

Lived Experience Australia Ltd

**ANNUAL
REPORT
- 2021 -**



Lived Experience
A U S T R A L I A

www.LivedExperienceAustralia.com.au

WE REPRESENT THE VOICES OF CONSUMERS AND CARERS

We transform mental health services
through lived experience advocacy.
We do this in four core areas of activities
- advocacy, research, training and collaboration



Lived Experience
AUSTRALIA

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FROM THE CHAIR & EXECUTIVE DIRECTOR



JANNE MCMAHON OAM

This last year has been a good year for Lived Experience Australia (LEA) despite the concerns and restrictions caused by COVID-19. The financial year to June 2021 has seen us expand activities and further our partnerships, as mental health has become a dominant focus for Australians coping with the pandemic. This has provided opportunities to think differently about how we go about our work, and I am proud of our achievements.

We have established four main arms to our operations. These are advocacy, capacity building training, lived experience research and collaboration. There has been significant uptake within these areas, and we are privileged to have the opportunity to support our community in this way. Our training program has expanded exponentially. We are thrilled with this and are now offering capacity building opportunities

to many people with lived experience across Australia. We also provide staff training to support those within the health system to understand the value and importance of partnering with consumers, families, and carers.

We are pleased to continue our partnership with the Royal Australian and New Zealand College of Psychiatry (RANZCP) in providing our Annual Award for Best Practice in Consumer and Carer Inclusion, to a Trainee. We congratulate Dr. Catherine Torning, the 2021 winner. This award is presented to clinicians who undertake LEA's online training modules focused on consumer and carer inclusion and submit a reflective piece about how the learnings from the modules have changed their clinical practice.

Our expertise and lived experience are highly sought after with approaches from governments, the Australian Commission on Safety and Quality in Health Care (ACSQHC), the National Disability Insurance Scheme (NDIS) and other organisations to provide lived experience representation into key policy and reform reviews. LEA has a representative panel of skilled lived experience representatives that we draw on to advocate for the issues and needs of people affected by mental ill health. This financial year has seen

thirty-five LEA representatives positioned on key decision-making committees and working groups. LEA has also provided twenty-five submissions to inform the mental health reform agenda, both at national and state levels.

We have welcomed the opportunity to partner with the ACSQHC and the NDIS in facilitating focus groups, providing lived experience perspectives into their work. These are new partnerships for LEA, and we are pleased to provide the opportunity for people with lived experience to have a direct line of communication to provide input in areas that are important to our community of consumers and carers.

Our Lived Experience Research Program has risen to new heights over the last twelve months. Two landmark research projects have been undertaken, the 'Missing Middle' Reports being by far our largest, and most significant. There has previously been a lot of talk about the 'missing middle' and assumptions have been made about lived experiences, but what has been missing in these discussions is the voice of consumers and carers about their own experiences. The four reports that have come from this research project explore, from a lived experience perspective, why people do not engage in mental health services, why they disengage, what happens to them when they disengage, and what it would take for them to engage or re-engage with mental health services.

Another major research project was to discover people's experiences of telehealth services for support from psychiatrists. The findings from this research have informed the national discussion about telehealth, and again I am immensely proud that LEA has been able to support our lived experience community with this research and our influence on extending telehealth psychiatry services.

We are a fully lived experience organisation, with all staff and Directors having a lived experience as a consumer, carer, or both. One area that we have expanded on over the last year is our partnerships such as government organisations, universities, and mental health services.

We tirelessly advocate for the issues and needs of people with a lived experience. We provide direct lived experience perspectives of both consumers and carers to keep mental health on the agenda. We are responsive to the changes in reforms happening across Australia as the focus on the mental health and wellbeing of all Australians becomes a higher priority for Governments.

With only a small team of dedicated and skilled people, we make a significant impact in mental health advocacy. We have a Board and staff team who bring a wealth of knowledge and experience. These two groups together have a passion to provide a voice for the lived experience community, as both consumers and carers. Our goal is for lived experience to be central in transforming mental health services through reform processes, policy, service planning, delivery, and evaluation.

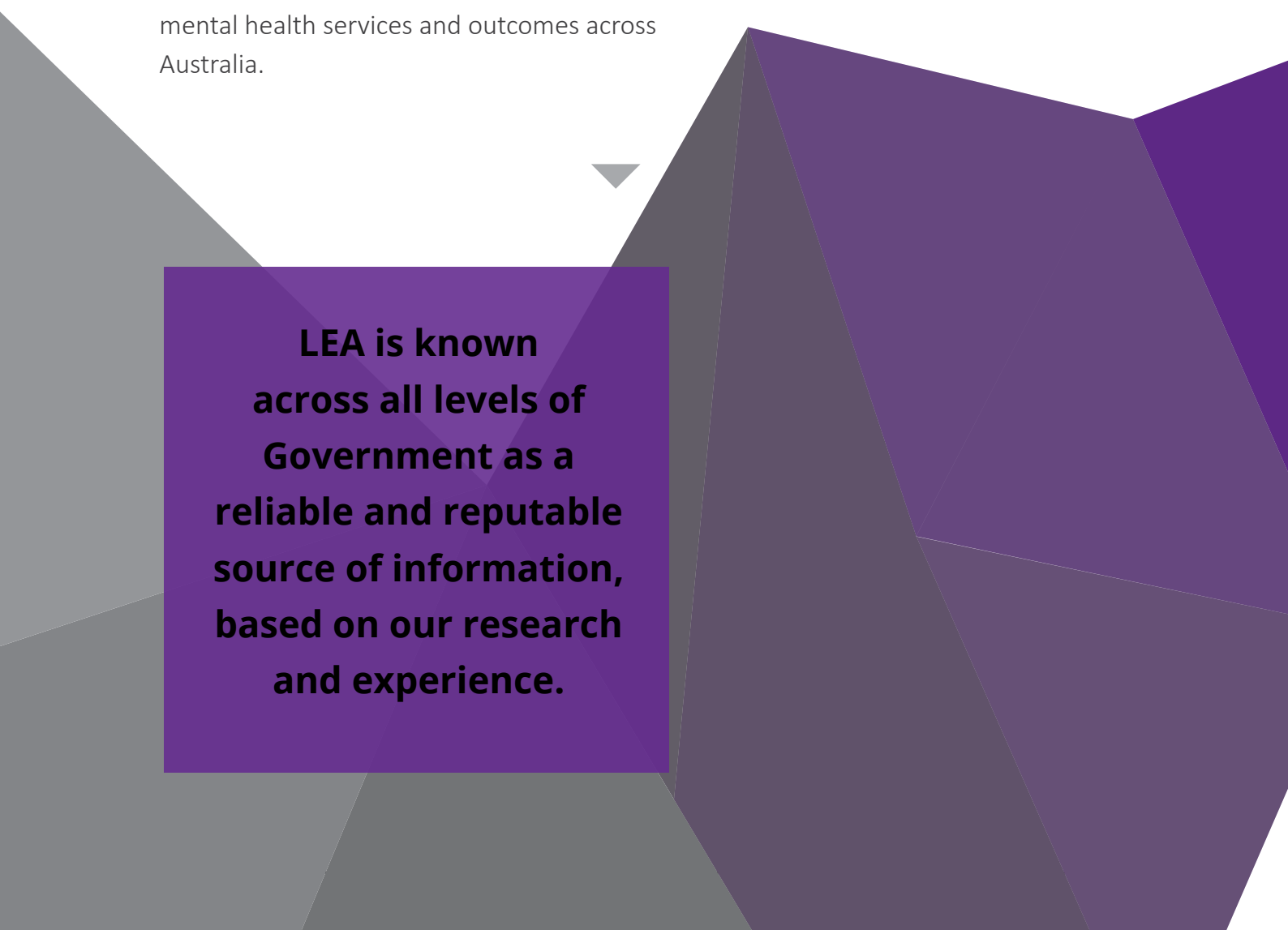
I want to thank our dedicated people for their strong support and acknowledge the huge effort and passion everyone has given over the past year. I want to thank everyone for having faith in me to drive Lived Experience Australia to where we are today.

Janne McMahon

Janne McMahon, OAM

ABOUT LIVED EXPERIENCE AUSTRALIA

As our name suggests, we are a national organisation dedicated to those with a lived experience of mental health concerns, either as consumers, carers, or family members primarily focussed on the private sector. We support and include this lived experience to positively influence mental health services and outcomes across Australia.



**LEA is known
across all levels of
Government as a
reliable and reputable
source of information,
based on our research
and experience.**



All of our Directors and Staff have a lived experience



The activities of Lived Experience Australia are largely facilitated through its Chair/Executive Director, the members of the Executive, Board Directors and our Advisory Forums in Queensland, New South Wales, Victoria, South Australia, Tasmania, the Australian Capital Territory, and most recently again in Western Australia.

These activities include (but are not limited to):

- systemic advocacy, providing support and information to governments at all levels to support policy change;
- encouraging organisations and mental health providers to include lived experience perspectives in design and delivery of services;
- developing staff training in engaging lived experience, so that this becomes commonplace in the workforce;
- supporting consumers and carers to develop their skills and confidence in advocacy; and
- conducting research to determine areas of need for systemic change.

Lived Experience Australia is known across all levels of Government as a reliable and reputable source of information, based on our research and experience. LEA regularly represents lived experience voices within the media, government inquiries, and provides input into policy development. Members of the Board of LEA and our staff regularly speak at conferences, highlighting and sharing lived experiences.

LEA is registered with the Australian Charities and Not-for-profits Commission (ACNC) and is registered as a Health Promotion Charity. We continue to operate with the financial support of government and other corporate and organisational donors.

Our Mission

Engage, empower, enable choice in mental health.

Our Vision

To promote effective consumer and carer advocacy as the driving force behind all changes in mental health services.

OUR FOCUS

ADVOCACY

We inform and enhance policy through national and state forums, committees, and groups by providing access to a pool of lived experience representatives.

RESEARCH

Our research is 100% lived experience led and reflects the voices of consumers, families and carers. It is translational in changing policy and practice.

TRAINING

All our training is developed and facilitated by consumers and carers with a lived experience. It supports capacity building of consumers, carers and clinicians at all levels.

COLLABORATION

We work with a wide network of partners including the Australian Government on national projects aimed at improving mental health services for all Australians.

OUR IMPACT

Our vision is to *engage, empower and enable choice in mental health care*. Here are some examples of our impact over the past 12 months.

ENGAGE

We engaged with and gave a voice to 535 consumers, family members and carers in our “Missing Middle Report”. This report was circulated widely to media, hospitals, government, and mental health practitioners. The report’s video promotion has been loaded 2,497 times on Vimeo alone, with the launch video being loaded an additional 306 times.

“These reports are significant. I will be taking these reports from Lived Experience Australia and including them with the suite of documents used to inform the reform agenda” - Christine Morgan, Prime Minister’s National Suicide Prevention Adviser and CEO of the National Mental Health Commission.

“This is the first time I have ever been asked why I stopped using a service and what it would take for me to come back to it” - Consumer feedback

EMPOWER

We empowered 24 consumers and carers who participated in our 6-month Communities of Practice Program (CoP) aimed at building the skills and capacity of lived experience advocates to extend and enhance their contributions to lived experience advocacy. We also empowered 12 consumers and carers to undertake Certificate IV in Mental Health Peer Work through the provision of sponsorships.

“It gave me a renewed sense of passion to keep up my role in advocating on a wider scale; within the community and systems to create larger and more sustained change” - CoP participant

“I picked up practical skills on becoming a better advocate” - CoP participant

“[I enjoyed] meeting other advocates and being able to reflect with them about issues and experiences” - CoP participant

ENABLE CHOICE

Through our Telehealth Research, we received input from 187 consumers and carers, about the value of telehealth psychiatry services. We submitted a report to the Department of Health which supported their decision to extend telehealth psychiatry services.

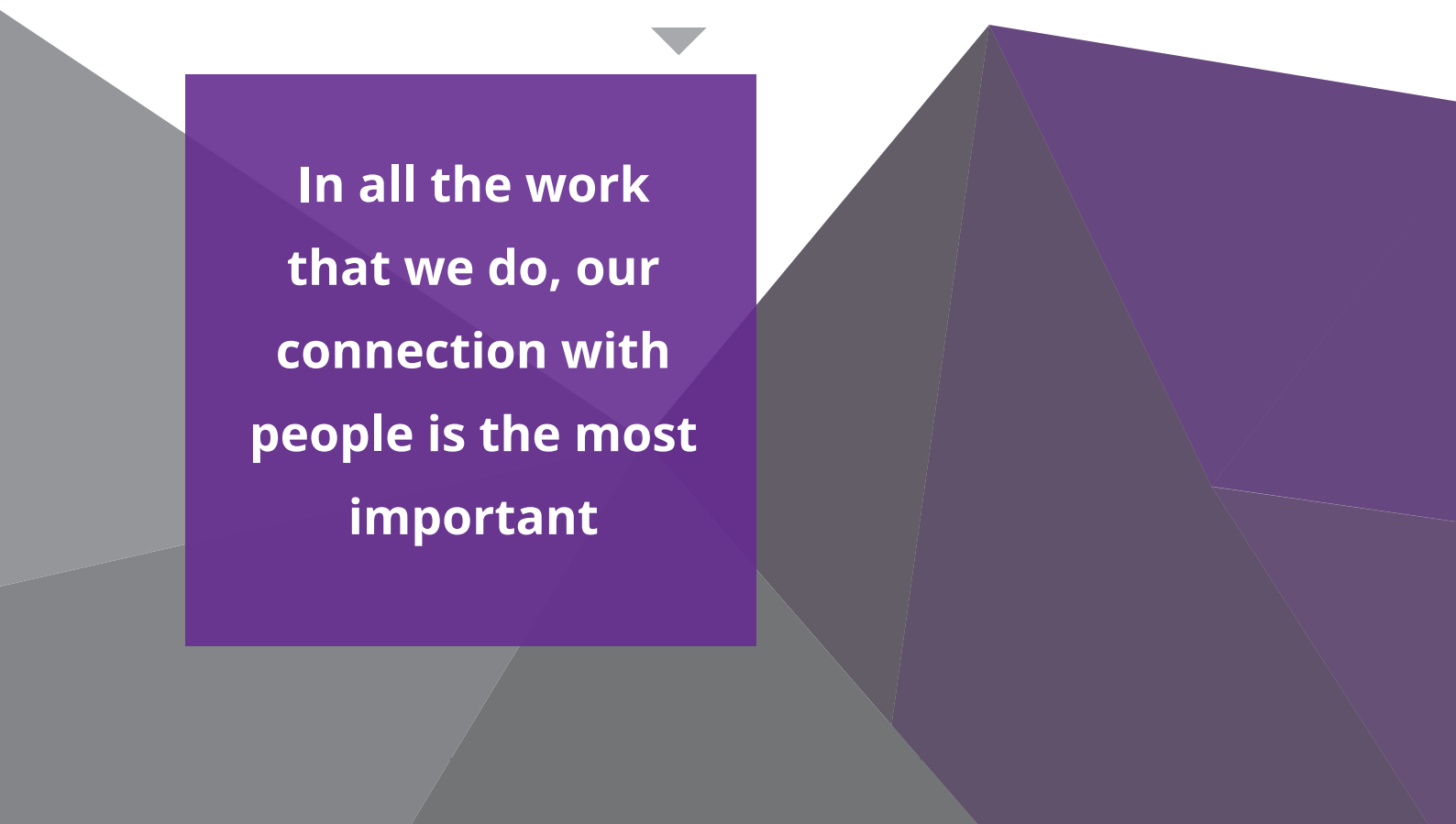
“Telehealth should remain as an option for people who can’t always physically get to the appointments due to the nature of their condition.”

“My psychiatrist is based in Sydney, and I am in a regional town where I have yet to find an appropriate psychiatrist. Without telehealth consultations, I wouldn’t be able to access psychiatric care.”

OUR OBJECTIVES

Lived Experience Australia has the following objectives:

- Equity and access to private clinical services for mental health consumers and carers;
- Responsive, accessible, and appropriate treatments for people experiencing mental illness;
- Adequate and appropriately trained health workforce;
- Improve the culture for those experiencing mental illness and promote choice;
- Improve the well-being of people impacted by mental illness: consumers, families and carers;
- Empower consumers and carers to utilize all means to maintain their mental health;
- Promote the value of consumer and carer engagement and influence within the community;
- Share knowledge and information to enhance recognition of rights and overcoming discrimination;
- Maximise lived experience participation in mental health policy, planning and decision making;
- Provide avenues for developing and representing unique consumer and or carer perspectives on mental health policy, planning and decision making; and
- To do all within our power to support the lived experience community.



**In all the work
that we do, our
connection with
people is the most
important**

OUR PARTNERSHIPS

We value the partnerships we have developed over the years. This year we have continued strategic and collaborative relationships with the following organisations:

1. PHN- Mental Health Lived Experience Engagement Network
2. Mental Health Carers Australia
3. HelpingMinds
4. Royal Australian and New Zealand College of Psychiatrists
5. Australian Psychological Society
6. Australian Private Hospitals Association Mental Health Committee
7. Australian Private Hospitals Association Data Reporting and Analysis Management Committee
8. Australian Commission on Safety and Quality in Health Care
9. Australian Government Department of Health
10. Australian Government, Department of Health, Private Health Industries Branch
11. National Mental Health Commission
12. National Disability Insurance Agency, Mental Health
13. Mental Illness Fellowship Australia
14. SA Mental Health Commissioners
15. QLD Mental Health Commission
16. Equally Well
17. Australian Digital Health Agency
18. National Mental Health Consumer and Carer Forum
19. Mental Health Coalition of SA
20. Mental Health Australia
21. Mitchell Institute, Victorian University
22. SANE Australia



LEA Executive Director Ms Janne McMahon (left) pictured with Senator the Hon Linda Reynolds CSC, Minister for the National Disability Insurance Scheme (NDIS)



1,643
SUBSCRIBERS



1,001
FOLLOWERS



1,048
DOWNLOADS



187
FOLLOWERS



75
FOLLOWERS




OUR CONNECTIONS

SOCIAL NETWORKS

In the 2020-2021 period, Lived Experience Australia commenced activity on three social platforms, Facebook, Twitter and LinkedIn.

Communications with these three social networks help us to engage with people on a more regular basis and provide time sensitive information

quickly. We use these networks to further distribute information about our own training and webinars, research, and advocacy, as well as sharing other resources we believe will support our followers or engage people with our lived experience community.

				
Commencement Date	1 November 2020	1 September 2020	1 March 2021	TOTALS
Followers – 30/06/21	1,001	187	75	1250
Posts	101	22	36	159
Reactions	814	107	32	953
Shares	170	13	16	199
Engagement	6,459	201	84	6,744
Link Clicks	574	131	17	722
Post Reach	20,307	Data unavailable	Data unavailable	20,307+
Impressions	35,135	2,695	5,621	43,451
Most active gender	Female	Data unavailable	Data unavailable	
Most active age group	45-54	Data unavailable	Data unavailable	

SUBSCRIBERS

Lived Experience Australia currently has an email database of 1643 contacts, of which 1270 identify as Consumers or Carers. The remainder are classified as ‘other’ which includes mental health professionals, staff, people with a general interest in mental health reform or those who have not classified themselves as consumers or carers.

Our eNews alerts and subscriber campaigns have an average open rate of 31.5%, with 5% clicking on links within the campaign sent. Our unsubscribe average is at 0.2%. This compares favourably with the averages across Australia. This tells us that the information we provide to our subscribers is

relevant and of interest (NB: The software LEA uses does not record Click to Open Rates as shown in the table below).

LEA’s email open rates also compare favourably against the worldwide industry average for non-profits (25.5%). We are pleased that we can reach our community in this way and strive to continually improve these results by reviewing our content and number of campaigns sent. We want to ensure that the useful and practical information we share reaches as many of our lived experience community as possible.



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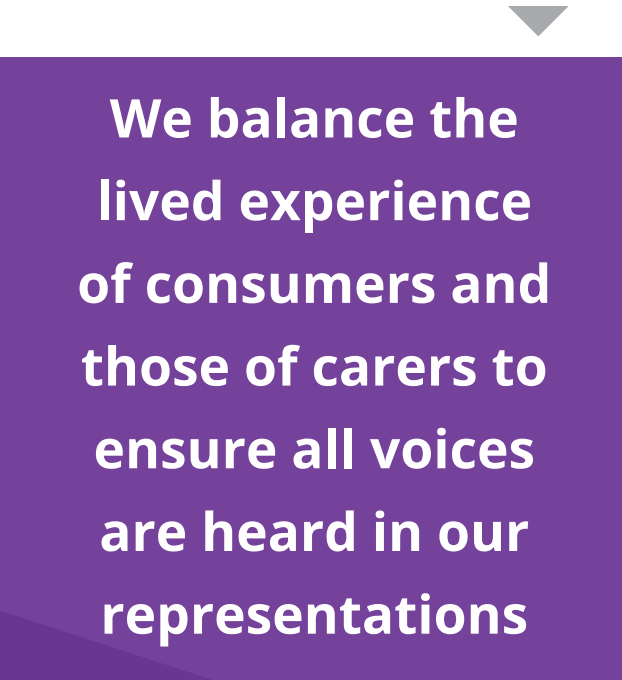
OUR ADVOCACY

Advocacy is important to us because it gives us a greater empathy and understanding of the needs of those we serve. We try to balance lived experience of consumers and those of carers to ensure all voices are heard in our representations.

Each Director has responsibility for holding Advisory Forums within their state. They facilitate forums that provide us with up to date, grass roots consumer and carer perspectives on issues of state and national significance. Directors also provide feedback and input on the current activities of LEA. While we meet many individuals, and hear and appreciate their unique experiences, the State Advisory Forums are designed to provide systemic rather than individual advocacy.

The State Advisory Forum objectives are as follows.

1. Identify issues of national significance for consumers and carers in various settings.
2. Provide feedback to State Directors on current activities and priorities.
3. Foster links with established consumer and carer groups in private hospitals.
4. Promote the interest and involvement of the State Advisory Forum.
5. At each Board Meeting, Directors report on the forums and discuss any issues arising from them.



**We balance the
lived experience
of consumers and
those of carers to
ensure all voices
are heard in our
representations**

REPRESENTATION

One of the main reasons we exist is to use our lived experience to transform mental health services. Representation at high level is a way that we achieve this, and we have been pleased to represent the lived experience community at thirty-five specific committees/working groups/workshops during 2021/22 including:

Department of Health

1. 5th National Mental Health and Suicide Prevention Plan MHERP
2. Primary Mental Health Care Data Reference Group
3. Primary Mental Health Care MDS Consent Workshop
4. Mental Health Technical Reference Group and consultation for the National Survey of Mental Health and Wellbeing
5. National Mental Health Policy Renewal Project Steering Group
6. Reducing stigma and discrimination Project
7. Psychiatry Liaison Implementation Group
8. Primary Health Networks Mental Health Reform Lead Site Project
9. Australian Digital Health Agency, Mental Health Resource Group
10. Priority Area 6 of the 5th National Mental Health and Suicide Prevention Plan involves the reduction of stigma survey and inclusion in interview
11. Psychiatry Liaison Implementation Group (DoH)
12. Australian Digital Health Agency, Mental Health Resource Group

Department of Social Services

13. Mental Health Working Group Stakeholder Reference Group (NDIA and DSS)

Australian Commission on Safety and Quality in Health Care

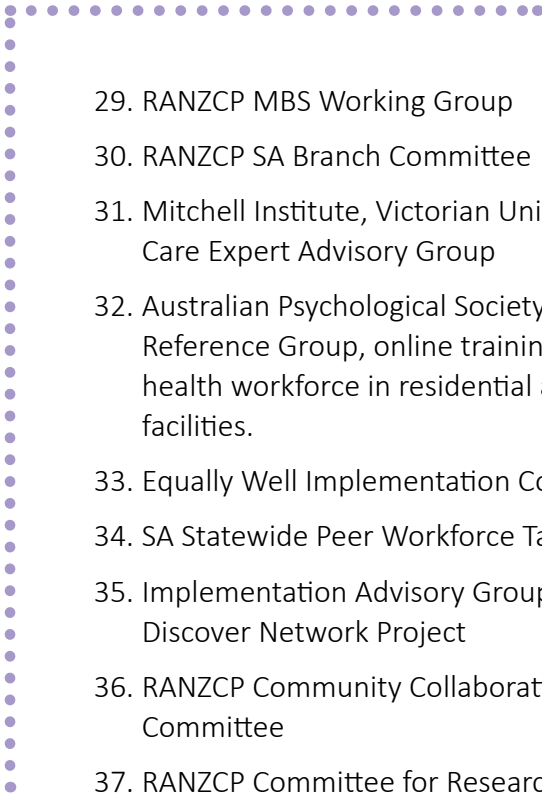
14. 2nd Edition: National Safety and Quality in Health Services Standards Committee
15. National Mental Health Standards Committee
16. National Safety and Quality Community Mental Health Service Standards Advisory Group
17. Patient Advisory Group
18. Patient Reported Outcome Measures Expert Advisory Committee

Mental Health Commissions

19. National Mental Health Commission, COVID-19 Response Plan
20. National Mental Health Commission/NHMRC COVID-19 affects
21. National Mental Health Commission, Peer Workforce Guidelines Committee
22. SA Mental Health Commission, State-wide Peer Workforce Taskforce
23. QLD Mental Health Commission, development of a peak consumer organisation for Queensland ongoing suggestions from our own experience.

Other organisations

24. Board Director, consumer position, Mental Health Australia until 18 Sept, 2020
25. Australian Private Hospitals Association Mental Health Committee
26. Australian Private Hospitals Association Private Hospitals Data Reporting and Analysis Service
27. Australian Private Hospitals Association Queensland Branch
28. RANZCP Alcohol Harm and Mental Health Working Group

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29. RANZCP MBS Working Group
 30. RANZCP SA Branch Committee
 31. Mitchell Institute, Victorian University – Self Care Expert Advisory Group
 32. Australian Psychological Society Expert Reference Group, online training for mental health workforce in residential aged care facilities.
 33. Equally Well Implementation Committee
 34. SA Statewide Peer Workforce Taskforce
 35. Implementation Advisory Group, MIFA's Discover Network Project
 36. RANZCP Community Collaboration Committee
 37. RANZCP Committee for Research


SUBMISSIONS

We made 25 formal submissions to provide lived experience perspectives during the financial year 2020-2021 including:

National Submissions:

1. National Safety Priorities in Mental Health
2. Royal Commission into Aged Care Quality and Safety
3. Deputy Chief Medical Officer for Mental Health Dr Ruth Vine-MBS Item for COVID 19.
4. Australian Banking Association Consultation Paper: Use of credit cards for gambling transactions
5. NDIS Mental Health Stakeholder Reference Group
6. NMHC National Workplace Initiative Framework
7. Department of Health: Adult Mental Health Centres
8. National Suicide Prevention Taskforce
9. NMHC Vision 2030
10. National Suicide Prevention Interim Report
11. Pre Budget Submission 2021
12. Private Mental Health Insurance Reforms
13. Response to the Productivity Report
14. COVID-19 rollout and serious mental illness
15. Select Committee on Mental Health and Suicide Prevention
16. Joint Standing Committee for the NDIS
17. National Preventative Health Strategy
18. NDIS Psychosocial Recovery
19. ACSQHC Safety and Quality Standards for Community Managed Organisations

South Australia Submissions:

20. Phase 1 Youth Treatment Orders
 21. SA Suicide Prevention Bill
 22. SA Responses for Urgent Mental Health Care Centre
 23. Submission South Australia Controlled Substances (Confidentiality and Other Matters) Amendment Bill 2020
 24. Submission South Australia Health Care (Governance) Amendment Bill 2020
 25. SA Pre-Election Submission 2022
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Influencing mental health policy and reform

NATIONAL PRESENTATIONS

1. Equally Well webinar
2. RANZCP May Congress 2021, Alcohol use and mental health
3. Mental Health Coalition of SA, Peer Workers, April 2021
4. National PHN Mental Health Lived Experience Engagement Network Annual Forum, 2021

NATIONAL WORKSHOPS

1. Primary Health Care 10 Year Plan Roundtable (DoH)
2. Australian Digital Health Agency (the Agency) and CHF focus group toolkit for myHealth record
3. NMHC Research brief for the Summer Communications 2020-2021 workshop- #InthisTogether.

MEDIA RELEASES

1. Such welcome news! Budget announcements 7 October 2020
2. Telehealth, 'a game changer'
3. The Missing Middle, 'Our voices'
4. Telehealth, 'a life saver'
5. Budget 2021



OUR RESEARCH

From Lived Experience Australia's Director of Research, Professor Sharon Lawn.

Lived Experience Australia's research has four primary aims:

1. To listen to consumers, their families and carers, regarding issues that affect them.
2. To share the knowledge that we gain from our research with the mental health community, services, and government policy makers.
3. To inform our systems advocacy.
4. To make a difference across all parts of the mental health system, particularly the interface between lived experience and provision of support, care, and treatment.



All our published research and peer reviewed papers can be found on our website at:
www.livedexperienceaustralia.com.au/research

During the 2020-2021 year, we have achieved our research aims through our conduct of three significant national research projects.

**Our research comes
from consumers,
families, and carers.
We present this in
a way that ensures
they are heard.**

THE MISSING MIDDLE

This involved a national survey asking people with mental health lived experience about their experiences of engagement and disengagement with mental health services, and what they would need to re-engage with services to support their mental health and wellbeing.

This research has helped us to understand why and how people fall through the gaps and what is needed to address this problem. We found that trusted, respectful relationships in which a partnership approach, meaningful inclusion in decision-making about care, and a belief in the person's capacity and hope for recovery were significant in improving these processes.

www.livedexperienceaustralia.com.au/research-missingmiddle



TELEHEALTH PSYCHIATRY

We undertook this research to understand what people with mental health lived experience thought of the use of telehealth mental health psychiatry service provision. These insights were particularly important and timely, given the many months of COVID-19 restrictions which have required health services to replace their usual face-to-face care with online telehealth psychiatry options. The research was undertaken in collaboration with the Royal Australian and New Zealand College of Psychiatrists.

We found that access to and use of telehealth psychiatry services was largely positive. Many people identified that without access to this technology during COVID-19, they would have had no other support available. Many additional benefits included convenience, significantly cutting down travel and waiting times, and reduced anxiety for people who struggled to leave the house. Challenges were also highlighted with the technology itself, people's skills in using the technology, the impersonal nature of telehealth versus face-to-face support, and some privacy concerns.

www.livedexperienceaustralia.com.au/telehealthpsychiatry



ADULT MENTAL HEALTH CENTRES

This involved a national survey consultation on the potential service model for these Centres, the first of which opened in South Australia early in 2021. The research was undertaken for the Department of Health.

We found general support for the model, and the principles and assumptions underpinning it. Having immediate access to support to enable earlier intervention rather than requiring access to an emergency department was highlighted by both consumers and carers as a critical component for the AMHCs. Access to peer workers for both consumers and carers was also identified by many as a key service requirement.

<http://bit.ly/AMHCRsearch>



RESEARCH PARTNERSHIPS

We have strong relationships with several professional mental health bodies and consult with these organisations to ensure lived experience perspectives are included in our research and advocacy. This also ensures our research is translated into practice to have real impact for change in the community.

We also have strong relationships with several universities and continue to provide lived experience perspectives (as a chief investigator or partner organisation) to a range of their national mental health projects. These research endeavours include projects focused on physical health and mental health, the NDIS, self-care, borderline personality disorder, healthy lifestyles, and suicide prevention.

This year has been a busy one for our research partnerships, with LEA joining research applications to the National Health and Mental Research Centre, Australian Research Council, Medical Research Future Fund and Suicide Prevention Australia.

The following tables LEA's University collaborations this year:

Large Scale University Projects – Category 1

1. RMIT University, Borderline Personality as Social Phenomenon (ARC grant)
2. University of Newcastle, Physical health and mental health (MRFF grant)

Small Scale University Projects – Category 2-3

3. LaTrobe University, Psychosocial Disability and the NDIS: Research Forum Improving Health and Wellbeing Outcomes for People with Cognitive Disability: The Role of the NDIS
4. UNISA – Helping Australians to better manage stress, adapt to change and improve their mental health with a free, tailored, online, self-help tool.
5. University of NSW, Brain and Mind Centre – national modelling
6. Mitchell Institute / University of Victoria- Self-Care for Health: A national policy Blueprint
7. University of Melbourne- Melbourne School of Psychological Sciences, Ethics and decision making in consumer leadership: A Qualitative Delphi Study
8. Mitchell Institute- Consumer and Carer Expert Working Group 'Being Equally Well'

Research Positions

1. Latrobe University, NDIS Research Panel
2. Flinders University and BPD Cooperative- PHD student (Suicide Prevention Australian Scholarship) – BPD, suicide, and suicidal distress (accessing our data from 2 national surveys – Stakeholder Committee)
3. UNISA – Development of online resources for mental health and wellbeing (working group)



OUR TRAINING

From Lived Experience Australia's Director of Training, Mr Darren Jiggins.

We have made significant progress in developing our Training Program over the past year. This program set about building the capacity of consumers, carers, and service providers in providing responsive and inclusive mental health services.



Training Delivery

Due to the uncertainty around COVID-19, we moved online for our training this year. One of the benefits of this is that we were able to record webinars and make them available to others who were unable to attend at the time. This continues to be a resource that can be drawn on into the future. This service has been a success in allowing delivery of these webinars to effectively be 'ongoing' in an 'on demand' way that people can access as and when it suits them. We continue to use these recordings, promoting them through our social media platforms and e-News, to allow more consumers, carers, family members, staff, and practitioners to access these resources.

1,863

CONSUMERS &
CARERS ATTENDING

1,005

STAFF ATTENDING

TRAINING SUMMARY

	Number of Sessions	Registered/ Attended	Webinar Recording Accessed	Total Accessing/ Attending
Consumer & Carer Training	31	1,128	735	1,863
Staff & Practitioner Webinars	9	683	322	1,005
Totals	40	1,541	1,048	2,868

CONSUMER & CARER TRAINING

Our Training Program for consumers, carers, and family members aims to develop personal advocacy skills.

WEBINARS

We delivered six 45-minute webinars. The webinars were hosted by LEA staff with their own consumer and/or carer lived experience. Each webinar also had a guest speaker with subject matter expertise to provide their input into the topic.

The subjects covered in this series included:

- Advocacy Skills: Top Tips – Guest speaker: Christine Kaine, LEA
- Looking after yourself – Guest speaker: Peter Farrugia, Flourish Australia
- How to be heard – Guest Speaker: Mark Chenery, Common Cause Australia
- Preparing for Advocacy: Briefing & Debriefing – Guest Speaker: Sarah Sutton
- Keeping the Enthusiasm Going – Guest Speaker: Elida Meadows
- Self-reflection and self-evaluation – Guest Speaker: Lorraine Powell, LEA

This series included 1,096 connections with the audience in shared learning via the webinar platform. Participants could contribute to the discussions and engage with the speakers. Participants were provided with evaluation forms to complete which help us to make improvements and ensure future topics are the areas of highest need and relevance.

Mark Chenery offered great solutions to connecting with an audience. His techniques for persuading an audience to accept a desired outcome were excellent.

I could see how authentic the presenter was, and that he walked the talk. Peter is an inspiring role model and he showed steadiness and vulnerability, a very powerful mix.

WORKSHOPS

We delivered 8 free Advocacy Skill Builder series for Consumers and Carers who wanted to take the next step in their advocacy. The workshops enhanced participants' skills for mental health advocacy to make a positive impact on mental health services. The program was delivered via an online platform over two x two-hour sessions.

It confirmed for me that I am doing OK and [reminded me] to self-reflect on the wins no matter how small rather than ruminate on the "failures".

I came away feeling that I am not alone and that the advocacy I am doing is worth doing. The strategies for self-reflections, self-evaluation and self-care were especially useful.

The Community of Practice has helped me feel more empowered and confident and I now have a toolkit I can use in my advocacy

COMMUNITIES OF PRACTICE

We developed a 'Communities of Practice' Advocacy Skills Building Program with a shared learning approach which is held monthly over a 6-month period commencing in February 2021. Participants join the program via an application process. We received 117 applications from consumers and carers to join the program, from which 24 were successful. This demonstrates a significant need for this type of learning, and we are aiming to provide more opportunities next year. This 6-session program is delivered via Zoom with pre-session materials provided each month to enhance focused discussions on topics for effective advocacy. While training was based on workshop topics, the flexibility of a community of practice led to a tailored delivery of content to meet the learning needs of each group.

STAFF & PRACTITIONER TRAINING

I coordinate a consumer representative program and I learnt a few tips and tricks to look at including more formal debriefing as well as encouraging better briefing from committee organisers.

The recognition that there is a distance between understanding how staff could be engaged in advancing standard 2 objectives, and the reality of embedding staff (and patient) representation in all levels of planning and decision making.

Listening to the practical advice by Enaam Oudih and learning about developing cultural competency while engaging with consumers from diverse backgrounds.

Our training program for clinicians and service providers is focused consumer and carer inclusion, in line with the National Safety and Quality Health Service Standards (Part 2: Partnering with Patients in their own care).

WORKSHOPS

We delivered four consumer and carer engagement workshops for staff and practitioners in response to extensive consultation with private hospitals with psychiatric facilities across Australia. Staff identified the key topics of need, LEA staff then designed and delivered the workshops online, over a 2-hour session.

Sandy gave practical examples of consumer input into Health Service delivery, as well as some great success stories.

The information mentioned was very relevant to my profession as a Mental Health nurse.

WEBINARS

We provided five staff webinars covering as follows:

- Taking inspiration from Standard 2 – Guest Speaker: Christine Gee, CEO, Toowong Private Hospital
- Insights into Accreditation – Guest Speaker: Sandy Thomson, Director, GovernancePlus
- CEO Perspectives on Standard 2 – Guest Speaker: Christine Gee, CEO, Toowong Private Hospital
- Consumer and Carer Inclusion – Guest Speaker: Peter Selar, CEO, Delmont Private Hospital
- Engaging with Consumers and Carers from diverse communities – Guest Speaker: Enaam Oudih, Practice Manager, PEACE (Relationships Australia)

The webinars achieved 622 connections with the audience in shared learning. Participants could contribute to the discussions and engage with the speakers. Participants were provided with evaluation forms to complete which supports us in improving our training and focusing our training offering in areas of highest need.

OUR TRAINING AWARDS

Our award for 'Best Practice in Consumer and Carer Inclusion' for Trainees was presented at the May 2021 RANZCP Awards Ceremony in Hobart. The award is presented to a RANZCP psychiatry trainee who completes all 5 LEA developed e-learning modules and submits the best reflective piece around Collaboration, Communication and Cooperation between Health Professionals.

Congratulations Dr Catherine Torning, 2021 Winner of LEA's Best Practice in Carer Inclusion Award at the RANZCP Awards Ceremony (pictured below).

Dr Torning completed our 5 X Collaboration, Communication and Cooperation Modules.



"These modules encouraged me to reflect on how to undertake recovery-oriented practice which resulted in me looking further than just the consumer, towards their primary and secondary carers and extended care network."

We are now offering a second Lived Experience Australia Award for Clinicians. This award is available to clinicians and staff working in private psychiatric hospitals. The award will be presented to a clinician or staff member working in a private hospital who undertakes LEA's online training modules focused on consumer and carer inclusion. Part of the requirement is that they submit a reflective piece about how the learnings from the modules have changed their clinical practice.

OUR PROJECTS

CARER GUIDE ONLINE LIBRARY

Lived Experience Australia in partnership with Mental Health Carers Australia continues to manage and maintain an online library for health professionals to support engagement with families and carers in mental health.

The library includes a large collection of practical resources, fact sheets, research, online training, legislation, videos and more and is free to access. The library is currently funded until 31 December 2021 by Mental Health Carers Australia and can be accessed via

www.workingwithfamiliesandcarers.com.au



CARER GUIDE SELF-ASSESSMENT PORTAL

Lived Experience Australia developed an online portal to enable health practitioners and organisations who are using the Practical Guide for Working with Carers of People with a Mental Illness to self-assess against each of the partnership standards. The portal provides organisational level reports to show how an organisation is progressing against each of the partnership standards. This year we continued to provide access to this portal available at www.carerguide.com.au. This portal is currently funded until 30 June 2021 by Mental Health Carers Australia and can be accessed via

www.carerguide.com.au



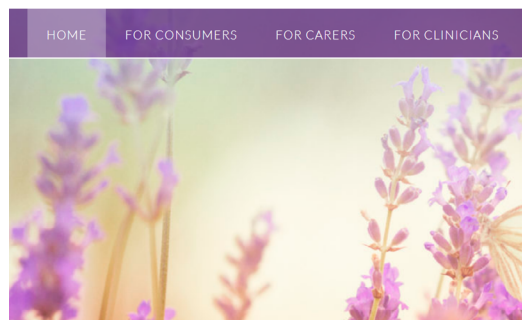
BORDERLINE PERSONALITY DISORDER SA SERVICES WEBSITE

Lived Experience Australia continues to provide a website to support consumers and carers access to local support services and resources that specialise in Borderline Personality Disorder (BPD) in South Australia. This site also provides a range of resources and links for clinicians to support them in working with people with a diagnosis of Borderline Personality Disorder. This website can be accessed via

www.bpdsa.com.au

bpdsa.com.au

Borderline Personality Disorder Support Services in South Australia



OUR FINANCES - TREASURER'S REPORT



SHARON LAWN

The COVID-19 pandemic has meant another year with a difference for us all. Like many organisations, it has impacted our ability to go about our usual advocacy and project activities, but also offered new opportunities to connect with each other.

As Treasurer I monitor the financial aspects of Lived Experience Australia Ltd together with the Chair/Executive Director and I am a joint signatory to the banking accounts. All LEA transactions are processed through MYOB by our Manager, Administration, Communication and Projects who then forwards the reconciled bank statements to me for review to ensure all transactions are scrutinised and approved.

This year our accounts have been audited by HLB Mann Judd Audit (SA) Pty Ltd.

The Chair/Executive Director has delegated authority to make all financial decisions for the organisation in line with budgets or funding agreements including the selection of staffing and contractors, setting appropriate

remuneration, and making necessary routine payments as invoices come to hand. Any individual purchases that are more than \$20,000 not already approved in the budget or required in funding agreements are taken to Executive Board Members for approval. This method allows transparency of the accounting and financial system. Any related party transactions are presented to the Board for approval prior to engagement.

The Manager, Administration, Communications and Projects provides a copy of the quarterly Profit and Loss Statement to the Board. A budget update and presentation of Lived Experience Australia Ltd.'s financials including progress against the budget are discussed fully and openly at all meetings of the Board. Any risks related to our financials, and contingencies related to those risks, are also considered at each Board meeting.

During the 2020-2021 financial year and because of COVID-19, Lived Experience Australia Ltd.'s budget was affected largely due to border shutdowns which restricted travel to conferences and several meetings related to our national advocacy. However, we moved much of our work online ensuring that we were able to meet our funding requirements and strategic objectives. We saw increased insurance premiums this year; however, I am pleased to report a surplus in the main due to donations, training programs and cost efficiencies

I refer you to the Auditor's Report and Financial Statements on the following page.

Sharon Lawn

Sharon Lawn, Treasurer



Independent Auditor's Report

To the Board of Directors of Lived Experience Australia Ltd

Opinion

We have audited the financial report of Lived Experience Australia Ltd ("the Company"), which comprises the statement of financial position as at 30 June 2021, the statement of profit or loss and other comprehensive income, the statement of changes in equity and the statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, and the declaration by those charged with governance.

In our opinion, the accompanying financial report of the Company is 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 Company's financial position as at 30 June 2021 and of its financial performance and cash flows 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*.

HLB Mann Judd Audit (SA) Pty Ltd
Chartered Accountants

Adelaide, South Australia
6 October 2021

Corey McGowan
Director

Lived Experience Australia Ltd
(Formerly known as Private Mental Health Consumer Carer Network (Australia) Ltd)
Statement of profit or loss and other comprehensive income
For the year ended 30 June 2021

	2021 \$	2020 \$
Revenue		
Government grants	341,245	366,431
Donations	65,066	46,056
Other income	52,156	64,458
	<u>458,467</u>	<u>476,945</u>
Expenses		
Employee benefits expense	(256,587)	(202,391)
Contractor and professional fees	(10,899)	(43,710)
Travelling expenses	(32,969)	(40,221)
Scholarships and training expenses	(48,900)	(26,675)
Insurance expense	(9,810)	(10,747)
Other expenses	(76,658)	(59,066)
	<u>(435,723)</u>	<u>(382,809)</u>
Surplus for the year	22,644	94,135
Other comprehensive income for the year	-	-
Total comprehensive income for the year	<u>22,644</u>	<u>94,135</u>

OUR FINANCIAL SUPPORTERS

AUSTRALIAN GOVERNMENT, DEPARTMENT OF HEALTH

We value our association with the Commonwealth, and will continue to provide input into policy, inquiries, consumer and carer engagement and gaps as we become aware of them.

We would not be able to do what we do without this funding and are grateful to have their commitment through until 30th June 2022.

ROYAL AUSTRALIAN & NEW ZEALAND COLLEGE OF PSYCHIATRISTS (RANZCP)

The RANZCP has been a financial contributor to Lived Experience Australia's activities since July 2004. We are grateful for their commitment to supporting our ongoing work.

AUSTRALIAN PSYCHOLOGICAL SOCIETY (APS)

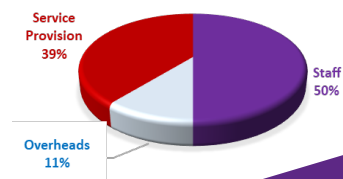
The APS has been a financial contributor for many years. They are a strong supporter, and we are grateful for their commitment to supporting our ongoing work.

AUSTRALIAN PRIVATE HOSPITALS ASSOCIATION (APHA)

We value our close working association with the APHA in bringing consumer and carer experiences and perspectives into the work undertaken by private psychiatric hospitals. Their support is invaluable, and we are grateful for their commitment to supporting our ongoing work.

HOW WE USE OUR FUNDING AND DONATIONS

We focus on what matters most and keep our operational overheads to an absolute minimum of only 11% of our total income. You can be sure that funds provided to us are focussed on direct service provision.



Without ongoing financial support, LEA would be unable to continue our activities. We thank all our donors for their support.



It is through the vital support of individuals and organisations that we can continue our work.



CORPORATE SUPPORTERS

To enhance our impact on mental health services, our partnerships with corporate supporters are essential. When you see the value in supporting consumers and carers with a lived experience of mental ill-health, you understand why we do what we do. If your organisation sees value in supporting lived experience consumers, families and carers and wants to contribute to improved mental health services in Australia, contact us by phone 1300 620 042 or email admin@livedexperienceaustralia.com.au to discuss what we can achieve together.

CONTRIBUTE TO OUR MISSION

As a registered Health Promotion Charity, our work continues due to the amazing support of donors. While most of our funding is from Government, additional support allows us to go the extra mile in what we do. This helps us transform mental health services across Australia through our advocacy, and support mental health consumers, carers, staff, and practitioners.

Individual donations are welcomed – we appreciate every donation however big or small. These donations are especially meaningful to us, as we know they often come with stories of lived experience, and we appreciate learning about your journeys as you contribute.

To support our work as an individual go to www.livedexperienceaustralia.com.au and click on the 'Donate' button.

JOIN US! BECOME A 'FRIEND' OF LEA

As a 'friend', we engage with you directly on matters of importance for consumers and carers. We communicate with our friends directly through our mailing list, we seek your input into surveys and research, and we share our news and results with you directly. This is extremely valuable to our work as the greater our network of 'friends' the more we learn about different lived experiences. We are then able to advocate with increased data and stronger anecdotal evidence.

Joining Lived Experience Australia as a 'friend' is completely FREE and is available to consumers, carers, peer workers, clinicians, and other professionals.

Join at www.livedexperienceaustralia.com.au/join-now

FOLLOW US ON SOCIAL MEDIA



facebook.com/LivedExperienceAustralia



twitter.com/LivedExpAust



linkedin.com/company/LivedExperienceAustralia



OUR PEOPLE



MS JANNE MCMAHON
CHAIR & EXECUTIVE DIRECTOR

I have been a consumer mental health advocate since 1997. I founded LEA in 2002 because I realised there was no organisation representing the issues and needs of consumers, carers, and families within private mental health services. I felt a real need to fill this gap.

As someone who has experienced mental ill-health since adolescence, I am truly passionate about ensuring that services are designed in collaboration with those who have a lived experience. We are the ones who know what it is to live with mental ill-health and can provide the most valuable insights into how services can work for us. We cannot become desensitised to the needs of those experiencing mental ill-health any more than we can ignore someone in front of us with a physical disability.



PROF SHARON LAWN
DEPUTY CHAIR, TREASURER,
DIRECTOR OF RESEARCH

I was previously advocating for mental health system improvement through my lived experience role in leading the development of the Consumer Participation Framework for Southern Mental Health in Adelaide (2004-2008).

While I have my own lived experience as both a consumer and carer, I believe that research is an extremely valuable tool in providing evidence of the need for consumer and family inclusion in all things that impact our lives.

A quote I love is:

“Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it’s the only thing that ever has.”
(Margaret Mead).

I truly believe this applies to LEA. Together, we can change the world for those with a lived experience of mental ill-health.



MR DARREN JIGGINS
TAS DIRECTOR &
DIRECTOR OF TRAINING

I have a living experience of OCD, and acceptance of this illness has helped me make lifelong connections with people living life like me. The greatest times in my journey were as a regular member of an OCD self-help group in the 1990s.

I first encountered LEA in 2006 when I was attending State Forums. I now work closely with private hospitals, consumers, and carers across Australia, as the Tasmanian Director for LEA.

I am very excited about the current rollout of the ‘Head to Health’ adult crisis community hubs. Having been a consumer representative on this initiative I see this program as a great step forward in the use of a Lived Experience workforce to connect with people in crisis in a setting outside of hospital emergency department settings.



MR NORM WOTHERSPOON
QLD DIRECTOR & SECRETARY

I started working with LEA after being nominated by the CEO of a private hospital I had been working with, where I was a consumer advocate. Once I met Janne, I knew that working with LEA would be mutually beneficial. I have been with LEA for 10 years now, and I can definitely say that has been true!

I continue to work closely with private hospitals across Queensland to provide a consumer perspective, as well as volunteering on both safety and quality and consumer and carer advisory committees.

Playing social lawn bowls with the love of my life, Margaret, is one of the things I do to relax. We enjoy our time together and it gives me some activity and good company.



MS HELENE LANGLEY
VIC DIRECTOR

I began my experience within the mental health sector when my son became unwell with a mental illness during his early teens. It was during this time, when we were trying to get appropriate help, that I was struck by varying barriers and obstacles in this shared experience both as a carer and consumer.

I have worked for over 30 years in private hospital settings, including 13 years as a Consumer/Carer representative in a private psychiatric hospital.

In advocacy, I always have favoured supporting a person to find their voice. Listening to their concerns and gently encouraging them to articulate the cause for themselves.



MS JUDY BENTLEY
ACT DIRECTOR

My experience as a mental health carer began 20 years ago when a close family member became unwell with a severe and persistent mental illness. It was not a role that I was trained or prepared for, and privacy and confidentiality considerations made that role even more challenging. After many difficulties my dearly loved consumer has reached a stage of success and joy in life which has made those hardships easier to forget.

I have been active as a mental health carer advocate since that time, starting when I was asked to join the Strategic Executive Committee of ACT Mental Health and progressing to the National Register of Mental Health Consumers and Carers among other committees.

OUR PEOPLE



MS SIMONE ALLAN
NSW DIRECTOR

In 2011 I recognised that the trauma of earlier childhood years was having a negative long-term impact on my wellbeing. I found effective clinical care and support through a private hospital that set me on the road to a healthy recovery journey. This also led to the start of my advocacy work.

After 3 years of service to this private hospital I was encouraged to get involved with deeper advocacy work and give part of my time as the New South Wales Director for Lived Experience Australia.

My passion for mental health recovery is to ensure that every person who engages with a service is matched with a mentor or buddy to walk the journey to healthy long-term recovery.



MS LORRAINE POWELL
WA REPRESENTATIVE

I have been a lived experience advocate for over 19 years. My own lived experience started young, then in adulthood I had post-natal depression with each of my three sons. Since then, I have been focused on healing, learning new ways of coping, and recognising my early warning signs.

My carer experiences have also been challenging, with my husband and three sons all experiencing depression. In 2015 I lost one of my sons to suicide. This has been a profound experience that has ongoing and lasting impact on my whole family.

I'm really proud to have been part of developing the Certificate IV in Mental Health Peer Work content, and one of the first people in Australia to obtain the qualification.



MR EVAN BICHARA
MULTICULTURAL REPRESENTATIVE

Since my youth, I have experienced mental illness and have committed myself towards recovery and staying better.

With my background of having Greek/Egyptian parents and growing up in Australia, I provide multicultural lived experience inclusion for LEA's programs.

I also advise policy makers and stakeholders on the appropriate ways to include and serve the vast multicultural communities within Australia, ensuring that their voices are on the tables of the decision makers for better service delivery across the mental health sector Australia wide.

MR JOHN MCGRATH, AM

John McGrath has been a Patron of LEA for the past 10 years. John was a man of integrity, strength, and warmth, and someone focused on improving peoples' lives, particularly those of families and carers. It was with great sadness that we heard he had passed away on 4 July 2021, aged 81. We have been grateful to have had John as a Patron.



MS CHRISTINE KAINE
MANAGER - ADMINISTRATION,
COMMUNICATIONS & PROJECTS

I have over 15 years' experience in the mental health sector, in addition to providing support to a family member with multiple, complex mental health diagnoses.

At LEA, I manage projects, facilitate training courses, write submissions, contribute to research, and find ways to encourage and build the capacity of mental health advocates.

One thing I'd really like to see is all mental health practitioners being trauma informed and recovery focussed. Seeing the whole person and not just a diagnosis is SO important. It's about supporting long term recovery in partnership with the person experiencing mental ill-health as well as those that support them.



MS HEATHER SMITH
MARKETING &
COMMUNICATIONS OFFICER

My role is to make sure we are spreading the word about what we are doing, and to make sure all our communications are 'on message' and meeting the needs of our community.

My lived experience comes from childhood trauma and physical abuse, leading to severe depression. Going through treatment for this helped me connect the dots to the causes and develop strategies for improving daily life.

The farm where my family lives has been impacted by natural disasters recently. This has been extremely stressful, and I'm fortunate to have an amazing support system which helps me to be available and recognise signs of stress and trauma in my three children and husband, who have also experienced these things.



DR BILL PRING
CLINICAL ADVISOR



PROF ALLAN FELS AO
PATRON



MR JOHN MCGRATH AM
PATRON

PASSED AWAY 4 JULY 2021



**Lived
Experience**
AUSTRALIA



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www.LivedExperienceAustralia.com.au

