



Peer and lived experience – at the heart of our work

Lived experience is at the heart of all we do at Neami National. This year's annual report highlights our work in fostering designated lived experience and peer work roles, and the importance and value of staff bringing their lived experience into the workplace.

We also highlight how, through co-design and collaboration with consumers, we are designing services that meet the needs of the communities in which we work.

Lived experience practice involves using learnings from personal experiences of mental health and/or adversity, alongside the values of the consumer movement, to inform practice. Carer lived experience practice draws on learnings from experiences of caring for people with mental health distress and/or adversity.

Acknowledgements



We acknowledge Aboriginal and Torres Strait Islander Peoples and communities as the Traditional Custodians of the land we work on and pay our respects to Elders past, present and emerging.

We recognise that their sovereignty was never ceded and the impact of structural inequality that resulted from invasion continues to this day.

Acknowledgement of those with lived experience

We acknowledge the contribution of our lived experience colleagues, consumers and carers who share their wisdom and contribute to the design and delivery of our mental health services.

We are committed to cultivating inclusive environments for staff, consumers and carers. We celebrate, value and include people of all backgrounds, genders, sexualities, cultures, bodies and abilities.



We believe our commitment to diversity and inclusion makes our teams, services and organisation stronger and more effective.



Interpreter

We are committed to providing accessible services to people from culturally and linguistically diverse backgrounds.

If you have difficulty understanding this report, please 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.

Front cover featuring Fiona and Sam,
Neami Peer Support Workers

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Neami National is a values-based, not-for-profit organisation providing mental health, homelessness and suicide-prevention services.

Through our recovery-orientated approach, we deliver a range of evidence-informed services around the country to improve mental health and wellbeing in local communities.

Vision

Full citizenship for all people living with mental health issues in Australian society.

Purpose

To enable people living with mental health issues to achieve outcomes that they value.

Strategic intent

To build on our strengths in evidence-based, consumer-informed services. This means further enhancing consumer experiences and co-designing broader and deeper services.

To take a more active outward-looking view. This means working more with others, being a leading voice in changing the system and becoming a more sustainable and resilient national organisation.

CEO & Chair report

This has been a dynamic year for Neami National, as we continued to grow our impact while responding to the ongoing impacts of the coronavirus pandemic. As we navigated this context, we maintained our efforts on responding to the changing needs of the people using our services.

We continued to deliver specific services funded in response to the pandemic, such as Partners in Wellbeing in Victoria and a range of services in New South Wales. We adapted how we provide other services to ensure the safety of consumers and staff through the changing conditions of the year in review.

We were excited to launch Head to Health services across the country this year. These are vital services that don't require a referral, have a "no wrong door" approach and provide immediate support to people experiencing distress. From Darwin to Penrith, Geelong to Townsville, we are hearing from guests and visitors that these services are a place where they feel calm, supported and understood – with the peer workforce integral to the success of this model.

In June 2022, Neami was selected as the lead provider for the Victorian Local Adult and Older Adult Mental Health and Wellbeing Services in Latrobe City and the City of Whittlesea. These services are an innovative solution to deliver on the compelling vision outlined in the recommendations of the Royal Commission into Victoria's Mental Health System and will open later in 2022.

Our submissions to reviews and inquiries, advocacy efforts and research collaborations continue to contribute to sectoral reform. Together with the Centre for Social Impact and the Australian Alliance to End Homelessness, we launched the Ending Homelessness in Australia report in November 2021. This report builds a stronger understanding of what drives and sustains homelessness in Australia and what is needed to shift the dial. It also provides headway towards national benchmarking and our ability to track progress towards ending homelessness.

In May 2022, Neami proudly launched our second Reconciliation Action Plan, the 2022–24 Innovate RAP. Indigenous governance is at the core of the new RAP and working with our Aboriginal and Torres Strait Islander communities will ensure we commission culturally safe and appropriate services that meet local needs.

We have continued to prioritise and invest in the growth, development and evolution of our peer workforce and approach. Our Peer Work Vision for Transformative Change developed this year outlines the opportunities and conditions necessary to expand, elevate and embed peer practice and lived experience approaches at Neami.

Developing and supporting our workforce continues to be a major focus. This year, all Neami staff on maximum-term contracts were made permanent employees. While governments continue to fund us on short-term contracts, our decision comes in response to staff feedback about the stress of fixed-term employment.

This year, we have drawn on the strength and commitment of our staff to continue to deliver incredible services that positively impact the people and communities we serve. We would like to take this opportunity to thank our team, who have contributed so much and strive daily to enact our vision of full citizenship for all people living with mental health issues in Australia.

This year the Board, with management support, commenced a major Board recruitment program. Four Directors have been recruited which has substantially enhanced our Board capability and diversity.

Thank you also to our partners, funders and communities whose support we greatly value. And to the people who use our services, thank you for trusting us and allowing us to understand what matters to you.



Tom Dalton
CEO, NEAMI NATIONAL



Tony Nippard
CHAIR, NEAMI NATIONAL

Neami National snapshot

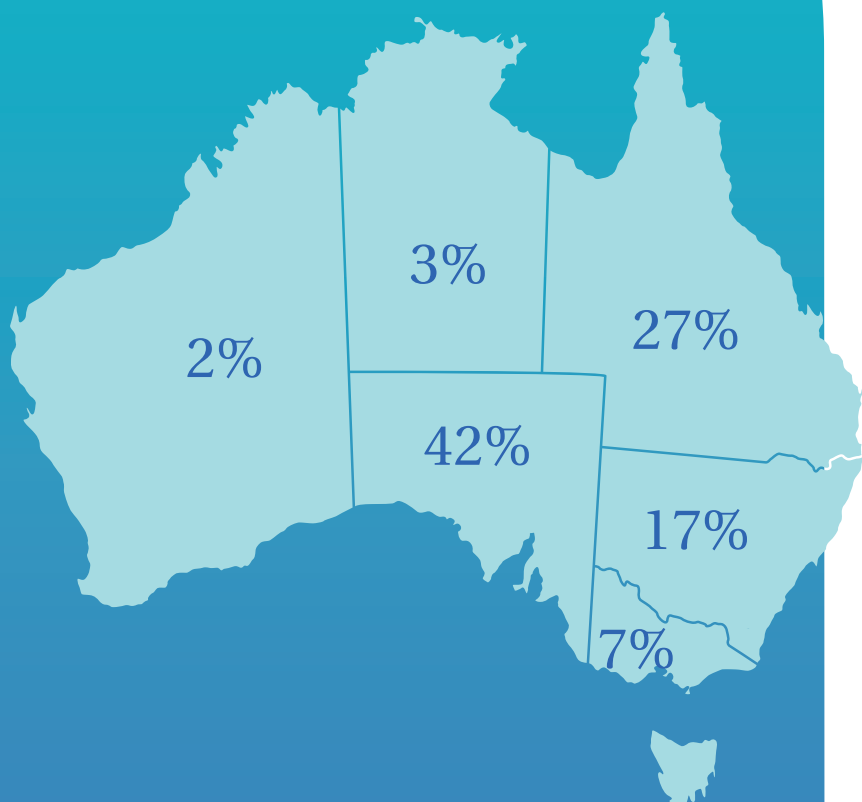
In 2021–22, we supported

32,000

PEOPLE

in metropolitan, regional and remote communities across Australia.

The figures below represent a breakdown of consumers by state. Due to the diversity of our service types, the depth and duration of engagement with each consumer varies depending on the program or service. In South Australia and Queensland, percentages reflect a high volume of consumers engaged through intake and triage phone services where Neami provides initial engagement and assessment, these programs include the Lived Experience Telephone Support Service (SA) and Connect to Wellbeing (QLD).



TYPES OF SUPPORT

32,000 people received support across five key domains, through Neami programs and services and those delivered in conjunction with our partner organisations.



72%

COMMUNITY-BASED MENTAL HEALTH SUPPORT

Flexible community-based psychosocial supports that meet people where they are at and address the things that matter for living well.



16%

RECOVERY-ORIENTED CLINICAL MENTAL HEALTH SERVICES

Crisis, residential and outreach services provided by peer, clinical and psychosocial teams to support people with mental ill-health, in emotional distress and crisis.



8%

HOUSING/HOMELESSNESS

Street outreach and wrap-around housing supports to prevent homelessness, obtain housing and sustain long-term housing and homefulness.



2%

SUICIDE PREVENTION

Comprehensive individual after-care support and community-focused suicide-prevention services.



1%

SPECIALIST COMMUNITY SUPPORTS

Services with a specialist focus including outreach or centre-based supports focused on, for example, people leaving justice settings, employment or physical health.

Statistics are rounded to the nearest whole number

RESEARCH AND EVALUATION

We supported high-quality, ethical research and evaluation that translates knowledge into improved services and better outcomes for consumers.

6

INTERNALLY LED
PROJECTS

19

EXTERNALLY LED
PROJECTS

11

PUBLICATIONS

25+

PARTNERSHIPS WITH
UNIVERSITIES AND
NGOS, AND INDIVIDUAL
ACADEMICS AND
RESEARCHERS

FINANCIAL POSITION

TOTAL REVENUE

\$126,792,115

DEFICIT

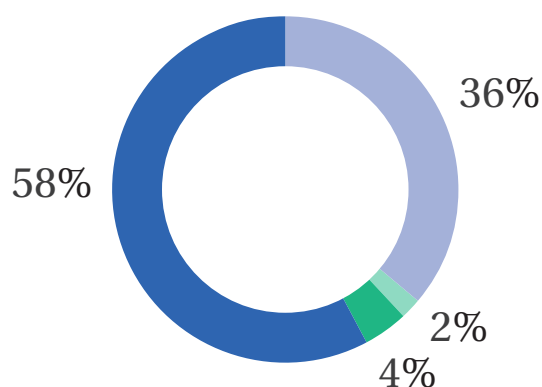
(\$786,261)

EQUITY

\$25,194,780

*NUMBERS ARE AS AT 30 JUNE 2022

SOURCE OF INCOME



- STATE GOVERNMENT
- PRIMARY HEALTH NETWORKS
- COMMONWEALTH
- OTHER

Across the states and territories



NEW SOUTH WALES

“We are helping people achieve their recovery goals, consolidating wrap-around support for people rapidly housed and helping people stay housed. We’re getting people back into work, improving their physical wellbeing and have established innovative new direct access services including Hear2Talk, Head to Health and Head to Health satellite sites. We have implemented a new Practice Hub that draws on a range of clinical support, lived experience, leadership and Indigenous practice capability to review complex care and adverse events.”

Peter Gianfrancesco
New South Wales State Manager



QUEENSLAND/NORTHERN TERRITORY

“This year, we have increased service offerings to meet the community’s ever-changing needs and are excited to have established Head to Health services in Townsville and Darwin. We’ve also grown our capacity to deliver Head to Health intake, assessment and referrals (IAR) services. Our IAR services invest in local service integration to address fragmentation and offer a seamless pathway so the consumer can receive the right support at the right time. We’re pleased to have strengthened our partnerships with local providers and built new relationships along the way.”

Karen Thomas
Queensland and Northern Territory State and Territory Manager



SOUTH AUSTRALIA

“This year, we established the Safe and Secure Housing program for women and families fleeing family violence, and expanded our primary mental health services with a site at Edwardstown. The Urgent Mental Health Care Centre is now operating 24 hours a day, and we have welcomed a South Australia Peer Practice Lead whose focus is to embed peer practice across the state. Another strong focus for this year has been the new Reconciliation Action Plan, with the engagement of a cultural consultant. We are continuing our commitment to regional service with the expansion of our Port Lincoln service now including Clinical Care Coordination.”

Helene Nielsen
Acting South Australia State Manager



VICTORIA

“We’ve demonstrated a commitment to trans-disciplinary teams comprised of people from various professions, disciplines or experiences who cooperate and collaborate to improve holistic care for consumers. This year, we were selected to help deliver on the compelling vision outlined by the Royal Commission into Victoria’s Mental Health System as lead provider on two new local services. Our collaborative partnerships build on the strengths of each organisation and support the delivery of safer and more inclusive services. We share our considerable experience and expertise, along with respect and the deep recognition that listening and true power sharing is paramount to delivering successful services.”

Di Nally
Victoria State Manager



WESTERN AUSTRALIA

“This year, we’ve had a strong focus on the Reconciliation Action Plan. We’ve established scholarships for Aboriginal and Torres Strait Islander staff to complete their work-based Certificate IV in Mental Health in partnership with Central TAFE and implemented New South Wales ‘No harm in a yarn’ initiative. We are proud to support regional staff who often have limited access to undertaking formal qualifications while working. We’ve also been focused on our suicide-prevention project, Right by You, a youth co-designed online resource for supporting friends displaying suicide risk. The website will include resources for safety, referral and self-care.”

Nicole Jolly
Western Australia State Manager

2022–2024 Innovate Reconciliation Action Plan

Neami is committed to addressing the current level of disadvantage faced by Aboriginal and Torres Strait Islander people within Australia through meaningful actions of power-sharing and representation.

To ensure we are commissioning culturally safe and appropriate services that meet local needs, we are striving to improve how we engage with Aboriginal and Torres Strait Islander communities.

We published our first Reconciliation Action Plan (RAP) in 2019, which planted the seed for reconciliation at Neami and focused on developing closer partnerships with Indigenous organisations.

The 2019–2021 Innovate RAP demonstrated our deep commitment to change and reflected our belief that all Australians are enriched by acknowledging, celebrating and preserving the unique culture, languages and identities of our First Nations peoples.

This year, Neami proudly launched our second Innovate RAP. The 2022–2024 Innovate RAP takes a more complete and holistic view of what reconciliation truly embodies. Our new RAP aims to ensure that the Aboriginal and Torres Strait Islander communities we work with are represented and prioritised, and that power imbalances are addressed.

The 2022–2024 Innovate RAP focuses on engaging with Aboriginal and Torres Strait Islander communities and building effective partnerships to ensure they play key roles in shaping our services.

Indigenous governance at the heart

Neami values Indigenous political understanding and cultural and lived experience, in setting targets and helping achieve meaningful outcomes. The implementation of Indigenous governance principles is central to the 2022–2024 Innovate RAP. By including these principles, we ensure our programs and services address social equity issues for First Nations peoples, particularly in relation to Closing the Gap targets.

The concept of Indigenous governance ensures that Indigenous representation and decision-making by First Nations people occurs across the whole organisation. This is vital when working with local Indigenous communities, as the political and societal elements of tribal nations sees sovereignty and local autonomy as highly valued.

Traditional Owners of the lands on which we provide services are incorporated into the governance framework, ensuring their contribution and involvement shape our programs to achieve the best community outcomes. This best-practice model means local communities and relevant authorities are given power in the local context of the program's operation. In doing so, local legitimacy, trust and authority are given to the program.

To operate effectively within this two-way governance model and to build and maintain effective cultural legitimacy and authority, all staff will be supported to use recognised Indigenous governance principles.



The principles are informed by Indigenous culture and create expectations about the way power is exercised, decisions are made, and governance functions are performed. In this way, we can work together to influence:

- *process*: how things are done
- *structure*: the way people organise themselves and relate to each other
- *institution*: the rules for how things should be done.

The Australian Indigenous Governance Institute's Indigenous Governance Toolkit identifies seven primary principles that Indigenous peoples across Australia often use to underpin governance arrangements.

These are:

- networks
- relationships
- governance histories
- cultural geographies
- leadership
- decision-making authority
- cultural accountability.

We are proud of our 2022–2024 Innovate RAP and our incorporation of Indigenous governance. Shared learning and collaboration will be a significant milestone in bringing us closer to meaningful, authentic and impactful reconciliation.

“What excites us about the 2022–2024 Innovate RAP is that it goes above and beyond what is considered a typical or conventional RAP. We are getting to the root of what real impact and change can begin to look like in this country.”

RACHEL HARRIS, NATIONAL RAP IMPLEMENTATION COORDINATOR & JESSE MARTIN, NATIONAL RAP COORDINATOR



Gail Mabo (centre) with Neami Cairns staff members Robert and Stephanie

A new way to access mental health support

Neami is pleased to be a leading provider of new Head to Health Centres in a range of local communities across Australia.

Head to Health is a significant investment by the Australian Government, addressing Productivity Commission findings to help consumers navigate the mental health system and access immediate support when they experience distress. In collaboration with Primary Health Networks (PHNs), partners and local communities, Neami delivers Head to Health Adult Mental Health services in Darwin, Geelong, Penrith and Townsville and two Head to Health satellite sites in Hurstville and Seven Hills.

Head to Health walk-in services provide timely and integrated support to people experiencing distress. These services also help to ease the impact of mental health presentations on the public hospital system. Eighty-three per cent of surveyed consumers across Darwin, Penrith and Townsville who have completed a feedback form, agree or strongly agree they felt safe while a guest at Head to Health. Likewise, 83% agree or strongly agree that they feel more hopeful about moving forward with their recovery.

Each service is co-designed with the community they serve, implements a “no wrong door” approach and is tailored to the needs of the local community. They offer a combination of high-engagement peer support in conjunction with high-quality clinical support to provide a warm and welcoming experience.

Up to 25% of Darwin Head to Health guests identify as Aboriginal or Torres Strait Islander. To ensure the service reflected the needs of the community, co-design sessions were run, and Darwin’s tagline “A

place to rest, yarn and heal” was created. The phrase resonates with the community and stakeholders as being attuned to local Aboriginal culture and a relaxed, welcoming approach.

Our vision is for peer-led and clinical support to extend beyond service delivery and also be reflected in our governance. For example, Penrith Head to Health has a 50% peer workforce and 50% lived experience representation on their governance committee, reiterating our commitment to elevate lived experience in our centre operation and governance.

The Townsville Head to Health centre opened in January 2022 and takes a collaborative approach to serving guests. The centre is co-located with consortia partners, providing guests access to specialist alcohol and other drug counselling through Lives Lived Well; Richmond Fellowship provides housing support services; and Townsville Multicultural Support Group delivers outreach and case coordination for people settling in North Queensland as humanitarian entrants or similar.

The satellite sites in Hurstville and Seven Hills were established to provide anyone in the community with access to support through the “no wrong door” approach. The teams see a wide range of guests, including young people who have received immediate and responsive support while being linked to specialist long-term support that best meets their needs.



Alex, UMHCC guest

Neami's newest Head to Health service is in Geelong. It is currently operating via telehealth and outreach ahead of a permanent site opening later in 2022.

This Financial Year, Neami committed to funding an implementation co-evaluation of our five Head to Health services (including the Urgent Mental Health Care Centre in South Australia) with our research partner organisation ALIVE Centre. This project will take a snapshot of the services following 12 months of service operation, with a strong lived experience focus. The project will build an emergent understanding of who is using the services, the impact on people's mental health and wellbeing, and the communities and service systems in which they are embedded, to enable further shaping of the service.

"My journey started when I was 28. I was in the darkest time of my life where no one believed me and said that it was all in my head. I didn't stop fighting until I got the support that I needed. I wanted the support from the hospital and the professional support team, but I kept getting sent home."

"I felt very welcomed and supported [at Head to Health]. I felt like I had built the rapport [with the Mental Health Clinician] within seconds after meeting her. Finding out I was able to have an option to talk to someone else such as the Peer Support Worker who had lived experience of what I was going through kind of made me feel a lot more calm, relaxed, supported."

VANESSA, HEAD TO HEALTH GUEST

24/7 crisis support

Now in its second year of operation, the Urgent Mental Health Care Centre (UMHCC) service in South Australia has provided 2,880 guests with an alternative to arriving at an emergency department in distress.

The UMHCC was designed in collaboration with the Adelaide community, including people with a lived experience of a mental health crisis, and offers a welcoming environment to help everyone feel safe and accepted. Our multidisciplinary team of Peer Support Workers and clinical staff work closely with each person to reduce distress, understand their immediate needs and develop a care plan for support.

In March 2022, the UMHCC moved from a 12-hour service to 24-hour service, 7 days a week. The move recognises that mental health crises do not occur within predictable timeframes, and has enabled the service to provide guests with the time required to connect and feel valued.

UMHCC is delivered in partnership with RI International, an organisation with 30 years' experience designing and delivering best-practice crisis intervention services.

"From the moment I pressed the buzzer at the door, I was welcomed in and treated with such respect, kindness, empathy, compassion and care. You gave me the opportunity to speak my mind and I was truly listened to. You gave me tools to help cope and change certain behaviours to make my life more manageable. I was given information to connect with different organisations in my area, including medical services and treatment that I otherwise would not have done on my own."

UMHCC GUEST

Innovating and advocating for people sleeping rough

STEP to Home is having a positive impact on chronic rough sleeping in inner Sydney. Established in 2019 and funded by the New South Wales Department of Communities and Justice, the program uses the Housing First approach. This approach focuses on quickly moving people experiencing homelessness into independent and permanent housing and providing additional supports and services as needed. It is one of many homelessness programs Neami delivers with partners across the country.

STEP to Home has an innovative model compared to other Housing First models in Australia. Appropriate properties for clients are sourced from the private rental market by community housing partners Bridge Housing, Metro Community Housing and the Women's Housing Company. Post-crisis support is provided by Neami for 18 months to three years.

An evaluation of the STEP to Home program prepared by the Centre for Social Impact (CSI) at the University of New South Wales found that this private leasehold model enhances positive outcomes. It found that clients demonstrated a considerable increase in the following areas:

- housing stability, retention, security and safety
- housing satisfaction
- mental health and quality of life
- connection with family, friends and community
- increased economic and community participation.

The evaluation also found that there was a slight decrease in clients' use of public services such as hospital emergency departments after they were housed.

The real impact of the program is highlighted through the CSI evaluation survey results of respondents. Participants were highly engaged in social activities – 94% reported that they had participated in activities in the past week; 72% reported that their health improved as a result of taking part in the program; and employment increased from 3.2% to 22.3% since being housed by the program.

Neami and Bridge Housing attribute these positive outcomes to the permanent housing approach, as opposed to a transitional housing model. Neami is

thrilled to be re-funded to deliver this service for the next three years.

“When I started working on the program, I felt excited by the opportunity to provide more than just a quick fix to consumers, as so often is the case with homelessness services. I was able to witness consumers come into themselves and talk about their future. Many of the people we worked with had long histories of homelessness and trauma, and to finally have a safe, secure space to call their own meant they were able to look beyond simply surviving. The long-term nature of the program allows consumers and workers to build trusting relationships and you can really see the growth of consumers as they settle into their homes and begin to feel a sense of safety and stability.”

STEP TO HOME STAFF MEMBER

94%

of respondents participated in some form of social activity, including communicating or doing activities with family or friends in the previous week.

94%

of respondents indicated they were satisfied with the home they were living in.

72%

of respondents indicated that their health had improved since being in the STEP to Home program.

Timely service access through Connect to Wellbeing

Connect to Wellbeing continues to provide people in northern Queensland with streamlined access to mental health services, with more than 6,300 inbound referrals this year alone*. Connect to Wellbeing is one of many intake and access services Neami runs across the country.

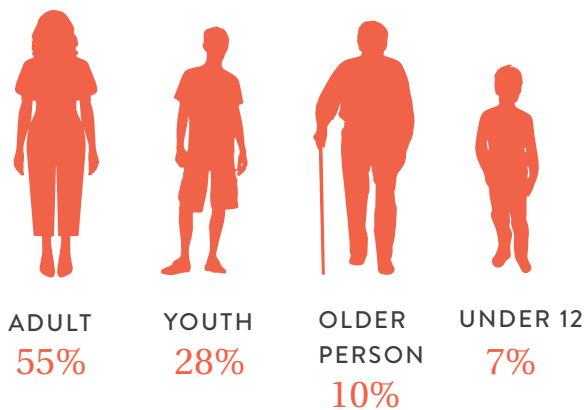
Supported by funding from the Australian Government under the Primary Health Network Program, Connect to Wellbeing is based on the stepped-care model of mental health support. The service uses a “no wrong door” approach; it facilitates strong connections between general practitioners and primary and other local mental health services, and assists people to move easily between services as their needs change over time.

Once a referral is received by Connect to Wellbeing, a skilled clinician uses holistic assessment tools and a person-centred approach to understand an individual’s

needs and determine relevant and available support services for them.

Outside of traditional inbound referrals from general practitioners via phone, email and online, Connect to Wellbeing uses innovative ways of connecting people with the service they need. For example, in Mossman, which has a large Aboriginal community with limited access to general practitioners, a Connect to Wellbeing provider is going into the community and facilitating referrals directly with consumers.

**Data collected is from the period July 2021–May 2022*



INBOUND INTAKE, ASSESSMENT, TREATMENT, REFERRAL SERVICES CONSUMERS BY AGE COHORT

OVERALL DATA: 6,300 INBOUND REFERRALS

Statistics are rounded to the nearest whole number



Connect to Wellbeing team

Building capacity to prevent and respond to suicide

Neami runs the Suicide Prevention Coordination (SPC) program in Perth, building community capacity to prevent and respond to suicide. Reflecting our Collaborative Recovery Model, the program engages directly in understanding and responding to lived experience from community stakeholders at all levels.

This year, we are also supporting the development of a pilot program in Perth, Suicide Aware, which delivers evidenced-based tools to manage the impact of suicide on clients, staff and workplaces. It also addresses Work Health and Safety requirements for best-practice management of psychosocial hazards in the workplace.

Suicide Aware engages with the lived experiences of staff and workplaces to provide training, governance and resources to support best practice following suicide bereavement. Current Suicide Aware projects are running with Bowra & O'Dea Funeral Directors, Department of Communities – Child Protection and Family Services (Fremantle) and the Financial Counsellors Association of WA.

“Following the training, staff are more confident as they understand more about the impact on the families, themselves and each other. They know the safe language and are ready to share relevant services to support families bereaved in this way.”

**BERNARDINE BRIERTY, DEVELOPMENT MANAGER
– BOWRA & O'DEA FUNERAL DIRECTORS**

The SPC team also worked alongside school communities, youth groups and the Department of Education in Western Australia to deliver tailored support programs and resources. The program was in response to a number of suicides at a metropolitan school, and supported staff, students, parents and carers impacted by suicide.

A highlight for the SPC team this year was collaborating with more than 40 organisations to host the Merriwa Mental Health Expo, which won a Citizenship Award from the City Wanneroo as part of Mental Health Week 2021. The event promoted the message that being active and having a sense of belonging and purpose in life contribute to happiness and good mental health.

Compassionate training through a lived experience lens

The LifeConnect service in Victoria provides compassionate support to those impacted by suicide, and builds capacity and understanding within the sector and the broader community to prevent it. The service delivers evidence-informed suicide-prevention and awareness training with diverse communities through a lived experience lens.

LifeConnect lived experience workers facilitate professional development sessions for clinical case managers and staff at local clinical mental health services. The team generously draw from their lived experience, shining a light on what helps to establish a healthy and effective therapeutic alliance by sharing their insights into what it is like to be on the receiving end of a risk assessment and suicide conversation. The sessions have been received with great enthusiasm, and the team welcomes further opportunities to extend the training to more clinicians.

Sadly, after three years of providing an essential and greatly valued service to the community, the Suicide Bereavement Counselling service delivered by LifeConnect which was an important aspect of the overall service, will end in October 2022. News of the closure was felt deeply by clients, who expressed their gratitude for the excellent support they received from staff. The service had received short-term funding from Eastern Melbourne Primary Health Network, which was not renewed.

“Since joining the LifeConnect team, I quickly learnt what a true privilege and honour it is to share parts of my story for the greater good and witness other people's stories and see the impact they have in generating a greater understanding of suicide. I feel immense pride in standing alongside those who intimately know the language of pain, struggle and courage and who use their experience to change attitudes.”

**SARAH HANLIN, LIFECONNECT LIVED
EXPERIENCE PRACTITIONER**

Innovative new local services supporting Victorians

In June 2022, Neami and partners were appointed as the provider for the Victorian Local Adult and Older Adult Mental Health and Wellbeing Services in Latrobe City and the City of Whittlesea.

These local services are an innovative solution to deliver on the compelling vision outlined through the recommendations of the Royal Commission into Victoria's Mental Health System. Both services bring together organisations that are leading providers with extensive experience and success in the delivery of community-based care.

Mental Health and Wellbeing Local Latrobe will be delivered in partnership with Uniting Vic.Tas and Drummond Street Services. Mental Health and Wellbeing Local Whittlesea will be delivered in partnership with Drummond Street Services, Uniting Vic.Tas and the Victorian Aboriginal Health Service.

Together with our partners, we will put co-design and lived experience at the heart of the model to

reflect the diversity and needs of the communities we serve. Deep and purposeful community collaboration is central to the model so that we can be a part of achieving the government's (and Royal Commission's) aim of a community-based, driven model of care to support a contemporary, connected, accessible and reliable mental health system.

The services will support people who are experiencing mild to moderate mental health challenges to manage their mental ill-health. They will operate onsite, through telehealth and outreach, and are staffed by a 50% lived experience workforce. The "no wrong door" approach ensures consumers and carers, families, supporters and communities have a seamless journey when engaging with us.

Through collaboration with the community and organisations with experience in community care, we expect these services to be open by the end of 2022.



Neami consumer Taran and his Community Rehabilitation Support Worker Dylan

Reflections and learnings over the year

Elevating lived experience practices

This year, a collective of consumers, lived experience staff and allies embarked on an extensive co-design process to explore lived experience practice at Neami.

A process of deep dialogue led to the creation of the *Peer Work Vision for Transformative Change*. The transformative vision outlines the opportunities and conditions necessary to expand, elevate and embed peer practice and lived experience approaches at Neami.

The co-design journey highlighted the importance of where you go and how you get there. The process explored hopes, values and contexts and is distilled into five pillars that lie at the heart of the transformative vision: understanding, relational stance, accountability, safety and opportunity. These orienting pillars provide the scaffolding to ensure that future actions and decisions have integrity, authenticity and impact.

Our transformative vision is a continuation of years of work by the peer and lived experience workforce at Neami, as well as lived experience movements more generally. We are indebted to their experiential, emotional and intellectual labour. We continue the journey to make this vision a reality with intention and commitment.

Mel, a Neami consumer, shares her experience of being part of the co-design team for the new Geelong Head to Health site.

“I think that the lived experience voice is being heard more. Not everyone knows how hard lived experience is in mental health, so to have my voice heard empowers me to continue and want to help. Seeing the building taking shape and seeing how they have listened to input and incorporated it into the build has been a highlight for me.”

MEL, NEAMI CONSUMER

Moving on from Me Well

After six years of delivering services under the National Disability Insurance Scheme (NDIS) through our subsidiary Me Well, Neami made the decision to transition out of NDIS service provision and Me Well operations ceased on 30 November 2021. Participants' wellbeing and continuity was a major focus, and we are proud that all participants transitioned to new support programs. We are also proud that we could support staff who wanted to continue working to find other roles.

Me Well's positive impact on participants was clear, with more than 2,000 NDIS participants supported across Australia. The service was recognised by participants as a critical navigation support, a trusted single point of contact and an advocate for their needs.

Looking beyond the impact on participants, there were serious challenges over the six years in making this a sustainable activity. Despite the concerted efforts of many within Neami and Me Well, with many different and innovative approaches to management and services adopted, the NDIS component of our organisation incurred very substantial costs over the years of its operation for the Neami group. As such, it was not financially responsible to continue, particularly given our view that NDIS pricing did not support the effective measurement of outcomes, quality, safety or participant experience – all critical aspects of contemporary mental health service delivery. There was also a gap between the direction of the NDIS and alignment with Neami's strategic directions and approach to service delivery.

Neami recognises the incredible value of the NDIS and the policy approach behind it, and we will continue to support consumers to enter the scheme and advocate for it to be an effective approach to meeting the needs of participants.

We also acknowledge the efforts of Me Well staff and what they achieved with each participant. Their contribution has made a considerable difference to the lives of many Australians.

A framework for collaborative relational practice

The Collaborative Recovery Model (CRM) has been foundational to how Neami delivers support services. It was originally created as a response to the lived experience movement in the late 1990s and was implemented by Neami in 2009.

Since then, much has changed within the human services landscape and across our communities. Society has moved to an increasingly holistic view of mental health and wellbeing, and the revised framework has emerged from this evolving view by embracing knowledge beyond a single disciplinary framework. Neami services have diversified to respond to the changing needs of the communities we serve; therefore, we needed a broader perspective to improve how we frame practice.

The revised framework of practice is a transdisciplinary approach to the way we work that includes biological, cultural, psychological, social and trauma-informed lenses. This enables flexibility, allowing staff from all disciplines to draw on their knowledge. The approach refers to lived experience and context to decide what evidence and responses are relevant to each situation.

The new approach frames recovery and wellbeing as being personal and contextual. It takes a holistic

perspective that looks at how people feel about their lives and how that is connected to the circumstances and conditions of their lives.

The revised framework is informed by decades of evidence that demonstrates that care, connection and collaboration are the most reliable predictors of effective outcomes. It aligns our approach to ethical principles of human rights and care. The practice approach is responsive and flexible to our consumer needs and the diversity of the services Neami offers, including homelessness, mental health, postvention, ex-offender mental health support, suicide and youth.

The approach focuses on understanding what matters to people accessing our services, and those in their network of care, in order to create a meaningful life and wellbeing. We partner with people to help them develop a quality of life and wellbeing that matters to them.

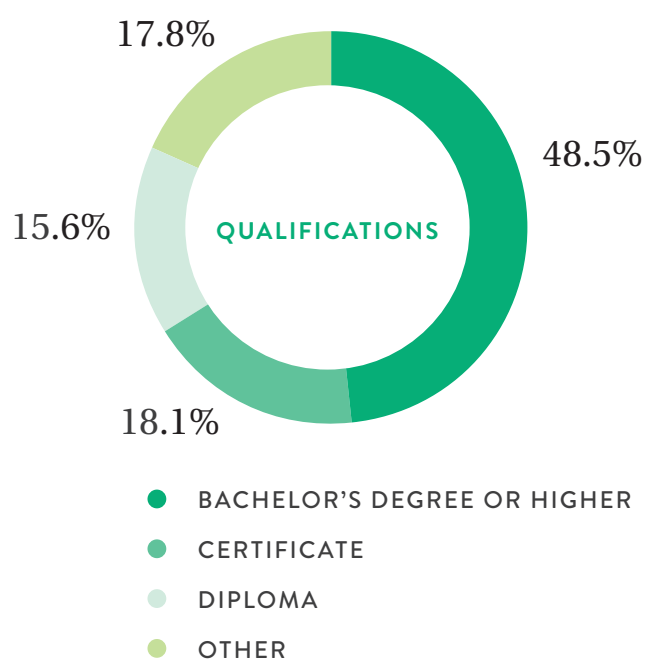
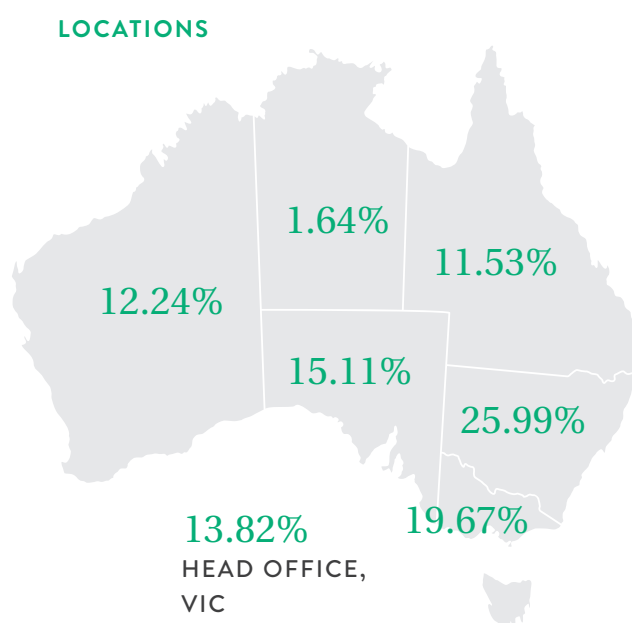
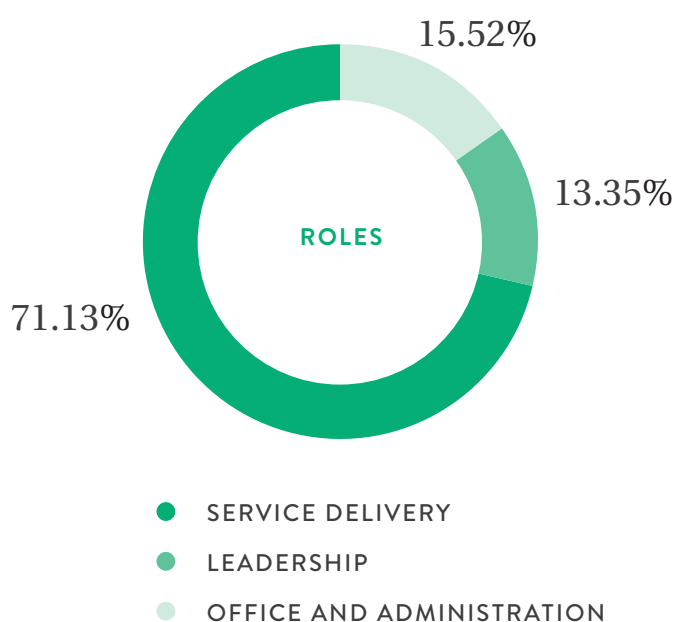
The new framework will be embedded into everyday practice at Neami over 2022 and beyond. The CRM working group, which includes dedicated CRM staff, is collaborating with teams across the organisation and is consulting with stakeholders to develop training and implementation plans to upskill staff and embed this practice approach throughout the organisation.

Anna, Peer Practice
Lead, South Australia



Diverse and skilled workforce

Neami staff are from many walks of life with a shared base of values. Our dedicated team members across service sites and Head Office are connected to our overall purpose and make a meaningful contribution to supporting better mental health and wellbeing.



DIVERSITY

9.74%

OF STAFF ARE IN A PEER
SUPPORT WORKER ROLE

4.92%

OF STAFF IDENTIFY AS
ABORIGINAL OR TORRES
STRAIT ISLANDER

14.44%

OF STAFF SPEAK A
LANGUAGE OTHER
THAN ENGLISH



An engaged workforce

We conducted our annual employee engagement survey towards the end of 2021. The survey revealed an increase in staff engagement in an environment of significant uncertainty and change over the past two years, including the coronavirus pandemic, head office restructure, significant growth in service delivery, Me Well closure, and the implementation of new strategic directions. Overall, the engagement survey results were positive and highlighted areas for celebration as well as suggestions for how staff engagement can be further enhanced.

Almost 60% of staff completed the survey, and our overall engagement score was 77%. A total of 89% of staff rated Neami as a great place to work and are proud to work here, indicating Neami's strong sector position as an employer of choice. Staff told us that they felt supported in their ability to perform their jobs effectively and have managers who genuinely care about their wellbeing.

This year, we aimed to improve how we translate survey feedback into clear actions, and we conducted sessions with leaders to encourage them to devise action plans with their teams. The Learning and Development team met with each service to develop an annual training plan to support and complement team goals and needs, and to give teams a clear idea of what training would take place throughout the year.

We look forward to continuing to progress this work and measuring our impact in the 2022 survey.

Our employee promise

To be a leader in the sector and attract and retain talented staff, it is important that we understand what is special about Neami. To help us articulate this, we developed an Employee Value Proposition (EVP) this year.

Our EVP was created based on insights from staff, who were asked what unique benefits Neami offers them.

The insights provided by staff helped capture what they see as the most valuable and rewarding aspects of working at Neami. This includes how we support people, our impact, values and organisational culture.

We continue to develop this living document as Neami evolves, to continue positioning Neami as an employer of choice. The EVP is now on our website, visit neaminational.org.au/work-with-us to learn more.

Board of Directors



Anthony (Tony) Nippard

Chair

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

Tony was elected to the Neami Board in 2014 and appointed Chair of the Neami Board in October 2019. Tony chairs the Nominations and Remuneration Committee. He is an experienced company director in the not-for-profit and public sectors and has previously occupied senior positions in the Victorian public service.

Tony is a Principal at Thoughtpost Governance.



Ruth Faulkner

Deputy Chair

BSc (Hons), CA, GAICD

Ruth was elected to the Neami Board in March 2017 and chairs the Audit and Risk Committee. She is a Chartered Accountant and a Chartered Accountant Risk Specialist, with more than 20 years' experience working in governance, finance, audit and risk in the not-for-profit, government and commercial sectors.

Ruth is a Partner of Conus Business Consultancy Services located in Far North Queensland.



Fiona Nicholls

BA Welfare Studies, MHSS, GAICD

Fiona was elected to the Neami Board in 2016 and chairs the Finance and Performance Committee. Fiona has 31 years' Commonwealth Government experience in health and social welfare policy, project management and administration, including nine years in the Senior Executive Service focussing on quality and accountability in aged care and system reform in mental health services.



Sonia Law

BA, LLB (Hons), DipEd, PGradDipTESL

Sonia was elected to the Neami Board in 2012. She was Chair of the Board from 2016 to 2019 and now chairs the Strategy Oversight and Futures Committee. Sonia is a lawyer with extensive experience in mental health and disability law and service delivery.

She is the Deputy Public Advocate of Victoria. Prior to this, Sonia was the Manager of the Mental Health and Disability Advocacy Program at Victoria Legal Aid and Corporate Counsel at Forensicare.



Silvio Pontonio

BA (Hons), BSW, MASC, MAASW, AFCHSM

Silvio was elected to the Neami Board in February 2019 and appointed Quality, Safety and Clinical Governance Chair in October 2020. Silvio has extensive experience as a health executive, including within public health, mental health and aged care services. He also brings experience as an advisor and strategist gained during his time as a consultant in the health and mental health sectors.

He is Executive Director, Strategy at Spectrum MRC.



Lorraine Powell

Cert IV MH (Peer Work), GAICD

Lorraine was elected to the Neami Board in 2014. She has 20 years' experience as a mental health consumer representative and consultant at local, state and national levels. She is a director and the WA Coordinator of Lived Experience Australia and a member of the National Register of Mental Health Consumer and Carer Representatives with Mental Health Australia.



Brad Wynter

BAPsych, MBA, CertIV Mgt, GAICD

Brad was elected to the Neami Board in 2011 and was Me Well Chair from April 2019 to November 2020. Brad retired from the Neami Board in 2021.



Jacinta Carboon

BBus, GAICD

Jacinta was elected to the Neami Board in February 2019. Jacinta resigned from the Board in August 2021.

In July 2022, Neami welcomed Dr Shaymaa Elkadi, Dr Tim Smyth, Ms Leesa Chessier and Mr Rick Callaghan to the Board of Directors. As part of the recruitment process, Neami was committed to enhancing the capability and diversity of the Board to include Aboriginal and Torres Strait Islander peoples and other communities that often don't have a voice in the governance of organisations.

Financial report

CONSOLIDATED STATEMENT OF PROFIT OR LOSS AND OTHER COMPREHENSIVE INCOME

For the year ended 30 June 2022

	2022	2021
	\$	\$
Revenue	126,792,115	106,655,523
Other income	1,036,409	2,511,023
Fair value gain (loss) on financial assets at fair value through profit or loss	(3,553,980)	714,461
Employee benefit expenses	(97,176,742)	(85,446,971)
Office and occupancy expenses	(8,418,640)	(7,395,591)
Consortium expenses	(6,774,181)	(5,423,851)
Interest payment	(150,861)	(116,157)
Other expenses	(7,062,373)	(6,664,004)
Depreciation and amortisation expenses	(5,478,008)	(4,062,152)
(Deficit)/Surplus	(786,261)	772,281
Other comprehensive income		
Other comprehensive income/(loss) for the period	-	-
Total comprehensive (loss)/income for the period	(786,261)	772,281

CONSOLIDATED STATEMENT OF FINANCIAL POSITION

As at 30 June 2022

	2022 \$	2021 \$
ASSETS		
Current Assets		
Cash and cash equivalents	28,435,416	22,130,323
Investments	33,506,038	28,373,739
Trade and other receivables	9,884,993	6,838,853
Total Current Assets	71,826,447	57,342,915
Non-Current assets		
Investments	-	9,919,906
Property, plant and equipment	3,662,257	2,150,889
Right of Use Assets	5,399,614	2,949,454
Total Non-Current Assets	9,061,871	15,020,249
Total Assets	80,888,318	72,363,164
LIABILITIES		
Current Liabilities		
Trade and other payables	7,162,870	8,715,133
Deferred income	31,034,981	23,185,256
Leasing liabilities	3,308,752	1,852,173
Provisions	10,105,016	9,315,148
Total Current Liabilities	51,611,619	43,067,710
Non-Current Liabilities		
Leasing Liabilities	2,198,815	1,242,384
Provisions	1,883,104	2,072,029
Total Non-Current Liabilities	4,081,919	3,314,413
Total Liabilities	55,693,538	46,382,123
Net Assets	25,194,780	25,981,041
EQUITY		
Retained Earnings	24,334,000	25,120,261
Reserve	860,780	860,780
Total Equity	25,194,780	25,981,041

Neami National

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Preston VIC 3072

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