

# 2019 Annual Report





Sonder is a not-for-profit organisation providing services to improve mental health and wellbeing in communities across South Australia.

Sonder delivers a range of primary health services including mental health counselling, alcohol and other drug treatment, employment support and Aboriginal health.

At Sonder, we are committed to improving the patient journey through integrated and coordinated care. We ensure clients are able to access multiple service types to address their needs and receive high quality, culturally appropriate care.

## Our vision

Better Care, Better Health

## Our values

Respect, fairness, equity, honesty & trust

## Our purpose

Deliver high quality, local healthcare

**Sonder acknowledges Aboriginal and Torres Strait Islander Peoples as the First Peoples of Australia and we pay respect to the Elders past and present whom we share this great country with.**

### Artwork by: Jordan Lovegrove

This artwork depicts Sonder's relationship with the Closing the Gap (CTG) teams.

It represents the contribution of the CTG team to improving access to culturally appropriate mainstream primary care services for Aboriginal and Torres Strait Islander People.

Sonder is represented by the large central meeting place while the four smaller meeting places

represent the individual CTG teams, located in Adelaide's north, south, west and country.

The teams are connected by pathways to demonstrate a commitment of working together.

The other smaller meeting places represent external service providers, whilst the dot patterns throughout are the different people and communities helped by Sonder and the CTG teams.



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## Report from the Chairman



**Dr Rizwan Latif**  
Chairman

I am very proud and honoured to report to the Membership and stakeholders of Sonder on our performance over the past financial year. I assumed the role of Chair, following the resignation of Dr Richard Heah from the role at the beginning of the FY and I want to acknowledge the immense contribution made by Richard to the region and the development of Sonder and the Northern Health Network before that. Richard continues to serve as a Director and continues to play a vital role in not only overseeing the affairs of Sonder but he also plays a key role in improving the patient pathway from NALHN to primary care.

I also want to acknowledge the role of our newest Director, Dr Kali Hayward. Kali joined the Board following the resignation of Dr Farooq Ahmad and she has in a short while brought new insights into what Sonder must

do to become a culturally safe organisation. I also wish to pay my humble thanks to Farooq, who also made a huge contribution to the NHN and formed part of the Sonder Board during the significant growth in services and income. Farooq continues to play a role at Sonder as the CPD clinical advisor.

It will be remiss of me to not mention the vital role played by Members of both the NRGPC and SRGPC - these regional GP councils are the eyes and ears of GPs and through their vital input, Sonder has been more responsive to the needs of general practices and their staff. For Sonder, a one third increase in referrals to our headspace Onkaparinga Centre is the proxy measure of the success of our GP engagement in the south.

The Board has had the joy of being a part of the rapid growth and expansion of Sonder services but of great importance for the Board is to ensure that this growth is planned and sustainable and the Board has introduced a range of operational and strategic planning initiatives to future-proof our organisation. The Board is also vigilant to ensure that the current growth cycle of Sonder does not deviate from our singular focus on supporting the most vulnerable in our communities. We do this through excellence in service delivery, a focus on training and development and through building strong partnerships. I trust you will

get as much joy from reading of these success in this Annual Report as we as Board Directors do from over-sighting these matters.

Finally, I wish to thank and acknowledge the persons responsible for this quest for excellence and innovation - our staff and the leadership teams led by Sageran. The Board continues to have great confidence in the management personnel and we recognise that the stability and growth of Sonder must be attributed to the manner with which the strategy of Sonder has been executed so capably by the CEO and his Executive Management Team. There has been much recruitment over the past few years but the Board is delighted to note that the culture of the teams is still as strong as it was when the NHN had just over 3 dozen staff. To sustain the culture and values across 250 staff is a challenge and as the Chair I am proud of the efforts and passion of our staff.

There is much to do as we as a society deal with global threats, increasing numbers of vulnerable individuals, an ageing population and increased demands on our health services. The Board is pleased that Sonder is making strides in its endeavour to be a part of the solution to these immense social and economic challenges.

# Report from the CEO

“ We are trying hard to build innovative and responsive service models and we are working hard on making sure that the gains of Sonder are sustained. ”



**Sageran Naidoo**  
CEO

To review the activities of this past financial year is in effect a review of chaos and hate.

But such a review is also the telling of stories of hope and sacrifice that stand in stark contrast to the world at large: this Annual Report contains the tales of what Sonder is doing to resist this chaos and hate.

No review of the past year is possible without first calling out the deception, deceit and discontent that that has characterised so much of the world outside the Sonder world. Across the globe we, at first hand and in our lifetime, are seeing the impacts of climate change. We see the dislocation caused by a warming planet and the scarcity of food and water. We see too the movement of entire populations across land and sea in the quest for a better life and we see the hate that confronts them. The battle between the haves and the have nots is taking place across the globe today and oftentimes in our own communities.

A consequence of this battle for resources is the creation of fearful electorates who have bought into the illusion of nationalism and racism and who have placed crosses next to names of the foolish and foolhardy. Populists and far right conservatives have been elected in our country, across the West and in developing

nations. Too many workers have bought into the hate and voted for politicians who are anti-poor and anti-workers. Rhetoric has replaced logic and the result is that in 2019 we have a world that is more at risk of global war, more at risk of abandoning the victims of climate change and more at risk of economic ruin.

Yet in the face of such negativity there are glimmers of light. One oh so young Swedish teenager brought millions to voice their collective anger at the failure of world leaders to save the world. Pro-independence citizens in Hong Kong armed sometimes with just umbrellas resisted an army that sought to subjugate them. And in America and Britain, electorates that had been duped into voting for thieves and scoundrels are slowly trying to re-establish their respective democracies.

I would humbly argue that Sonder at our local and community level is part of this broader resistance

to the established order. Our focus on vulnerable and the disenfranchised is in keeping with our broad mandate and our Values. We have seen another year of growth and expansion and inside the pages of this Annual Report we have tried to catalogue our achievements and our challenges.

Where we have erred, we have owned our mistakes and tried to find the solutions for such errors – the changes to the Allied Health Solutions program fall into this category. Where we have faced increasing numbers of clients we have tried to bring new funds into a region – the stories about our emerge, In Home Withdrawal program and our Sonder Employment Solutions program tell of our ability to innovate to address a new or unmet need. Where we have faced burgeoning increases in wait times, we have improved our productivity and efficiency to try to squeeze every dollar of funding into front line services. The

stories about our headspace and MH&AOD services speak to these efforts.

There is much that we have to be proud of: growth in income of 71%; increase in the number of service locations to 17; increase in the savings that we are setting aside for that rainy day; greater expenditure on learning and development; increased capacity across research and evaluation. All signs of a healthy organisation. But the increase in client numbers, the increase in acuity of the diagnoses of our clients; the compulsion for clients to wait longer and longer to access a service; the challenge of multi-morbidities all speak to the increasing vulnerability of our clients and the communities that support them.

We are working hard on listening better to the voices of our community members and health professionals. We are trying hard to build innovative and responsive

service models and we are working hard on making sure that the gains of Sonder are sustained. And more than anything else we are working hard to make sure that in all we do, we foreground excellence and quality of the client interface.

I acknowledge the further development and renewal of the Board and the GP Councils. Excellence in service delivery is possible only with good governance and in that Sonder is blessed with a passionate and Values driven Board. The staff of Sonder continue to be the bedrock upon which all our good work is built and the addition of about 150 new staff into the Sonder family has only enhanced our responsiveness and enriched our Culture.

It is an honour to lead a team that in our small part of the world is so splendidly keeping the chaos and hate at bay.

# Board members

We would like to thank our Sonder Board for their valuable contributions to the organisation.



## Dr Rizwan Latif

Chairman

### General Practitioner in Craigmore

Extensive professional medical practice experience in the northern region for over 11 years. On various State Clinical Committees. Clinical Lecturer at Adelaide University and Clinical Examiner Australian Medical Council. Vice president of the Pakistan Medical Association.



## Mr Danny Haydon

Vice Chairman

### Principal, Health Division, Brentnalls Health

Danny has been a business consultant to the medical and allied health industry since 2008, advising on all areas of practice management including business planning, infrastructure development, HR management, and increasing available services.

Danny's comprehensive experience in the health sector means he's committed to building viable medical and allied health practices so they can achieve their goals.



## Dr Richard Heah

### General Practitioner in Elizabeth

Over 20 years of professional medical practice experience in the northern region. Director of Corporate Health Group – a multi-disciplinary, multi clinic company. Keen interest in Medical Education and involved as a mentor for IMG and RACGP Examiner, AHPRA Nominee for PESCI and Tribunal. Business and finance management experience with Certificate as Graduate of Australian Institute of Company of Directors.



## Dr Seema Jain

### General Practitioner in Elizabeth Grove

Practice principal with over 16 years' experience working in various hospitals in SA and interstate, with exposure across a wide range of sectors. Extensive experience working with Aboriginal & Torres Strait Islander health issues. Has been teaching Medical Students and supervising Medical Registrars for a number of years.



## Dr Sudheer Talari

### Medical Practitioner in Gawler

Over 9 years experience as a Medical Practitioner. Is the president of SEMA (Salisbury Elizabeth Medical Association).

Dr Talari was an examiner for MOCK exams designed for medical students, general practitioners and AMC candidates conducted by ACMA, NAML, NHN, AOGP and RACGP clinical bridging course. Has had experience running workshops for international medical graduates for their AMC clinical and FRACGP OSCE exams.



## Dr Kali Hayward

### General Practitioner in Elizabeth

Dr Hayward is descended from the Warnman Peoples of Western Australia. She has been working as a GP for 10 years at Nunkuwarrin Yunti and also practices at the Aboriginal Family Clinic in Noarlunga. Dr Hayward is a Medical Educator and GP Registrar supervisor for GPEx.

She is the immediate past President of the Australian Indigenous Doctors' Association which is striving to encourage more Aboriginal and Torres Strait Islanders to pursue a career in medicine.



## Mr John Manning

Chair of Risk & Finance Sub Committee

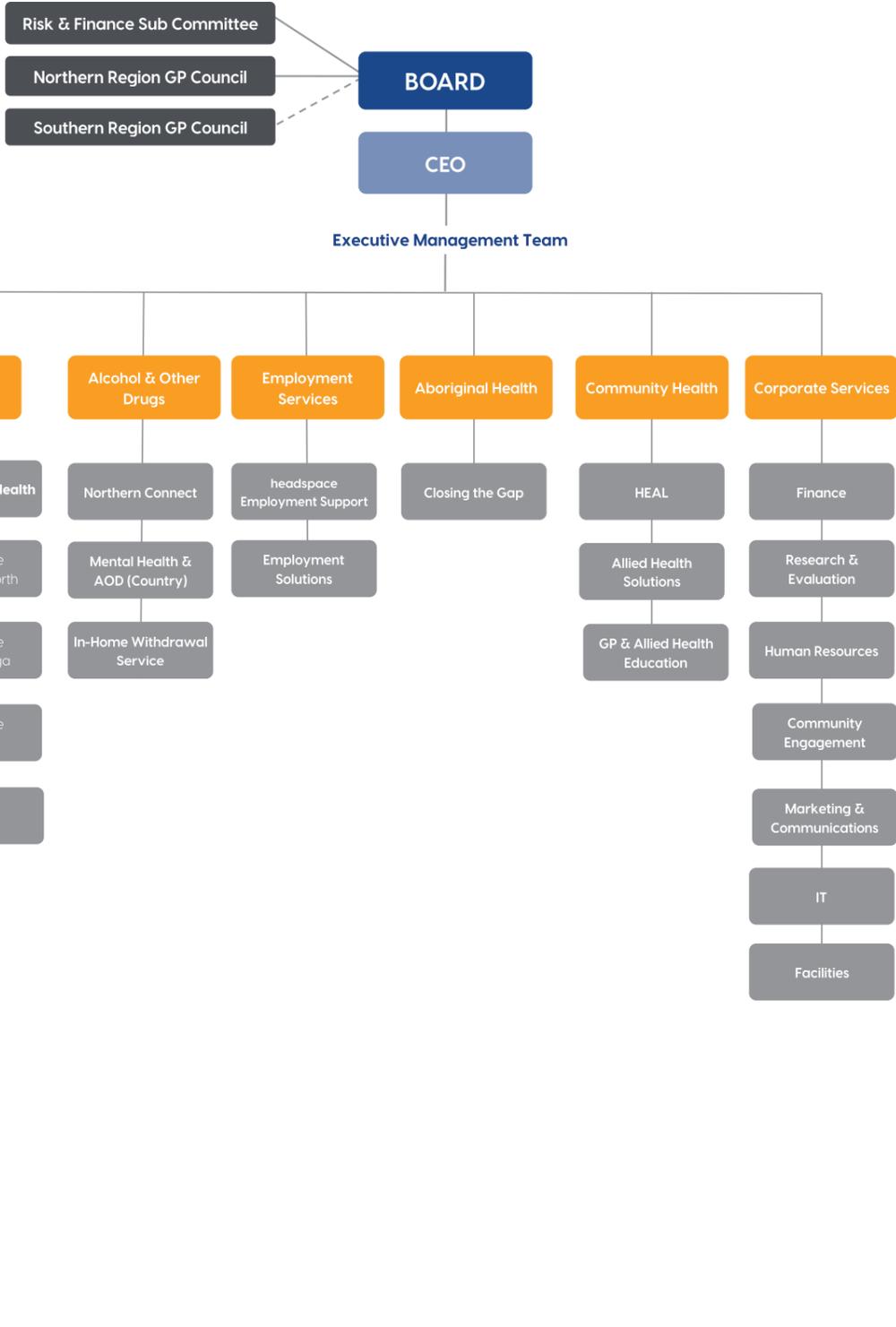
### Managing Director at Dewings Accounting

John Manning is the managing director of Dewings, a boutique firm of Accountants and Business Advisers based in Adelaide.

He has worked in accounting, IT and HR at a number of firms and has rich background in business and how the various components of an organisation work together to achieve results. John is a regular speaker on a range of business issues with various organisations. He also holds a Masters of Divinity and has served as a board member for local and national not-for-profit boards. He is also an affiliate member of the Institute of Chartered Accountants.



# Our service mix



# Our services

In the 2018-19 financial year, we diversified our range of services to help clients across the age range and complexity of health and wellbeing concerns.

Sonder now provides a broader range of services including:



MENTAL HEALTH



ALCOHOL & OTHER DRUGS



ABORIGINAL HEALTH



COMMUNITY PROGRAMS



HEALTH PROFESSIONAL SUPPORT



SUICIDE PREVENTION



EMPLOYMENT SUPPORT

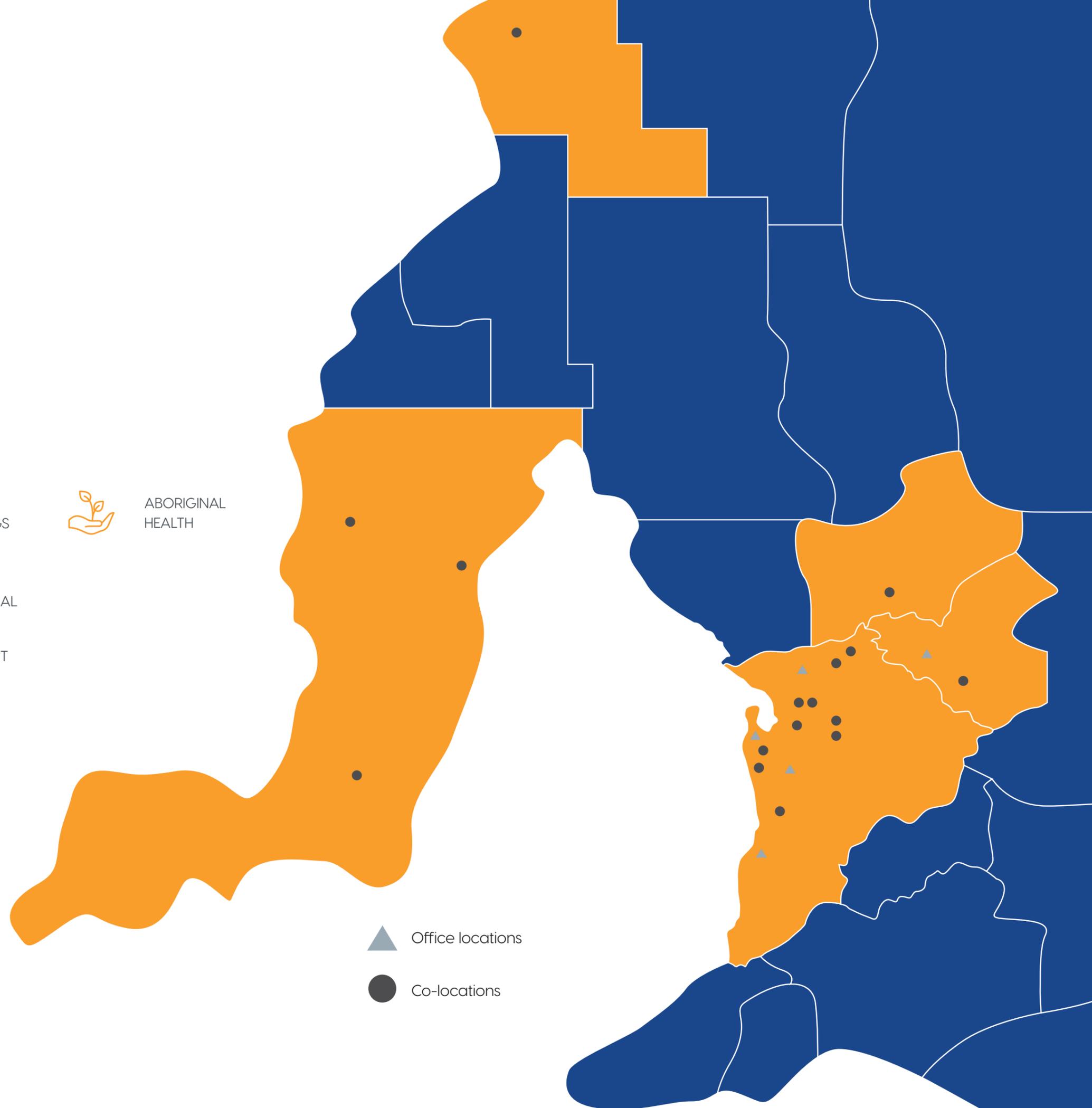


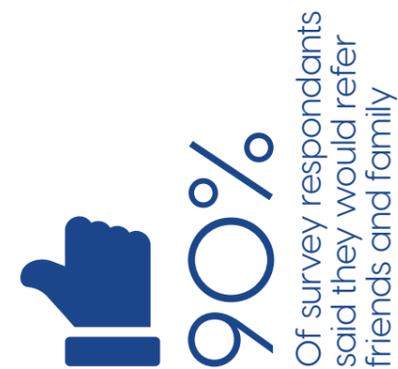
CASE MANAGEMENT



PALLIATIVE CARE

We delivered 25 types of services in 21 different locations across South Australia.





## Adult mental health

The 2018/19 Financial Year saw the emergence of a dedicated portfolio of adult mental health and alcohol and other drug services. The bringing together of Sonder's long standing adult mental health and alcohol and other drug services has ensured stable leadership, governance and strategic direction in response to the rapid expansion of Sonder's mental health services across the core delivery areas of youth, adult and employment.

The Mental Health & AOD portfolio supports an integrated suite of recovery orientated clinical mental health and alcohol and other drug services that support individuals across the western and northern suburbs as well as the Gawler Barossa region. Sonder's programs are designed for specific groups of people, including children and

families, expecting mothers, young people, people from culturally diverse backgrounds and people coping with alcohol and or drug problems.

The wellbeing of individuals and the whole community is at the centre of all that Sonder does. Our person centred focus is underpinned by a Clinical Governance Framework that underlines enhanced access and individualised care, with a commitment to ensuring access to services as early as possible to prevent, delay and reduce potential impact and improve individual outcomes.

Sonder's culture, steeped in respect, fairness, equity, honesty and trust is delivered through a vibrant, dedicated and inspiring team of clinicians. These qualities

along with their expertise ensure Sonder is able to provide excellent mental health care to those in need. The outstanding work of Sonder's clinicians could not be possible without the tireless, caring and compassionate work of the MH & AOD leadership team.

This year has seen Sonder and its clients achieve many incredible things. Sonder's metropolitan and country adult mental health services delivered just under 39,000 occasions of service, a 36% increase from last year, to over 6,400 people. 72% of individuals accessing psychological therapies demonstrated improved wellbeing and a reduction in the severity of their symptoms. More than 50% of people accessing services were between the ages of 16-35. Key themes from Sonder's client experience survey show

an overall positive experience. Sonder's MH & AOD clinicians were described as open, reliable and nurturing. Additionally, many individuals expressed gratitude, commenting on the positive way in which Sonder has helped them.

The survey also showed high levels of satisfaction and accessibility with 90% of respondents saying they would refer family and friends. Across the 8 domains of client experience - 'Views and Concern'; 'Staff Communicated'; 'Confidence in Safety'; 'Involved in Decision Making'; 'Respect and Dignity'; 'Cultural Respect'; 'Kept informed about care'; 'Cared for' - all categories received a positive response of over 90%.

Since its inception in October 2018, demand for Sonder's Walk-In Afterhours Mental Health Service has grown. On the back of this growth and wider community awareness, this unique and valuable service expanded to 4 nights per week from August 2019. Providing a bridge between the services of phone support and hospital intervention, the service offers assessment, brief solution focused therapy, referral, appointment arrangement and follow-up as well as education and information to individuals experiencing concerns such as stress, grief, depression and anxiety in the after-hours period between 5pm and 10pm.

In recognition of the difficulty in finding the right people with the right expertise and values, Sonder continues to invest heavily in the next generation of clinicians through its Mental Health Clinical Internship program. The success of the program is attributed to the commitment of Sonder to provide the best opportunities for interns

to develop their clinical skills. A key success has been the graduation and accreditation of two mental health clinical interns as well as their subsequent employment.

Sonder's thriving partnership with Flinders University also demonstrates an organisational commitment and dedication to clinical workforce development, with 5 students from the Masters in Cognitive Behavioural Therapy course undertaking clinical placements at Sonder in the past year alone. As an organisation with a strong focus on the future, Sonder continues to work in innovative ways to develop and sustain a highly trained workforce. This is of the highest importance as it enables the delivery of the highest quality of clinical services.

A key development in the second half the year has been the implementation of the SA Health endorsed 'Connecting with People' approach. Which is an internationally recognised, evidence-based suicide and self-harm mitigation and prevention training program for clinical staff. The approach forms part of the South Australian Suicide Prevention Plan 2017-2021. The approach recognises the person and their protective factors and presents an important opportunity to align Sonder's practice with SA Health services to the betterment of individuals.

Sonder was approached by Country SA PHN to co-design a pilot program delivering 'in reach' psychological services within a Residential Care Facility. Service delivery of this innovative program commenced early in 2019 at two facilities in Nuriootpa. Even in the early stages of service delivery, the program has already begun

to demonstrate improved mental health and wellbeing experiences and outcomes for residents. Individuals involved in the program and their families have described themselves and their loved ones as revitalised and more resilient.

Sonder's inventive and unique Living Well Serious Illness program sits uniquely in the primary health space, providing step-up (into Specialist Palliative Care Services for people experiencing complex and unmanaged symptoms) and step-down (GP care) levels of care for people living with a progressive and life-limiting illness living in the Gawler Barossa Region.

Despite the program consistently providing significantly positive outcomes, 64% of participants indicated an improvement in quality of life and 75% an increase in health literacy/advocacy, the program faces significant challenges as funding for the program is phased out, with funding ending in 2021. We will be working hard over the next 12 to 18 months to explore new and sustainable funding opportunities.

“My experience with Sonder was nothing short of amazing. I walked away from every session feeling better about myself and my outlook on life.

- Sonder client

## Alcohol & other drugs services

Sonder remains committed to the delivery of effective Alcohol and Other Drug services across metropolitan Adelaide and the Gawler Barossa region as well as investing in systemic approaches to treatments of clients who present with co-occurring substance use and mental health disorders. During the 2018/19 Financial Year, this commitment resulted in continued positive outcomes along with the consolidation and expansion of services.

In early 2019, Sonder was announced as a successful provider of services under the Federal Department of Health's SA AOD Treatment Grant Opportunity. From September 2019 Sonder has delivered an in-home withdrawal management service for people aged 30 years and over, within

the two identified regions of unmet need, the Playford and Port Adelaide LGAs. Playford and Port Adelaide represent an ideal location to deliver in-home withdrawal management services due to the lack of support and existing services available for people aged 30 years and over and the high rate of substance use in this population.

Significant numbers of individuals accessing our Alcohol and Other Drug services in the Gawler Barossa region experienced positive outcomes; 67% of clients reported an increase in social connectedness, 74% showed a decrease in substance misuse, 66% presented with an increase in their ability to effectively manage their issues and 68% reported an increase in protective factors.

“

I cannot express enough how this has helped me. As I also cannot express enough my praise and appreciation for Sonder. Thank you.

- Sonder client ”

The Northern Connect project continued to grow its presence in the community. Working closely with our consortium members, Life Without Barriers and Uniting Communities as well as key partner Drug and Alcohol Services South Australia (DASSA), individuals with co-occurring substance use and mental health disorders were able to be treated effectively, more efficiently and more seamlessly through a stepped, shared model of care.

The project received 403 referrals, a 43% increase from last year. Additionally, GP engagement remained strong with a 7% increase in referrals from general practices.





2,232

Young people accessed youth mental health services



46%

increase from last year



8,811

Occasions of service delivered

## Youth mental health

The Youth Services Stream had a strong year characterised by periods of growth, expansion and consolidation.

At the end of the 18/19 FY the Youth Services stream staffing profile comprised 48 individuals, representing a 92% percentage growth in staffing numbers from the previous FY.

At the end of the Financial Year, the youth services programs Sonder was funded to deliver included the headspace Edinburgh North and headspace Onkaparinga Centres, emerge and emergED

During the Financial Year, Sonder was also successful in applying to become Lead Agency of the

headspace Adelaide service (including the headspace primary and youth early psychosis programs), with lead agency transition taking effect as of 1st July 2019.

The increase in staffing numbers within the youth services portfolio was due largely to the commencement of Sonder's newly funded PHN programs for young people with complex mental health conditions (emerge and emergED) and the addition to our workforce of clinical, functional recovery and peer support staff to deliver these programs.

Demand across Sonder's youth services programs continued to growth in the 18/19 FY, with a 20 percent increase in service

delivery (occasions of service) at headspace Edinburgh North and headspace Onkaparinga.

### headspace Edinburgh North

headspace Edinburgh North is funded by the Adelaide PHN to deliver mental health services and initiatives to young people aged 12 to 25 with low to moderate mental health concerns. The service has dedicated staff and a Youth Reference Group (YRG), with the YRG volunteering their time and energy into ensuring that the centre remains youth focused and youth friendly.

A key milestone for the service was the move into new premises in early January 2019. The new



site provides a state of the art and purpose built facility for young people to access early intervention mental health support in the Northern Adelaide metropolitan region. The new building provides an increase in the number and size of counselling rooms, a GP treatment room and large spaces to run group programs and training. This new space has allowed the service to offer a variety of group programs including psychoeducation for anxiety and depression, a mindfulness and relaxation group, goal setting groups and DBT informed groups.

headspace Edinburgh North has been active within the northern community supporting diverse events such as local school wellbeing events, local school harmony days, the Northern Cultural Soccer Cup, Barossa Rams Rugby Club Event, Gawler Reconciliation Community Fun Day, R U Ok Day and the RAA Street Smart High Event.

The centre has continued to build strong relationships with consortium partners. Uniting Communities and Mission Australia provide co-located services addressing family difficulties and young people experiencing drug and alcohol concerns.

The centre continued to innovate, trialling technological mental health platforms and tools such as the Innowell Platform which aims to better address the mental health needs of young people. In addition, the centre partnered with Flinders University to conduct research to assess the prevalence of trauma for young people presenting at the service and the introduction of evidence-based trauma informed therapies.

### headspace Onkaparinga

The headspace Onkaparinga service transitioned to Sonder in July 2018 and embarked upon a period of growth in service capability and expansion associated with this transition. Sonder established a strong Consortium, with key partners (Workskil Australia, Mission Australia and SHINE SA) providing onsite service delivery to ensure that young people could gain vocational, alcohol and drug support and sexual health counselling onsite.

During the 2018/19 Financial Year, the centre hosted Master of Psychology students who provided 'brief intervention skills sessions' for young people and held presentations for parents on topics such as sleep, depression, behavioural activation, drug and alcohol use, and relationships/ attachment.

Additionally, the centre held Mother – Daughter Art Therapy sessions and music workshops which focused on the skills of hand-drumming, whilst allowing space for social development and connection to others.

The centre remained active at a community level, including ongoing presentations to local schools to promote mental health awareness and help seeking. The centre held a Youth Mental Health Forum at Marion Cultural Centre, engaged in the Onkaparinga Seaside Walk for Suicide Prevention and hosted an event 'Activate Ramsay Place' which featured guest performers and appearances from sports people.

In a bid to increase the Centre's engagement with local young

Aboriginal and/or Torres Strait Islander People, the Centre hosted an Indigenous Community Engagement Trainee, took part in sporting events; Southern Deadly Fun Run and Nunga Tag Tournament, and was actively involved in Many Clans: One Mob, a program which aims to improve retention rates at school and student wellbeing and connection to culture.

### headspace Adelaide

Sonder was proud to have been selected as the lead agency for headspace Adelaide and the headspace early psychosis service in the current financial year. This represented a significant achievement for Sonder and establishes Sonder as a significant provider of youth mental health services in South Australia.

During the 2018/19 Financial Year, a number of pre-transition milestones were achieved which ensured that the headspace Adelaide service, its operations, and over 70 staff could transition to Sonder as of 1 July 2019 as seamlessly as possible. Sonder is thankful to the staff of headspace Adelaide for their cooperation and support during this period and warmly welcomes them to Sonder.

### emerge & emergED

The emerge and emergED programs commenced operations in headspace Edinburgh North and headspace Onkaparinga. The programs represent a significant investment by the Commonwealth in addressing the needs of young people aged 16-25 with complex and enduring mental illness. The emerge program provides clinical assessment, therapy, care coordination, functional



recovery and peer support for young people with mental health diagnoses such as anxiety, depression, trauma, borderline personality disorder and psychosis and who have a significant degree of functional impairment.

The emergED program provides intensive and assertive support to young people with an eating disorder, and is an initiative based on the FREED (First Episode and Rapid Early Intervention for Eating Disorder) Model from the UK.

The emerge and emergED teams engaged in service development and service implementation in the reporting period, developing and refining the care offered by the programs and also strengthening relationships and

referral pathways with key stakeholders including the Local Hospital Networks, Statewide Eating Disorders Service, MHPN BPD Network and Southern Youth Mental Health Service. Team members were trained in Single Session Family Consultation training, dialectical behaviour therapy, suicide risk assessment and management, and the assessment and treatment of psychosis.

The service partnered with Reclink to support young people to engage in activities which encourage them to meet new people, learn new skills and develop their confidence. This has included activities such as yoga, bushwalking and snorkelling.

“ This group is my reason for getting up on Tuesday's. ”  
- Social Skills Group Participant

The emerge program has resulted in the delivery of a number of group programs for young people including Chill Space, social skills group, social prescription group, DBT skills group, art therapy groups, and parent/carer Information sessions.

# Employment support

## headspace Employment Support Program

headspace Edinburgh North has continued to deliver integrated mental health and vocational services to headspace clients using the evidence based Individual Placement and Support (IPS) model. Under this voluntary program, two full-time employment specialists with caseloads of 20 young people, work together with mental health clinicians and other headspace staff, to support headspace clients into 64 job placements in the last year. To enable this success our team had 614 face-to-face employer contacts with or on behalf of clients and 1964 occasions of service.

To ensure the quality of the program and fidelity to the IPS model, headspace Edinburgh North participates in externally facilitated fidelity reviews. At our most recent review, the team maintained an 'exemplary rating' of 119 out of 125. This is further evidence of the high quality of services delivered by the team.

The program provided by the Department for Social Services for this model was originally for a trial in only 14 headspace centres until 30 June 2019. However, in February 2019 we were pleased to learn that the Department committed to fund an additional 2 years and a further 10 centres were added to the initial 14 trial sites.

We were also pleased to welcome the Hon Anne Ruston, Minister for Families and Social Services to headspace Edinburgh North in August 2019 to learn more about headspace Employment Support and the IPS model. By far the highlight of the visit was hearing three headspace Employment Support clients explain the difference the program has had on their lives.

## Sonder Employment Solutions

The overwhelmingly positive experience of the headspace Employment Support program led Sonder to consider how we could support other members of our community who face complex barriers to employment. In March 2018, Sonder applied to the Department for Social Services for funding through the Try, Test and Learn fund. The proposal aimed to support migrants and refugees who are accessing income support to gain employment using a modified version of the Individual Placement and Support (IPS) model that included culturally appropriate mental health supports.

In September 2019 we learnt that the proposal had been shortlisted and, after a co-design process with the Department, the model was finalised and a contract signed in February 2019. This funding has allowed Sonder to deliver comprehensive vocational support to migrants

and refugees in the northern and western suburbs of Adelaide. To do so we have a team of 11 Career Coaches based across Sonder's Port Adelaide and Edinburgh North offices. In addition, we have two Wellbeing Coaches who are mental health professionals and can provide support to eligible Employment Solutions clients.

Engaging with stakeholders from a wide range of sectors is fundamental to the success of this project. We have engaged with community groups, services supporting migrants and refugees, employment services, community centres, libraries, schools, government departments and local councils. We have held meetings, information sessions, a professionals breakfast, presented at staff meetings and held stalls at expos and shopping centres in order to spread the word about Sonder Employment Solutions. In total we have recorded 412 stakeholder engagements.

Since the commencement of service delivery to clients in April 2019, we have supported 98 clients into 52 job placements. To facilitate these placements we have already had 651 face-to-face employer contacts with or on behalf of clients and 749 occasions of service.



“At Sonder, there is dignity & recognition of who you are, and what you are capable to do. Here, I feel well-heard.”  
- Sonder client

headspace Employment Support



Sonder Employment Solutions



# Aboriginal health

Over **500** Referrals received

**53,264** Occasions of service delivered

**1,020** Clients

**38%** increase from last year

**2,400** People attended Closing the Gap Day  
**84%** Rated the event as 'excellent'

The Closing the Gap Integrated Team Care Program (CTG ITC) is funded by both Adelaide PHN and Country SA PHN, to help close the gap between Aboriginal and Torres Strait Islander People & non-Aboriginal people in terms of their health and length of life expectancy. The program works towards improving access to culturally sensitive and appropriate primary healthcare services for Aboriginal communities in South Australia.

In the 2018/19 Financial Year, Sonder was commissioned once again by both PHNs as the chosen provider for the CTG ITC program for the entire metropolitan Adelaide region, Gawler - Barossa, Yorke Peninsula and Mid-North regions of South Australia.

The CTG ITC program, contributes

to the enhancement of service provision for Aboriginal people across SA and supports career pathways for Aboriginal staff within Sonder. The CTG ITC Leadership structure continued to leverage Sonder's influence as the largest provider of CTG ITC services in SA to ensure improvements in services for Aboriginal People.

In the 2018/19 Financial Year, the CTG program continued to grow the number of new referrals received, number of clients supported and the occasions of service for care coordination and outreach services delivered across all service regions. During the 2018/19 Financial Year, the CTG program received over 500 referrals and supported 1,020 clients which is an increase of 38% from the previous Financial

Year. Care Coordinators delivered 44,971 occasions of service and Aboriginal Outreach Workers delivered 8,293 occasions of service. The growth in numbers demonstrates the continued need for the service within the community.

The Indigenous Health Project Officers in both Metropolitan Adelaide and Country SA together with the broader CTG team continued to help further develop relationships with mainstream general practices, Aboriginal Primary Health Services, Hospitals and other Allied Health and Community services. These partnerships contributed to the increase of referrals to the program.

Additionally, the team continued to promote its services through

community engagement activities and was awarded the Outstanding Health Program accolade at the AHCSA Health Awards in December 2018. Throughout this period, the CTG ITC team demonstrated their commitment and continuing effort to provide the highest quality provision of service to the Aboriginal & Torres Strait Islander community.

## Closing the Gap Day

Sonder hosted the largest Closing the Gap Day celebration on Wednesday 27 March 2019 at the Adelaide Showgrounds. The event was supported by the Adelaide PHN, Nunkuwarrin Yunti and SA Health's Watto Purrinna.

The event brought together community members and over 65

health service providers to share information, promote services and work towards ensuring better health outcomes for Aboriginal people and communities. The event continues to grow and is now one of South Australia's largest health events for Aboriginal people and communities, with this year's event attracting over 2,000 people.

99 attendees provided positive feedback about the event with 84% rating the event as 'Excellent' or 'Very Good' and 95% indicating that they would be 'Very Likely' or 'Likely' to attend the event next year and recommend the event to family and friends.

“It was great to see our mob come together and showcase what is available for them and their families.”  
- Community member

“Closing the Gap Day provided me with the opportunity to connect with many different services in the one place. The entertainment and atmosphere was excellent.”  
- Community member





# Community health

## Healthy Eating Activity & Lifestyle

The Healthy Eating Activity and Lifestyle (HEAL) program has been successfully implemented across 8 Country SA regions, including Gawler and Barossa, Yorke Peninsula, Lower North, Mid North, Flinders and Outback, Upper Eyre, Lower Eyre and Far West.

HEAL is a group-based, lifestyle modification program that supports individuals with, or at risk of chronic disease, to improve nutrition and physical activity behaviours over an 8 week period. Participants attend weekly workshops consisting of 1 hour of physical activity and 1 hour of nutrition education.

Over the 2018-19 FY, 47 HEAL programs were delivered for a total of 425 participants. The Lower North, Yorke Peninsula and Lower Eyre regions were the areas of the highest program activity, accounting for 85-90% of the total referrals received. The high number of referrals and completed programs across these regions has been a result of regular promotion and engagement with local GPs and Practice Nurses, led by the HEAL Project Officer and supported by HEAL Facilitators.

To date, Sonder has trained 20 facilitators to deliver the program, including Registered Nurses, Dietitians, Exercise Physiologists, Aboriginal Health Workers and

a Pharmacist. These health professionals have delivered HEAL programs across diverse primary health care settings, including general practice, private allied health clinics, community pharmacy and Aboriginal Community Controlled Health Organisations (ACCHOs).

Sonder successfully supported ACCHOs, including Port Lincoln Aboriginal Health Service and Nunyara Health Service to deliver programs targeted at vulnerable community groups such as older adults and Mums and Bubs. These groups were consistently well attended by participants.

The HEAL program has expanded the reach of Sonder to new

country regions. Programs have been delivered across 17 regional, rural and remote communities including Ceduna, Port Lincoln, Tumby Bay, Cummins, Whyalla, Marree, Andamooka, Yalata, Roxby Downs, Port Pirie, Clare, Burra, Riverton, Kadina, Ardrossan, Gawler and Nuriootpa. Many of these communities are geographically isolated and chronically under-served. Implementing the HEAL program has provided local community members with a valuable opportunity to access primary health care services.

## Allied Health Solutions

Implementation of the Allied Health Solutions program on the Southern Yorke Peninsula, funded by CSAPHN through its IPHCS funding, commenced during this reporting period and its success can best be described as variable.

Sonder learnt first hand of the challenges of recruiting and retaining a responsive allied health workforce in rural communities and we lost much impetus due to frequent staffing changes in the early part of the program implementation.

Our initial referral and service delivery model also led to some confusion amongst general practice staff and health professionals.

Following a thorough review of all aspects of the program in April 2019 and greater input from local communities, the referral pathway and treatment options were redesigned in order to simplify and

streamline the care process.

In June, a newly appointed Care Coordinator and Allied Health Assistant commenced practice visits with GPs, practice nurses, managers and allied health professionals to showcase these changes and we have seen an almost incredible reversal in the fortunes of the program.

We subsequently also moved away from a contractor only model and have been grateful to have recruited a locally based Dietitian and a Diabetic Educator.

In short we have seen more activity in the past 8 weeks than we did in the preceding 8 months.

47



HEAL programs were delivered across the regions

425



People participated in HEAL programs

20



Facilitators were trained by Sonder to deliver the programs

120

Clients in the Allied Health Solutions programs

1,051

Occasions of service delivered



154

Client referrals received



462

Allied health sessions allocated to sub-contractors



65  
CPD events  
were held



1,452  
Health professionals  
attended all events



Of which  
764  
were GPs



77%  
Of attendees  
felt their learning  
outcomes were  
met

22

On average, 22  
people attended  
each event

## GP & allied health support

At the commencement of the 2018/19 FY, the education team was restructured. During this process Sonder delivered fewer events than forecasted between July and September 2018.

Following this slow start, Sonder went on to deliver 65 high quality continuing professional development (CPD) events to 1,453 primary healthcare workforce members.

Sonder also teamed up with Local Health Networks (NALHN, CALHN and SALHN) and their specialty teams to facilitate the creation of a networking platform between specialists and primary health care providers.

### IMG Education

The Joint Education support Program (JESP) was launched in June 2017 in collaboration with Sonder and IMG advocacy organisations, including the South Australian Indian Medical Association (SAIMA), the Bangladesh Medical Society of South Australia (BAMSSA), the South Australian Sri Lanka Doctors Association (SASDA), the Pakistani Medical Association of South Australia (PAMSA), and the Australian Chinese Medical Association (ACMA).

JESP is a collaborative project designed to provide education help and support to IMGs living in South Australia who are preparing

to enter the Australian health care workforce through a series of workshops.

Sonder delivered 11 workshops during the 2018/19 FY and each session was attended by 15 GPs on average. Sonder received great feedback and appreciation for this program from past attendees who cleared their examinations with Australian Medical Council and achieved registration with Medical Board of Australia.

Sonder and our partner advocacy organisations greatly appreciate the support of the generous sponsors.



## Professional Networks

### Northern & Southern Nurse Networks

Sonder continued to support nurses by providing them the opportunity to meet, network and upskill through our quarterly Nurse Network Meetings in the Northern and Southern regions of Adelaide.

In the 2018/19 FY, Sonder hosted four network meetings per region covering informative and relevant topics across primary health care.

Additionally, Sonder established an Advisory Committee for the Southern Nurse Network and we hosted four Southern Nurse Network Meetings in collaboration with Flinders University and the Australian Primary Health Care Nurses Association.

### Northern & Southern Practice Managers Network

Practice Managers Network Meetings are coordinated quarterly and provide practice managers with the knowledge and resources to build the capacity and efficiency of their general practice for better patient outcomes. During the 2018/19 FY Sonder established a Southern Practice Managers Network.

The Education Services team applied a different approach to revive our Practice Manager Meetings and hosted 2 half day events in July 2019 for Practice Managers in the northern & southern regions which were attended by 64 Practice Managers. Influential speakers covered hot topics such as workforce issues, health care homes, QI PIP and My Health Records.

### Practice Owners Network Meeting

Sonder launched the Practice Owners Network in late 2016. Sonder takes on an advocacy role to champion causes that are selected by the members as being of relevance to the sector. These matters are then escalated to the relevant agencies or funding bodies to address concerns or challenges faced by practice owners.

In the 2018/2019 FY, Sonder coordinated four meetings providing information and networking opportunities to over 35 Practice Owners per event.

### Regional GP Councils

The Northern Region GP Council and Southern Region GP Council are professional networks of Sonder that provides a forum for GPs in the northern and southern region to raise issues that affect General Practice and its ability to provide effective primary health care in the community.

Council members represent the GP workforce on various health care panels and committees, investigating various issues affecting GPs and the delivery of integrated care across the primary and acute sectors. They provide GP input, advocacy and linkage into and across other health care organisations (National, State, Local Government and Non-Government). The committee also ensure there is adequate GP representation on various panels and committees, acting as the conduit for GPs across the region.

Both Councils meet on a quarterly basis and have a total of 8 members who represent a broad

range of expertise and interests across General Practice.

### Northern Region GP Council

To highlight some particular achievements of the NRGPC over the financial year:

- The NRGPC engaged with Professor Rajvinder Singh, Director of Gastroenterology at Lyell McEwin Hospital to learn about the services available through LMH and how GPs can create efficiencies for patients by following referral guidelines.
- The NRGPC engaged with Dr Venugopal Kochiyil and Mr Mark Jonas from Northern Adelaide Pain Rehabilitation Service to learn about the Northern Adelaide Pain Rehabilitation Service delivered from Modbury Hospital.
- The NRGPC engaged with Memorial Hospital to address issues regarding insufficient patient discharge summaries.
- Dr Richard Heah represented the NRGPC on NALHN's Outpatient Committee Meetings.
- The NRGPC engaged with Ms Debbie Chin, Acting CEO of NALHN and Dr Michael Cusack, NALHN Executive Director of Medical Service, discussing ways to create effectiveness and efficiencies between NALHN and primary health care.
- The NRGPC met with Ms Jane Pappin, from Pop Up Community Care regarding a new community program which delivers in home services to the top 100 Emergency Department presenters.
- The NRGPC engaged with

- representatives from Kudos and Feros Care to learn more about the services provided by Local Area Coordinator Agencies under the NDIA.
- The NRGPC met with Dr Chad Collins, NALHN's GP Liaison Officer, who provided an overview of the GP Liaison Unit (GPLU) within NALHN, which was collaboratively established by the Adelaide PHN and NALHN to try to improve communication, collaboration and integration between General Practice and the LMH.
- The NRGPC engaged with Dr Helena Williams, from Silver Chain, to learn about the new Rapid in Home Health Team Program.

The Northern Region GP Council for the 2018/2019 Financial Year consisted of the following GPs:

- Dr Rizwan Latif (Chairman) – Craigmare Family Practice
- Dr Carolyn Roesler – Elizabeth Medical and Dental
- Dr Stephen Salagaras – Two Wells Medical
- Dr Louis Skeklios – Golden Grove Health Centre
- Dr Sian Goodson – Paralowie Family Health
- Dr Oliver Frank – Oakden Medical Centre
- Dr Seema Jain – Elizabeth Grove Surgery
- Dr Md Moniruzzaman – Prospect Medical Centre
- Dr Kamal Wellalagodage – Blair Athol Medical Clinic

### Southern Region GP Council

To highlight some particular achievements of the SRGPC over the last financial year:

- The SRGPC provided

- feedback to the Executive Director of Mental Health Services regarding the lack of handover and support available for GPs to support patients requiring antipsychotic injections.
- The SRGPC engaged with Flinders Private Hospital and Memorial Hospital to highlight insufficient discharge summaries received by GPs.
- The SRGPC engaged with Ms Sue O'Neill, CEO of SALHN, highlighting unnecessary duplication of GP referrer paperwork and requested transparency regarding wait times.
- The SRGPC met with representatives from Mission Australia and Kudos Services around how GPs can assist patients to access the NDIS.
- The SRGPC engaged with Professor Philip Aylward, Director Strategic Relationships at SALHN and Ms Julie Astley, Executive Director Allied Health at SALHN, providing feedback on ways to improve communication pathways between acute and primary care. Members of the SRGPC now provide GP representation on SALHN's newly established GP Standing Committee Meetings.
- The SRGPC continue to meet with Dr Helena Williams, from Silver Chain, to provide GP feedback in relation to the new Rapid in Home Health Team Program.

The Southern Region GP Council for the 2018/2019 Financial Year consisted of the following GPs:

- Dr Nick Tellis (SRGPC Chairman) – Partridge Street General Practice
- Dr Richard Reed
- Dr Helen Parry – Seacombe

- Medical Centre
- Dr Pamela Rachootin – Dr Rachootin's Surgery
- Dr Navtej Sandhu – Hackham Medical Centre
- Dr Chris Moy – Arkaba Medical Centre
- Dr Kerry Whannel – Allcare Medical Centre
- Dr Martin Davey – Rose Street Clinic



4  
Large  
community  
forums hosted



108  
Events  
attended



65%  
increase  
from last year



# Community engagement

At Sonder, we are committed to connecting with people. By engaging in community activities and events, we aim to understand the needs of community members to ensure we deliver health services that help them to achieve their health goals. As a result, Sonder has a commitment to community engagement and understands the important role it plays in promoting better health outcomes for our community.

Through the 2018/19 FY, Sonder participated in an array of community engagement activities including education events, reference groups, family events and information forums.

## Community education events

Throughout the 2018/19 FY, Sonder delivered a range of community health education events in partnership with local

councils for a range of different population groups, including information sessions for migrant and refugee communities, mental health information sessions and health information sessions for males, older people and Aboriginal and Torres Strait Islander People. The education events included presentations by Sonder team members and other local health professionals. The presentations provided a platform for Sonder to educate and inform harder-to-reach population groups such as Aboriginal and Torres Strait Islander People and older people.

## Community reference groups

Sonder's Mental Health Consumers and Carers (MHCC) Reference Group continued to provide a voice to mental health consumers, carers, relatives and significant others and carers. Members of the reference group were given

the opportunity to provide input and feedback to improve Sonder's mental health services.

Sonder established the Aboriginal Health Reference Groups in metropolitan Adelaide and country SA to ensure that people accessing Aboriginal health program, Closing the Gap are able to talk about their service needs. The findings of the reference group assisted us with the planning and delivery of quality services.

The reference groups meet quarterly, providing Sonder with valuable input and advice about how Sonder's operations can better meet the needs of the local Aboriginal and Torres Strait Islander community.

## Community events

Sonder attended a range of community events over the 2018/19 FY and contributed to a

total of 108 events, a 65% increase from the previous year.

Our community events provided a platform to education the community about new programs delivered by Sonder, whilst ensuring the organisation remained current and aware of the ever-changing needs of the community.

### Some of the larger events delivered in 2018/19 included:

- Multicultural Youth Concert in celebration of Refugee Week
- Women's health information sessions
- NAIDOC Week celebrations
- Closing the Gap Day

## Community forums

Sonder remained committed to delivering community forums in the 2018/19 FY which provide an important two-way flow of information between community

members and health professionals, to discuss information, ideas, opinions and concerns. Forums also provide a way for Sonder to consult with members of the community.

Sonder hosted four community forums in 2018/19, Borderline Personality Disorder Awareness and Lived Experience Forum and two Youth Mental Health Forums, in northern and southern metro Adelaide.

Sonder's Youth Mental Health Forums were held across September and October 2018 at the Playford Civic Centre and the Marion Cultural Centre. The forums attracted a combined audience of over 300 health professionals, service providers and community members, who shared an interest in improving their knowledge of issues affecting today's youth, including mental health, eating disorders, employment,

suicide and trauma. The events featured presentations from keynote speaker, Professor Ian Hickie, headspace CEO Mr Jason Threthowan and Dr John Brayley, Chief Psychiatrist at SA Health.

Sonder also hosted a Lived Experience Forum for Borderline Personality Awareness Week at the University of Adelaide, in collaboration with headspace Edinburgh North, headspace Onkaparinga and the Australian BPD Foundation Limited.

The forum provided community members with the opportunity to seek further information about borderline personality disorder from people with lived experience. The forum was presented by Minister for Health and Wellbeing, Stephen Wade and attracted over 100 local community members.

# Research & evaluation

In the 2018/19 FY, Sonder developed a number of evaluation frameworks for new projects implemented at Sonder and participated in a range of research collaborations. Focus was placed on evaluating programs and services and commencing the analysis, interpretation and writing of evaluation reports.

Three new evaluation frameworks were developed for new programs including, Employment Solutions, In-Home Withdrawal and Residential Wellbeing. Reports are currently being written for the Living Well with Serious Illness, Healthy Eating Active Lifestyles (HEAL), Closing the Gap Day 2019 and 2019 Sonder Patient Reported Experience Measures (PREMs) Outcomes.

During the last financial year, Sonder focussed on efforts to partner with Universities

to undertake collaborative projects and is working towards implementing student-led research and evaluation projects within Sonder to increase internal capacity and enhance program evaluation outcomes. The next financial year will see a unique partnership with the University of Adelaide to undertake a collaborative, high-level evaluation of the Northern Connect program.

Sonder continued to work with staff members undertaking student research projects, assisting three staff members to recruit and/or deliver projects. This has included investigating ethical decision-making by therapeutic practitioners, Young People's Experiences of Completing a Trauma and PTSD Screening Tool and the importance of clinician's empathy or clinical experience in predicting mental health outcomes for young people.

In early 2019, two Sonder staff members were offered to present at the 2019 Asics SMA Conference on the process and outcome evaluation of the HEAL program.

## PREMS

In January and June 2019, Sonder implemented the delivery of our newly developed Patient Reported Experience Measures (PREMs) survey titled the 'Client Experience Survey' (CES). PREMS are Sonder's main method of measuring and monitoring customer satisfaction. These are delivered through a standard questionnaire which incorporates consistent methodology throughout Sonder. The survey was developed based on an extensive review of the literature, including existing PREMs Questionnaires and in consultation with Sonder staff and reference groups. The survey provides an indicator of patient experience

throughout Sonder's programs and offers important quality and safety insights and feedback to drive program improvements. Results from the 2018-2019 Client Experience Survey shows high levels of satisfaction and accessibility with services received at Sonder, with 90% of respondents saying they would refer family and friends. Additionally, 75% reported that they could not have afforded a similar service. In all of the experience categories, 90% (or more) of clients reported positive responses.

## headspace

Sonder continued to deliver the IMPACT Research project within headspace Edinburgh North. The IMPACT Research Project is a National Health and Medical Research Council (NHMRC) funded project conducted by Orygen, The National Centre of Excellence in Youth Mental Health and the University of Melbourne, in collaboration with Sonder and headspace Edinburgh North. This project is due to be completed in the next financial year.

As part of the headspace Enhancement Initiative Project, Sonder obtained funding from the Adelaide PHN to conduct a number of research projects with the aim of increasing the capacity and effectiveness of headspace's workforce, contributing to evidence-based research in youth mental health, and improving care for young people attending headspace Edinburgh North and Onkaparinga. The first project will see the implementation of an online intervention for reducing suicidal ideation in young people. This intervention will be offered to clients while they are on the waitlist for treatment and provide them with an opportunity to get

immediate support. The second headspace Enhancement Initiative Project focuses on clinical staging and stepped care. Behind clinical staging and stepped care is the idea of identifying stages of young people's mental illness and providing them with the most appropriate services using minimal resources.

headspace Edinburgh North was one of the first headspace centres in Australia to trial the Synergy platform developed by the Brain and Mind Centre and implement clinical staging and the stepped care model. Synergy is an online platform that supports staff and clients in the process of identifying stages illness and the most appropriate treatment options. The trial period is ongoing and results will help us identify how we can best support young people across our centres.

## Aboriginal Health

This year's Closing the Gap Day evaluation was undertaken as a research project led by Sonder in partnership with the South Australian Health and Medical Research Institute (SAHMRI). This project is the first internally led research project within the organisation that has been implemented with full ethics approval. Data collection has been finalised and an in-depth analysis of outcomes is currently being conducted, working towards publishable outcomes. An interim report has been generated which demonstrates that the event was a success, with over 2000 community members and 63 stall holders in attendance. 99 attendees provided positive feedback about the event with 84% rating the event as 'Excellent' or 'Very Good' and 95% indicating that they would be 'Very Likely'

or 'Likely' to attend the event next year and recommend the event to family and friends.

Sonder completed its involvement with the CanDAD project funded by the NHMRC and developed by the University of South Australia (UniSA), Rosemary Bryant AO Research Centre, Wardliparingga Aboriginal Health Research Unit and SAMHRI. The CanDAD project seeks to develop an integrated, comprehensive cancer monitoring system with a particular focus on Aboriginal People. Researchers are currently working towards publishing their findings. Sonder partnered with UniSA and was successful in their application to receive a NHMRC grant to examine the use of My Health Record in chronic condition management and rehabilitation in Aboriginal and Torres Strait Islander population. This project is still ongoing.

Additionally, Sonder partnered with Wardliparingga Aboriginal Health Research Unit and SAMHRI on NHMRC funded project, 'The Northern Pathways Project' to implement and evaluate a social determinants approach with an Indigenous health service delivery model across health and social services within the northern region of Adelaide.

## Alcohol and Other Drugs

Over the last six months Sonder assisted with the recruitment of participants and delivery of a measurement assessment to assess the usability and undertake preliminary analysis of outcomes for people accessing treatment services. This project is being delivered in collaboration with DASSA & SA network of Drug and Alcohol Services (SANDAS).



# Workforce development

Sonder is committed to building a workforce from within and has introduced a range of workforce development initiatives.

## Mental Health Clinical Internship

The Mental Health Clinical Internship is a two year program which provides an exciting opportunity for postgraduate students to develop clinical skills experientially in a supportive, clinical environment. The program is managed by a designated Clinical Lead, but the overall responsibility rests with the Clinical Leadership Group. Since the program's inception in 2014, six trainees have successfully completed the program, and five of these trainees are currently employed as Mental Health Clinicians by Sonder.

Currently, there are four interns employed by Sonder who are at different stages of their training. Two of the interns have completed one year of training and are now developing their clinical skills by working under supervision with clients presenting with a range of psychological difficulties. The

two new interns commenced in October 2019 and they are in the early stages of observing the process of therapy, client engagement and interactions with skilled clinicians.

As part of the program, the interns are also involved in community development, education and engagement which provides a more holistic view of Sonder's roles in mental health with different communities.

The success of the Mental Health Clinical Internship program is attributed to the commitment of Sonder to provide the best opportunities to the interns for developing clinical skills. With regard to professional development, the interns have been provided with training in Cognitive Behaviour Therapy, Acceptance and Commitment therapy, Connecting with People and Suicide Intervention Training, provided by staff from the Office of the Chief Psychiatrist. The combination of professional development, community engagement, clinical observations and supervised practice across the suite of Sonder programs,

with the support of a rich and diverse clinical team, ensures that the program provides a solid foundation of clinical skills for the interns to draw on when working with a range of clients with complex mental health needs. The interns will continue to build upon this foundation as they further develop their clinical skills.

Significant achievements within the Mental Health Clinical Internship program have also attracted ongoing and additional funding from the Adelaide Primary Health Network, with the program increasing from 2 to 4 participants, which is in addition to the 2017-2019 graduating Interns who were successful in gaining on-going full time employment as mental health accredited clinicians.

## Student Placements

As an organisation with a strong focus on the future, Sonder continues to work in innovative ways to develop and sustain a highly trained workforce. This is of the highest importance as it enables us to provide the highest quality of clinical services to our clients and community.



As one facet of this work, Sonder has partnered with Flinders University to provide clinical placements for students in the Masters in Cognitive Behavioural Therapy. Four students from this program completed all of their placements at Sonder are now employed by Sonder as Mental Health Clinicians. And another 2 students commenced their first placement in early September.

As part of this placement, the students provide therapy to clients who have less complex clinical presentations. Students are closely supervised by both the University as well as a Clinical Lead at Sonder to ensure high levels of fidelity with the Cognitive Behavioural Therapy models and treatment.

## Continuing Professional Development

Sonder defines Continuing Professional Development (CPD) as a range of learning activities for assisting employees to develop

their skills, knowledge and behaviours. We are committed to providing opportunities for the Sonder family to maintain and develop their capabilities throughout their career to ensure that they retain their capacity to practice safely, effectively and legally within their evolving scope of practice and organisational growth.

Across all Sonder structures, we have worked hard to promote an organisational culture that embraces learning and professional development, fostering a respected and competent workforce that is motivated and committed to the values of Sonder.

Sonder's CPD Program provides an annual allowance to assist Sonder employees to achieve professional and educational growth to encourage a highly skilled workforce. As a reflection of this organisational commitment,

Sonder has increased the CPD allowance by 50% during the reporting period.

Again during this FY, 100% of employees who completed their probationary period attended Sonder-funded CPD activities. This, compared to 88% in the 2017/18 financial year.

In regard to details of the Sonder family, it is worth noting the newness of our workforce – 62.3% of staff commenced only 2 years ago, with 99 staff commencing after 1 July 2019. Our movement towards being a more robust organisation is reflected by 72% of staff now reporting to line managers and program coordinators versus 100% of staff reporting to executive managers in 2017/18.

# Sonder IT

SonderIT is a business initiative of Sonder, delivering IT solutions to a wide range of customers from different industries such as medical practices, schools, small businesses and corporates since 2008. All surplus income generated is re-directed to Sonder service delivery.

Sonder IT delivered tailored IT support, IT procurement, network services, Office 365 migration and security services to customers are based both in the Adelaide metro and SA country regions.

SonderIT has formed partnerships with various IT suppliers such as CISCO to ensure we provide best service to its clients.

SonderIT also provides internal ICT support to Sonder staff and internal stakeholders. During the 2018/19 FY, SonderIT worked to ensure that Sonder's ICT infrastructure and strategy can meet with the demands of the different programs and processes as a result of Sonder's growth during the year. This included upgrading major IT hardware and software, and internal programs development.

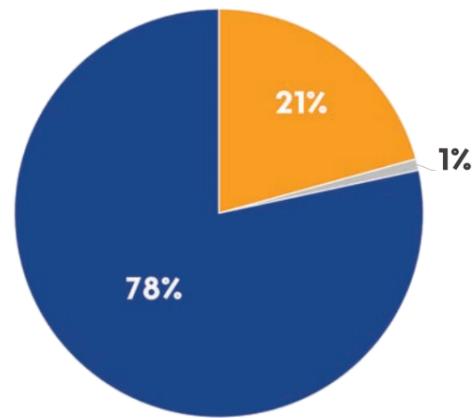
The SonderIT team expanded to support the increase in ICT support requests received from both

internal and external customers. The team has various areas of technical expertise which respond to client needs. A number of ICT projects were completed during the Financial Year.

SonderIT's helpdesk ticket resolution rate as at 30 June 2019 was 98%. The 2% unresolved tickets were waiting for clients' responses and were resolved after 30 June 2019.

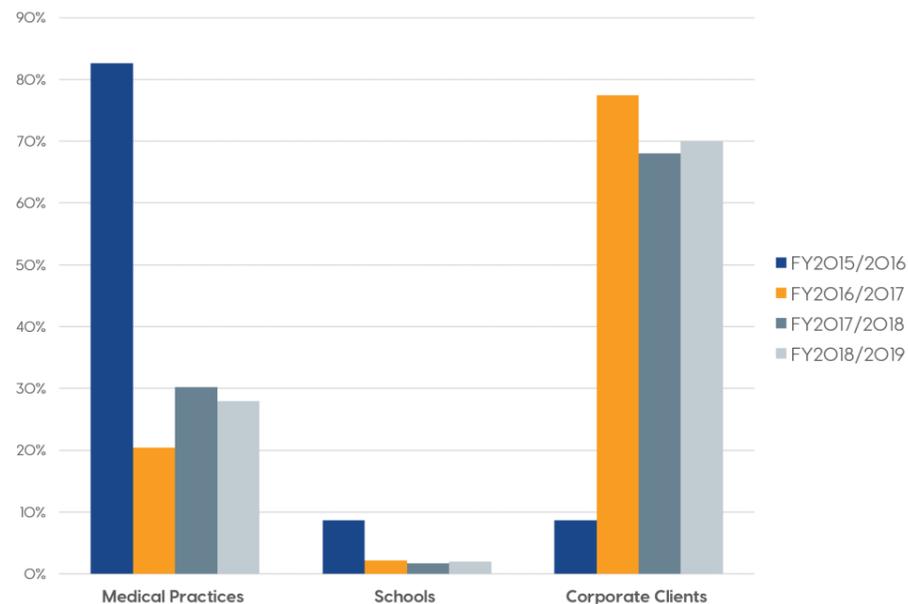
During the 2018/19 Financial Year, SonderIT also underwent rebranding and launched a new website [sonderit.net.au](http://sonderit.net.au)

**Client Base Per Industry**  
FY 18/19



- Corporate Clients
- Medical Practices
- Schools

**Client Base**  
FY 15/16 to FY 18/19



# Financial performance

Sonder experienced a considerable growth in FY18/19 due to additional programs commissioned and expansion of its current programs as demonstrated by a 71% increase in total revenues from FY17/18 to FY18/19.

- Cervix Screening Program
- Expansion of the Shared Care program for Adelaide's Northern and Western regions
- Residential Aged Care
- Low Intensity Cognitive Behavioural Therapy Program (LiCBT)

Sonder also secured funding from the Commonwealth to deliver employment services and AOD services through competitive grant applications. Total revenues for the year was \$16.67 million.

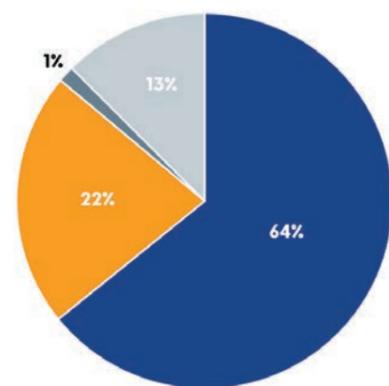
As a result of the above, Sonder was able to diversify sources of revenues in FY18/19.

As of 30 June 2019, 60% of funds received were for psychological therapies programs, 28% community health programs, 3% from the IT Services and 9% for Other Services. IT services continued to generate additional revenues as a business initiative of Sonder.

Below are the new and expanded programs of Sonder in FY18/19:

- emerge (north & south)
- Walk-in AfterHours Mental Health Service
- Maternal-Infant Dialectical Behaviour Therapy (Mi-DBT) Group Project for Northern Adelaide
- headspace Onkaparinga
- Allied Health Solutions
- Sonder Employment Solutions
- In-Home Withdrawal Service
- Service Mapping Project in Barossa and Yorke Peninsula

Revenue Sources Per Program

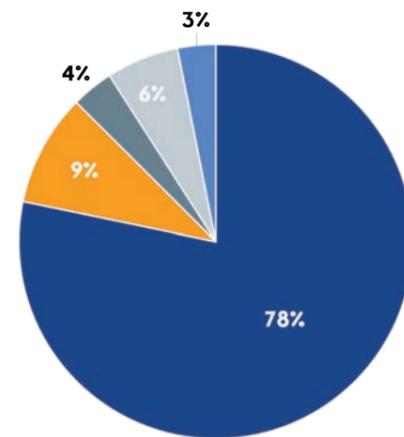


- Psych. Therapies
- Community Health
- IT Services
- Other Services

The increase in the number of programs delivered during the Financial Year resulted to a 71% increase in total expenses. 87% of of Sonder's total expenses are direct service delivery costs and a large part of the total expenses was employment cost at 78%. Sonder had 147 paid employees and an equivalent 124 FTEs as at 30 June 2019.

Sonder's total expenses are direct service delivery costs and a large part of the total expenses was employment cost at 78%. Sonder had 147 paid employees and an equivalent 124 FTEs as at 30 June 2019.

Use of Funds Per Activity



- Employment Costs
- Program Delivery
- ICT
- Occupancy
- Administration

## Summary of financial report

The summary of the financial report provided here is an extract of, and has been derived from, Sonder's full financial report for FY17-18. This summary does not, and cannot be expected to provide a full understanding of the financial position of Sonder.

### Directors' Report

Your Directors present this report on the company for the financial year ended 30 June 2019.

### Directors

The names of the Directors in office at any time during or since the end of the year were:

- Dr F Ahmad
- Dr R Heah
- Dr R Latif
- Dr S Jain
- Dr S Talari
- Mr D Haydon
- Mr J Manning

## Director's Meetings

	Board Meetings Attended	Annual General Meeting	Risk & Finance	Special Risk & Finance Meeting
Dr Farooq Ahmad	8	1	-	-
Dr Richard Heah	10	1	-	-
Dr Rizwan Latif	10	1	4	4
Dr Seema Jain	8	1	-	-
Dr Sudheer Talari	10	1	-	-
Mr Daniel Haydon	10	1	4	4
Mr John Manning	9	1	4	4
Dr Kali Hayward	1	1	-	-

## Operating Result

The total surplus from operations of the company for the financial year amounted to \$729,460.

## Significant Changes in the State of Affairs

No significant changes in the company's state of affairs occurred during the financial year.

## Principal Activities

Sonder delivers high quality, evidence-based clinical psychological therapy services that are relevant to the complex needs of the local community. We also deliver innovative programs enabling improved access to health and wellness services both in metro and regional areas.

In FY2018/2019, Sonder delivered programs across metropolitan Adelaide and Country SA with four main offices located in Edinburgh North, Port Adelaide, Nuriootpa and Christies Beach. Sonder delivered on behalf of the Primary Health Networks clinical services across the age span and complexity of mental health concerns. In addition, Sonder delivered a range of integrated community health services, including health projects and Aboriginal health programs both in the Metro, Mid-North and Yorke Peninsula regions.

Sonder is also the lead agency for headspace Edinburgh North and headspace Onkaparinga.

Furthermore, Sonder also commenced delivery of employment and in-home withdrawal services, both funded by the Commonwealth in FY2018/2019. Sonder has also provided support to GPs and the community through education and training, health promotions and provision of IT support services through SonderIT.

## After Balance Date Events

No matters or circumstances have arisen since the end of the financial year which significantly affected or may significantly affect the operations of the company, the results of those operations, or the state of affairs of the company in subsequent financial years.

## Directors' Benefits

No director has received or has become entitled to receive, during or since the financial year, a benefit because of a contract made by the company or related body corporate with a director, a firm which a director is a member or an entity in which a director has a substantial financial interest.

This statement excludes a benefit included in the aggregate amount

of emoluments received or due and receivable by directors shown in the company's accounts, or the fixed salary of a full-time employee of the company or related body corporate.

## Indemnifying Officer or Auditor

No indemnities have been given or agreed to be given or insurance premiums paid or agreed to be paid, during or since the end of the financial year, to any person who is or has been an officer or auditor of the company.

## Proceedings on Behalf of Company

No person has applied for leave of Court to bring proceedings on behalf of the company or intervene in any proceedings to which the company is a party for the purpose of taking responsibility on behalf of the company for all or any part of those proceedings. The company was not a party to any such proceedings during the year.

## Auditors Independence Declaration

A copy of the auditor's independence declaration as required under section 307C of the Corporations Act 2001 has been included.

Signed in accordance with a resolution of the Board of Directors:

  
 Dr Rizwan LATIF  
 Chairman

  
 Mr John MANNING  
 Director

Dated 30 September 2019

# Statement of Comprehensive Income

for the year ended 30 June 2019

	Note	2019 \$	2018 \$
Revenue	2	16,623,806	9,677,552
Employee benefits expense		(10,865,203)	(7,015,719)
Program delivery expenses		(2,398,077)	(1,041,472)
ICT expense		(839,106)	(339,822)
Occupancy expenses		(1,221,225)	(415,839)
Other expenses		(570,735)	(472,759)
Total surplus from operations		729,460	391,941
<b>Other comprehensive income</b>			
Unrealised gain (loss) from investments		47,190	44,726
<b>Total comprehensive income for the year</b>		<b>776,650</b>	<b>436,666</b>

# Statement of Financial Position

as at 30 June 2019

	Note	2019 \$	2018 \$
<b>Assets</b>			
<b>Current assets</b>			
Cash assets	3	9,392,804	4,092,733
Receivables	4	521,264	254,665
Other	6	41,372	40,222
Total current assets		9,955,440	4,387,620
<b>Non-current assets</b>			
Property, plant and equipment	7	187,633	3,000
Financial assets	5	1,157,114	1,044,726
Total non-current assets		1,344,747	1,047,726
<b>Total assets</b>		<b>11,300,187</b>	<b>5,435,345</b>
<b>Liabilities</b>			
<b>Current liabilities</b>			
Trade and accounts payable	8	3,185,086	789,394
Financial borrowings	9	15,368	17,481
Current tax liabilities	10	760,199	248,639
Provisions	11	690,409	467,661
Other current liabilities	12	2,610,949	749,708
Total current liabilities		7,262,011	2,272,883
<b>Non-current liabilities</b>			
Provisions	11	410,205	311,142
Total non-current liabilities		410,205	311,142
<b>Total liabilities</b>		<b>7,672,216</b>	<b>2,584,025</b>
<b>Net assets</b>		<b>3,627,971</b>	<b>2,851,320</b>
<b>Equity</b>			
Unrestricted retained earnings		3,536,055	2,506,595
Restricted retained earnings		-	300,000
Other reserves		91,916	44,726
Total equity		3,627,971	2,851,320

# Statement of Changes in Equity

for the year ended 30 June 2019

	Retained Earnings	Other reserves	Total
<b>Balance at 01/07/2017</b>	2,414,654	-	2,414,654
Comprehensive income			
Surplus from operations for the year	391,941		391,941
Other comprehensive income for the year		44,726	44,726
<b>Balance at 30/06/2018</b>	2,806,595	44,726	2,806,595
Comprehensive income			
Surplus from operations for the year	725,460		725,460
Other comprehensive Income for the year		47,190	47,190
<b>Balance at 30/06/2019</b>	3,532,055	91,916	3,623,972

# Statement of Cash Flows

as at 30 June 2019

	2019 \$	2018 \$
<b>Cash flow from operating activities</b>		
Receipts from customers	15,405,070	9,586,686
Payments to suppliers and employees	(9,945,317)	(9,253,862)
Interest received	81,216	62,902
Dividends received	23,921	-
Net cash provided by (used in) operating activities (note 2)	5,564,890	395,726
<b>Cash flow from investing activities</b>		
<b>Payment for:</b>		
Investment portfolio	(65,198)	(1,000,000)
Payments for property, plant and equipment	(197,508)	
Net cash provided by (used in) investing activities	(262,706)	(1,000,000)
<b>Cash flow from financing activities</b>		
Proceeds of borrowings	-	17,012
Repayment of borrowings	(2,113)	
Net cash provided by (used in) financing activities	(2,113)	17,012
Net increase (decrease) in cash held	5,300,072	(587,262)
Cash at the beginning of the year	4,092,733	4,679,995
Cash at the end of the year (note 1)	9,392,804	4,092,733

# Statement of Cash Flows

for the year ended 30 June 2019

	2019 \$	2018 \$
<b>Note 1. Reconciliation of cash</b>		
For the purposes of the statement of cash flows, cash includes cash on hand and in banks and investments in money market instruments, net of outstanding bank overdrafts. Cash at the end of the year as shown in the statement of cash flows is reconciled to the related items in the balance sheet as follows:		
Cash at Bank	5,516	4,756
CBA Term Deposit Bank Guarantee	100,000	100,000
NAB Cheque	28,439	256,787
NAB Savings	5,673,092	1,231,845
NAB Staff Liability a/c	508,117	506,076
NAB Term Deposits	3,075,807	1,992,671
Petty Cash	1,834	598
	9,392,804	4,092,733

## Note 2. Reconciliation of net cash provided by/used in operating activities to net profit

Operating profit (loss)	729,460	391,941
Depreciation	12,875	19,109

## Changes in assets and liabilities net of effects of purchases and disposals of controlled entities:

(Increase) decrease in trade and term debtors	(266,600)	(27,964)
(Increase) decrease in prepayments	(1,149)	(29,220)
Increase (decrease) in trade creditors and accruals	2,389,045	41,914
Increase (decrease) in other creditors	1,870,580	(242,656)
Increase (decrease) in employee entitlements	317,968	150,841
Increase (decrease) in sundry provisions	512,711	91,761
Net cash provided by operating activities	5,564,890	395,726

# Notes to the Financial Statements

for the year ended 30 June 2019

## Note 1. Statement of significant accounting policies

The financial report is a General-Purpose financial report that has been prepared in accordance with Accounting Standards and other authoritative pronouncements of the Australian Accounting Standards Board and the Corporations Act 2001.

The financial report covers Adelaide Northern Division of General Practice Ltd as an individual entity. Adelaide Northern Division of General Practice Ltd is a public company limited by guarantee, incorporated and domiciled in Australia.

The financial report of Adelaide Northern Division of General Practice Ltd as the controlled entity and Adelaide Northern Division of General Practice Ltd as an individual parent entity comply with all Australian equivalents to International Financial Reporting Standards (IFRS) in their entirety.

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

### (a) Basis of preparation

The accounting policies set out below have been consistently applied to all years presented unless stated otherwise.

The financial report has been prepared on an accruals basis and is based on historical costs modified by the revaluation of selected non-current assets, and financial assets and financial liabilities for which the fair value basis of accounting has been applied.

### (b) Accounting policies

#### Income tax

The Association is exempt in accordance with the Terms of Section 50-5 of the Income Tax Assessment Act 1997 as amended.

#### Employee benefits

Provision is made for the liability for employee entitlements arising from services rendered by employees to balance date. Employee entitlements have been measured at the amount expected to be paid when the liability is settled.

#### Provisions

Provision are recognised when Adelaide Northern Division of General Practice Ltd has a legal or constructive obligation, as a result of past events, for which it is probable that the outflow of economic benefit will result and that the outflow can be measured reliably.

#### Cash and cash equivalents

Cash and cash equivalents includes cash on hand, deposits held at call with banks or financial institutions, other short term highly liquid investments with original maturities of three months or less, and bank overdrafts. Bank overdrafts are shown within short term borrowings in current liabilities on the balance sheet.

#### Revenue

Revenue from the sale of goods is recognised upon the delivery of goods to customers. Interest revenue is recognised on a proportional basis taking in to account the interest rates applicable to the financial assets.

Revenue from the rendering of a service is recognised upon the delivery of the service to the customers. All revenue is stated net of the amount of goods and services tax (GST).

#### Borrowing costs

Borrowing costs directly attributable to the acquisition, construction or production of assets that necessarily take a substantial period of time to prepare for their intended use or sale, are added to the cost of those assets, until such time as the assets are substantially ready for their intended use of sale.

All other borrowing costs are recognised in income in the period in which they are incurred.

# Notes to the Financial Statements

for the year ended 30 June 2019

## Note 1. Statement of significant accounting policies (continued)

### Goods and service 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 these circumstances, the GST is recognised as part of the cost of acquisition of the asset or as part of an item of the expense. Receivables and payables in the balance sheet are shown inclusive of GST.

Cash flows are presented in the cash flow statement on a gross basis, except for the GST component of investing and financing activities, which are disclosed as operating cash flows.

### Comparative figures

Where required by Accounting Standards comparative figures have been adjusted to conform with changes in presentation for the current financial year.

### Property, Plant and Equipment

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

#### a) Plant and equipment

Plant and equipment is measured on the cost basis less depreciation and impairment losses.

The carrying amount of plant and equipment is reviewed annually to ensure it is not in excess of the recoverable amount from those assets. The recoverable amount is assessed on the basis of the expected net cash flows that will be received from the assets employment and subsequent disposal. The expected net cash flows have not been discounted to present values in determining the recoverable amounts.

#### b) Depreciation

The depreciable amount of all fixed assets including buildings and capitalised leased assets, but excluding freehold land, is depreciated on a straight-line basis over their useful lives to Adelaide Northern Division of General Practice Ltd commencing from the time the asset is held ready for use.

The depreciation rates used for each class of depreciable asset are:

Class of assets	Depreciation rate
Motor Vehicles	25%
Computer Equipment	25%

### Financial Instruments

#### a) Recognition

Financial instruments are initially measured at cost on trade date, which includes transaction costs, when the related contractual rights or obligations exist. Subsequent to initial recognition these instruments are measured as set out below.

#### b) Financial assets at fair value through profit and loss

A financial asset is classified in this category if acquired principally for the purpose of selling in the short term or if so designated by management and within the requirements of AASB139: Recognition and Measurement of Financial Instruments. Derivatives are also categorised as held for trading unless they are designated as hedges. Realised and unrealised gains and losses arising from changes in fair value of these assets are included in the income statement in the period in which they arise.

#### c) Loans and receivables

Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active market are stated at amortised cost using the effective interest rate method.

#### d) Held-to-maturity investments

These investments have fixed maturities, and it is the company's intention to hold these investments to maturity. Any held-to-maturity investments are stated at amortised cost using the effective interest rate method.

#### e) Available-for-sale financial assets

Available-for-sale financial assets include any financial assets not included in the above categories. Available-for-sale financial assets are reflected at fair value. Unrealised gains and losses arising from changes in fair value are taken directly to equity.

#### f) Financial liabilities

Non-derivative financial liabilities are recognised at amortised cost, comprising original debt, less principal payments and amortisation.

#### g) Fair Value

Fair value is determined based on current bid prices for all quoted investments. Valuation techniques are applied to determine the fair value for all unlisted securities, including recent arm's length transactions, reference to similar instruments and option pricing models.

#### h) Impairment

At each reporting date, the directors assess whether there is objective evidence that financial instrument has been impaired. In the case of available-for-sale financial instruments, a prolonged decline in value of the instrument is considered to determine whether an impairment has arisen. Impairment losses are recognised in the income statement.

# Notes to the Financial Statements

for the year ended 30 June 2019

	2019 \$	2018 \$
<b>Note 2. Revenue and other income</b>		
<b>Revenue</b>		
Grant funding income	15,915,012	9,021,245
IT Services income	229,527	288,702
Interest income	81,216	62,902
Other income	398,051	304,703
	16,623,806	9,677,552
<b>Note 3. Cash assets</b>		
<b>Bank accounts</b>		
Cash at bank	5,516	4,756
CBA Term Deposit Bank Guarantee	100,000	100,000
NAB Cheque	28,439	256,787
NAB Savings	5,673,092	1,231,845
NAB Staff Liability a/c	508,117	506,076
NAB Term Deposits	3,075,807	1,992,671
<b>Other cash items</b>		
Petty cash	1,834	598
	9,392,804	4,092,733
<b>Reconciliation of cash</b>		
Cash at the end of the financial year as shown in the statement of cash flows is reconciled to items in the statement of financial position as follows:		
Cash	9,392,804	4,092,733
	9,392,804	4,092,733
<b>Note 4. Receivables</b>		
<b>Current</b>		
Trade debtors	521,264	254,665
	521,264	254,665
<b>Note 5. Other financial assets</b>		
Investment portfolio	1,065,198	1,000,000
Unrealised gain from investments	91,916	44,726
	1,157,114	1,044,726

	2019 \$	2018 \$
<b>Note 6. Other current assets</b>		
Prepayments	41,172	40,022
Other	200	200
	41,372	40,222
<b>Note 7. Property, plant and equipment</b>		
<b>Motor vehicles</b>		
At cost	34,619	34,619
Less: accumulated depreciation	(34,619)	(31,619)
<b>Computer equipment</b>		
At cost	197,508	
Less: accumulated depreciation	(9,875)	
	187,632	3,000
<b>Note 8. Payables</b>		
<b>Unsecured</b>		
Trade creditors	306,428	133,251
Other creditors	178,326	144,470
Committed Funds	2,700,332	484,464
	3,185,086	762,185
<b>Note 9. Borrowings</b>		
<b>Current</b>		
<b>Unsecured</b>		
Credit Cards	15,368	17,481
	15,368	17,481
<b>Note 10. Tax liabilities</b>		
<b>Current</b>		
GST clearing	609,495	125,893
Amounts withheld from salary and wages	150,704	122,746
	760,199	248,639

# Notes to the Financial Statements

for the year ended 30 June 2019

	2019 \$	2018 \$
<b>Note 11. Provisions</b>		
<b>Current</b>		
Employee entitlements*	690,408	467,661
	690,408	467,661
<b>Non-current</b>		
Employee entitlements*	410,205	311,142
	410,205	311,142

## Note 12. Other liabilities

<b>Current</b>		
Grants in advance	2,610,949	749,708
	2,610,949	749,708

## Note 13. Auditors' remuneration

### Remuneration of the auditor of the company for:

Auditing or reviewing the financial report	8,000	8,000
Other services	-	-
	8,000	8,000

## Note 14. Events subsequent to reporting date

Since the end of the financial year there have been no events that would give rise to an adjustment to the accounts for the year ended 30 June 2019.

* Aggregate employee entitlements liability	1,100,613	778,803
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**Adelaide Northern Division of General Practice Ltd  
t/as Sonder Care  
Auditors Independence Declaration**

**UNDER SECTION 307C OF THE CORPORATIONS ACT 2001**

**To THE DIRECTORS OF: Adelaide Northern Division of General Practice Ltd**

I declare that, to the best of my knowledge and belief, during the year ended 30 June 2019 there have been:

- (i) no contraventions of the auditor independence requirements as set out in the Corporations Act 2001 in relation to the Audit; and
- (ii) no contraventions of any applicable code of professional conduct in relation to the audit

*N. Rugari*

**Natale Rugari**  
Principal, Registered Company Auditor

Ascensio Accountants  
Suite 12, 116 Melbourne Street  
North Adelaide SA 5006

The accompanying notes form part of these financial statements.

## INDEPENDENT AUDITOR'S REPORT

### Adelaide Northern Division of General Practice Ltd

#### Opinion

I have audited the accompanying financial report of Adelaide Northern Division of General Practice Ltd, which comprises the statement of financial position as at 30 June 2019, the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, notes comprising a summary of significant accounting policies and other explanatory information, and the responsible entities' declaration.

In my opinion, the financial report of Adelaide Northern Division of General Practice Ltd has been prepared in accordance with Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012*, including:

- a) giving a true and fair view of the registered entity's financial position as at 30 June 2019 and of its financial performance and cash flows for the year ended on that date; and
- b) complying with Australian Accounting Standards and Division 60 of the Australian Charities and Not-for-profits Commission Regulation 2013.

#### Basis for opinion

I conducted our audit in accordance with Australian Auditing Standards. My responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of our report. I am independent of the registered entity in accordance with the auditor independence requirements of the *Corporations Act 2001* and the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants* (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

I confirm that the independence declaration required by the *Corporations Act 2001*, which has been given to the directors of the responsible entities, would be in the same terms if given to the directors as at the time of this auditor's report.

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

#### Responsible entities' responsibility for the financial report

The responsible entities of the registered entity are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards and the *Australian Charities and Not-for-profits Commission Act 2012* (ACNC Act) and for such internal control as the responsible entities determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

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



Natale Rugari BA(Acc) CPA Principal  
Registered Tax Agent, Company Auditor, SMSF Auditor

Pau I Rugari BEc(Acc) CPA Associate  
Registered Tax Agent

Liability limited by a scheme  
approved under Professional

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#### Auditor's responsibility for the audit of the financial report

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

A further description of our responsibilities for the audit of the financial report is located at the Auditing and Assurance Standards Board website at <http://www.auasb.gov.au/Home.aspx>. This description forms part of our auditor's report.

— •  
Natale Rugari  
Registered Company Auditor

30<sup>th</sup> September 2019

**Ascensio Accountants**  
12, 116-120 Melbourne St  
North Adelaide SA 5006

# Contact Sonder

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