

2016–17

Neami National
30th Annual Report

*Valuing curiosity,
understanding
and experience*



We acknowledge that we work on Aboriginal land and pay our respects to community members and elders, past and present.

We appreciate and celebrate diversity in all its forms, including among staff, consumers, carers and the broader community.

Interpreter service and translations

Neami National is committed to providing accessible services to people from culturally and linguistically diverse backgrounds.



If you have difficulty understanding this report, phone us on 03 8691 5300 and we will arrange an interpreter or translation for this publication.

Thank you to the consumers, staff and others who contributed to the content and design of this report.

Photography: Amy Piesse
Design: Gozer Studio

Contents

Welcome	2
Neami National snapshot	4
CEO and Chair report	6
2017-2020 Strategic Directions	8
Delivering safe and high-quality services	10
Knowing what supports recovery	14
Exploring a great consumer experience	18
Designing services to meet people's needs	22
Working in partnership to build capacity	26
State overview	30
New South Wales	32
Queensland	33
South Australia	34
Victoria	35
Western Australia	36
Staff and culture	38
Staff snapshot	39
Consumer snapshot	40
Funding	42
Partners	44
Board of Directors	46
Consolidated Statement of Profit or Loss and Other Comprehensive Income	48
Consolidated Statement of Financial Position	49

Welcome

I welcome you to the 30th Neami National Annual Report. In the last three decades, a lot has changed at Neami, including our reports.

What were four typed pages in 1987 is now a combined print and website report, rich in detail and stories. However, whether the report is four pages or 64, what remains consistent over the years is a demonstration of our values in supporting people with mental illness to live a meaningful life.

In this report, we look at the positive impact our services have in people's lives. We feature our priority areas, highlighting evidence of where we make a difference and then dig deeper into some examples of where we are innovating and seeing great outcomes. We also hear from consumers, who share their experiences of living with mental illness. Their stories give us further insights into the positive impact of our work.

Our last twelve months have been extremely busy. Although there has been extensive innovation and development, we should not overlook our essential role in delivering outreach support. For 30 years, Neami has excelled in meeting people in their homes, hospitals and communities, and developing valuable and productive relationships. Our experience guides us as we design new services

and tailor our models to work with a broader group of individuals. We are thrilled to bring our expertise to working with new people.

An online version of the Annual Report is available at www.ar.neaminational.org.au which gives us the opportunity to share our vision more broadly. Online, you will find some of what we document here alongside additional content and consumer stories. We have enjoyed expanding into the digital space to enhance the impact of our work together.

This report is a demonstration of how we value curiosity, understanding and experience. These qualities not only shape the way we deliver services, but also our approach. We enact these each day as the foundation of our services.

Happy reading,
Arthur Papakotsias
Chief Executive Officer

Neami National is one of Australia's largest providers of community mental health services. We support people to improve their health, live independently and pursue a fulfilling life based on their strengths and goals.

Over the past 30 years, we have built partnerships with hospitals, clinical mental health services, non-government services, universities and community health services. Together (with over 950 staff), Neami and our wholly owned subsidiary Me Well, support more than 8,000 individuals to achieve greater independence.

Our vision

Full citizenship for all people living with a mental illness in Australian society.

Our mission

Improving mental health and wellbeing in local communities.

Our values

Self-determination, growth, partnerships, respect, empowerment, diversity, choice, learning, change, wellbeing, hope and quality.

We draw on the knowledge, capacity and expertise of a national organisation; applying this at a local level to deliver services that meet individual and community needs. Our evidence-based approach is integral to our innovation and development, and translates to improved outcomes for consumers.

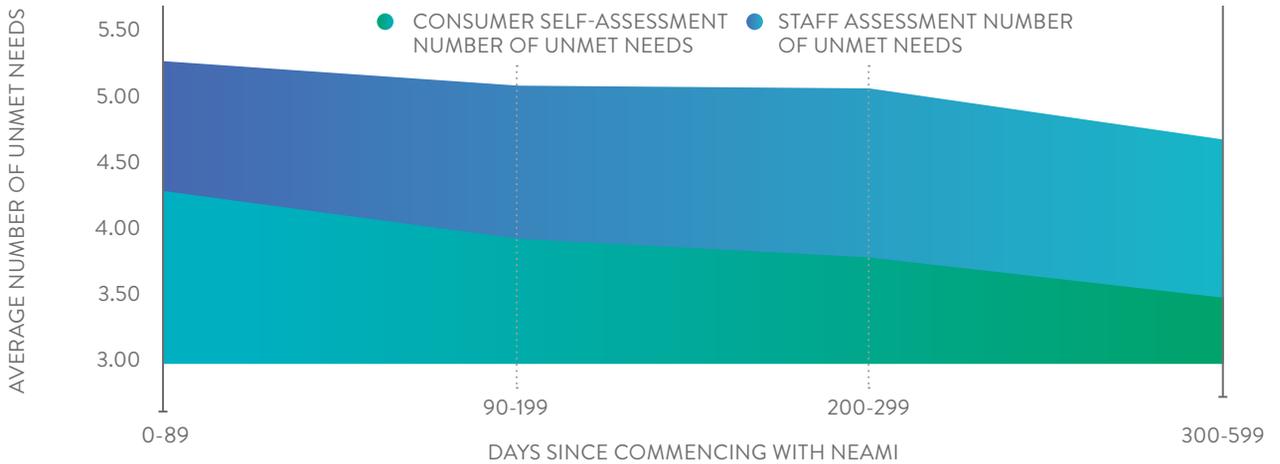
Neami provides services in:

- Individual support
- Step Up Step Down services
- Residential rehabilitation
- Service coordination
- NDIS supports (through Me Well NDIS Services)
- Recovery-oriented clinical services
- Suicide prevention
- Prevention and early intervention
- Housing and homelessness
- Youth mental health
- Intake assessment and referral
- Recovery-oriented training and development
- Employment support

Neami National snapshot

Over time we see a reduction in unmet needs

As we work with consumers, we see a decrease in the average number of unmet needs as individuals move through recovery and identify new goals and expectations. Consumers and staff use evidence-based tools to monitor changes in need.

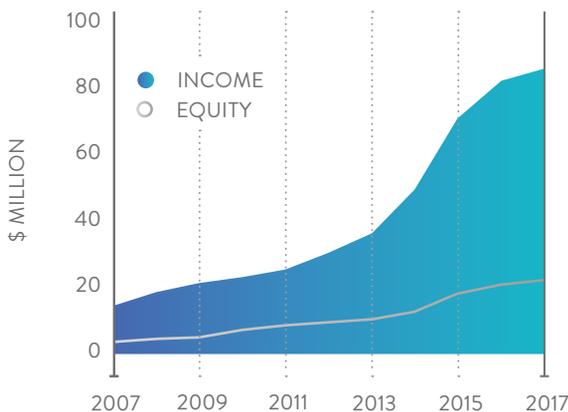


Note: approximately 70% of Neami consumers access Neami support services for up to 2 years.

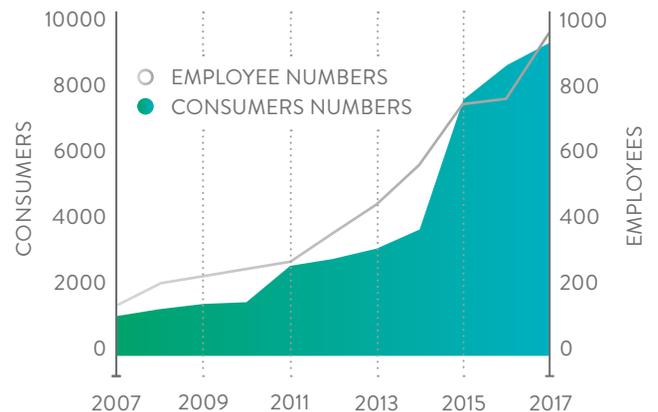
Our growth

As we have expanded the range and number of services delivered across the country; our capacity, depth and maturity continue to grow.

10 YEAR GROWTH: INCOME AND EQUITY



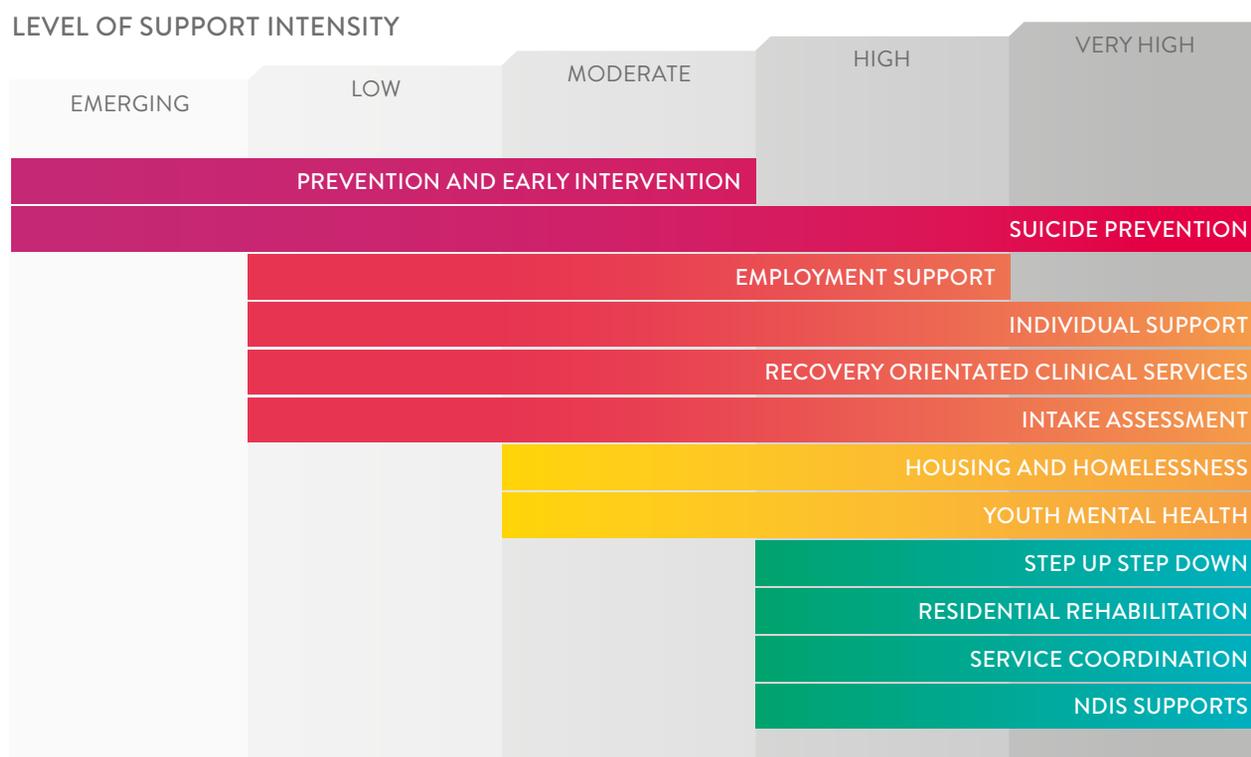
CONSUMER AND STAFF NUMBERS



Where we make an impact

As a specialist mental health provider supporting people with complex needs, Neami has traditionally provided services that fall within the 'high' to 'very high' levels of support intensity.

As we continue to expand our services, we design them with the flexibility to scale the intensity of interventions along the stepped care model.



Adapted from Principles for a person-centred system from the Report of the National Review of Mental Health Programmes and Services, National Mental Health Commission 2015

The value of listening to feedback

Feedback and complaints from consumers, staff and the wider community is an essential part of our growth. Our open and transparent approach is necessary to ensure continuous improvement, with themes reported to the Board for their oversight. We use this information to learn, enhance our offering and acknowledge the great work and initiatives that are taking place.

We welcome feedback in all our services and know a great experience starts with listening. This year we received:

111	86	25
Items	Complaints	Compliments

Valuing curiosity, understanding & experience

CEO and Chair report

As Neami moves through its 30th year, we reflect on what has made the organisation strong, fostered its growth and supported a culture that thrives on new challenges.

In an environment of uncertainty and complexity; we are proud to have remained true to our values, vision and mission.

The Board of Directors has endorsed our Strategic Directions for 2017-2020, closing the previous three-year period where we broadened the range of people we worked with and enhanced our sector advocacy. As we move into a future that demands we are agile, curious and adventurous, we have kept our directions simple. This clarity means we can be responsive and focused on delivering services that make a difference in the lives of consumers and carers.

By valuing innovation and the importance of a great consumer experience, we have been able to work in new places, with new people and with new approaches. We are privileged to work in new partnerships and communities around the country, extending our reach outwards from traditional psychosocial rehabilitation services into suicide prevention, low-intensity support

and working in partnership with organisations outside of mental health.

We have seen the NDIS rolling out faster than expected in some areas and Primary Health Networks (PHN) commissioning a host of new services. Through these changes, we see indicators of how recovery-oriented mental health services might look in the future. These developments provide some answers to questions about the funding landscape, but questions about the sustainability of the mental health sector remain.

Neami made submissions regarding the NDIS to the Federal Joint Standing Committee and the Productivity Commission. We also presented to the public hearing of the Senate Committee on the NDIS to elaborate on our submission. It was a great opportunity to share what we have learnt. While the NDIS is a great complement to the mental health system, we emphasised the need to maintain and resource a specialist mental health system.

As acknowledged by the Productivity Commission, by completely replacing community mental health services with the NDIS we risk people losing support due to gaps in eligibility and service provision. We continue to advocate for changes to address this risk.

There is excitement about the Fifth National Mental Health and Suicide Prevention Plan, with encouraging signs the Federal Government is listening to the sector. At the Mental Health Australia Parliamentary Advocacy Day and Members Policy Forum at Parliament House in March this year, consumer and carer engagement, the need for funding certainty, and matching funding with need, were recognised as priority areas. We welcome the shift in discussion and wait with cautious optimism to see if the policy uncertainty that affects the duration and continuation of successful services will shift as well.

To ensure people who are moving to the NDIS can continue to receive recovery-based mental health support, we are continuing the rollout of our wholly owned subsidiary Me Well. Neami Chief Operating Officer, Jenny Hall, is leading the Me Well implementation and, following rapid recruitment, we expect to see Me Well grow to around 150 staff; providing NDIS services to over 1200 customers in the next year.

Through our experience in NDIS trial sites in the Hunter region and Perth Hills, and following what we learnt from the acquisition of Pathways in Barwon, we understand the complexities for individuals and services produced by the transition to the NDIS. We know there is a need to address the funding viability of mental health support under the NDIS and have built our Me Well service to work within these constraints. We will remain open to opportunities; drawing on our experience to learn, evaluate and develop services to support people living with mental illness across the entire funding spectrum.

In this time of disruption and transformation, it was fantastic to receive the results from our annual Staff Engagement Survey. Reflecting Neami's belief that our people are the key to the organisation's success, and in the importance of shared values, we saw an increase in positive sentiment from staff across our

services; with 91% of staff recommending Neami as a great place to work.

Our merger with the June O'Connor Centre improves the sustainability of our service provision in Western Australia. With both organisations sharing values and a 30-year history of service delivery, we can ensure continuity of support as a combined organisation and a greater service offering for Western Australian consumers.

We would like to acknowledge the work and dedication of Stephen Brand, who has stepped down as Chair of our Board of Directors. Since 2011, Stephen's valued leadership has seen us maintain stability in a period of growth. Neami has welcomed Sonia Law as Chair and Brad Wynter as Vice Chair. Their experience and thoughtful leadership will further enhance our strategic and governance capability.

While we are experiencing unprecedented change and considerable challenges with NDIS viability and policy uncertainty, we maintain an optimistic vision of the future. We thank our staff for their openness and commitment while managing this uncertainty. We thank the people we support for their trust and all of our valued partners and funders who make our work possible. Through curiosity, understanding and experience we work to not only meet future challenges, but also thrive in new landscapes.



Arthur Papakotsias
Chief Executive Officer



Sonia Law
Chair

2017-2020 Strategic Directions

We are pleased to share the 2017 – 2020 Neami Group Strategic Directions.

As we celebrate 30 years as a thriving and innovative organisation, these directions guide us to move into a future which demands that we are agile and adventurous. We have moved to higher level, less prescriptive Strategic Directions to aid us in our current fast-moving operating environment.

We focus on what we do well and where we can improve, to make the most difference to the lives of Neami consumers, Me Well customers and the carers that support them.

We work to ensure that the Board, management and all staff understand how we will achieve these directions through clearly identified markers of success. Our shared values mean we are confident of achieving these simple yet powerful goals.

The directions are the culmination of many voices within the organisation and in the communities where we work.

Together with the National Leadership Team, we work toward successfully achieving each of these directions; unifying around a clear vision, mission and values.

1. Great Consumer Experiences

1. Achieve and ensure diversity of Neami's consumers, customers, staff, models of care, choice (how, what, who)
2. To delight our consumers and customers, so they become advocates for our services
3. Achieve positive, measurable health outcomes for our consumers and customers, focusing on physical health and social determinants of health (employment, accommodation, education)
4. Provide quality primary mental health care that supports consumers to self-manage, build resilience and reduce use of acute care
5. Deliver recovery-oriented services that are hopeful and aspirational
6. Ensure Neami retains and further adopts evidence-based practices
7. Increase community awareness of consumer and customer outcomes and our services
8. Increased staff capability and values alignment



Susanne and Terrance catching up near Neami Strathpine

2. Thriving Organisation

1. Seek opportunities for growth and renewal that are aligned with Neami National's values and deliver positive consumer and customer outcomes and benefits
2. Demonstrate innovative practices, models of care and workforce strategies
3. Progress as an adaptable and agile learning organisation built for innovation
4. Monitor and improve our organisational culture
5. Strengthen consumer participation, leadership and co-design
6. Strengthen governance

3. Partnerships with Purpose

Every partnership will advance consumer and customer outcomes and benefits while also supporting Neami to:

1. Innovate
2. Extend organisational capability and reach
3. Deliver collective impact
4. Influence and provide leadership across the sector (policy, service model efficacy, funding attraction, strong collaboration)
5. Offer something new to benefit consumers, customers and the community
6. Promote consumer co-design and co-production

Delivering safe and high-quality services

All staff members share responsibility and are held accountable for providing safe and high-quality services, minimising risks to consumers and continuously monitoring to improve what we do.

With clear and supportive leadership, we have embedded our Quality Safety and Clinical Governance Framework within all our services. Our staff members have well-defined and understood roles, and embrace their responsibilities at all levels of governance.

Our Quality and Safety committees report at both an operational and board level, ensuring continuous improvement through ongoing performance measurement and risk management. By being consumer centred in managing quality and safety, including having consumer representatives on our Quality and Safety operational committee, we ensure we embed our values and our mission into all our processes and systems.

We have increased our quality, compliance and risk capacity in line with our organisational growth, and are reviewing our risk and compliance activities to

meet the changing environments in which we work. The priorities and approach detailed in our Quality Safety and Clinical Governance Framework guide our work, improving the everyday practices of all our services.

We have seen a maturation in our understanding of how to implement our approach in areas such as credentialing, complaints and feedback, risk management, critical incidents and supervision.

The strength of our culture is through insightful recruitment, transparency and ongoing staff training and professional development. We celebrate a workplace culture built on trust and honesty, and support openly disclosing incidents as they occur. We treat these as opportunities to learn and make improvements to our service.

Continuous improvement through After Action Reviews

56

After Action Reviews

We conducted 56 After Action Reviews in 2016-17, resulting in five organisation-wide improvements and many smaller procedural ones at a local level.

What is an After Action Review?

An After Action Review is a detailed review of the factors that led to a serious consumer incident and what we can do to prevent a reoccurrence.

Five organisation-wide improvements as a result of After Action Reviews.



Effective collaboration for better outcomes

Evidence shows that early and effective intervention can prevent acute episodes, avoid higher-levels of trauma, and reduce the need for hospital stays.

In collaboration with inpatient and community-based clinical services, we are evaluating and adapting our services to support consumers to avoid hospitalisations as they become unwell. This work also includes supporting a consumer's transition back to the community following hospitalisation. We design services to integrate with clinical services and primary care, enabling fast-track access to specialist services with a recovery focus.

Reducing hospital stays

Across Australia, we are seeing the evidence emerge for improved outcomes for people who spend time in our Step Up Step Down services. Also known as PARC services or sub-acute care, these short-term, residential-based services play an effective role in preventing acute illness and hospitalisation, enhancing self-management skills and resilience, and strengthening recovery gains following acute care.

As a recent model of service to Australia, our Research and Evaluation team have devoted considerable attention to exploring the effectiveness and value of this type of service. We are looking at the impact of the service on local health systems and recovery outcomes for consumers.

Working with independent researchers from the University of Western Australia, preliminary results from an evaluation of the Joondalup Mental Health Step Up Step Down (JMHS) service indicate the strength of this model of service to fill a gap in the local health system and improve recovery and wellbeing outcomes.

Results reveal that people who have accessed the JMHS service have benefited from reduced hospital admissions, shorter hospital length of stay, as well as reduced risk of presenting to hospital emergency departments. Findings reveal significant reductions in psychological distress, and significantly increased

general self-efficacy as well as work and social adjustment; at service exit compared to entry, for people who have accessed the service.

Along with partners from cohealth and North Western Mental Health, we are evaluating outcomes associated with a stay at the Northern and Arion Prevention and Recovery Care (PARC) services in Victoria. Findings from this study support those from the JMHS evaluation with significant reductions in hospital admission rates and time spent in hospital after a PARC stay.

We continue the work of evaluating this model of service with our involvement in a seven-part National Health and Medical Research Council-funded study exploring the appropriateness, effectiveness and efficiency of Victoria's adult PARC services.

Together the results of these studies represent an exciting step to inform consumers', providers and policy planners about the value and impact of this type of service on an individual's recovery and the continuity of support within local health systems.

51% reduction in admissions to inpatient units after PARC entry.

57% reduction in total number of days spent in inpatient units after PARC entry.



Complementing Clinical Care

Neami has the expertise of working in a fragmented care system that can be difficult to navigate for clients who have complex needs. We understand the importance of working consistently with local clinical mental health staff. To facilitate this, in New South Wales we introduced new Transition and Integration Liaison Officers (TILO) as part of our service offering.

Developed on the back of our experience with clinical partners in Step Up Step Down services, TILOs serve to support consumers when managing hospital admissions, treatment and medication support.

We use information gathered through the use of evidence-based assessment tools to inform the development of shared care plans with clinical staff, carers and families and other relevant health and community supports. We have found helping people put together a plan supports a successful transition back into their community.

TILOs have contributed to the exceptional success of our new Western Sydney Community Living Supports services, which met the service delivery targets within six months of operation. Following people's admission to hospital or care unit, TILOs have helped to establish, early on, the required services and supports for a smooth return to the community.

Drew

Drew has been a resident at the Neami Joondalup Mental Health Step Up Step Down service.

“Being here has given me a clear understanding of what’s happening and how to deal with it. It’s been a slow process, it’s day-to-day. Each day has its own sort of mini battles. Some days I wake up and I’m really good, other days I wake up I’m not so good, but I have coping mechanisms now that I can use and put into place.

“When those days are really bad. I know that I can get through the day because of what I’ve learned. Recovery is different for everybody. I know that my recovery has been definitely up and down. I’ve learnt more each time that I’ve come here. So it’s good.

“I feel better now because I’ve got strategies in place that I can use when I get too anxious or too stressed or I have a hard day. I know that through what I’ve learned here, I can put those things into place and they work. Then I feel better for it. I have a better understanding of what’s going on now.”

“Which is probably one of the reasons why I’m here as well, because I’m learning something new. Not just about the world but about myself.”

Knowing what supports recovery

Neami is involved in high quality, ethical, research and evaluation that translates knowledge into improved services and better outcomes for consumers.

Consumer knowledge, experience and expertise are integral to our research and evaluation activities. We utilise concepts related to co-design, co-production and participatory research in our work. We support consumers in exercising their citizenship right to contribute to new knowledge development.

This approach creates a space for mutual sharing between different forms of knowledge and expertise, resulting in outcomes that have relevance, value and credibility for consumers and staff.

This year we welcomed Dave Peters as the new consumer co-chair of Neami's Research and Evaluation Committee. Dave brings his experience as a person who has used Neami's services to support his recovery and a strong curiosity and interest in how research can drive innovation in mental health practice.

We have continued to build relationships with many university partners. Researchers and students continue to seek us out as a research partner.

We collaborate on projects that align with our values, strategic directions and that are likely to be of benefit for people with mental illness.

We improve the quality of our services through measuring short and medium-term outcomes and testing efficacy, consumer engagement and the clinical usefulness of new programs and interventions.

While reviewing and evaluating our services helps us learn what is and isn't working, evaluating consumers' experience of these services means we can make the necessary changes to create the best outcomes for all.

Extending the reach of our investigations

28

Research Projects

This year we participated in 28 research projects and evaluations with:

20

Partners

8

Universities

4

Focus Areas

Areas of study include:



Improving health and social equity

Addressing inequity caused by poor health literacy or barriers to achieving employment promotes social inclusion.

We take a holistic approach to health and wellbeing, continuing to improve the way we support consumers to enjoy better physical health and social inclusion.

A new approach to supporting people to reduce or quit smoking

Since 1996, we have seen smoking rates among the general population steadily decline; with current figures suggesting around 16% of the Australian population smokes. However, smoking rates for people living with mental health issues have remained relatively unchanged over this time with rates remaining at around 32%¹.

Previous attempts at targeting tobacco use have often had a 'quitting' focus, instead of a recovery-focused understanding of people's smoking habits. In response to this, our Health Promotion team has developed Kick the Habit, a program that utilises data from previous studies and consumers' experience of other 'quit' programs.

Working with leading epidemiological researchers from the University of Western Australia; Kick the Habit uses a change management method, directly informed by consumer experiences, to address support workers' assumptions, attitudes, knowledge and confidence to engage consumers in conversations about their smoking behaviours.

The program involves one-on-one coaching to develop a plan for reducing or quitting smoking. Each person's goals and reasons for reducing or quitting inform a unique smoking management plan. Kick the Habit also includes access to Nicotine Replacement Therapy to minimise symptoms associated with nicotine withdrawal and reduce complications with mental health symptoms.

Through close collaboration between a consumer, a GP and a Neami support worker the program offers people a new way to manage smoking reduction and improve physical health.

Full citizenship via pathways to employment

In New South Wales, Neami launched a new program aimed at supporting consumers to gain competitive employment. Built from the evidence-based Individual Placement and Support (IPS) model, WorkWell is demonstrating positive outcomes for consumers in South-East and Western Sydney.

Working with an employment specialist, participants receive flexible, tailored support throughout their employment journey. Unique for a community mental health service, WorkWell operates with a fully integrated IPS component. The program's success is derived from the consumer, support worker and employment specialist working together.

WorkWell is the result of a multi-year project that included co-production workshops and started with a survey of consumer employment goals. With 70% of the 180 respondents stating that they would like to work, many saw employment, training or vocational education as an integral part of their recovery journey.

WorkWell promotes the recovery benefits of social inclusion and closely integrates with mental health services. People are eligible for the program regardless of their health, education and working background. We are currently undertaking an evaluation of WorkWell with our research partners at the University of Sydney, with the results published in the coming year.

49% of the 132 WorkWell participants have gained competitive employment since the launch of the program in 2016

A further 25 participants have entered training, study or volunteer placements.

A close-up portrait of a woman with short, light-colored hair, smiling gently. She is wearing a dark grey hoodie. The background is a soft, out-of-focus green, suggesting an outdoor setting. The bottom half of the image is overlaid with a teal gradient, which contains a quote and the name 'Katie'.

“When I’m challenged with stressful events or am unwell at certain times, I can lean on support. Now I accept that my illness is a part of me, but it’s not who I am.”

Katie

Exploring a great consumer experience

To deliver a great experience for all consumers, Neami has embarked on a whole of organisation approach to change and improvement.

As we expand the range of our services, this provides us with the opportunity to have a fresh look at what is most important to consumers. As defined in our new strategic directions, we are committed to improving our services and consistently delivering great consumer experiences.

The Great Consumer Experience Plan is a long-term project with extensive stakeholder collaboration. We are researching what is at the heart of a great consumer experience and the role every staff member can play in achieving this for every consumer, every time.

Using a methodology that utilises continuous improvement practices, as well as governance and change management theory, we have incorporated the foundations of this project into our governance and leadership systems. We will review roles and responsibilities across the organisation and, through the findings, engage with staff to deliver a consistently great consumer experience.

With input from consumer and carer representatives; and steered by our Quality, Compliance and Risk team; the picture of what great consumer experiences look like will inform the continual monitoring, review and improvement of our services.

The changes we make because of this project will lead to an organisation that reflects how people want to experience the services we deliver.

What makes a great consumer experience?

29

Engagement Sessions

We ran 29 engagement sessions across our services to find what makes great consumer experiences.

280

Stakeholders

We held engagement sessions with 280 consumers, carers and staff across the country.

Emerging from the engagement sessions are pointers as to what makes a great consumer experience:



Knowing what is important

We work with consumers and staff to ensure we achieve genuine participation in a sustainable and achievable manner.

Since our inception in 1987, consumer participation has been embedded into Neami's approach; with people with lived experience represented across the organisation including at board level. This year we invested in a new Consumer Participation Development Coordinator as we continue to embed the practices outlined in our Consumer Participation Framework. With Consumer Participation Officers in each state, we have a coordinated approach to sharing opportunities for consumers to contribute to the improvement of our services.

301 people contributed
3,427 hours of paid consumer participation in the last 12 months.

Participation opportunities include interview panels, presentations, conferences, working groups, workshops, training, committees and communication activities.

Understanding what matters in youth residential care

In partnership with Orygen, The National Centre of Excellence in Youth Mental Health, Neami is undertaking a research project to identify what is important to the young people who use our Youth Residential Recovery Services (YRRS); as well as those who provide and support the service.

YRRS are residential therapeutic recovery programs for young people aged 16 to 25 who have a mental health issue. Young people reside onsite for up to 12 months. We support them to develop self-care strategies, enhance adaptive coping skills and practical life skills, establish and maintain healthy relationships with family and friends, and participate in education, training, employment, and other community activities.

The research study 'Understanding what Matters in Youth Residential Recovery Services' aligns with our strategic directions of increasing consumer participation in all areas of service design and delivery - consumer voices are central to this study.

Embedded in all aspects of the project are youth participation and consumer-led research strategies. The method utilises a participatory action research approach, allowing findings to be directly integrated back into service delivery. This agile and responsive process means that young people participating in the study can see the benefits during their residency. It also ensures that consumer researchers are integral to the research and involved at all stages of the project.

Enacting principles of co-design, a project steering group comprises of a mix of young people, Neami staff, and researchers from both Neami and Orygen. We look forward to the findings directly contributing to improved outcomes for young people and enhancing our understanding of best practice in youth residential recovery settings.

"There is a significant research gap in understanding how youth residential recovery services contribute to the lives of young people with mental health issues, and this project has the unique opportunity to contribute specialised knowledge in this area."

Magenta Simmons, Youth Partnerships in Research Coordinator at Orygen, The National Centre of Excellence in Youth Mental Health



Conversations about medication

Prompted by the rollout of two new Community Living Support services in Western Sydney, we identified a need to clarify staff roles and discussions around medication.

A survey of New South Wales staff found that some workers lacked confidence in their ability to support consumers with medication, while others believed that conversations about medication were outside their role.

We used a facilitated co-production workshop to identify how Neami staff can best support consumers around the use of medication. With consumer and staff involvement, the workshop was an opportunity to share perspectives; with the goal of developing resources on how to better support consumers with medication use.

Participants identified emotionally pivotal moments on a consumer's 'medication journey' to pinpoint opportunities for better support. Participants also discussed issues including adherence and compliance, negotiating treatment options, managing side effects, and the dignity of risk versus duty of care.

Consumers reported that they wanted more of a voice and more support from clinicians when negotiating their treatment options. A popular idea triggered by the workshop was for Neami to act in the role as a supportive ally, standing alongside consumers as they navigate this important and sometimes challenging area of their lives.

There was a strong consensus that recovery-oriented conversations about medication are an essential part of the consumer-support worker relationship and that work in this area will improve consumer self-advocacy. The material resulting from the workshop is contributing to new guidelines to support staff members and their role in conversations around medication.

Kamsiah

Kamsiah is supported by Neami Merrylands

"I was always told that I 'can't do this' or I 'can't do that'. Then I found out that I could do it.

"[Neami] let me be myself. They listen to me and respect what I say.

"Now I'm going to TAFE, which I never thought I could do. Now I know what mental health is, that I'm not crazy, and that I can get help."

Designing services to meet people's needs

Neami approaches new opportunities as a chance to tailor our services to meet the needs of individuals.

The changing funding environment and the shift to individual choice and control have seen us actively engage with Primary Health Networks and state governments to explore new opportunities.

Through creativity and innovation, our Service Development team has increased our capacity to respond to new opportunities that benefit consumers in this rapidly changing environment.

We strive to understand what works for consumers as we engage with an increasingly diverse group of individuals across a wide range of needs. Our new services draw on 30 years of experience, and a national perspective, to meet the needs of individuals and local communities.

Experienced in working with people with complex mental health needs, we have now tailored our coaching model to also enable people with lower intensity support needs to build resilience, recovery and wellness over shorter periods of engagement.

Our early intervention and prevention services have focused on removing the barriers to receiving high-quality services, which features in the design of all our new services. We have also seen that by consulting broadly in our implementation, we can create services that reach the people who need them the most, in ways that most suit them.

We are using the opportunities in these new areas to prepare for the future possibilities of service delivery, with modes that move beyond traditional community service approaches.

Designing services to reduce unmet needs

With the help of evidence-based tools, we ask consumers what helps them to live a meaningful life and design services to meet those needs.

% OF CONSUMERS WITH UNMET NEED

FIRST ASSESSMENT

LATEST ASSESSMENT

ACCOMMODATION

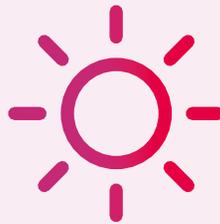
21.8%



17.4%

DAYTIME ACTIVITIES

48.8%



43.0%

PSYCHOLOGICAL DISTRESS

47.9%



42.9%

COMPANY

49.3%



45.1%

PSYCHOTIC SYMPTOMS

24.7%



22.6%

Source: CANSAS – Self-rated assessment. Change in unmet need taken from an initial self-assessment to the most recent self-assessment.

Supporting collective impact

Services that combine recovery and clinical approaches are showing us ways that future services can work successfully.

Positive outcomes for a wide range of consumers demonstrate that, by working with other community and clinical services we can achieve a collective impact. We strive to improve the sector as a whole by maintaining open and robust relationships with partners, as well as sharing our knowledge through training, learning and development opportunities.

Reducing recidivism in Corrections

Neami has a long history of working with people transitioning from custodial and community detention, as well as people with extensive forensic histories and high-risk behaviours. We work with community mental health teams to support people connected with or exiting the corrections system.

This year, we introduced the Optimal Health Program (OHP) for people linked to the Department for Correctional Services in South Australia. The program aims to assist the South Australian State Government's mission to reduce recidivism by 10% by 2020.

Working together with correctional staff and potential participants, we promoted OHP to create an awareness of how participants can make positive changes in their lives. Participants engaged in identifying their strengths and values and recognised how they could utilise these strengths to make changes.

Feedback from participants highlighted that when others shared personal strategies it assisted them to think of other options. Participants also reflected that even if they have participated in previous groups or used similar tools before, there was still more they could learn from this group. Feedback from corrections officers also supported participants' views that they found value from the program.

Feedback from the program indicated that participants recognised an increase in knowledge and an improved capacity for managing their health and wellbeing. We also saw improved social connectedness with a majority of participants experiencing better relationships

with family and friends. The improvements will assist the South Australian State Government's mission to support people to remain in the community and reduce reoffending.

Transdisciplinary teamwork

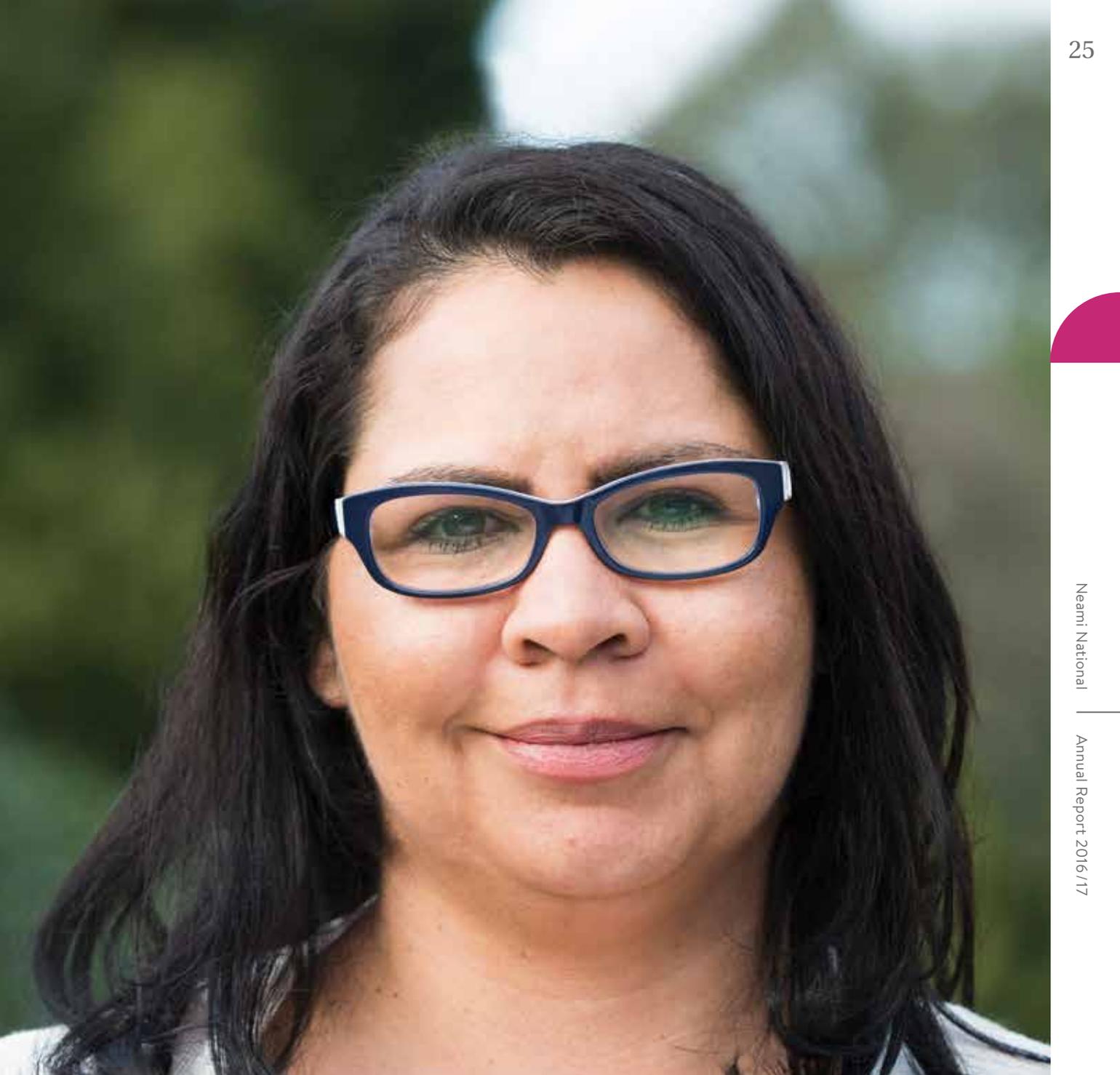
With renewed funding this year, we are excited to continue the work of our Wadamba Wilam Service in Victoria. Since 2013, the service has supported over 50 Aboriginal and Torres Strait Islander people in the Darebin and Whittlesea area who are experiencing homelessness and enduring mental illness.

Neami partners with Victorian Aboriginal Health Services, Uniting Care ReGen and Northern Area Mental Health Services to work with consumers from intake and throughout their journey into long-term housing and beyond, helping to ensure sustainable tenancies.

95% of people, who have secured housing through Wadamba Wilam, maintain their housing beyond 12 months.

The strength of the model lies in the capacity within the team, drawing on the expertise of each agency, to work with consumers intensively and proactively. We find that internal collaboration reduces the need for referral to external agencies, speeds up support and minimises the chances of people 'slipping through the gaps' in the service system.

Having a team with diverse skills such as psychiatry and psychiatric nursing, alcohol and other drug counselling, housing, and cultural knowledge provides an integrated response to multiple, often complex, needs. Working together has maximised opportunities for consumers and reduced the need for them to retell what are often traumatising stories.

A close-up portrait of a woman with long, dark, wavy hair, wearing blue-rimmed glasses and a pink top. She is looking directly at the camera with a slight smile. The background is a soft-focus green, suggesting an outdoor setting.

“I used to say in a joking way that my spirit ran away on me. Now I’ve found myself - my mind and my soul. I feel like the real me.”

Lona

Working in partnership to build capacity

Neami works in partnerships that support positive consumer outcomes and extend our organisational capability and reach.

Working with other organisations allows us to offer something new to benefit consumers and the community. We tailor our services to fit the needs of the local communities in which we work and, by collaborating, we can offer holistic services with a 'no wrong door' approach to access and support.

Sharing knowledge and expertise with community and clinical services helps everyone to understand how to best support good mental health and build awareness of our services.

Our collaborative approach to working with clinical mental health services, primary health services, and other community services has increased our understanding of local issues. In turn, we bring our broad expertise in mental health and recovery to these partnerships, which contributes to delivering collective impact.

When we support individuals and organisations to increase their mental health literacy, the capacity of the community to respond to people's mental health needs is enhanced. We do this through mental health first aid training, ongoing mentorship of community

first responders and educational tools for primary health and community services.

We recognise the importance of addressing the unique experiences of disadvantage within Aboriginal and/or Torres Strait Islander communities. We have actively increased our partnerships with Aboriginal and/or Torres Strait Islander community controlled organisations to grow our contribution to social and emotional wellbeing.

We work at all levels to influence and provide leadership across the sector; with our national leadership team contributing to policy reviews, promoting service model efficacy, funding attraction, and endorsing active collaboration.

Collaborating to design new services

Neami works with agencies through national, state and local partnerships to design and implement new services.



Early intervention and prevention

New, flexible services build resilience and offer preventive and low-intensity support.

As we diversify the range of people we support, we have used both our experience of delivering outreach services and the efficacy of the Collaborative Recovery Model to design services that target early intervention and prevention.

Meeting young people at different stages of the recovery journey

In partnership with the Eastern Melbourne Primary Health Network, we have designed a multi-disciplinary service for young people. YFlex will improve early engagement for young people by emphasising relationships and intensive psychosocial support, as well as integrated clinical care.

Our team will provide flexible support, meeting young people wherever they are on the recovery journey. Offering a wrap-around approach, the service provides integrated primary care with streamlined access to specialist services as needed. We know the importance of connecting with family and friendship networks, and link individuals with supports that match their needs.

The team will use mobile technology to maximise time spent with young people. Service provision will also make use of digital platforms to facilitate regular engagement. Our approach to maximising the service effectiveness with technology extends to online meeting spaces that enable support and connections for family and friends at convenient times.

The service seeks to address the gap in providing stand-alone support for young people who face barriers to engaging with primary health support, but who may not meet the requirements to receive tertiary care. Our tailored approach to the Collaborative Recovery Model will provide secure and responsive access to specialised, youth-friendly services; delivered by experienced workers who are aware of the developmental needs of adolescents and young adults.

Building community responses to suicide prevention

In response to the 2015 Commonwealth Government National Suicide Prevention Strategy, we launched two new services that build our understanding of how we can best contribute to suicide prevention.

In each of the three Perth metropolitan areas, we have Suicide Prevention Coordinators supporting local communities to appropriately respond to those at risk of suicide and improve postvention responses. Through promoting a better understanding of mental health and wellbeing, working to eliminate stigma, and engaging with local services to develop and deliver education around suicide prevention, we are looking to build capacity for community response and resilience.

In regional and remote Western New South Wales, we launched our Green Card Clinic. This service offers follow-up support to people who have presented to emergency with suicidal ideation or self-harm. To build community responsiveness and resilience, the Green Card Clinic provides training and mentoring for people who use the service; supporting them and nurturing opportunities to provide peer-based assistance to others at risk.

Training provides participants with an opportunity to build on the skills they have acquired, through their lived experience and in using the service. Our Green Card clinics are the first to implement our Community First Responder training. We are monitoring the impact of a network multiplier effect that this approach espouses.

The services we are designing work to improve the strength and understanding of community support to create a better health system. With better access to a flexible health care system, individuals (particularly those at risk or disadvantaged) will see improved health outcomes.

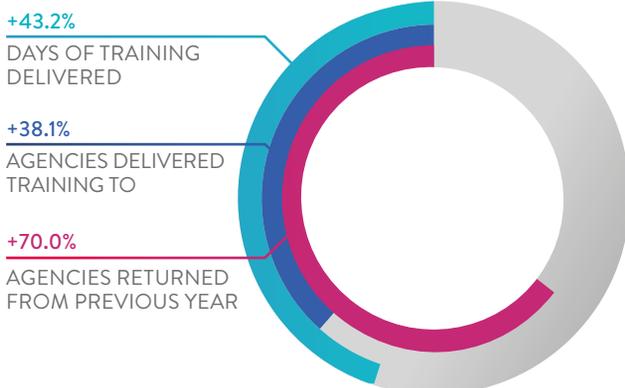


Sharing our knowledge

The Centre for Recovery-Oriented Practice (CROP) is a Neami initiative aimed at sharing evidence-based practice models and training that support recovery-oriented practice within the mental health and related sectors. This year, we adopted a partnering approach with a strategy to build and broaden fee-for-service training opportunities. We streamlined our training products to focus on two key areas: improving mental health literacy and developing specialist practitioner skillsets.

We delivered training in five states this year with 12 consumer and carer specific training days.

% = CHANGE FROM LAST YEAR



Ann

Ann has been supported by Links to Wellbeing in South Australia.

“I’ve suffered with acute depression for a long time. Recently I found myself in a pretty dark place. It became a case of having to do something before it became too late; I felt I had to seek assistance. I saw my GP, and they referred me on to Links To Wellbeing. I didn’t think I’d respond to a psychologist. I thought I was just too practical, but it’s worked out really well for me.

“We’ve worked together on approaches that I can use when I’m feeling anxious, depressed or even angry, like Cognitive Behavioural Therapy or deep breathing exercises. The strategies aren’t rocket science, but they really work. I don’t get so stressed over silly thoughts that run through my head.

“He’s helped me get back to work, which has been a huge part of my recovery. I think until you’ve been in that dark place, people don’t understand what is going on with you, because you look and act the same on the outside.”

“With help, I’ve come out the other side. Recovery has given me a totally different life.”

State overview

474

Consumers

Does not include June O'Connor Services

3

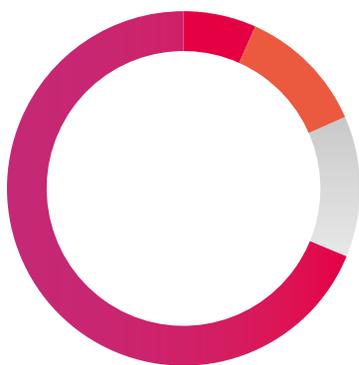
Sites

4

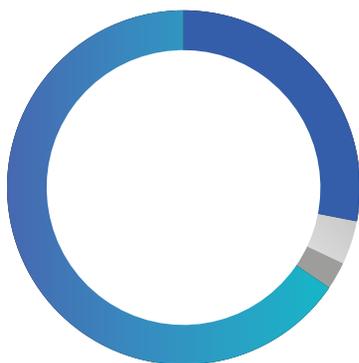
Services

72

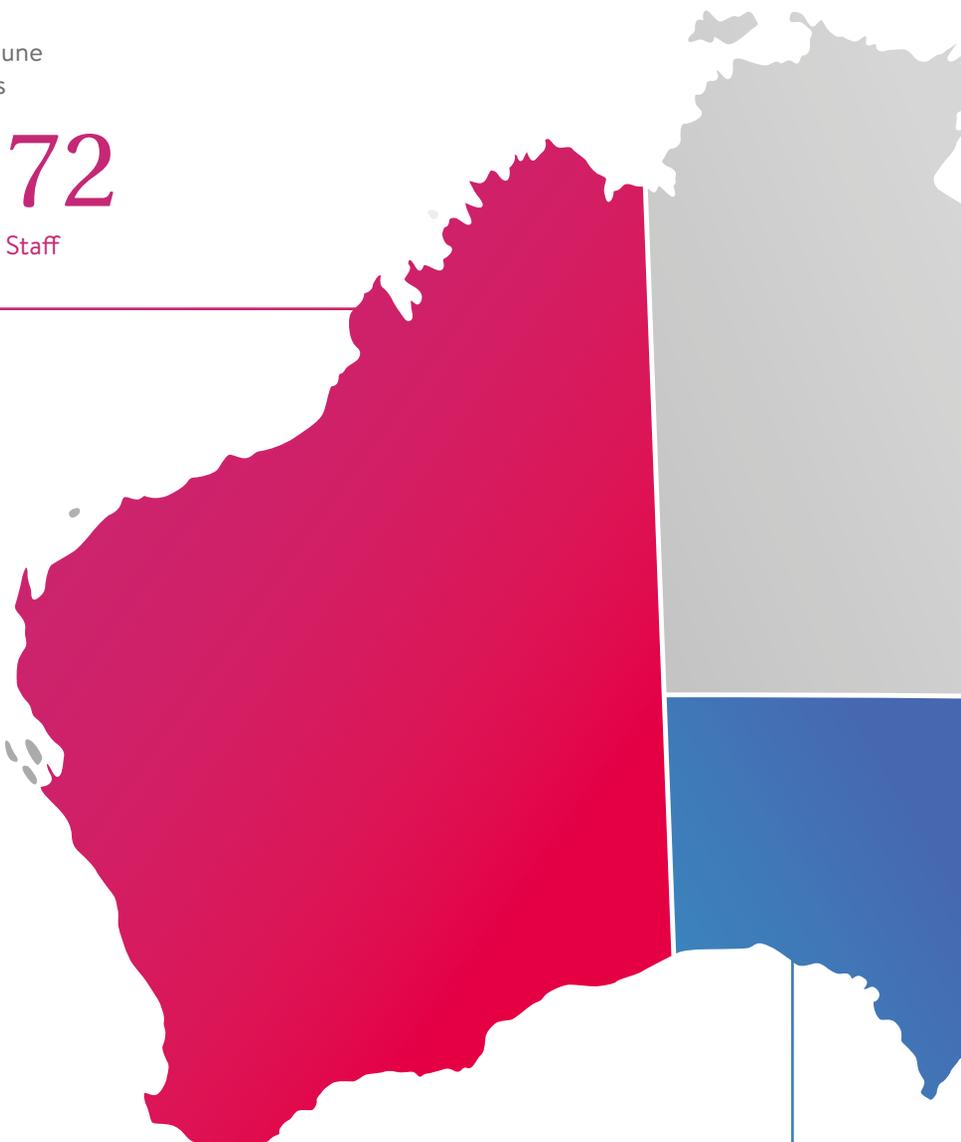
Staff



- STEP UP STEP DOWN
- INDIVIDUAL SUPPORT
- COMMUNITY PROGRAMS
- NDIS SERVICES



- INDIVIDUAL SUPPORT
- RECOVERY ORIENTATED CLINICAL SERVICES
- SPECIALIST SERVICES
- COMMUNITY PROGRAMS



1461

Consumers

Includes Links to Wellbeing consumers

7

Sites

8

Services

69

Staff

Consortia

956

Links to Wellbeing Consumers

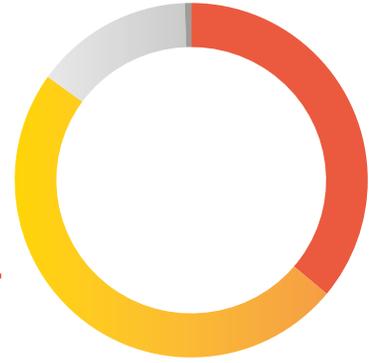
198

Central Adelaide Hills PIR Consumers

510

Consumers

- INDIVIDUAL SUPPORT
- SERVICE COORDINATION
- RESIDENTIAL REHABILITATION
- SPECIALIST SERVICES



6

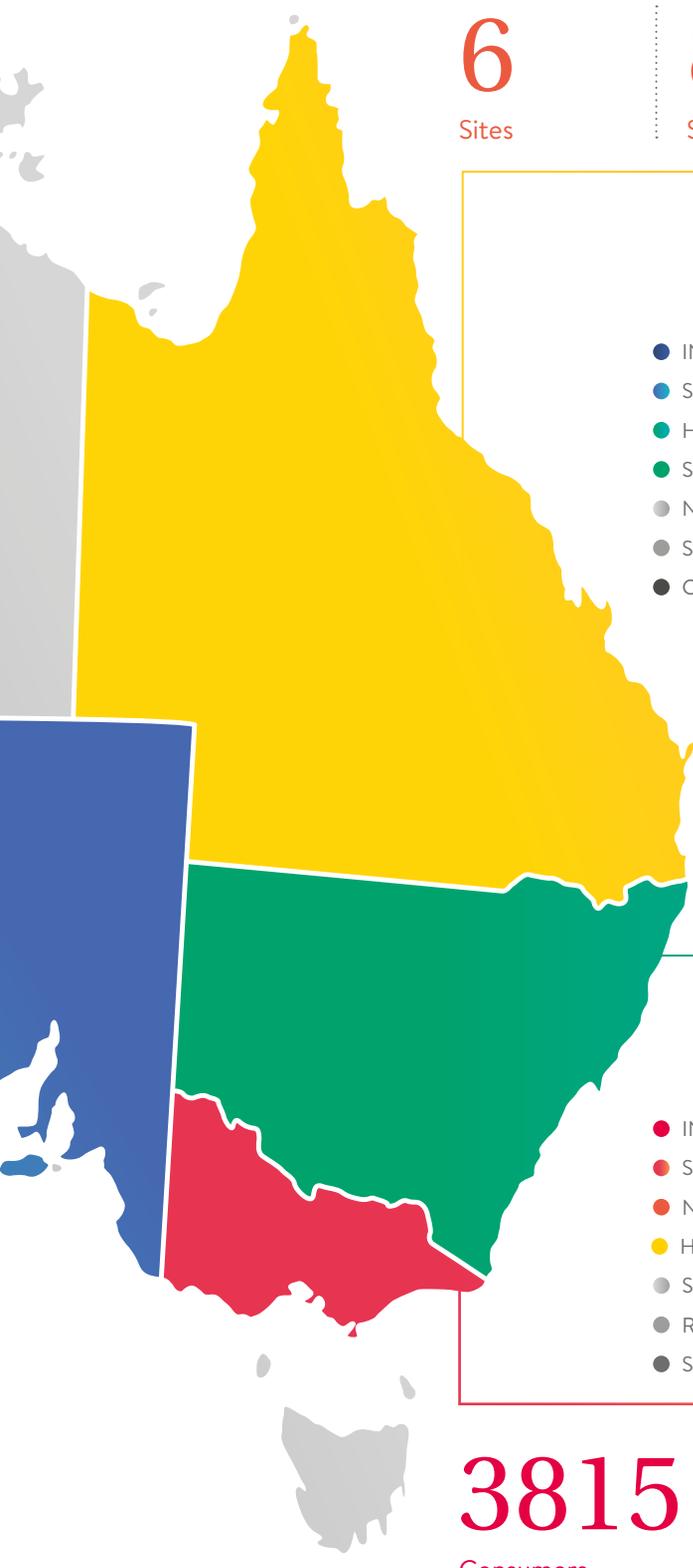
Sites

8

Services

64

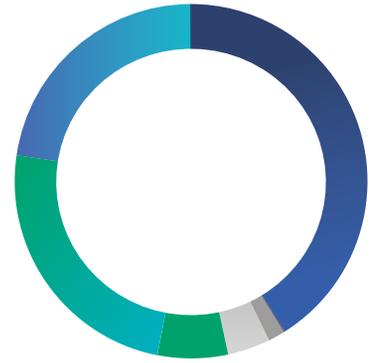
Staff



2411

Consumers

- INDIVIDUAL SUPPORT
- SERVICE COORDINATION
- HOUSING AND HOMELESSNESS
- STEP UP STEP DOWN
- NDIS SERVICES
- SPECIALIST SERVICES
- COMMUNITY PROGRAMS



13

Sites

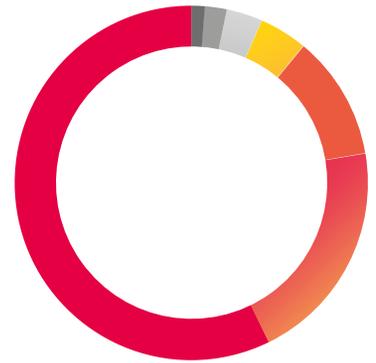
18

Services

240

Staff

- INDIVIDUAL SUPPORT
- SERVICE COORDINATION
- NDIS SERVICES
- HOUSING AND HOMELESSNESS
- STEP UP STEP DOWN
- RESIDENTIAL REHABILITATION
- SPECIALIST SERVICES



3815

Consumers

includes Me Well
NDIS customers

19

Sites

24

Services

540

Staff

includes Me Well
staff and 98 Head
Office staff

New South Wales

In New South Wales, we have had a tremendous year of change that encompasses success, challenges and embracing an environment of uncertainty. We have seen that as part of a national organisation (with a rich, 30-year history of providing consumer centred support) we can draw from our expertise and stability to adapt and innovate in a dynamic funding and political landscape.

We are using our experience in providing psychosocial support services to launch our NDIS services under a wholly owned subsidiary, Me Well. We have learned from experience here in the Hunter (as well as in Victoria and Western Australia) that we need to transform our services, not just transition them to the NDIS environment.

We have spent a good deal of energy developing our Suicide Prevention model, which we are excited to implement across our new services, especially the 'Green Card' services in Western and Far Western New South Wales. We have designed the services to utilise strong relationships in the broader community. The programs support individuals with targeted interventions, strengthening community resilience and build suicide prevention capacity through training and mentorship to consumers and community leaders.

Equipping people to help others is part of the role Neami plays in the community. We see early evidence of this in our Community First Responders and Way2Home Peer Advisors who have taken up Mental Health First Aid opportunities to support others in the community at risk or in need of support.

We also see that by removing barriers to competitive employment we have been able to enhance the social inclusion and participation of 132 people in our WorkWell program, with 65 people gaining competitive employment. With the expertise of employment specialists, this integrated program has continued to grow; with a co-produced review and rebrand warmly received during our annual graduation celebration in March.

In Western Sydney, we have seen tremendous success with our new Community Living Support services. We successfully delivered the service to 40% more people

than expected. This service is a pointer to how we will be working in the future, with more collaboration with clinical services and delivering value for the community. We have worked to resolve the range of perspectives shared between clinical and recovery-orientated services and found that through co-design processes and open collaboration we can work in complementary ways.

Sadly, this year we saw the closure of some services due to funding changes, including the Recovery Centre (sub-acute) service in Dubbo. Neami began operating the Dubbo sub-acute unit in 2013 and assisted more than 320 consumers to improve their mental health and avoid hospitalisation. Many consumers told us that the service was instrumental in their recovery and that the greatest asset was the quality of our staff.

We will continue to be creative in working together with state and federal funders to design and deliver services that meet the needs of the communities in which we work. Our supportive, understanding and open culture enables us to learn from any challenges ahead as we continue to talk together, ask questions and listen to strengthening the fabric of recovery.



Peter Gianfrancesco

State Manager,
Neami New South Wales

Queensland

Here in Queensland, we welcomed the implementation of the new mental health act; with key changes including advanced health care directives, the role of a nominated support person to be recognised, and the creation of independent patient rights advisor roles. While we are supportive of progressive rights for consumers, we know that the sector is finding its way through the changes.

We see the value of lived experience every day as our peer workforce continues to mature, contributing to the experience and vibrancy of our local teams. Our peer work and lived experience roles have developed this year, increasing in complexity and sophistication.

Our work in connecting consumers and organisations through our successful Partners in Recovery programs has fostered strong links to other agencies. By leveraging our experience working on innovative projects we have been able to launch programs targeting early intervention and hard to reach cohorts. We commenced a low-intensity service delivering the Optimal Health Program (OHP), in partnership with the North Brisbane Primary Health Network. The program tailors OHP to meet the needs of vulnerable people, including those that identify as LGBTIQ and people transitioning from correctional services.

To build capacity in the sector, we ran training programs across the south-east of the state for 60 new facilitators of Wise Choices. Wise Choices is an Acceptance and Commitment Therapy-based skills development group for people experiencing personality vulnerabilities. We coordinated the Wise Choices reference group and offered sessions teaching skills in handling difficult thoughts and feelings, mindfulness, and how to build healthy relationships.

We have been working with the local hospital and health services to improve the experience of consumers while in hospital. Our staff have co-facilitated a fortnightly Discharge Information group and kiosk in acute wards, and have run two Flourish groups at the Prince Charles Hospital. These programs stem from our active involvement in the Discharge Transition Action group (DTAG);

which is soon to deliver recommendations on service improvements around entry and orientation to the wards, recovery planning, multidisciplinary team reviews and community services.

To prepare for the coming changes of the NDIS we have resourced a specialised team to focus on how to best implement Me Well NDIS services. We know that people are having difficulty navigating an unfamiliar system and there is uncertainty about the best way forward. True to our claims of innovation and agility, Me Well is our approach to working in a consumer choice and market-focused environment while maintaining a mental health focus.

Our collaboration with the Cairns and Hinterland Hospital at the Cairns Community Care Unit has matured. By working constructively with clinical teams, we are seeing the benefits of recovery-orientated, residential rehabilitation in assisting people to regain independence and transition back to their communities after hospital.

We see a strong work culture at a site level; despite the uncertainty, we know the answers to the day-to-day questions. We are confident we can support consumers but do not overstate things. With a good attitude and the right information, we can approach uncertainty with responsiveness, authenticity and experience.



Tanya Miller

State Manager,
Neami Queensland

Valuing curiosity, understanding & experience

South Australia

In South Australia, we have experienced a welcome period of consolidation. We were pleased with the 12-month funding extension for our psychosocial support programs; this has added certainty, provided the space to continue with what we do best, and resulted in us exceeding our targets and expectations in service provision.

We have been able to use this time to prepare for the changes brought by the NDIS. From our experience in Victoria and Western Australia, as well as in the Hunter NSW trial site, we learnt that to thrive under the NDIS we need to transform our services, not just transition. This experience will see us launch our NDIS services under a wholly owned subsidiary, Me Well, rolling out across Adelaide in 2017.

We have been deepening our expertise and focusing on delivering great consumer experiences. The lived experience of consumers and our staff continues to inform the way we work and the types of services we offer. We are proud of the maturity and complexity of the work of our Peer Support staff and recognise the contribution this makes to Neami as a leader in the mental health space.

We have seen an extension of lived experience roles with a regional focus in our Peer Health Coaching. Peer Health Coaches draw on their experience to support participants to set and move towards specific physical health goals. The outcomes we see from making improvements in physical health has prompted us to look at other aspects of our service, including the role that sustainability and the environment may play in recovery.

The importance of contact with natural environments for health and wellbeing is well understood, and our nature-based 'Next Steps' Walking Program presented a unique opportunity for the University of South Australia to work collaboratively with us on a research project. The research is exploring how the impact of exposure to 'green' exercise affects people with severe and enduring mental illness in their self-esteem, mood and connection with nature.

We continue to benefit from our work as the lead agency in the Central Adelaide and Hills Partners in Recovery program. Assisting services to work in a collaborative, coordinated and integrated way has built our capacity to respond rapidly and adapt in a changing environment.

In South Australia, we saw the positive outcomes of our existing consortia experience and the strength of working collectively. Our Links to Wellbeing service integrates with clinical and primary mental health services across the stepped care model. Working as a consortium, we draw on the strengths of each agency to offer full coverage of the stepped care model. This 'one door' approach means that the service is flexible and can respond to changing needs throughout a recovery journey.

We have continued to focus on our work with consumers despite the noise of the changing environment, and as a result have been able to continue to deliver high-quality services. Our expertise is helping us prepare for the future, where we can bring our specialist understanding to support the work of others. We have looked beyond our traditional specialist sector and engaged in areas such as homelessness and corrections, to make changes that benefit the whole community.



Kim Holmes

State Manager,
Neami South Australia

Victoria

In Victoria, we have been reckoning with the full cashing out of the community mental health system to the NDIS. We know that there is a risk of gaps in the availability and quality of mental health support under NDIS; and so are concerned with the substitution of the community mental health system with the NDIS and the consequence of their differing functions.

Our acquisition of Pathways in Barwon facilitated two equally important objectives. We were able to provide the consumers of Pathways with continuity of care, ensuring 270 people who were at risk of losing support maintained access to a service. We also used this event to learn about what works and what does not when delivering recovery-oriented mental health support under the NDIS. We saw in detail how a failure to adapt to the changed conditions of the NDIS ended in market failure.

We recognised that we needed to transform, not just transition and saw evidence that thriving under these circumstances means more than altering the way our services worked. We needed to build a new organisation supported by financial, information technology and corporate functions that are designed to work in a new paradigm. To be lean and responsive in meeting NDIS market demands we created Me Well, a wholly owned subsidiary. Over the last twelve months, we have been ramping up Me Well services to meet customer needs as the NDIS rollout continues.

In the North East of Melbourne, where Neami started 30 years ago, we have seen a third of referrals to Me Well coming from people new to us. We will continue to expand our services with the aim of attracting new customers as well as supporting Neami consumers who choose Me Well.

Also, we have been engaging with Primary Health Networks (PHN) and embracing the wealth of opportunities to broaden the range of people we support. We were successful in securing new services this year that will kick off in the second half of 2017.

YFlex will operate in outer Eastern Melbourne, working with young people who are facing significant

barriers to accessing mental health services. The program integrates with clinical care to reconnect young people with mainstream health, mental health and community support.

Steps to Wellbeing offers brief interventions for people with low-intensity support needs. The new service matches people with Wellbeing Coaches and provides support to manage stress, anxiety and depression. This program includes a robust evaluation of the use and efficacy of online video consultations.

Our ongoing partnerships and co-locations in Victoria have been instrumental in developing our early intervention and preventative responses. When we work like this, we can break down silos between agencies; with teams of people from specialist fields coming together to collaborate. When working with consumers who have complex needs, collaboration is crucial. Our Wadamba Wilam program continues to see remarkable outcomes for Aboriginal people, with clinical and community services coming together to work in a transdisciplinary method.

While the rollout of the NDIS in Victoria has seen some of our longest running outreach services close, we have seen better than expected growth in Me Well with brilliant new staff joining us to support NDIS customers. With the new PHN funded services, we have been able to utilise our experienced Neami staff and will continue to take advantage of future opportunities.



Glen Tobias

State Manager,
Neami Victoria

Valuing curiosity, understanding & experience

Western Australia

It has been a bumper year for us here at Neami in Western Australia. After consolidating our services and focusing on our role delivering traditional psychosocial and specialist support, we have seen the fruits of our work and experienced considerable growth.

A new project is underway, funded by WA Primary Health Alliance (WAPHA), which will provide treatment and support for people with alcohol and other drugs or mental health issues in the Perth North Primary Health Network area. The AoD and Mental Health Integrated System of Care project is an alliance between Neami (as the lead agency) and Hope Community Support, Apollo Health (by St John) and the Aboriginal Health Council of Western Australia (AHCWA). The service will work in close collaboration with GPs, mental health services and other primary care services to provide Alcohol and Other Drugs and Mental Health counselling services. You will hear more about the service following a co-production process based on how we can best meet consumer's needs.

We were pleased to see the early results from a longitudinal study of Joondalup Mental Health Step Up Step Down service (JMHS), and the impact the service has in reducing hospital usage for people who have spent time at the service. The as yet unpublished data sees a significant reduction in admission episodes (related to mental health and other causes) and length of stay for JMHS consumers following their stay. We will be publishing the full report later in 2017 following the completion of an independent analysis from researchers from the University of Western Australia.

Our new Suicide Prevention service rolled out in each of the three Perth metropolitan areas. We have Suicide Prevention Coordinators supporting local communities to appropriately respond to those at risk of suicide and improve postvention responses. We are also building community capacity for intervention and resilience by engaging with local services to develop and deliver education around suicide prevention.

While we still have uncertainty over the final NDIS model to roll out in Western Australia, we have seen steady growth in our Me Well service at Perth Hills. Neami delivers all NDIS services through our wholly owned subsidiary, Me Well. We have had great

feedback about the capabilities of our staff to work in the NDIS environment including our specialist support and clinical staff.

The growth we see in Western Australia will continue as we live up to our reputation of delivering innovative new programs with consistently positive outcomes for consumers.

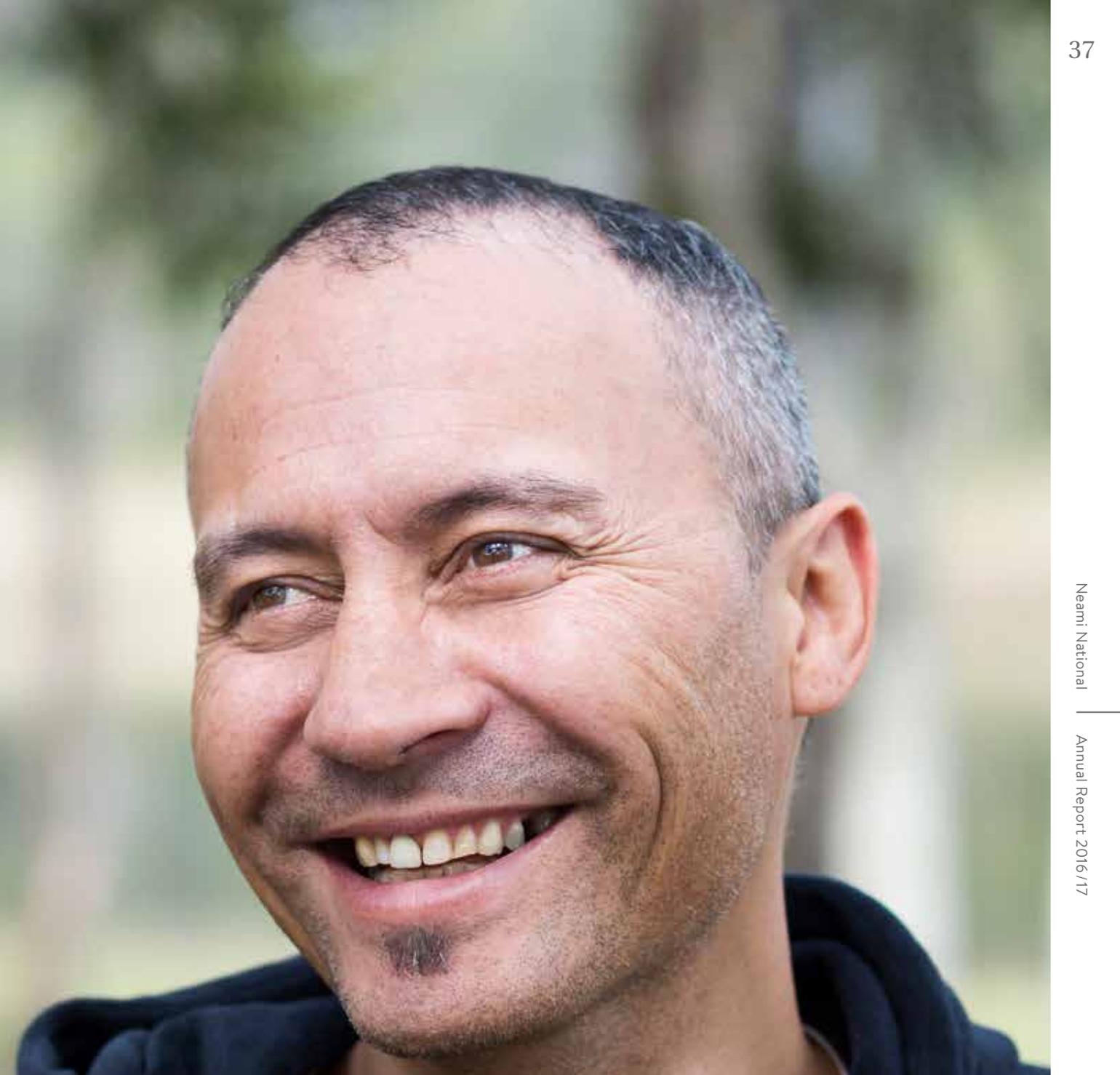
We welcome the June O'Connor Centre

This year we finalised the merger between the June O'Connor Centre (JOC) and Neami with services previously provided by JOC, now provided under Neami. All JOC staff transitioned to Neami and access to services has been unchanged under these new arrangements. Both organisations share values and vision and, this year, both share a 30th anniversary of providing high-quality community mental health services. We are confident that this merger has strengthened the ability for us provide services in Western Australia.



Glen James

State Manager,
Neami Western Australia



“While recovery looks different for different people, I think it always looks like hope.”

Terrance

Community Rehabilitation Support Worker at Neami Strathpine.

Staff and culture

78% of staff participated in our annual Staff Engagement Survey with our staff engagement rate remaining at 71%

78% of staff believe that the leaders at Neami demonstrate that people are important to the organisation's success

91% of staff would recommend Neami as a great place to work

83% of staff said they are encouraged to innovate, even though some initiatives may not work out

Staff engagement

Our annual Staff Engagement Survey provided useful insights about how staff sentiment changes over time, as well as further data to guide continuous improvement.

In this period of disruption and transformation, it was fantastic to receive the results from the survey. With 78% of staff participating, we saw an increase in positive sentiment from staff across our services with an overall engagement rating of 71%. The results, once again, place Neami staff engagement above the benchmarks for organisations in a range of industries in the South Pacific region.

The results reflect Neami's belief that people are the origin of the organisation's success. With 91% of

staff recommending Neami as a great place to work, we are reassured and confident in our capacity to provide specialist mental health services in this new funding environment.

Valuing the role of lived experience

Our experience of Peer Work has matured, with flexibility in these roles expanding as we introduce new services. Supported by our Peer Work Framework, new roles for the peer workforce have emerged, including within research and evaluation.

We celebrate the importance of peer work and lived experience in promoting positive outcomes for consumers.

This year we ran 36 groups of Flourish, our peer-facilitated self-development program. 356 consumers participated in one of the 545 sessions held around the country.

Staff Support and Development Framework

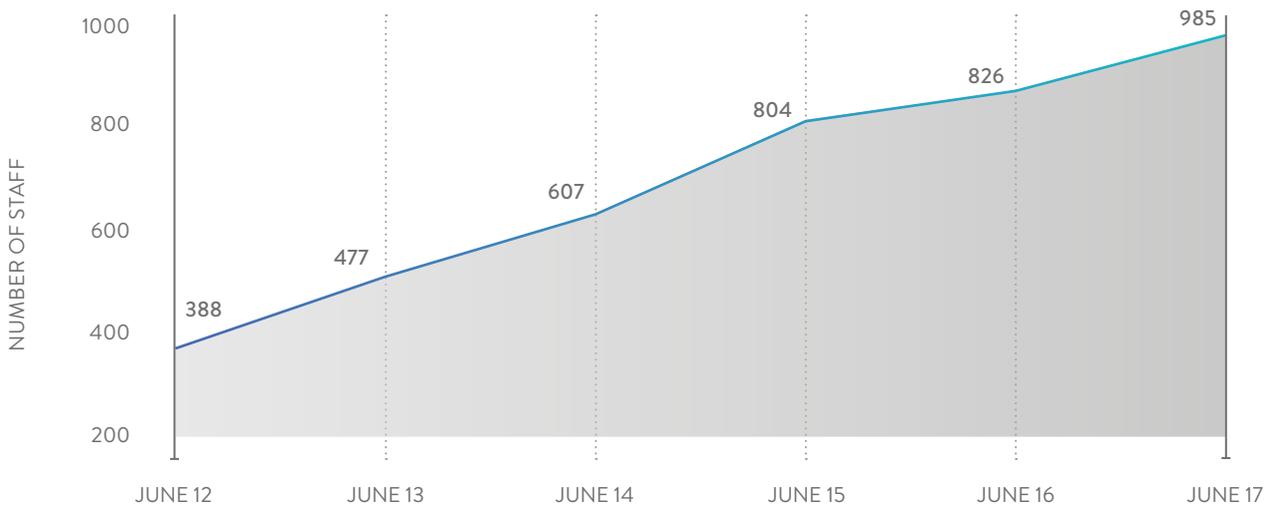
Meaningful staff support and development is key to Neami's provision of quality services. This approach has evolved and continues to influence both work satisfaction and continuous improvement.

As Neami continues to expand and diversify, a more adaptive approach to staff support and development has emerged as being essential to meet the contextual needs of staff and to continue to respond to the ever-changing community support sector in each state.

All staff received training in a new streamlined Staff Support and Development Framework, which was a project commissioned because of the last Staff Engagement Survey. The new framework is more flexible and adaptive; underpinned by coaching, bi-annual feedback and goal setting at individual and team levels and a focus on recognition.

Staff snapshot

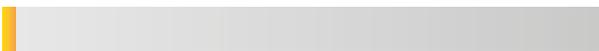
STAFF FIVE YEAR GROWTH



18% OF STAFF IDENTIFY AS CULTURALLY AND LINGUISTICALLY DIVERSE



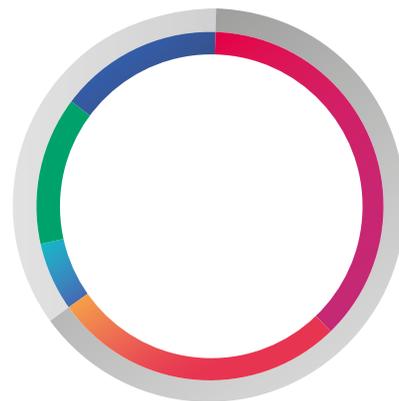
2.3% OF STAFF IDENTIFY AS ABORIGINAL AND/OR TORRES STRAIT ISLANDER



70% OF NEAMI STAFF ARE FEMALE



65% OF OUR STAFF HOLD A BACHELOR DEGREE OR HIGHER



- SECONDARY
- CERTIFICATE I-V
- DIPLOMA
- BACHELOR DEGREE
- POST GRADUATE DEGREE

32% OF OUR MANAGERS HAVE BEEN WITH US FOR MORE THAN 6 YEARS

45% OF OUR SENIOR MANAGERS HAVE BEEN WITH US FOR MORE THAN 6 YEARS

Consumer snapshot

GENDER



NUMBER OF DIAGNOSES PER CONSUMER

89.9%

1 DIAGNOSIS

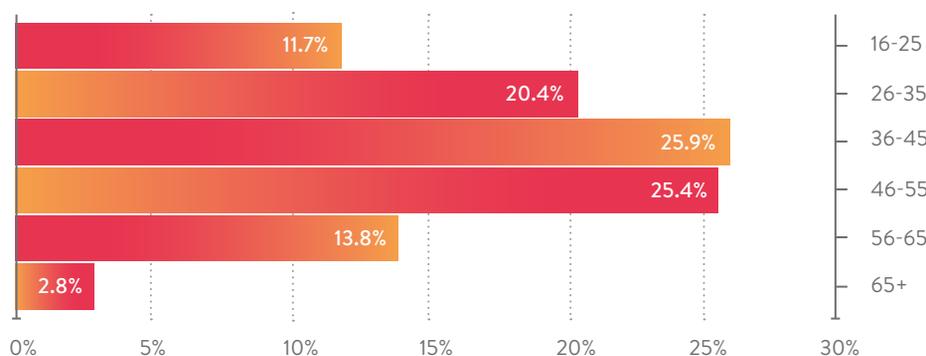
7.6%

2 DIAGNOSES

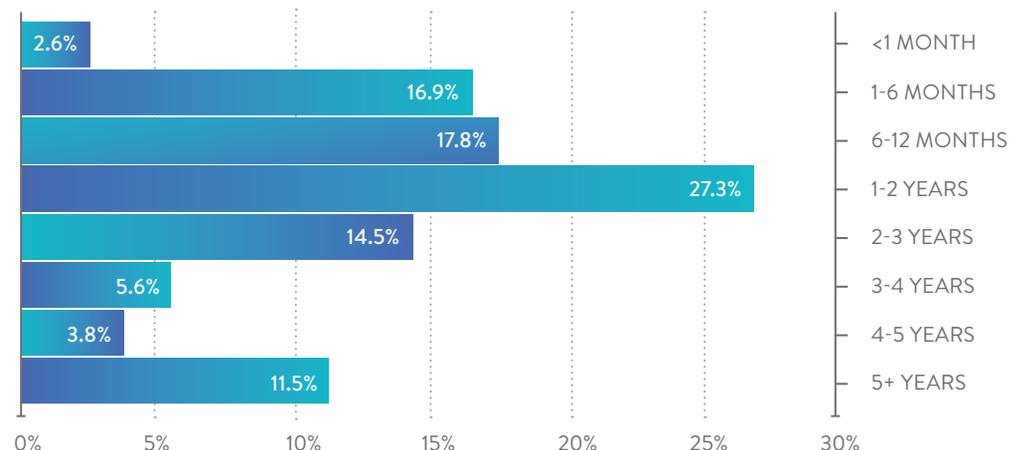
2.5%

3+ DIAGNOSES

We work with people between the ages of 16 and 65

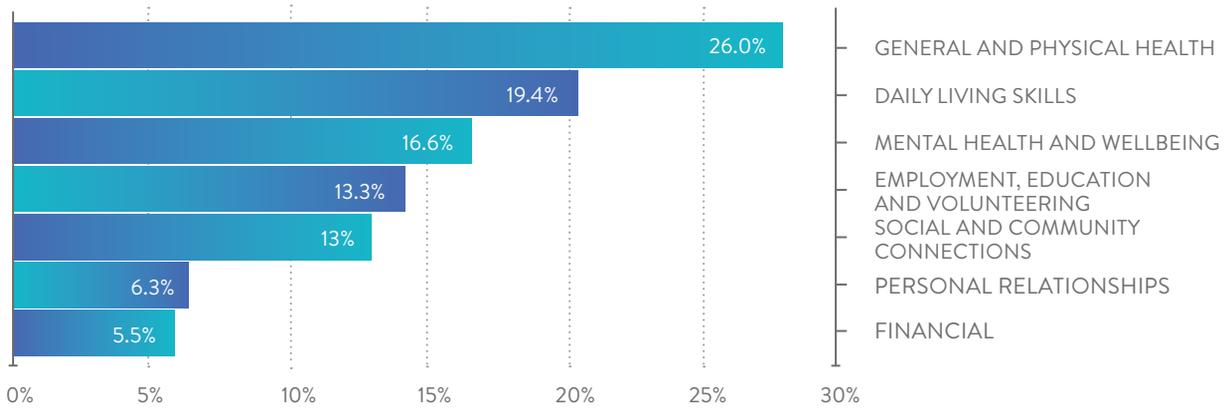


79% of people have exited our services after 3 years



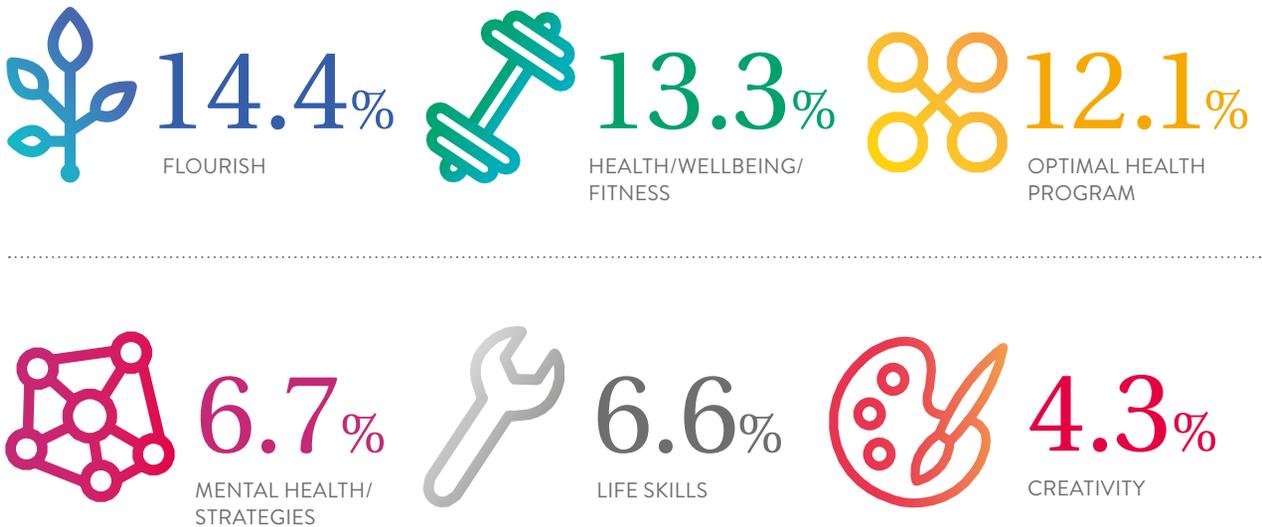
We use evidence-based tools to assist consumers to identify meaningful goals

THE MOST COMMON AREAS OF IDENTIFIED GOALS. SOURCE: CRM PROTOCOLS



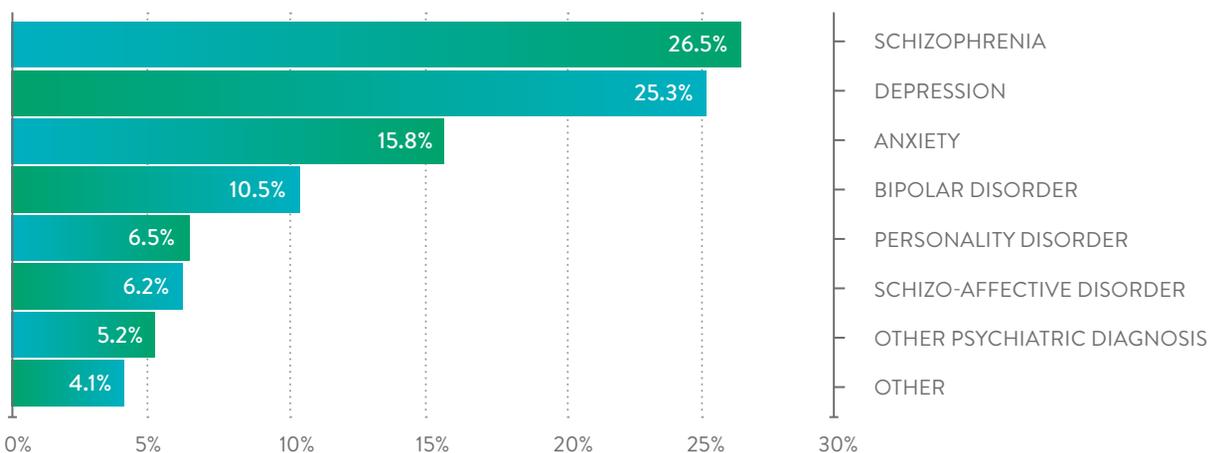
We offer group and community activities that support consumer goals

THE HIGHEST ATTENDED GROUPS AT NEAMI



Diagnosis does not determine eligibility, with 16.4% of consumers not having a listed primary diagnosis

% OF CONSUMERS WITH A SPECIFIC MENTAL HEALTH DIAGNOSIS



Funding

Neami National is a not-for-profit organisation that receives funding from federal, state and local governments.

We have a range of partnerships at national, state and local levels, including both formal and informal partners. We thank our funding partners for their ongoing support and for working collaboratively to achieve full citizenship for people with mental illness.

National

- Commonwealth Department of Health
- Commonwealth Department of Social Services
- National Disability Insurance Agency

New South Wales

- Central and Eastern Sydney PHN
- City of Sydney
- Coordinare PHN
- Far West NSW LHD
- Grand Pacific Health
- Housing NSW
- Hunter Primary Care Network
- NSW Health
- New South Wales Department of Family and Community Services
- New South Wales Department of Ageing, Disability and Home Care
- New Horizons
- St Vincent's Hospital (Sydney)
- Western NSW LHD
- Western NSW PHN
- WentWest PHN

Queensland

- Aftercare
- Brisbane North PHN
- Brisbane South PHN
- Cairns and Hinterland Hospital and Health Service
- Queensland Department of Communities, Child Safety and Disability Services
- Queensland Health

South Australia

- Adelaide PHN
- Country SA PHN
- SA Department for Communities and Social Inclusion
- SA Department for Correctional Services
- SA Health

Victoria

- Barwon Health
- Court Services Victoria
- Eastern Melbourne PHN
- Melbourne Health
- Returned and Services League (VIC)
- Transport Accident Commission (TAC)
- Victorian Department of Health and Human Services
- Victorian WorkCover Authority

Western Australia

- WA Mental Health Commission
- WA Health
- WA Primary Health Alliance

Partners

Neami works with organisations and agencies to draw value from existing networks and local understanding.

We continue to reach out and connect with organisations and agencies in areas such as mental health, community health, welfare and social support, culturally diverse communities, training, housing and homelessness, local government, arts and culture and recreation and healthy living.

Service, research and community partners

- 4Walls
- Access Housing
- ACSO
- Alliance Housing
- Area Mental Health (VIC)
- Argyle Housing
- Banyule City Council
- Banyule Community Health
- Barwon Health
- Bellarine Community Health Service
- Boroondara City Council
- Bridge Housing
- Brisbane City Council
- Campbell Page
- Centrelink
- City of Darebin
- cohealth
- Community Housing Limited
- Compass Housing
- Council to Homeless Persons
- Darebin Community Health
- EACH
- Ecclesia Housing
- Fairfield City Council
- Family Mediation Counselling (FMC)
- Flinders University, School of Social Work
- Haven; Home, Safe
- Headspace Frankston / Bentleigh
- Healing Foundation
- Health Service (WA)
- Helping Minds
- Homelessness NSW
- Housing Australia
- Common Ground
- Housing Choices Australia
- Hume Housing
- Hurstville City Council
- Jack Randall of 'FishDog'
- Jobco Employment
- Launch Housing
- Life Without Barriers
- Local Area Mental Health Services in NSW, SA, QLD, VIC and WA
- Local Health Districts (NSW)
- Local Health Networks (SA)
- Lyndon Community
- Marathon Health
- Mental Health Australia
- Mental Health Coalition of South Australia
- Mental Health Coordinating Council
- Mental Illness Fellowship South Australia
- Metro Housing
- Metro North Hospital Health Service
- Metro South Addiction and Mental Health Services
- Mind Australia
- Mission Australia
- Monash University
- Monash University – School of Languages, Literatures, Cultures and Linguistics
- North West Primary Care Partnership
- Northern Area Mental Health Service (NAMHS)
- Northern Health Network
- Northern Housing Pathways program
- NorthWestern Mental Health
- NSW Mental Health Commission
- Nunkuwarrin Yunti
- Open Minds Australia
- Orygen, The National Centre of Excellence in Youth Mental Health
- Pacific Link
- Peninsula Health
- Platform 70
- Portway Housing
- Property Trust
- PVS Workfind
- Queensland Alliance
- Quit Victoria
- Rosebud Youth Hub
- Salvo Care Eastern
- SANE Australia
- Skylight (formally MIFSA)
- South Dubbo Rotary Club
- Southern Dual Diagnosis
- St George Community
- St Vincent's Hospital (Melbourne) inc. Frameworks for Health and Nexus
- St Vincent's Hospital (Sydney)
- Statewide Aboriginal Mental Health Service
- Swinburne University
- The Housing Trust
- The Mercy Foundation
- The Salvation Army (SA)
- Tribal Warrior Association Ltd
- Turning Point
- Uniting Care Wesley Bowden
- Uniting Care Wesley Port Adelaide
- UnitingCare ReGen
- Unity Housing
- University of Melbourne Dental School
- University of New South Wales
- University of Queensland Dental School
- University of South Australia
- University of Sydney
- University of Western Australia
- University of Wollongong
- VICSERV
- Victorian Aboriginal Health Service
- Victorian Transcultural Mental Health
- Wear for Success
- Wellington Aboriginal Medical Service
- West Moreton Hospital and Health Service
- Western Australian Association for Mental Health
- Western Plains Cultural Centre

Corporate, pro bono and philanthropic partners

- Amy Piesse Photography
- Blue Connections
- Blueprint Information Security
- CBA
- EmpLive
- Grant Thornton
- Gozer Design
- Herbert Smith Freehills
- Keen Legal
- Lander & Rogers
- Leaseplan
- MinterEllison
- Pinnacle Group
- Pitcher Partners
- Purpose Driven Consulting Services
- Today Design
- Technology One

Board of Directors



Sonia Law

Chair and Chair, Governance Review Committee

BA, LLB(Hons), PGradDipTESL, DipEd,

Sonia was elected to the Board in 2012 and elected Chair of the Board in December 2016. Sonia has been a lawyer since 2000. She is currently the Manager of the Mental Health and Disability Advocacy Program at Victoria Legal Aid. Before this, she was Corporate Counsel at Forensicare.



Stephen Brand

BSW, GradCertHSA, GAICD

Stephen was elected to the Board in 2006 and was Chair for five years from 2011 until 2016. Stephen has worked most recently for the Australian Association of Social Workers, and in the NSW government mental health sector for over 30 years.



Douglas Holmes

CertIV WT(Cat2), DipTAA

Douglas was a Board member from 2007 to 2014 and was re-elected in 2015. Douglas won the Exceptional Contribution to Mental Health Service Award in 2014. He is currently the General Manager at MH-worX.



Anthony Joseph (Tony) Nippard

BCom(Hons), BA, MA, FGIA, FCIS, FCHSM, GAICD

Tony became a Board member in 2014. He is an experienced company director and has previously occupied senior positions in the Victorian public service. Tony is a Senior Consultant at Thoughtpost Governance.



Fiona Louise Nicholls

BA Welfare Studies, MHSS, GAICD

Fiona was elected to the Board in 2016. She has 30 years' Commonwealth Government experience in health and social welfare policy and administration, including nine years in the Senior Executive Service focusing on quality and accountability in aged care and mental health services.



Ruth Faulkner

BSci (Hons), GAICD, MIMC

Ruth was appointed to the Board in March 2017. She is a Partner and Management Consultant at Conus Business Consultancy Services. Ruth has over 25 years' experience working in governance, finance, audit and risk in the not-for-profit, government and commercial sectors.



Brad Wynter

Deputy Chair and Chair, Finance, Assurance and Risk Management Committee.

BAPsych, MBA, CertIV Mgt, GAICD

Brad has been a member of the Board since 2011 and Deputy Chair since December 2016. He was Organisation Improvement Manager and Smart City Innovator at the City of Whittlesea for 18 years, and Deputy Director Citizen Access and Transformation in the State Government for one year. Brad is also on the advisory board of the technology start-up Human Centred Innovations.



Graeme Doidge

Chair, Quality, Safety and Clinical Governance Committee

BA, DipAppSci, DipBus, Cert IV T&E, RPN

Graeme was elected to the Board in 2011. He is a Clinical Community Service Manager for St Vincent's Hospital Melbourne where he has worked for the past 10 years. Graeme has 25 years' experience in Clinical, Policy and Service Development roles in Mental Health Services and with the Victorian Health Department.



Lorraine Ann Powell

CertIV MH (Peer Work), GAICD

Lorraine was elected to the Board in 2014. She has 15 years of experience as a consumer representative and consultant at local, state and national levels. Lorraine is an experienced clinical governance reviewer and the Western Australia Consumer Representative on the National Mental Health Consumer and Carer Forum.

Consolidated Statement of Profit or Loss and Other Comprehensive Income

Consolidated reports include Neami National and our wholly owned subsidiary Mental Health and Wellbeing Australia (Me Well)

To read the full Neami Group Consolidated Financial Statements go to ar.neaminational.org.au

	2016/2017 \$	2015/2016 \$
Revenue		
Revenue	82,552,402	79,678,673
Other income	1,346,855	693,459
Total revenue	83,899,257	80,372,132
Expenditure		
Employee benefit expenses	66,368,719	61,370,339
Office and occupancy expenses	6,132,417	5,483,975
Consortium expenses	2,698,379	3,001,556
Other expenses	5,595,514	6,125,735
Depreciation and amortisation expenses	2,137,888	1,733,163
Total expenditure	82,932,917	77,714,768
Surplus	966,340	2,657,364
Other comprehensive income		
Revaluation of land and building	229,621	43,750
Changes in the fair value of equity investments at FVTOCI	356,318	(100,260)
Other comprehensive income / (loss)	585,939	(56,510)
Total comprehensive income	1,552,279	2,600,854

Consolidated Statement of Financial Position

Consolidated reports include Neami National and our wholly owned subsidiary Mental Health and Wellbeing Australia (Me Well)

To read the full Neami Group Consolidated Financial Statements go to ar.neaminational.org.au

	2016/2017 \$	2015/2016 \$
Assets		
Current assets		
Cash and cash equivalents	17,087,767	20,378,544
Investments	7,591,102	0
Trade and other receivables	3,176,187	1,811,797
Total current assets	27,855,056	22,190,341
Non-current assets		
Investments	10,648,745	6,293,630
Property, plant and equipment	3,204,942	6,497,823
Intangible assets	105,585	105,594
Total non-current assets	13,959,272	12,897,047
Total assets	41,814,328	35,087,388
Liabilities		
Current liabilities		
Trade and other payables	3,232,089	3,079,313
Deferred income	8,368,254	4,402,714
Provisions	6,717,615	5,990,406
Total current liabilities	18,317,958	13,472,433
Non-current liabilities		
Provisions	1,552,184	1,223,048
Total non-current liabilities	1,552,184	1,223,048
Total liabilities	19,870,142	14,695,481
Net assets	21,944,186	20,391,907
Equity		
Retained earnings	21,170,752	19,360,995
Reserves	773,434	1,030,912
Total equity	21,944,186	20,391,907



The Rialto, Level 30
525 Collins St
Melbourne Victoria 3000

Correspondence to:
GPO Box 4736
Melbourne Victoria 3001

T +61 3 8320 2222
F +61 3 8320 2200
E info.vic@au.gt.com
W www.grantthornton.com.au

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF NEAMI NATIONAL

Auditor's Opinion

We have audited the financial report of Neami National ("the Registered Entity") which comprises the consolidated statement of financial position as at 30 June 2017, and the consolidated statement of profit or loss and other comprehensive income, consolidated statement of changes in equity and consolidated statement of cash flows for the year then ended, and comprising notes to the financial statements, including a summary of significant accounting policies and the statement by the Directors of the consolidated entity comprising the Company and the entities it controlled at the year's end or from time to time during the financial year.

In our opinion, the accompanying financial report of Neami Limited has been prepared in accordance with Division 60 of the *Australian Charities and Not-for-Profits Commission Act 2012*, including:

- a Giving a true and fair view of the consolidated entity's financial position as at 30 June 2017 and of its performance and cash flows for the year then ended; and
- b Complying with Australian Accounting Standards - Reduced Disclosure Requirements and Division 60 of the *Australian Charities and Not-for-Profits Commission Regulation 2013*.

Basis for Auditor's Opinion

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

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

Grant Thornton Audit Pty Ltd ACN 130 913 594
a subsidiary or related entity of Grant Thornton Australia Ltd ABN 41 127 556 389

'Grant Thornton' refers to the brand under which the Grant Thornton member firms provide assurance, tax and advisory services to their clients and/or refers to one or more member firms, as the context requires. Grant Thornton Australia Ltd is a member firm of Grant Thornton International Ltd (GTIL). GTIL and the member firms are not a worldwide partnership. GTIL and each member firm is a separate legal entity. Services are delivered by the member firms. GTIL does not provide services to clients. GTIL and its member firms are not agents of, and do not obligate one another and are not liable for one another's acts or omissions. In the Australian context only, the use of the term 'Grant Thornton' may refer to Grant Thornton Australia Limited ABN 41 127 556 389 and its Australian subsidiaries and related entities. GTIL is not an Australian related entity to Grant Thornton Australia Limited.

Liability limited by a scheme approved under Professional Standards Legislation.

Information other than the Financial Report and Auditor's Report

The Directors is responsible for the other information. The other obtained at the date of this auditor's report is information included in the Company's Annual report for the year ended 30 June 2017, but does not include the financial report and our auditor's report thereon.

Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated.

If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Responsibility of the Directors for the Financial Report

The Directors of the Company are responsible for the preparation and fair presentation of the financial report in accordance with Australian Accounting Standards - Reduced Disclosure Requirements and the ACNC Act. This responsibility includes such internal controls as the Directors determine are necessary to enable the preparation of the financial report to be free from material misstatement, whether due to fraud or error.

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

Those charged with governance are responsible for overseeing the Company's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Report

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

A further description of our responsibilities for the audit of the financial report is located at the Auditing and Assurance Standards Board website at:

http://www.auasb.gov.au/auditors_files/ar3.pdf. This description forms part of our auditor's report.



GRANT THORNTON AUDIT PTY LTD
Chartered Accountants



S P Lawson
Partner - Audit & Assurance

Melbourne, 24 August 2017

Online version

An online version of this report and the full financial documents are available at www.ar.neaminational.org.au

Thank you

Thank you to the consumers, staff, partner organisations and others who have contributed to this report.

Thank you to our design, photography and print partners for their ongoing support.



Contact Neami National

Head Office

4-8 Water Road, Preston, Victoria, 3072

03 8691 5300

admin@neaminational.org.au

Contact details for individual services are available online from www.neaminational.org.au/find

Website

www.neaminational.org.au