



Annual Report 2019-20

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Chairman report.

Dr Rizwan Latif
Chairman



I am incredibly proud to serve as the Chair of a deeply committed and constantly engaged Board of Directors.

It is not an understatement to say that the 2019/20 financial year was momentous for not only Sonder but for the broader community service and general practice services.

I am pleased to report that Sonder was able to navigate the uncertain waters caused by Covid and the agency at the end of the FY is more resilient and more attuned to the needs of our communities.

As you will read from the financial report, Sonder was able to navigate these challenging times in a manner that allowed us to remain true to our Values and Purpose.

We remain a vibrant and relevant agency and that is not only due to the dedication of the Board

but also to the highly energised Executive Management Team, led by our CEO, Sageran Naidoo.

Sonder was able to successfully initiate its business continuity planning processes in the face of Covid and the transformation to primarily working from home was a significant milestone for the agency. The investment in improved staff safety and wellbeing and in enhanced ICT connectivity will serve us well into the future.

In an attempt to bring together the collective voices of GPs to navigate the shift caused by Covid and to seek better integration with the several Local Health Networks and the Adelaide PHN, Sonder in 2019 began the conversations about the establishment of the Adelaide GP Council, an amalgamation of the previous regional councils. The AGPC will be fully constituted by the end 2020 and will serve the interests of all GPs across the metro.

I am pleased too that the Board has reviewed its approach to planning and risk management and the adoption of the 'Strategic Plan', 'Risk and Quality Management Framework' and the 'Risk Appetite Statement' put us on a path of to deliver services within enhanced quality and safety systems.

Sonder became a founding member of the Health and

Wellbeing Alliance of SA, comprising the former Divisions of General Practice. The primary care sector, of which Sonder is a part of, has for some time lacked coordination through a peak body and while the Alliance does not fill all of the functions of a peak, it does allow Sonder to work alongside the members to forge links with the LHNs and the PHNs.

We have improved our communication to Members and stakeholders and this Annual Report is now supplemented with monthly newsletters and quarterly Member bulletins.

There is much to do to ensure that Sonder is better known for the range of services we deliver and across the new geographic regions we now work in.

A key goal of the Board is to broaden our funding sources to include State funding and we know we have to work harder to ensure that funders have confidence in what we do and the quality of the products and services we deliver.

About Sonder.

We help people to improve their wellbeing and live better lives.

Our diverse team provide mental health counselling, support with alcohol and drug concerns, chronic disease management and help with finding employment.

At Sonder, we understand that each individual is living a life as vivid and complex as the next.

We seek to assist individuals to live a better life by providing the highest quality care, health and support services.

Clients at Sonder are able to access multiple services to address their needs, from a range of centres located across South Australia.

Over the past 26 years, the organisation has earned a solid reputation for the delivery of evidence-based clinical psychological therapy and is now one of the leading providers of mental health services in SA.

Additionally, Sonder is the lead agency for headspace Adelaide, Edinburgh North and Onkaparinga.

The headspace Centres act as a one-stop-shop for young people who need help with mental health, physical health, alcohol and other drugs or work and study support.



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



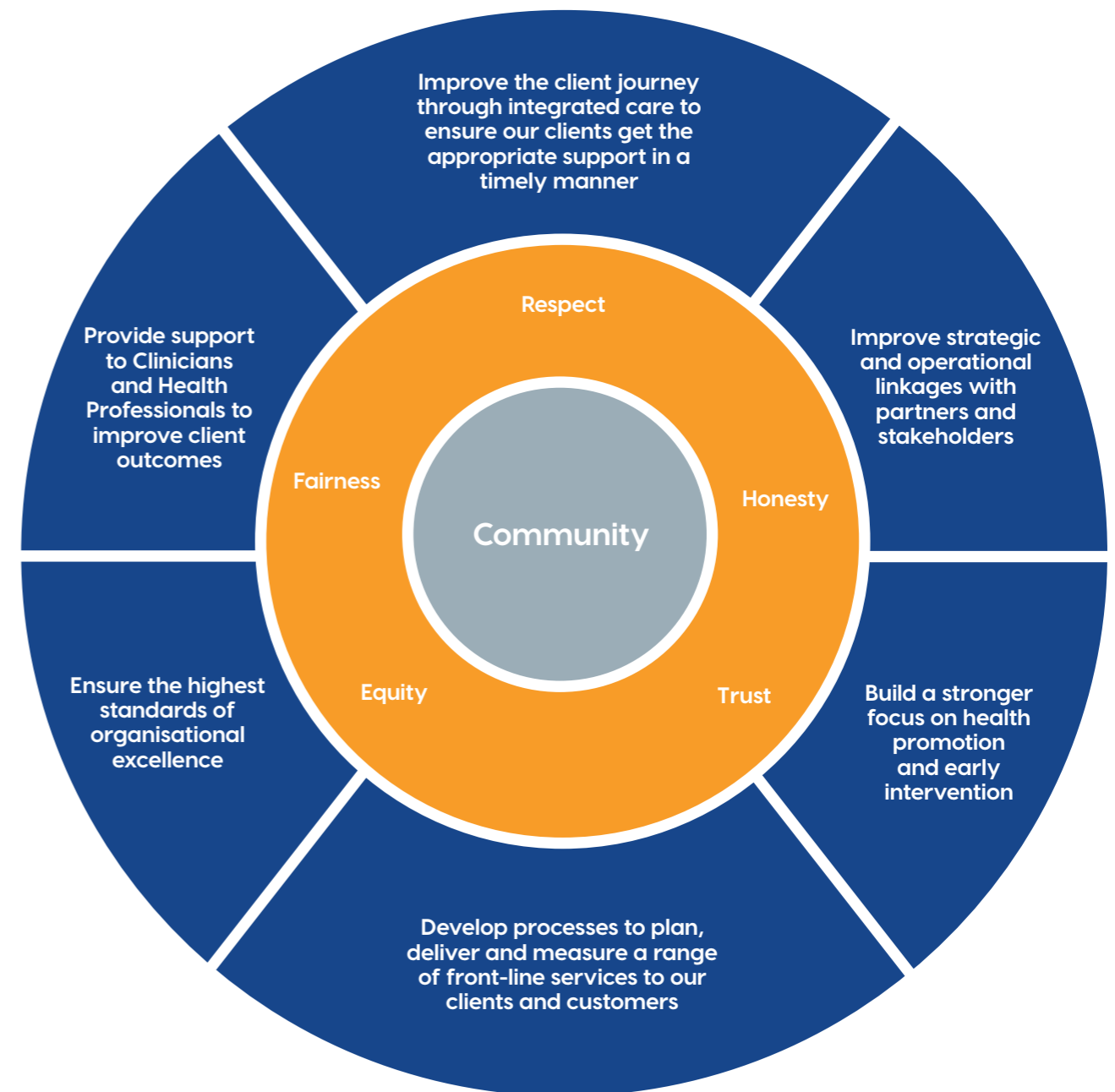
Sonder welcomes all people irrespective of ethnicity, lifestyle choice, faith, sexual orientation and gender identity.

Sonder
n. the realisation that each random passerby is living a life as vivid and complex as your own.

Strategic priorities. 2020-22

Vision: Better Care, Better Health

Purpose: Deliver high quality, local healthcare



- At the centre of everything we do
- Our values
- Our strategic directions

CEO report.

SAGERAN NAIDOO
CEO



By any measure, a reflection on the financial year gone by would categorise 2020 as 'annus horribilis' and you would be justified in wondering if the gods had decided to throw the kitchen sink at the whole of humanity.

I am cognisant that this review of Sonder's performance across 2019/20 is in the context of over a million deaths from the novel coronavirus, COVID-19, and the destruction of a generation of economic gains, by not only the spread of the disease, but by the steps taken to mitigate it.

But I respectfully put forward a view to our Members, to our staff, to our consumers and to our stakeholders that 2020 cannot be viewed only through the prism of Covid.

Inside the pages of this Annual Report, you will see that there is much that we need to focus on.

On the world stage, we saw an increasing awareness that the financial systems are set up for the rich to get richer. We learned

that Covid was not a great leveler, endured equally by the affluent and the destitute: the impacts of the disease are in fact felt the most by the have-nots and the front line service workers who are the lowest paid in our communities.

We saw too a rising awareness that this was wrong and a growing acknowledgement that economies have to be recalibrated to address growing wealth disparities and inequities of the current economic system.

We saw the growing consciousness that the lives of the marginalised do have value and that their needs may have been deliberately downplayed by the rich and the powerful.

The Black Lives Matter protests, that began after the air and dignity of Mr George Floyd was emptied so callously out of his body, took hold all across the globe and here in Adelaide too.

The protests have led to a recognition of the deliberate

“
We needed to take stock of what the future meant for us, we needed to reflect and review and if there was a theme for the financial year - it was consolidation.”

nullifying of the voices and images and lived experience of black people in politics, the media, the justice system and in social integration.

It is not lost on me that the BLM movement may only have found its voice as a result of the awareness brought about by Covid. While the powerful may sow discord to keep us from valuing each other, it took a virus to show us that we are all truly equal.

WHAT THEN DOES THAT GLOBAL CONTEXT MEAN FOR A REFLECTION ABOUT SONDER'S FINANCIAL AND SERVICE DELIVERY PERFORMANCE?

We too were forced to radically transform the way we operated and the way we supported our staff and clients. I have counted 34 separate processes or activities that were undertaken in the

2019/20 FY that have the broad intent of setting Sonder up for a period of resilience and stability.

The irony of being a small, young agency with a long history means that we had many ageing systems and processes better suited for a placed-based service model or that were built for a time when Sonder was much smaller with a few dozen staff and located in one or two offices.

We needed to take stock of what the future meant for us, we needed to reflect and review and if there was a theme for the financial year - it was consolidation.

BELOW IS A BRIEF SNAPSHOT OF THESE CHANGES:

- Our executive management team was restructured and a new EMT underpinned by a reformed 'Delegations of Authority' process has transformed Sonder into an executive-led agency with devolved decision making. This was a much needed reform but Covid was the catalyst - what if entire swathes of the Executive team came down with the virus - the changes allow for the organisation to thrive, even if some key personnel are away for extended periods.
- We have enhanced our quality, risk, clinical governance and safety processes across all portfolios. The ability to transform Sonder into an agency with over 250 staff working from home demanded that our quality management system be retooled for a new operating environment.
- We needed to support our staff far better. In addition to introducing Paid Parental Leave for the first time in our 26 year history, we improved our internal communications (with lots more still to be done) and we fought hard to retain grant funding to the point where we did not

lose a single staff member when jobs were being decimated at the height of Covid. We also listened better to our staff and made sure that the results of the Best Practice Survey were well communicated and that the areas for improvement were actioned and communicated to those who were affected by our failings.

- We consolidated our brand, launching a new website and improving our targeted marketing to ensure that clients knew what we do and where we were.
- We made further strides in building our Aboriginal cultural safety. Under the stewardship of our Board Director, Dr Kali Hayward, we built on our service models to ensure the voice of our consumers and carers was heard and we began the root and branch review of our entire agency to ensure that we were truly a place that Aboriginal staff, clients and their families can call home. The Reconciliation Action Plan that commenced in 2019 has received conditional endorsement from Reconciliation Australia and will be launched in 2020. This action plan puts us on a path to build and sustain our capacity to be true partners in the health and well-being journey of Aboriginal people.
- In recognising that future Commonwealth governments are going to have to pay off the debt incurred in fighting Covid and may take steps to end or modify the free programs that Sonder delivers, we recognise the absolute necessity for us to build our capacity to deliver services that require some clients to pay fees and charges. This is a new area for us and we are moving carefully through the planning that will result in us building services that support NDIS and Medicare funded clients and families.
- In recognising that geography is destiny, we have expanded our footprint of service locations and have used our Values based appraisal of what types of services are needed by the most vulnerable and have been fortunate to have the confidence of funders to expand now into 9 locations across SA. Each of these offices is being fitted out to ensure we provide the best facilities for our staff and

clients. This refurbishment started in 2019/20 and will be completed by the end of 2020.

- The biggest challenge for Sonder is in the domain of workforce development. Recruiting the skilled workers we require for our complex care programs is a challenge and while we have a range of staff development, internship, student placement and an extensive CPD program, 2019/20 once again saw us sometimes struggling to fill key roles. Recruiting to key leadership roles is the challenge for most human services agencies and while we have established the Sonder leadership training program in partnership with TafeSA to build our leaders from within, we still also have challenges in recruiting to key leadership roles.

In reflecting on this most incredible of times, I am struck not by the seemingly endless stream of negative Covid related news, but I am struck by the trust most of us have placed in science in a world when anti-intellectualism was beginning to take hold.

I am struck by stories of the earth healing itself, of the places in the world that became visible for the first time in decades as vehicles were forced off the road.

I am struck by the recognition of the value of family and the growth in neighborliness and I am struck by the sense that the inequities in the world cannot be allowed to endure.

And I am hopeful too that Sonder can continue to play its small role in making the world of our clients and their families a better place.

Board members.

DR RIZWAN LATIF

Chairman

General Practitioner in Craigmore

Dr Latif has extensive professional medical practice experience in the Sonder region for over 15 years.

He appears on various State Clinical Committees and is a Clinical Lecturer at Adelaide University and a Clinical Examiner with the Australian Medical Council. Dr Latif is also in the Executive Committee for 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. 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.

Danny is a Board Member (and Past President) of the Australian Association of Practice Management and Member of the Health Care Homes Implementation Advisory Group and continues to work as the Executive Officer at the Clare Medical Centre.

DR RICHARD HEAH

General Practitioner in Elizabeth

Dr Heah has over 20 years of professional medical practice

experience in the northern region of Adelaide. Richard is the Director of Corporate Health Group.

He has keen interest in Medical Education, involved as a mentor for IMG and acts as an RACGP Examiner. Richard is a participant on AHPRA, PESCI and Tribunals.

Dr Heah has extensive business and finance management experience and is a Graduate of the Australian Institute of Company of Directors.

DR SUDHEER TALARI

Medical Practitioner in Gawler

Dr Talari has over 10 years of experience as a Medical Practitioner. He is the president of the Salisbury Elizabeth Medical Association and has acted as an examiner for MOCK exams for medical students, GPs and AMC candidates.

Dr Talari has experience running workshops for International Medical Graduates for AMC Clinical and FRACGP OSCE exams.

DR SEEMA JAIN

General Practitioner in Elizabeth Grove

Practice principal with over 20 years experience working across hospitals in SA and interstate, with exposure across a wide range of sectors.

Dr Jain has extensive experience working with Aboriginal & Torres Strait Islander health issues. Seema teaches Medical Students and supervises Medical Registrars.

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 and 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 and has a rich background in business.

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 and a Graduate of the Australian Institute of Company Directors.



DR RIZWAN LATIF



DR KALI HAYWARD



MR JOHN MANNING



DR SEEMA JAIN



MR DANNY HAYDON

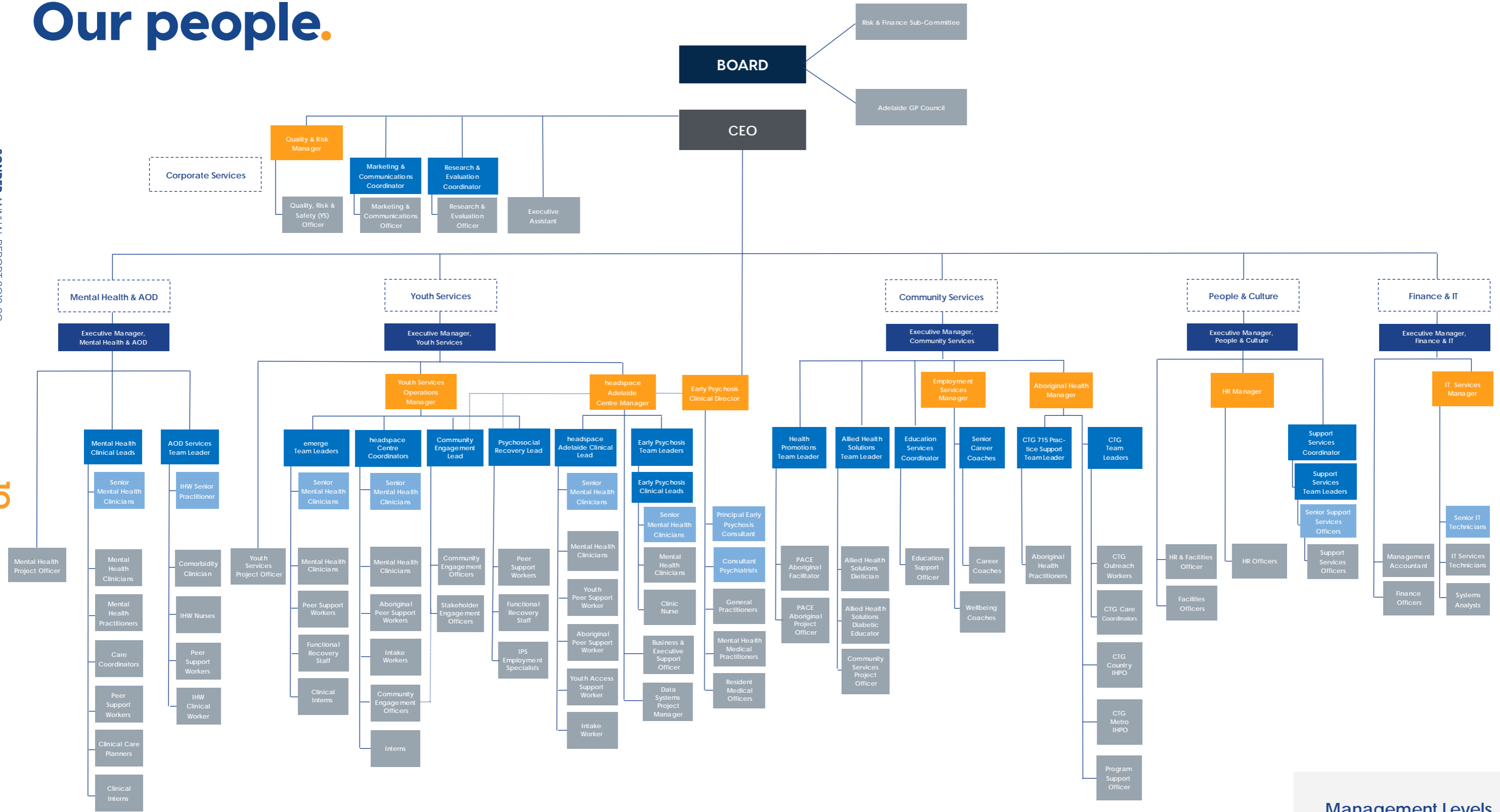


DR SUDHEER TALARI



DR RICHARD HEAH

Our people.



Management Levels

- Executive Manager
- Manager
- Team Leader/Coordinator
- Senior
- Non-Manual Staff

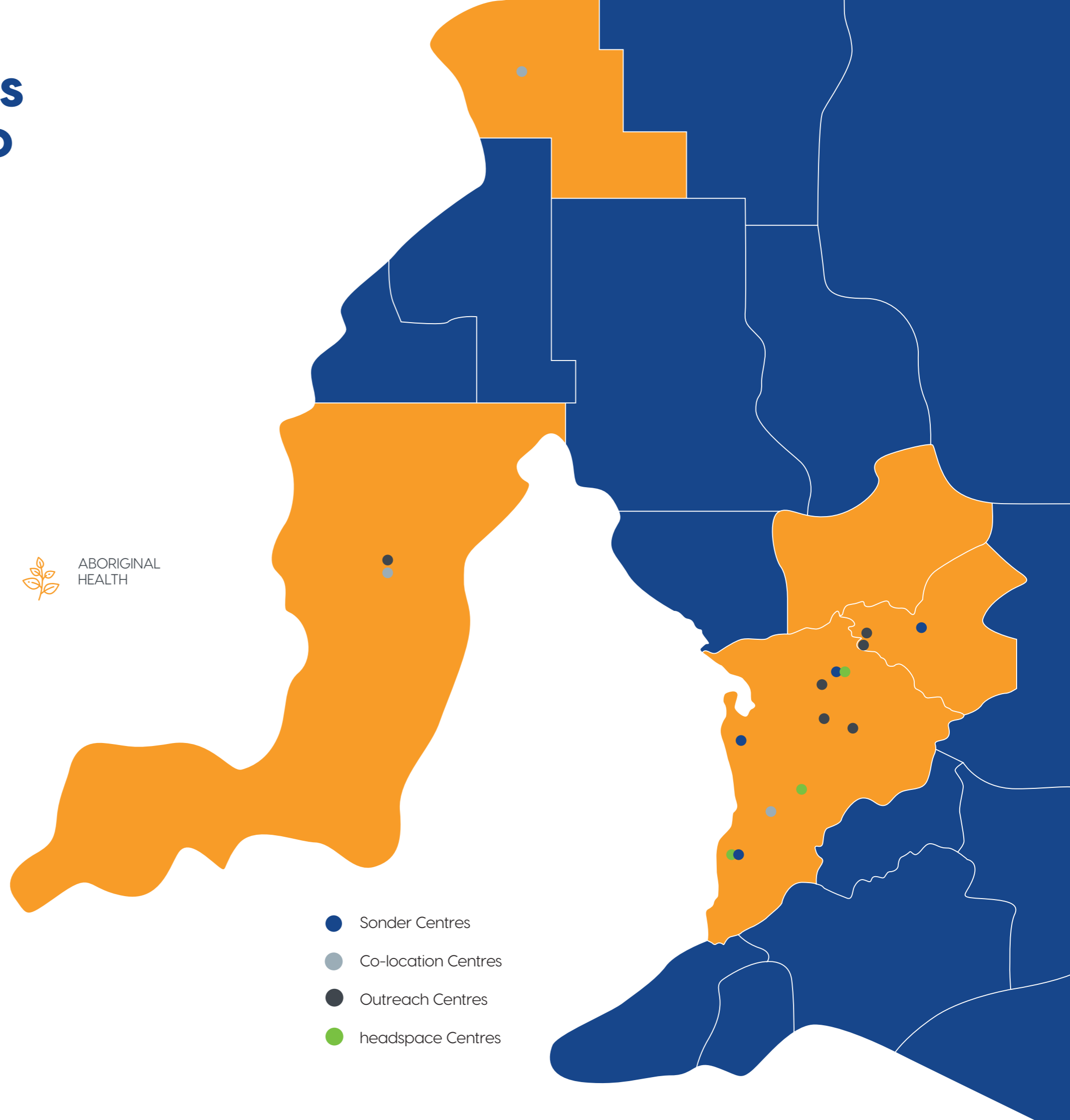
We worked across South Australia to strengthen local communities.

In the 2019-20 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 COUNSELLING
-  ALCOHOL & OTHER DRUGS SERVICES
-  ABORIGINAL HEALTH
-  NUTRITION & EXERCISE
-  HEALTH PROFESSIONAL SUPPORT
-  SUICIDE PREVENTION SERVICES
-  EMPLOYMENT SUPPORT
-  CARE COORDINATION
-  PALLIATIVE CARE

We delivered 22 programs in 16 different locations across South Australia.





**Mental
health.**
for adults

Mental health for adults.

Despite the challenges of the 2019/20 financial year, there were many successes and achievements for our staff as well as positive experiences and outcomes for the individuals we support.

The change and growth across Sonder's mental health services was vast and varied, positively impacting each step of care.

Accessibility was enhanced with Sonder's After-hours Walk-in Mental Health Service expanding its opening hours to 4 nights a week.

More than 1,000 hours of support was provided to over 330 individuals.

Quality improvement activities resulted in the strengthening of peer support as well as the introduction of a simple, evidenced based tool that asked people to rate their level of distress. 84% of people who used the tool during the 2019/20 financial year reported a reduction in distress.

Access to lived experience supports was significantly improved through the creation of 5 designated Peer Worker roles.

More than 960 individuals experiencing low prevalence, high impact presentations were supported with one participant expressing that they, "Started to believe in themselves using the tools provided."

Over 70% of people accessing support reported improvements in wellbeing as well as being "always treated and listened to with respect, compassion, understanding."

FOCUSED MIND

Sonder was able to expand its low intensity services with the extension of the Li-CBT program into metropolitan Adelaide.

Li-CBT was re-launched as Focused Mind, offering clients experiencing mild to moderate depression, anxiety or stress with the ability to receive short-term, intensive phone-based treatment.

LIVING WELL WITH SERIOUS ILLNESS

Sonder's Living Well with Serious Illness program in the Gawler-Barossa region sits uniquely in the primary health space, delivering responsive psychology services and care co-ordination to individuals and their families' living with a progressive and life-limiting illness.

Throughout the 2019/20 financial year, this impactful program continued to demonstrate excellent service experience, outcomes and accessibility.

100% of individuals reported excellent service experience, 91% did not wait a long time to access services, 75% reported an

increase in health literacy and 64% reported an increase quality of life.

QUALITY IMPROVEMENT

A number of important quality improvement activities were undertaken to enable improved access to services as well and support succession planning and professional development pathways.

New strategies were employed to reduce waiting times, resulting in better access to mental health care.

An external review of Sonder's mental health service design saw key recommendations to re-design the clinical pathway to incorporate the 'Choice and Partnership Model', to implement and use the clinical engagement software, Mentegram and to integrate eHealth treatments.

The introduction of a new management structure led to each Clinical Lead and program area being supported by a Senior Clinician.

These new roles are key leadership positions, with each Senior Clinician working closely with Clinical Leads to support program oversight as well as provide leadership, education & motivation to staff in the provision of focused psychological therapies.



We supported over
5,000
people to improve their
mental health and
wellbeing

We delivered almost
30,000
occasions of
service to clients

5
Lived Experience
Workers joined
our team

“
Sonder made it possible for me to see that I had a future ahead of me which was going to be different from the one I used to have.
”

- Sonder client



Mental
health.

for young
people

Mental health for young people.

During the 2019-20 financial year, Youth Services introduced a full suite of innovative services across the stepped model of care, involving the seamless integration of new modalities while supporting staff to settle into new work sites and new leadership structures.

The Youth Services teams across Sonder's Edinburgh North and Onkaparinga Centres embarked on a commitment to informing best practice assessment and treatment for young people experiencing trauma.

The team was provided with training and ongoing group supervision from Flinders University in Cognitive Processing Therapy which led to young people with trauma symptoms being better identified upon entry into our service.

The varying levels of mental health needs of young people was at the forefront of the roll-out of a stepped model of care which sought to ensure young people received the right care at the right time, as opposed to a 'one size fits all' model.

The implementation of the new

model saw the introduction of low-intensity streams of care that embraced brief interventions and single session therapies, the maturing of the emerge program for complex youth aged 16-25, the provision of psychoeducation group supports, the utilisation of e-tools for meeting demand, and the upscaling of our shared care arrangements with consortium partners, Local Health Networks and local health professionals.

In the 2019/20 financial year, the Youth Services team introduced an overarching lead for community engagement and psychosocial recovery services which has provided greater consistency, oversight and guidance while maximising resources and creating efficiencies across the three headspace centres.

Various groups including the 'Dialectical Behaviour Therapy Group', 'Art Space', 'Chill Space', and 'Peer Space Cooking' were facilitated across the headspace and emerge Centres in domains of social/leisure, creative/ expression, work/education and personal wellbeing.

The changes implemented across

our Centres were welcomed by our young people with our service activity increasing significantly, leading to more young people across Adelaide accessing support than ever before.

Almost 50,000 occasions of service were provided to more than 4,000 young people, translating to a 21% and 12% increase from the previous financial year.

Young people continued to indicate improvements in mental health outcomes, general wellbeing, coping skills, relationships with friends and family, and reduced difficulties with everyday life, while revealing high levels of satisfaction with all components of service delivery.

HEADSPACE

Sonder provided youth-friendly counselling and support within the community via its headspace Centres (Adelaide, Edinburgh North and Onkaparinga), with over 30,000 occasions of service provided to more than 3,500 young people across these Centres. Service experience and satisfaction remained

We delivered almost
50,000
occasions of
service to clients

We supported over
4,000
young people to improve
their mental health and
wellbeing



exceptionally high across Centres, with 94% of young people indicating our headspace services are highly accessible, acceptable, equitable, appropriate and effective.

On average, young people engaged in headspace services demonstrated that distress is likely to decrease from a severe to moderate level after 3 or more sessions.

We look forward to providing the same level of services in the new financial year to young people residing in the area of Marion, following our appointment as the preferred provider of the headspace Marion centre.

QUALITY IMPROVEMENT

Quality improvement activities across our headspace network were aplenty with a key focus on demand management and briefer models of care.

Strategies were employed to allow faster access to care, resulting in a reduction of wait time at headspace Edinburgh North centre to less than 6 weeks.

Psychoeducation group supports meant young people were able to access support even earlier in their journey with 'Mind Your Mind', 'While You Wait' and 'Drumspace' walk-in groups.

Successful policies were implemented to improve attendance and reduce last minute cancellations across all headspace Centres. A one point of entry pathway for referrals was created for smooth transitions between services offered at each Centre and in the region.

Accessibility was further enhanced with the development of brief intervention models of care across our headspace centres.

headspace Adelaide provided innovative supports in the Brief Intervention Clinic that allowed young people with situational stressors to access timely, short-term supports.

Partnerships with consortium partners and local health professionals across all Centres were also up scaled to enhance the four stream model of headspace and the 'one stop shop' ethos.

ABORIGINAL YOUTH PEER SUPPORT WORKERS

The Adelaide Primary Health Network provided Sonder with funding across its 3 headspace centres to enhance services for Aboriginal and Torres Strait Islander Youth, including improving cultural appropriateness, sensitivity, safety and cultural responsiveness.

This welcome funding led to the employment of Aboriginal Youth Peer Support Workers at each headspace Centre to engage with and support young people from Aboriginal and/or Torres Strait Islander backgrounds.

PUSH-UP CHALLENGE

Sonder and headspace Centres joined in on the national, month-long Push-Up Challenge, raising awareness about suicide and raising funds for headspace centres.

720 people from around the state joined our centres, raising \$79,096 collectively for headspace Adelaide, Edinburgh North and Onkaparinga.

COMMUNITY ENGAGEMENT

Due to COVID-19, community engagement had a largely online focus which led to the development of 'Online Functional Recovery Space's' on each headspace Centre's webpage.

Volunteers and staff have produced blogs, vlogs and other resources for young people.

During the 2019/20 financial year, we increased our focus on youth participation with our number of Youth Reference Group Members increasing by 50.

EMERGE

The 2019/20 financial year saw the maturity of the emerge service at Sonder's Edinburgh North and Onkaparinga Centres.

The emerge program provides support to young people aged 16-25 with mental health needs above that which can be supported within the headspace model.

During the 2019/20 financial year, the emerge program provided 16,174 supports to 672 'complex' youth who may have "fallen through the cracks" previously.

The multi-disciplinary approach to care was demonstrated with 50% of supports provided for mental health, 30% for care coordination and 24% for psychosocial recovery



“

I want to keep living and I now feel like there is a hope at the end of the tunnel. I can beat my struggles and start living like normal again. I am much more happy with life thanks to emerge.

”

- Sonder client

and peer supports.

Young people within the emerge program were also supported with 576 hours of psychiatry services.

QUALITY IMPROVEMENT

During the 2019/20 financial year, emerge introduced an evidence-based and validated wellbeing measure, 'My Wellbeing Survey' which assessed and tracked a young person's wellbeing.

Clinically significant mental health improvements were demonstrated among 74% of young people engaged in the emerge service.

The impact the emerge program has had on young people extends to service experience, with 94% of young people feeling listened to and respected, 89% feeling cared for and safe and 87% feeling involved in decision-making from excellent staff communication.

A key pillar of emerge is the shared care arrangements which has driven clinical quality improvement not only for complex youth but for young people across all steps of care.

Through meaningful engagement and successful working relationships, Local Health Networks, emerge and headspace services were able to

support two-way transitions of young people between primary and tertiary mental health care settings.



**Alcohol
& other
drugs.**

Alcohol & other drugs.

The 2019/20 financial year proved to be an exciting, challenging, and innovative year for the Alcohol and Other Drugs (AOD) programs at Sonder.

Sonder's position as a specialist AOD service provider was strengthened through the commencement of In Home Withdrawal Services.

The 2019/20 financial year saw the re-design of the Northern Connect program model to now include specialist Comorbidity Clinicians as well as the introduction of a unique program, COPE that helps people who experience PTSD to manage memories about their trauma, without the use of alcohol and/or other drugs.

COMORBIDITY TREATMENT OF AOD AND MENTAL HEALTH

Sonder's commitment to the recognition and treatment of the comorbidity of both AOD and Mental Health continued through service delivery in the Gawler Barossa regions and to the northern metropolitan Adelaide area through Northern Connect.

Our Gawler-Barossa AOD program supported 53 people, with 92% reporting satisfaction

across 10 key domains and 63% reporting a decrease in their substance use.

Sonder's Northern Connect program, delivered in partnership with Life Without Barriers, Uniting Communities and Drug and Alcohol Services (DASSA), saw a 45% increase in referrals received across the consortium. 86% of clients reported a reduction or cessation of their substance use and almost 80% reported an improvement in their psychological health.

IN-HOME WITHDRAWAL SERVICE

Sonder's commitment to providing innovative approaches to AOD treatment was demonstrated through the commencement of an In-Home Withdrawal Service.

The In-Home Withdrawal Service supports people aged 30 years and over with low-moderate substance dependence to safely withdraw (detox) from substances within their home.

Clients are supported through a multi-disciplinary team of AOD Nurses, AOD Workers, and AOD Peer Support Workers, with a GP to oversee the medical care.

Commencing service delivery

in September 2019, the service received 119 referrals in its first year and provided support to 47 clients through delivery of just under 3,000 occasions of service.

66.5% of clients in the service reported improved ability to manage their substance use, 67% reported improved psychological health, and 74% reported an improvement in their physical health.

Through the service, Sonder also committed to the value of the voice of the lived experience, integrating two Peer Support Workers into the treatment team.

“

The team were wonderful. The service has improved my quality of life greatly.

”

- Sonder client

We supported
47
people to withdraw
from substances
in their own
homes

77%
of clients reported
improved physical
health

67%
of clients reported
improved
psychological
health





**Employment
support.**

Employment support.

Sonder provides employment support to both young people and migrants and refugees.

Both employment programs are based on a successful, evidence-based model known as Individual Placement and Support (IPS) which has been implemented in Australia and internationally with outstanding job outcomes.

HEADSPACE EMPLOYMENT SUPPORT

As the lead agency of headspace Edinburgh North in Adelaide's northern suburbs, Sonder has been delivering IPS services integrated with youth mental health services since 2016.

headspace Edinburgh North was chosen as one of fourteen sites to take part in this IPS Trial, supported by the Commonwealth Department for Social Services.

Throughout the 2019/20 financial year, headspace Edinburgh North continued to deliver integrated mental health and vocational services.

Two full time vocational specialists worked closely with the emerge and headspace clinical team to support young people into 35 job placements.

The team completed 483 face-

to-face employer contacts with or on behalf of clients and 1,127 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 the most recent review, the team scored 'good fidelity'. This is further evidence of the high quality of services delivered by the team.

The team's efforts were recognised at the Adelaide Primary Health Network's Health Care Awards Night for their achievement in Integration and Collaboration.

EMPLOYMENT SOLUTIONS

The 2019/20 financial year was a year of successes, learnings and overwhelmingly positive stories of resilience for Sonder's Employment Solutions program.

Employment Solutions was designed to improve employment outcomes for migrants and refugees living in the Adelaide's Northern and Western suburbs by helping them to overcome complex barriers to employment.

The program continued to deliver integrated vocational and

well-being support using a modified version of the IPS model.

Employment Solutions supported clients into 203 job placements, initiated and maintained over 2,350 face-to-face contacts with employers and local business and provided 3,558 occasions of service to over 300 clients in the last year.

The Employment Solutions team performed exceptionally well, continuing to place clients into employment throughout this ever-changing environment.

Having a program which can facilitate meaningful job opportunities opens the doorway for migrants and refugees to move forward, forging their own networks.

The trial program provided by the Department of Social Services under the Try, Test and Learn fund was due to end 30 June 2020. However, in May 2020 Sonder was pleased to learn the Department had committed to fund an additional 12 months.

This is a great opportunity to continue supporting migrants and refugees into meaningful employment, particularly during these uncertain times.

headspace Employment Support

Supported young people into
35
job placements

Employment Solutions

Delivered
3,558
occasions of service

Employment Solutions

Supported clients into
203
job placements



“

I am so happy for the Sonder Employment program, it's given me a lot of hope.

They have helped me to find work and understand issues with Centrelink. I would like to continue with it for a long time.

It's hard when you first come to Australia because we are refugees and Sonder helped me know how to look for a job and what to do in an interview.

”

- Anok,
Employment Solutions Client



**Aboriginal
health.**

Aboriginal health.

Supported
1,243
Aboriginal
people

Outreach Workers
provided
8,031
occasions
of service

Care Coordinators
provided
34,173
occasions
of service

CLOSING THE GAP - INTEGRATED TEAM CARE

The Closing the Gap – Integrated Team Care (CTG ITC) program is funded by both the Adelaide and Country SA Primary Health Networks to help close the gap of life expectancy between Aboriginal and Torres Strait Islander People & non-Aboriginal people.

The program's Outreach Workers and Care Coordinators support clients to access culturally sensitive and appropriate primary healthcare services for Aboriginal people with chronic disease.

Throughout the 2019/20 financial year, Sonder continued to make enhancements to the quality of service delivery across metropolitan Adelaide, Gawler, Barossa, Yorke Peninsula and Mid-North regions in Country South Australia.

The Closing the Gap – Integrated Team Care program received 306 new referrals into the program and provided support to 1,243 Aboriginal and/or Torres Strait Islander people. This is a 17% increase from the previous financial year.

Care Coordinators work with clients to help them to understand their chronic health condition and provide support to help them manage it by following a GP Management Plan.

Throughout the 2019/20 financial year, Care Coordinators provided 34,173 occasions of service to clients.

Outreach Workers provide practical assistance to clients and help them make better use of available health services by providing support to attend appointments.

Throughout the 2019/20 financial year, Outreach Workers provided

8,031 occasions of service to clients.

715 GENERAL PRACTICE SUPPORT

In June 2020, the Department of Health Minister, Hon. Greg Hunt announced that Sonder was 1 of the 3 SA service providers to receive funding under the Indigenous Australians Health Programme – Emerging Priorities Program.

Sonder's new program, 715 General Practice Support will launch towards the end of 2020 and is focused on increasing the uptake of Aboriginal Health Assessments.

Aboriginal Health Practitioners within the program will work with targeted general practices to provide cultural support and mentoring to practice staff to better understand and respond to the needs of the practice's

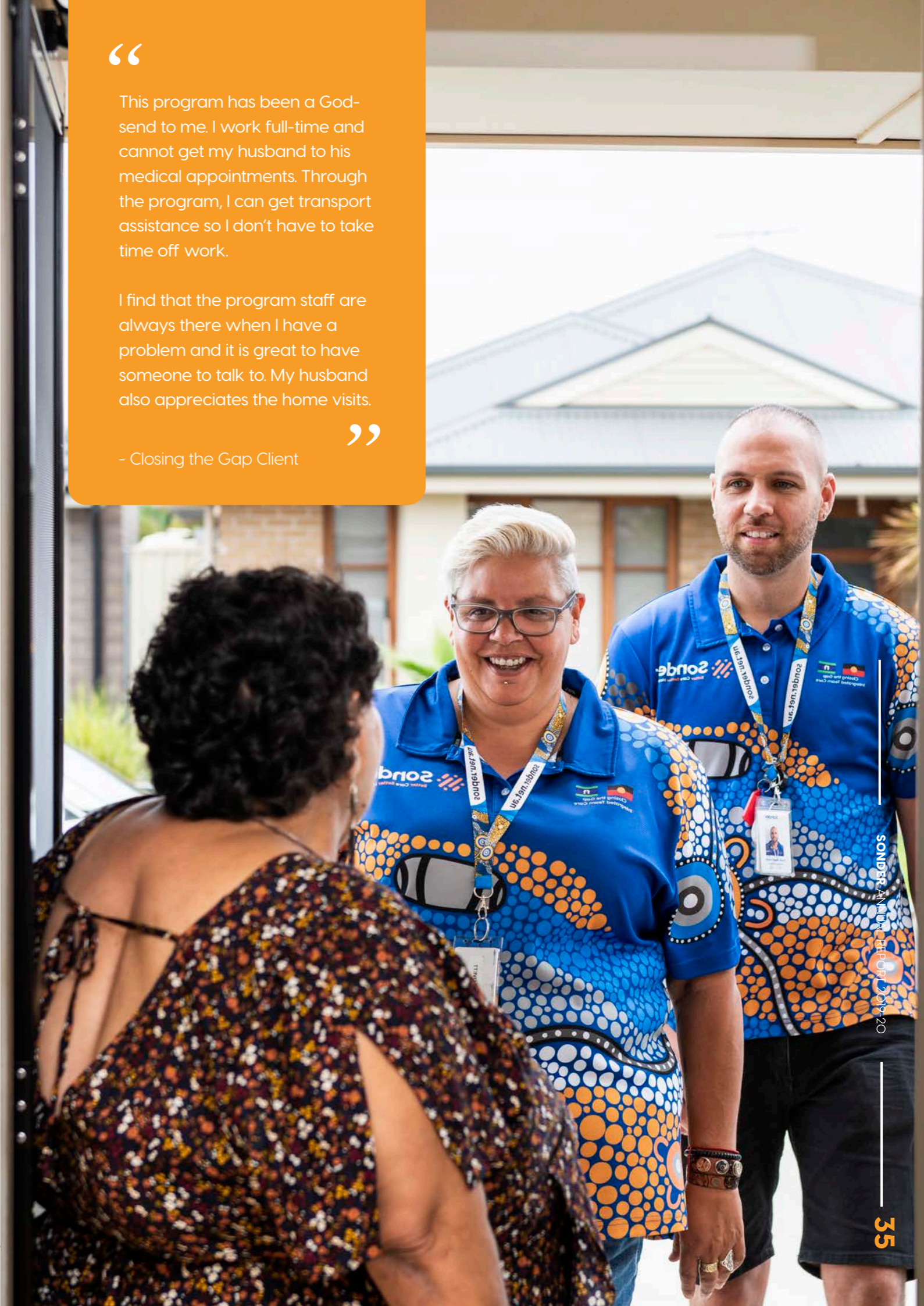
“

This program has been a God-send to me. I work full-time and cannot get my husband to his medical appointments. Through the program, I can get transport assistance so I don't have to take time off work.

I find that the program staff are always there when I have a problem and it is great to have someone to talk to. My husband also appreciates the home visits.

”

- Closing the Gap Client



A woman with blonde hair, wearing a red short-sleeved shirt, is smiling and standing in a gym. She is positioned in front of a row of treadmills. The background shows other gym equipment and bright windows, creating a well-lit and active atmosphere.

**Community
health.**

Community health.

HEALTHY EATING ACTIVITY AND LIFESTYLE

Implementation of the Healthy Eating Activity and Lifestyle (HEAL) program continued throughout the 2019-20 financial year.

HEAL is an 8 week, group-based, lifestyle modification program that supports people with or at risk of chronic disease to improve their nutrition and exercise related behaviours.

During the last financial year, 22 HEAL programs were delivered to 168 participants.

A total of 69 programs have been delivered to 599 participants since the program commenced in 2018.

HEAL programs were delivered across 11 different communities, including Clare, Port Lincoln, Tumby Bay, Cleve, Kadina, Port Augusta, Roxby Downs, Orroroo, Port Pirie, Gawler and Nuriootpa.

To date, Sonder has trained 22 local health professionals to deliver the program. During the 2019/20 financial year, two new facilitators completed training, enabling program delivery to commence in Pinnaroo and Port Augusta.

ALLIED HEALTH SOLUTIONS

Sonder's Allied Health Solutions program launched in the previous financial year.

The program focuses on providing allied health services to people living in the Southern Yorke Peninsula, who are living with or are at risk of developing a chronic disease.

Care Coordinators in the program advocate for the client's health needs and arrange a team-based approach to their care.

Throughout the 2019/20 financial year, Care Coordinators supported 566 clients to access a total of 2,428 occasions of service, delivered by a diverse team of Allied Health Professionals.

The program staff engaged in a consultation and review process with local general practices.

Following the review, the program underwent a process of redevelopment in July 2019 which led to a more streamlined and simplified referral process, resulting in 574 referrals, 73% more than the previous financial year.

Additionally, the program's service model was redeveloped to include salaried Allied Health Professionals, rather than relying solely on contractors and in late 2019, a Diabetic Educator and Dietitian were recruited to provide services across the Southern Yorke Peninsula.

Consulting spaces were secured for the Diabetic Educator and Dietitian with both being strategically co-located in general practices. This has been instrumental in the overall success of the program, as staff are on-site to engage with practice staff, increasing visual presence and accessibility.

INCREASING DEMAND

General Practices are now confidently referring patients into the program and are finding their patients are having successful outcomes.

Demand for the program is high as clients receive a service and recommend the Allied Health solutions program to their families and friends.

“

I entered the HEAL program unsure of what to expect.

I now feel a lot more confident in myself to create changes in my diet and increase my physical activity levels.

I have begun doing exercises at home including sit to stands, theraband exercises and balance exercises on top of riding my bike daily.

”

- HEAL client

2,428
occasions of service delivered by allied health professionals

Supported **566** people to access allied health services

168
people participated in 22 HEAL programs in regional SA



A group of healthcare professionals in blue scrubs, with a stethoscope around the neck of the man in the foreground. The background is a bright, clinical setting.

**GP & allied
health
support.**

GP & allied health support.

CPD EDUCATION

Sonder is an RACGP-accredited Quality Improvement (QI) and Continuing Professional Development (CPD) provider.

We provide education events for GPs, Nurses and Allied Health Professionals. Our education calendar captures a wide range of relevant and informative topics.

During the 2019/20 financial year, Sonder delivered 52 CPD events which were attended by 1,298 primary healthcare workforce members, including 445 General Practitioners.

The COVID-19 epidemic impacted the delivery of CPD events between March-June 2020, resulting in all face-to-face education events being cancelled. Sonder was quick to adopt a new approach and delivered 8 CPD events via online webinars between April – June 2020.

Sonder continued to collaborate with Local Health Networks (NALHN, CALHN and SALHN) and their specialty teams to deliver sessions on topics such as orthopaedics, cancer management, heart failure and iron deficiency.

Sonder also collaborated with the Office of Chief Psychiatrist, delivering a two-part workshop on suicide prevention.

EDUCATION FOR INTERNATIONAL MEDICAL GRADUATES

The Joint Education support Program was launched in 2017 in collaboration with International Medical Graduates (IMG) advocacy organisations, including the South Australian Indian Medical Association, the Bangladesh Medical Society of South Australia, the South Australian Sri Lanka Doctors Association, the Pakistani Medical Association of South Australia, and the Australian Chinese Medical Association.

The program was designed to provide education and support to IMGs who are preparing to enter the Australian workforce through a series of workshops. Since its inception in 2017, Sonder has delivered 3 cycles of the program, supporting hundreds of IMG Doctors to successfully complete their Australian Medical Council clinical examination.

In December 2019, Sonder invited representatives from all IMG advocacy organisations to discuss the future scope of the program.

A new model was proposed, including a 2 day comprehensive workshop covering all topics and a clinical mock exam.

During the 2019/20 financial year, Sonder delivered 6 workshops, with each session attended by 10 IMG doctors on average.

PROFESSIONAL NETWORKS

NURSE NETWORKS

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

In the 2019/20 financial year, Sonder hosted two network meetings per region covering informative and relevant topics across primary health care.

PRACTICE MANAGERS NETWORKS

Sonder's Northern and Southern Practice Managers Network Meetings provide members with the knowledge and resources to build the capacity and efficiency of their general practice for better patient outcomes.

In the 2019/20 financial year, Sonder hosted four Practice Manager Network meetings per region.

PRACTICE OWNERS NETWORK

Launched in 2016, Sonder's Practice Owners Network provides advocacy to Practice Owners in metropolitan Adelaide to address concerns or challenges faced by members. These matters are then escalated to the relevant agencies or funding bodies.

In the 2019/2020 financial year, Sonder coordinated four meetings, providing networking opportunities to over 25 Practice Owners per event.

52

CPD events delivered to health professionals

1,298

health professionals attended CPD events

Including
445
General Practitioners



REGIONAL GP COUNCILS

During the 2019/20 financial year, we saw major changes to the Northern and Southern Region GP Councils both in regard to composition as well as how these bodies engage with the changing health care system.

The advent of the decentralised Local Health Network structures meant that a regional north/south divide of the GP Council was no longer feasible and inhibited the ability of the regional GP Councils to raise issues that affect General Practice and its ability to provide effective primary health care in the community.

The COVID-19 epidemic also forced the meetings to be held virtually and the success of that broad experiment, coupled with the success of the joint meetings led to the members of the GP Councils and Sonder to begin the conversations about the establishment of a single GP advocacy body - the Adelaide GP Council (AGPC).

While the AGPC has its genesis in the amalgamation of the Northern Region GP Council and Southern Region GP Council - the metro-wide Adelaide GP Council is going to be much more than improving engagement with the LHNs and the Adelaide PHN.

The AGPC will be constituted as a sub-committee of the Sonder Board and will therefore be able to action the advocacy and engagement issues raised at the Council.

The Adelaide PHN is a financial supporter of this initiative and we hope that this will lead to greater engagement about the PHN's needs assessment and their health system improvements.

A draft Terms of Reference is currently being considered by the nascent Council members and the AGPC will be fully constituted by January 2021.

Meetings of the combined GP Councils were again very productive and Members hosted a range of speakers and decision-makers from across the health spectrum.

Summaries of these meetings can be found on the Sonder website and have been circulated via the Sonder newsletters.

THE CURRENT MEMBERS OF THE ADELAIDE GP COUNCIL ARE:

- Dr Rizwan Latif (Chairman) – Craigmores Family Practice
- Dr Stephen Salagaras – Two Wells Medical
- Dr Oliver Frank – Oakden Medical Centre
- Dr Sian Goodson – Paralowie Family Health
- Dr Carolyn Roesler – Elizabeth Medical and Dental
- Dr Louis Skeklios – Golden Grove Health Centre
- Dr Md Moniruzzaman – Prospect Medical Centre
- Dr Jai Krishnan – Europa Medical Centre
- Dr Radhika Dara – Prospect Medical Centre
- Dr Helen Parry – Seacombe Medical Centre
- Dr Richard Reed – Flinders University
- Dr Kin Lau – Southern Fleurieu Family Practice
- Dr Timothy Chew – UniSA Clinic and Ingle Farm Family Practice
- Dr Martin Davey – Rose Street Clinic
- Dr Rachel Dawson – Seacombe Medical Centre



Dr Rizwan Latif



Dr Stephen Salagaras



Dr Oliver Frank



Dr Sian Goodson



Dr Carolyn Roesler



Dr Louis Skeklios



Dr Md Moniruzzaman



Dr Radhika Dara



Dr Helen Parry



Dr Richard Reed



Dr Kin Lau



Dr Timothy Chew



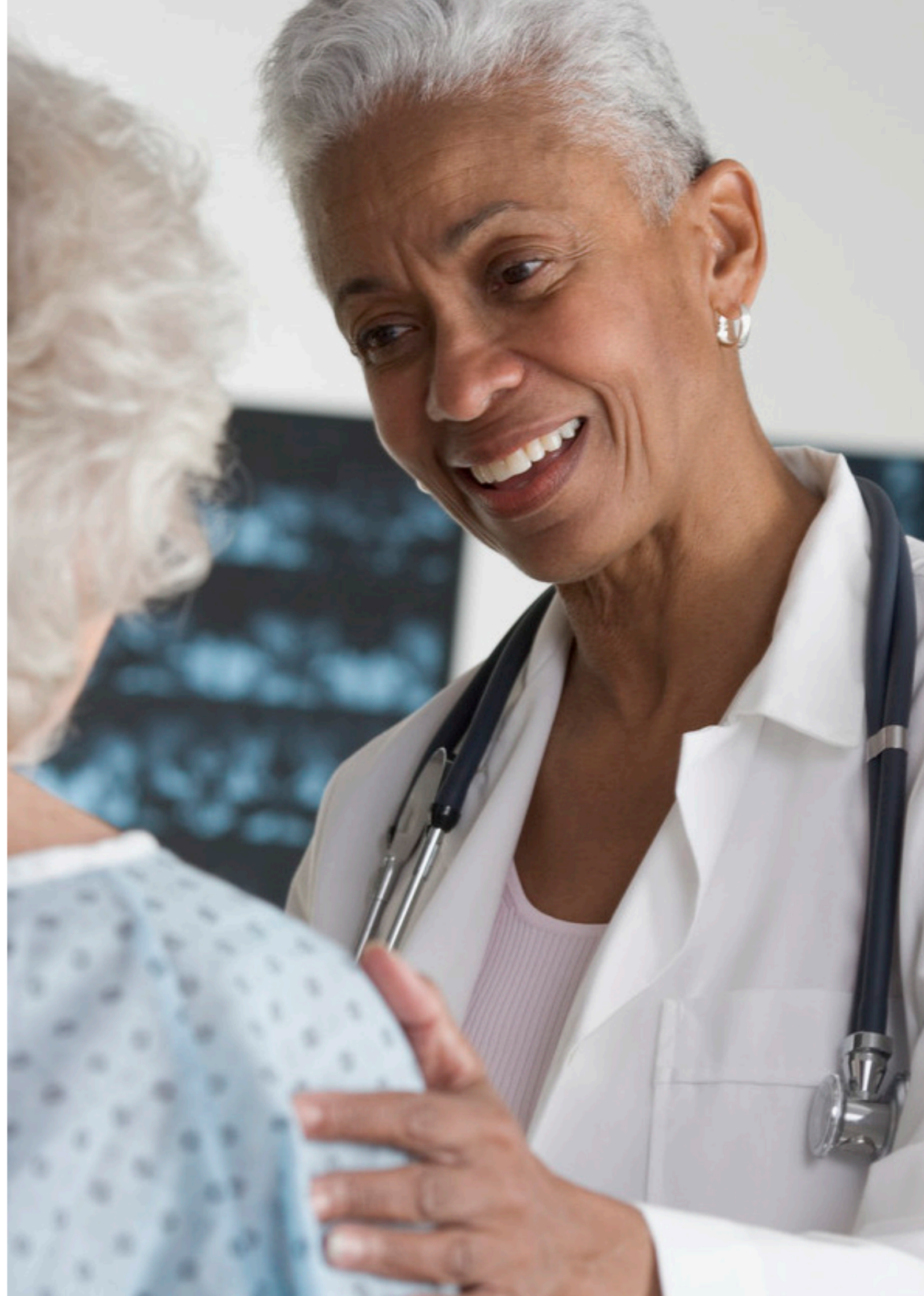
Dr Martin Davey



Dr Jai Krishnan



Dr Rachel Dawson





**Research
& evaluation.**

Research & evaluation.

Throughout the 2019-2020 financial year, Sonder continued to expand its research and evaluation capacity through the facilitation of public health student placements, developing and strengthening partnerships with both internal and external parties and further embedding research and evaluation across Sonder programs.

In partnership with the University of Adelaide, School of Public Health, Sonder commenced the acceptance of Public Health Students to undertake Research and Evaluation activities within the organisation.

EVALUATION REPORTING

Sonder has conducted several comprehensive evaluations of events and programs, including

Closing the Gap Day 2019, Sonder Employment Solutions, In-home Withdrawal Service, Residential Wellbeing and Palliative Care.

PREMS

In December 2019 and June 2020 we distributed our 'Client Experience Survey' to clients to ask about their experiences receiving care at Sonder.

The combined results of the 2019-2020 survey show a high level of satisfaction and accessibility with services received at Sonder.

1,146 clients took the opportunity to provide feedback with 94% expressing that would refer the service family and friends.

Additionally, 72% reported that they could not have afforded a similar service.

We received feedback from
1,146
clients

Client experience results were higher than the 85% set benchmark for all questions except wait times.

98% of clients felt that their cultural and religious beliefs were respected and a further 96% felt as though they were treated with dignity and respect. Overall 49% of clients felt they had to wait a long time for services to start.

TELEHEALTH

Following the introduction of Telehealth services in response to the COVID-19 pandemic, in June 2020, Sonder distributed a 'Telehealth Experience Survey' to 6,489 clients.

885 responses were collected providing a 13.6% response rate.

The findings identified that saving commute time was the greatest

96%
of clients felt as though they were treated with respect

94%
of clients said they would refer family or friends to Sonder

72%
of clients said that they could not have afforded a similar service

98%
of clients felt that their cultural and religious beliefs were respected

reason of convenience for clients (33%), followed by being able to attend the session from a safe space/setting (30%).

Clients indicated that their privacy was respected (95%), were comfortable with communicating via Telehealth (82%) and that they received the same standard of care using Telehealth as they would have for face to face care (82%). Overall, 88% of the clients were satisfied with their Telehealth experience.

CURRENT RESEARCH PROJECTS

In September 2019, Sonder concluded the delivery of the 'Improving Mood with Physical ACTivity (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.

A total of 581 participants were recruited to the study, with 162 (34%) of all participants being recruited from headspace Edinburgh North. The research report is yet to be published.

Sonder commenced the delivery of the study 'Optimising Delivery of Trauma Therapy for Children and Adolescents with Posttraumatic Stress Disorder (CPT)', in partnership with Professor Reg Nixon and Flinders University.

The CPT study is a multi-phase project that involves determining rates of PTSD detection and

treatment delivery, training clinicians in and delivering cognitive processing therapy (CPT) and ongoing supervision for 6 months.

Sonder, Flinders University and the Statewide Eating Disorder Service are working together to deliver the three-phase 'FREED' Project which involves providing early intervention for eating disorders to young people in the Northern and Southern suburbs of Adelaide.

Sonder also partnered with Orygen and the University of Melbourne to deliver the study 'Young People's Experiences of Completing a Trauma and PTSD Screening Tool When Attending an Early Psychosis Program' which is being conducted at headspace Adelaide.

A woman in a denim shirt is standing and presenting to a group of people seated around a table in a meeting room. She is pointing at a whiteboard with a diagram that includes the word 'CONCEPT' and 'OPTION'. The whiteboard also has several sticky notes. The room has large windows in the background. The text 'Workforce development.' is overlaid on a blue circle on the left side of the image.

**Workforce
development.**

Workforce development.

“
Sonder recognises the importance of a strategic workforce plan as it leads to an increased capacity for innovation, productivity and adoption of new work practices which go beyond traditional models.
”

MENTAL HEALTH CLINICAL INTERNSHIP PROGRAM

The Mental Health Clinical Internship is a two year program which provides an exciting opportunity for postgraduate students to gain valuable hands-on experience and develop and refine their clinical skills in a supportive environment.

The program covers a combination of professional development, community engagement, clinical observations and supervised practice across the suite of Sonder programs.

The program follows a clinician-scholar training model and honors and teaches the mission of person-centered, evidence-based and recovery-focused clinical interventions to people presenting with a range of psychological difficulties.

Since the program's inception in 2014, 8 trainees have successfully completed the program, and seven of these trainees are currently employed as mental health clinicians by Sonder. Currently, there are four interns employed by Sonder who are all at different stages of their internship.

Two of these interns have completed Year One of their training and are currently

developing their clinical skills by working under weekly supervision with various client presentations including trauma, abuse, grief and loss, stress, depression and anxiety.

The interns also undertook professional development in the areas of Cognitive Behaviour Therapy, Acceptance and Commitment Therapy, Dialectic Behaviour Therapy, Suicide Risk Assessment, Solution Focused Brief Therapy, and Motivational Interviewing.

The newer interns are in the early stages of observing the process of therapy and the different modalities used by different clinicians across a variety of programs within Sonder, ranging from adult, family and perinatal wellbeing, to comorbidity and suicide prevention.

At the same time, they are also undertaking professional development activities to assist them in linking theory to practice.

STUDENT PLACEMENTS

As a progressive organisation with a strong focus on the future, Sonder continues to offer students meaningful placement experiences.

Placements enable Sonder to strengthen links with the broader

“
The internship's "built-in" support not only assisted me to develop professionally, but also personally.
”

KANNIKA SANGKHATIP
Clinical Internship Graduate

community and aids in the recruitment of future staff.

As demands on health services continue to increase, there is a greater need to train emerging health professionals.

There is strong evidence to suggest that the student placement program positively contributes to Sonder's service provision, with the benefits of the program as both tangible and intangible.

Throughout the 2019/20 financial year, Sonder continued its long standing partnership with Flinders University, providing placements for students undertaking the Masters in Cognitive Behavioural Therapy, with a focus on basic, problem-specific and meta-competencies with clients who generally have less complex clinical presentations.

Students receive weekly clinical supervision throughout their placement with a Clinical Lead from Sonder and the University to ensure high levels of fidelity with the Cognitive Behavioural Therapy treatment.

Two of the students who commenced their placement in September 2019 are nearing completion and have secured on-going employment with Sonder.

CONTINUING PROFESSIONAL DEVELOPMENT

As part of the organisation's vision to enhance the provision of high quality primary care services, Sonder has developed a plan to build a responsive workforce to meet the needs of the community.

The aim of Sonder's workforce plan is to provide a framework to attract, develop and support a well-led, high performing and sustainable team that delivers quality outcomes.

Sonder recognises the importance of a strategic workforce plan as it leads to an increased capacity for innovation, productivity and adoption of new work practices which go beyond traditional models.

IN THE 2019/20 FINANCIAL YEAR, SONDER IMPLEMENTED WORKFORCE DEVELOPMENT PATHWAY OPPORTUNITIES THROUGHOUT THE ORGANISATION, TO ENSURE:

- Opportunity for staff growth and career progression
- A strong highly skilled workforce
- Easing of hard to fill roles
- Minimisation of down time by reducing gaps in FTE



THESE WORKFORCE STRATEGIES INCLUDE:

- Leadership and Management Program
- Aboriginal Health Practitioner Traineeship Program
- Mental Health Clinical Internship Programs
- Graduate Mental Health Program
- Implementation of an Operational Management Structure with introduction of mentorship within these roles
- Senior Mental Health Clinician Review with the introduction of succession planning
- Support Services re-structure with the introduction of Senior, Team Leader & Coordinator opportunities
- Community Services expansion creating cross-portfolio opportunities



SonderIT.

Sonder IT.

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

SonderIT continued to support both internal stakeholders of Sonder as well as its external customers in FY19/20.

With the growth of Sonder during the financial year, SonderIT was able to respond to needs to ensure that the infrastructure and ICT systems in place could cope with the organisation's rapid growth.

Major internal projects were undertaken during the year such as relocating Sonder servers into a more secured site with faster and reliable internet and ensuring security systems are robust to protect data and privacy of Sonder clients.

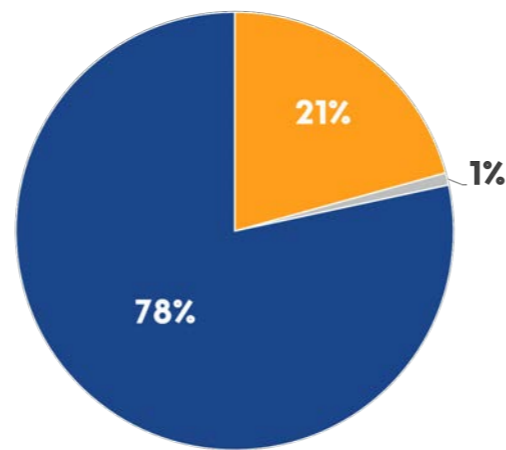
SonderIT was also able to quickly implement solutions and strategies to respond to COVID-19 restrictions which included establishing systems to provide Telehealth services to Sonder

clients and working from home arrangements for almost 250 employees. SonderIT also assisted its external clients in their ICT needs during this time.

SonderIT's service desk resolution rate as at 30 June 2020 was 99%. It also provided services to a range of clients in different industries and will continue to do so in the coming years.

There was an increase of 9% in SonderIT revenues for the year. This revenue was used to enhance direct service delivery.

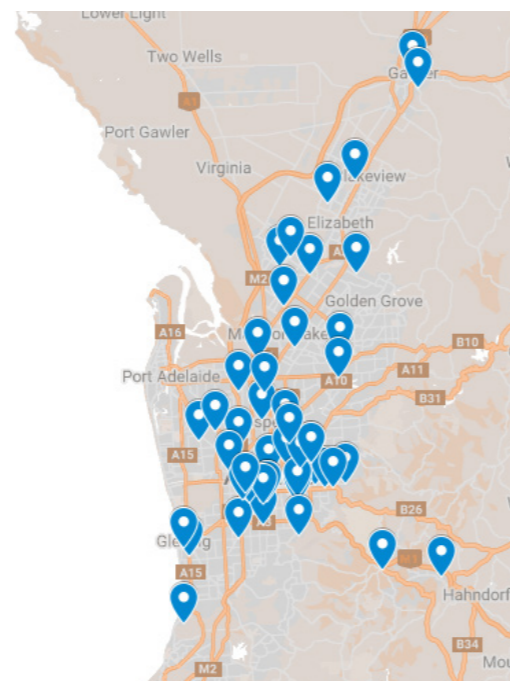
Client Base Per Industry
FY 19/20



- Corporate Clients
- Medical Practices
- Schools

OUR CUSTOMER BASE

Sonder IT services a diverse range of customers from different industries, across metropolitan Adelaide and country South Australia.



Financial performance.



Financial data from a document, including numbers and currency symbols, such as $(1,477)$, $41,864$, $3,258$, $(15,892)$, $16,386$, $25,184$, $(3,337)$, $6,101$, and $(5,151)$.

Financial performance.

Sonder continued to experience growth in FY19/20 due to the expansion of its current programs and new programs commissioned during the year.

This has been demonstrated by an increase of 70% in Sonder's revenues from the last financial year.

Across the 2019-20 financial year, Sonder was commissioned to deliver 32 programs by various funding bodies.

Below are some of programs that were new or expanded in the 2019/20 financial year:

- headspace Youth Early Psychosis program (hYEPP)
- headspace Adelaide Primary program
- Integrated Practice Unit Youth (IPUY)- Central
- headspace Adelaide, Edinburgh North and Onkaparinga welcomed Aboriginal Peer Support Workers to their teams.
- Walk-in After-hours service expanded opening hours to include Thursdays, Fridays, Saturdays and Mondays.

Total expenses for the financial year increased by 87% due to the increase in the number of programs delivered.

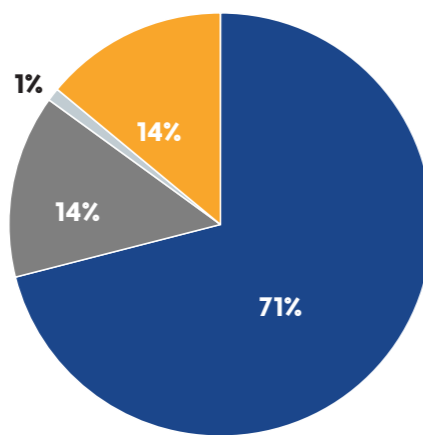
A large proportion of the total expenses incurred was direct service delivery costs, comprising

88% of the total expenses, mainly employment costs.

As at 30 June 2020, Sonder had 245 paid employees with an equivalent 198.69 FTE.

Sonder's occupancy related expenses also increased during the financial year due to the leasing of 2 additional offices and several co-located sites that came to fruition as requirements to deliver the programs.

REVENUE SOURCES PER PROGRAM TYPE

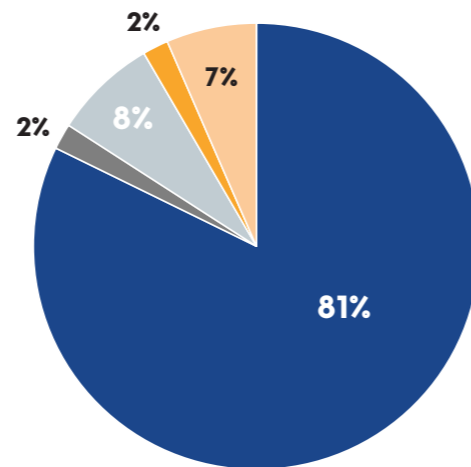


- Mental Health
- Community Health
- Other Services
- IT Services

Sonder realised a surplus of \$561k from operations and a total comprehensive income of \$1.47 million as at 30 June 2020.

Sonder also recorded Unrealised Gain from Investments and adjusted prior year figures to reflect the introduction of AASB16.

USE OF FUNDS PER ACTIVITY



- Employment Costs
- Administration
- ICT
- Occupancy
- Program delivery

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 FY19-20. This summary does not, and cannot be expected to provide a full understanding of the financial position of Sonder.

DIRECTORS' REPORT

The Directors present this report on the company for the financial year ended 30 June 2020.

DIRECTOR'S MEETINGS

	Board Meetings Attended	Annual General Meeting	Risk & Finance
Dr Farooq Ahmad	8	1	-
Dr Richard Heah	9	-	-
Dr Rizwan Latif	10	1	5
Dr Seema Jain	10	1	-
Dr Sudheer Talari	10	1	-
Mr Danny Haydon	9	1	4
Mr John Manning	10	1	5
Dr Kali Hayward	8	1	-

OPERATING RESULT

The total surplus from operations of the company for the financial year amounted to \$561,883.

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 deliver a range of mental health services across the age and diagnostic criteria. We also deliver innovative programs enabling improved access to early intervention health and wellness services both in metro and regional areas.

In FY2019/20, Sonder delivered programs across metropolitan Adelaide and Country SA with five main offices located in Edinburgh North, Port Adelaide, Nuriootpa, Christies Beach and Adelaide. 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 and the Commonwealth funded employment services for refugees and migrants and in-home withdrawal services. Sonder is also the lead agency for headspace Edinburgh North, headspace Onkaparinga and headspace Adelaide centres as well as the headspace Early Psychosis program.

Furthermore, Sonder has also provided support to GPs and the community through education and training, health promotions and the 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

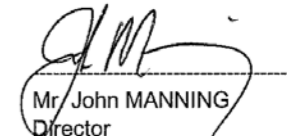
No person has applied for leave of Court to bring proceedings on behalf of the company or intervene in any proceedings to which the company is a party for the purpose of taking responsibility on behalf of the company for all or any part of those proceedings. The company was not a party to any such proceedings 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 29 September 2020

Statement of Comprehensive Income.

for the year ended 30 June 2020

	Note	2020 \$	2019 \$
Revenue	2	28,218,633	16,623,806
Employee benefits expense		(20,949,915)	(10,865,203)
Program delivery expenses		(3,263,621)	(2,398,077)
ICT expense		(541,042)	(839,106)
Occupancy expenses		(2,144,660)	(1,221,225)
Other expenses		(757,512)	(621,341)
Total surplus from operations		561,883	678,854
Other comprehensive income			
Unrealised gain (loss) from investments		120,250	47,190
Revaluation Reserve		796,485	
Total comprehensive income for the year		1,478,618	726,044

Statement of Financial Position.

as at 30 June 2020

	Note	2020 \$	2019 \$
ASSETS			
Current assets			
Cash assets	3	9,029,954	9,392,804
Receivables	4	538,374	521,264
Other	6	41,735	41,372
Total current assets		9,610,063	9,955,440
Non-current assets			
Property, plant and equipment	7	3,754,002	2,927,361
Financial assets	5	3,298,085	1,157,114
Total non-current assets		7,052,087	4,084,476
Total assets		16,662,150	14,039,916
LIABILITIES			
Current liabilities			
Trade and accounts payable	8	3,919,193	3,185,086
Financial liabilities	9	968,011	362,070
Current tax liabilities	10	817,055	760,199
Provisions	11	1,344,223	690,409
Other current liabilities	12	1,767,789	2,610,949
Total current liabilities		8,816,271	7,608,7133
Non-current liabilities			
Financial liabilities	9	1,999,485	2,443,633
Provisions	11	790,411	410,205
Total non-current liabilities		2,789,896	2,853,838
Net assets		5,055,983	3,577,365
Equity			
Retained earnings		4,047,332	3,485,449
Other reserves		1,008,651	91,916
Total equity		5,055,983	3,577,365

Statement of Changes in Equity.

for the year ended 30 June 2020

	Retained Earnings	Other reserves	Total
Balance at 01/07/2018	2,806,595	44,726	2,851,321
Comprehensive income			391,941
Surplus from operations for the year	678,854		678,854
Other comprehensive income for the year		47,190	47,190
Balance at 30/06/2019	3,485,449	91,916	3,577,365
Comprehensive income			
Surplus from operations for the year	561,883		561,883
Other comprehensive Income for the year		916,735	916,735
Balance at 30/06/2020	4,047,332	1,008,651	5,055,983

Statement of Cash Flows.

as at 30 June 2020

	2020 \$	2019 \$
CASH FLOW FROM OPERATING ACTIVITIES		
Receipts from customers	28,116,539	15,405,070
Payments to suppliers and employees	(25,496,248)	(6,945,736)
Interest received	64,867	81,216
Dividends received	(144,871)	(67,006)
Net cash provided by (used in) operating activities (note 2)	20,118	23,921
	2,560,405	8,497,465
CASH FLOW FROM INVESTING ACTIVITIES		
Payment for:		
Investment portfolio	(2,020,721)	(65,198)
Payments for property, plant and equipment	(905,673)	(3,130,083)
Net cash provided by (used in) investing activities	(2,926,394)	(3,195,281)
CASH FLOW FROM FINANCING ACTIVITIES		
Proceeds of borrowings	3,139	-
Repayment of borrowings	-	(2,113)
Net cash provided by (used in) financing activities	3,139	(2,113)
Net increase (decrease) in cash held	(362,851)	5,300,072
Cash at the beginning of the year	9,392,804	4,092,733
Cash at the end of the year (note 1)	9,029,954	9,392,804

Statement of Cash Flows.

for the year ended 30 June 2020

	2020 \$	2019 \$
NOTE 1. RECONCILIATION OF CASH		
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	8,255	5,516
CBA Term Deposit Bank Guarantee	100,000	100,000
NAB Cheque	891,640	28,439
NAB Savings	4,276,329	5,673,092
NAB Staff Liability a/c	508,573	508,117
NAB Term Deposits	3,242,448	3,075,807
Petty Cash	2,708	1,834
	9,092,954	9,392,804

NOTE 2. RECONCILIATION OF NET CASH PROVIDED BY/USED IN OPERATING ACTIVITIES TO NET PROFIT

Operating profit (loss)	561,883	678,854
Depreciation	875,518	205,721
Changes in assets and liabilities net of effects of purchases and disposals of controlled entities:		
(Increase) decrease in trade and term debtors	(17,109)	(266,600)
(Increase) decrease in prepayments	(364)	(1,149)
Increase (decrease) in trade creditors and accruals	616,277	2,389,045
Increase (decrease) in other creditors	(830,936)	1,870,580
Increase (decrease) in lease liabilities	158,654	2,790,335
Increase (decrease) in employee entitlements	1,140,305	317,968
Increase (decrease) in sundry provisions	56,178	512,711
Net cash provided by operating activities	2,560,405	8,497,465

Notes to the Financial Statements.

for the year ended 30 June 2020

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.

New accounting standards adopted

This standard has been adopted from 1 July 2019. Prior year figures have been amended in line with the adoption of AASB16 for comparative purposes. AASB16 replaces AASB117 and for Lessee, eliminates the classifications of operating leases and finance leases.

Except for short-term leases and leases of low-value assets, Right-of-Use Assets and corresponding Lease Liabilities are recognised in the Statement of Financial Position.

Straight-line Operating Lease/Rent expense recognition is replaced with a depreciation charge for the right-of-use assets and an interest expense on the recognised liabilities.

In the earlier period of the lease, the expense associated with the lease under AASB16 will be higher than when compared to AASB117. However, EBITDA (Earnings before interest, tax, depreciation and amortisation) results improve as the operating expense is now replaced by interest expense and depreciation in profit or loss.

For classification within the statement of cash flows, the interest portion is disclosed on operating activities and the principal portion of the lease payments are separately disclosed in financing activities.

For lessor accounting, the standard does not substantially change how a lessor accounts for a lease.

Impact of Adoption

Prior year figures have been adjusted to reflect the introduction of AASB16 and provide comparatives. The changes and their effect of the results of the Company are summarised as follows:

Notes to the Financial Statements.

for the year ended 30 June 2020

	2020 \$	2019 \$
Interest Expense	\$ 144,871	\$ 67,006
Depreciation	\$ 836,016	\$ 192,846
Adjustment to Rent Expense	(\$ 891,890)	(\$ 209,246)
(Increase) Decrease in Operating Profit	\$ 88,997	\$ 50,606
<hr/>		
Operating Lease Commitments at Balance Date	\$ 2,948,989	\$ 2,790,335
Right-of-Use Assets	\$ 2,809,386	\$ 2,739,729

(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.

Leases

Leases of fixed assets, where substantially all the risks and benefits incidental to the ownership of the asset, but not legal ownership, are transferred to Adelaide Northern Division of General Practice Ltd are classified as finance leases.

Finance leases are capitalised recording an asset and a liability equal to the present value of the minimum lease payments, including any guaranteed residual value. Lease payments are allocated between the reduction of the lease liability and the lease interest expense for the period.

Leased assets are depreciated on a straight-line basis over their estimated useful lives where it is likely that Adelaide Northern Division of General Practice Ltd will obtain ownership of the asset or over the term of the lease

Notes to the Financial Statements.

for the year ended 30 June 2020

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

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 asset's employment and subsequent disposal. The expected net cash flows have not been discounted to present values in determining the recoverable amounts.

Notes to the Financial Statements.

for the year ended 30 June 2020

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
Computer Equipment	25%
Office Equipment	25%

RIGHT OF USE ASSETS

A right-of-use asset is recognised at the commencement date of a lease. The right-of-use asset is measured at cost, which comprises the initial amount of the lease liability, adjusted for, as applicable, any lease payments made at or before the commencement date net on any lease incentives received, any initial direct costs incurred and, except where included in the cost of inventories, an estimate of costs expected to be incurred for dismantling and removing the underlying asset and restoring the site or asset.

Right-of-use assets are depreciated on a straight-line basis over the unexpired period of the lease or the estimated useful life of the asset, whichever is shorter. Where the company expects to obtain ownership of the leased asset at the end of the lease term, the depreciation is over its estimated useful life. Right-of-use assets are subject to impairment or adjustment for any remeasurement of lease liabilities.

The company has elected not to recognise a right-of-use asset and corresponding lease liability for short-term leases with terms of 12 months or less, and leases of low-value assets. Lease payments on these assets are expensed to profit or loss as incurred.

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.

Notes to the Financial Statements.

for the year ended 30 June 2020

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 2020

	2020 \$	2019 \$
NOTE 2: REVENUE AND OTHER INCOME		
Revenue:		
Grant Funding Income	27,477,432	15,915,012
IT Services Income	250,424	229,527
Interest Income	64,867	81,216
Other Income	425,910	398,051
	28,218,633	16,623,806

NOTE 3: CASH ASSETS

Bank accounts:

Cash at Bank	8,255	5,516
CBA Term Deposit Bank Guarantee	100,000	100,000
NAB Cheque	891,640	28,439
NAB Savings	4,276,329	5,673,092
NAB Staff Liability a/c	508,573	508,117
NAB Term Deposits	3,242,448	3,075,807

Other cash items:

Petty Cash	2,708	1,834
	9,029,954	9,392,804

Reconciliation of Cash:

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	9,029,954	9,392,804
	9,029,954	9,392,804

Notes to the Financial Statements.

for the year ended 30 June 2020

	2020 \$	2019 \$
NOTE 4: RECEIVABLES		
Current		
Trade debtors	538,374	521,264
	538,374	521,264

NOTE 5: OTHER FINANCIAL ASSETS

Investment Portfolio	3,085,919	1,065,198
Unrealised Gain from Investments	212,166	91,916
	3,298,085	1,157,114

NOTE 6: OTHER CURRENT ASSETS

Prepayments	41,535	41,172
Other	200	200
	41,735	41,372

NOTE 7: PROPERTY, PLANT AND EQUIPMENT

Computer Equipment

At Cost	365,267	197,508
Less: Accumulated Depreciation	(94,281)	(9,875)

Office Equipment

At Cost	105,407	
Less: Accumulated Depreciation	(26,847)	

Leasehold Improvements

At Cost	662,603	
Less: Accumulated Depreciation	(67,533)	

Right-of-Use Assets	2,809,386	2,739,729
	3,754,002	2,927,361

Notes to the Financial Statements.

for the year ended 30 June 2020

	2020 \$	2019 \$
NOTE 8: PAYABLES		
Unsecured:		
- Trade creditors	215,913	306,428
- Other creditors	296,156	178,326
- Committed Funds	3,407,124	2,700,332
	3,919,193	3,185,086

NOTE 9: FINANCIAL LIABILITIES

Current		
Unsecured:		
- Credit Cards	18,507	15,368
- Lease Liabilities	949,504	346,702
	968,011	362,070
Non-Current		
Unsecured:		
- Lease Liabilities	1,999,485	2,443,633
	1,999,485	2,443,633

NOTE 10: TAX LIABILITIES

Current		
GST clearing	548,019	609,495
Amounts withheld from salary and wages	269,036	150,704
	817,055	760,199

Notes to the Financial Statements.

for the year ended 30 June 2020

	2020 \$	2019 \$
NOTE 11: PROVISIONS		
Current		
Employee entitlements*	1,344,223	690,409
	1,344,223	690,409
Non-Current		
Employee entitlements*	790,411	410,205
	790,411	410,205
* Aggregate employee entitlements liability	2,134,634	1,100,613

NOTE 12: OTHER LIABILITIES

Current		
Grants in Advance	1,767,789	2,610,949
	1,767,789	2,610,949

NOTE 13: AUDITORS' REMUNERATION

Remuneration of the auditor of the company for:		
Auditing or reviewing the financial report	10,000	8,000
Other services	-	-
	10,000	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 2020.

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