-CoPES Questionnaire, is being further developed and refined ready for implementation throughout NSW. To achieve this, we are conducting a trial of the Framework, including the Questionnaires, in partnership with services in Orange, Greater Western Area Health Service (GWAHS), and Ryde, Northern Sydney Central Coast Area Health Service (NSCCAHS). In each of these Areas a committee of consumers and staff from the services has been established to oversee and guide the trial.

Ethics approval has been sought and granted specifically for the trial to occur in each of the Areas, and procedures for each of the services involved were developed in consultation with services and the Pilot Implementation Committees. A report on the procedures for the trial was also produced.

A brochure has been developed, printed and distributed which details Stage 2 of the MH-CoPES Project. This included the work being undertaken by both NSW CAG and InforMH. Posters were also printed and distributed to advertise MH-CoPES in order to inform people about the Project. The brochure can be viewed at www.nswcag.org.au – click on the link ‘Projects’ and then ‘MH-CoPES’. Quarterly updates on MH-CoPES have also been circulated to interested parties. These can also be viewed on the website.

The trial of the MH-CoPES Framework has successfully commenced in Orange. Prior to this, training and education sessions regarding what would be happening in each service were delivered to staff at all services involved in the trial. Training was also delivered to Consumer Project Workers who are employed by GWAHS to distribute the MH-CoPES Questionnaires and assist consumers to complete the Questionnaire. The early weeks of the trial were very positive with a good response rate and favourable comments regarding both the work of the Consumer Project Workers and MH-CoPES in general.

The trial of MH-CoPES will commence in NSCCAHS in early August.

One of the objectives of the MH-CoPES Stage 2 Project is to clarify the role and place of MH-CoPES in service improvement. In order to achieve this, a Reference Group has been established. This group comprises service and consumer representatives from the eight Area Health Services in NSW, and will meet biannually throughout the Project. This group held its first meeting in April.

A discussion paper titled *Introducing MH-CoPES Stage 2: Developing the Framework for Consumer Evaluation in Service Improvement* was also circulated among Directors of Area Health Services, the pilot sites for Stage 2 and key

stakeholders from Stage 1, to commence discussions around clarifying the role and place of consumer evaluation within mental health services. A report based on the responses to this paper formed the basis for discussions at the first Reference Group meeting.

A presentation on MH-CoPES and a consultation were held at the Northern Sydney Central Coast Area Health Service Consumer Network Forum. These discussions introduced the work being undertaken during Stage 2 of the Project, particularly in Ryde. During the consultation a range of issues were explored concerning methods for distributing the Questionnaire; alternative ways for consumers to provide their feedback about services; and how consumers wish to receive reports and feedback gathered through data collection.

I would like to take this opportunity to thank the consumers, services and Areas who are working with us to undertake this Project. I would also like to thank the Illawarra Institute of Mental Health for their support and valuable research advice. Thank you also to the other members of the MH-CoPES Project Team, Rebecca Doyle, Francesca Corcoran and Susan Palmer for their work. And, a big thank you to Gillian Malins for her continual support.

Karen Oakley
Project Officer, MH-CoPES

Count Me In

The Count Me In project aimed to develop an understanding of the meaning of good mental health to people under the age of 25 years. A postcard design competition was run in early 2007, with a display of entries during Youth Week in Marrickville. A voter's choice method was used to select the winning postcard. A postcard was then produced for distribution to the NSW CAG Network and throughout the Marrickville Local Government Area. The postcard will inform the local community about concepts of good mental health from the perspective of young people from the local area, and has resource and contact information for the local community.

The project was funded by Marrickville Council Community Grants Scheme. It was supported by the Marrickville Youth Council and Marrickville Council Youth Services.

Understanding Research

The Understanding Research project aimed to assist consumers and carers to participate in research by providing an introduction to the area. Five workshops were conducted from October to December 2006 which aimed to:

1. increase consumers' and carers' understanding of the way research is conducted in mental health settings; and
2. provide consumers and carers with a basic knowledge of the role of research in evidence-based practice.

Forty-five people took part in the workshops. This included 25 consumers (67.6%), four carers (10.8%), and eight people who were both consumers and carers (21.6%). There were 11 males and 26 females. The mean age was 48.7 years and 15 people had previously participated in healthcare research. The project was a collaboration with the Research Unit, Rozelle Hospital, Sydney South West Area Health Service.

Development and Evaluation of a Recovery Self-Help Package

The aims of this project are: to develop and trial a mental health recovery self-help package for consumers, based on principles of self-development and positive psychology; and to provide initial evaluation of the utility of a consumer run self-help recovery program utilising modern technology as a mode of delivery.

This project commenced in early 2007, and has been in planning stages during the 2006/07 financial year. Development of the package is underway. A trial of the package is planned for early 2008.

The project is a collaboration with the Illawarra Institute for Mental Health (iiMH), University of Wollongong. It is funded by an Australian Rotary Health Research Grant.

An introduction to helping people with drug and alcohol and mental health problems

The aims of this project were: to develop an education package for consumers and carers working in mental health services, providing information to assist in their roles of supporting people who may have dual drug and alcohol and mental health problems; and to address the training and knowledge gap identified by Consumer Consultants and Carers in relation to supporting people with dual diagnosis.

Four five-hour workshops were conducted to trial the training package. Workshops were held at Rozelle Hospital, NSW CAG's office, and Cumberland Hospital. The workshops were held during May and June 2007. Thirty two people attended the workshops. Twelve were consumer workers. Fifteen were carers. Five were both consumers and carers. Twenty one were female and 11 were male. The mean age was 43. An evaluation of the workshops is being finalised, and the revised workshop content will be made available on the NSW CAG website.

The project was a collaboration between the Research Unit, Rozelle Hospital and Consumer Consultants from Sydney South West Area Health Service. It was funded by a Nursing & Midwifery Office, NSW Health Innovation Scholarship.

Consumer roles in the NGO sector

NSW CAG is collaborating with the Mental Health Coordinating Council on a project looking at developing a joint statement and guidelines about consumer roles in the NGO sector.

We have engaged Sandy Watson to work with us on this project. The first phase of the project will see the development of a discussion paper for the sector, raising issues and questions about consumer roles and consumer participation within NGOS, for debate and discussion. Feedback from consumers and NGOs will guide the next stage of the project.

NSW CAG Events

Ministers' XI Cricket Match

The Ministers' XI cricket match is an annual event organised by NSW CAG, Aftercare and the Schizophrenia Fellowship. It was held in Mental Health Week in October 2006.

William Street, Premises Opening

In March 2007 Mental Health Association NSW, ARAFMI along with NSW CAG hosted the opening of our new, joint premises. The Hon. Cherie Burton, then Minister Assisting the Minister (Mental Health) opened the premises, to a group of our friends and colleagues who joined us for this celebration.



NSW CAG Consultations and Submissions

NSW CAG provided comment on the Draft Action Plan: *Building a secure base for the future: NSW Mental Health Service Plan for children, adolescents and the people who care for them: Part 1 Action Plan.*

October 2006

NSW CAG made a submission to the Review of the Mental Health Act- Exposure Draft Bill in October 2006.

November 2006

NSW CAG arranged and hosted an information sharing session relating to the State 24 hour Mental Health Telephone Access Line. This was an opportunity for consumers, carers and others interested to meet with the Project Manager, hear about the plans for the access line and discuss. This forum was held at our William St premises on 22nd November 2006.

January 2007

NSW CAG held a consultation forum with consumers about the National Standards for Mental Health Services at the NSW CAG Office on 25th January 2007. This helped inform NSW CAG's input into the process of review of the Standards. NSW CAG's board also participated in a teleconference with Janne McMahon, consumer surveyor with ACHS about the review of the National Standards of Mental Health Services.

February – March 2007

NSW CAG provided comment on development of the proposed program *HASI in the Home* to the Mental Health and Drug and Alcohol Office (MHDAO) in February 2007.

NSW CAG held four consultations with consumers and carers interested in the review of the forensic provisions of the Mental Health Act. These forums were held at Cumberland Hospital, Morisset Hospital and at our premises in William St Sydney. Over 30 individuals contributed in the consultations. Over 25 people who participated had personal experience of using the forensic mental health system. Based on these consultations NSW CAG made a submission to the review of the forensic provisions of the Mental Health Act 1990 and the Mental Health (Criminal Procedure) Act 1990 in April 2007.

June 2007

NSW CAG held two consultations (the first of four) to provide input to NSW CAG's planned submission to the Senate Community Affairs Committee Inquiry into Mental Health Services in Australia. These forums were held in Tamworth at Billabong clubhouse on 19th June 2007 and in Queanbeyan on 21st June 2007. Thirty people participated in these two consultations, and over 85% of participants were consumers. The other participants were family and carers and mental health workers.

NSW CAG visited 6 consumer and/or carer groups around NSW during the 2006/07 period.

NSW CAG's Network – NETWORK NSW and Website

We use three main ways to stay in touch with NSW CAG's network, NETWORK NSW:

- Our newsletter – NSW CAG INFO_LINK
- The NSW CAG website
- E-mail updates

These methods of communications help NSW CAG keep consumers and carers in NSW up-to-date with information about what is happening in NSW in relation to mental health.

Newsletter: NSW CAG INFO_LINK

During the 2006-2007 financial year, three issues of NSW CAG INFO_LINK (Issues 10, 11 and 12) were distributed by mail to approximately 350 people, mostly consumers and carers in NSW. We have increased the frequency of our newsletter from bi-annually to quarterly. The newsletters are also available on the NEWS page of the website. People with Email addresses (about 350 other people) now get an Email message to notify them that the newsletter is on the website. We encourage people to raise issues by contributing to the newsletter.

Website

Updating the NSW CAG website is an ongoing job. During this financial year we have continued to include information about events from various organisations that may be of interest to consumers and carers in NSW on our ACTIVITIES page. Other pages including up-to-date information about NSW CAG's projects have also been updated.

E-mail

To help our network keep in touch, we regularly pass on news of mental health events and other information to people on our email list (approx. 375 people). This takes the form of a weekly E-mail news with information about NSW CAG's activities and news from other organisations.



NSW CAG Representation on Committees

National Committees

National Mental Health Consumer & Carer Forum (MHCA)

State Committees – Convened by Mental Health and Drug and Alcohol Office, previously Centre for Mental Health

State Mental Health Telephone Access Line Steering Committee (NSW Health)

Joint Guarantee of Service (JGOS) for people with Mental Health Problems and Disorders living in Aboriginal, Community and Public Housing (NSW Health)

Mental Health Outcomes and Assessment Tools and Training Consumer Consultative Committee (MHOAT CCC) (NSW Health)

Official Visitors Advisory Committee (NSW Health)

NSW Mental Health Implementation Taskforce (NSW Health)

Mental Health Emergency Care Committee (NSW Health)

Older Person's State Mental Health Plan Working Party (NSW Health)

Chronic and Continuing Care, Rehabilitation and Recovery Working Group (NSW Health)

Housing and Accommodation Support Initiative (HASI) Evaluation Reference Group (NSW Health)

Benchmarking in Non Acute Inpatient Mental Health Units (InforMH) (NSW Health)

NSW Family and Carers Mental Health Program – Statewide Steering Committee

State Committees – Convened by other organisations

NSW Carers Coalition (Carers NSW)

Gulaymaldhaany Network (Carers NSW)

NSW Mental Health Promotion Advisory Committee (MHA NSW)

Council of Social Service of NSW (NCOSS) Health Policy Advice Group

Mental Health Coordinating Council (MHCC) Management Committee
Workforce Development Reference Group (MHCC)

Forensic Consumer Representative Model Development Group (MHCC)

Health Care Complaints Commission Consumer Consultative Committee

Consumer Advocacy Course Committee (Institute of Psychiatry)

Other NSW CAG Representation

Mental Health Nurse Education (MHNET) Pre-registration Nurse Education, NSW Consultation Workshop, on 9th November 2006. Along with attendance by NSW CAG staff, NSW CAG ensured a number of other consumers were supported to attend.

NSW CAG attended the NCOSS and MHCC forum regarding the review of the forensic provisions of the MH Act, on 8th March 2007.



NSW CAG Presentations

The role of consumers and carers training presented to the Official Visitor's Program, metropolitan training day, on Friday 20th October 2006, at the Harbourview Hotel, North Sydney.

Mental Health Coordinating Council's (MHCC) NGO Conference in March 2007. Presentations given were: a lunch time discussion session in collaboration with Queensland Alliance and Cairns CAG looking at the role and place of Consumer Advisory Groups and where we're at; and a joint presentation with MHA and ARAFMI discussing the process of co-location.

The Mental Health Nursing Innovations Showcase in April 2007. The presentation was in relation to developing an educational/training package for consumer and carer workers in MHS about mental illness and drug and alcohol problems. Title: *What do consumer consultants and carers need to know about managing people with D&A and MH problems?*

The Schizophrenia Fellowship's Symposium in May 2007. A presentation was given on an update on the work NSW CAG is doing.



Conference, Seminar and Event Attendance by NSW CAG

2006

August: Launch of Service Plan for Older Person's Mental Health, North Sydney.

August/ September: TheMHS Conference 2006, Townsville.

September: Ron Coleman Recovery Workshop, Sydney.

October: Mental Health Week Launch, Martin Place Sydney.

November: Mental Health Coordinating Council's AGM, Australian Technology Park, Everleigh.

Meeting with Verity Firth - then member for Balmain

Meeting with Cr Rochelle Porteous and Sylvia Hale - then Greens spokesperson for Health.

Meeting with Judy Hopwood - then Shadow Minister for Mental Health.

2007

March: Launch of NGO Infrastructure Grants at Sydney South East Area Mental Health Service. Launch by the Hon. Cherie Burton - then Minister Assisting the Minister, Mental Health.

March: Mental Health Coordinating Council's NGO Conference.

March: meeting with Daniel Cochavy: Board member and Consumers Representative of the World Association for Psychosocial Rehabilitation.

March: visit and consultation with Mid-West CAG, Orange.

May: meeting with Lee Rhiannon, Greens spokesperson for Health.

May: participated in Multicultural Mental Health Australia (MMHA)'s scoping study to measure the amount and type of culturally and linguistically diverse (CALD) consumer and carer participation across the nation.

May: meeting with Principal Official Visitor, Jan Roberts.

2006 & 2007: Marrickville Youth Council Meetings.

May: Shoalhaven Mental Health Fellowship's Annual Fundraiser dinner.

June: Queensland Alliance Conference, Brisbane.

Auditor's Report

***NSW CAG Mental Health Inc.
82 549 349***

Financial Report for the year ended 30 June 2007

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- Independent auditor's report to the members of NSW CAG Mental Health Inc
- Statement by members of the committee
- Income statement for the year ended 30 June 2007
- Balance Sheet as at 30 June 2007
- Statement of Recognised income and expense for the year ended 30 June 2007
- Notes to the financial statements for the year ended 30 June 2007
- Income and expenditure statement for the year ended 30 June 2007

**INDEPENDENT AUDITOR'S REPORT
TO THE MEMBERS OF NSW CAG - MENTAL HEALTH INC.
82 549 537 349**

Report on the Financial Report

I have audited the accompanying financial report of NSW CAG - MENTAL HEALTH INC. (the association) which comprises the balance sheet as at 30th June 2007, and the income statement, statement of recognised income and expenditure for the year ended on that date, a summary of significant accounting policies and other explanatory notes and the statement by members of the committee.

Committee's Responsibility for the Financial Report

The committee of the association is responsible for the preparation and fair presentation of the financial report in accordance with Australian Accounting Standards (including the Australian Accounting Interpretations) and the Associations Incorporations Act NSW 1984. This responsibility includes establishing and maintaining internal control relevant to the preparation and fair presentation of the financial report that is free from material misstatement, whether due to fraud or error; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

Auditor's Responsibility

My responsibility is to express an opinion on the financial report based on my audit. I conducted my audit in accordance with Australian Auditing Standards. These Auditing Standards require that I comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial report in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the committee, as well as evaluating the overall presentation of the financial report.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my audit opinion.

Independence

In conducting my audit, I have complied with the independence requirements of Australian professional ethical pronouncements.

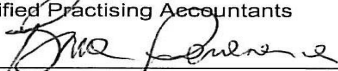
**INDEPENDENT AUDITOR'S REPORT
TO THE MEMBERS OF NSW CAG - MENTAL HEALTH INC.
82 549 537 349**

Auditor's Opinion

In my opinion:

The financial report of NSW CAG - MENTAL HEALTH INC. is in accordance with the Associations Incorporation Act NSW 1984 including:

- (i) giving a true and fair view of the Association's financial position as at and of their performance for the year ended on that date; and
- (ii) complying with the Australian Accounting Standards (including the Australian Accounting Interpretations) and the Associations Incorporations Act NSW 1984.

Name of Firm:	O'NEILL & O'BRIEN PTY LTD Certified Practising Accountants
Name of Director:	 Bruce Lawrence
Address:	11-13 Hartill-Law Avenue Bardwell NSW 2007
Dated this day of	7th October 2007

NSW CAG - MENTAL HEALTH INC.
82 549 537 349

STATEMENT BY MEMBERS OF THE COMMITTEE

In the opinion of the committee the financial report as set out on pages 1 to 14:

1. Presents fairly the financial position of NSW CAG - MENTAL HEALTH INC. as at and its performance for the year ended on that date in accordance with Australian Accounting Standards, mandatory professional reporting requirements and other authoritative pronouncements of the Australian Accounting Standards Board.
2. At the date of this statement, there are reasonable grounds to believe that NSW CAG - MENTAL HEALTH INC. 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:

President: Anna Sammel

Treasurer: [Signature]
Deputy Chair: [Signature]

Dated this day of 28th September 2007

NSW CAG - MENTAL HEALTH INC.
82 549 537 349

INCOME STATEMENT
FOR THE YEAR ENDED JUNE 2007

	Note	2007 \$	2006 \$
Revenue	2	460,874	412,771
Accountancy expenses		(2,000)	(1,676)
Advertising expenses		(613)	(1,231)
Depreciation and amortisation expenses		(13,582)	(5,631)
Employee benefits expenses		(181,045)	(169,246)
Freight and cartage		(4,494)	(6,669)
Other expenses		<u>(118,367)</u>	<u>(170,467)</u>
Profit for the year	3	140,773	57,851
Retained earnings at the beginning of the financial year		<u>77,706</u>	<u>19,855</u>
Profit attributable to the association		<u>218,479</u>	<u>77,706</u>

The accompanying notes form part of these financial statements.

NSW CAG - MENTAL HEALTH INC.
82 549 537 349

BALANCE SHEET
AS AT 30 JUNE 2007

	Note	2007 \$	2006 \$
CURRENT ASSETS			
Cash and cash equivalents	4	225,427	80,158
Trade and other receivables	5	3,820	778
TOTAL CURRENT ASSETS		229,247	80,936
NON-CURRENT ASSETS			
Property, plant and equipment	6	13,357	17,260
TOTAL NON-CURRENT ASSETS		13,357	17,260
TOTAL ASSETS		242,604	98,196
CURRENT LIABILITIES			
Trade and other payables	7	3,858	9,108
Provisions	8	20,267	11,382
TOTAL CURRENT LIABILITIES		24,125	20,490
TOTAL LIABILITIES		24,125	20,490
NET ASSETS		218,479	77,706
EQUITY			
Retained earnings	9	218,479	77,706
TOTAL EQUITY		218,479	77,706

The accompanying notes form part of these financial statements.

NSW CAG - MENTAL HEALTH INC.
82 549 537 349

STATEMENT OF RECOGNISED INCOME AND EXPENSE
FOR THE YEAR ENDED 30 JUNE 2007

	Note	Retained Earnings \$	Total \$
Profit attributable to members		57,851	57,851
Balance at 30 June 2006		<u>57,851</u>	<u>57,851</u>
Profit attributable to members		140,773	140,773
Balance at 30 June 2007		<u>198,624</u>	<u>198,624</u>

The accompanying notes form part of these financial statements.

**NSW CAG - MENTAL HEALTH INC.
82 549 537 349**

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2007**

1 Statement of Significant Accounting Policies

The financial report is a general purpose financial report that has been prepared in accordance with Accounting Standards, including Australian Accounting Interpretations, other authoritative pronouncements of the Australian Accounting Standards Board and the requirements of the Associations Incorporation Act NSW.

The financial report covers NSW CAG - MENTAL HEALTH INC. as an individual entity. NSW CAG - MENTAL HEALTH INC. is an association incorporated in NSW under the Associations Incorporation Act 1984.

The financial report of NSW CAG - MENTAL HEALTH INC. as an individual entity complies with all Australian equivalents to International Financial Reporting Standards (AIFRS) in their entirety.

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

Basis of Preparation

The accounting policies set out below have been consistently applied to all years presented.

Reporting basis and conventions

The financial report has been prepared on an accruals basis and is based on historical costs modified by the revaluation of selected non-current assets, financial assets and financial liabilities for which the fair value basis of accounting has been applied.

**NSW CAG - MENTAL HEALTH INC.
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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2007**

Accounting Policies

Property, Plant and Equipment

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

Plant and equipment

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

The cost of fixed assets constructed within the association includes the cost of materials, direct labour, borrowing costs and an appropriate proportion of fixed and variable overheads.

Subsequent costs are included in the asset's carrying amount or recognised as a separate asset, as appropriate, only when it is probable that future economic benefits associated with the item will flow to the association and the cost of the item can be measured reliably. All other repairs and maintenance are charged to the income statement during the financial period in which they are incurred.

Depreciation

The depreciable amount of all fixed assets including building and capitalised lease assets is depreciated on a straight-line basis over their useful lives to the association 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.

The assets' residual values and useful lives are reviewed and adjusted, if appropriate, at each balance date.

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 and losses are included in the income statement. When revalued assets are sold, amounts included in the revaluation relating to that asset are transferred to retained earnings.

NSW CAG - MENTAL HEALTH INC.
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2007

Financial Instruments

Recognition

Financial instruments are initially measured at cost on trade date, which includes transaction costs, when the related contractual rights or obligations exist. Subsequent to initial recognition these instruments are measured as set out below.

Financial assets at fair value through profit and loss

A financial asset is classified in this category if acquired principally for the purpose of selling in the short-term or if so designated by management. Derivatives are also categorised as held for trading unless they are designated as hedges. Realised and unrealised gains and losses arising from changes in the fair value of these assets are included in the income statement in the period in which they arise.

Available-for-sale financial assets

Available-for-sale financial assets include any financial assets not included in the above categories. Available-for-sale financial assets are reflected at fair value. Unrealised gains and losses arising from changes in fair value are taken directly to equity.

Financial liabilities

Non-derivative financial liabilities are recognised at amortised cost, comprising original debt less principal payments and amortisation.

Derivative instruments

Derivative instruments are measured at fair value. Gains and losses arising from changes in fair value are taken to the income statement unless they are designated as hedges.

Impairment

At each reporting date, the association assesses whether there is objective evidence that a financial instrument has been impaired. In the case of available-for-sale financial instruments, a prolonged decline in the value of the instrument is considered to determine whether an impairment has arisen. Impairment losses are recognised in the income statement.

NSW CAG - MENTAL HEALTH INC.
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2007

Employee Benefits

Provision is made for the association'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.

Defined superannuation schemes

In respect of defined benefit plans, the cost of providing the benefits is determined using the projected unit credit method. Actuarial valuations are conducted every three years, with interim valuations performed on an annual basis. Consideration is given to any event that could impact the funds up to balance sheet date where the interim valuation is performed at an earlier date.

The amount recognised in the balance sheet represents the present value of the defined benefit obligations adjusted for any unrecognised actuarial gains and losses and unrecognised past service costs less the fair value of the plan's assets. Any asset recognised is limited to unrecognised actuarial losses, plus the present value of available refunds and reductions in future contributions to the plan.

Actuarial gains and losses are amortised over the expected average remaining working lives of the participating employees in the scheme. Gains or losses on the curtailment or settlement of a defined benefit plan are recognised in the income statement when the association is demonstrably committed to the curtailment or settlement.

Past services costs are recognised when incurred to the extent that benefits are vested, and are otherwise amortised on a straight-line basis over the vesting period.

Provisions

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

Cash and Cash Equivalents

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

**NSW CAG - MENTAL HEALTH INC.
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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2007**

Revenue

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

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).

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.

Comparative Figures

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

NSW CAG - MENTAL HEALTH INC.
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2007

	2007	2006
	\$	\$
2 Revenue		
Operating activities		
Interest received	8,477	1,676
Rendering of services	13,288	503
Other revenue	439,109	410,592
Total revenue	460,874	412,771
3 Profit		
Expenses		
Depreciation of property, plant and equipment	13,582	5,631
4 Cash and Cash Equivalents		
Current		
Cash in Hand	150	150
Cash at Bank	224,962	79,013
Accounts Receivable	315	995
	225,427	80,158
5 Trade and Other Receivables		
Current		
GST Debtor	3,820	778
6 Property, Plant and Equipment		
PLANT AND EQUIPMENT		
Plant and Equipment:		
At cost	85,263	75,585
Accumulated depreciation	(71,906)	(58,325)
Total Plant and Equipment	13,357	17,260

NSW CAG - MENTAL HEALTH INC.
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2007

		2007	2006
		\$	\$
Movements in Carrying Amounts			
Movement in the carrying amounts for each class of property, plant and equipment			
	Freehold Land	Buildings	Plant and Equipment
	\$	\$	\$
		Leased Plant and Equipment	Total
		\$	\$
7	Trade and Other Payables		
	Current		
	Trade Creditors	3,858	9,108
8	Provisions		
	Provision for Annual Leave	17,665	11,382
	Prov'n for Long Service Leave	2,602	-
		20,267	11,382
	Total provisions	20,267	11,382
	Analysis of Total Provisions		
	Current	20,267	11,382
		20,267	11,382
9	Retained Earnings		
	Retained earnings at the beginning of the financial year	77,706	19,855
	Net profit attributable to the association	140,773	57,851
	Retained earnings at the end of the financial year	218,479	77,706
10	Financial Instruments		
	Financial Risk Management		
	The association's financial instruments consists primarily of deposits with banks, local money market instruments, short-term investments, accounts receivable and payable, loans to and from subsidiaries, bills and leases.		
	The association does not have any derivative instruments at 30 th June 2007.		

NSW CAG - MENTAL HEALTH INC.
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2007

2007
\$

2006
\$

11 Change in Accounting Policy

The association has elected to change its accounting policies in respect of the following items to reflect changes to the recognition and measurement criteria resulting from the introduction of Australian equivalents to International Financial Reporting Standards. Where applicable, retrospective adjustments have been made to comparative information.

NSW CAG - MENTAL HEALTH INC.
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2007

2007
\$

2006
\$

Pending Standards issued between the previous financial report and the current reporting date have no application to association.

AASB amendment	AASB Standard affected
2004-3	AASB 119: Employee Benefits
2005-1	AASB 139: Financial Instruments: Recognition and Measurement
2005-2	AASB 1023: General Insurance Contracts
2005-3	AASB 119: Employee Benefits
2005-4	AASB 139: Financial Instruments: Recognition and Measurement
2005-4	AASB 132: Financial Instruments: Disclosure and Presentation
2005-4	AASB 1: First-time Adoption of AIFRS
2005-4	AASB 1023: General Insurance Contracts
2005-4	AASB 1038: Life Insurance Contracts
2005-5	AASB 1: First-time Adoption of AIFRS
2005-5	AASB 139: Financial Instruments: Recognition and Measurement
2005-6	AASB 3: Business Combinations
2005-7	AASB 134: Interim Financial Reporting
2005-8	AASB 1: First-time Adoption of AIFRS
2005-9	AASB 4: Insurance Contracts
2005-9	AASB 1023: General Insurance Contracts
2005-9	AASB 139: Financial Instruments: Recognition and Measurement
2005-9	AASB 132: Financial Instruments: Disclosure and Presentation
2005-10	AASB 132: Financial Instruments: Disclosure and Presentation
2005-10	AASB 101: Presentation of Financial Statements
2005-10	AASB 114: Segment Reporting
2005-10	AASB 117: Leases
2005-10	AASB 133: Earnings per Share
2005-10	AASB 1: First-time Adoption of AIFRS
2005-10	AASB 4: Insurance Contracts
2005-10	AASB 1023: General Insurance Contracts
2005-10	AASB 1038: Life Insurance Contracts
2005-11	AASB 101: Presentation of Financial Statements
2005-11	AASB 112: Income Taxes
2005-11	AASB 132: Financial Instruments: Disclosure and Presentation
2005-11	AASB 133: Earnings per Share
2005-11	AASB 139: Financial Instruments: Recognition and Measurement
2005-11	AASB 141: Agriculture
2005-12	AASB 1038: Life Insurance Contracts
2005-12	AASB 1023: General Insurance Contracts

NSW CAG - MENTAL HEALTH INC.
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2007

	2007	2006
	\$	\$
2005-13	AAS 25: Financial Reporting by Superannuation Plans	
2006-1	AASB 121: The Effects of Changes in Foreign Exchange Rates	
2006-2	AASB 1: First-time Adoption of AIFRS	
2004-3	AASB 1: First-time Adoption of AIFRS	
2004-3	AASB 101: Presentation of Financial Statements	
2004-3	AASB 124: Related Party Disclosures	
2005-10	AASB 139: Financial Instruments: Recognition and Measurement	
2006-1	AASB 119: Employee Benefits	
AASB 7: Financial Instruments: Disclosures	AASB 132: Financial Instruments: Disclosure and Presentation	

12 Association Details

The principal place of business of the association is: 501/80 William St Sydney

NSW CAG - MENTAL HEALTH INC.
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**NOTES TO AND FORMING PART OF THE ACCOUNTS
FOR THE YEAR ENDED 30 JUNE 2007**

CASH FLOW STATEMENT

	2007	2006
	\$	\$
<hr/>		
CASH FLOWS FROM OPERATING ACTIVITIES		
Cash Receipts in the Course of Operations	460,873	412,771
Cash Payments in the Course of Operations	305,245	334,604
	<hr/>	<hr/>
Net Cash provided by/(used in) Operating Activities	155,628	78,167
	<hr/> <hr/>	<hr/> <hr/>
 CASH FLOWS FROM INVESTING ACTIVITIES		
Payments for Property, Plant & Equipment	9,678	0
	<hr/>	<hr/>
Net Cash provided by/(used in) Investing Activities	9,678	78,167
	<hr/> <hr/>	<hr/> <hr/>
 CASH FLOWS FROM FINANCING ACTIVITIES		
INCREASE/(DECREASE) IN CASH HELD	145,950	78,167
CASH AT THE BEGINNING OF THE YEAR	79,163	996
	<hr/>	<hr/>
CASH AT THE END OF THE YEAR	225,113	79,163
	<hr/> <hr/>	<hr/> <hr/>

NSW CAG - MENTAL HEALTH INC.
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**NOTES TO AND FORMING PART OF THE ACCOUNTS
FOR THE YEAR ENDED 30 JUNE 2007**

NOTES TO CASH FLOW STATEMENT

	2007	2006
	\$	\$
<hr/>		
1) Reconciliation of Cash		
For the purposes of this statement, cash includes the following:-		
Cash in Hand	150	150
Cash at Bank	224,963	79,013
	<hr/>	<hr/>
	225,113	79,163
	<hr/> <hr/>	<hr/> <hr/>
2) Reconciliation of Net Cash Provided by Operating Activities to Operating Profit		
Operating Surplus (Deficit)	140,773	57,851
Depreciation & Amortisation	13,581	5,631
Increase in Provisions	8,886	11,382
Increase (Decrease) in accrued expenses, Creditors, Advance funding	-5,250	-1,438
Decrease/(Increase) in receivables/payments	-2,362	4,741
	<hr/>	<hr/>
	155,628	78,167
	<hr/> <hr/>	<hr/> <hr/>

NSW CAG - MENTAL HEALTH INC.
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INCOME AND EXPENDITURE STATEMENT
FOR THE YEAR ENDED 30 JUNE 2007

	2007	2006
	\$	\$
REVENUE		
Consult & Committee Works	1,738	503
Infrastructure Grants income	11,550	-
Interest Received	8,477	1,676
Core Funding (NSW Health)	238,800	-
Copes Funding (NSW Health)	200,000	393,027
Conference Income	309	17,565
	460,874	412,771
EXPENDITURE		
Accountancy	2,000	1,676
Advertising & Promotion	613	1,231
Bank Charges	480	601
Bookkeeping	12,997	15,223
Computer Software	678	1,589
Meetings and Conferences	5,609	-
Co-location Costs	12,000	-
Development & Research	-	14,980
Rubbish Removal & Cleaning	470	-
Consultants Fees	5,522	13,277
Depreciation	13,582	5,631
Courier & Postage Costs	4,494	6,669
Insurance	3,060	2,722
Interest	-	18
Member Fees	10,452	15,918
Provision for Annual Leave	6,284	11,382
Long Service Leave Provision	2,602	-
Printing Stationery & Postage	22,973	23,462
Repairs & Maintenance	974	2,021
Staff Training	7,125	2,909
Superannuation	14,510	13,729
Telephone & Internet Fees	3,729	1,409
Members Travel & Subsistence	11,208	64,956
Staff Travel & Subsistence	14,806	-
Wages	163,933	155,517
	320,101	354,920
Profit before income tax	140,773	57,851

The accompanying notes form part of these financial statements.

NSW CAG - MENTAL HEALTH INC.
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INCOME AND EXPENDITURE STATEMENT
FOR THE YEAR ENDED 30 JUNE 2007

	2007 \$	2006 \$
Profit for the year	140,773	57,851
Retained earnings at the beginning of the financial year	77,706	19,855
Retained earnings at the end of the financial year	218,479	77,706

The accompanying notes form part of these financial statements.