



One
DOOR
Mental Health

**ANNUAL
REPORT**
2021/2022



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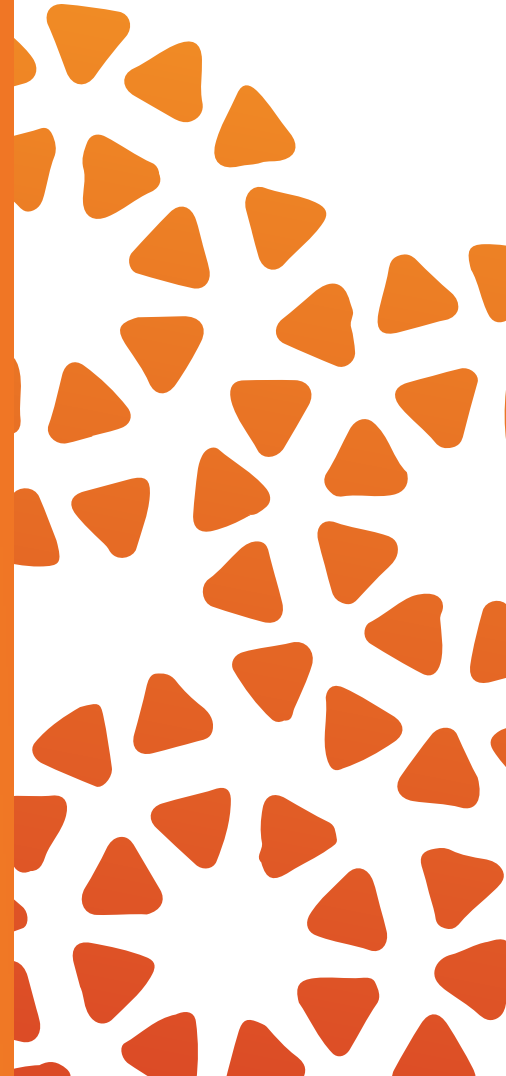
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CHAIR'S REPORT



When I wrote my report last year, we all hoped that we were returning to a time of greater normalcy. Alas, this has not occurred as we pushed through the last wave of COVID and the ceaseless rain, only to be jolted by the war in Ukraine. These shocks have all had their effect over the past year and we continue to adapt to the changes they have caused in our community. I can now see us returning to a time where we can proactively plan and achieve our important goals rather than only respond to the issues that have dominated the last few years.



The services that we provide are fundamental to our mission and reputation, so I would like to congratulate our team on getting through COVID lockdowns and continuing to deliver person-centred services, providing needed mental health support to people living with a mental illness and their carers.

An important part of One Door has always been the connection with our community of mental health consumers and carers, guiding us to provide services best suited to the needs of our community and advocate with confidence on behalf of the sector. This will be best achieved if people who are already carers or consumers feel confident and supported in One Door, so I was heartened during my site visits with the Board that our staff (80% of whom are consumers or carers themselves) feel that our organisation is not only one where their experience is acknowledged and safe to express, but one that can harness their knowledge.

A development over the past 2 years across much of One Door has been the implementation of self-organising

teams in the majority of programs.

Our purpose-driven “Recovery 2gether” approach has placed much of the responsibility for the best running of our teams in the hands of our employees, trained and encouraged by

senior staff. This change from the usual hierarchical structure of management has a number of advantages. It has encouraged the ingenuity of our workers when challenged by the full range of extraordinary circumstances of the last 2 years and it has placed responsibility for everyday functioning clearly with the team members, who have risen to the trust placed in them. It has also created a flatter, less managerial structure which has decreased costs. The Board has been pleased with the result of this adaptive reorganisation.

To support this, we must continue to be sustainable and continue to deliver on our purpose. To this end, our 2022-2024 Strategic Plan was endorsed in December 2021, with a clear intention to embed Recovery 2gether, increase our impact on the community, and strengthen and grow our organisation. The Board and I are excited to have the investment in lived experience leadership that will come through this Plan, and we look forward to seeing the impact a Lived Experience Lead role will have in the coming years.

A continued area of advocacy for One Door, along with our national partners in the Mental Illness Fellowship of Australia, has been the way many people with a severe mental illness have been neglected by the National Disability Insurance Scheme (NDIS). Although the NDIS can provide excellent support for those who gain a package and can utilise it, it has become the “oasis in the desert”, the one place of

respite for people with a disability, ignoring many others who are left outside. Alternative psychosocial support programs remain patchy and even they are under threat. We welcome the Government review of the NDIS. We hope that an understanding can be reached on the advantages of well-targeted (and much cheaper) funding for psychosocial services to support people with a mental illness in the community, intervening before people need to become dependent upon the NDIS. However, we all must remain vigilant about the implications of the review of the NDIS as the government moves into a phase of cost-cutting, rather than expanding services.

Finally, I would like to thank the many people at One Door who continue to make it such an excellent organisation. Kathi and the executive team have been working very hard to keep things going over the past year. Unfortunately, we needed to farewell Vivien Tait from her role as the Chief Operating Officer earlier in the year. Recently, we have been joined by Stephanie Smith as our new Chief Operating Officer and Frances Cracknell as our new People and Culture Lead. They are much-needed supports for Kathi, and for Patrick Kerlin, our Chief Financial Officer. I would also like to thank my fellow Board members who remain committed to our mission and supportive of my role as the Chair.

Professor Anthony Harris
Chair

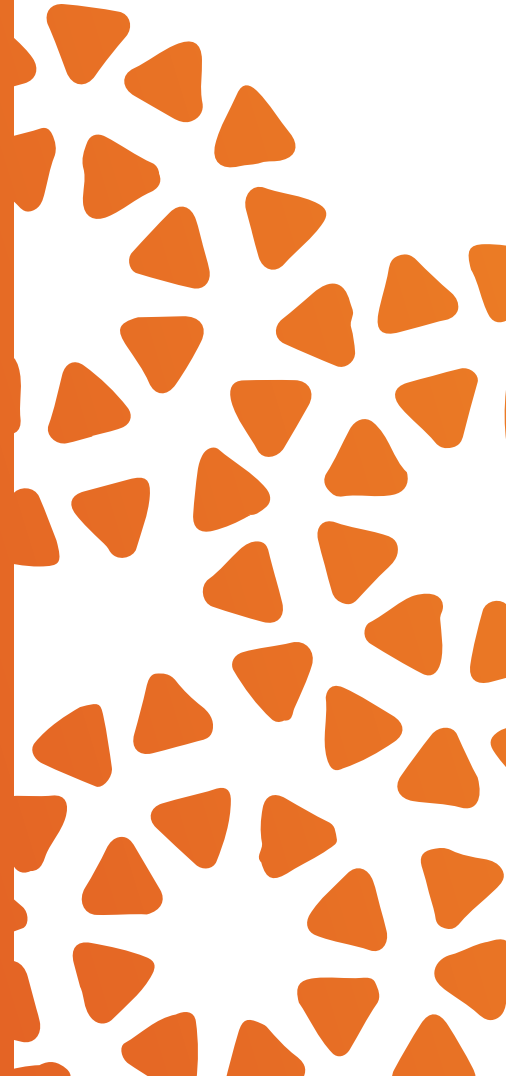




CEO'S REPORT



I love working for One Door Mental Health! Even though 2021-22 was a year that was shaped by the challenges of COVID-19 lockdowns and living with a virus that has impacted so many, I witnessed such courage, strength, vulnerability, and commitment from the people in our organisation. To all the staff of One Door - the impact we have made in the community has come through the values you have demonstrated each day in delivering person-shaped services. Thank you for doing what you do, and for walking with me to deliver on our purpose – creating a thriving organisation that makes a positive difference for the people we support!



During 2021/2022, One Door continued enhancing our services, including being commissioned in September 2021 to deliver three Head to Health 'Pop-Up Clinics' in Canterbury, Liverpool and Bankstown. Head to Health has been designed to provide mental health support to those in need during COVID-19 and beyond, where mental health trained professionals assist individuals in accessing appropriate care. These services have been well-accessed with over 750 people being supported through One Door's Head to Health since 2021. In addition to Head to Health, One Door increased our services through the Commonwealth Psychosocial Supports (CPS) in South Eastern NSW, South Western Sydney, and Western Sydney Primary Health Network regions. These programs provide time-limited recovery support for people living with severe mental health challenges to achieve their goals and improve wellbeing.

We have continued to embed our 'Recovery 2gether' ways of working in One Door. Over the past year we have explored and strengthened our approach to provide our staff on the ground with more autonomy and ability to make decisions. I have been encouraged to hear and see the impact that our way of working is having not only on the One Door team but to the

people we support. With the development of Recovery 2gether, the One Door Board, staff, and the people we support worked together to publish our next Strategic Plan which was released in December 2021. This Plan provides our direction for the next three years, with a real focus on lived experience, Recovery 2gether, and opportunities for the growth of One Door. We have been working our way through this Plan with one of the first investments being a new position in One Door – a Lived Experience Lead! This position will oversee the development of a lived experience voice in all One Door activities, including governance, operations, workforce, business development, recruitment, quality, and evaluation. I am excited to have on board this new position and look forward to the impact of this role for us at One Door.

In April 2021, One Door said goodbye to Vivien Tait, our Chief Operating Officer. Vivien brought to life Recovery 2gether and in partnership we co-created our new ways of working since 2019. I would like to thank her for the commitment, energy, and vision she had over the many years she worked with us. Vivien was able to step up into my shoes as CEO earlier this year, as I was able to partake in a three-month sabbatical through the Social Impact Leadership Australia (SILA) course. I am grateful to not only Vivien, but the Board and the One Door crew who supported me through the course. I was deeply challenged through the process and grew as a leader through

my learnings and experiences. The SILA alumni continue to provide a richness of support and enhancement to our organisation.

The impact of One Door this financial year has come through not only our services in the community, but also through the partnerships that we have developed across the sector. I would like to thank those organisations that support One Door in our advocacy for a reformed mental health system including my colleagues in the Australian Psychosocial Alliance, the Mental Illness Fellowship of Australia, and the Mental Health Coordinating Council. I am focused on making a difference in the community and working to create a space where people living with mental health concerns and their loved ones can come together with decision-makers in government, to tell the truth, think more deeply about what is really happening, and explore the options beyond what we see every day. Surely together we can see a world where all are treated as equals.

Kathi Boorman
CEO





CARER HIGHLIGHT



My name is Jerry and I'm a carer for my 15-year-old teenage daughter, J, who lives with complex mental health challenges.



Jerry

J was diagnosed with Autism at a young age and has needed support throughout most of her life.

Over the past three years, she developed high-level risk behaviours for her safety and that of others and required almost around the clock support with her mental health.

Recently, the complexity of J's multiple diagnoses meant we needed to navigate the challenging mental health system, the Department of Communities and Justice, and the NDIS to find suitable services to support her intensive care needs. But I'm glad to say we are finally on the right track.

As a father, one of the hardest parts of caring for J is feeling helpless and guilty. It was natural for me to want to 'fix' things, and it became increasingly frustrating when I couldn't.

I remember feeling exhausted at one hospital presentation due to J's suicidal behaviour. I felt the clinician was imposing their opinions on me and recall replying, "tell me something different that I haven't done to support her". My youngest child was in the emergency department in a mental health crisis and our family was desperate to help her - the last thing I needed at that moment was to feel discouraged, frustrated, and angry. I now look back on this stressful moment and ask myself, why did it cause me so much anger? Understandably, at the time we felt quite fragile because of all our focus on caring for J. Hindsight, however, is a wonderful thing. This situation caused a perspective change

in my life. It led me to learn more about myself, care for myself, and seek help for my own wellbeing.

I was referred to the Family and Carer Mental Health Program and put in touch with a One Door Carer Advocate. From the start, I felt comfortable opening up about what was happening with J, our family, and myself. I was grateful to have a safe space to talk without judgment. I realised how powerful education is, and I took every opportunity to learn more about mental health, self-care, communication, and boundaries. This shift in attitude strengthened my relationship with J, my wife, my other daughters, and the mental health professionals we would inevitably work alongside to support my daughter.

I realised that J's mental health challenges impacted more than just her. Therefore, connecting with One Door opened opportunities to seek additional support for our family. We started psychology sessions for our daughter, C, so she could also find help processing everything our family was going through. I even sought psychological support to help with my anxiety and depression.

Managing my own mental health was one of the biggest challenges I've faced as a carer. I put it off for a long time because I was prioritising J's needs, but I learned that I needed to be the best version of myself for my family.

Of all the things I've learned from being a carer the most impactful was to

understand the difference between responding to a situation rather than reacting to it. This new mindset slows down my train of thought when I'm faced with stressful situations and lightened my quick temper. I've learned to take time for myself, not to feel guilty, and to look for support regularly.

I used to practice mixed martial arts as an outlet for stress, but now I enjoy doing jigsaw puzzles as a new mindfulness practice. I confess this activity was out of the ordinary for me. However, I find it gives my mind a quiet break. I compare the caring role to a jigsaw puzzle: a box full of pieces but without a reference picture, knowing what I had to do but not being sure where to start. Connecting with One Door Mental Health, seeking help, and learning as much as I can made the picture much clearer. It gave me a sense of direction and understanding. If J was in the middle of the puzzle, I was part of the team placing pieces together from the outside in, strengthening the borders first. Every day is a different day. Some days you'll find the right spot for a few pieces, some you won't find any. However, it's perseverance that matters. For carers, the puzzle doesn't necessarily become easier to solve, but you develop skills to better cope as challenges appear.





Carer Supports

One Door Mental Health Carer Advocates reported a successful year whilst navigating the resurgence of COVID-19 cases and dealing with major floods in some of our regions. Over the 2021-2022 financial year, we provided supports to over 3,300 carers, including over 6,000 hours of individual support, and enjoyed strong referrals throughout the year across our five Local Health Districts in NSW.

For much of the year, our teams delivered information sessions, education programs, and support groups online. Our Family and Carer Mental Health Program (FCMHP) connected carers to a vast range of community programs and provided access to regular Assisting Families education, keeping carers up to date and building on their skills via Zoom. For some, this new way of connecting introduced challenges, particularly for people in rural areas with less digital infrastructure. However, it also

allowed new support groups to form across regions, overcoming barriers such as travel time that prevented people from meeting in person. Virtual groups and teleconferences allowed our Carer Advocates to maintain the highest level of support while adhering to restrictions and ensuring safety in our communities.

Face-to-face services resumed later in the year and saw our passionate workforce traveling great distances across the state to ensure families and carers received the support and respite they needed. With the end of the lockdown, our teams launched new group supports out in the community so that our carers could get outside, get active, and reconnect.

Another important element in the work of our FCMHP teams during the year was harnessing the power of our ongoing relationships with local partners.



In partnership with NSW Health, Carer Advocates in Southern NSW hosted information workshops with Indigenous carers and families to strengthen connections with First Nations people; sourced Carer Representatives for Eurobodalla's Mental Health, Alcohol and Other Drugs Committee; and showcased our program to clinical leads, nurses, and allied health practitioners in acute mental health services. In South Western Sydney (SWS), our team continued to work closely with the Local Health District to promote the FCMHP to mental health services, including at Bankstown Hospital and the Gna Ka Lun Adolescent Mental Health Unit at Campbelltown Hospital. Across the state, our teams continued to network with relevant community stakeholders and services, including Head to Health, R U OK?, Headspace, Way Back Service, and worked closely with ARAFMI Illawarra to further

increase carers' access to education and support.

Our ARAFMI Illawarra team worked on re-establishing regional services and partnerships. During the financial year, the program provided information sessions, counselling, support groups, and group education sessions to over 300 carers. They continued to partner with South Coast Private Hospital to deliver their Carer Program. A One Door Carer Advocate was also based at the hospital for one day per week and received positive feedback from the staff.

In between networking and providing education, advocacy, individual and group support, our teams found chances to celebrate and provide much-needed respite to our carers. Our annual Hunter New England (HNE) Carer and Clinician Conference went ahead in collaboration

with our partner HNE Health. The event provided carers and mental health clinicians with a safe environment to come together and learn about topics such as suicide prevention, community supports, managing challenging behaviours, and peer work. With restrictions easing, the popular 'Staying Connected When Emotions Run High' workshops finally returned and provided people with further understanding of the importance of healthy boundaries, positive communication, and self-care. Our Sydney and SWS teams hosted picnics, cruises, and other outings, and represented One Door at community events including International Women's Day in Picton, Harmony Day in Campbelltown, and NAIDOC Week. Finally, the Carers Week event in Bega brought the community together for a day packed with games, BBQ, competitions, and networking activities.



CONSUMER HIGHLIGHT



My name is Mfon and I'm from Nigeria, in West Africa. Before I came to Australia, I lived in England. I used to work in Aged Care, but now I work for a delivery business. I love helping people, so I also volunteer teaching digital skills to Seniors.



Mfon

health. You start withdrawing from people. You're depressed and lonely. It affects everything. You start thinking there's something wrong with you. About two years ago, a colleague was making racist remarks because of the colour of my skin. I reported it to my manager, but the person just said they'd been joking and the company didn't do anything about it. Sometimes I just ignore behaviour like this, but things accumulate, and it was eating me up. I got really down and I realised I needed help.

In African culture, you don't talk about mental health. If you have depression, people think there is something wrong with you, or you are possessed. They don't understand and there is a lot of stigma. It took some time for me to have the courage to talk about how I was feeling.

At first, I called the Employee Assistance Program at my work. But it was only three sessions and some of the counsellors weren't a good fit. They didn't want to listen to me. So, I didn't seek help again for a while. Then my wife recommended I try Head to Health as she had heard about it from a friend.

I procrastinated a bit but once I made the call it was an easy process to start getting the help I needed. I think that's important because when help is delayed it's easy to get discouraged and people can give up on trying to access services. You can get into a dark corner.

After some initial questions from the One Door Head to Health team, I was matched with a counsellor called Ben straight away. Ben comes from a culturally diverse background too, so I feel like he

understands what I'm going through, and I don't feel like I'm being judged. I come every two weeks and I've had eight sessions so far.

Ben's given me some good strategies. We spent time talking about my values, including my Christian values. That's really helped because sometimes when you're depressed or unwell, you don't see yourself as a good person even though that's not true.

We've also talked about self-care. I think we hear about self-care a lot, but sometimes we don't really know what it means, so Ben and I have been setting goals for ways I can help my mental health and wellbeing. As a result, I've been taking better care of myself and doing things I enjoy like walking, playing piano, and doing simple things like taking a warm shower to relax. I like to watch movies with my wife and spend time with my kids. I've been volunteering more and even found an opportunity to work as a movie extra. I like being productive and meeting new people, so these things have helped me to start feeling more like myself again.

Life is challenging but we are not alone. Mental illness is real and there are a lot of people going through it. We need to be able to talk about it more. I tell people there is no shame. Don't try to hide it because it's not going to help you in the long run. Whatever you are going through, you can seek help. There are support services everywhere. I recommend Head to Health because people can get the help they need to start their recovery quickly.

It's very challenging living in Australia and being from a culturally diverse background. I don't think that inclusivity is promoted enough here, compared to England. People treat you differently because of your skin colour. They look at you and they are already judging you. For me personally, I felt like I didn't belong, and I struggled to find my place. After facing racism and bullying in my workplace, I found myself in a spot where I questioned my own identity and I felt like I wasn't welcome here.

It's hard because my family is back in Nigeria. It's different if you have your siblings or your parents here. When you have problems or struggle you go to your family. You talk to your family, they welcome you, they give you food, and they make you feel comfortable. I don't have that family unity here. Trying to find that belonging and make friends here is difficult. Everyone is quite busy, and people don't have a lot of time for each other.

When people bully you or are racist towards you it really affects your mental





Community Supports

One Door's community-based psychosocial programs continued to play a critical role in addressing the gap in supports for people living with severe and complex mental health challenges who do not have NDIS packages. During the year, our teams across the state provided two-thirds of One Door's total supports, including 5,000 calls through our Telephone Outreach program.

Our Service Navigation team in Western Sydney demonstrated agility in supporting people to apply for NDIS, My Aged Care, and other services as a continuation of the previous Continuity of Support Program. The program ran for nine months and achieved an excellent 90% success rate with people who decided to re-test for NDIS eligibility.

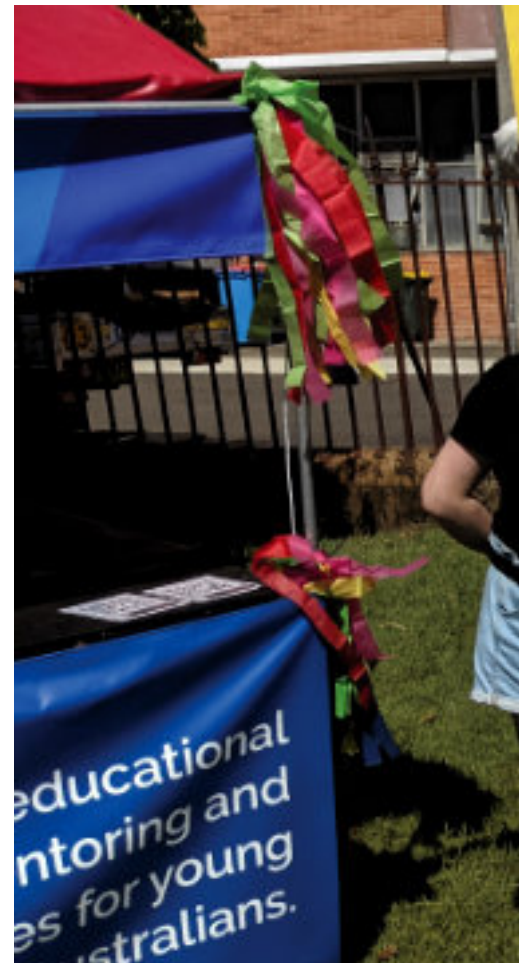
The Western Sydney Recovery College (WSRC) continued to deliver excellent education programs, address stigma, and share knowledge so that people are equipped with skills and capacity to experience recovery on their own terms. Our team of educators developed several new courses to meet community need, including courses on eating disorders, mindfulness, and more. The College welcomed several new educators thanks to engagement activities and the relationships developed with the community and past students. WRSC delivered training to a wide range of people over the year, including staff from the Department of Communities and Justice, the Pasifika community, TAFE students, the Arabic-speaking community, and beyond.

As a result, over 900 students attended our workshops and the College adapted admirably to switching between face-to-face and online classes as needed.

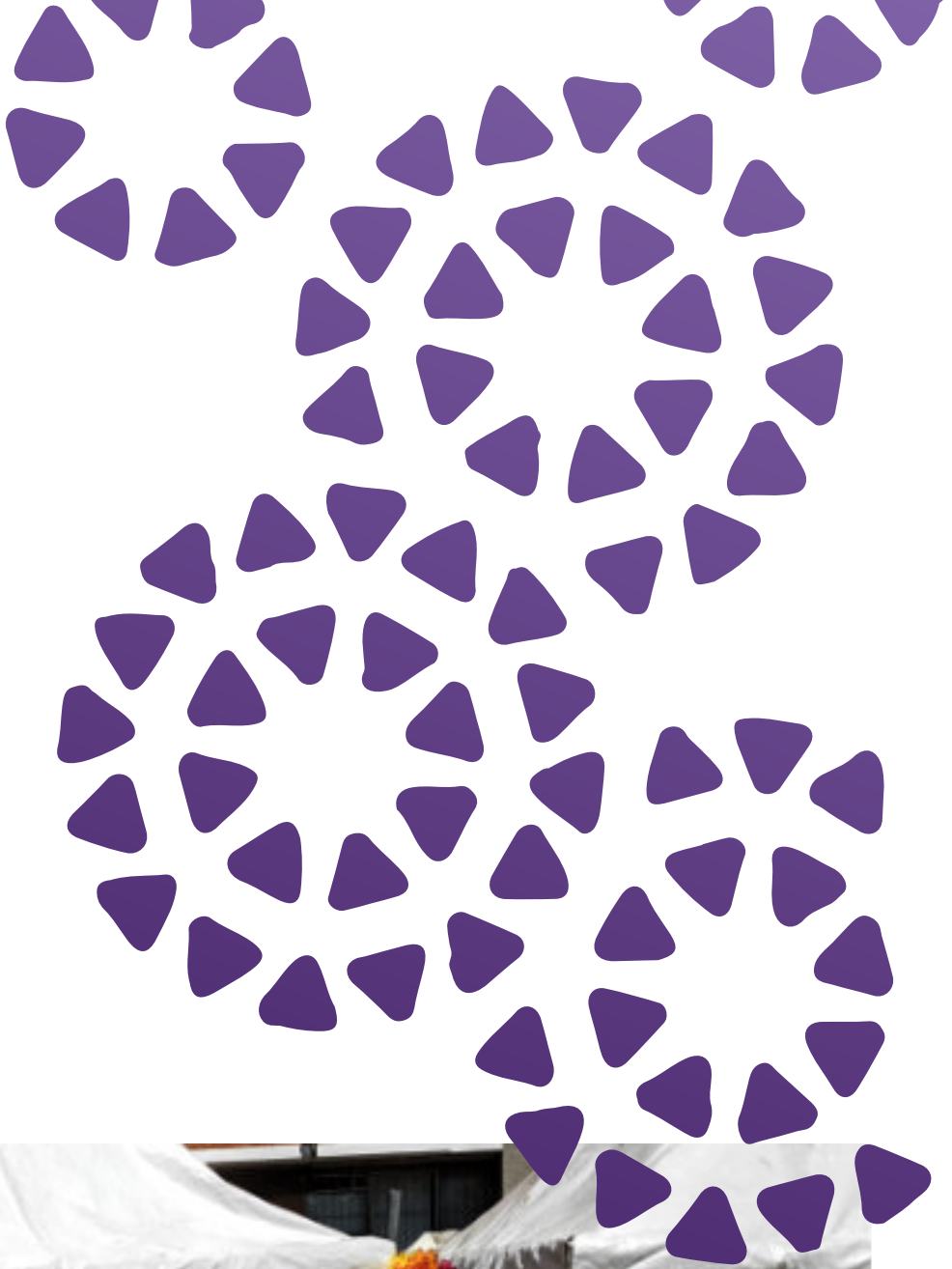
Our Bilingual Hospital 2 Home team supported the diverse needs of the Western Sydney community by providing equal access to services for people from different cultural and linguistic backgrounds, including Mandarin, Arabic, Farsi, Dari, and Urdu. Over 483 participants benefited from the program's mental health education and social group sessions, covering topics ranging from mental health for parents to an introduction to mental health for all age groups.

In November 2022, Pioneer Clubhouse successfully reopened its doors to members following the NSW lockdown. The team enjoyed welcoming the community back to the centre and working side-by-side with members in the business unit, kitchen, café, and garden. The café became the heart of the Clubhouse once again, providing fresh homemade food after a busy work-ordered day. Social events were a highlight for our members with the fortnightly Thursday evening 'Dinner and Music Jam', and monthly in-house social night to motivate people to get out and about. Our members have continued to learn new skills in the courses provided onsite by the Northern Beaches Community College and the Creative Hub, creating a vast selection of unique artworks from wooden chopping boards to acrylic paint-pouring designs.

Our 2022-2024 Strategic Plan prioritises building the strength of the organisation's community connections, including by building on the value of our Support Groups. One Door has provided a framework for Support Groups since 1986 and some of our groups have been running continuously since then. One Door currently coordinates 21 groups in the Support Groups program. Long-term data shows that the average attendance of groups across the program is 198 people monthly, equating to approximately 2,000 attendances per year. In the most recent survey of the existing One Door Support



Groups program, 100% of the participants reported being satisfied (31%) or very satisfied (69%). Over the years, the program has influenced a variety of community-based projects to be nurtured by our team. Our 'Strong and Social' Support Groups continued to engage paid Peer Workers to assist people maintain good mental health, stay connected, and overcome isolation in a peer-to-peer setting. The program provided Peer Leaders opportunities to build their skills and confidence in a low-impact, supported environment, with short hours.





Tayla

I have been with One Door Mental Health for almost two years as an Intensive Peer Worker for the You in Mind (YIM) Peer Support program, funded by the South Western Sydney Primary Health Network.

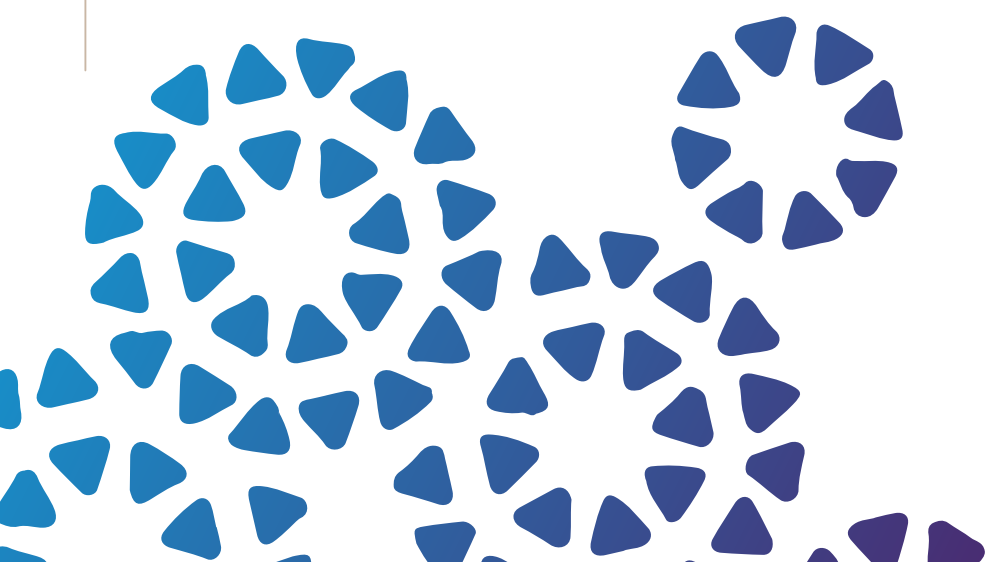
The program works together with YIM registered clinicians to provide psychological services for people who live with a diagnosed mild to moderate mental illness.

With the assistance of our supportive coach, our self-organised team of five Peer Workers collaborate with consumers and their psychologists in a goal-orientated approach. The YIM Peer Support Program was co-designed in consultation with disadvantaged and vulnerable consumers, carers, and other stakeholders from South Western Sydney.

As a Peer Worker, I am able to share my story and work with people at the start of their recovery journey. Through shared experiences, I can guide people across some of the hardest periods of their lives and hopefully instil hope in them. An experience that I will never forget.

At One Door, my own and my colleagues' lived and living experiences are valued and respected across the organisation. I understand the needs of the people I support and have lived them before. This transparency allows us to respond with an open mind and reinforce the message that "you're not alone". Such valuable skill helps me connect with people and build a positive foundation of hope, trust, and empowerment as we move forward together through their recovery journey. I use validation, reassurance, and safe storytelling so they can feel supported regardless of their mental health challenges.

Recovery is real. I know because I have lived it before. Peer work and sharing experiences are so important. They provide people with someone to help empower and assist them along their journey. They give hope that people can live the life they want to live and provide an additional pair of eyes to reassure them there is light at the end of the tunnel even when they cannot see it.



PEER WORKER HIGHLIGHT





Clinical Services

As we reflect on the year that has passed, it is evident that One Door clinical services have worked extremely hard to deliver the best services to our community. Clinicians, managers, and coaches across all our services have adapted rapidly to the restrictive environment due to COVID-19, which has seen people adjust more readily to telehealth.

Our You In Mind (YIM) program continues to thrive with a team that has an unwavering commitment to the people we support. The program focused on ensuring the safety and wellbeing of our clients throughout the everchanging landscape of therapeutic support. During the last financial year, YIM provided over 10,000 hours of support to clients in South Western Sydney (SWS), expanded to remote areas, and increased high-quality services to culturally and linguistically diverse communities.

Our YIM Peer Support Program worked together with registered clinicians to expand the program into all areas of the LGAs. The team attended community events and showcased the program to numerous stakeholders across SWS throughout the year. As a highlight, One Door Peer Workers participated in a co-design pilot for a self-management tool with Dr Alyssa Milton from the Faculty of Medicine and Health at the University of Sydney School of Medicine. The new program aims to assist mental health workers to help

someone during a crisis and to prevent hospital readmission. With trials scheduled for mid-2023, our team looks forward to testing the new tool with their peers in-market.

In November 2021, around 150 people attended two launch events of the Bankstown, Liverpool, and Canterbury Head to Health (HtH) pop-ups in support of the communities hit hardest by the COVID-19 pandemic in NSW. Federal MP for Banks and Assistant Minister to the Prime Minister for Mental Health and Suicide Prevention, David Coleman, provided a recorded message to open the launch. The clinics opened in September and are leading the state in the number of consumers accessing support. HtH provides short-to-medium term support for people experiencing moderate-to-high levels of mental health distress.

At the end of the first quarter, the program engaged a Community Engagement and Promotions Coordinator to improve awareness and boost recognition among locals and various stakeholders. The new team member achieved excellent results by partnering with multiple educational institutions and employment services, promoted the clinics on local radio stations, and hosted community stalls at Bankstown, Warwick Farm, Liverpool, and Fairfield. One Door welcomes additional Commonwealth funding to develop the HtH network in NSW and program expansion into new Centres and Satellite Services in the near future.

During the financial year, our Primary Integrated Care Supports (PICS) team supported over 850 people living with severe and persistent mental health concerns. Our team celebrated five years delivering services to the Central and Eastern Sydney Primary Health Network with over 3,300 people supported. During this time, our experienced team of credentialed mental health nurses and peer workers have made a tremendous impact on people's recovery. K10 scores demonstrated most people reporting lower distress, and RAS-DS scores showed improvements in all domains. The 'Your Experience of Service' survey continued to demonstrate people value their experience with PICS, with 87% respondents rating the service as excellent or very good.

Despite challenges presented by geographical lockdowns and restrictions, our headspace Campbelltown centre managed to support 1,000 young people over the course of the year. In addition to clinical support, our team successfully ran a number of programs and initiatives in support of the local community. Activities included 'Stuck in the Middle', a 6-session therapeutic group of culturally diverse young women dealing with mental health challenges; 'Youth Reference Group Exchange', a networking experience with other centre advocates to share experiences and tips on dealing with very strict lockdown restrictions; and 'Young People & Vaccines', an advocacy program that developed resources encouraging young people to get vaccinated.





NDIS Supports

The beginning of the 2021-2022 financial year was a challenging time for all our teams and services with NSW enduring almost four months of COVID-19 lockdowns. During the year, our NDIS teams registered 54,061 service occasions with the help of virtual groups and phone outreach, over a third of the total support provided by One Door Mental Health.

In November 2021, we welcomed our first resident into our North Nowra Supported Independent Living (SIL) home. Our SIL team benefited from our Recovery 2gether framework to hold multiple strategic meetings and make decisions at a local level. As a self-organised team, they effectively worked together to determine the most appropriate and efficient model to support future residents. One Door is looking forward to expanding our NDIS housing options for people living with psychosocial disability.

Through pandemic, floods, and fires, our dedicated team of Support Coordinators and Recovery Coaches prioritised the safety and wellbeing of our participants while working tirelessly to support recovery and independence. Our highly skilled team worked alongside participants to encourage, educate, develop goal-orientated plans, and tailor services that matched unique individual needs.

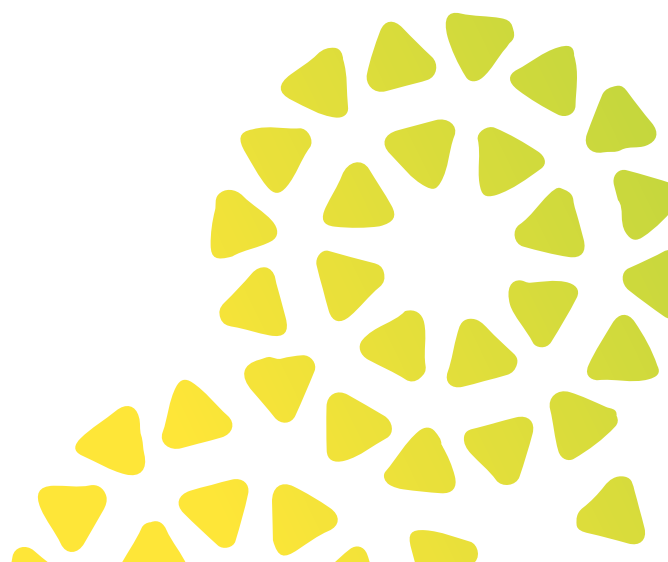
Support Coordinators and Recovery Coaches understand that finding the right services and the right people is an integral part of a person's journey. During the year the team helped the people we support to focus on what matters the most to them and reduce the challenges of navigating the NDIS.

Our centre-based programs continue to be at the core of our services, offering specialised psychosocial support to people with an NDIS package. Our

members and teams co-design one-on-one and recovery-oriented group programs that are tailored to supporting their recovery journey.

During the lockdowns, our centre teams managed to maintain engagement and provide much-needed support for members across NSW via the provision of virtual groups and phone outreach.

Centres welcomed the ease of restrictions and were quick to reintroduce capacity-building initiatives that promote members' physical, social, and emotional wellbeing. After prolonged lockdowns, it was vital for One Door to continue to support people in building social skills. Participants enjoyed a myriad of activities including fitness sessions, skills training, and work placements.







ENHANCING OUR COMMUNITY

One Door has participated in significant advocacy initiatives this year in support of people with lived experience of mental health concerns.

This included developing a new Strategic Plan for 2022-2024, building on the strengths of the previous 3-year plan. The new Plan sets out our six Strategic Priorities, focusing on the people we support, our community, and our team. It will help us to focus our energy and resources, create momentum, and allow us to be resilient and remain flexible as an organisation. Most importantly, it brings us back to our purpose – guiding our decision-making to create a thriving organisation that makes a positive difference for the people we support and helps in achieving our mission of a world in which people living with mental illness are valued and treated as equals.

One Door also plays an active role in the National Psychosocial Support Advocacy Alliance. The Alliance brings together lived experienced leaders and leading mental health organisations and calls on all Australian Governments – Commonwealth,



State/Territory, and Local – to commit to a National Psychosocial Support Program to support all Australians living with severe and complex mental health conditions outside of the NDIS. As a national program that sits alongside the NDIS, a National Psychosocial Support Program would deliver recovery-oriented, person-led, and personalised support to some of our most marginalised and vulnerable Australians, enhancing quality of life and mental health recovery.

Our ninth annual Wellness Walk went ahead virtually during the week following World Mental Health Day on 10 October to raise awareness, eliminate stigma, and provide much-needed funds for essential mental health services. Due to extended lockdowns, the virtual walk provided a unique opportunity for community members from as far afield as Tamworth, Wollongong, and Tasmania to unite in their support for people living with mental illness in a COVID-safe way.

One Door also held its annual symposium for Schizophrenia Awareness Week. During the week, we discussed topics such as

therapeutic supports, ensuring quality and safeguards for psychosocial services, research, and peer leadership at sessions at the Liverpool Catholic Club on Monday 23 May, and The Parliament of NSW on Wednesday 25 May. Following the previous year's feedback, a camera crew joined us in each session to film and live stream the event on our Facebook page – making the presentations instantly accessible across the country.

In 2022, One Door continued its commitment to provide culturally-aware services for First Nations communities. Our next Reconciliation Action Plan (RAP) is still in development; however, we are continuing to work on the actions from our previous RAP which was endorsed by Reconciliation Australia (RA). This year we participated in the National RAP Workplace Barometer survey being conducted by RA which measures perceptions and attitudes to reconciliation in organisations with a RAP. The results will help us measure our impact and identify how we can improve our services to support and build on the social and emotional wellbeing of

Aboriginal and Torres Strait Islander people.

One Door has supported the development of the Finding North Network. This is a new free, online platform connecting people with first-hand experiences of mental health challenges and helping strengthen their voice in the mental health sector. The Finding North Network is hosted by the Mental Illness Fellowship of Australia (MIFA) – a national policy and advocacy organisation which supports more than 20,000 people through its member organisations, including One Door.

One Door is a proud partner of organisations that are adding to the advocacy voice for people living with mental health concerns and their families and carers, and we acknowledge the work of MIFA, the Australian Psychosocial Alliance, the Mental Health Coordinating Council and Mental Health Australia. We will continue to advocate for a more integrated and funded community mental health sector.





ACKNOWLEDGEMENTS

One Door would like to thank the following partners for their continued support and for adding to the voice of people with mental illness and their families through individual and systemic advocacy and research.

- Our Patron, Her Excellency Mrs. Linda Hurley
- The Governor-General of the Commonwealth of Australia, His Excellency General the Honourable David John Hurley AC DSC (Retd)
- The Governor of New South Wales, Her Excellency the Honourable Margaret Beazley AC KC

• **Mental Illness Fellowship of Australia (MIFA) and fellow members including**

- Skylight Mental Health
- Mental Illness Fellowship of Western Australia
- Mental Health Foundation ACT
- MIFA Northern Territory
- Selectability

• **Australian Psychosocial Alliance including (APA)**

- Mind Australia
- Stride Mental Health
- Neami National
- Flourish Australia
- Wellways
- Open Minds

- KidsXpress
- Mental Health Coordinating Council
- Community Links
- BlueScale IT
- Salesforce
- Headspace National
- Relationships Australia
- Ramsay Health Care
- Open Dialogue Centre Australia
- Community Circles Australia

OUR FUNDERS:

- NSW Ministry of Health
- Northern Sydney Local Health District
- Illawarra Shoalhaven Local Health District
- South Western Sydney Primary Health Network
- Central Eastern Sydney Primary Health Network
- Western Sydney Primary Health Network
- Southern Eastern NSW Primary Health Network
- Department of Health



SCHIZOPHRENIA FELLOWSHIP OF NSW LTD

Financial Report for the year ended 30 June 2022
ABN 58 903 786 913

SCHIZOPHRENIA FELLOWSHIP OF NEW SOUTH WALES LTD
ABN 58 903 786 913

DIRECTORS' REPORT

Your directors present this report on the company for the financial year ended 30th June 2022.

Company

Schizophrenia Fellowship of New South Wales Ltd is a company limited by guarantee, incorporated under the *Corporations Act 2001*, and registered as a charity with the *Australian Charities and Not-for-Profits Commission (ACNC)*. The company was incorporated on the 8th February 2017 and changed status from an incorporated association to a company limited by guarantee.

Directors

The names of each person who has been a director during the year and to the date of this report are:

Anthony Harris
Robert Goldie
Peter Ferguson
Sonja Schweizer
Jennifer Smith (resigned 3rd December 2021)
Bernadette Mullins
Annette Ruhotas Morgan
Angela Louise MacMillan
Auswell Chia

Principal Activities

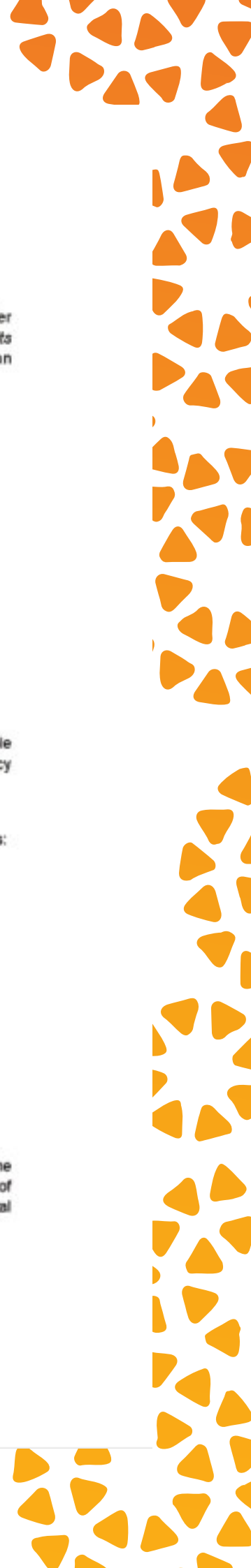
The principal activity of the company during the financial year was to provide care and services for people living with mental illness and their families through the provision of innovative services and advocacy support.

Meetings of Directors

During the financial year, 6 meetings of directors were held. Attendances by each director were as follows:

	Directors' Meetings	
	Number eligible to attend	Number attended
Anthony Harris	6	6
Robert Goldie	6	6
Peter Ferguson	6	5
Sonja Schweizer	6	6
Jennifer Smith	2	1
Bernadette Mullins	6	5
Annette Ruhotas Morgan	6	6
Angela Louise MacMillan	6	6
Auswell Chia	6	6

The company is incorporated under the *Corporations Act 2001* and is a company limited by guarantee. If the company is wound up, the constitution states that each member is required to contribute a maximum of \$1.00 each towards meeting any outstanding obligations of the company. At 30th June 2022, the total amount that members of the company are liable to contribute if the company is wound up is \$361.



DIRECTORS' REPORT

Auditor's Independence Declaration

The lead auditor's independence declaration for the year ended 30th June 2022 has been received and can be found on page 27 of the financial report.

This directors' report is signed in accordance with a resolution of the Board of Directors.



Anthony Harris
Chairman 18th November
Dated this the ____ day of _____ 2022.



Annette Ruhotas (Nov 18, 2022 14:36 GMT+11)

Annette Ruhotas Morgan
Director 18th November
Dated this the ____ day of _____ 2022.

27 Fennell Street
Parramatta NSW 2150





SCHIZOPHRENIA FELLOWSHIP OF NEW SOUTH WALES LTD
ABN 58 903 786 913

STATEMENT OF COMPREHENSIVE INCOME FOR THE YEAR ENDED 30 JUNE 2022

	2022	2021
	\$	\$
Revenue	28,639,743	25,880,654
Employee benefit expenses	(20,022,013)	(18,517,553)
Depreciation, amortisation & impairment expenses	(195,254)	(205,772)
Operating lease expenses	(965,719)	(829,293)
Publication costs	(4,570)	—
Seminars, training and development	(119,691)	(131,916)
Other expenses from ordinary operations	(6,943,531)	(6,132,314)
Income tax expense	—	—
Profit/(loss) after income tax	<u>388,965</u>	<u>63,806</u>

The accompanying notes form part of these financial statements.



SCHIZOPHRENIA FELLOWSHIP OF NEW SOUTH WALES LTD
ABN 58 903 786 913
STATEMENT OF FINANCIAL POSITION FOR THE YEAR ENDED 30 JUNE 2022

	Note	2022 \$	2021 \$
CURRENT ASSETS			
Cash and cash equivalents	3a	4,584,933	4,278,262
Cash assets under management	3b	3,225,864	3,497,745
Trade and other receivables	4	5,176,472	2,802,220
Other current assets	5	506,666	505,750
Right of Use Assets	12	799,045	659,572
TOTAL CURRENT ASSETS		14,292,980	11,743,549
NON-CURRENT ASSETS			
Property, plant & equipment	6	379,424	343,375
Right of Use Assets	12	1,089,826	855,653
TOTAL NON-CURRENT ASSETS		1,469,250	1,199,028
TOTAL ASSETS		15,762,230	12,942,577
CURRENT LIABILITIES			
Payables and Provision	7	4,074,068	2,444,426
Amount owing to Research Trust Fund		740,234	703,084
Amount owing to Sunflower Foundation Trust		734,479	588,936
Amount owing to other trust funds		40,027	185,925
Employee benefit provisions	8	1,595,361	1,404,712
Unspent grant funds & other funds	9	2,416,110	2,327,866
Lease Obligations	12	799,045	659,572
TOTAL CURRENT LIABILITIES		10,399,324	8,314,521
NON-CURRENT LIABILITIES			
Employee benefit provisions	8	231,275	119,563
Lease Obligations	12	1,089,826	855,653
TOTAL NON-CURRENT LIABILITIES		1,321,101	975,216
TOTAL LIABILITIES		11,720,425	9,289,737
NET ASSETS		4,041,805	3,652,840
EQUITY			
Retained earnings and reserves	10	4,041,805	3,652,840
TOTAL EQUITY		4,041,805	3,652,840

The accompanying notes form part of these financial statements.





SCHIZOPHRENIA FELLOWSHIP OF NEW SOUTH WALES LTD
ABN 58 903 786 913

STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDED 30 JUNE 2022

	Retained Earnings	General Reserves	Total
	\$	\$	\$
Balance at 30th June 2020	2,774,630	814,404	3,589,034
Profit for the year	63,806	—	63,806
Balance at 30th June 2021	<u>2,838,436</u>	<u>814,404</u>	<u>3,652,840</u>
Profit for the year	388,965	—	388,965
Balance at 30th June 2022	<u>3,227,401</u>	<u>814,404</u>	<u>4,041,805</u>

The accompanying notes form part of these financial statements.

SCHIZOPHRENIA FELLOWSHIP OF NEW SOUTH WALES LTD
ABN 58 903 786 913

STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30 JUNE 2022

	Notes	2022	2021
		\$	\$
CASH FLOWS FROM OPERATING ACTIVITIES			
Payments			
Suppliers and employees		(24,132,154)	(21,408,682)
Receipts			
Memberships		315	360
Donations		58,914	99,938
Bequeaths		92,606	—
Sponsorship		55,000	70,636
Grant recovery activities and other income		177,415	122,427
Receipts from appropriation/grants: -			
- Recurrent (government)		20,399,092	16,320,191
- National Disability Insurance Scheme		4,544,286	4,346,998
Net cash provided by/(used) in operating activities	11	<u>1,195,474</u>	<u>(448,132)</u>
CASH FLOWS FROM INVESTING ACTIVITIES			
Transfer - cash assets under management (net)		271,881	(171,495)
Purchase of property, plant and equipment		(260,416)	(184,076)
Disposal of operating assets		28,666	1,012
Advances from related parties		36,795	37,142
Net cash provided by/(used) in investing activities		<u>76,916</u>	<u>(317,417)</u>
CASH FLOWS FROM FINANCING ACTIVITIES			
Operating Lease Payments		(965,719)	(829,293)
Net cash (used) in financing activities		<u>(965,719)</u>	<u>(829,293)</u>
Net increase/(decrease) in cash held		306,671	(1,594,842)
Cash and cash equivalents at beginning of financial year		4,278,262	5,873,104
Cash and cash equivalents at end of financial year	3a	<u>4,584,933</u>	<u>4,278,262</u>

The accompanying notes form part of these financial statements.





SCHIZOPHRENIA FELLOWSHIP OF NEW SOUTH WALES LTD
ABN 58 903 786 913

DIRECTORS' DECLARATION

In accordance with a resolution of the directors of Schizophrenia Fellowship of NSW Ltd, the directors declare that:

1. The financial statements and notes, as set out on pages 3 to 25, are in accordance with the *Corporations Act 2001* and:
 - a. comply with Australian Accounting Standards; and
 - b. give a true and fair view of the financial position of the company as at 30th June 2022 and of its performance for the year ended on that date.
2. In the directors' opinion there are reasonable grounds to believe that the company will be able to pay its debts as and when they become due and payable.

Anthony Harris
Chairman 18th November
Dated this the ____ day of _____ 2022.

Annette Ruhotas (Nov 18, 2022 14:36 GMT+11)

Annette Ruhotas Morgan
Director
Dated this the ____ day of _____ 2022.

27 Fennell Street
Parramatta NSW 2150



AUDITOR'S INDEPENDENCE DECLARATION
UNDER AUSTRALIAN CHARITIES AND NOT FOR PROFITS COMMISSION ACT 2012
SECTION 60-40 TO THE BOARD OF
SCHIZOPHRENIA FELLOWSHIP OF NEW SOUTH WALES LTD.

As lead auditor for the audit of Schizophrenia Fellowship of New South Wales Ltd (A.B.N. 58 903 786 913) for the year ended 30th June 2022, I declare that, to the best of my knowledge and belief, there have been:

- (a) no contraventions of the auditor independence requirements of the *Corporations Act 2001* in relation to the audit; and
- (b) no contraventions of any applicable code of professional conduct in relation to the audit.

This declaration is in respect of Schizophrenia Fellowship of New South Wales Ltd and any entities it controlled during the period.

MITCHELL & PARTNERS
Chartered Accountants

Glenn Merchant

Glenn Merchant CA
Partner

Sydney, NSW 18th November
Dated this the ____ day of _____ 2022.



INDEPENDENT AUDITOR'S REPORT
TO THE MEMBERS OF SCHIZOPHRENIA FELLOWSHIP OF NEW SOUTH
WALES LTD
A.B.N. 58 903 786 913

Report on the Financial Report

Opinion

We have audited the accompanying financial report, being a general purpose financial report, of Schizophrenia Fellowship of New South Wales Ltd, which comprises the statement of comprehensive income, statement of financial position as at 30th June 2022, statement of changes in equity, detailed income and expenditure statement, statement of cash flows for the year ended 30th June 2022, notes comprising a summary of significant policies and other explanatory information, and the directors declaration.

In our opinion, the financial report of Schizophrenia Fellowship of New South Wales Ltd has been prepared in accordance with Division 60 of the *Australian Charities and Not-for-Profits Commission Act 2012*, including:

- giving a true and fair view of the financial position of Schizophrenia Fellowship of New South Wales Ltd as at 30th June 2022, and of its financial performance for the year then ended, and
- complying with Australian Accounting Standards to the extent described in Note 1 and Division 60 of the *Australian Charities and Not-for-Profits Commission Regulation 2013*.

Basis for Opinion

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

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



Director's Responsibility for the Financial Report

The Directors are responsible for the preparation of the financial report that gives a true and fair view and have determined that the basis of preparation described in Note 1 to the financial statements is appropriate to meet the requirements of the *Australian Charities and Not-for-Profits Commission Act 2012* (ACNC Act) and is appropriate to meet the needs of the trustees. The directors' responsibility also includes designing, implementing and maintaining internal controls as they determine is necessary to enable the preparation of a financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

In preparing the financial report, the directors are responsible for assessing the company's ability to continue as a going concern, disclosing, as applicable, matters relating to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the company or to cease operations, or have no realistic alternative but to do so.

Auditor's Responsibilities for the Audit of the Financial Report

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

As part of an audit in accordance with the Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures in response to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than 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 directors.
- Conclude on the appropriateness of the director'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 we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the company entity to cease to continue as a going concern.



- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a matter that achieves fair presentation.

We communicate with the directors regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Name of Firm: MITCHELL & PARTNERS
Chartered Accountants

Glenn Merchant

Name of Partner: _____

Glenn Merchant CA

Address: Suite 3, Level 2, 66 Clarence Street, SYDNEY NSW 2000

Dated this the 18th day of November 2022.

SCHIZOPHRENIA FELLOWSHIP OF NEW SOUTH WALES LTD
ABN 58 903 786 913

COMPILATION REPORT TO MEMBERS OF SCHIZOPHRENIA FELLOWSHIP OF NEW SOUTH WALES LTD

We have compiled the accompanying general purpose financial statements of Schizophrenia Fellowship of NSW Ltd which comprise the attached income and expenditure statement for the year ended 30th June 2022. The specific purpose for which the general purpose financial statements have been prepared is to provide financial information to the Board of Directors.

The Responsibility of the Directors

The directors are solely responsible for the information contained in the general purpose financial statements and has determined that the basis of accounting adopted is appropriate to meet the needs of the directors for the purpose of complying with the company's constitution.

Our Responsibility

On the basis of information provided by the directors we have compiled the accompanying general purpose financial statements in accordance with the basis of accounting and APES 315: Compilation of Financial Information.

Our procedures use accounting expertise to collect, classify and summarise the financial information, which the directors provided, in compiling the financial statements. Our procedures do not include verification or validation procedures. No audit or review has been performed and accordingly no assurance is expressed.

The general purpose financial statements were compiled exclusively for the benefit of the directors. We do not accept responsibility to any other person for the contents of the general purpose financial statements.

VLL Partners

Chartered Accountants



Jan Lech (No. 28,292,203,040) (CA)

Jan Lech

Partner

Dated this the ____ day of _____ 2022.

Suite 1, Level 1
170 Pacific Highway
Greenwich NSW 2065





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SUPPORT HUB

27 Fennell St, Parramatta NSW 2150

1800 THE KEY (843 539)
onedoor.org.au



One Door Mental Health is supported by the Commonwealth Department of Social Services,
Commonwealth Department of Health and NSW Department of Health