

one part
trauma
wellbeing after
ANNUAL REPORT
2011-2012





**VISION
MISSION
GOALS**

Vision

Improved wellbeing and quality of life for individuals and communities who experience trauma.

Mission

To be an international leader in building the capability of individuals, organisations and the community to understand, prevent and recover from the adverse mental health effects of trauma.

Goals

Improve outcomes for the community

In collaboration with our partners, ACPMH will improve the quality, effectiveness and accessibility of services and interventions for survivors of disaster, workers in high risk organisations, and community members affected by trauma.

Improve outcomes for members of the Defence community

In collaboration with the Departments of Veterans' Affairs and Defence, ACPMH will continue to contribute to the quality and effectiveness of military mental health services for past and present members of the Defence community.

Advance scientific knowledge about the nature, development and impact of traumatic stress

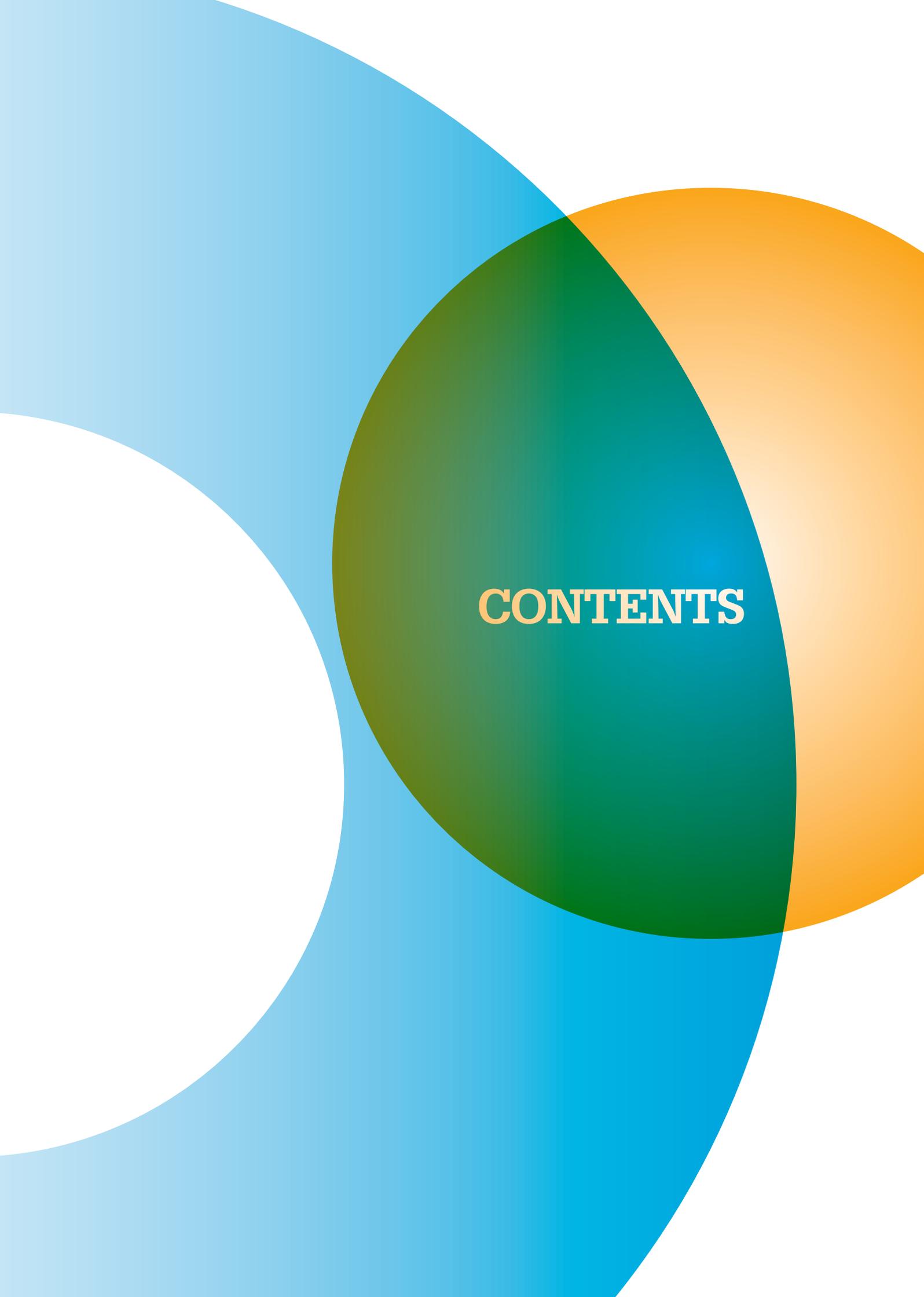
ACPMH will continue to undertake high impact research that informs the prevention, treatment and recovery from the psychological effects of trauma.

Provide leadership and expertise

ACPMH will work with government, other organisations and the community as a leading authority on evidence-informed posttraumatic mental health policy, service delivery and practice.

Enhance the operational and business capabilities of the organisation

ACPMH will develop systems and processes to improve the efficient and effective use of our people and resources.



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CHAIRMAN'S REPORT



On behalf of the Board of Management, I have great pleasure in presenting the 2011-2012 Annual Report for the Australian Centre for Posttraumatic Mental Health.

It has been a year full of activity, for the management team, the staff and the Board. The first half of the year involved the implementation of a new management structure, one that for the first time separated the business management role from that of overseeing the core areas of Research, Education and Training, and Policy and Service Development.

We were also busy designing and implementing ACPMH's Strategic Plan 2012-2014. This plan sets the focus and direction for ACPMH as we continue to build our expertise and reputation with respect to creating, understanding, translating, and applying knowledge to improving wellbeing and quality of life for individuals and communities who experience trauma.

While we remain focussed on ensuring Australia remains at the forefront of world's best practice in veteran and military care, we will continue to build our capability and expand our influence in the community to promote the best possible outcomes for survivors of disaster, employees in high risk organisations and community members affected by trauma.

The Strategic Plan also emphasises our integrated approach to research, education and training, and policy and service development. Our research, advice and clinical guidelines influence policy and practice. The Strategic Plan 2012-2014 was developed with input from our staff, our stakeholders and the Board, and I thank everyone for their involvement.

In acknowledging the contribution of the Board throughout 2011-2012, I would like to take this opportunity to welcome and introduce three new Board members.

Rear Admiral Robyn Walker, AM is the Commander Joint Health and Surgeon General Australian Defence Force (ADF). She worked as a medical practitioner in the Queensland public health system for some years before joining the Royal Australian Navy. Her naval career has included coordination of health care to ADF operations in Iraq, the Solomon Islands and East Timor, as well as responsibility for Australia's military medical response to the 2004 Boxing Day Tsunami.

Professor Ian Everall is the Cato Chair and Head of the University of Melbourne's Department of Psychiatry. He is a prominent international psychiatrist and neuropathologist who has held research positions in the UK and the US. Ian is a member of the Australian Advisory Council for Asia-Australia Mental Health and the Advisory Committee for the Melbourne Neuroscience Institute.

Mr Sean Farrelly is the First Assistant Secretary, Rehabilitation & Support Division, Department of Veterans' Affairs (DVA). Sean is responsible for policy and service delivery of rehabilitation, compensation and income support to Australia's veterans and war widows.

I would like to thank Professor Bruce Singh, AM, and Major General Paul Alexander, AO, for their contributions while they served as members of the Board.

My thanks also go to all of our long-standing partners, including DVA and Department of Defence, for their continuing collaboration. I would also like to thank the many new partners we have, that are helping ACPMH expand our reach into a much broader community base.

Finally, many thanks to all staff at ACPMH who continue to show extraordinary energy and commitment to the many projects and initiatives they are involved with.

Professor Michael Vitale

A handwritten signature in black ink that reads "Michael R Vitale". The signature is written in a cursive, slightly slanted style.

Chairman

BOARD OF MANAGEMENT

(as of 30 June 2012)

Chair	Professor Michael Vitale
Secretary/Treasurer	Ms Sue Scheinpflug (appointed 16 April 2012)
Other Members	Rear Admiral Robyn Walker, AM Major General Mark Kelly, AO, DSC Professor Ian Everall Mr Sean Farrelly Ms Yvonne Turner Professor David Forbes

Professor Michael Vitale

Michael is a Professor at Monash University and the Director of the Monash Asia-Pacific Centre for Science and Wealth Creation. He has more than thirty years' experience in research, teaching and consulting in the areas of information technology, innovation and commercialisation. Michael has a long-standing commitment to the not-for-profit sector, and his experience assisting organisations to gain commercial value from their research and intellectual expertise is highly valued by ACPMH.

Rear Admiral Robyn Walker, AM

Robyn is the Commander Joint Health and Surgeon General Australian Defence Force. She is a qualified medical practitioner, a specialist medical administrator, and a Graduate of the Australian Institute of Company Directors.

Major General Mark Kelly, AO, DSC

Mark is Repatriation Commissioner in the Department of Veterans' Affairs. Mark served in a number of senior command appointments during an Army career spanning over 35 years, including Commanding Officer of the 1st Battalion, The Royal Australian Regiment, Commander 3rd Brigade, Commander 1st Division, Land Commander Australia and Commander Joint Task Force 633.

Professor Ian Everall

Ian is the Cato Chair and Head of the University of Melbourne's Department of Psychiatry. He is a prominent international psychiatrist and neuropathologist who trained in the UK, and a member of the Australian Advisory Council for Asia-Australia Mental Health and the Advisory Committee for the Melbourne Neuroscience Institute.

Mr Sean Farrelly

Sean is the First Assistant Secretary, Rehabilitation & Support Division, Department of Veterans' Affairs. He is responsible for policy and service delivery of rehabilitation, compensation and income support to Australia's veterans and war widows.

Ms Yvonne Turner

Yvonne is a business professional with extensive senior executive management experience across several diverse industries in the private and public sectors in Australia and New Zealand. She is a graduate and Director Nexus member of the Australian Institute of Company Directors, a Fellow and a state councillor of the Victorian branch of the Australian Marketing Institute and an Associate of Leadership Victoria.

Professor David Forbes

David joined ACPMH in 1999 as Deputy Director, and was appointed Director in January 2012. He is a clinical psychologist with many years' experience in the assessment and treatment of mental health problems following trauma. He was the Chair of the working party for the *Australian Guidelines for the Treatment of Adults with Acute Stress Disorder and Posttraumatic Stress Disorder* and has also published widely in the area of posttraumatic stress in the international literature.

DIRECTOR'S & CEO'S REPORT



The year 2011-2012 has been a significant one for ACPMH. First, it saw the appointment of Professor David Forbes as Director, having served as Interim Director for several months. In addition, the Board oversaw the introduction of a new leadership structure, with the appointment of a CEO, Sue Scheinflug, to act alongside the Director.

The past 12 months saw our continuing success as leaders in the field of posttraumatic mental health. Some of the highlights include: the ACPMH Expert Forum held in 2011; the launch of the revised *Mental Health and Wellbeing after Military Service* book; the commencement of the process of revising the PTSD Guidelines with an added focus on children and adolescents; and the continued expansion of our work with new clients and into new fields.

The latter included training Queensland Rail staff and Victorian Department of Education and Early Childhood Development, (DEECD) school counsellors, and working with Queensland Health, Department of Communities, and General Practice Queensland in the aftermath of the Queensland floods and cyclone. We also commenced new projects with the federal Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) and launched the Trauma and Homelessness Initiative with a number of agencies. While recognising the importance of broadening our client base, we are aware of the importance of continuing to offer maximum support and services to long-standing partners such as the Departments of Veterans' Affairs and Defence.

A great deal of effort has also been placed on improving our internal efficiency and effectiveness. The entire staff contributed toward developing a new strategic plan that was required because the timeframe of the previous strategic plan was nearing an end. The process also involved building a new operational plan to drive its implementation. The Strategic Plan 2012-2014 was finalised and disseminated at the end of the financial year and can be accessed at www.acpmh.unimelb.edu.au/about/our_framework.html.

We also developed a new risk management strategy. This was an initiative of the Board and Management Group following a risk audit in April 2010. While the risk audit did not identify any extreme risks, it did highlight the need for ACPMH to develop a risk framework as part of our project planning and execution activities.

Other internal initiatives included the development of a new project management system, and completion of a comprehensive business review with a specific focus on our financial management and business practices.

Our vision at ACPMH is improved wellbeing and quality of life for individuals and communities who experience trauma. We aim to achieve this by being an international leader in our field, and building the capability of the individuals, organisations and communities we work with. It is our staff who achieve all this. The outcomes they deliver are driven by their dedication, outstanding expertise and continued commitment to making a difference to the lives of people who have experienced trauma. We thank them!

Sue Scheinflug

CEO

Professor David Forbes

Director

ABOUT ACPMH



Australian Centre for
**Posttraumatic
Mental Health**

The Australian Centre for Posttraumatic Mental Health is a not-for-profit organisation dedicated to reducing the impact of trauma by building the capability of individuals, organisations and the community to understand, prevent and recover from the adverse mental health effects of trauma.

ACPMH is governed by a Board of Management which brings together independent members, representatives of our key partners: the Departments of Veterans' Affairs and Defence and the University of Melbourne, and the executive positions of Director and CEO.

The team at ACPMH is multi-disciplinary. Staff are experts in their respective fields, and many are internationally recognised for their work in posttraumatic mental health.

ACPMH's work in posttraumatic mental health is organised into four distinct areas: Research, Policy and Service Development, Education and Training, and Events and Resources. This breadth of work enables ACPMH to actively integrate learnings from all of these activities, translating knowledge into practice and implementation, and offering clients end-to-end service. ACPMH's expertise ensures that clients and the community benefit from the most up-to-date knowledge of posttraumatic mental health.

World Class Research

Our program of research and evaluation aims to advance the knowledge of trauma and posttraumatic mental health. Our leadership in translating research into education and training initiatives and policy and service development advice promotes the best possible outcomes for people affected by trauma.

Policy and Service Development

Our work with organisations that have responsibility for people affected by trauma aims to ensure that proven interventions in posttraumatic mental health are promoted through their policies and practice.

Education and Training

We research, develop and deliver education and training programs on mental health and posttraumatic mental health.

Events and Resources

We develop and disseminate information about mental health and posttraumatic mental health through publications, resources, articles, conferences, forums, symposia and informed media commentary.

SERVICES & EVENTS

Research

Associate Professor Meaghan O'Donnell
Director of Research



ACPMH's internationally acclaimed program of research and evaluation aims to advance the knowledge about trauma and posttraumatic mental health.

We benefit from our extensive national and international collaborative research relationships, integrating the findings from our research activities and program evaluation with advances from around the world. ACPMH is proud of its unparalleled leadership in translating research into education and training initiatives and policy and service development, thereby promoting the best possible outcomes for people affected by trauma.

ACPMH's research targets three main populations of trauma survivors:

- Military and Veteran
- Community
- Industry and Workplace

We have five main programs of research:

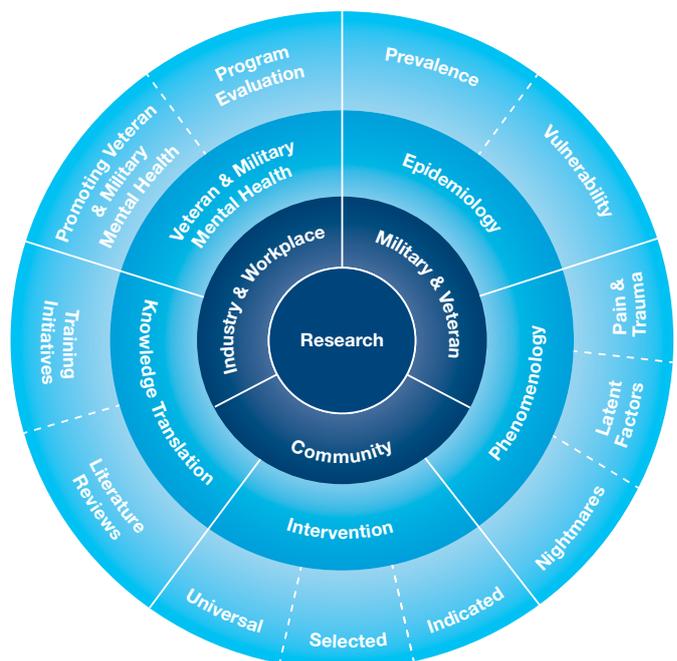
- Epidemiology
- Phenomenology
- Intervention
- Knowledge Translation
- Veteran and Military Mental Health

2011-2012 Overview

The past 12 months has seen a significant increase in the amount of work ACPMH has done with new trauma populations. While we recognise that work in the area of military and veteran populations remains fundamental to our core values, we are working to identify other populations that can benefit from an association with ACPMH. Many of our new associations have come about due to our involvement in supporting communities, emergency response services and other organisations in the aftermath of the natural disasters that have occurred in Australia in recent years.

In the past year the Research section of the ACPMH website was updated and expanded. Details of all ACPMH's publications, complete with abstracts can be found at www.acpmh.unimelb.edu.au/resources/acpmh_articles.html.

While the research we are carrying out covers a great deal of ground, our intervention research in particular stands out this year. We have had a number of studies published on the effectiveness of testing treatments in real-life situations in order to see whether we can transfer evidence-based treatments to the real world. Not only does this research have widespread benefits for numerous populations, it highlights ACPMH's ability to provide a range of services, from research through to service delivery, and is an example of just how broad our ambit now reaches.



DVA - Long Term Outcomes Research

This long-term study investigated whether the current counselling practices used by the Veterans and Veterans Families Counselling Service (VVCS) results in sustained changes to mental health outcomes. The research was funded by the Department of Veterans' Affairs (DVA) Applied Research Program.

Participants in the program were assessed twice pre-treatment, during their treatment, and again after 12 months. Those targeted had high anxiety levels and showed symptoms of depression. ACPMH has analysed the results and found significant positive changes took place between the first and second assessments and that these changes were generally sustained over time. These findings indicate that VVCS counselling can be relatively effective in improving the mental health of veterans and their families.

Trauma and Homelessness Initiative

The Trauma and Homelessness Initiative began in February 2012. This research builds on the experience of agencies who work with people who are homeless, recognising that homeless people are often exposed to traumatic events – both before and during their homelessness. The research conducted by ACPMH will contribute to the development of a practice framework that will include recommendations about operating with a trauma-informed practice model.

We are fortunate to be working on this initiative with a consortium of key agencies who work with people experiencing homelessness, including Sacred Heart Mission, Mind Australia, Inner South Community Health Service, and VincentCare.

Individual Differences Study

Mounting evidence suggests that the experience of mental health problems following a traumatic event is not random, but is related to the individual's personality style. However, research to date has been limited by its cross-sectional nature. This study aims to build on previous work by using a longitudinal design to establish whether personality can predict the types of mental health problems experienced by survivors of serious physical injury. Injury patients admitted to the Alfred Hospital Trauma Service are asked to complete a personality questionnaire soon after injury, and are followed up three and 12 months later using a structured clinical interview for psychiatric disorders. Recruitment of patients is anticipated to finish in December 2012, with 12 month assessments commencing in January 2013.

Health Effects of Compensation Research Study

This collaborative study with the University of Melbourne's Centre for Health Policy, Programs and Economics (CHPPE) has been funded by the Institute for Safety, Compensation and Recovery Research (ISCRR). It examines the link between exposure to compensation schemes and its impact on health outcomes. The past 12 months has seen the completion of the data collection and the commencement of the analysis process.

Among the key issues being examined are whether there are factors relating to the compensation process that impact on recovery, and if so, whether anything can be changed to gain better outcomes. This research has implications for motor vehicle accident and work accident compensation schemes, and the findings may generalise to other compensation schemes.

SERVICES & EVENTS

Other Research Projects

DVA - WVCS Program Monitoring

Under this project, ACPMH provides consultancy services and advice to WVCS regarding quality improvement and program evaluation/research of its group programs: Health and Wellbeing, Lifestyle and Stepping Out.

DVA - Cognitive Processing Therapy (CPT) Implementation Training and Implementation Research

Following the success of the randomised controlled trial which tested the effectiveness of CPT for treating posttraumatic stress disorder (PTSD) (2007-2010), ACPMH has partnered with WVCS to roll out CPT across its service nationally. The initiative is supported by the DVA Applied Research Program and will examine the effectiveness of the implementation process.

DVA - Meta-analysis of Gender Differences in PTSD Treatment Outcomes

This study commenced in May 2012 and is investigating whether there is a gender difference in PTSD treatment outcomes. The study is a systematic review and meta-analysis of all randomised trials that have tested psychological interventions for men and women with PTSD. The results of this study will provide evidence about whether women respond better or worse than men to psychological treatments for PTSD.

ADF - Longitudinal Study of Resilience

In November 2009, the Australian Defence Force (ADF), in collaboration with ACPMH, launched a longitudinal study of psychological resilience called LASER (Longitudinal ADF Study Examining Resilience) tracking members from recruitment through the first three years of service. The findings of this study will provide evidence to support the development and promotion of strategies that help maintain the psychological health and wellbeing of members of the ADF.

Telephone Administered Early Psychological Intervention Study

The aim of this study is to test the efficacy of early intervention telephone-administered psychological therapy in the prevention and treatment of PTSD, depression and anxiety following traumatic injury. This study is in the final stages of data collection, with findings expected to be reported in 2013.

National Health and Medical Research Council (NHMRC) Program Grant

NHMRC funding supports a study involving a six year follow-up of a large group of serious injury patients to examine the long-term health and wellbeing impacts of injury (n= 1160). The study is ongoing, and expected completion is in August 2012.

Philadelphia VA Medical Center (PVAMC) Imagery Rehearsal Research

This trial of imagery rehearsal therapy with Iraq/Afghanistan veterans with PTSD nightmares is being conducted by the PVAMC. It uses an intervention based on pilot research published by ACPMH in 2001 and 2003. ACPMH is providing the research trial with weekly supervision sessions.

Pain Literature Review

The Institute for Safety, Compensation and Recovery Research (ISCRR) commissioned ACPMH in July 2011 to conduct a literature review focussing on the relationship between chronic pain and mental health, with a particular focus on the effectiveness of psychosocial interventions. The review was completed in September 2011.

Policy and Service Development

Andrea Phelps

Director of Policy and Service Development (Acting)



ACPMH's policy and service development work builds the capacity of organisations to understand, prevent and promote recovery from trauma. In essence, this means getting proven interventions into practice by:

- working with organisations to address their policies and regulations
- working with organisations to address the team's protocols and processes
- changing individual practitioners' behaviour.

ACPMH works with organisations that have responsibility for people affected by trauma, including:

- those that provide direct care (e.g., Veterans and Veterans Families Counselling Service (VCS), hospital treatment programs for posttraumatic stress disorder (PTSD), and mental health practitioners)
- those whose employees may be exposed to trauma in the course of their work (e.g., military, emergency services, rail industry)
- those responsible for setting the standards of care for people affected by trauma (e.g., the Departments of Veterans' Affairs and Defence, third party insurers)
- those responsible for the government response to whole communities affected by trauma (e.g., state and Australian governments).

The key challenge for ACPMH is to engage with organisations in ways that build the will to change, instil knowledge of what to change, and enhance the capacity to change.

2011-2012 Overview

The past 12 months has seen a couple of trends emerge in the key area of policy and service development. First has been the broadening of our partner base. This has occurred through the active dissemination of information outlining our services, as well as through a higher media profile.

Considerable interest came from our review of peer support programs that used the Delphi methodology to examine the effectiveness of such programs. The recommendations were particularly relevant to emergency services organisations that have established, or are considering establishing, peer support systems. Our engagement with this sector has increased accordingly. We have also received continuing interest from the rail transport industry and other organisations from the transport sector, and anticipate further collaborations over the next year.

The Trauma and Homelessness Initiative, outlined in the Research section of this report, is another example of our broadening partner base.

The second trend has been ACPMH's move into the e-health space. This includes online services and tools as well as mobile phone apps. Specific examples are given on the next page. There is no doubt that the dissemination of information will continue to move hand-in-hand with developments in technology. ACPMH is committed to being at the forefront of this area of rapid change and development, ensuring people, organisations and communities have access to the information they need.

SERVICES & EVENTS

DVA - Self-Care Trial

The Self-Care Trial, funded under the DVA Lifecycle Initiatives, involved the development of a website called the 'Wellbeing Toolbox'. This interactive online resource was designed to help ex-service personnel, their families and friends, who are facing challenges in the transition from a military-focussed lifestyle to civilian life. It was also hoped that some hard-to-reach veterans, who may not be inclined to seek help, would consider using a web-based resource. Participants have the option to log in and undertake a self-assessment questionnaire, and use a self-management plan to track their progress in six key areas of life often affected by this lifestyle transition. The areas are: problem solving, building support, ability to think constructively, being active, keeping calm, and sleeping better. If they choose not to log in, participants can still access the wellbeing material.

The trial of the Wellbeing Toolbox website concluded in February 2012. The trial's achievements included: a higher than anticipated number of visits to the site, averaging 20 per day; approximately 30% of people revisiting the site; and the site being most popular among the 29-49 year age group, which was the main target group. The next step for this initiative will involve an evaluation of the effectiveness of the website.

DVA - Redevelopment of the *Mental Health Advice Book* and Interactive Tool

Over the past 12 months, ACPMH has been revising and redeveloping existing resources designed to assist general practitioners and mental health practitioners treating the veteran and ex-service communities. The resources, which include the *Mental Health Advice Book*, a kit of brochures and handouts, and a website of mental health resources for GPs, provide a range of self-assessment tools, including an electronically available interactive mental health plan that GPs can complete with their patients. The website has been developed in consultation with a panel of GPs to ensure that it meets their needs.

Revision of the *Australian Guidelines for the Treatment of Acute Stress Disorder (ASD) and Posttraumatic Stress Disorder (PTSD) (the Guidelines)*

The release by ACPMH of the first Guidelines in 2007 filled a need for clinical practice guidelines for the treatment of ASD and PTSD tailored to the Australian health-care context. Practitioners, including GPs and counsellors, now had access to recommendations for the most effective treatments. The Guidelines were endorsed by the National Health and Medical Research Council (NHMRC) for a period of five years, and in order to maintain this endorsement, in the past 12 months ACPMH has commenced the process of revising and updating the Guidelines.

This process has included: completing a systematic review of literature; having the expert Working Party to the project draft guidelines; and engaging health economists to undertake an analysis of the economic implications of key recommendations. The final revised Guidelines document and supporting materials are expected to be available mid-2013, with publication and dissemination in the latter part of 2013.

Other Policy and Service Development Projects

DVA - PTSD Program Monitoring and Quality Assurance

ACPMH continues to accredit the DVA-funded PTSD treatment programs across Australia. This year ACPMH participated in a DVA-commissioned review of these programs and contributed advice and expertise on potential changes to the programs to better meet the needs of contemporary veterans.

DVA - Mental Health and Wellbeing after Military Service

In October 2011, The Hon. Warren Snowdon, MP, Minister for Veterans' Affairs, Minister for Defence Science and Personnel and Minister for Indigenous Health, launched *Mental Health and Wellbeing after Military Service*, an information resource for former serving Defence members. This resource expands upon its predecessor, *PTSD and War-related Stress*, with a broader focus on readjustment, resilience and recovery from a range of potential posttraumatic mental health conditions, including but not limited to, PTSD. *Mental Health and Wellbeing after Military Service* continues to be a valuable resource for DVA mental health providers and staff, and the veteran and ex-service communities.

DVA - Analysis of the Lifecycle Package

In 2007, the then federal Labor Government introduced the Lifecycle Package of mental health initiatives to improve wellbeing outcomes for members of the Defence community. This year, ACPMH completed an analysis of the Lifecycle Package for DVA. The report summarised the outcomes and learnings from five of the nine original projects that made up the Lifecycle Package, identified four core themes for consideration, and explored the usefulness of the lifecycle framework and its relevance to future policy and program development.

Literature Review – Psychological Intervention for Fire and Emergency Personnel

The Victorian Department of Sustainability and Environment (DSE) commissioned ACPMH to conduct a literature review focussing on prevention of psychological injury in fire and emergency responders. The review drew on academic and grey literature and gleaned key preventative recommendations for emergency responders. ACPMH provided DSE with a comprehensive policy review, providing a roadmap for operationalising the key findings of the literature review in the areas of trauma literacy and mitigation of potential effects of trauma exposure.

Review of Peer Support Policies and Procedures

In the past year, ACPMH completed a review for Bush Search and Rescue Victoria (BSAR) of their policies and procedures for supporting their volunteer searchers following a potentially traumatic event. This was followed up by a one-day training for BSAR volunteer peer supporters in providing psychological first aid.

SERVICES & EVENTS

Education and Training

Dr Darryl Wade

Director of Education and Training (Acting)



The education and training activities undertaken by ACPMH are critical to improving awareness in the area of posttraumatic mental health, and encouraging professionals and general community members to provide recommended support and interventions. Ultimately, those at risk of, or affected by, posttraumatic mental health problems are the beneficiaries of these endeavours.

2011-2012 Overview

Highlights of the 2011-2012 year include continued strong demand for ACPMH's trauma-focussed psychological therapy workshops, primarily by mental health practitioners working in private and publicly-funded work settings. Many of this year's training sessions were held in regional centres, including Townsville, Darwin, Launceston and Newcastle, as well as capital cities around Australia.

A major education and training initiative undertaken by ACPMH throughout the past year was the disaster mental health training programs in Queensland following the devastating floods and cyclones that led to three quarters of the state being declared a disaster zone in early 2011. As part of the Queensland Mental Health Natural Disaster Recovery Plan, ACPMH has worked with government departments and agencies, professional organisations, and local services to improve community members' access to effective mental health supports and interventions.

In the coming year, ACPMH is committed to developing additional online, face-to-face, and multi-modal education and training programs to enable support workers and practitioners to provide effective assistance and interventions to individuals with posttraumatic mental health problems in military, veteran and community-based settings.

Trauma-Focussed Psychological Therapy Workshops

Our two-day trauma-focussed therapy workshops improve the skills of practitioners working with children and adults who have developed emotional problems due to psychological trauma such as accidents, assault and conflict. In the past year, a total of 167 practitioners attended these workshops across Australia. Their feedback indicates that the training sessions were of high quality and effective in improving the competencies of practitioners to deliver evidence-based therapeutic interventions.

Queensland Government Natural Disaster Recovery

ACPMH has been working with Queensland Health, Department of Communities, General Practice Queensland, the Australian Psychological Society, and the Mater Hospital in Brisbane to deliver mental health training and support for practitioners as part of the Queensland Mental Health Disaster Response.

To build local capacity, ACPMH developed a training and support program for trainers and practitioners to deliver effective assistance to affected community members following large-scale disasters. The Skills for Psychological Recovery (SPR) program is an evidence-informed approach designed to assist those with mental health problems of mild severity following disaster and trauma to acquire skills to reduce their distress and cope more effectively. ACPMH commenced delivery of the SPR program in Queensland in August 2011.

Findings of the SPR program evaluation indicate that:

- More than 800 practitioners from primary care and community-based settings attended local training sessions across Queensland
- After attending training, practitioners improved their competencies to teach simple skills to affected individuals
- Most practitioners used the SPR approach with local community members following training.

ACPMH also delivered intensive two-day skills based training sessions to more than 120 specialist mental health practitioners on evidence-based psychological interventions for children and adults with diagnosable mental health conditions.

The interim evaluation findings on the effectiveness of this training indicate that:

- Practitioners who attended training improved their confidence to deliver a range of therapeutic interventions
- During the three months following training, there was a high rate of use of recommended interventions by practitioners.

Trauma and Disaster Mental Health Training for Victorian Teachers

This is a collaborative project between ACPMH and the Victorian Department of Education and Early Childhood Development (DEECD). To date, it has involved adapting the SPR approach for use by teachers in a classroom setting in a post-disaster context, and developing supporting online training resources. In the next stage, the training resources will be piloted with a small group of teachers and vice principals before being rolled out across the State school system. Student support service staff across Victoria will be trained to support teachers in the use of SPR in the classroom through a train-the-trainer model. Ideally, the program will be made available to independent and private schools.

Resilience and Stress Management Training for New Recruit Paramedics

ACPMH was approached by the Ambulance Service of New South Wales to develop a multi-session resilience and stress management training program for new recruit paramedics to help them to better understand and identify occupational and traumatic stress, and to use personal and organisational strategies to address any concerns or issues. The training program was well received by the ambulance service and represents an effective model for incorporating mental health content into induction training for new recruit emergency services personnel.

DVA - Cognitive Processing Therapy Implementation

Cognitive Processing Therapy (CPT) is an evidence-based psychological treatment for posttraumatic stress disorder (PTSD). Over the past year, ACPMH has been working with the Veterans and Veterans Families Counselling Service (VVCS) to implement CPT within their Australia-wide service, utilising a comprehensive five-phase model of training and implementation, to achieve long-term sustainable practice change.

ADF - RESET Project

ACPMH has worked closely with the Australian Defence Force (ADF) to develop an innovative program for ADF members with emerging PTSD. Using a modular and skills-based training approach, the program aims to enhance the capacity of serving members to monitor and manage their own psychological wellbeing. The program can be delivered to either groups or individuals.

DVA Staff Training to Manage Sensitive Conversations

ACPMH provided training to 28 DVA staff in July 2011 to assist them to better manage provision of services to clients reporting allegations of sexual abuse or assault. The training was also designed to assist DVA supervisors to provide emotional support to staff when needed.

Other Education and Training Projects

Over the past year ACPMH has delivered tailored training programs for a range of government and community-based organisations on recommended practices and interventions for posttraumatic mental health problems. These programs have included education and training for:

- *beyondblue* trainers to enable them to facilitate Community Support Training Program sessions to assist local communities affected by disaster
- Queensland Fire and Rescue Service to provide Psychological First Aid to members involved in critical incidents
- Victorian Student Support Service Officers to provide simple and effective interventions to members of school communities following critical incidents
- Practitioners working in community-based alcohol and drug, mental health, and rehabilitation services to assess and address clients' trauma-related mental health problems
- Counsellors working in specialist centres who support and treat women with posttraumatic mental health problems arising from sexual violence and other trauma
- Counsellors and outreach workers from the Berry Street Take Two program to provide treatment and support to children and young people with persistent posttraumatic mental health problems following the 2009 Victorian bushfires.

SERVICES & EVENTS

Events



ACPMH hosted a number of events throughout 2011-2012. These events provided an opportunity to showcase ACPMH's work, engage with our stakeholders, meet potential partners and clients, and exchange ideas with other experts working in the field.

Expert Forum

On 12 August 2011 ACPMH hosted an Expert Forum at the State Library of Victoria. The theme of the Forum was *Many paths, one purpose – Working together to promote wellbeing after trauma*, and explored trauma-related mental health issues in a global context, latest research, and best practice standards for clinicians, industry and government managing the mental health effects of trauma and disaster.

The Forum attracted keynote presenters of the highest calibre and international reputation, including Professor Jonathan Bisson from the United Kingdom (Best practice approaches to early psychosocial care following trauma and disaster), Professor Beverley Raphael (Trauma: Past, present and future), Professor Richard Bryant (ASD, PTSD, complicated grief, dissociation – where to in DSM-V?), Professor Derrick Silove (Transcultural issues in assessment and intervention for refugees and post-conflict populations), Professor Alexander McFarlane (Key issues in trauma-related mental health in veteran and military populations), Professor Mark Creamer (ACPMH history and development), and ACPMH's Associate Professor (now Professor) David Forbes (ACPMH looking forward).

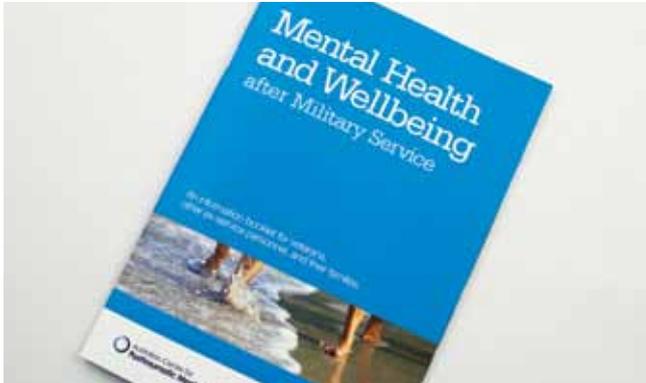


The Expert Forum was officially opened by The Hon. Warren Snowdon, MP, Minister for Veterans' Affairs, Minister for Defence Science and Personnel and Minister for Indigenous Health, and was attended by a wide range of professionals who work in the area of trauma-related mental health or whose work helps people affected by traumatic events.

In addition to the keynote presentations, there were two symposia:

Getting research out of the lab and into the field was chaired by Associate Professor Meaghan O'Donnell from ACPMH, and *Managing trauma in industry and community settings: Evidence-based practice* was chaired by Andrea Phelps, also from ACPMH.

The capacity audience responded with enthusiasm, particularly during the panel discussion and Q&A session that took place after the final presentation. The Expert Forum also gave participants and delegates the opportunity to farewell former ACPMH Director, Professor Mark Creamer.



Launch of *Mental Health and Wellbeing after Military Service* Book

On 7 October 2011, at the ACPMH offices, The Hon. Warren Snowdon, MP, Minister for Veterans' Affairs, Minister for Defence Science and Personnel and Minister for Indigenous Health officially launched *Mental Health and Wellbeing after Military Service*, a booklet providing information and advice for current and former serving personnel and their families. This booklet was revised by ACPMH on behalf of the Department of Veterans' Affairs (DVA).

This valuable resource was originally published by DVA in 1999. Since then, Australian personnel have served in Iraq and Afghanistan, and in peacekeeping roles around the world. The revised edition, which includes an extensive section on self-help management strategies, ensures contemporary veterans have up-to-date information.

For information about obtaining the new booklet, visit www.at-ease.dva.gov.au.



Launch of Wellbeing Toolbox

The Hon. Warren Snowdon, MP also launched the 'Wellbeing Toolbox' on 14 March 2011. This online self-care resource was developed by ACPMH on behalf of DVA to help ex-service personnel, their families and friends who are facing challenges from the transition from a military-focussed lifestyle to civilian life. The main intention of the Wellbeing Toolbox is to provide early intervention before problems escalate or become entrenched. The Wellbeing Toolbox can be found at www.wellbeingtoolbox.net.au. More details can be found on p10.

International visitors

Every year, ACPMH attracts a number of international visitors for various durations and purposes. This year we hosted a delegation from the Japanese National Centre for Mental Health; Dr Eva Alisic, a leading child and adolescent researcher from The Netherlands; Dr Saveen Semage, an epidemiologist who works for the Sri Lankan military; and Yan Jun, Director, Division of Mental Health Bureau of Disease Prevention and Control, Ministry of Health, People's Republic of China.

MANY PATHS, ONE PURPOSE EXPERT FORUM 2011





SERVICES & EVENTS

Publications, Presentations & Dissemination

Journal articles published

Bryant, R. A., Creamer, M., O'Donnell, M., Silove, D., & McFarlane, A. C. (2011). Heart rate after trauma and the specificity of fear circuitry disorders. *Psychological Medicine, 41*(12), 2573-2580. doi: 10.1017/S0033291711000948

Couineau, A-L., & Forbes, D. (2011). Using predictive models of behaviour change to promote evidence-based treatment for PTSD. *Psychological Trauma: Theory, Research, Practice, and Policy, 3*(3), 266-275. doi: 10.1037/a0024980

Creamer, M., Forbes, D., & Wade, D. (2012). Psychosocial recovery following disaster: A multi-level approach. *International Perspectives in Victimology, 6*(2), 121-127. doi: 10.5364/ipiv.6.2.121

Creamer, M., Varker, T., Bisson, J., Darte, K., Greenberg, N., Lau, W., Forbes, D. (2012). Guidelines for peer support in high-risk organizations: An international consensus study using the Delphi method. *Journal of Traumatic Stress, 25*(2), 134-141. doi:10.1002/jts.21685

Elhai, J. D., Contractor, A. A., Palmieri, P. A., Forbes, D., & Richardson, J. D. (2011). Exploring the relationship between underlying dimensions of posttraumatic stress disorder and depression in a national, trauma exposed military sample. *Journal of Affective Disorders, 133*(3), 477-480. doi: 10.1016/j.jad.2011.04.035

Elhai, J. D., Naifeh, J. A., Forbes, D., Ractliffe, K. C., & Tamburrino, M. (2011). Heterogeneity in clinical presentations of posttraumatic stress disorder among medical patients: Testing factor structure variation using factor mixture modeling. *Journal of Traumatic Stress, 24*(4), 435-443. doi: 10.1002/jts.20653

Forbes, D., Creamer, M., & Wade, D. (2012). Psychological support and recovery in the aftermath of natural disaster. *International Psychiatry, 9*(1), 15-17.

Forbes, D., Elhai, J. D., Lockwood, E., Creamer, M., Frueh, B. C., & Magruder, K. M. (2012). The structure of posttraumatic psychopathology in veterans attending primary care. *Journal of Anxiety Disorders, 26*(1), 95-101. doi: 10.1016/j.janxdis.2011.09.004

Forbes, D., Fletcher, S., Parslow, R., Phelps, A., O'Donnell, M., Creamer, M., Silove, D. (2012). Trauma at the hands of another: Longitudinal study of differences in the posttraumatic stress disorder symptom profile following interpersonal compared with noninterpersonal trauma. *Journal of Clinical Psychiatry, 73*(3), 372-376. doi: 10.4088/JCP.10m06640

Forbes, D., Lewis, V., Varker, T., Phelps, A., O'Donnell, M., Wade, D., Creamer, M. (2011). Psychological first aid following trauma: Implementation and evaluation framework for high-risk organizations. *Psychiatry: Interpersonal and Biological Processes, 74*(3), 224-239. doi:10.1521/psyc.2011.74.3.224

Forbes, D., Lloyd, D., Nixon, R., Elliott, P., Varker, T., Perry, D., Creamer, M. (2012). A multisite randomised controlled effectiveness trial of cognitive processing therapy for military-related posttraumatic stress disorder. *Journal of Anxiety Disorders, 26*(3), 442-452. doi:10.1016/j.janxdis.2012.01.006

Forbes, D., Lockwood, E., Elhai, J. D., Creamer, M., O'Donnell, M., Bryant, R., Silove, D. (2011). An examination of the structure of posttraumatic stress disorder in relation to the anxiety and depressive disorders. *Journal of Affective Disorders, 132*(1-2), 165-172. doi: 10.1016/j.jad.2011.02.011

Goodwill, R. J. (2012). Engaging staff communities in a knowledge transfer strategy: A case study at the University of Melbourne. *Journal of Higher Education Policy and Management, 34*(3), 285-294. doi: 10.1080/1360080X.2012.678726

Hanley, F. T., Matthews, L. R., & Lewis, V. (2011). Exploring the meaning of best practice: A discussion on the way client-centred psychosocial rehabilitation services might address the needs of Australian veterans in the future. *International Journal of Disability Management, 6*(1), 10-21. doi: 10.1375/jdmr.6.1.10

McHugh, T., Forbes, D., Bates, G., Hopwood, M., & Creamer, M., (2012). Anger in PTSD: Is there a need for a concept of PTSD-related posttraumatic anger? *Clinical Psychology Review*, 32(2), 93-104. doi: 10.1016/j.cpr.2011.07.013

Norman, P., O'Donnell, M., Creamer, M., & Barton, J. (2012). Posttraumatic stress disorder after stroke: A review of quantitative studies. In E. E. Ovuga (Ed.), *Post Traumatic Stress Disorders in a Global Context* (pp. 247-268). doi:10.5772/26799

O'Donnell, M., Lau, W., Tipping, S., Holmes, A., Ellen, S., Judson, R., Creamer, M. ... Forbes, D. (2012). Stepped early psychological intervention for posttraumatic stress disorder, other anxiety disorders, and depression following serious injury. *Journal of Traumatic Stress*, 25(2), 125-133. doi:10.1002/jts.21677

Phelps, A., Forbes, D., Hopwood, M., & Creamer, M. (2011). Trauma related dreams of Australian veterans with PTSD: Content, affect and phenomenology. *Australian and New Zealand Journal of Psychiatry*, 45(10), 853-860. doi: 10.3109/00048674.2011.599314

Rees, S., Silove, D., Chey, T., Ivancic, L., Steel, Z., Creamer, M., O'Donnell, M., ... Forbes, D. (2011) Lifetime prevalence of gender-based violence in women and the relationship with mental disorders and psychosocial function. *Journal of the American Medical Association*, 306(5), 513-521. doi:10.1001/jama.2011.1098

Wade, D., Varker, T., O'Donnell, M., & Forbes, D. (2012). Examination of the latent factor structure of the Alcohol Use Disorders Identification Test (AUDIT) in two independent trauma patient groups using Confirmatory Factor Analysis. *Journal of Substance Abuse Treatment*, 43(1), 123-128. doi:10.1016/j.jsat.2011.10.023

Journal articles accepted for publication

Gleeson, J. F. M., Cotton, S. M., Alvarez-Jimenez, M., Wade, D., Gee, D., Crisp, K., McGorry, P. (in press). A randomised controlled trial of relapse prevention therapy for first-episode psychosis patients: Outcome at 30-months follow up. *Schizophrenia Bulletin*. doi:10.1093/schbul/sbr165

Varker, T., & Devilly, G. J. (in press). An analogue trial of inoculation /resilience training for emergency services personnel: Proof of concept. *Journal of Anxiety Disorders*. doi: 10.1016/j.janxdis.2012.01.009

Wade, D., Forbes, D., Nursey, J., & Creamer, M. (in press). A multi-level framework to guide mental health response following a natural disaster. *Bereavement Care*.

Conference presentations - Invited

Couineau, A-L. (2011, August). *Improving the treatment of PTSD: What does adopting evidence-based practice really mean for organisations and clinicians?* Paper presented at the ACPMH Expert Forum, Melbourne, Australia.

Forbes, D. (2011, November). *Posttraumatic stress disorder: Risk and recovery*. Paper presented at the 4th St. Vincent's Mental Health & University of Melbourne Conference in conjunction with Swinburne University, Melbourne, Australia.

Forbes, D. (2011, September). *The outlook for treatment of veterans with posttraumatic stress disorder*. Paper presented at the RSL National Congress, Melbourne, Australia.

Forbes, D., Lloyd, D., & Perry, D. (2011, June) *Cognitive Processing Therapy for PTSD*. Paper presented at the Department of Veterans' Affairs Research Seminar, Canberra, Australia.

SERVICES & EVENTS

Forbes, D., & Varker, T. (2011, November). *Guidelines for peer support programs: An international consensus project*. Paper presented at the 6th Biennial Crisis Intervention and Management Australasia (CIMA) Conference, Melbourne, Australia.

Gardner, L. (2011, August). *Rehabilitation after trauma: It's not just about return to work*. Paper presented at the ACPMH Expert Forum, Melbourne, Australia.

Lloyd, D. (2011, August). *Cognitive Processing Therapy – an effective treatment for PTSD*. Paper presented at the ACPMH Expert Forum, Melbourne, Australia.

Lloyd, D. (2012, March). *Mental health provider policy and the Australian policy cycle*. Presentation at the University of Melbourne Masters of Public Health "Health Policy" course, Melbourne, Australia.

O'Donnell, M. (2012, May). *Early intervention following trauma. A review of the evidence*. Keynote paper presented at the 5th World Congress on Traumatic Stress, Mexico City, Mexico.

O'Donnell, M. (2011, October). *Recovery after injury: Why mental health matters*. Paper presented at the 1st Australasian Compensation Health Research Forum, Melbourne, Australia.

O'Donnell, M. (2011, August). *A stepped model for the delivery of early psychological treatment*. Paper presented at the ACPMH Expert Forum, Melbourne, Australia.

O'Donnell, M. (2011, July). *Models of early psychological intervention after trauma*. Presentation to Psychology Department, Utrecht University, Utrecht, The Netherlands.

Phelps, A. (2011, August). *Looking after your own: Psychological First Aid in the workplace*. Paper presented at the ACPMH Expert Forum, Melbourne, Australia.

Phelps, A. (2011, September). *Psychological interventions for mental health problems following trauma*. Workshop presented at the 3rd Australasian Mental Health and Psychosocial Disasters Conference, Brisbane, Australia.

Phelps, A. (2011, November) *Trauma and mental health outcomes*. Paper presented at the Southern Metropolitan region Police and CAT Emergency Response (PACER) Training Day.

Varker, T. (2011, August). *Peer support: What do the experts say?* Paper presented at the ACPMH Expert Forum, Melbourne, Australia.

Wade, D. (2011, November). *Mental health response following natural disaster: an evidence-informed approach*. Keynote paper presented at the 3rd Australian Rural & Remote Mental Health Symposium, Ballarat, Australia.

Wade, D. (2011, October). *Mental health after disaster: Building community capacity*. Paper presented at the 46th Australian Psychological Society Annual Conference, Canberra, Australia.

Wade, D. (2011, August). *Mental health after disaster: Building community capacity*. Paper presented at the ACPMH Expert Forum, Melbourne, Australia.

Conference presentations - Peer reviewed

Forbes, D., & Lloyd, D. (2011, November). *Cognitive Processing Therapy for combat-related posttraumatic stress disorder: A community based randomised controlled trial*. Paper presented at the 27th Annual Meeting of the International Society for Traumatic Stress Studies, Baltimore, USA.

Forbes, D., Lloyd, D., & van Buuren, V. (2011, October). *Cognitive Processing Therapy for combat-related posttraumatic stress disorder: A community based randomised controlled trial*. Paper presented at the 20th Australian Military Medicine Association Conference, Melbourne, Australia.

Howard, A. (2011, November). *Implementing a strategy for the early identification of substance use, anxiety and/or depression within a community health setting*. Paper presented at the Australasian Professional Society on Alcohol and Other Drugs (APSAD) 2011 Conference, Hobart, Australia.

Lewis, V., Gardner, L., & Graham, S. (2011, October). *Veteran rehabilitation: From research to practice*. Paper presented at the 20th Australian Military Medicine Association Conference, Melbourne, Australia.

Lloyd, D., Clarke, C., Phelps, A., & O'Connor, J. (2011, August). *Issues in evaluation of an open access self-care website*. Paper presented at the Australasian Evaluation Society Conference, Sydney, Australia.

Lloyd, D., Couineau, A-L., O'Connor, J., & Forbes, D. (2011, November). *Training for community based mental health workers*. Paper presented at the 27th Annual Meeting of the International Society for Traumatic Stress Studies, Baltimore, USA.

Lloyd, D., & Forbes, D. (2011, August). *A multisite randomised controlled effectiveness trial of Cognitive Processing Therapy for combat related posttraumatic stress disorder*. Paper presented at the 2011 South Australian Defence and Veteran Health Research Paper Day, Adelaide, Australia.

Nurse, J., & Clarke, C. (2011, October). *Development of a cognitive-behavioural web self-help program: The Wellbeing Toolbox*. Paper presented at the 20th Australian Military Medicine Association Conference, Melbourne, Australia.

O'Donnell, M. (2011, November). *Individual, family and social challenges to the implementation of early interventions to promote mental health after trauma and disaster*. Panel discussion at the 27th Annual Meeting of the International Society for Traumatic Stress Studies, Baltimore, USA.

Wade, D. (2012, May). *An evidence-informed mental health response to natural disaster*. Presentation at the Royal Melbourne Hospital Academic Centre Symposium, Melbourne, Australia.

Wade, D. (2012, January). *Mental health after natural disaster: Building community capacity*. Paper presented at the International Mental Health Research Colloquium, Department of Psychiatry, The University of Melbourne, Melbourne, Australia.

Wade, D., & Peard, J. (2011, November). *A learning collaborative to improve mental health and family supports to medically discharging Australian Defence Force members*. Paper presented at the 27th Annual Meeting of the International Society for Traumatic Stress Studies, Baltimore, USA.

Wade, D., Varker, T., Coates, S., Nurse, J., Fitzpatrick, T., & Creamer, M. (2011, November). *An evaluation of a Community Support Training Program in the aftermath of the Victorian bushfires*. Poster session presented at the 27th Annual Meeting of the International Society for Traumatic Stress Studies, Baltimore, USA.

Wade, D., Varker, T., O'Donnell, M., & Forbes, D. (2011, November). *Examination of the latent factor structure of the Alcohol Use Disorders Identification Test (AUDIT) in two independent trauma patient groups using Confirmatory Factor Analysis*. Paper presented at the 27th Annual Meeting of the International Society for Traumatic Stress Studies, Baltimore, USA.

OUR STAFF

During the period under review we welcomed a number of new and returning members of staff: **Nathan Alkemade** (Research Assistant), **Dr Richard Cash** (Senior Clinical Fellow), **Brooke Ferguson** (Research Assistant), **Sam Kourloufas** (Research Administrator), **Daniel Redman** (IT Officer), **Sue Scheinpflug** (CEO), **Naomi Walton** (Research Administrator).

This year we also farewelled members of staff engaged in various roles: **James Brown** (Research Administrator), **Brooke Ferguson** (Research Assistant), **Sam Kourloufas** (Research Administrator), **Associate Professor Virginia Lewis** (Principal Research Fellow), **Dr Damon Mitchell** (Research Fellow), **Dr John O'Connor** (Senior Clinical Specialist), **Robert Schmittat** (IT Officer), **Anneliese Spiteri-Staines** (Research Assistant), **Serena Thorpe** (Clinical Fellow), **Valeria Zoteyeva** (Research Assistant). We thank them for their hard work and commitment over the period that they were involved with ACPMH.

As at 30 June 2012 ACPMH's staffing group consists of:

Management Group

Professor David Forbes, Director

Sue Scheinpflug, CEO

Anne-Laure Couineau, Senior Clinical Specialist

Robyn Goodwill, Business Manager

Jane Nursey, Senior Clinical Specialist

Associate Professor Meaghan O'Donnell, Director of Research

Andrea Phelps, Acting Director, Policy and Service Improvement Advice

Dr Darryl Wade, Acting Director, Training and Education

Other Staff

Nathan Alkemade, Research Assistant

Dr Richard Cash, Senior Clinical Fellow

Jennifer Chrzanowski, Research Assistant

Jackie Clements, Research Assistant

Callum Davey, Research Administrator

Susan Fletcher, Research Assistant

Dr Lisa Dell, Research Fellow (currently on maternity leave)

Jaiganesh Govinda Swamy, Financial Officer

Alexandra Howard, Research Fellow

Dzenana Kartal, Research Assistant

Maria Humphries, Communications and Project Coordinator

Winnie Lau, Research Project Manager

Delyth Lloyd, Research Project Manager

Emma Lockwood, Research Assistant

Pauline Middelveld, Administrative Assistant

Thi Pham, Research Assistant

Daniel Redman, IT Officer

Suzie Sadikovic, Executive Assistant

Rebecca Sheehan, Administrative Assistant/Receptionist

Naomi Stevens, Research Assistant

Dr Tracey Varker, Research Fellow

Naomi Walton, Research Administrator

Dr Bronwyn Wolfgang, Research Project Manager

Honorary Staff Members

Professor Richard Bryant, Professorial Fellow

Dr John Cooper, Senior Fellow

Dr Monique Crane, Fellow

Dr Peter Elliott, Senior Fellow

Associate Professor Virginia Lewis, Principal Fellow

Associate Professor John Pead, Principal Fellow

GOVERNANCE & MANAGEMENT

Board of Management Membership and Meetings

The ACPMH Board of Management is led by an independent Chair, and includes representatives from the Departments of Veterans' Affairs and Defence and the University of Melbourne as well as an independent Director and the executive positions of Director and CEO of ACPMH.

Members of the Board of Management as at 30 June 2012:

Professor Michael Vitale (Chair)

Ms Sue Scheinflug (Secretary - appointed 16 April 2012)

Rear Admiral Robyn Walker, AM

Major General Mark Kelly, AO, DSC

Professor Ian Overall

Mr Sean Farrelly

Ms Yvonne Turner

Professor David Forbes

During the period under review, the Board of Management met on the following occasions:

- 14 September 2011
- 25 October 2011 (Annual General Meeting and standard meeting)
- 6 December 2011
- 14 February 2012
- 16 April 2012
- 19 June 2012

All meetings were attended by the Board of Management as follows:

	14 Sept 11	25 Oct 11 standard	25 Oct 11 AGM	6 Dec 11	14 Feb 12	16 Apr 12	19 Jun 12
Professor Vitale (Chair)	X	X	X	X	X	X	X
Mrs Goodwill (Secretary/Treasurer until resignation 16 Apr 2012)	X	X	X	X	X	X	
Ms Scheinflug (Secretary/Treasurer from 16 Apr 2012)				in attendance	in attendance	X	X
Professor Singh (resigned 19 Dec 2011)	X	X	X	X			
Major General Alexander (ceased 31 Dec 2011)	X	X	X	X			
Ms Turner	X	X	X	X	X	X	X
Major General Kelly	X			X	X	X	X
Mr Farrelly (appointed 14 Feb 2012)	in attendance			in attendance	X	X	X
Professor Forbes	X	X	X	X	X	X	X
Rear Admiral Walker (appointed 14 Feb 2012)					X	X	X
Professor Overall (appointed 16 Apr 2012)					in attendance	X	X

Indicates non-appointment at the time of the meeting

Indicates attendance in part

GOVERNANCE & MANAGEMENT

Significant Events

Appointments, Cessations, Resignations and Reappointments

During the year under review, there were a significant number of resignations, cessations and new members appointed to the Board of Management.

- Following the resignation of Mrs Robyn Goodwill as Secretary/Treasurer and Public Officer with effect from 16 April 2012, Ms Sue Scheinpflug was appointed Secretary and Public Officer from 16 April 2012.
- Professor David Forbes, in his role as Interim Director, was re-appointed to the Board of Management from 1 December 2011 to 29 February 2012. However, during this period, his appointment as Director was confirmed and therefore his appointment to the Board of Management commenced from that date, 1 January 2012, for a period of three years.
- Following Mr Barry Telford's earlier resignation, Mr Sean Farrelly was appointed as one of the nominees of the Department of Veterans' Affairs from 14 February 2012 to 13 February 2015.
- Following Major General Paul Alexander's cessation at the end of 2011, Rear Admiral Robyn Walker was appointed as the nominee of the Department of Defence from 14 February 2012 to 13 February 2015.
- Following Professor Bruce Singh's resignation effective from 19 December 2011, Professor Ian Overall was appointed as a nominee of The University of Melbourne from 16 April 2012 to 15 April 2015.

Appointment of the Director and CEO

A major focus during the year under review was the recruitment of the two leadership positions at ACPMH. Professor David Forbes was confirmed as Director of ACPMH commencing on 1 January 2012. Ms Sue Scheinpflug commenced as the inaugural CEO on 30 January 2012.

Rules of Association

A number of amendments were proposed, and unanimously approved, to the Rules of Association at the Board's meeting on 19 June 2012. These amendments included:

- the appointment of the Chief Executive Officer position to the Board
- the removal of inconsistencies and simplification of the Rules in relation to the number of members who need to be personally present to constitute a quorum
- the removal of the role of Treasurer from the Board
- the correction of a minor typographical error.

It is anticipated that in 2013, the Rules of Association will be refreshed and renewed in line with the commencement of new legislation governing Incorporated Associations in Victoria.

Strategic Plan

With the assistance of an external consulting group during the year, the Board worked closely with the Management Group to develop a new strategic plan. The Strategic Plan 2012-2014 was endorsed by the Board at its meeting on 16 April 2012.

Risk Management

A risk audit was undertaken with the assistance of an external consultant during the year under review. Following this audit, a risk framework, risk management policy and risk register were developed and approved by the Board.

Financial Matters

There were a number of financial matters discussed and approved by the Board of Management:

- The auditor, Craig Silvester, from CFMC Assurance Pty Ltd, was reappointed for the 2011-2012 financial year at the Annual General Meeting on 25 October 2011.
- Upon commencement as CEO, Ms Scheinpflug was approved as a signatory to all ACPMH accounts.
- The Board continued to receive reports and recommendations from the Board-appointed Finance Committee, which oversees the financial affairs of the Association. As at 30 June 2012, membership of this Committee includes, Ms Turner (Chair), Professor Vitale, Professor Forbes, Ms Scheinpflug and Mrs Goodwill.
- The operating budget for the 2011-2012 was reviewed and monitored during the year by the Finance Committee as well as by the Board of Management.
- At the April 2012 meeting, the Board approved an extensive external review of ACPMH's financial and administrative systems and procedures. The review included an analysis of operational expenditure, project budgeting, project costing and pricing model, budgetary processes and financial reporting, financial delegations, and administrative policies. A preliminary report was provided to the Chair on 25 June 2012. The final recommendations of the review are pending Board consideration, with the final report provided to the Finance Committee in July 2012.
- At every Board meeting during the reporting year, appropriate financial reports including profit and loss, balance sheet, and cash flow were thoroughly reviewed, discussed and approved.

FINANCIAL SUMMARY

Board of Management Report for the year ended 30 June 2012

The Board of Management submits the financial accounts of the Australian Centre for Posttraumatic Mental Health Inc for the financial year ended 30 June 2012.

Board Members

The Board of Management in office at any time during or since the end of the year are:

Professor Michael Vitale (Chair)

Professor David Forbes

Ms Sue Scheinpflug (Secretary - appointed 16 April 2012)

Professor Bruce Singh (Resigned 19 December 2011)

Major General Mark Kelly

Mr Sean Farrelly (Appointed 14 February 2012)

Professor Ian Everall (Appointed 16 April 2012)

Ms Yvonne Turner

Major General Paul Alexander (Ceased 31 December 2011)

Mrs Robyn Goodwill (Secretary and Treasurer - Resigned 16 April 2012)

Rear Admiral Robyn Walker (Appointed 14 February 2012)

Board members have been in office since the start of the financial year to the date of this report unless otherwise noted.

Subsequent to balance date, Ms Sue Scheinpflug resigned with effect 19 September 2012.

Principal Activities

The principal activities of the Association during the year were to build the capability of individuals, communities and organisations to understand, prevent and recover from the adverse mental health effects of trauma. The Association achieves this through world class research, policy and service development, and education and training.

Operating Results

The operating result for the year was a deficit of \$58,463 (2011- \$239,480 surplus).

The Association is exempt from income tax.

Significant Changes in State of Affairs

In the opinion of the Board of Management, there were no significant changes in the state of affairs of the Association that occurred during the financial year under review not otherwise disclosed in this report.

After Balance Date Events

There has not arisen in the interval between the end of the financial year and the date of the report any item, transaction or event of a material and unusual nature that in the opinion of the Board is likely to substantially affect the operations of the Association, the results of those operations or the Association's state of affairs in future financial years.

Future Developments

The Association will continue to carry on the principal activities noted above. There are no likely developments in the activities in future years which will affect the results and therefore require disclosure.

Indemnification and Insurance of Board

Since the end of the financial year the Association has not paid any further insurance premiums in respect of management liability insurance contracts for current and former Board of Management members of the Association.

Signed in accordance with a resolution of the Board of Management on 24 October 2012.



Professor Michael Vitale
Chairperson



Professor David Forbes
Director

FINANCIAL SUMMARY

Statement of Financial Performance for the year ended 30 June 2012

	2012	2011
	\$	\$
Income		
ADF Funding	298,453	570,490
ACPMH Expert Forum 2011	50,003	-
ACPMH PTSD Guidelines	57,060	53,377
Donations	25,258	-
DVA Funding	2,732,565	2,498,381
Interest Received	73,455	83,297
Other Research Funding	606,652	445,481
Policy and Service Improvement Advice Funding	82,798	142,965
Publications and Audio Visual Sales	14,391	22,055
Sundry Income	26,128	76,969
Training and Education	485,391	222,817
Total income	4,452,154	4,115,832
Expenditure		
Service Fees	2,844,325	2,705,000
Independent Board Member Fees	29,000	29,000
Contractors Fees	278,504	143,774
Consultants Fees	504,656	198,048
Depreciation and Amortisation	42,147	32,430
Publications Costs	97,930	54,899
Rent of Premises	205,201	198,435
Seminar Expense	5,023	20,324
Travel & Accommodation	156,004	189,352
Other Expenses	347,827	305,090
Total expenditure	4,510,617	3,876,352
Net surplus / (deficit)	(58,463)	239,480
Accumulated surplus at the beginning of the financial year	1,126,309	886,829
Accumulated surplus at the end of the financial year	1,067,846	1,126,309

The Statement of Financial Performance should be read in conjunction with the notes to the accounts.

Statement of Financial Position as at 30 June 2012

	Notes	2012 \$	2011 \$
Current Assets			
Cash and Cash Equivalents	2	1,524,737	1,550,331
Trade and Other Receivables	3	798,582	371,137
Other Assets	4	261,802	119,866
Total Current Assets		2,585,121	2,041,334
Non-Current Assets			
Property, Plant and Equipment	5	96,647	125,402
Intangible Assets	6	52,071	-
Total Non-Current Assets		148,718	125,402
Total Assets		2,733,839	2,166,736
Current Liabilities			
Trade and Other Payables	7	953,196	766,878
Interest-Bearing Loans	8	7,471	239
Provisions	9	705,326	273,310
Total Current Liabilities		1,665,993	1,040,427
Net Assets		1,067,846	1,126,309
Funds			
Accumulated surplus		1,067,846	1,126,309
Total Funds		1,067,846	1,126,309

The Statement of Financial Position should be read in conjunction with the notes to the accounts.

FINANCIAL SUMMARY

Cash Flow Statement for the year ended 30 June 2012

	Notes	2012 \$	2011 \$
Cash Flows from Operating Activities			
Receipts from sales and activities		40,519	95,418
Operating grants received		4,406,955	3,588,872
Payments to suppliers and employees		(4,481,060)	(3,873,494)
Net cash provided by operating activities	10 (b)	(33,586)	(189,204)
Cash Flows from Investing Activities			
Interest received		73,455	83,297
Payments for furniture and equipment	5	(6,338)	(30,798)
Payments for project management system	6	(59,125)	-
Net cash provided by/(used in) investing activities		7,992	52,499
Net increase/(decrease) in cash held		(25,594)	(136,705)
Cash and cash equivalents at the beginning of the financial year		1,550,331	1,687,036
Cash and cash equivalents at the end of the financial year	10 (a)	1,524,737	1,550,331

The Cash Flow Statement should be read in conjunction with the notes to the accounts.

Notes to the Financial Statements for the year ended 30 June 2012

Note 1: Statement of Significant Accounting Policies

This financial report is a special purpose report prepared for use by the Board of Management to satisfy the financial reporting requirements of the Associations Incorporations Act. The Board of Management have determined that the Association is not a reporting entity.

The financial report covers the Australian Centre for Posttraumatic Mental Health Inc as an individual entity. The Australian Centre for Posttraumatic Mental Health Inc is an association incorporated in Victoria under the Associations Incorporations Act 1981.

The report has been prepared in accordance with the requirements of the Associations Incorporations Act and the following Australian Accounting Standards:

AASB 101: Presentation of Financial Statements

AASB 107: Cash Flow Statements

AASB 108: Accounting Policies, Changes in Accounting Estimates and Errors

AASB 110: Events after the Balance Sheet Date

AASB 116: Property, Plant and Equipment

AASB 117: Leases

AASB 118: Revenue

AASB 1031: Materiality

AASB 138: Intangible Assets, Software Licences

No other Australian Accounting Standards, Australian Accounting Interpretations or other authoritative pronouncements of the Australian Accounting Standards Board have been applied in the preparation of this financial report.

The financial report is prepared on an accrual basis and is based on historical costs and does not take into account changing money values or, except where specifically stated, current valuations of non-current assets.

The following is a summary of the material accounting policies adopted by the Association in the preparation of the financial report. The accounting policies have been consistently applied, unless otherwise stated.

(a) Property, Plant and Equipment

Each class of plant and equipment is carried at cost or fair value less, where applicable, any accumulated depreciation.

Furniture and Office Equipment

Furniture and office equipment is measured on the cost basis.

Depreciation

All fixed assets are depreciated on a diminishing value basis over their useful lives to the Association.

FINANCIAL SUMMARY

Notes to the Financial Statements for the year ended 30 June 2012

Note 1: Statement of Significant Accounting Policies (continued)

(b) Unearned Income / Work In Progress

The liability for unearned income is the unutilised amount of grants received on the condition that specified services are delivered or conditions are fulfilled. Whilst agreed services are usually provided or the conditions usually fulfilled within 12 months of receipt of the grant, where some portion of the agreed services are yet to be provided as at the end of the financial year, a provision is recognised based on the estimated amount of services that will be provided after year end.

Work In Progress

Any work undertaken for which an invoice is yet to be raised is recorded as a Current Asset. Adjustments have been made to comparative information where required to ensure consistent disclosure.

(c) Service Fees

Service fees are primarily charged by the University of Melbourne in respect of staff utilised by the Association. Service fee amounts are calculated as percentage of wages and salaries, sick leave, applicable superannuation and also includes provision for annual and long service leave entitlements and associated on-costs such as work cover and payroll tax met by the University.

(d) Taxation

Income Tax

The Association is a tax concession charity for the purposes of Australian taxation legislation and is therefore exempt from income tax. This exemption has been confirmed by the Australian Taxation Office.

Goods and Services Tax (GST)

Revenues, expenses and assets are recognised net of the amount of GST except where the amount of GST incurred is not recoverable from the Australian Taxation Office, in which case it is recognised as part of the cost of acquisition of an asset or as part of an item of expense.

	2012	2011
	\$	\$
Note 2: Cash and Cash Equivalents		
Petty Cash	500	500
Cash at Bank - NAB Public Fund Account	384	1,000
Cash at Bank - NAB Cheque Account	748,270	803,831
Term Deposit - NAB (Bank Gte)	245,000	245,000
Term Deposit - NAB (Investment)	530,583	500,000
	1,524,737	1,550,331

Note 3: Trade and Other Receivables

Current

Trade Debtors	754,835	323,159
Security Deposit	43,747	47,978
	798,582	371,137

	2012	2011
	\$	\$

Note 4: Other Assets

Current

NAB TD Interest Accrued	12,237	15,190
Prepayments	51,469	11,083
Rent and Outgoings In Advance	23,959	23,008
Work In Advance	16,723	772
Work In Progress	157,414	69,813
	261,802	119,866

Note 5: Property, Plant and Equipment

Furniture and Office Equipment, at Cost	413,556	407,218
Less: Accumulated Depreciation	(316,909)	(281,816)
	96,647	125,402

Note 6: Intangible Assets

Project Management System	59,125	-
Less: Accumulated Amortisation	(7,054)	-
	52,071	-

Note 7: Trade and Other Payables

Current

Trade Creditors	104,205	14,869
Accruals	822,353	747,142
GST Owing	26,638	4,867
	953,196	766,878

Note 8: Borrowings

Current

Credit Cards	7,471	239
	7,471	239

Note 9: Provisions

Current

Unearned Income	699,718	212,310
Executive Recruitment	-	61,000
Employee Entitlements	5,608	-
	705,326	273,310

FINANCIAL SUMMARY

Notes to the Financial Statements for the year ended 30 June 2012

Note 10: Notes to the Cash Flow Statement

(a) Reconciliation of cash and cash equivalents

For the purposes of the cash flow statement, cash and cash equivalents includes cash on hand and in banks and investments in money market instruments, net of outstanding bank overdrafts. Cash and cash equivalents at the end of the financial year as shown in the cash flow statement is reconciled to the related items in the balance sheet as follows:

	2012	2011
	\$	\$
Petty Cash	500	500
Cash at Bank - NAB Public Fund Account	384	1,000
Cash at Bank - NAB Cheque Account	748,270	803,831
Term deposit - NAB (Bank Gte)	245,000	245,000
Term deposit - NAB (Investment)	530,583	500,000
	1,524,737	1,550,331

(b) Reconciliation of surplus/(deficit) for the year to net cash flows from operating activities

Net surplus / (deficit) for the year	(58,463)	239,480
Depreciation	35,093	32,430
Amortisation of intangibles	7,054	-
Net finance income	(73,455)	(83,297)

Changes in assets and liabilities, net of effects from acquisitions and disposals of businesses:

(Increase) / decrease in assets

Trade and other receivables	(427,445)	127,610
Other assets	(141,936)	5,877

Increase / (decrease) in liabilities

Trade and other payables	186,318	4,420
Borrowings	7,232	(869)
Provisions	432,016	(514,855)

Net cash from operating activities	(33,586)	(189,204)
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Note 11: Lease Commitments and Bank Guarantee

	2012	2011
	\$	\$
(a) Lease Commitments		
Current (less than 12 months)	213,125	213,125
Non-Current (more than 12 months)	177,604	390,729
	390,729	603,854

Bank guarantees totalling \$149,239 are in place at 30 June 2012 in respect of leases and credit card facilities.

Board of Management Declaration

The Board of Management have determined that the Association is not a reporting entity.

The Board of Management have determined that this special financial report should be prepared in accordance with the accounting policies described in Note 1 to these financial statements.

In the opinion of the Board of Management:

1. The financial statements and notes to the financial statements for the year ended 30 June 2012 present fairly the financial position of the Association at 30 June 2012 and the results of its operations for the year then ended in accordance with the accounting policies described in Note 1 to the financial statements.
2. There are reasonable grounds to believe the Association will be able to pay its debts as and when they become due and payable.

This declaration is made in accordance with a resolution of the Board and is signed for and on behalf of the Board on 24 October 2012.



Professor Michael Vitale
Chairperson



Professor David Forbes
Director

FINANCIAL SUMMARY

Independent Audit Report

To the members of Australian Centre for Posttraumatic Mental Health Inc.

Report on the Financial Report

We have audited the accompanying financial report, being a special purpose financial report, of the Australian Centre for Posttraumatic Mental Health Inc. (the Association), which comprises the Statement of Financial Position as at 30 June 2012, and the Statement of Financial Performance, a summary of significant accounting policies, other explanatory notes and the statement by the Board of Management.

Board of Management's Responsibility for the Financial Report

The Board of Management of the Association is responsible for the preparation and fair presentation of the financial report and have determined that the accounting policies described in Note 1 to the financial statements, which form part of the financial report, are consistent with the financial reporting requirements of the Associations Incorporation Act 1981 and are appropriate to meet the needs of the members. The Board of Management's responsibilities also include establishing and maintaining internal control relevant to the preparation and fair presentation of the financial report that 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.

Auditor's Responsibility

Our responsibility is to express an opinion on the financial report based on our audit. No opinion is expressed as to whether the accounting policies used, as described in Note 1, are appropriate to meet the needs of the members. We conducted our audit in accordance with Australian Auditing Standards. These Auditing Standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial report 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. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the Board, as well as evaluating the overall presentation of the financial report.

The financial report has been prepared for distribution to members for the purpose of fulfilling the Board of Management's financial reporting under the Association Incorporation Act 1981. We disclaim any assumption of responsibility for any reliance on this report or on the financial report to which it relates to any person other than the members, or for any purpose other than that for which it was prepared.

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

Independence

In conducting our audit, we have complied with the independence requirements of Australian professional ethical pronouncements.

Auditor's Opinion

In our opinion, the financial report of the Australian Centre for Posttraumatic Mental Health Inc. presents fairly, in all material respects the financial position of the association as of 30 June 2012 and of its financial performance for the year then ended in accordance with the accounting policies described in Note 1 to the financial statements.

Basis of Accounting and Restriction on Distribution

Without modifying our opinion, we draw attention to Note 1 to the financial report, which describes the basis of accounting. The financial report has been prepared to assist Australian Centre for Posttraumatic Mental Health Inc. to meet the requirements of the Associations Incorporation Act 1981. As a result, the financial report may not be suitable for another purpose.

CFMC Assurance Pty Ltd

Chartered Accountants



Craig Silvester

Director

Dated this 24th day of October 2012 at Melbourne

Disclaimer

The additional financial information presented on the following page is in accordance with the books and records of the Association which have been subjected to the auditing procedures applied in my statutory audit of the Association for the year ended 30 June 2012. It would be appreciated that my audit did not cover all details of the additional financial information. Accordingly, I do not express an opinion on such financial information and no warranty of accuracy or reliability is given.

In accordance with my firm policy, I advise that I do not undertake any responsibility arising in any way whatsoever to any person (other than the Association) in respect of such information, including any errors or omissions therein, arising through negligence or otherwise however caused.

CFMC Assurance Pty Ltd

Chartered Accountants



Craig Silvester

Director

Dated this 24th day of October 2012 at Melbourne

FINANCIAL SUMMARY

Statement of Income & Expenditure for the year ended 30 June 2012

	2012 \$	2011 \$
Income		
ADF Funding	298,453	570,490
ACPMH Expert Forum 2011	50,003	-
ACPMH PTSD Guidelines	57,060	53,377
Donations	25,258	-
DVA Funding	2,732,565	2,498,381
Interest Received	73,455	83,297
Other Research Funding	606,652	445,481
Policy and Service Improvement and Advice	82,798	142,965
Publications and Audio Visual Sales	14,391	22,055
Sundry Income	26,128	76,969
Training and Education	485,391	222,817
Total income	4,452,154	4,115,832
Expenditure		
Advertising	5,185	7,666
Audit Fees	16,980	18,295
Bank Charges	8,882	7,874
Catering	28,997	18,106
Computer Costs	17,453	1,526
Conference Costs	-	17,379
Contractors Fees	278,504	143,774
Consultants Fees	504,656	198,048
Depreciation and Amortisation	42,147	32,430
General	23,879	1,295
Independent Board Member Fees	29,000	29,000
Insurance	31,762	32,588
Internet	19,245	18,439
Magazines, Journals and Books	267	1,149
Materials and Equipment	6,790	8,004
Office Supplies	14,441	17,780
Outgoings	75,538	92,693
Postage, Couriers and Freight	11,578	11,790
Printing, Production and Photocopying	97,930	54,899
Rent of Premises	205,201	198,435
Service Fees	2,844,325	2,705,000
Scholarships	33,749	5,856
Subscriptions and Licences	2,462	6,459
Telephone	19,002	19,127
Travel and Accommodation	156,004	189,352
Utilities	31,617	36,443
Venue Hire	5,023	2,945
Total expenditure	4,510,617	3,876,352
Net surplus / (deficit) for the year	(58,463)	239,480



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THE UNIVERSITY OF
MELBOURNE