

National Mental Health Commission

Annual Report 2019–20



Australian Government

National Mental Health Commission

About this Report

This Annual Report is available online at www.mentalhealthcommission.gov.au

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Welcome to the National Mental Health Commission's Annual Report 2019-20

The National Mental Health Commission's Annual Report 2019-20 provides an account of the activities undertaken during the 2019-20 financial year.

This report details the performance of the National Mental Health Commission (the Commission) against the planned outcomes and performance criteria set out in the 2019-20 Health Portfolio Budget Statements and the National Mental Health Commission's Corporate Plan 2019-23.

The Commission's aim is to be a respected and authoritative national leader in the development of an integrated and well-functioning mental health and suicide prevention system that is person centred and connected, and supports better mental health and wellbeing in Australia.

The Commission's purpose is to provide robust policy advice and evidence on ways to improve Australia's mental health and suicide prevention system, and to act as a catalyst for change to achieve those improvements through monitoring and reporting on investment in mental health and suicide prevention initiatives and ongoing engagement with stakeholders across the mental health and related sectors.

Through collaboration and engagement the Commission incorporates information and data from a broad range of sources, both inside and outside the traditional health or mental health areas, across sectors, jurisdictions and communities and internationally to provide evidence based reports and advice that represent diverse perspectives and are connected to community need.

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Australian Government

National Mental Health Commission

The Hon. Greg Hunt MP
Minister for Health
Minister Assisting the Prime Minister for the Public Service and Cabinet
Parliament House
CANBERRA ACT 2600

Dear Minister

I am pleased to present the Annual Report of the National Mental Health Commission (the Commission) for the period ending 30 June 2020.

This Annual Report has been prepared in accordance with section 70 of the *Public Service Act 1999* and section 46 of the *Public Governance, Performance and Accountability Act 2013* and Division 3A of the *Public Governance, Performance and Accountability Rule 2014*. The Annual Report has been prepared to meet the requirements of section 70(2) of the *Public Service Act 1999*.

I submit this Annual Report in accordance with section 70(1) of the *Public Service Act 1999* for presentation to the Australian Parliament.

The Annual Report includes the Commission's annual performance statements and audited financial statements as required by section 39 and section 42 of the *Public Governance, Performance and Accountability Act 2013*.

I certify that the Commission has prepared fraud risk assessments and fraud control plans and has in place appropriate fraud prevention, detection, investigation and reporting mechanisms that meet the needs of the Commission, and that all reasonable measures have been taken to appropriately deal with fraud relating to the Commission.

Yours sincerely

A handwritten signature in grey ink, appearing to read 'CMorgan'.

Ms Christine Morgan
Chief Executive Officer

12 October 2020

Chief Executive Officer's Review



I am pleased to present the National Mental Health Commission's Annual Report 2019-20, providing information about our work and achievements during the 2019-20 year.

It has been an honour to connect with people in their community to understand their personal experiences of mental health and wellbeing and hear the diverse perspectives about mental health care in Australia. I thank everyone for sharing their experiences and look forward to continued collaboration and engagement.

This year it has also been a privilege to lead, and work alongside, a dedicated and professional team at the Commission who have worked tirelessly to respond to the significant mental health and wellbeing challenges Australians have faced over the past 12 months. Their agility and responsiveness to contribute and collaborate with experts, people with lived experience and communities in need during the recent drought, floods, bushfires and the COVID-19 pandemic, has been impressive.

Like many office-based Australians the Commission team has spent large amounts of time working from home in the first half of 2020. We adapted quickly and continued to find new ways to engage with communities and stakeholders. Innovation coupled with a commitment to our objectives and timelines has ensured projects and obligations have stayed on track.

This report sets out the Commission's performance for the 2019-2020 year, and details our work and achievements. During this period, the Commission continued to lead projects that improve the policy, programs, services and systems that support mental wellbeing and suicide prevention in Australia. The Commission continued to strengthen its operations and improve efficiency, and align resources to deliver Government priorities.

From July – September 2019, the Commission's Connections project connected with people in their communities to understand their personal experiences of mental health and wellbeing to inform a shared *Vision 2030 for Mental Health and Suicide Prevention*. It sought to ensure that these voices are not only included in Vision 2030, but that they provide a starting point for the design of an improved approach to the Australian mental health system.

The Connections project was a seminal national conversation and consultation about the future of mental health and suicide prevention in Australia, and continued to be a tangible reference point for the Commission's work, helping to inform contributions the Commission has made to the Government's response to the complexity of need across our communities during 2020.

Central to the Commission's contribution to the national response to the tragic bushfire season from early September 2019 to early February 2020 was the advice and support the Commission gave to Government to inform its immediate responses to support communities impacted by bushfires, and to commence early work on a mental health framework for use during national disasters and due to be delivered in July 2021.

The Commission transitioned quickly to the immediate recognition and response to the mental health and wellbeing impacts of COVID-19 pandemic. To this end we have worked diligently to ensure that advice and expertise has been provided to Government to inform its responses. Key to the Commission's contribution was the development, together with all jurisdictions, of the *National Mental Health and Wellbeing Pandemic Plan*, endorsed by

National Cabinet on 15 May 2020.

True to the Commission's commitment to collaboration and partnership, in March 2020, the Commission worked closely with more than twenty leading mental health organisations and experts to develop the #InThisTogether campaign to inform all Australians need to prioritise their mental health and wellbeing during COVID-19. This information was widely distributed into homes and communities across Australia thanks to the mental health sector's commitment to ensuring that Australians were prioritising their mental health equally with their physical health. It is this type of unified effort that the Commission will continue to foster across the sector and community.

As part of the Commission's ongoing monitoring and reporting obligations, the Commission delivered a number of reports including the *Monitoring Mental Health and Suicide Prevention: National Report 2019* (the *National Report 2019*) on 23 September 2019, the second annual report, the *Fifth National Mental Health and Suicide Prevention Plan, 2019: Progress Report 2* (the *Fifth Plan 2019 Progress Report*) which was delivered to the Australian Health Ministers' Advisory Council (AHMAC) in January 2020.

The Commission commenced work in August 2019 on Australia's first *National Children's Mental Health and Wellbeing Strategy*, as well as the *National Workplace Initiative* guided by the collective knowledge and expertise of the members of the Mentally Healthy Workplace Alliance, to recognise and focus on the importance of mental health and wellbeing in our places of work.

The coming twelve months will continue to present challenges for many Australians who are impacted by not only the direct health, but the social and economic implications of the COVID-19 pandemic. The Commission will maintain its crucial role in monitoring and reporting, and to be the catalyst for change needed across the mental health, wellbeing and suicide prevention system nationally.

I would like to thank Ms Maureen Lewis Deputy CEO of the Commission for her service and leadership up until her departure in March 2020, and to especially thank the Executive team for leading the delivery of the achievements this year.

Finally, thank you to our Chair Mrs Lucy Brogden AM, our Commissioners and all our staff whose dedication and hard work enables the Commission to work towards its goal of improving the mental health and wellbeing of all Australians.

A handwritten signature in grey ink, appearing to read 'CMorgan', with a stylized, flowing script.

Ms Christine Morgan
Chief Executive Officer

About the Commission

Contributing Lives, Thriving Communities

Our vision

All people in Australia are enabled to lead contributing lives in socially and economically thriving communities.

Our mission

Promote understanding of the outcomes that matter and drive transformational change across service systems for people with lived experience of mental health issues.

Our values

Excellence

- We believe everyone is capable of great things in a great environment.
- We strive for success and celebrate it when we achieve it.
- We know and use evidence to inform our decisions.
- We support innovation and continuous improvement, and are committed to helping build the evidence base.
- We are credible and trusted.

Integrity

- We are honest and trustworthy in all that we do.
- We stand up for what we believe in.
- We respect each other's differences.
- We value human rights and social justice.
- We believe in equity and opportunity for all.

Collaboration

- We value individuals, interactions and connectedness.
- We respect and acknowledge everyone's input, skills and experience.
- We believe in working together.
- We acknowledge the importance of effective communication.
- We support engagement and participation at all levels to enhance our outcomes.

Accountability

- We value our independence and transparency.
- We take accountability for our commitments and actions and expect no less of others.
- We are reflective and open to feedback.
- We ensure correct information.

Overview

The National Mental Health Commission (the Commission) is an executive agency under the *Public Service Act 1999* and a non-corporate Commonwealth Entity under the *Public Governance, Performance and Accountability Act 2013*. The Commission is part of the federal Minister for Health's portfolio and reports directly to the Minister for Health. The Chief Executive Officer (CEO) is the accountable authority under the *Public Governance, Performance, and Accountability Act 2013* and is responsible for the governance and performance of the Commission. The Commission's Advisory Board includes a Chair and a number of Mental Health Commissioners (as determined by the Minister from time to time), including the CEO.

The Commission's purpose is to provide robust policy advice and evidence on ways to improve Australia's mental health and suicide prevention system, and to act as a catalyst for change to achieve those improvements through monitoring and reporting on investment in mental health and suicide prevention initiatives and ongoing engagement with stakeholders across the mental health and related sectors. Our overarching aim is to ensure that all Australians are able to lead a full and contributing life.

The Commission's budgeted outcome is to provide expert advice to the Australian Government and cross-sectoral leadership on the policy, programs, services and systems that support mental health in Australia, including through administering the Annual National Report Card on Mental Health and Suicide Prevention, undertaking performance monitoring and reporting and engaging consumers and carers.¹

The Commission is independent from the agencies that fund and deliver mental

health and suicide prevention policy and services. Through collaboration and engagement it incorporates information and data from a broad range of sources, both inside and outside the traditional health or mental health areas across sectors, jurisdictions and communities; and nationally and internationally to provide evidence based reports and advice that represent diverse perspectives and are connected to community need.

Through its reach and impact the Commission aims to create increased accountability and transparency in the mental health and suicide prevention system, provide leadership to support strengthening the system to meet the mental health and wellbeing needs of the community, and support the national prominence of mental health and wellbeing.

The Commission works with stakeholders to ensure reforms are collectively owned and actioned. It acknowledges that engaging stakeholders and facilitating meaningful participation is essential to achieving transformational change.

In particular it seeks to engage with those with a lived experience of mental health issues, including carers and other support people, in all areas of its work. The Commission affirms the right of all people to participate in decisions that affect their care and to determine the conditions that enable them to live contributing lives. Diverse and genuine engagement with those with lived experience adds value to decision-making by providing direct knowledge about the actual needs of the community, resulting in better targeted and more responsive services and initiatives.

The Commission applies the *Contributing Life* framework to its work – a whole-of-person, whole-of-system, whole-of-life approach to mental health and wellbeing. A contributing life can mean many things.

¹ Portfolio Budget Statements Program 1.1 2019-20
Health Portfolio Budget Statements, p.373

It can mean a fulfilling life enriched with close connections to family and friends; good health and wellbeing to allow those connections to be enjoyed; having something to do each day that provides meaning and purpose – whether it be a job, supporting others or volunteering; and a home to live in, free from financial stress and uncertainty. In short, it means thriving, not just surviving.

The Commission works to support individuals to: live a contributing life; have equitable opportunity; have the best possible mental health and wellbeing; participate in community, education and employment; have knowledge, assurance and respect; and be able to contribute to socially and economically.

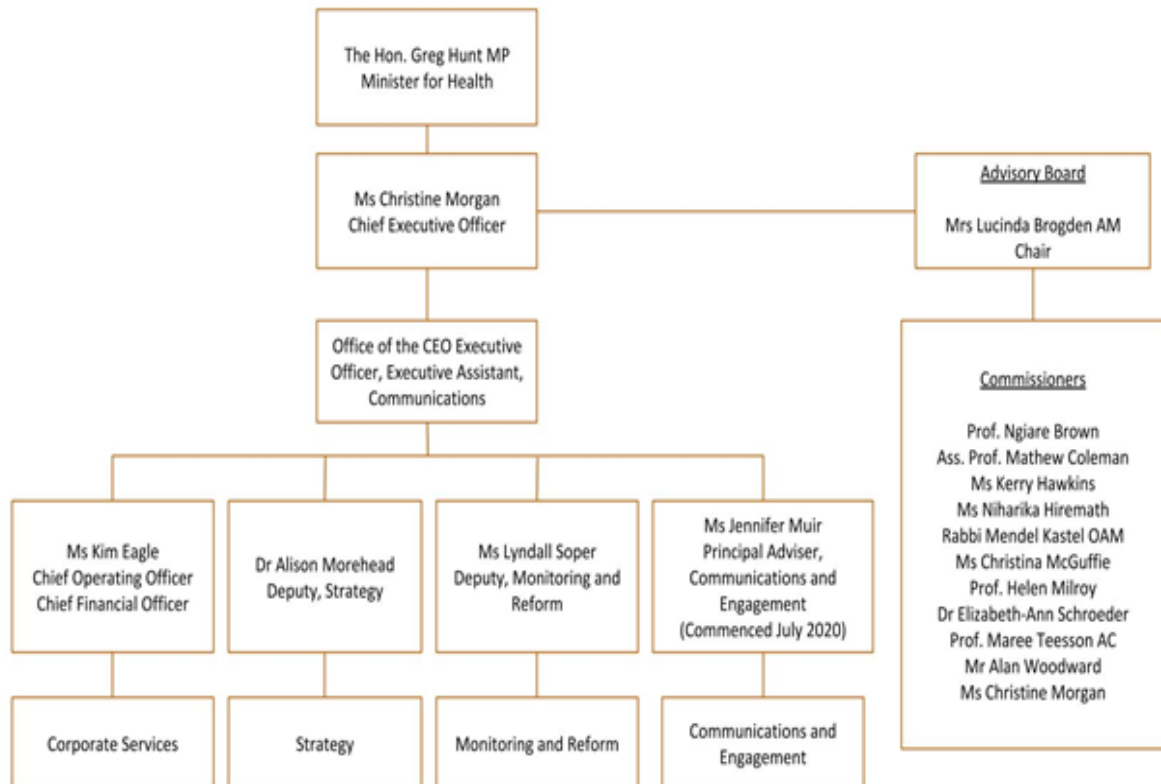
Indigenous people have significantly higher rates of mental distress, trauma, suicide and intentional self-harm, as well as exposure to risk factors such as stressful life events, family breakdown, unemployment, racism, discrimination,

imprisonment, crime victimisation and alcohol and substance misuse. The mental health and social and emotional wellbeing of Aboriginal and Torres Strait Islanders is a priority across all the Commission's work. It is committed to building on its close working relationship with First Nations leaders and communities to ensure that mental health, wellbeing and suicide prevention responses in the mental health reform agenda are informed and led by their input and guidance.

The Chair and Commissioners, who bring a range of expertise and perspectives, provide advice and input on the strategic direction which reflects the evidence they gather from the community, research and data. They are committed to giving a voice to the experiences of people living with mental health difficulties or suicide risk and their families and support people.



Our structure



Our Commissioners

In 2019-20, the Advisory Board provided expertise and advice to the CEO and contributed to the Commission's strategic direction and priorities



Mrs Lucinda Brogden AM, Chair

February 2018 – present (Chair)

August 2017 – January 2018 (Co-Chair)

April 2014 – July 2017 (Commissioner)

Mrs Lucy Brogden AM brings extensive experience in psychology and has a strong commitment to helping others and building stronger communities.

Lucy's primary areas of focus are issues facing mental health and wellbeing particularly in the workplace and the community. She takes an evidence based approach to problem solving and social investment.

Lucy has more than 25 years of commercial experience with companies including Macquarie Group and Ernst & Young and more than ten years in organisational psychology. Specifically, Lucy has worked in trusted advisory roles with some of Australia's leading CEOs, Managing Partners, Ministers and Chairs in investment banking, finance, law and government.



Professor Ngiare Brown

August 2017 - present

Professor Ngiare Brown is a Yuin nation woman from the south coast of NSW. She is a senior Aboriginal medical practitioner with qualifications in medicine, public health and primary care, and has studied bioethics, medical law and human rights. She was the first identified Aboriginal medical graduate from NSW, and is one of the first Aboriginal doctors in Australia. Over the past two decades she has developed extensive national and international networks in Indigenous health and social justice, including engagement with the UN system. Ngiare is a clinician and researcher, and a chief investigator on multiple national and international grants. She works largely in the translation and implementation space, exploring how to utilise 'best evidence' to inform policy, resourcing and service delivery determinations.

Ngiare is a founding member and was Foundation CEO of the Australian Indigenous Doctors' Association (AIDA). She is a founding member of the Pacific Region Indigenous Doctors' Congress (PRIDoC); and a member of the International Indigenous Genomics Alliance. She has served as a Director on a number of national Boards, including the Social Inclusion Board (Cth Government) and Australian Indigenous Mentoring Experience (AIME). She also serves as a Director on the Bangarra Aboriginal Dance Theatre Board, The Australian Research Alliance for Children and Youth (ARACY) Board and the National Centre for Indigenous Genomics Board. Ngiare was reappointed to the Prime Minister's Indigenous Advisory Council, and in 2017 was appointed a Commissioner on the National Mental Health Commission.

Ngiare is the Founding Director of Ngaoara, a not-for-profit dedicated to Aboriginal child and adolescent wellbeing. The work of Ngaoara explores culturally relevant approaches to childhood health and social and emotional wellbeing, and supports communities to develop strength based approaches to breaking intergenerational cycles of trauma and disparity.



Associate Professor Mathew Coleman

January 2020 – present

Associate Professor Mathew Coleman is a clinical academic with the Rural Clinical School of WA (University of WA) and consultant psychiatrist with the WA Country Health Service. As a devoted rural medical specialist and academic living and working in country WA, he also runs a small farming business with his young family, grazing sheep. Mathew has qualifications in Child and Adolescent Psychiatry, Addiction Psychiatry and health service management. He is an active researcher into the mental health of rural and remote Australians, and is an advocate for locally available and sustainable services for people and communities who live in the bush. He is actively engaged in developing and educating health clinicians for regional, rural and remote Australia. Mathew also draws on his past military experiences to better inform and educate civilian health services to build capacity and expertise in military and veteran mental health.



Ms Kerry Hawkins

September 2018 – present

Ms Kerry Hawkins is the current president of Western Australian Association for Mental Health. She was a carer representative on the WAAMH board for four years and was appointed president of WAAMH in November 2016.

Kerry has acquired a solid understanding of the issues facing the mental health sector. This experience is complemented by her professional career in the private, education and public sectors, including working as a project management consultant at KPMG, a high school teacher, and a strategic advisor for the National Native Title Tribunal. She has previously worked as a senior program manager for the National Disability Insurance Scheme, the WA Mental Health Commission, and as a Carer Consultant for North Metro Adult Health Service. Her other board appointments include Vice President of Helping Minds and WA Director for Emerging Minds.



Ms Niharika Hiremath

3 April 2019 – present

Ms Niharika Hiremath has a lived experience of clinical depression and anxiety and has herself been through the mental health care system in Australia. Her recovery led her to find her passion; working to understand and reduce stigma, especially in ethnically diverse communities.

Niharika has seen the impact that quality mental health support can have first-hand, and is committed to improving wellbeing outcomes for all Australians alike. She has held various roles as a youth mental health representative, including on the headspace's Youth National Reference Group.



Rabbi Mendel Kastel OAM
September 2018 – present

Rabbi Mendel Kastel OAM has extensive experience in community welfare work. He is highly respected for his achievements in dealing with problems of youth living in the city. He has worked with people with disability, made frequent hospital and prison visits, helped those suffering from addictions and offered counselling services for the bereaved. His skill, knowledge and interest spans across the broad spectrum of mental health including trauma, homelessness, youth, suicide prevention, economics, social investment and innovation.

Rabbi Kastel has a long standing interest in the welfare of younger members of the community. However, his work within various communities across the world has taken him far beyond his initial role of only working with youth including experience working with hospices. Rabbi Kastel has experienced first-hand the problems of dealing with entire communities, understanding the importance of establishing and making available life-changing programs for those living in the community.



Ms Christina McGuffie
September 2018 – present

Ms Christina McGuffie has lived experience as both a consumer and a carer. She has experienced first-hand the difficulties associated with getting access to the right care and brings with her knowledge of what is working and what is not working in the mental health system.

Christina has an in-depth knowledge of government and has established good working relationships across the sector, including with state and territory governments and key leaders in mental health. After 11 years in federal politics, she has developed extensive knowledge about how governments function and what they need from bodies such as the Commission.

Christina has 28 years' experience in journalism and government advisory work. She has demonstrated strong communication and stakeholder engagement skills and her experience in communications, media and mental health advice to government are of particular value to the Advisory Board.



Professor Helen Milroy
August 2017 – present

Professor Helen Milroy is a Consultant Child and Adolescent Psychiatrist and Winthrop Professor at the University of Western Australia. She has held positions on State and national mental health advisory committees and boards with a particular focus on the wellbeing of children. Her work and research interests include holistic medicine, child mental health, recovery from trauma and grief, cultural models of care, Aboriginal health and mental health, and developing and supporting the Aboriginal medical workforce.

Helen holds a degree in Medicine and Surgery, is a fellow of the Royal Australian and New Zealand College of Psychiatry and has completed a Certificate of Advanced Training in Child and Adolescent Psychiatry.



Dr Elizabeth-Ann Schroeder

3 April 2019 - present

Dr Elizabeth Schroeder is a Senior Research Fellow for the Centre for the Health Economy and Senior Lecturer for the Macquarie University's Department of Health Systems and Populations Faculty of Medicine.

She has extensive experience (locally and internationally) in applied research in the economics of complex public health interventions. Her current research work centres around health systems integration and mental health. In her previous roles she has collaborated with national research, audit and commissioning bodies to translate research findings into policy.



Professor Maree Teesson AC

September 2018 – present

Professor Maree Teesson AC is Director of The Matilda Centre for Research in Mental Health and Substance Use, Director of the NHMRC Centre of Research Excellence in Prevention and Early Intervention in Mental Illness and Substance Use (PREMISE) and NHMRC Principal Research Fellow at The University of Sydney.

Maree was announced as a Companion of the Order of Australia in the Australia Day 2018 Honours List. She is also a Fellow of the Australian Academy of Health and Medical Sciences and the Australian Academy of Social Sciences, a National Mental Health Commissioner and Member, National Health and Medical Research Council. She is also a founding member of TheMHS Management Committee since 1991.

Maree's vision is to build the world's leading dedicated translational research program for the prevention and treatment of co-occurring mental health and substance use problems. She seeks to increase our understanding of substance use and mental health problems, prevent these where possible and improve treatment responses.



Mr Alan Woodward

August 2019 – present

Mr Alan Woodward has worked in the fields of mental health, crisis support and suicide prevention for 20 years as an executive leader, a service and program developer, an evaluator and researcher and as an expert advisor to governments and peak bodies.

Mr Woodward has contributed to suicide prevention policy and program development nationally as a Board Director for nine years and more recently as a strategic advisor on quality and innovation with Suicide Prevention Australia. Mr Woodward worked for Lifeline Australia in various executive roles for 14 years until 2018, including the Lifeline Research Foundation. Mr Woodward holds a Master's Degree in Social Science and Policy, a Business Degree in Public Administration and a Diploma in Arts/Communication. He is a Fellow of the Australian Evaluation Society.



Ms Christine Morgan
March 2019 – present

Ms Christine Morgan is the CEO of the National Mental Health Commission. Prior to joining the Commission, Christine was CEO of the Butterfly Foundation for eating disorders and Director of the National Eating Disorders Collaboration for ten years and prior to that was General Manager at Wesley Mission, over the areas of Corporate Services; and Community & Family Development.

Prior to joining Wesley Mission, Christine was Executive General Manager responsible for managing the strategic direction and business unit effectiveness of the Wholesale, Broadband & Media Business Unit at Telstra; and prior to that held the joint roles of General Counsel and Company Secretary for a number of ASX listed companies.

Advisory Board meetings

Advisory Board – meeting attendance										
	1-5 Jul 2019	14-15 Aug 2019	30 Oct 2019	27 Nov 2019	5 Feb 2020	18 Mar 2020	30 Apr 2020	20 May 2020	24 Jun 2020	Total
Mrs Lucinda Brogden AM	Y	N	Y	Y	Y	Y	Y	N	Y	7/9
Prof. Ngaire Brown	Y	N	Y	Y	Y	N	Y	Y	Y	7/9
Prof. Mathew Coleman	-	-	-	-	Y	Y	Y	Y	Y	5/5
Prof. Wendy Cross	Y	N	-	-	-	-	-	-	-	1/2
Ms Kerry Hawkins	Y	Y	Y	Y	Y	Y	Y	Y	Y	9/9
Ms Niharika Hiremath	Y	N	Y	Y	Y	Y	Y	Y	N	7/9
Rabbi Mendel Kastel OAM	Y	Y	Y	Y	Y	Y	Y	Y	Y	9/9
Ms Christina McGuffie	Y	N	N	Y	Y	Y	Y	N	Y	6/9
Prof. Helen Milroy	Y	N	N	Y	Y	Y	Y	Y	Y	7/9
Dr Elizabeth-Ann Schroeder	Y	Y	Y	Y	Y	Y	Y	Y	Y	9/9
Prof. Maree Teesson AC	Y	N	Y	Y	Y	Y	Y	Y	Y	8/9
Mr Alan Woodward	-	Y	Y	Y	Y	Y	Y	Y	Y	8/8
Ms Christine Morgan	Y	Y	Y	Y	Y	N	Y	Y	Y	8/9

Professor Wendy Cross was a Commissioner from August 2017 to July 2019.

Report on Performance

Introductory statement

I, Christine Morgan, as the accountable authority of the National Mental Health Commission, present the 2019–20 Annual Performance Statement as required under paragraph 39(1)(a) of the *Public Governance, Performance and Accountability Act 2013* (PGPA Act). These results are reported against the performance measures in the Commission's Corporate Plan 2019–2023 (CP) and the Commission's 2019–20 Portfolio Budget Statement (PBS). It includes the activities, achievements and performance during the year to achieve our purpose.

In my opinion, this Annual Performance Statement complies with subsection 39(2) of the PGPA Act, is based on properly maintained records and accurately reflects the performance of the Commission for the year ending 30 June 2020.



Ms Christine Morgan
Chief Executive Officer

Performance Targets 2019–20

PORTFOLIO BUDGET STATEMENTS

OUR OUTCOME

Provide expert advice to the Australian Government and cross-sectoral leadership on the policy, programs, services and systems that support mental health in Australia, including through administering the Annual National Report Card on Mental Health and Suicide Prevention, undertaking performance monitoring and reporting and engaging consumers and carers.

Program 1.1

The NMHC continues to increase accountability and transparency in mental health and suicide prevention through independent reporting and the provision of advice to the Australian Government and the community. The NMHC continues to lead projects that improve the policy, programs, services and systems that support mental wellbeing and suicide prevention in Australia.

Performance Criteria

Provide expert advice to government and report on national progress to improve mental health and prevent suicide.

Target 2019-20:

- Prepare and disseminate the Annual National Report Card on Mental Health and Suicide Prevention.
- Prepare and deliver an annual report to the COAG Health Ministers on the progress of the implementation of the Fifth National Mental Health and Suicide Prevention Plan.

Undertake research, analysis and evaluation on key national mental health priorities.

Target 2019-20: Evidence-based advice will be available to inform improvements in policy, programs, services and systems that support mental health and suicide prevention.

Promote consumer and carer engagement and participation in the mental health system.

Target 2019-20: Increased opportunities for engagement and participation by consumers and carers in the mental health system.

CORPORATE PLAN 2019–2023

The Commission’s purpose is to monitor and report on investment in mental health and suicide prevention initiatives, provide evidence based policy advice to Government and disseminate information on ways to continuously improve Australia’s mental health and suicide prevention systems, and act as a catalyst for change to achieve those improvements. This includes increasing accountability and transparency in mental health through the provision of independent reports and advice to the Australian Government and the community.

Throughout 2019–20 and over the next three years, the Commission will seek to continue to ensure that investment in mental health is both effective and efficient. We will work with stakeholders –including with people with lived experience, their families and other support people – to ensure reforms are collectively owned and actioned. The Commission acknowledges that engaging stakeholders and facilitating meaningful participation is essential to achieving transformational change.

The Commission seeks to engage with people with a lived experience of mental health issues, including carers and other support people, in all areas of our work. We affirm the right of all people to participate in decisions that affect their care and to determine the conditions that enable them to live contributing lives. Diverse and genuine engagement with people with lived experience, their families and other support people adds value to decision-making by providing direct knowledge about the actual needs of the community, which results in better targeted and more responsive services and initiatives.

The Commission developed the Contributing Life approach in 2013 and has applied it to all its work since then. A Contributing Life is a whole-of-person, whole-of-system, whole-of-life approach to mental health and wellbeing. This means we consider people across the lifespan – from pre-birth to old age.

A contributing life can mean many things. It can mean a fulfilling life enriched with close connections to family and friends; good health and wellbeing to allow those connections to be enjoyed; having something to do each day that provides meaning and purpose – whether it be a job, supporting others or volunteering; and a home to live in, free from financial stress and uncertainty. In short, it means thriving, not just surviving.

The Commission will work to support individuals to: live a contributing life; have equitable opportunity; have the best possible mental health and wellbeing; participate in community, education and employment; have knowledge, assurance and respect; and be able to contribute to socially and economically thriving communities.

Indigenous Australians have significantly higher rates of mental distress, trauma, suicide and intentional self-harm, as well as exposure to risk factors such as stressful life events, family breakdown, unemployment, racism, discrimination, imprisonment, crime victimisation and alcohol and substance misuse. Aboriginal and Torres Strait Islander mental health and social and emotional wellbeing will be a priority across all the Commission’s key work areas.

The Commission will facilitate collaboration across all sectors to promote mental health and prevent mental illness and suicide – this includes health, housing, human services, income support, justice, education, employment, defence, veterans’ affairs and the broader system to maximise outcomes and integrate service provision.

OUR KEY WORK AREAS

1. Monitoring and reporting
2. Shaping the future
3. Consumer and carer engagement and participation
4. Workforce growth and development
5. Mental health research
6. Strengthen the Commission to enhance effectiveness

Analysis of Performance

The Commission delivered on its purpose to provide independent robust policy advice and evidence on ways to improve Australia's mental health and suicide prevention system, and to act as a catalyst for change to achieve those improvements.

The last twelve months have been particularly challenging for Australians with the health and financial impacts of the COVID-19 pandemic and prior to that the drought, floods and bushfires.

During this time, the Commission prioritised its resourcing to support the Australian Government response to the mental health and suicide prevention needs of Australians.

In January 2020, the Commission contributed advice to the development of the package to support the mental health and wellbeing of individuals, families and communities, including first responders, affected by the bushfires. The Australian Government made a \$76 million investment towards several initiatives to support the mental health needs of those affected.

In March 2020, the Commission contributed advice to the development of the Australian Government's mental health response to COVID19. The Australian Government made a \$74 million investment towards these mental health needs, together with an announcement that extended telehealth rebates under the Medical Benefits Scheme to mental health services.

The Commission launched #InThisTogether – a national online campaign which provided important mental health and wellbeing tips. The Commission worked closely with mental health organisations across the country and experts in the field to develop a set of practical tips to support mental health and wellbeing during the COVID-19 pandemic.

In May 2020, the Commission, with the Victorian and New South Wales governments, coordinated the rapid development of the *National Mental Health and Wellbeing Pandemic Response Plan* (the Plan), working collaboratively with all jurisdictions and with stakeholders and input from mental health sector leaders. The Australian Government made an additional \$48.1 million investment in support of the priority actions. All nine jurisdictions have committed to the Plan's actions for addressing the mental health and wellbeing needs of the Australian community during and in the recovery phases of the COVID-19 pandemic.

Throughout 2019-20, the Commission continued to monitor and report, delivering the *National Report 2019* in September 2019. It made a number of recommendations regarding the key mental health reforms and other key mental health and suicide prevention issues. The *Fifth Plan 2019 Progress Report* detailed the progress of the *Fifth Plan* reform against the performance indicators and actions in the Fifth Plan. It was delivered to the Australian Health Ministers Advisory Council in January 2020. The *Fifth National Mental Health and Suicide Prevention Plan, 2019: The consumer and carer perspective* was published in September 2019.

Progress continued on *Vision 2030* in 2019-20, starting with Connections from July to September 2019 and the draft Blueprint being delivered to the Minister for Health in December 2019, subject to ongoing consultation. The Roadmap is being developed and will identify specific policies, programs, investments and requirements to enable sustainable change, moving from the current state to the system proposed in the Blueprint. It will be delivered to the Minister for Health in December 2020.

The Commission also continued to deliver planned work, including carrying on consultation and engagement activities online rather than in person as a result of the restrictions imposed by the COVID-19 pandemic. There was a slight delay for some projects and the Commission

formally sought an extension for the delivery of the draft National Children's Mental Health and Wellbeing Strategy – now to be delivered in December 2020.

PERFORMANCE RESULTS

Monitoring and reporting

The Commission monitors and reports on Australia's mental health and suicide prevention system to support continuous improvement, accountability and transparency with a particular focus on system performance, outcomes and impacts on mental health and wellbeing.

National Report on Mental Health and Suicide Prevention 2019

Each year, the Commission delivers an annual report to the Australian Government and the community on Australia's mental health and suicide prevention system.

On 23 September 2019, the Commission delivered *Monitoring Mental Health and Suicide Prevention: National Report 2019* (the *National Report 2019*). The report is available on the Commission's website.

The *National Report 2019* provided an assessment of the progress of key national reforms in mental health and suicide prevention including Primary Health Networks (PHNs), the National Disability Insurance Scheme (NDIS), Suicide Prevention initiatives and the Fifth National Mental Health and Suicide Prevention Plan (the Fifth Plan).

The *National Report 2019* also provided an assessment of the performance of the mental health system by looking at mental health expenditure, workforce, seclusion and restraint, consumer and carer engagement and participation, and mental health outcomes. In addition, the report examined the social determinants of health and their impact on mental illness.

The *National Report 2019* made recommendations, covering the major

national reforms as well as the following key issues:

- There is a recognised need for a whole of government approach to mental health and suicide prevention and this needs to be implemented.
- Investment in early intervention and prevention services is key to preventing mental health problems later in life and is cost-effective.
- To plan for service delivery and facilitate ongoing improvement in outcomes for consumers and carers, there is a need for more comprehensive publicly reported data across all systems that affect mental health.

The recommendations are variable in both scale and scope, and many require time to be implemented. The Commission continues to work with stakeholders to assess actions on the recommendations.

In 2019-20, the Commission also commenced work on the *National Report 2020* which will be published by 31 December 2020.

The Fifth National Mental Health and Suicide Prevention Plan, 2019: Progress Report 2

The Fifth National Mental Health and Suicide Prevention Plan (Fifth Plan) was endorsed by the Council of Australian Government's Health Council in August 2017. The Fifth Plan establishes a national approach for collaborative action to improve Australia's mental health and suicide prevention systems over the period 2017 to 2022.

The Commission monitors and reports on the progress of implementation of the

Fifth Plan and delivers an annual report to Australia's Health Ministers. This report measures the progress against the performance indicators and actions over the life of the plan, which is a key indicator for determining the success of the Fifth Plan reform.

The second annual report, the *Fifth National Mental Health and Suicide Prevention Plan, 2019: Progress Report 2* (the *Fifth Plan 2019 Progress Report*) was delivered to the Australian Health Ministers' Advisory Council (AHMAC) in January 2020.

To measure the progress of implementation, the Commission surveyed governments, PHNs, AHMAC committees and state mental health commissions that are tasked with implementing the actions of the Fifth Plan. The *Fifth Plan 2019 Progress Report* provides a summary of progress and a current status rating against each action and includes achievements, barriers and enablers against each of the eight priority areas. It provides an analysis of implementation progress up to 30 June 2019, and builds on the performance indicator baseline analysis established in 2018 to include – where sufficient data is available – analysis of whether or not there have been improvements in health, wellbeing or mental health system performance.

In order to understand whether the Fifth Plan is making a difference to consumers and carers, the Commission developed a public survey to capture consumer and carer experiences of mental health services in Australia.

In September 2019, the Commission published the *Fifth National Mental Health and Suicide Prevention Plan, 2019: The consumer and carer perspective* report. The report is available on the Commissioner's website.

This was the first in a series of reports to be produced annually throughout the life of the Fifth Plan. The Commission will use

this as a baseline to track progress and measure change from the perspective of consumers and carers over the coming years. Stakeholders responsible for implementing the Fifth Plan can also use these reports to consider how their efforts are impacting consumers and carers as they interact with the mental health system.

The *Fifth National Mental Health and Suicide Prevention Plan, 2020: The consumer and perspective* report will be delivered by 31 December 2020 and made available on the Commission's website.

Aboriginal and Torres Strait Islander mental health

The Commission continued to monitor and report on Aboriginal and Torres Strait Islander mental health and suicide prevention.

In 2019-20 the Commission made recommendations on ways to improve the mental health and wellbeing of Aboriginal and Torres Strait Islander people in the *National Report 2019* and in submissions to inquiries including the Productivity Commission inquiry into mental health and the Royal Commission into Victoria's Mental Health System.

In the *National Report 2019* the Commission's recommendations included:

- The development of a culturally appropriate national survey to collect high quality data on prevalence of mental illness in Aboriginal and Torres Strait Islander communities.
- The Australian Government to encourage PHNs to position community controlled organisations as preferred providers of mental health and suicide prevention services for Aboriginal and Torres Strait Islander people.
- For all governments to commit to a national suicide prevention plan led by the knowledge and expertise of Aboriginal and Torres Strait Islander people.

The Commission's recommendations in its submission to the Productivity Commission's inquiry into expenditure on children in the Northern Territory endorsed a partnership approach to ensure Aboriginal and Torres Strait Islander peoples play a leading role in the planning, design and implementation of the proposed new joint funding framework. The Commission also recommended a justice reinvestment approach to criminal justice and the positioning of Aboriginal and Torres Strait Islander controlled organisations as preferred providers of services for Aboriginal and Torres Strait Islander people.

The Commission provided a submission to the Productivity Commission's consultation on the development of the Indigenous Evaluation Strategy to ensure it addressed social and emotional wellbeing, mental health and suicide prevention programs.

As part of its Connections tour in 2019, the Commission visited Aboriginal and Torres Strait Islander communities across Australia, including in remote locations, to consult local communities on their vision for the mental health and suicide prevention system and to identify issues and opportunities for inclusion in Vision 2030.

National Disability Insurance Scheme

The Commission continued to monitor and report on the impact of the National Disability Insurance Scheme (NDIS) as it relates to people with a psychosocial disability, including what services are available for those who are not receiving services under the NDIS. The *National Report 2019* considered consequences of the scheme for people with a psychosocial disability and their supporters.

The Commission also engaged Community Mental Health Australia to conduct the Commonwealth Mental Health Programs Monitoring Project. The final report from the project was released in September

2019: *Commonwealth Mental Health Programs Monitoring Project: Tracking transitions of people from PIR, PHaMs and D2DL into the NDIS*. This report can be found on the Community Mental Health Australia website.

The Commission made two submissions to NDIS related inquiries: the 2019 review of the NDIS Act and the new NDIS Participant Service Guarantee, and the Joint Standing Committee on the National Disability Insurance Scheme planning. These submissions can be found on the Commission's website.

Suicide Prevention

The Commission continues to work collaboratively with stakeholders to support suicide prevention efforts in Australia. In 2019-20 the Commission participated in the Suicide Prevention Project Reference Group, a governance committee established under the Fifth Plan to develop a National Suicide Prevention Implementation Strategy that embodies a systems approach to suicide prevention.

The Commission also continued to prioritise suicide prevention as part of its monitoring role. This included an analysis of the current state of suicide prevention reforms and making eight recommendations for sector improvements in the *National Report 2019*, and raising specific issues in submissions to inquiries, including the Productivity Commission inquiry into mental health, and the *Royal Commission into Aged Care Quality and Safety*. The status of the suicide prevention recommendations from the *National Report 2019* will be reported in the *National Report 2020*.

Data and data capability

In 2019-20, the Commission contributed to the development of Australia's mental health and suicide prevention data and data capability:

- As an active participant in the development of mental health data and performance indicators that facilitate national reporting through participation in the Mental Health Information Strategy Standing Committee (MHISSC).
- Working with the MHISSC, the Australian Institute for Health and Welfare (AIHW) and Australian Bureau of Statistics to analyse performance indicator data for the Annual Fifth Plan Progress Report. The Commission reported data from 18 of 24 Fifth Plan performance indicators in the Fifth Plan 2019 Progress Report.
- Working in partnership with the AIHW and the Australian Government Department of Health to progress the National Suicide and Self-harm Monitoring Project.
- Making 12 recommendations for key areas of data development and investment in the *National Report 2019*. The status of these recommendations will be reported in the *National Report 2020*.

Shaping the future

The Commission delivers independent evidence based advice to the Australian Government where there is a priority need, an identified or emerging issue, or to target specific areas requiring Government focus. It works to strengthen the mental health and suicide prevention system to meet the future needs of the community and works with stakeholders to develop and implement national approaches to system improvement and investment.

Priority needs and emerging issues

In January 2020, the Commission contributed advice to the development of the package to support the mental health and wellbeing of individuals, families and communities, including first responders, affected by the bushfires. The Australian Government made a \$76 million investment towards several initiatives to support the mental health needs of those affected.

In March 2020, the Commission contributed advice to the development of the Australian Government's mental health response to COVID19. The Australian Government made a \$74 million investment towards these mental health needs, together with an announcement that extended telehealth

rebates under the Medical Benefits Scheme to mental health services.

In March 2020 the Commission launched #InThisTogether – a national online campaign which provided Australians with important mental health and wellbeing tips. The Commission worked in close collaboration with mental health organisations and experts in the field to develop a set of practical tips to support mental health and wellbeing during the COVID-19 pandemic. The #InThisTogether campaign encouraged Australians to actively follow and share the tips remaining physically distant but socially and emotionally connected with family, friends, neighbours and their community.

In May 2020, the Commission, with the Victorian and New South Wales governments, coordinated the development of the *National Mental Health and Wellbeing Pandemic Response Plan* (the Plan), working collaboratively with jurisdictions and stakeholders and input from mental health sector leaders. The Plan was endorsed by National Cabinet on 15 May 2020. The federal Government made an additional \$48.1 million investment in support of the priority actions. All nine jurisdictions committed to the Plan's actions for addressing the mental health and

wellbeing needs of the Australian community during and in the recovery phases of the COVID-19 pandemic.

Vision 2030

In December 2019, the Commission delivered the draft Vision 2030; Blueprint for Mental Health and Suicide Prevention (Vision 2030) to Government, for approval for further consultation. This is available on the Commission's website.

Vision 2030 is a shared long term approach providing direction for current and future governments towards improving the mental health system in Australia. It covers research, prevention, early intervention, treatment, recovery and multi-sector approaches to psychosocial wellbeing and has involved working with States and Territories as partners with the Commonwealth, alongside a range of community stakeholders.

Vision 2030 includes:

- The Connections Project (Connections)
- Development of the *Vision 2030; Blueprint for Mental Health and Suicide Prevention* (the Blueprint), and
- Development of the *Vision 2030 Implementation Roadmap* (the Roadmap).

Connections – conducted from July to September 2019 – provided an opportunity for those with a living experience or mental ill-health and/or those providing care, to be the centre of the conversation and contribute to the future of mental health care, suicide prevention and wellbeing in Australia. It sought to ensure that these voices are not only included in Vision 2030, but that they provide strategic input into what is needed to change and the design of an improved approach. The Commission held 26 town hall meetings and 17 service provider stakeholder meetings, resulting in contributions from over 1,300

individuals including representatives from approximately 86 organisations. This was accompanied by an online consultation which received 2,090 responses.

The Commission thematically analysed the findings of Connections to develop the Blueprint – a framework which demonstrates the goals and objectives for mental health care and provides the foundation for the Roadmap. A multi-layered approach was used to develop, test and consult on the Blueprint with a focus on human-centred design principles and evidence-informed models.

The Blueprint brought together and synthesized Connections data; current and recent Australian and international principles, standards, plans and reviews on mental health including recommendations; research evidence on effective mental health systems and service approaches; and, contextual information on potential future needs and experiences of mental health for all Australians.

In early 2020, the Commission commenced work on the development of the Roadmap. The Roadmap will address the specific actions to enable sustainable change, moving from the current state to the framework proposed in the Blueprint.

Development of the Roadmap has been guided by an Advisory Committee consisting of members from Commonwealth and State governments, consumer and carer representatives, mental health peak bodies, Aboriginal and Torres Strait Islander Community Controlled Health Organisations, professional associations, centres of excellence in mental health research, and individual clinical and cultural expertise.

In addition to the Advisory Committee, content for the Roadmap is being developed and refined based on consultation with stakeholders.

During the second half of 2020 the Commission will continue to develop the Roadmap and work towards integrating

the findings of other mental health reform activities (including the Productivity Commission inquiry into mental health care, the Royal Commission into Victoria's Mental Health System, the Medicare Benefits Schedule Review, and the National Suicide Prevention Adviser Report) into the final Vision 2030 report.

National Children's Mental Health and Wellbeing Strategy

In August 2019, the Minister for Health tasked the Commission to lead the development of a National Children's Mental Health and Wellbeing Strategy (the Strategy) as part of the Government's Long Term National Health Plan. The Strategy will guide and inform investment in relation to promoting the wellbeing of children and reducing the impact of mental ill-health on children and families.

The development of the Strategy is supported by an expert advisory group, consisting of experts in child health, education and parenting, as well as a steering committee that consists of representatives from across all states and territories. These groups are co-Chaired by Professor Frank Oberklaid and Professor Christel Middeldorp, who have expertise in child and youth psychiatry.

During 2019-20 the Commission held consultations with professional colleges and peak bodies to identify perspectives, current issues and gaps within systems supporting children's mental health and wellbeing. Consultations also focused on potential short, medium and long term solutions for consideration in the Strategy.

A draft outline of the Strategy was delivered to the Minister's office in June 2020.

Further consultations have been held online with children and young people, families, educators, representatives from Aboriginal and Torres Strait Islander communities, representatives from culturally and linguistically diverse communities, people working with children in the care of the state, and rural

and remote communities. The draft Strategy will be provided to the Minister in November 2020, following which there will be further consultation.

Productivity Commission inquiry

The Commission recommended to the Australian Government that the Productivity Commission undertake an inquiry into the social and economic benefits of improving mental health. The Productivity Commission inquiry into the role of improving mental health to support economic participation and enhancing productivity and economic growth was announced in October 2018. The Commission welcomed the release of the Draft Report into Mental Health and provided a submission to the Productivity Commission in January 2020 with additional information and perspectives to enhance and strengthen the recommendations in the final report. The inquiry is now complete with the final report delivered to the Government on 30 June 2020.

Lead the Mentally Healthy Workplace Alliance to develop the National Workplace Initiative

In the 2019-20 Federal Budget, the Australian Government announced an investment of \$11.5 million over four years for the National Workplace Initiative (NWI) to deliver a nationally consistent approach to mentally healthy workplaces.

In 2019-20 the Commission has worked with the Mentally Healthy Workplace Alliance (the Alliance) in the development of the NWI the aims of which are to:

- Create an evidence-based framework for mentally healthy workplaces
- Help people find suitable initiatives and resources via a digital NWI platform
- Showcase successful approaches to mentally healthy workplaces, and

- Strengthen the programs and interventions already underway in Australia.

In 2019-20 a draft core framework for the NWI was developed. This framework outlines the key domains for mentally healthy workplaces relevant to all Australian industries, businesses and organisations. It also outlines the key success factors for implementation. This work has been guided by the NWI Frameworks Working Group which brings together academic and industry experts and is Chaired by Mr Mark Goodsell from the Australian Industry Group.

A Stakeholder and Communications working group, Chaired by Ms Margo Lydon, is established to ensure that the design, language and interactions with the NWI respond to the needs of Australian businesses. The Evaluation Working Group, Chaired by Mrs Lucinda Brogden has also established a Communications Community of Practice bringing together Communications professionals from a range of industry, union, regulator and mental health organisations to create a unified approach to communication about mentally healthy workplaces.

The Commission will work with the Alliance to translate the NWI core framework into a digital service that connects people with the right information, services and supports for them at the right time. The first iteration of is scheduled to be released in July 2021.

National Natural Disaster Mental Health Framework

As part of the January 2020 Bushfire Mental Health Response the Australian Government funded a range of additional mental health supports for people affected by the bushfires, including volunteers and first responders.

The Commission was funded to develop the National Natural Disaster Mental Health Framework (the Framework), to be delivered to government in 2020-21, as part of this national response.

The purpose of the Framework is to improve how governments work together to respond to people's mental health needs before, during and after national disasters. While many services are either funded for the first time, or provided with enhanced capacity following disasters, the plethora of services available can be confusing and hard to navigate at a local level. The Framework will set out responsibilities, roles and approaches to mental health service delivery, communication and the provision of information to make it easier for people to find the support they need.

While the project officially commenced on 1 July 2020, early work in 2020 included undertaking an environmental scan and analysis of existing policy documents and resources including ABS data and commencing discussions with government and non-government agencies.

The Commission identified the Centre for Disaster Management and Public Safety, University of Melbourne, as a partner for a community-based research study. The University of Melbourne is assisting community based researchers to gather lived expertise stories of natural disaster mental health experiences across two contrasting regions of Australia. Existing mental health support for people affected by disasters will be mapped to see what has worked well, potential barriers to accessing support and how the government's response can be improved to improve easy access to mental health supports for people affected by natural disasters now and in the future.

The Commission is working closely with the Department of Health, National Bushfire Recovery Agency and other Commonwealth and State and Territory agencies on this work.

Suicide and Self-harm Monitoring System

In 2019-20 the Commission has continued to work in partnership with the Australian Institute of Health and Welfare (AIHW) and the Department of Health to develop

the National Suicide and Self-harm Monitoring System.

The system's aim is to improve the coherence, accessibility, quality and timeliness of national data and information on suicide, suicide attempts and self-harm. The intention is for this information to then inform the development of suicide and self-harm policy, inform local suicide prevention activities, and help identify emerging trends.

The system will be an interactive web-based platform, with a public interface and a secure data portal for approved users. It aims to improve the availability of suicide and self-harm data through supporting the development of state suicide registers and establishing a national ambulance data set. The release of the public interface is scheduled for September 2020.

Australian Mental Health Leaders Fellowship

In July 2018, the Commission launched the Australian Mental Health Leaders Fellowship (the Fellowship). The

Fellowship was developed and led by the Commission and funded by the Australian Government and designed to meet the needs of emerging leaders with a passion and commitment to mental health.

The Fellowship incorporates a mix of experiential learning, reflective practice and group activities supported by expert facilitators, coaches and mentors. It is designed to meet the needs of emerging leaders with a passion and commitment to mental health. Seventy-seven emerging leaders have participated across 4 cohorts since its inception.

While the Commission successfully delivered the Fellowship Program in 2019-20, the commencement of the fifth cohort and the graduation and alumni networking event has been postponed due to the impact of the COVID-19 pandemic.

The Commission is currently undertaking a full evaluation of the Fellowship, with a detailed report on the Fellowship's outcomes and impact expected to be completed by October 2020.

Consumer and carer engagement and participation

The Commission actively promotes the right of all people to participate in decisions that affect their care and the conditions that enable them to live contributing lives and will document and promote best practice in consumer engagement and participation.

Consumer and Carer Engagement: a Practical Guide

In 2019-20 the Commission finalised the development of a practical guide for consumer and carer participation and engagement in mental health and suicide prevention. The Commission released *Consumer and carer engagement: a practical guide* on its website as part of the *Engage and*

Participate in Mental Health project which highlighted the need to move away from a culture of 'doing to' to one of 'working with' consumers and carers.

The *Practical Guide* captures the core values and principles around engagement and participation, and presents these in the form of a practical, good practice guide for use by mental health consumers and carers and by people working within the mental health system at all levels. It provides a clear framework and set of principles for best practice in consumer and carer engagement and participation as well as step-by-step, practical advice on how these principles and values can be put to action.

Mental health consumers and carers contributed their views on engagement and participation in a series of activities designed to engage a wide range of people. Lived experience researchers and consultants participated in running the project in partnership with a Lived Experience Steering Group. A lived experience researcher wrote the guide, and incorporated feedback from a final round of consultation with the sector.

Safety and Quality Engagement Guide

In 2019-20, in consultation with the National Mental Health Consumer and Carer Forum and the Safety and Quality Partnership Standing Committee (SQPSC), the Commission continued to develop a guide for mental health consumers and carers, to strengthen their role in safety and quality initiatives within mental health services at a governance level. This is an activity under the Fifth Plan.

The Safety and Quality Engagement Guide Advisory Committee, co-chaired by the Deputy Monitoring and Reform and Commissioner Kerry Hawkins, met on three occasions during the year and will continue to do so until completion of the project. The Commission engaged the Mental Health and Suicide Prevention Research Group at the University of South Australia to draft the guide based on the outcomes of consultations with a diverse range of stakeholders from both consumer and carer groups, and public, private and community sectors. The draft was circulated to the Advisory Committee and SQPSC for comment in late April.

The guide is in its final phase of design and production. The Commission is scheduled to complete the guide by late 2020.

Consumer and Carer Report

The Commission conducted the second national online survey of consumers and carers between 16 March and 11 May 2020, to inform the Commission's work in monitoring and reporting on progress in

implementing the Fifth Plan. More than 220 people responded to the survey.

The survey documents feedback from respondents on consumer and carer experiences of mental health services in Australia, in relation to the eight priority areas identified in the Fifth Plan. The results of the 2020 survey will form the basis of the *Fifth National Mental Health and Suicide Prevention Plan, 2020: The consumer and perspective report*.

The Commission will continue to conduct annual consumer and carer surveys over the life of the Fifth Plan.

Recognising the contribution of people with lived experience, their families and support people

The contribution of people with a lived experience of mental health issues, their families and support people is at the heart of the Commission's work.

In recognition of their specialised and expert contributions, the Commission engages with people with lived experience of mental illness, both via targeted consultations and the inclusion of lived experience representatives in steering groups or committees to support our work.

In 2019-20, this engagement was a key component in the Commission's activities, including: the National Mental Health and Wellbeing Pandemic Response Plan; the National Natural Disaster Mental Health Framework; the National Children's Mental Health and Wellbeing Strategy; our reporting on the progress of implementation of the Fifth Plan; the National Mental Health Research Strategy; our Connections listening tour as part of Vision 2030; the National Peer Workforce Development Guidelines (details provided under the Workforce growth and development section of this Report); and the Commission's consumer and carer engagement projects detailed in this report.

Seventy-five percent of the members of the project steering committee established to assist with the development of National Peer Workforce Development Guidelines, are people with lived experience.

The Connections listening tour involved 26 town hall meetings around Australia to provide an opportunity for those with a lived experience or mental ill-health and/or those providing care, to be the centre of the conversation and contribute to the future of mental health care, suicide prevention and wellbeing in Australia. This sought to ensure that these voices are not only included in Vision 2030, but that they provide a starting point for the design of an improved approach.

The Commission's *Paid Participation Policy* sets out how it implements its

commitment to support participation by people with a lived experience of mental health issues, by establishing the conditions under which funding will be provided to enable participation. It provides a daily or pro-rata payment for an individual's time when they are personally nominated or invited to give expert advice and share their experiences to inform the Commission's work; to pay for travel and accommodation costs and to reimburse any reasonable associated out of pocket expenses.

From time to time the Commission provides support for people with lived experience of mental health issues to attend mental health related events or engage in consultations. Where it does so, the Commission requires that a diverse group of participants are selected.

Workforce growth and development

A sustainable, skilled and appropriate workforce is fundamental to the effective and safe provision of care and support for people with mental illness, their families, carers and support people. However, there are ongoing concerns about the distribution and future sustainability of the mental health and suicide prevention workforces, including the need to develop national professional consumer and carer peer workforces and capability within services accessed by Aboriginal and Torres Strait Islander people. This is an area that continues to be identified as requiring attention.

National Peer Workforce Development Guidelines

In 2019-20, the Commission continued to develop the National Peer Workforce Development Guidelines, an activity under the Fifth Plan. The guidelines will provide advice for governments, funders, employers and the peer workforce in relation to all aspects of implementing,

supporting, sustaining and growing the peer workforce.

The Steering Committee established by the Commission in 2018-19, of which seventy-five percent of appointed members are people with lived experience. Communiques from these meetings are on the Commission's website. The Commission engaged a research team based at RMIT University to conduct the consultation phase to inform the development of the guidelines. The consultation process involved extensive engagement – two workshops, targeted interviews and an online public survey. To ensure a culturally appropriate approach to the consultation, the RMIT team includes a cultural adviser.

The Commission established an Interest Register to maximise awareness of the progress by providing regular project updates. The Commission also directly ran workshop sessions at the annual TheMHS conference and with gatherings of peer workers, and carer organisations.

The draft guidelines will be reviewed during targeted group interviews planned for September via online session.

The Commission anticipates that it will complete this project by late 2020, earlier than the scheduled completion date of late 2021.

The National Mental Health Workforce Strategy

Development of the National Mental Health Workforce Strategy (the Strategy) is overseen by a National Mental Health Workforce Strategy Taskforce (the Taskforce). Ms Jennifer Taylor PSM and Mr Thomas Brideson are the Co-Chairs of the Taskforce.

The Strategy will consider the quality, supply, distribution and structure of the mental health workforce. It will identify practical approaches that could be implemented by Australian governments to attract, train and retain the workforce required to meet the demands of the mental health system in the future.

The Commission participates on the Taskforce and the working group focused on the peer workforce to ensure there are strong connections between the Strategy and National Peer Workforce Development Guidelines.

The Commission also participates to ensure that a comprehensive review of workforce requirements is included in the development of the Strategy. As identified in Vision 2030, a well-educated and resourced multidisciplinary workforce is essential to the delivery of quality, accessible care. A multidisciplinary workforce extends beyond the clinical disciplines to appreciate the contributions a wide range of professionals can make across all types of care in the stepped care model, from frontline prevention and identification through a range of treatments, to recovery support and research.

Mental health research

The Commission is committed to enhancing the capacity and capability of the mental health sector to support research to provide practitioners and policy makers with the evidence base to support informed decision making and provide better outcomes for consumers, carers and service providers.

National Mental Health Research Strategy

The Commission is continuing to progress the development of the National Mental Health Research Strategy (NMHRS) in consultation with the National Health and Medical Research Council, consumers and carers, states and territories, research funding bodies and researchers. This is an action under the Fifth Plan to drive better treatment outcomes across the mental health sector.

The Commission collaborated with the Million Minds Mental Health Research Mission, the Department of Health office of mental health research and other key research bodies through the NMHRS Steering Committee and Expert Advisory Committees. The NMHRS Steering Committee is co-chaired by Professor Maree Teeson AC and the Commission's CEO Ms Christine Morgan. Due to the potential overlap with the Million Minds Mission, both committees include at least one member that is also a member of the Million Minds Advisory Panel. This common membership ensures that the strategy is informed by progress under the Million Minds Mission.

The strategy will provide a principles-based framework to inform planning, conduct, funding and implementation of mental health research in Australia. It will provide a

long term vision for mental health research in Australia, including identifying priority areas for research and strategies to improve the alignment of research and the needs of practitioners and consumers.

The Commission hosted a two-day workshop in March 2020 to explore current gaps, challenges and opportunities in specific research domains relating to mental health. The workshop brought together stakeholders from academic, government and research funding bodies, along with mental health consumers and carers, to work collaboratively on shaping the strategy's content. Background papers for each session were compiled by experts in each field of research to guide discussion.

Digital Science has been engaged to undertake an analysis of all research publications over the period 1998–2018 in the field of mental health. The work will inform the research strategy by providing contextual information about the current level and pattern of activity in mental health research in Australia.

The NMHRS Steering Committee met to provide advice on the development of the principles-based framework to support and guide mental health research in Australia. The Mental Health Expert Advisory Committee met to provide advice on the Digital Science gaps analysis project and the initial strategy workplan. The strategy is expected to be completed by December 2020.

Strengthen the Commission to enhance effectiveness

The Commission continued to improve its operations during 2019–20, during which:

- Commission meetings were realigned to increase the focus on the operations of the Commission and the Work Plan to ensure the expertise of Commissioners was effectively used in the work of the Commission.
- Nine Commission meetings were held.
- All statutory and governance reporting requirements were met.
- The 2019–23 Corporate Plan incorporating the 2019–23 Work Plan was submitted to the Minister and Finance Minister, and published on the Commission's website as required under the PGPA Act.
- The 2018-29 Annual Report was prepared, submitted to the Minister and tabled in Parliament as required under the *Public Service Act 1999* and the PGPA Act.
- The Commission operated within budget.
- Thirteen new or revised operational policies or procedures were implemented.
- The Commission's redeveloped website was launched providing accessible information about mental health and suicide prevention and the work of the Commission.
- The Commission's staffing resources increased from an Average Staffing Level (ASL) of 26 to an ASL of 29 over the forward estimates. It also received an additional increase of 3 ASL in 2019–20.
- Staffing and budget resources were aligned with key priorities, including emerging priorities.
- Staff capability, skill and expertise was enhanced through recruitment, targeted training and development, in accordance with our Performance and Development Scheme.
- All staff had performance plans in place in accordance with the Performance and Development Policy and performed well during the year.
- The Commission continued to implement its Mentally Healthy Workplace Policy.

- The Commission progressed the development of a stakeholder engagement plan. The plan is due for completion in 2020-21.
- The Commission undertook proactive and strategic communication, including through timely responses to emerging issues such as the bushfires and the COVID-19 pandemic. It engaged with a broad range of stakeholders including: Federal, State and Territory governments and agencies, non-government organisations, consumers and carers, community organisations, and academic and research agencies.
- The Commission undertook six separate online consultations of external stakeholder groups to contribute to its work.
- The Commission contributed to a wide variety of national committees and bodies, including the: Mental Health

Information Strategy Standing Committee (MHISSC); the Suicide Prevention Project Reference Group; Equally Well Alliance; Safety and Quality Partnership Standing Committee (SQPSC); Safety and Quality Engagement Guide Advisory Committee; Fifth Plan Technical Advisory Group (FPTAG); Mental Health Expert Advisory Committee; Safety and Quality Engagement Guide Advisory Committee; Australian Commission on Safety and Quality in Health Care Mental Health Advisory Group; Suicide Prevention Project Reference Group; Mentally Healthy Workplace Alliance (MHWA); NWI Frameworks Working Group; and the Australian Mental Health Commissions and the New Zealand Mental Health Commissioner.

Report on Financial Performance 2019-20

At year-end, the balance of appropriations remaining was \$3,589,520 and \$2,825,709 for Departmental and Administered, respectively. These balances included 2019-20 appropriations, as well as unspent amounts from prior years.

Activities during the financial year resulted in an expenditure of \$8,727,569 for Departmental and \$2,818,407 for Administered. Compared to the budget these resulted in an over spend of approximately 2% in Departmental (primarily due to additional projects and funding the agency has received) and an under spend of approximately 27% in Administered (primarily due to the result of the COVID-19 pandemic which has resulted in funds not being spent in the 2019-20 financial year).

NMHC Resource Statement 2019-20

	Actual available appropriation for 2019-20 \$'000 (a)	Payments made 2019-20 \$'000 (b)	Balance remaining 2019-20 \$'000 (a) – (b)
Ordinary annual services¹			
Departmental appropriation²	12,315	8,865	3,450
Total	12,315	8,865	3,450
Administered expenses			
Outcome 1	5,693	2,867	2,826
Total	5,693	2,867	2,826
Total ordinary annual services	18,008	11,732	6,276
Departmental non-operating Equity injections	138	-	138
Total other services	138	-	138
Total available annual appropriations and payments	18,146	11,732	6,414

¹Appropriation Act (No. 1) 2019-20. This also includes prior-year departmental appropriations and section 74 retained revenue receipts.

²Includes an amount of \$24,000 in 2019-20 for the departmental capital budget. For accounting purposes, this amount has been designated as 'contributions by owners'

Expenses for Outcome 1			
Outcome 1:	Budget*	Actual expenses	Variation
Provide expert advice to the Australian Government and cross-sectoral leadership on the policy, programmes, services and systems that support mental health in Australia, including through administering the Annual National Report Card on Mental Health and Suicide Prevention, undertaking performance monitoring and reporting, and engaging consumers and carers ¹			
	2019-20 \$'000	2019-20 \$'000	2019-20 \$'000
	(a)	(b)	(a) – (b)
Program 1: National Mental Health Commission			
Administered expenses			
Ordinary annual services (Appropriation Act No. 1)	3,845	2,818	1,027
Departmental expenses			
Departmental appropriation ²	8,544	8,727	- 183
Total for Program 1	12,389	11,545	844
Total expenses for Outcome 1	12,389	11,545	844
	2019-20		
Average staffing level (number)	30		

¹ National Mental Health Commission only had one Outcome and Program during the 2019-20 year.

² Departmental appropriation combines ordinary annual services (Appropriation Act Nos. 1, 3 and 5) and retained revenue receipts under section 74 of the Public Governance, Performance and Accountability Act 2013.

Management and accountability

Corporate governance

The Commission is an executive agency established under the *Public Service Act 1999* and is a non-corporate Commonwealth entity under the *Public Governance, Performance and Accountability Act 2013* (PGPA Act).

The Commission was issued with a new Statement of Expectations from the Prime Minister and the Minister for Health in June 2020. The Commission responded with a Statement of Intent in June 2020. Both the Statement of Expectations and the Statement of Intent are available on our website.

The CEO is the accountable authority under the PGPA Act and is responsible for the governance and performance of the Commission. The Commission includes an Advisory Board made up of a Chair and a number of Mental Health Commissioners (as determined by the Minister from time to time), as well as the CEO as a Commissioner.

The Commission Executive is currently Ms Christine Morgan CEO, Ms Lyndall Soper Deputy – Monitoring and Reform, Dr Alison Morehead Deputy – Strategy, Ms Kim Eagle – Chief Operating Officer and Chief Financial Officer and Ms Jenny Muir – Principal Adviser Communications and Engagement (commencing July 2020).

The Executive is responsible for ensuring the Commission's operations are efficient and effective and carried out in accordance with statutory and government requirements, including financial management, resource management, delivering outcomes against the Corporate Plan and Work Plan, people and culture management, and stakeholder engagement.

The Executive meet on a weekly basis to discuss the management of the Commission. The Commission has structures and processes in place to

implement the principles and objectives of corporate governance.

The Commission's Audit and Risk Committee is responsible for providing independent advice and assurance to the CEO on the Commission's financial and performance reporting responsibilities, risk oversight and management, and system of internal control. Further detail on the Committee's functions, activities and members can be found under the subheading Audit and Risk Committee.

The 2019–20 Internal Audit was conducted by Walter Partners. The objective of the audit was to assess the effectiveness of the internal control framework for financial management activities, ensuring compliance with relevant Commonwealth legislation and policy requirements, including in relation to procurement, financial delegations, management of financial records, travel arrangements and credit cards. The Internal Audit Report found that the Commission's financial processes and internal controls were operating in an efficient, effective, economical and ethical manner.

The Commission's *Charter and Operating Principles*, revised in 2019-20, provides guidance to the Commissioners of the Advisory Board.

The Commission's Accountable Authority Instructions set out appropriate controls and directions for staff in relation to requirements under the PGPA Act and relevant policies of the Australian government. The Commission operates in a shared corporate services environment provided by the Department of Health, and the Commission regularly reviews internal systems and procedures to simplify and streamline our operations and make best use of resources.

The Corporate Plan 2019–2023 and Work Plan 2019–20 were also in place to guide

the work of the Commission to achieve its objectives and are available on our website.

There were no significant issues reported to the Minister under paragraph 19(1)(e) of the PGPA Act that relate to non-compliance with Finance law and any action taken to remedy non-compliance.

Recognising the contribution of people with lived experience, their families and support people

The contribution of people with a lived experience of mental health issues, their families and support people is at the heart of the Commission's work. The Commission's *Paid Participation Policy* provides a daily or pro-rata payment for an individual's time when they are personally nominated or invited to give expert advice and share their experiences to inform the Commission's work; to pay for travel and accommodation costs and to reimburse any reasonable associated out of pocket expenses.

Audit and Risk Committee

The Commission's Audit and Risk Committee is responsible for providing independent advice and assurance to the CEO on the Commission's financial and performance reporting responsibilities, risk oversight and management, and system of internal control. The Committee members are listed below. The Committee met four times in 2019–20 and reviewed and endorsed the Commission's Financial Statements, the Internal Audit Report, Annual Performance Statements and Corporate Plan 2019–2023.

The Committee also reviewed and endorsed new or revised versions of governance documents including the Risk Management Policy and Framework, the Business Continuity Plan, delegations instruments, the Protective Security Plan and the Audit Committee Charter.

In 2019-20 the Commission established an internal audit function, which is responsible for delivering an internal audit program in line with the Committee's guidance and subject to approval by the CEO. The Committee will exercise a governance role in relation to the internal audit function.

For further detail regarding the Committee's role and functions, see the Commission's Audit and Risk Committee Charter at:

<https://www.mentalhealthcommission.gov.au/about/policies>.

External Scrutiny

No judicial, administrative tribunal decisions or decisions from the Australian Information Commissioner relating to the Commission were handed down during 2019–20. There were no reports by the Auditor-General on the operations of the agency, other than the report on the financial statements contained in this annual report. In 2019-20 there were no reports on the operations of the Commission by a Parliamentary Committee or the Commonwealth Ombudsman and there were no capability reviews of the Commission released.

Fraud Prevention

The Commission's fraud control processes are set out in the Fraud Control Plan, developed and managed in line with section 10 of the PGPA Rule 2014 and the Commonwealth Fraud Control Policy. General training on the Commission's fraud control processes is provided to staff annually.

The Commission's CEO certifies that she is satisfied that the Commission:

- has prepared a fraud and corruption risk assessment and fraud control plan
- has in place appropriate fraud prevention, detection, investigation, reporting and data collection procedures and processes that meet the specific needs of the agency, and

- has taken all reasonable measures to minimise the incidence of fraud in the agency, and investigate and recover the proceeds of fraud against the agency.

There were no instances of fraud in 2019–20.

Management of Human Resources

The Commission is committed to fostering a flexible, efficient and high performing workplace. The Commission operates within the Australian Public Sector Employment Framework and implements and supports good practice as an employer which is responsive to the needs of staff.

The CEO and Executive provide strategic leadership and align individual performance with the Commission's Vision and goals. Staff are afforded opportunities to develop their skills and continuous learning is promoted. Staff capability is developed through ongoing workforce planning and staff participation in the performance and development scheme. Under the performance and development scheme, the performance of staff is aligned with the Commission's Work Plan and objectives, with performance reviewed periodically during each reporting period. Effective management and development of staff was a key factor to the achievement of Commission objectives in 2019–20.

Staff are appointed under the *Public Service Act 1999* and remuneration and other employment terms of non-SES staff are set out under the conditions of National Mental Health Commission Enterprise Agreement 2017–2020. In accordance with the Enterprise

Agreement, the Commission's Performance and Development Scheme enables incremental salary progression. Employees receiving a rating of fully effective or higher are eligible for incremental salary progression where they are below the maximum salary range for their classification. Non-salary benefits include: annual Christmas shutdown period; access to annual leave at half pay; maternity, adoption and foster leave for eligible employees; and supporting partner leave.

Determinations under section 24(1) of the *Public Service Act 1999* are used to set the remuneration and conditions for SES employees. As at 30 June 2020, section 24(1) determinations were in operation for two SES employees. A section 24(1) determination is also in place for staff covered by the Enterprise Agreement 2017-20 to facilitate salary increases based on productivity improvements.

The remuneration and conditions of the CEO are set by the Remuneration Tribunal.

In accordance with the Enterprise Agreement and where appropriate Individual Flexibility Agreements are used to supplement the benefits or remuneration provided to non-SES employees. These arrangements are agreed between the CEO or CEO delegate and the employee. As at 30 June 2020 there were two such agreements in effect.

No employees were covered by common law contracts this year. No employees received performance pay this year.

Human Resources Statistics

Details of Accountable Authority 2019-20

Name	Position Title/Position held	Period as the accountable authority or member	
		Date of Commencement	Date of cessation
Christine Morgan	Chief Executive Officer	4 March 2019	ongoing

APS Employment arrangements 2019-20²

	SES	Non-SES	Total
National Mental Health Commission Enterprise Agreement 2017-20 ³	0	34	34
NMHC S24(1) Determination ⁴	0	32	32
Individual Flexibility Arrangements	0	2	2
Individual 24(1) Determinations	2	0	2
Total	2	68	70

Employment type by location 2018-19

	Ongoing	Non-Ongoing	Total
NSW	14	6	20
ACT	9	1	10
Overseas	-	-	-
Total	-	-	30

Employment type by location 2019-20

	Ongoing	Non-Ongoing	Total
NSW	15	10	25
ACT	11	-	11
Overseas	-	-	-
Total	26	10	36

Indigenous Employment 2018-19

	Total
Ongoing	-
Non-Ongoing	-
Total	-

Indigenous Employment 2019-20

	Total
Ongoing	-
Non-Ongoing	-
Total	-

² This information excludes the CEO, whose terms and conditions of employment are set by the Remuneration Tribunal.

³ The NMHC Enterprise Agreement 2017-20 nominal expiry date was March 2020.

⁴ The NMHC S24(1) Determination came into effect in March 2020.

Ongoing Employees 2019-20 – location

	Male			Female			Indeterminate			Total
	Fulltime	Part Time	Total Male	Fulltime	Part Time	Total Female	Full-time	Part Time	Total Indet.	
NSW	4	-	4	10	1	11	-	-	-	15
ACT	2	-	2	9	-	9	-	-	-	11
Overseas	-	-	-	-	-	-	-	-	-	-
Total	6	-	6	19	1	20	-	-	-	26

Non-Ongoing Employees 2019-20 – location

	Male			Female			Indeterminate			Total
	Fulltime	Part Time	Total Male	Fulltime	Part Time	Total Female	Full-time	Part Time	Total Indet.	
NSW	1	-	1	7	2	9	-	-	-	10
ACT	-	-	-	-	-	-	-	-	-	-
Overseas	-	-	-	-	-	-	-	-	-	-
Total	1	-	1	7	2	9	-	-	-	10

Ongoing Employees 2018-19 – location

	Male			Female			Indeterminate			Total
	Fulltime	Part Time	Total Male	Fulltime	Part Time	Total Female	Full-time	Part Time	Total Indet.	
NSW	3	-	3	9	2	11	-	-	-	14
ACT	1	-	1	5	3	8	-	-	-	9
Overseas	-	-	-	-	-	-	-	-	-	-
Total	4	-	4	14	5	19	-	-	-	23

Non-Ongoing Employees 2018-19 – location

	Male			Female			Indeterminate			Total
	Fulltime	Part Time	Total Male	Fulltime	Part Time	Total Female	Full-time	Part Time	Total Indet.	
NSW	-	-	-	5	1	6	-	-	-	6
ACT	1	-	1	-	-	-	-	-	-	1
Overseas	-	-	-	-	-	-	-	-	-	-
Total	1	-	1	5	1	6	-	-	-	7

Ongoing Employees 2019-20 – gender and classification

	Male			Female			Indeterminate			Total
	Fulltime	Part Time	Total Male	Fulltime	Part Time	Total Female	Full-time	Part Time	Total Indet.	
SES 2	-	-	-	2	-	2	-	-	-	2
SES 1	-	-	-	-	-	-	-	-	-	-
EL 2	4	-	4	7	-	7	-	-	-	11
EL 1	1	-	1	6	-	6	-	-	-	7
APS 6	-	-	-	3	1	4	-	-	-	4
APS 5	-	-	-	1	-	1	-	-	-	1
APS 4	1	-	1	-	-	-	-	-	-	1
TOTAL	6	-	6	19	1	20	-	-	-	26

Non-Ongoing Employees 2019-20 – gender and classification

	Male			Female			Indeterminate			Total
	Fulltime	Part Time	Total Male	Fulltime	Part Time	Total Female	Full-time	Part Time	Total Indet.	
EL 2	-	-	-	1	1	2	-	-	-	2
EL 1	-	-	-	1	1	2	-	-	-	2
APS 6	1	-	1	4	-	4	-	-	-	5
Other	-	-	-	1	-	1	-	-	-	1
TOTAL	1	-	1	7	2	9	-	-	-	10

Ongoing Employees 2018-19 – gender and classification

	Male			Female			Indeterminate			Total
	Fulltime	Part Time	Total Male	Fulltime	Part Time	Total Female	Full-time	Part Time	Total Indet.	
SES 1	-	-	-	1	-	1	-	-	-	1
EL 2	1	-	1	3	1	4	-	-	-	5
EL 1	2	-	2	4	3	7	-	-	-	9
APS 6	-	-	-	5	1	6	-	-	-	6
APS 4	1	-	1	1	-	1	-	-	-	2
TOTAL	4	-	4	14	5	19	-	-	-	23

Non-Ongoing Employees 2018-19 – gender and classification

	Male			Female			Indeterminate			Total
	Fulltime	Part Time	Total Male	Fulltime	Part Time	Total Female	Full-time	Part Time	Total Indet.	
EL 2	-	-	-	1	-	1	-	-	-	1
EL 1	-	-	-	-	1	1	-	-	-	1
APS 6	1	-	1	3	-	3	-	-	-	4
Other	-	-	-	1	-	1	-	-	-	1
TOTAL	1	-	1	5	1	6	-	-	-	7

Employees 2019-20 – full and part-time status

	Ongoing			Non-Ongoing			Total
	Fulltime	Part Time	Total Ongoing	Fulltime	Part Time	Total Non-Ongoing	
SES 3	-	-	-	-	-	-	-
SES 2	2	-	2	-	-	-	2
SES 1	-	-	-	-	-	-	-
EL 2	11	-	11	1	1	2	13
EL 1	7	-	7	1	1	2	9
APS 6	3	1	4	5	-	5	9
APS 5	1	-	1	-	-	-	1
APS 4	1	-	1	-	-	-	1
Other	-	-	-	1	-	1	1
TOTAL	25	1	26	8	2	10	36

Employees 2018-19 – full and part-time status

	Ongoing			Non-Ongoing			Total
	Fulltime	Part Time	Total Ongoing	Fulltime	Part Time	Total Non-Ongoing	
SES 3	-	-	-	-	-	-	-
SES 2	-	-	-	-	-	-	-
SES 1	1	-	1	1	-	1	2
EL 2	4	1	5	-	-	-	5
EL 1	6	3	9	-	1	1	10
APS 6	5	1	6	4	-	4	10
APS 5	-	-	-	-	-	-	-
APS 4	2	-	2	-	-	-	2
Other	-	-	-	1	-	1	1
TOTAL	18	5	23	6	1	7	30

Salary ranges by classification level 2019-20

	Minimum Salary	Maximum Salary
SES 3	-	-
SES 2	\$227,311	\$281,432
SES 1	\$175,354	\$216,487
EL 2	\$127,756	\$152,050
EL 1	\$109,763	\$125,099
APS 6	\$85,413	\$95,985
APS 5	\$74,842	\$81,186
APS 4	\$67,232	\$73,149
APS 3	\$60,467	\$65,117
APS 2	\$52,854	\$58,772
APS 1	\$46,936	\$51,585
Other	-	-

Remuneration – Key Management Personnel

Name	Position title	Short-term benefits			Post-employment benefits	Other long-term benefits		Termination Benefits (\$)	Total Remuneration (\$)
		Base salary (\$)	Bonuses (\$)	Other benefits and allowances (\$)	Superannuation contributions (\$)	Long service leave (\$)	Other long-term benefits (\$)		
Christine Morgan	CEO	327,663	-	-	34,199	4,611	-	-	366,472

Remuneration – Senior Executive Service

Remuneration Band	Number of Senior Executives	Short-term benefits			Post-employment benefits	Other long-term benefits		Average Termination Benefits (\$)	Average total remuneration (\$)
		Average Base salary (\$)	Average Bonuses (\$)	Average Other benefits and allowances (\$)	Average Superannuation contributions (\$)	Average Long service leave (\$)	Average Other long-term benefits (\$)		
\$0-\$225,000	1	62,300	-	6,249	12,336	1,627	-	-	82,512
225,001-250,000	-	-	-	-	-	-	-	-	-
250,001-275,000	-	-	-	-	-	-	-	-	-
275,001-300,000	-	-	-	-	-	-	-	-	-
300,001-325,000	-	-	-	-	-	-	-	-	-
325,001-350,000	2	229,707	-	9,174	38,562	5,002	-	49,749	332,194
350,001-375,000	-	-	-	-	-	-	-	-	-

Remuneration – Other highly paid staff

Remuneration Band	Number of Highly paid	Short-term benefits			Post-employment benefits	Other long-term benefits		Average Termination Benefits (\$)	Average total remuneration (\$)
		Average Base salary (\$)	Average Bonuses (\$)	Average Other benefits and allowances (\$)	Average Superannuation contributions (\$)	Average Long service leave (\$)	Average Other long-term benefits (\$)		
\$0-\$225,000	-	-	-	-	-	-	-	-	-
225,001-250,000	-	-	-	-	-	-	-	-	-
250,001-275,000	-	-	-	-	-	-	-	-	-
275,001-300,000	-	-	-	-	-	-	-	-	-
300,001-325,000	1	238,994	-	24,920	32,903	7,467	-	-	304,283
325,001-350,000	-	-	-	-	-	-	-	-	-
350,001-375,000	-	-	-	-	-	-	-	-	-

Audit and Risk Committee

Member Name	Qualifications, knowledge, skills or experience	Meetings attended	Total annual remuneration
Mr David Lawler	Mr Lawler has had an extensive career in financial services holding Executive positions in the Commonwealth Bank of Australia as Executive General Manager, Finance – Premium Financial Services, Financial Controller – Institutional Banking and Group Auditor. He is the past Chairman on the National Board, Institute of Internal Auditors; past member of the International Internal Auditing Standards Board of the Institute of Internal Auditors; past President, NSW Board of Governors, Institute of Internal Auditors; and fellow of the Australian Society of Certified Practising Accountants. Mr Lawler has also had non-executive roles as a Chair or Member of numerous Audit Committees in private and Commonwealth sectors over the past 19 years.	4/4	\$11,847
Mr William Northcote	Mr Northcote has worked for over 36 years in leadership and senior management positions for not-for-profit and government entities. His roles included CEO, CFO and General Manager Corporate Affairs and as such brings valuable skills and experience in finance, risk oversight and management systems of internal control, human resources, compliance and security in a Commonwealth government setting.	3/4	\$9,000
Ms Lyndall Soper	Ms Soper is the Deputy, Monitoring and Reform at the Commission. She joined the Commission in March 2020 after four years at the Department of Health where she held positions including Chief of Staff to Secretary – Ms Glenys Beauchamp and Acting First Assistant Secretary in Population Health and Sport Division. Ms Soper brings with her significant experience in policy development and policy implementation, project management and leadership, having held senior executive positions across a variety of Commonwealth agencies including Environment, Climate Change and Energy Efficiency, Industry, and Defence.	1/1	Nil
Ms Carol Lilley	<p>Carol Lilley is an independent board director and chair or member of a number of Commonwealth Government audit committees. She was a partner at PricewaterhouseCoopers and has over 20 years' experience in financial statement audit, internal audit, and project and risk management, with a particular focus on government. Carol holds a Bachelor of Commerce from the University of Western Australia. She is a graduate of the Australian Institute of Company Directors, a Fellow of Chartered Accountants Australia and New Zealand, and a certified internal auditor, and was a registered company auditor.</p> <p>Ms Lilley joined the Audit and Risk Committee in September 2020.</p>	Nil	Nil

Purchasing

The Commission made all purchases in accordance with relevant procurement policies and principles, including the *Public Governance, Performance and Accountability Act 2013* and the Commonwealth Procurement Rules.

Further information on the Commission's financial performance is available in the audited Financial Statements and accompanying notes of this Annual Report.

Consultants

The Commission engages consultants to provide professional, independent and expert advice or services, where those services involve the development of an intellectual output that assists with agency decision-making, and/or the output reflects the independent views of the service provider.

All tenders and contractual arrangements undertaken in 2019–20 were carried out in accordance with the Commonwealth Procurement Rules.

During 2019–20, one new consultancy contract was entered into involving total actual expenditure of \$39,600 (GST inclusive). There were no ongoing consultancy contracts active during the period.

This Annual Report contains information about actual expenditure on contracts for consultancies. Information on the value of contracts and consultancies is available on the AusTender website:
www.tenders.gov.au.

Australian National Audit Office Access Clauses

All contracts entered into by the Commission during 2019–20 provided access for the Auditor-General to the contractor's premises where the contract value was above \$100,000 including GST.

Exempt Contracts

There were no contracts entered into by

the Commission during 2019–20 that were exempt from being published in AusTender on the basis that it would disclose exempt matters under the *Freedom of Information Act 1982*.

Procurement Initiatives to Support Small Business

The Commission supports small business participation in the Commonwealth Government procurement market. Small and Medium Enterprises and Small Enterprise participation statistics are available on the Department of Finance's website: www.finance.gov.au/procurement/statistics-on-commonwealth-purchasing-contracts/

Consistent with paragraph 5.4 of the Commonwealth Procurement Rule, the Commission's procurement practices support SMEs, including via the following initiatives or practices:

- Using the Commonwealth Contracting Suite for low-risk procurements valued under \$200,000.
- Australian Industry Participation Plans in whole-of-government procurement where applicable.
- Observing the Small Business Engagement Principles (outlined in the government's Industry Innovation and Competitiveness Agenda), such as communicating in clear, simple language and presenting information in an accessible format.
- Making use of electronic systems or other processes used to facilitate on-time payment performance, including the use of payment cards.

Advertising campaigns

No advertising campaigns were undertaken by the Commission during the 2019–20 year.

Grants

Information on grants awarded during the

2019–20 year is available at www.mentalhealthcommission.gov.au and on GrantConnect at: <https://www.grants.gov.au/>.

Disability Reporting

The *National Disability Strategy 2010–2020* is Australia’s overarching framework for disability reform. It acts to ensure the principles underpinning the United Nations *Convention on the Rights of Persons with Disabilities* are incorporated into Australia’s policies and programs that affect people with disability, their families and carers.

All levels of government will continue to be held accountable for the implementation of the strategy through biennial progress reporting to the Council of Australian Governments. Progress reports can be found at dss.gov.au. Disability reporting included the Australian Public Service Commission’s State of the Service reports and the *APS Statistical Bulletin*. These reports are available at www.apsc.gov.au.

Carer Recognition

Although the Commission is not a public service care agency as defined by the *Carer Recognition Act 2010*, through its core functions and day to day work the Commission supports the Statement for Australia’s Carers and its 10 key principles that set out how carers should be treated and considered in policy, program and service delivery settings.

The Commission’s mission is to give mental health and suicide prevention national attention, to influence reform and to help people with lived experience of mental health issues, including carers, live contributing lives. In doing so the Commission places the engagement of not only Australians living with mental health difficulties but their families, friends and other support people at the centre of its work to influence mental health policy and service improvements.

Freedom of Information

Agencies subject to the Freedom of Information Act 1982 (FOI Act) are required to publish information to the public as part of the Information Publication Scheme (IPS). This requirement is in Part II of the FOI Act and has replaced the former requirement to publish a Section 8 statement in an annual report. Each agency must display on its website a plan showing what information it publishes in accordance with the IPS requirements. The Commission’s Information Publication Scheme statement can be found at www.mentalhealthcommission.gov.au.

Work health and safety

To help to ensure the health, safety and welfare of employees, the Commission has a WHS Representative, and First Aid Officers and Fire Wardens at each of its offices.

There were no injuries incurred by employees, nor were there any notifiable incidents recorded. There were no investigations conducted under Part 10 of the *Work Health Safety Act 2011*.

Ecologically sustainable development and environmental performance

In 2019–20 the Commission maintained a range of measures which contributed to ecologically sustainable development (ESD), including:

- Wherever possible electronic mediums for communication, engagement and publications are favoured over other methods.
- Printing on both sides of the paper and in black and white where possible.
- Follow-me printing to reduce wastage.
- Ensuring equipment such as desktop computers, photocopiers, dishwashers and printers incorporate energy-saving features.

- Participation in the Sydney landlord's waste and recycling schemes.
- Various energy efficiency and other measures to reduce the environmental impact of the Commission's office premises in Sydney as detailed in the green lease schedule.

The Commission's consumption of resources, particularly energy and paper,

declined significantly in 2019-20. This was largely as a consequence of the move to remote work arrangements during the COVID-19 pandemic and a further adoption of digital workflows.

The Commission does not provide any capital funding, project or grant funding for activities that have a measurable impact on ESD.



INDEPENDENT AUDITOR'S REPORT

To the Minister for Health

Opinion

In my opinion, the financial statements of the National Mental Health Commission (the Entity) for the year ended 30 June 2020:

- (a) comply with Australian Accounting Standards – Reduced Disclosure Requirements and the *Public Governance, Performance and Accountability (Financial Reporting) Rule 2015*; and
- (b) present fairly the financial position of the Entity as at 30 June 2020 and its financial performance and cash flows for the year then ended.

The financial statements of the Entity, which I have audited, comprise the following as at 30 June 2020 and for the year then ended:

- Statement by the Chief Executive Officer and Chief Financial Officer;
- Statement of Comprehensive Income;
- Statement of Financial Position;
- Statement of Changes in Equity;
- Cash Flow Statement;
- Administered Schedule of Comprehensive Income;
- Administered Schedule of Assets and Liabilities;
- Administered Reconciliation Schedule;
- Administered Cash Flow Statement; and
- Notes to the financial statements, comprising a summary of significant accounting policies and other explanatory information.

Basis for opinion

I conducted my audit in accordance with the Australian National Audit Office Auditing Standards, which incorporate the Australian Auditing Standards. My responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of my report. I am independent of the Entity in accordance with the relevant ethical requirements for financial statement audits conducted by the Auditor-General and his delegates. These include the relevant independence requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants (including Independence Standards)* (the Code) to the extent that they are not in conflict with the *Auditor-General Act 1997*. I have also fulfilled my other responsibilities in accordance with the Code. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

Accountable Authority's responsibility for the financial statements

As the Accountable Authority of the Entity, the Chief Executive Officer is responsible under the *Public Governance, Performance and Accountability Act 2013* (the Act) for the preparation and fair presentation of annual financial statements that comply with Australian Accounting Standards – Reduced Disclosure Requirements and the rules made under the Act. The Chief Executive Officer is also responsible for such internal control as the Chief Executive Officer determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Chief Executive Officer is responsible for assessing the ability of the Entity to continue as a going concern, taking into account whether the Entity's operations will cease as a result

of an administrative restructure or for any other reason. The Chief Executive Officer is also responsible for disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the assessment indicates that it is not appropriate.

Auditor's responsibilities for the audit of the financial statements

My objective is to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes my opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the Australian National Audit Office 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 the financial statements.

As part of an audit in accordance with the Australian National Audit Office Auditing Standards, I exercise professional judgement and maintain professional scepticism throughout the audit. I also:

- identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for my opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control;
- obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Entity's internal control;
- evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Accountable Authority;
- conclude on the appropriateness of the Accountable Authority's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Entity's ability to continue as a going concern. If I conclude that a material uncertainty exists, I am required to draw attention in my auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify my opinion. My conclusions are based on the audit evidence obtained up to the date of my auditor's report. However, future events or conditions may cause the Entity to cease to continue as a going concern; and
- evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

I communicate with the Accountable Authority regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that I identify during my audit.

Australian National Audit Office



Sean Benfield
Executive Director
Delegate of the Auditor-General

Canberra
30 September 2020

Financial Statements

NATIONAL MENTAL HEALTH COMMISSION

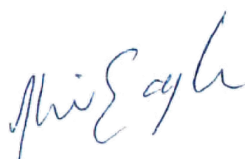
STATEMENT BY THE CHIEF EXECUTIVE OFFICER AND CHIEF FINANCIAL OFFICER

In our opinion, the attached financial statements for the year ended 30 June 2020 comply with subsection 42(2) of the *Public Governance, Performance and Accountability Act 2013* (PGPA Act), and are based on properly maintained financial records as per subsection 41(2) of the PGPA Act.

In our opinion, at the date of this statement, there are reasonable grounds to believe that the National Mental Health Commission will be able to pay its debts as and when they fall due.



Christine Morgan
Chief Executive Officer
30 September 2020



Kim Eagle
Chief Financial Officer
30 September 2020

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Statement of Comprehensive Income

for the year ended 30 June 2020

	Notes	2020 \$	2019 \$	Original Budget \$
NET COST OF SERVICES				
Expenses				
Employee benefits	1.1A	5,228,028	3,466,049	3,935,000
Suppliers	1.1B	2,301,014	3,021,025	4,596,000
Finance costs		27,240	-	-
Depreciation and amortisation	3.2	1,170,892	301,512	13,000
Loss of disposal of asset		395	-	-
Total expenses		8,727,569	6,788,586	8,544,000
Own-source revenue				
Revenue from contracts with customers	1.2A	1,284,218	1,351,349	1,330,000
Other revenue	1.2B	33,000	33,013	25,000
Total own-source revenue		1,317,218	1,384,362	1,355,000
Total own-source income		1,317,218	1,384,362	1,355,000
Net cost of services		(7,410,351)	(5,404,224)	(7,189,000)
Revenue from Government	1.2C	8,176,000	5,693,000	7,176,000
Surplus/(loss) on continuing operations		765,649	288,776	(13,000)

The above statement should be read in conjunction with the accompanying notes.

For Budgetary reporting information refer to Note 9. The original budget is the budget published in the 2019-20 *Portfolio Budget Statements*. The budget statement information has been reclassified and presented on a consistent basis with the corresponding financial statement items.

Statement of Financial Position

as at 30 June 2020

	Notes	2020 \$	2019 \$	Original Budget \$
ASSETS				
Financial assets				
Cash and cash equivalents	3.1A	122,977	-	342,000
Trade and other receivables ¹	3.1B	4,391,080	3,381,000	1,172,000
Total financial assets		4,514,057	3,381,000	1,514,000
Non-financial assets				
Building - Right of use asset	3.2	2,322,076	-	1,364,000
Leasehold improvements	3.2	809,800	1,106,472	-
Plant and equipment	3.2	24,519	15,613	46,000
Computer software	3.2	-	-	150,000
Prepayments		1,901	79,142	409,000
Total non-financial assets		3,158,296	1,201,227	1,969,000
Total assets		7,672,353	4,582,227	3,483,000
LIABILITIES				
Payables				
Suppliers ¹	3.3A	606,824	506,369	52,000
Other payables	3.3B	112,705	1,455,888	1,056,000
Total payables		719,529	1,962,257	1,108,000
Interest bearing liabilities				
Leases	3.4	2,307,149	-	-
Total interest bearing liabilities		2,307,149	-	-
Provisions				
Employee provisions	6.1	849,559	484,035	453,000
Other provisions	3.5	70,110	70,110	70,000
Total provisions		919,669	554,145	523,000
Total liabilities		3,946,347	2,516,402	1,631,000
Net assets		3,726,006	2,065,826	1,852,000
EQUITY				
Contributed equity		437,466	413,466	471,000
Retained surplus		3,288,540	1,652,360	1,381,000
Total equity		3,726,006	2,065,826	1,852,000

The above statement should be read in conjunction with the accompanying notes.

For Budgetary reporting information refer to Note 9. The original budget is the budget published in the 2019-20 *Portfolio Budget Statements*. The budget statement information has been reclassified and presented on a consistent basis with the corresponding financial statement items.

¹The 2019 comparatives for these balances have been restated, refer the overview for further details.

Statement of Changes in Equity

for the year ended 30 June 2020

	2020 \$	2019 \$	Original Budget \$
CONTRIBUTED EQUITY			
Opening balance			
Balance carried forward from previous period	413,466	271,564	447,000
Adjusted opening balance	413,466	271,564	447,000
Transactions with owners			
Distributions to owners			
Returns of capital	-	(32,098)	-
Contributions by owners			
Equity injection - appropriations	-	150,000	-
Departmental capital budget	24,000	24,000	24,000
Total transactions with owners	24,000	141,902	24,000
Closing balance as at 30 June	437,466	413,466	471,000
RETAINED EARNINGS			
Balance carried forward from previous period	1,652,360	1,363,581	1,394,000
Adjustment on initial application of AASB 16	870,531	-	-
Adjusted opening balance	2,522,891	1,363,581	1,394,000
Comprehensive income			
Surplus/(loss) for the period	765,649	288,776	(13,000)
Other comprehensive income	-	-	-
Total comprehensive income	765,649	288,776	(13,000)
Closing balance as at 30 June	3,288,540	1,652,357	1,381,000
TOTAL EQUITY			
Opening balance			
Balance carried forward from previous period	2,065,826	1,635,145	1,841,000
Adjustment for changes in accounting policies	870,531	-	-
Adjusted opening balance	2,936,357	1,635,145	1,841,000
Comprehensive income			
(Loss)/surplus for the period	765,649	288,776	(13,000)
Other comprehensive income	-	-	-
Total comprehensive income	765,649	288,776	(13,000)
Transactions with owners			
Distributions to owners			
Returns on capital	-	(32,098)	-
Contributions by owners			
Equity injection	-	150,000	-
Departmental capital budget	24,000	24,000	24,000
Total transactions with owners	24,000	141,902	24,000
Closing balance as at 30 June	3,726,006	2,065,823	1,852,000

The above statement should be read in conjunction with the accompanying notes.

For Budgetary reporting information refer to Note 9. The original budget is the budget published in the 2019-20 Portfolio Budget Statements. The budget statement information has been reclassified and presented on a consistent basis with the corresponding financial statement items.

Accounting Policy

Equity Injections

Amounts appropriated which are designated as 'equity injections' for a year (less any formal reductions) and Departmental capital budgets are recognised directly in contributed equity in that year.

Cash Flow Statement

for the year ended 30 June 2020

	Notes	2020 \$	2019 \$	Original Budget \$
OPERATING ACTIVITIES				
Cash received				
Appropriations		8,966,990	6,678,756	7,176,000
Rendering of services		255,890	1,527,062	530,000
Net GST received		-	32,564	240,000
Total cash received		9,222,880	8,238,383	7,946,000
Cash used				
Employees		(4,914,957)	(3,432,049)	(3,935,000)
Suppliers		(2,150,896)	(2,418,602)	(3,771,000)
Interest payments on lease liabilities		(27,240)	-	-
Net GST paid		(2,384)	-	(240,000)
Section 74 receipts transferred to the Official Public Account (OPA)		(1,195,298)	(2,730,105)	-
Total cash used		(8,290,775)	(8,580,756)	(7,946,000)
Net cash from/(used by) operating activities		932,105	(342,373)	-
INVESTING ACTIVITIES				
Cash used				
Purchase of property, plant and equipment		(20,510)	(35,432)	(24,000)
Total cash used		(20,510)	(35,432)	(24,000)
Net cash used by investing activities		(20,510)	(35,432)	(24,000)
FINANCING ACTIVITIES				
Cash received				
Appropriations - Departmental capital budget - Bill 1		20,510	24,000	24,000
Appropriations - Equity injections - Bill 2		-	11,432	-
Total cash received		20,510	35,432	24,000
Cash used				
Principal payments of lease liabilities		(809,128)	-	-
Total cash used		(809,128)	-	-
Net cash from/(used by) financing activities		(788,618)	35,432	24,000
Net increase/(decrease) in cash held		122,977	(342,373)	-
Cash and cash equivalents at the beginning of the reporting period		-	342,373	342,000
Cash and cash equivalents at the end of the reporting period	3.1A	122,977	-	342,000

The above statement should be read in conjunction with the accompanying notes.

For Budgetary reporting information refer to Note 9. The original budget is the budget published in the 2019-20 *Portfolio Budget Statements*. The budget statement information has been reclassified and presented on a consistent basis with the corresponding financial statement items.

Administered Schedule of Comprehensive Income

for the year ended 30 June 2020

		2020	2019	Original Budget
	Notes	\$	\$	\$
NET COST OF SERVICES				
Expenses				
Suppliers	2.1	2,818,407	3,390,282	3,845,000
Total expenses		2,818,407	3,390,282	3,845,000
Income				
Non-Taxation Revenue				
Other Revenue		-	3,733	-
Total non-taxation revenue		-	3,733	-
Total income		-	3,733	-
Net cost of services		(2,818,407)	(3,386,549)	(3,845,000)
Deficit		(2,818,407)	(3,386,549)	(3,845,000)

The above schedule should be read in conjunction with the accompanying notes.

For Budgetary reporting information refer to Note 9. The original budget is the budget published in the 2019-20 Portfolio Budget Statements. The budget statement information has been reclassified and presented on a consistent basis with the corresponding financial statement items.

Administered Schedule of Assets and Liabilities

as at 30 June 2020

	Notes	2020 \$	2019 \$	Original Budget \$
ASSETS				
Financial assets				
Cash and cash equivalents	4.1A	-	1,540,301	54,000
Trade and other receivables	4.1B	44,659	155,174	109,000
Total financial assets		44,659	1,695,475	163,000
Total assets administered on behalf of Government		44,659	1,695,475	163,000
LIABILITIES				
Payables				
Suppliers	4.2	666,169	619,934	1,224,000
Total payables		666,169	619,934	1,224,000
Total liabilities administered on behalf of Government		666,169	619,934	1,224,000
Net assets/(liabilities)		(621,510)	1,075,541	(1,061,000)

The above schedule should be read in conjunction with the accompanying notes.

For Budgetary reporting information refer to Note 9. The original budget is the budget published in the 2019-20 Portfolio Budget Statements. The budget statement information has been reclassified and presented on a consistent basis with the corresponding financial statement items.

Administered Reconciliation Schedule

	2020 \$	2019 \$	Original Budget \$
Opening assets less liabilities as at 1 July	1,075,541	(1,060,724)	(1,061,000)
Net cost of services			
Expenses	(2,818,407)	(3,386,549)	(3,845,000)
Transfers from the Australian Government			
Administered transfers from Australian Government	3,032,265	6,451,023	3,845,000
Appropriation transfers to OPA			
Transfers to OPA	(1,910,909)	(928,209)	-
Closing assets less liabilities as at 30 June	(621,510)	1,075,541	(1,061,000)

The above schedule should be read in conjunction with the accompanying notes.

For Budgetary reporting information refer to Note 9. The original budget is the budget published in the 2019-20 Portfolio Budget Statements. The budget statement information has been reclassified and presented on a consistent basis with the corresponding financial statement items.

Accounting Policy

Administered Cash Transfers to and from the Official Public Account

Revenue collected by the National Mental Health Commission (the Commission) for use by the Government rather than the Commission is administered revenue. Collections are transferred to the Official Public Account (OPA) maintained by the Department of Finance. Conversely, cash is drawn from the OPA to make payments under Parliamentary appropriation on behalf of Government. These transfers to and from the OPA are adjustments to the administered cash held by the Commission on behalf of the Government and reported as such in the schedule of administered cash flows and in the administered reconciliation schedule.

Administered Cash Flow Statement

for the year ended 30 June 2020

	Notes	2020 \$	2019 \$	Original Budget \$
OPERATING ACTIVITIES				
Cash received				
Net GST received		110,515	-	-
Total cash received		110,515	-	-
Cash used				
Suppliers		(2,772,172)	(3,989,916)	(3,845,000)
Net GST paid		-	(46,249)	-
Total cash used		(2,772,172)	(4,036,165)	(3,845,000)
Net cash used by operating activities		(2,661,657)	(4,036,165)	(3,845,000)
Cash from Official Public Account				
Appropriations		3,032,265	6,451,023	3,845,000
Total cash from Official Public Account		3,032,265	6,451,023	3,845,000
Cash to Official Public Account				
Appropriations		(1,910,909)	(928,209)	-
Total cash to Official Public Account		(1,910,909)	(928,209)	-
Cash and cash equivalents at the beginning of the reporting period		1,540,301	53,652	54,000
Cash and cash equivalents at the end of the reporting period	4.1A	-	1,540,301	54,000

This schedule should be read in conjunction with the accompanying notes.

For Budgetary reporting information refer to Note 9. The original budget is the budget published in the 2019-20 Portfolio Budget Statements. The budget statement information has been reclassified and presented on a consistent basis with the corresponding financial statement items.

Overview

Objectives of the National Mental Health Commission

The National Mental Health Commission (the Commission) is a not-for-profit Australian Government controlled entity. The objective of the Commission is to contribute to the Government's agenda to deliver an efficient, integrated and sustainable mental health system to improve mental health outcomes for Australians and help prevent suicide.

The Commission's purpose is to monitor and report on investment in mental health and suicide prevention initiatives, provide evidence based policy advice to Government and disseminate information on ways to continuously improve Australia's mental health and suicide prevention systems, and act as a catalyst for change to achieve those improvements. This includes increasing accountability and transparency in mental health through the provision of independent reports and advice to the Australian Government and the community.

The Commission's activities are classified as either departmental or administered. Departmental activities involve the use of assets, liabilities, income and expenses controlled or incurred by the Commission in its own right. Administered activities involve the management or oversight by the Commission, on behalf of the Government, of items controlled or incurred by the Government.

The continued existence of the Commission in its present form and with its present programs is dependent on Government policy and on continuing funding by Parliament for the Commission's administration and programs.

Comparative figures for 2019 year

The comparative 2019 financial year amounts have been reclassified where necessary to conform with the current year's presentation.

The Basis of Preparation

The financial statements are general purpose financial statements and are required by section 42 of the *Public Governance, Performance and Accountability Act 2013*.

The financial statements have been prepared in accordance with:

- a) *Public Governance, Performance and Accountability (Financial Reporting) Rule 2015 (FRR)* ; and
- b) Australian Accounting Standards and Interpretations – Reduced Disclosure Requirements issued by the Australian Accounting Standards Board (AASB) that apply for the reporting period.

The financial statements have been prepared on an accrual basis and in accordance with the historical cost convention, except for certain assets and liabilities recorded at fair value. Except where stated, no allowance is made for the effect of changing prices on the results or the financial position. The financial statements are presented in Australian dollars.

New Accounting Standards

Standard/ Interpretation	Nature of change in accounting policy, transitional provisions, and adjustment to financial statements
<p>AASB 15 <i>Revenue from Contracts with Customers</i> / AASB 2016-8 <i>Amendments to Australian Accounting Standards – Australian Implementation Guidance for Not-for-Profit Entities</i> and AASB 1058 <i>Income of Not-For-Profit Entities</i></p>	AASB 15, AASB 2016-8 and AASB 1058 became effective 1 July 2019.
	<p>AASB 15 establishes a comprehensive framework for determining whether, how much and when revenue is recognised. It replaces existing revenue recognition guidance, including AASB 118 <i>Revenue</i>. The core principle of AASB 15 is that an entity recognises revenue to depict the transfer of promised goods or services to customers in an amount that reflects the consideration to which the entity expects to be entitled in exchange for those goods or services.</p>
	<p>AASB 1058 is relevant in circumstances where AASB 15 does not apply. AASB 1058 replaces most of the not-for-profit (NFP) provisions of AASB 1004 <i>Contributions</i> and applies to transactions where the consideration to acquire an asset is significantly less than fair value principally to enable the entity to further its objectives.</p>
	<p>The comparative for unearned revenue has been reclassified to contract liabilities. No other impacts have arisen as a result of adopting AASB 15 and AASB 1058.</p> <p>The details of the changes in accounting policies, transitional provisions and adjustments are disclosed below and in the relevant notes to the financial statements.</p>
AASB 16 <i>Leases</i>	AASB 16 became effective on 1 July 2019.
	<p>This new standard has replaced AASB 117 <i>Leases</i>, Interpretation 4 <i>Determining whether an Arrangement contains a Lease</i>, Interpretation 115 <i>Operating Leases—Incentives</i> and Interpretation 127 <i>Evaluating the Substance of Transactions Involving the Legal Form of a Lease</i>.</p> <p>AASB 16 provides a single lessee accounting model, requiring the recognition of assets and liabilities for all leases, together with options to exclude leases where the lease term is 12 months or less, or where the underlying asset is of low value. AASB 16 substantially carries forward the lessor accounting in AASB 117, with the distinction between operating leases and finance leases being retained. The details of the changes in accounting policies, transitional provisions and adjustments are disclosed below and in the relevant notes to the financial statements.</p>

Adoption of New Australian Accounting Standard Requirements

No accounting standard has been adopted earlier than the application date as stated in the standard.

Application of AASB 15 Revenue from Contracts with Customers / AASB 1058 Income of Not-For-Profit Entities

The Commission adopted AASB 15 and AASB 1058 using the modified retrospective approach, under which the cumulative effect of initial application is recognised in retained earnings at 1 July 2019. Accordingly, the comparative information presented for 2019 is not restated.

Under the new income recognition model the Commission shall first determine whether an enforceable agreement exists and whether the promises to transfer goods or services to the customer are 'sufficiently specific'. If an enforceable agreement exists and the promises are 'sufficiently specific' (to a transaction or part of a transaction), the Commission applies the general AASB 15 principles to determine the appropriate revenue recognition. If these criteria are not met, the Commission shall consider whether AASB 1058 applies.

In relation to AASB 15, the Commission elected to apply the new standard to all new and uncompleted contracts from the date of initial application. The Commission is required to aggregate the effect of all of the contract modifications that occur before the date of initial application.

The Commission's income is outside the scope of AASB 1058.

Impact on transition

The adoption of AASB 15 has had no impact on retained earnings at 1 July 2019 as there has been no change in the way revenue has been measured in comparison to the previous standard AASB 118.

Application of AASB 16 Leases

The Commission adopted AASB16 which became effective on 1 July 2019. The Commission adopted AASB 16 using the modified retrospective approach, under which the cumulative effect of initial application is recognised in retained earnings at 1 July 2019. The comparative information presented for 2019 is not restated, it is presented as previously reported under AASB 117 and related interpretations.

AASB 16 provides for certain optional expedients including those related to the initial adoption of the standard. The Commission applied practical expedients as outlined in the Lease liabilities accounting policy.

The lease liabilities were measured at the present value of the remaining lease payments, discounted using the incremental borrowing rate as at 1 July 2019. The incremental borrowing rate is the rate at which a similar borrowing could be obtained from an independent creditor under comparable terms and conditions. The weighted-average rate applied was 1.06%.

Impact on transition

On transition to AASB 16, the Commission recognised additional right-of-use assets and additional lease liabilities. The impact on transition is summarised below:

Departmental	1 July 2019 \$
Recognition of Right-of-use assets - Buildings:	3,185,087
Recognition of Lease liabilities:	(3,116,278)
Prepayment:	(68,809)
Straightlining of lease liabilities	870,531
Retained earnings	(870,531)

The opening balance of \$870,531 under the previous standard AASB 117 was adjusted to retained earnings at transition effectively increasing the retained earnings balance.

The following table reconciles the Departmental minimum lease commitments disclosed in the Commission's 30 June 2019 annual financial statements to the amount of lease liabilities recognised on 1 July 2019:

	1 July 2019 \$
Minimum operating lease commitment ¹	3,206,751
Less: short-term leases not recognised	(31,887)
Undiscounted lease payments	3,174,864
Less: effect of discounting using the incremental borrowing rate as at the date of initial application	(58,586)
Lease liabilities recognised at 1 July 2019	3,116,278

¹Minimum Operating Lease commitment is different from the figure in 2018-19 as the figure in prior year does not include car lease and includes one month prepayment, and also does not exclude GST.

Taxation

The Commission is exempt from all forms of taxation except Fringe Benefits Tax (FBT) and the Goods and Services Tax (GST).

Revenues, expenses and assets are recognised net of GST except:

- a) where the amount of the GST incurred is not recoverable from the Australian Taxation Office; and
- b) for receivables and payables.

Reporting of Administered activities

Administered revenues, expenses, assets, liabilities and cash flows are disclosed in the administered schedules and related notes.

Except where otherwise stated, administered items are accounted for on the same basis and using the same policies as for departmental items, including the application of Australian Accounting Standards.

Events After the Reporting Period

The Commission has been a critical agency during the COVID 19 pandemic and has worked in close partnership with the Department of Health in response to all aspects of the COVID 19 pandemic. These events do not have the potential to significantly affect the ongoing structure and financial activities of the Commission.

Correction of prior period error

The Departmental unspent appropriations balance reported in the 2018-19 Financial statements was overstated by an amount of \$207,132. This amount related to Appropriation owed by Departmental to Administered. The appropriation was paid back to Administered in the 2020 Financial year. To reflect the correct Appropriation balances at 30 June 2019, the Departmental unspent appropriation, trade creditors and Administered unspent appropriation balances have been restated as below.

Period ended 30 June 2019

	Previous year \$	Adjustments \$	Restated amount \$
ASSETS			
Financial assets			
Cash and cash equivalents	-	-	-
Trade and other receivables	3,588,132	(207,132)	3,381,000
Total financial assets	3,588,132	(207,132)	3,381,000
Non-financial assets			
Leasehold improvements	1,106,472	-	1,106,472
Plant and equipment	15,613	-	15,613
Prepayments	79,142	-	79,142
Total non-financial assets	1,201,227	-	1,201,227
Total assets	4,789,359	(207,132)	4,582,227
LIABILITIES			
Payables			
Suppliers	713,501	(207,132)	506,369
Other payables	1,455,888	-	1,455,888
Total payables	2,169,389	(207,132)	1,962,257
Provisions			
Employee provisions	484,035	-	484,035
Other provisions	70,110	-	70,110
Total provisions	554,145	-	554,145
Total liabilities	2,723,534	(207,132)	2,516,402
Net assets	2,065,825	-	2,065,825

Period ended 30 June 2019

	Previous year \$	Adjustments \$	Restated amount \$
Departmental			
Appropriation Act (No. 1) 2018-2019	2,920,177	(207,132)	2,713,045
Appropriation Act (No. 2) 2018-2019	138,568	-	138,568
Total departmental	3,058,745	(207,132)	2,851,613
Administered			
Appropriation Act (No 1) 2017-2018	512,572	207,132	719,704
Appropriation Act (No 1) 2018-2019	1,044,946	-	1,044,946
Total administered	1,557,518	207,132	1,764,650

Financial Performance

This section analyses the financial performance of the National Mental Health Commission for the year ended 30 June 2020

1.1 Expenses

	2020 \$	2019 \$
1.1A: Employee Benefits		
Wages and salaries	3,747,806	2,470,218
Superannuation:		
Defined contribution plans	502,261	350,734
Defined benefit plans	157,586	97,065
Leave and other entitlements	671,906	496,727
Separations and redundancies	130,839	32,238
Other employee benefits	17,630	19,067
Total employee benefits	5,228,028	3,466,049

Accounting Policy

Accounting policies for employee related expenses are contained in the People and Relationships section.

1.1B: Suppliers

Goods and services supplied or rendered

Contracted services	1,702,818	1,786,642
Travel	170,126	185,364
IT services	9,436	37,506
Property operating expenses	197,978	146,139
Audit fees	33,000	33,000
Conferences and seminars	7,459	11,821
Other	134,605	158,908
Total goods and services supplied or rendered	2,255,422	2,359,380

Goods supplied	30,559	49,141
Services rendered	2,224,863	2,310,239
Total goods and services supplied or rendered	2,255,422	2,359,380

Other suppliers

Workers compensation expenses	13,705	18,816
Operating lease rentals ¹	-	642,829
Short-term leases	31,887	-
Total other suppliers	45,592	661,645
Total suppliers	2,301,014	3,021,025

¹ The Commission has applied AASB 16 using the modified retrospective approach and therefore the comparative information has not been restated and continues to be reported under AASB 117.

The above lease disclosures should be read in conjunction with the accompanying notes 3.2, 3.3B and 3.4.

Accounting Policy**Contracted services**

The contracted services include payments to the service providers of the Commission in delivery of the funded programs from the Department of Health and payments to the Department of Health under a shared services agreement.

Short-term leases and leases of low-value assets

The Commission has elected not to recognise right-of-use assets and lease liabilities for short-term leases of assets that have a lease term of 12 months or less and leases of low-value assets (less than \$10,000). The Commission recognises the lease payments associated with these leases as an expense on a straight-line basis over the lease term.

1.2 Revenue and Gains

	2020	2019
	\$	\$

1.2A: Revenue from contracts with customers

Rendering of services	1,284,218	1,351,349
Total revenue from contracts with customers	1,284,218	1,351,349

Disaggregation of revenue from contracts with customers

Type of customer:

Australian Government entities (related parties)	1,164,218	1,321,349
State and Territory Governments	120,000	30,000
	1,284,218	1,351,349

Timing of transfer of goods and services:

Over time	1,284,218	1,351,349
	1,284,218	1,351,349

Accounting Policy

Revenue from the rendering of services is recognised when control has been transferred to the buyer. The Commission has determined that enforceable contracts exist and has recognised revenue progressively over the period of the schedule due to the specific activities required, milestone, budget management and reciprocal benefit to the customer. As the performance obligations are satisfied over time, revenue is recognised on a straight-line basis in the reporting period in which the services are rendered.

The transaction price is the total amount of consideration to which the Commission expects to be entitled in exchange for transferring promised goods or services to the customer. The consideration promised in a contract with a customer includes only fixed amounts.

1.2B: Other Revenue

Interest income	-	13
Resources received free of charge:		
Remuneration of external auditors	33,000	33,000
Total other revenue	33,000	33,013

Accounting Policy

Resources Received Free of Charge

Resources received free of charge are recognised as revenue when, and only when, a fair value can be reliably determined and the services would have been purchased if they had not been donated. Use of those resources is recognised as an expense. Resources received free of charge are recorded as either revenue or gains depending on their nature.

1.2C: Revenue from Government

Appropriations

Departmental appropriations	8,176,000	5,693,000
Total Revenue from Government	8,176,000	5,693,000

Accounting Policy

Revenue from Government

Amounts appropriated for departmental appropriations for the year (adjusted for any formal additions and reductions) are recognised as Revenue from Government when the entity gains control of the appropriation, except for certain amounts that relate to activities that are reciprocal in nature, in which case revenue is recognised only when it has been earned. Appropriations receivable are recognised at their nominal amounts.

Income and Expenses Administered on Behalf of Government

This section analyses the activities that the National Mental Health Commission does not control but administers on behalf of the Government.

2.1 Administered - Expenses

for the year ended 30 June 2020

	2020	2019
	\$	\$
2.1: Suppliers		
Goods and services supplied or rendered		
Outsourced providers and contractors	2,047,685	2,781,643
Travel	361,251	290,740
IT services	4,484	1,954
Other	404,987	315,945
Total goods and services supplied or rendered	2,818,407	3,390,282
Services rendered	2,818,407	3,390,282
Total goods and services supplied or rendered	2,818,407	3,390,282
Total suppliers	2,818,407	3,390,282

Financial Position

This section analyses the National Mental Health Commission's assets and liabilities.

3.1 Financial Assets

	2020	2019
	\$	\$

3.1A: Cash and Cash Equivalents

Cash on hand or on deposit	122,977	-
Total cash and cash equivalents	122,977	-

Accounting Policy

Cash is recognised at its nominal amount. Cash and cash equivalents include cash on hand and any deposits in bank accounts with an original maturity of 3 months or less that are readily convertible to known amounts of cash and subject to insignificant risk of changes in value.

3.1B: Trade and Other Receivables

Goods and services receivables

Goods and services	866,751	473,985
Total goods and services receivables	866,751	473,985

Appropriations receivables

For existing programs	3,324,485	2,713,045
Equity injection & Departmental capital budget	142,058	138,568
Total appropriations receivables	3,466,543	2,851,613

Other receivables

GST receivable from the Australian Taxation Office	57,786	55,402
Total other receivables	57,786	55,402
Total trade and other receivables (gross)	4,391,080	3,381,000
Total trade and other receivables (net)	4,391,080	3,381,000

Accounting Policy

Trade and Other Receivables

Trade and other receivables excluding appropriations and other receivables that are held for the purpose of collecting the contractual cash flows where the cash flows are solely payments of principal and interest, that are not provided at below-market interest rates, and are subsequently measured at amortised cost using the effective interest method adjusted for any loss allowance. Receivables for goods and services, which have 30 day terms (2018-19: 30 days), are recognised at the nominal amounts.

3.2 Non-Financial Assets

3.2: Reconciliation of the Opening and Closing Balances of Property, Plant and Equipment and Intangibles:

Reconciliation of the opening and closing balances for 2020

	Buildings - Right of use Asset \$	Leasehold improvements \$	Plant and equipment \$	Computer Software \$	Total \$
As at 1 July 2019					
Gross book value	-	1,457,481	41,000	24,505	1,522,986
Accumulated depreciation, amortisation and impairment	-	(351,009)	(25,387)	(24,505)	(400,901)
Total as at 1 July 2019	-	1,106,472	15,613	-	1,122,085
Recognition of right-of-use asset on initial application of AASB 16	3,185,087	-	-	-	3,185,087
Adjusted total as at 1 July 2019	3,185,087	1,106,472	15,613	-	4,307,172
Additions:					
Purchased	-	-	20,510	-	20,510
Depreciation and amortisation	-	(296,672)	(11,209)	-	(307,881)
Depreciation on right-of-use assets	(863,011)	-	-	-	(863,011)
Loss on disposal of assets	-	-	(395)	-	(395)
Total as at 30 June 2020	2,322,076	809,800	24,519	-	3,156,396
Net book value as at 30 June 2020 represented by					
Gross book value	3,185,087	1,457,481	61,510	24,505	4,728,584
Accumulated depreciation, amortisation and impairment	(863,011)	(647,681)	(36,991)	(24,505)	(1,572,188)
Total as at 30 June 2020	2,322,076	809,800	24,519	-	3,156,396
Carrying amount of right-of-use assets	2,322,076	-	-	-	2,322,076

No indicators of impairment were found for property plant and equipment.

No property, plant and equipment are expected to be sold or disposed of within the next 12 months.

There are no significant contractual commitments for the acquisition of property, plant and equipment and intangible assets.

Accounting Policy

Assets are recorded at cost on acquisition except as stated below. The cost of acquisition includes the fair value of assets transferred in exchange and liabilities undertaken. Financial assets are initially measured at their fair value plus transaction costs where appropriate.

Assets acquired at no cost, or for nominal consideration, are initially recognised as assets and income at their fair value at the date of acquisition, unless acquired as a consequence of restructuring of administrative arrangements. In the latter case, assets are initially recognised as contributions by owners at the amounts at which they were recognised in the transferor's accounts immediately prior to the restructuring.

Asset Recognition Threshold

Purchases of property, plant and equipment are recognised initially at cost in the statement of financial position, except for purchases costing less than \$2,000, which are expensed in the year of acquisition (other than where they form part of a group of similar items which are significant in total).

The initial cost of an asset includes an estimate of the cost of dismantling and removing the item and restoring the site on which it is located. This is particularly relevant to 'make good' provisions in property leases taken up by the Commission where there exists an obligation to restore the property to its original condition. These costs are included in improvements with a corresponding provision for the 'make good' recognised.

Leased Right-of-Use (ROU) Assets

Leased ROU assets are capitalised at the commencement date of the lease and comprise the initial lease liability amount, initial direct costs incurred when entering into the lease less any lease incentives received. These assets are accounted for by the Commission as separate asset classes to corresponding assets owned outright.

Following initial application, an impairment review is undertaken for any right-of-use lease asset that shows indicators of impairment and an impairment loss is recognised against any right of use lease asset that is impaired. Leased ROU assets continue to be measured at cost after initial recognition in the Commission's financial statements.

Revaluations

Following initial recognition at cost, property, plant and equipment (excluding ROU assets) are carried at fair value (or an amount not materially different from fair value) less subsequent accumulated depreciation and accumulated impairment losses. Valuations are conducted with sufficient frequency to ensure that the carrying amounts of assets did not differ materially from the assets' fair values as at the reporting date in June 2020. The regularity of independent valuations depended upon the volatility of movements in market values for the relevant assets.

Revaluation adjustments are made on a class basis. Any revaluation increment is credited to equity under the heading of asset revaluation reserve except to the extent that it reversed a previous revaluation decrement of the same asset class that was previously recognised in the surplus/deficit. Revaluation

decrements for a class of assets are recognised directly in the surplus/deficit except to the extent that they reverse a previous revaluation increment for that class.

Any accumulated depreciation as at the revaluation date is eliminated against the gross carrying amount of the asset and the asset restated to the revalued amount

Depreciation

Depreciable property, plant and equipment assets are written-off to their estimated residual values over their estimated useful lives to the Commission using, in all cases, the straight-line method of depreciation.

Depreciation rates (useful lives), residual values and methods are reviewed at each reporting date and necessary adjustments are recognised in the current, or current and future reporting periods, as appropriate.

Depreciation rates applying to each class of depreciable asset are based on the following useful lives:

	2020	2019
Buildings - Right of use assets	4 years	-
Leasehold improvements	Lease terms	Lease terms
Plant and equipment	3 to 4 years	3 to 4 years

The depreciation rates for ROU assets are based on the commencement date to the earlier of the end of the useful life of the ROU asset or the end of the lease term.

Impairment

All assets were assessed for impairment at 30 June 2020. Where indications of impairment exist, the asset's recoverable amount is estimated and an impairment adjustment made if the asset's recoverable amount is less than its carrying amount.

The recoverable amount of an asset is the higher of its fair value less costs of disposal and its value in use. Value in use is the present value of the future cash flows expected to be derived from the asset. Where the future economic benefit of an asset is not primarily dependent on the asset's ability to generate future cash flows, and the asset would be replaced if the Commission were deprived of the asset, its value in use is taken to be its depreciated replacement cost.

Derecognition

An item of property, plant and equipment is derecognised upon disposal or when no further future economic benefits are expected from its use or disposal.

Accounting Policy (continued)**Intangibles**

The Commission's intangibles comprise software for internal use. These assets are carried at cost less accumulated amortisation and accumulated impairment losses.

The Commission's software assets were fully depreciated at year end.

3.3 Payables

	2020	2019
	\$	\$
3.3A: Suppliers		
Trade creditors and accruals	606,824	506,369
Total suppliers	606,824	506,369

Settlement is usually made within 30 days (2018-19: 30 days) with all supplier payables expected to be settled in the next 12 months.

3.3B: Other Payables

Salaries and wages	74,786	20,663
Superannuation	11,201	3,757
Lease incentive ¹	-	870,530
Prepayments received/unearned income	26,718	560,938
Total other payables	112,705	1,455,888

¹ The Commission has applied AASB 16 using the modified retrospective approach and therefore the comparative information has not been restated and continues to be reported under AASB 117.

Accounting Policy

Financial Liabilities

Supplier and other payables are recognised at amortised cost. Liabilities are recognised to the extent that the goods or services have been received (and irrespective of having been invoiced).

Unearned Income

Unearned income represents assets received from another party in advance of the Commission fulfilling its contracted obligations. The Commission releases unearned income to revenue over the period of the contracted obligations when the services are performed.

3.4 Interest Bearing Liabilities

	2020	2019
	\$	\$
Leases		
Lease Liabilities - Buildings	2,307,149	-
Total interest bearing liabilities	2,307,149	-

Total cash outflow for leases for the year ended 30 June 2020 was \$838,271.

The Commission applied the following practical expedients when applying AASB 16 to leases previously classified as operating leases under AASB 117:

- Applied a single discount rate to a portfolio of leases with reasonably similar characteristics;
- Excluded initial direct costs from the measurement of right-of-use assets at the date of initial application for leases where the right-of-use asset was determined as if AASB 16 had been applied since the commencement date; and
- Applied the exemption not to recognise right-of-use assets and liabilities for low value assets and leases with less than 12 months of lease term remaining as of the date of initial application. The right-of-use assets were measured at an amount equal to the lease liability, adjusted by the amount of any prepaid or accrued lease payments.

3.5 Other Provisions

	Provision of makegood \$	Total \$
As at 1 July	70,110	70,110
Additional provisions made	-	-
Amounts used	-	-
Amounts reversed	-	-
Total as at 30 June 2020	70,110	70,110

The Commission has one lease for rental premises (2019: one) which requires restoration of the premises to their original conditions at the conclusion of the lease. The Commission has made a provision to reflect the present value of this obligation.

Assets and Liabilities Administed on Behalf of the Government

This section analyses assets used to conduct operations and the operating liabilities incurred as a result. The National Mental Health Commission does not control these assets and liabilities but administers them on behalf of the Government.

4.1 Administered - Financial Assets

	2020	2019
	\$	\$
4.1A: Cash and Cash Equivalents		
Cash on hand or on deposit	-	1,540,300
Total cash and cash equivalents	-	1,540,300
4.1B: Trade and Other Receivables		
Other receivables		
GST receivable from the Australian Taxation Office	44,659	155,174
Total other receivables	44,659	155,174
Total trade and other receivables	44,659	155,174

4.2 Administered - Payables

	2020	2019
	\$	\$
4.2: Suppliers		
Trade creditors and accruals	666,169	619,933
Total suppliers	666,169	619,933

Settlement is usually made within 30 days (2018-19: 30 days) with all supplier payables to be settled in the next 12 months.

Funding

This section identifies the National Mental Health Commission's funding structure.

5.1 Appropriations

5.1A: Annual Appropriations ('Recoverable GST exclusive')

	Annual appropriation 2020 \$	Annual appropriation 2019 \$
Departmental		
Ordinary annual services ¹	8,176,000	5,693,000
Receipts retained under PGPA Act - Section 74	1,195,298	2,730,105
Capital Budget ²	24,000	24,000
Equity injections	-	150,000
Total departmental appropriation	9,395,298	8,597,105
Appropriation applied (current and prior years)	(8,864,523)	(7,056,561)
Variance ³	530,775	1,540,544
Administered		
Ordinary annual services	3,845,000	3,785,000
Receipts retained under PGPA Act - Section 74	1,623,796	596,212
Total administered appropriation	5,468,796	4,381,212
Appropriation applied (current and prior years)	(2,867,437)	(4,828,581)
Variance ⁴	2,601,359	(447,369)

Commentary:

¹ There were no amounts withheld under section 51 of the PGPA Act from 2020 or 2019 departmental ordinary annual services appropriations.

² Departmental Capital Budgets are appropriated through Appropriation Acts (No. 1,3) and Supply Acts (No.1,3). They form part of ordinary annual services and are not separately identified in the Appropriation Acts.

³ The variance of \$530,775 for departmental ordinary annual services primarily represents the timing difference of payments to suppliers or employees.

⁴ The administered ordinary annual services items variance of \$2,601,359 relates to the utilisation of retained funding from 2019 during 2020 (the former section 11 of the Appropriation Acts).

5.1B: Unspent Annual Appropriations ('Recoverable GST exclusive')

	2020 \$	2019 \$
Departmental		
<i>Appropriation Act (No. 1) 2018 -2019</i>	-	2,713,045
<i>Appropriation Act (No. 2) 2018-2019</i>	138,568	138,568
<i>Appropriation Act (No. 1) 2019-2020</i>	2,324,485	-
<i>Appropriation Act (No. 3) 2019-2020</i>	1,000,000	-
<i>Appropriation Act (No. 1) 2019-2020 - Capital Budget</i>	3,490	-
<i>Appropriation Act (No. 1) 2019-2020 - cash held by the Commission</i>	122,977	-
Total departmental	3,589,520	2,851,613
Administered		
<i>Appropriation Act (No 1) 2017-2018¹</i>	719,704	719,704
<i>Appropriation Act (No 1) 2018-2019¹</i>	468,583	1,044,946
<i>Appropriation Act (No 1) 2019-2020</i>	1,637,422	-
Total administered	2,825,709	1,764,650

Commentary:

¹Unspent appropriations returned in the current financial year.

People and relationships

This section describes a range of employment and post employment benefits provided to our people and our relationships with other key people.

6.1 Employee Provisions

	2020 \$	2019 \$
6.1: Employee Provisions		
Leave	849,559	484,035
Total employee provisions	849,559	484,035
Employee provisions expected to be settled		
No more than 12 months	264,861	204,459
More than 12 months	584,698	279,576
Total employee provisions	849,559	484,035

Accounting Policy

Liabilities for short-term employee benefits and termination benefits expected within twelve months of the end of reporting period are measured at their nominal amounts.

The nominal amount is calculated with regard to the rates expected to be paid on settlement of the liability.

Leave

The liability for employee benefits includes provision for annual leave and long service leave.

The leave liabilities are calculated on the basis of employees' remuneration at the estimated salary rates that will be applied at the time the leave is taken, including the Commission's employer superannuation contribution rates to the extent that the leave is likely to be taken during service rather than paid out on termination.

The liability for long service leave has been calculated using the Australian Government short hand method. The estimate of the present value of the liability takes into account attrition rates and pay increases through promotion and inflation.

Separation and Redundancy

The Commission recognises a provision for termination when it has developed a detailed formal plan for the terminations and has informed those employees affected that it will carry out the terminations.

Superannuation

The Commission's staff are members of the Commonwealth Superannuation Scheme (CSS), the Public Sector Superannuation Scheme (PSS), or the PSS accumulation plan (PSSap), or other superannuation funds held outside the Australian Government.

The CSS and PSS are defined benefit schemes for the Australian Government. The PSSap is a defined contribution scheme.

The liability for defined benefits is recognised in the financial statements of the Australian Government and is settled by the Australian Government in due course. This liability is reported in the Department of Finance's administered schedules and notes.

The liability for superannuation recognised as at 30 June represents outstanding contributions.

The Commission also contributes to a number of complying funds to discharge the Authority's liability in regard to individual employees and the *Superannuation Guarantee (Administration) Act 1992* as well as to facilitate the salary sacrifice options of employees.

6.2 Key Management Personnel Remuneration

Key management personnel are those persons having authority and responsibility for planning, directing and controlling the activities of the Commission, directly or indirectly, including any director (whether executive or otherwise). The Commission has determined the key management personnel to be the Portfolio Minister and the Chief Executive Officer. Key management personnel remuneration is reported in the table below:

	2020 \$	2019 \$
Short-term employee benefits	348,778	328,230
Post-employment benefits	34,199	33,031
Other long-term employee benefits	4,611	5,159
Total key management personnel remuneration expenses¹	387,588	366,420

The total number of key management personnel that are included in the above table is one (2019: two).

¹ The above key management personnel remuneration excludes the remuneration and other benefits of the Portfolio Minister. The Portfolio Minister's remuneration and other benefits are set by the Remuneration Tribunal and are not paid by the Commission.

6.3 Related Party Disclosures

Related party relationships:

The Commission is an Australian Government controlled entity. Related parties to the Commission are Key Management Personnel, including the Portfolio Minister, the Commission's Chief Executive Officer and other Australian Government entities.

Transactions with related parties:

Given the breadth of Government activities, related parties may transact with the government sector in the same capacity as ordinary citizens. Such transactions include the payment for shared services. These transactions have not been separately disclosed in this note.

Significant transactions with related parties can include:

- purchases of goods and services; and
- asset purchases, sales transfers or leases;

Giving consideration to relationships with related entities, and transactions entered into during the reporting period by the Commission, it has been determined that there are no related party transactions to be separately disclosed.

Managing uncertainties

This section analyses how the Commission manages financial risks within its operating environment.

7.1 Financial Instruments

	2020	2019
	\$	\$
7.1:A Categories of Financial Instruments		
Financial assets at amortised cost		
Cash and cash equivalents	122,977	-
Goods and services receivable	866,751	473,985
Total financial assets at amortised cost	989,728	473,985
Financial liabilities		
Financial liabilities measured at amortised cost		
Suppliers	606,824	713,501
Total financial liabilities measured at amortised cost	606,824	713,501

Accounting Policy

Financial Assets

Financial assets are recognised when the Commission becomes a party to the contract, and, as a consequence, has a legal right to receive or a legal obligation to pay cash. Financial assets are derecognised when the contractual rights to the cash flows from the financial asset expire or are transferred upon trade date.

Financial Assets at Amortised Cost

Financial assets included in this category need to meet two criteria:

1. the financial asset is held in order to collect the contractual cash flows; and
2. the cash flows are solely payments of principal and interest (SPPI) on the principal outstanding amount.

Amortised cost is determined using the effective interest method.

Effective Interest Method

Income is recognised on an effective interest rate basis for financial assets that are recognised at amortised cost.

Impairment of Financial Assets

Financial assets are assessed for impairment at the end of each reporting period based on Expected Credit Losses. The simplified approach for trade and contract receivables is used whereby the loss allowance is measured as the amount equal to the lifetime expected credit losses.

Financial Liabilities

Supplier and other payables are recognised at amortised cost. Liabilities are recognised to the extent that the goods or services have been received (and irrespective of having been invoiced).

Lease liabilities are measured at the present value of the remaining lease payments, discounted using the Commission's incremental borrowing rate at 1 July 2019.

7.2 Administered - Financial Instruments

	2020	2019
	\$	\$
7.2 : Categories of Financial Instruments		
Financial assets at amortised cost		
Cash and cash equivalents	-	1,540,300
Total financial assets at amortised cost	-	1,540,300
Financial liabilities measured at amortised cost		
Suppliers	666,169	619,934
Total financial liabilities measured at amortised cost	666,169	619,934

7.3. Contingent Assets and Liabilities

7.3A: Departmental - Contingent Assets and Liabilities

There are no contingent assets or liabilities in the current year or prior year.

Quantifiable Contingencies

There were no estimated contingent liabilities as at 30 June 2020. (2019:Nil)

Unquantifiable Contingencies

There were no unquantifiable contingent liabilities as at 30 June 2020. (2019:Nil)

Accounting Policy

Contingent liabilities and contingent assets are not recognised in the Statement of Financial Position but are reported in the notes. They may arise from uncertainty as to the existence of a liability or asset or represent an asset or liability in respect of which the amount cannot be reliably measured. Contingent assets are disclosed when settlement is probable but not virtually certain and contingent liabilities are disclosed when settlement is greater than remote.

7.3B: Administered - Contingent Assets and Liabilities

There are no contingent assets or liabilities in the current year or prior year.

Quantifiable Administered Contingencies

There were no estimated contingent liabilities as at 30 June 2020. (2019:Nil)

Unquantifiable Administered Contingencies

There were no unquantifiable contingent liabilities as at 30 June 2020. (2019:Nil)

7.4: Fair Value Measurement

Fair value measurements at the end of the reporting period

	2020 \$	2019 \$
Financial assets		
Cash on hand or on deposit	122,977	-
Total Financial assets	122,977	-
Non-financial assets		
Right of use assets - Buildings - at amortised cost	2,322,076	-
Property, plant and equipment - approximate to fair value	834,320	1,122,085
Total non-financial assets	3,156,396	1,122,085
Financial liabilities (approximate to fair value)		
Trade creditors and accruals	606,824	713,501
Other payables	112,705	1,455,888
Lease liabilities - Buildings - at amortised cost	2,307,149	-
Total financial liabilities	3,026,678	2,169,389
Non-financial liabilities		
Employee provisions (approximate to fair value)	849,559	484,035
Total non-financial liabilities	849,559	484,035

Accounting Policy

Following initial recognition at cost, property, plant and equipment is carried at fair value less subsequent accumulated depreciation and accumulated impairment losses.

Valuations are conducted with sufficient frequency to ensure the carrying amounts of assets do not differ materially from the assets' fair values as at the reporting date. The regularity of independent valuations depends upon the volatility of movements in market values for the relevant assets.

The Commission's assets are held for operational purposes and not held for the purposes of deriving a profit. The current use of all non-financial assets is considered their highest and best use.

The Commission's policy is to recognise transfers into and transfers out of fair value hierarchy levels as at the end of the reporting period. There have been no transfers between level 1 and level 2 of the hierarchy during the year.

Financial liabilities are held at amortised cost. At 30 June, they are approximate to fair value.

7.5 Administered Fair Value Measurement

Fair value measurements at the end of the reporting period

	2020 \$	2019 \$
Financial assets		
Cash on hand or on deposit	-	1,540,300
Total Financial assets	-	1,540,300
Financial liabilities		
Trade creditors and accruals (approximate to fair value)	666,169	619,934
Total financial liabilities	666,169	619,934

Other information

8.1 A : Aggregate Assets and Liabilities

8.1 Aggregate Assets and Liabilities

	2020	2019
	\$	\$
Assets expected to be recovered in:		
No more than 12 months	4,515,958	3,667,274
More than 12 months	3,156,395	1,122,085
Total assets	7,672,353	4,789,359
Liabilities expected to be settled in:		
No more than 12 months	1,833,234	2,373,848
More than 12 months	2,113,112	349,686
Total liabilities	3,946,347	2,723,534

8.1 B: Administered - Aggregate Assets and Liabilities

	2020	2019
	\$	\$
Assets expected to be recovered in:		
No more than 12 months	44,659	1,695,474
More than 12 months	-	-
Total assets	44,659	1,695,474
Liabilities expected to be settled in:		
No more than 12 months	666,169	619,934
More than 12 months	-	-
Total liabilities	666,169	619,934

Budget Variance

Note 9 : Explanations of Major Budget Variances

Variances are considered to be 'major' if they are core to the Commission's activities and based on the following criteria:

- the variance between budget and actual is greater than +/- 10% of the original budget for a line item; and
- an item is below this threshold but is considered important for the reader's understanding or is relevant to an assessment of the discharge of accountability and to an analysis of the Commission's performance.

The budget is not audited.

Budget Variance Explanation	Affected statements and line items
<p>In 2019-20, the Commission was tasked with implementing the National Workplace Initiative project. The Commission is in the process of adjusting the budget to align with the work program.</p> <p>The Commission also received additional Departmental funding through the Portfolio Additional Estimates Statements budget process in late 2019-20 for additional projects which will be expended in 2020-21.</p> <p>During the period, the Commission adopted AASB16 which became effective on 1 July 2019. This new standard has replaced AASB 117 Leases. Account balances in the Statement of Financial Position and Statement of Comprehensive Income have been updated to incorporate this change.</p> <p>PBS doesn't list Section 74 receipts transferred to the Official Public Account (OPA) as a separate line item on the facial budget statement.</p>	<p>Statement of Comprehensive Income:</p> <ul style="list-style-type: none"> - Employee benefits - Suppliers - Depreciation and amortisation - Revenue from Government <p>Statement of Financial Position:</p> <ul style="list-style-type: none"> - Cash & cash equivalents - Trade and other receivables - Buildings - Leasehold improvements - Plant & equipments - Prepayments - Suppliers - Other payables - Employee provisions - Computer software <p>Cash Flow Statement:</p> <ul style="list-style-type: none"> - Appropriations - Rendering of services - Employees - Suppliers - Section 74 receipts transferred to the OPA - Purchase of property, plant and equipment - Appropriations - Departmental capital budget - Bill 1
<p>The Commission had to place planned work on hold as a result of the COVID-19 pandemic which has resulted in funds not being spent in the 2019-20 financial year. The Commission's resources were prioritised to deliver Government priorities for mental health and suicide prevention during the pandemic, with consultation and engagement on a number of projects not being able to progress as planned.</p>	<p>Administered Schedule of Comprehensive Income:</p> <ul style="list-style-type: none"> - Suppliers <p>Administered Schedule of Assets and Liabilities:</p> <ul style="list-style-type: none"> - Trade and other receivables - Suppliers <p>Administered Cash Flow Statement:</p> <ul style="list-style-type: none"> - Suppliers - Appropriations <p>Administered Reconciliation Schedule:</p> <ul style="list-style-type: none"> - Expenses - Transfer from Australian Government - Transfer to OPA

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Glossary of abbreviations and acronyms

Australian Mental Health Leaders Fellowship (AMHLF): A national program that supports the development of leadership skills among emerging leaders with a passion and commitment to mental health. These leaders include consumers, carers, mental health professionals and others outside the traditional boundaries of the mental health sector, including emergency service workers, students and early career researchers, and professionals in industry, finance and the justice system.

Carer: In this document, the term carer refers to an individual who provides ongoing personal care, support, advocacy and/or assistance to a person with mental illness or mental ill health.

Commission: The Chair, Commissioners and Chief Executive Officer.

Consumers: People who identify as having a living or lived experience of mental illness or mental ill health, irrespective of whether they have a formal diagnosis, who have accessed mental health services and/ or received treatment. This includes people who describe themselves as a 'peer', 'survivor' or 'expert by experience'.

Contributing Life: A fulfilling life where people living with a mental health difficulty can expect the same rights, opportunities and health as the wider community. It is a life enriched with close connections to family and friends, supported by good health, wellbeing and health care. It means having a safe, stable and secure home and having something to do each day that provides meaning and purpose, whether it is a job, supporting others or volunteering.

Council of Australian Governments (COAG): The peak intergovernmental forum in Australia, comprising the Prime Minister, State Premiers, Territory Chief Ministers and the President of the Australian Local Government Association. On 29 May 2020, the Prime Minister announced that the Council of Australian Government (COAG) will cease and a new National Federation Reform Council (NFRC) will be formed, with National Cabinet at the centre of the NFRC.

Co-design: An approach to design that includes all stakeholders (for example, consumers, carers, researchers, health workers, clinicians, funders, policy-makers).

Formal Commission meeting: Full meetings of the Commission, of which there will be a minimum of six per year in accordance with the Operating Principles. The Commission may also conduct business out-of-session.

Fifth Plan: Fifth National Mental Health and Suicide Prevention Plan.

Lived experience: In this report, lived experience refers to people who have either current or past experience of mental illness or mental ill health as a consumer and/or a carer.

Mental health: A state of wellbeing in which every person realises their own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to contribute to their community. (World Health Organization definition).

National Disability Insurance Scheme (NDIS): The NDIS provides individualised support packages for eligible people with permanent and significant disability, their families and carers. Roll out commenced on 1 July 2016 and is expected to be complete by 2020.

Peer workforce: The supply of people who are employed, either part-time or fulltime, on the basis of their lived experience, to provide support to people experiencing a similar situation. The people who make up the peer workforce may be called peer workers, consumer workers, carer workers and/or lived experience workers.

Primary Health Network (PHN): A PHN is an administrative health region established to deliver access to primary care services for patients, as well as co-ordinate with local hospitals to improve the operational efficiency of the network. The six key priorities for targeted work for PHNs are: mental health, Aboriginal and Torres Strait Islander health, population health, health workforce, eHealth and aged care.

Psychosocial disability: A term used in the context of the NDIS to describe a disability arising from a mental illness, that is likely to make the person eligible for an individual support package under the scheme.

Restraint: The restriction of an individual's freedom of movement by physical or mechanical means.

Seclusion: The confinement of an individual at any time of the day or night alone in a room or area from which free exit is prevented.

Social and emotional wellbeing: A holistic concept that reflects the Aboriginal and Torres Strait Islander understanding of health and recognises the importance of connection to land, culture, spirituality, ancestry, family and community and how these affect the individual.

Secretariat: Support provided for meetings of the Commissioners.

Stigma: Stigma is a mark of shame, disgrace or disapproval on the basis of an individual's characteristics, which results in that individual being rejected, discriminated against, and/or excluded from participating in a number of different areas of society.

Support person: A person whose life is affected by virtue of a family or close relationship role with a person with mental illness.

AASB: Australian Accounting Standards Board

AHMAC: Australian Health Ministers' Advisory Council

ABS: Australian Bureau of Statistics

AIDA: Australian Indigenous Doctors' Association

AIME: Australian Indigenous Mentoring Experience

AIHW: Australian Institute of Health and Welfare

AMHLF: Australian Mental Health Leaders Fellowship (the Fellowship)

ARACY: Australian Research Alliance for Children and Youth

ASL: Average Staffing Level

CEO: Chief Executive Officer

CFO: Chief Financial Officer

COO: Chief Operating Officer

CP: Corporate Plan

COAG: Council of Australian Governments

DCB: Departmental Capital Budget

ESD: ecologically sustainable development

FOI: Freedom of Information

FPTAG: Fifth Plan Technical Advisory Group

FRR: Financial Reporting Rule

GST: Goods and Services Tax

IPS: Information Publication Scheme

KPI: Key Performance Indicator

MHISSC: Mental Health information Strategy Standing Committee

MHWA: Mentally Healthy Workplace Alliance (the Alliance)

NDIS: National Disability Insurance Scheme

NFRC: National Federation Reform Council

NHMRC: National Health and Medical Research Council

NMHC: National Mental Health Commission

NMHCCF: National Mental Health Consumer and Carer Forum

NMHR: National Mental Health Research Strategy

NMHSPF: National Mental Health Services Planning Framework

NWI: National Workplace Initiative

OPA: Official Public Account

PBS: Portfolio Budget Statements

PGPA Act: *Public Governance, Performance and Accountability Act 2013* (Cth)

PHN: Primary Health Network

PREMISE: Prevention and Early Intervention in Mental Illness and Substance Use

PRIDoC: Pacific Region Indigenous Doctors' Congress

SQPSC: Safety and Quality Partnership Standing Committee

WAAMH: Western Australian Association for Mental Health

List of Requirements			
PGPA Rule Reference	Part of Report	Description	Requirement
17AD(g)	Letter of transmittal		
17AI	Pg. 5	A copy of the letter of transmittal signed and dated by accountable authority on date final text approved, with statement that the report has been prepared in accordance with section 46 of the Act and any enabling legislation that specifies additional requirements in relation to the annual report.	Mandatory
17AD(h)	Aids to access		
17AJ(a)	Pg. 4	Table of contents.	Mandatory
17AJ(b)	Pg. 85	Alphabetical index.	Mandatory
17AJ(c)	Pg. 86	Glossary of abbreviations and acronyms.	Mandatory
17AJ(d)	Pg. 89	List of requirements.	Mandatory
17AJ(e)	Pg. 2	Details of contact officer.	Mandatory
17AJ(f)	Pg. 2	Entity's website address.	Mandatory
17AJ(g)	Pg. 2	Electronic address of report.	Mandatory
17AD(a)	Review by accountable authority		
17AD(a)	Pg. 6	A review by the accountable authority of the entity.	Mandatory
17AD(b)	Overview of the entity		
17AE(1)(a)(i)	Pg. 9	A description of the role and functions of the entity.	Mandatory
17AE(1)(a)(ii)	Pg.11	A description of the organisational structure of the entity.	Mandatory
17AE(1)(a)(iii)	Pg. 9	A description of the outcomes and programmes administered by the entity.	Mandatory
17AE(1)(a)(iv)	Pg. 9	A description of the purposes of the entity as included in corporate plan.	Mandatory
17AE(1)(aa)(i)	Pg. 9	Name of the accountable authority or each member of the accountable authority	Mandatory
17AE(1)(aa)(ii)	Pg. 9	Position title of the accountable authority or each member of the accountable authority	Mandatory
17AE(1)(aa)(iii)	Pg. 38	Period as the accountable authority or member of the accountable authority within the reporting period	Mandatory

17AE(1)(b)	n/a	An outline of the structure of the portfolio of the entity.	Portfolio departments - mandatory
17AE(2)	n/a	Where the outcomes and programs administered by the entity differ from any Portfolio Budget Statement, Portfolio Additional Estimates Statement or other portfolio estimates statement that was prepared for the entity for the period, include details of variation and reasons for change.	If applicable, Mandatory
17ADI	Report on the Performance of the entity		
	<i>Annual performance Statements</i>		
17ADI(i); 16F	Pg. 17	Annual performance statement in accordance with paragraph 39(1)(b) of the Act and section 16F of the Rule.	Mandatory
17AD(c)(ii)	<i>Report on Financial Performance</i>		
17AF(1)(a)	Pg. 33	A discussion and analysis of the entity's financial performance.	Mandatory
17AF(1)(b)	Pg. 33	A table summarising the total resources and total payments of the entity.	Mandatory
17AF(2)	n/a	If there may be significant changes in the financial results during or after the previous or current reporting period, information on those changes, including: the cause of any operating loss of the entity; how the entity has responded to the loss and the actions that have been taken in relation to the loss; and any matter or circumstances that it can reasonably be anticipated will have a significant impact on the entity's future operation or financial results.	If applicable, Mandatory.
17AD(d)	Management and Accountability		
	<i>Corporate Governance</i>		
17AG(2)(a)	Pg. 36	Information on compliance with section 10 (fraud systems)	Mandatory
17AG(2)(b)(i)	Pg. 36	A certification by accountable authority that fraud risk assessments and fraud control plans have been prepared.	Mandatory
17AG(2)(b)(ii)	Pg. 36	A certification by accountable authority that appropriate mechanisms for preventing, detecting incidents of, investigating or otherwise dealing with, and recording or reporting fraud that meet the specific needs of the entity are in place.	Mandatory

17AG(2)(b)(iii)	Pg. 36	A certification by accountable authority that all reasonable measures have been taken to deal appropriately with fraud relating to the entity.	Mandatory
17AG(2)(c)	Pg. 35	An outline of structures and processes in place for the entity to implement principles and objectives of corporate governance.	Mandatory
17AG(2)(d) – (e)	n/a	A statement of significant issues reported to Minister under paragraph 19(1)(e) of the Act that relates to non-compliance with Finance law and action taken to remedy non-compliance.	If applicable, Mandatory
<i>Audit Committee</i>			
17AG(2A)(a)	Pg. 36	A direct electronic address of the charter determining the functions of the entity's audit committee.	Mandatory
17AG(2A)(b)	Pg. 43	The name of each member of the entity's audit committee.	Mandatory
17AG(2A)(c)	Pg. 43	The qualifications, knowledge, skills or experience of each member of the entity's audit committee.	Mandatory
17AG(2A)(d)	Pg. 43	Information about the attendance of each member of the entity's audit committee at committee meetings.	Mandatory
17AG(2A)(e)	Pg. 43	The remuneration of each member of the entity's audit committee.	Mandatory
<i>External Scrutiny</i>			
17AG(3)	Pg. 36	Information on the most significant developments in external scrutiny and the entity's response to the scrutiny.	Mandatory
17AG(3)(a)	Pg. 36	Information on judicial decisions and decisions of administrative tribunals and by the Australian Information Commissioner that may have a significant effect on the operations of the entity.	If applicable, Mandatory
17AG(3)(b)	Pg. 36	Information on any reports on operations of the entity by the Auditor-General (other than report under section 43 of the Act), a Parliamentary Committee, or the Commonwealth Ombudsman.	If applicable, Mandatory
17AG(3)(c)	Pg. 36	Information on any capability reviews on the entity that were released during the period.	If applicable, Mandatory

	Management of Human Resources		
17AG(4)(a)	Pg. 37	An assessment of the entity's effectiveness in managing and developing employees to achieve entity objectives.	Mandatory
17AG(4)(aa)	Pgs. 38-41	Statistics on the entity's employees on an ongoing and non-ongoing basis, including the following: (a) statistics on full-time employees; (b) statistics on part-time employees; (c) statistics on gender (d) statistics on staff location	Mandatory
17AG(4)(b)	Pgs. 38-41	Statistics on the entity's APS employees on an ongoing and non-ongoing basis; including the following: <ul style="list-style-type: none"> • Statistics on staffing classification level; • Statistics on full-time employees; • Statistics on part-time employees; • Statistics on gender; • Statistics on staff location; • Statistics on employees who identify as Indigenous. 	Mandatory
17AG(4)(c)	Pgs. 37-38	Information on any enterprise agreements, individual flexibility arrangements, Australian workplace agreements, common law contracts and determinations under subsection 24(1) of the <i>Public Service Act 1999</i> .	Mandatory
17AG(4)(c)(i)	Pgs. 37-38	Information on the number of SES and non-SES employees covered by agreements etc identified in paragraph 17AG(4)(c).	Mandatory
17AG(4)(c)(ii)	Pg. 41	The salary ranges available for APS employees by classification level.	Mandatory
17AG(4)(c)(iii)	Pg. 37	A description of non-salary benefits provided to employees.	Mandatory
17AG(4)(d)(i)	n/a	Information on the number of employees at each classification level who received performance pay.	If applicable, Mandatory
17AG(4)(d)(ii)	n/a	Information on aggregate amounts of performance pay at each classification level.	If applicable, Mandatory

17AG(4)(d)(iii)	n/a	Information on the average amount of performance payment, and range of such payments, at each classification level.	If applicable, Mandatory
17AG(4)(d)(iv)	n/a	Information on aggregate amount of performance payments.	If applicable, Mandatory
	Assets Management		
17AG(5)	n/a	An assessment of effectiveness of assets management where asset management is a significant part of the entity's activities	If applicable, mandatory
	Purchasing		
17AG(6)	Pg. 44	An assessment of entity performance against the <i>Commonwealth Procurement Rules</i> .	Mandatory
	Consultants		
17AG(7)(a)	Pg. 44	A summary statement detailing the number of new contracts engaging consultants entered into during the period; the total actual expenditure on all new consultancy contracts entered into during the period (inclusive of GST); the number of ongoing consultancy contracts that were entered into during a previous reporting period; and the total actual expenditure in the reporting year on the ongoing consultancy contracts (inclusive of GST).	Mandatory
17AG(7)(b)	Pg. 44	A statement that “ <i>During [reporting period], [specified number] new consultancy contracts were entered into involving total actual expenditure of \$[specified million]. In addition, [specified number] ongoing consultancy contracts were active during the period, involving total actual expenditure of \$[specified million]</i> ”.	Mandatory
17AG(7)(c)	Pg. 44	A summary of the policies and procedures for selecting and engaging consultants and the main categories of purposes for which consultants were selected and engaged.	Mandatory
17AG(7)(d)	Pg. 44	A statement that “ <i>Annual reports contain information about actual expenditure on contracts for consultancies. Information on the value of contracts and consultancies is available on the AusTender website.</i> ”	Mandatory

	Australian National Audit Office Access Clauses		
17AG(8)	Pg. 44	If an entity entered into a contract with a value of more than \$100 000 (inclusive of GST) and the contract did not provide the Auditor-General with access to the contractor's premises, the report must include the name of the contractor, purpose and value of the contract, and the reason why a clause allowing access was not included in the contract.	If applicable, Mandatory
	Exempt contracts		
17AG(9)	Pg. 44	If an entity entered into a contract or there is a standing offer with a value greater than \$10 000 (inclusive of GST) which has been exempted from being published in AusTender because it would disclose exempt matters under the FOI Act, the annual report must include a statement that the contract or standing offer has been exempted, and the value of the contract or standing offer, to the extent that doing so does not disclose the exempt matters.	If applicable, Mandatory
	Small business		
17AG(10)(a)	Pg. 44	A statement that "[Name of entity] supports small business participation in the Commonwealth Government procurement market. Small and Medium Enterprises (SME) and Small Enterprise participation statistics are available on the Department of Finance's website."	Mandatory
17AG(10)(b)	Pg. 44	An outline of the ways in which the procurement practices of the entity support small and medium enterprises.	Mandatory
17AG(10)(c)	n/a	If the entity is considered by the Department administered by the Finance Minister as material in nature—a statement that "[Name of entity] recognises the importance of ensuring that small businesses are paid on time. The results of the Survey of Australian Government Payments to Small Business are available on the Treasury's website."	If applicable, Mandatory
	Financial Statements		
17AD(e)	Pg. 49	Inclusion of the annual financial statements in accordance with subsection 43(4) of the Act.	Mandatory

	Executive Remuneration		
17AD(da)	Pg. 42	Information about executive remuneration in accordance with Subdivision C of Division 3A of Part 2-3 of the Rule.	Mandatory
17AD(f)	Other Mandatory Information		
17AH(1)(a)(i)	<i>n/a</i>	If the entity conducted advertising campaigns, a statement that <i>"During [reporting period], the [name of entity] conducted the following advertising campaigns: [name of advertising campaigns undertaken]. Further information on those advertising campaigns is available at [address of entity's website] and in the reports on Australian Government advertising prepared by the Department of Finance. Those reports are available on the Department of Finance's website."</i>	If applicable, Mandatory
17AH(1)(a)(ii)	Pg. 44	If the entity did not conduct advertising campaigns, a statement to that effect.	If applicable, Mandatory
17AH(1)(b)	Pg. 44	A statement that <i>"Information on grants awarded by [name of entity] during [reporting period] is available at [address of entity's website]."</i>	If applicable, Mandatory
17AH(1)(c)	Pg. 45	Outline of mechanisms of disability reporting, including reference to website for further information.	Mandatory
17AH(1)(d)	Pg. 45	Website reference to where the entity's Information Publication Scheme statement pursuant to Part II of FOI Act can be found.	Mandatory
17AH(1)(e)	<i>n/a</i>	Correction of material errors in previous annual report	If applicable, mandatory
17AH(2)	Pg. 45	Information required by other legislation	Mandatory