

Mental Health
Professionals'
Network

ANNUAL
REPORT

2025



Acknowledgement of Country

The Mental Health Professionals' Network (MHPN) respectfully acknowledges the Wurundjeri and Boon Wurrung people of the Kulin nation, the Traditional Owners and Custodians of the land on which our office is situated and pay our respects to their Elders past and present. Through our programs, MHPN is committed to working with Aboriginal and Torres Strait Islander peoples as community members, clients and practitioners, and to supporting culturally safe mental health care.

Mental Health Professionals' Network

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Introduction

This year has been one of focus and progression for MHPN, as we began implementing our new strategic plan to guide our direction for the next three years.

The National Networks Program continues to provide practitioners with valuable peer support and connections, both locally and nationally. The Online Professional Development Program remains popular, covering topics that reflect the needs and interests of mental health professionals across Australia.

MHPN's Programs continue to support multi-disciplinary mental healthcare through networking, collaboration and professional learning opportunities.

Interdisciplinary practitioner **networking**, both in-person and online

Professional development **webinars**, livestreams and recordings

The **podcast** program, available on our website and all major platforms



Australian Government
Department of Health, Disability and Ageing

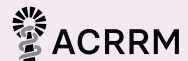
MHPN is a not-for-profit organisation funded by the Australian Government Department of Health, Disability and Ageing.

The four member organisations and four partner organisations that actively support MHPN have been integral to the initiative's success. They are respectively: Australian Psychological Society, Royal Australian College of General Practitioners, The Royal Australian and New Zealand College of Psychiatrists and The Australian College of Mental Health Nurses; as well as Australian Association of Social Workers, Occupational Therapy Australia, Psychotherapy and Counselling Federation of Australia, and Australian College of Rural and Remote Medicine.

Members



Partners



A Foreword from the Chair

Affiliate Assoc Prof
John Rasa



This year, MHPN's work remains focused on promoting excellence in multidisciplinary mental healthcare and supporting practitioners to deliver the best possible care in their communities.

We acknowledge with sadness the passing of Chris Gibbs, whose 14 years of dedicated service laid the foundation for MHPN's growth and impact. His vision, leadership, and commitment to multidisciplinary mental healthcare have left a legacy, and his contributions will continue to shape our direction for years to come.

I would like to extend my sincere thanks to Dr Daisy Brooke for her leadership this year. Daisy's commitment to collaboration and her vision have been instrumental in advancing MHPN's strategic plan, by ensuring we continue to evolve to meet the needs of mental health practitioners.

I would also like to acknowledge the Board, Committee members and staff members who have moved on this year. Heng Soong stepped down as an advisor from the Finance and Risk Committee after 12 years, as did Vinita Godinho from the Board after 4 years. They both provided invaluable guidance and support throughout their significant

tenures. We also acknowledge the valuable contributions offered by Sharon McGowan during her 18 months on the Board. We are pleased to welcome our new Board members; Ty Halse from the Australian Psychological Society and Jon Cullum from RANZCP; whose expertise will help guide MHPN towards achieving its strategic goals. We would also like to thank MHPN former staff member, Kate Hoppe, for her substantial contribution to MHPN's programs and for generously offering support to the Board over her 10-years of service.

Participation in the National Networks Program remains strong, with 375 networks supported and 11,915 meeting attendances recorded this year, a 7% increase from the previous financial year. These figures are a testament to the dedication of volunteer Network Coordinators, whose commitment is essential to sustaining active and meaningful local and national Networks, and the

ongoing value of MHPN's programs to health professionals across Australia.

MHPN's Podcast Program has also reached a significant milestone, surpassing 150,000 total listens during the year. The Program continues to provide accessible and relevant content that supports easy-to-access professional development.

MHPN's achievements this year have been supported by the continued engagement of our member and partner organisations. We are grateful to the Australian Psychological Society, the Royal Australian and New Zealand College of Psychiatrists, the Royal Australian College of General Practitioners, the Australian College of Mental Health Nurses, and partner organisations including Australian Association of Social Workers, Australian College of Rural and Remote Medicine, Occupational Therapists Australia and Psychotherapy and Counselling Federation of Australia. Their ongoing support is essential to our success.

Progress on initiatives such as the Reconciliation Action Plan demonstrates MHPN's commitment to meaningful engagement with Aboriginal and Torres Strait Islander peoples and communities. Through these efforts, we continue to deepen our understanding, reflect on our practices, and build inclusive and respectful programs that support culturally safe mental healthcare.

Finally, I would like to extend my gratitude to the MHPN team. Their dedication and commitment, along with the support of our volunteers, Board, and stakeholders, ensures that MHPN continues to maintain its focus on excellence in multidisciplinary mental healthcare.

I look forward to the new year with optimism and confidence.

John Rasa
MHPN Chair



“MHPN's achievements
this year have been supported
by the continued engagement of our
member and partner organisations...
Their ongoing support is essential
to our success.”

~ JOHN RASA
MHPN CHAIR

An Introduction from the CEO

Dr Daisy Brooke



The launch of our new strategic plan set the course for MHPN's next chapter, reinforcing our focus on collaboration and excellence in multidisciplinary mental healthcare.

This year marked a significant step forward with the launch of MHPN's new strategic plan. Building on a strong foundation, it sets our direction for the future and reflects our ongoing commitment to supporting multidisciplinary collaboration and professional development in mental healthcare. I extend my thanks to the stakeholders who contributed their insights through the consultation forums, which were invaluable in shaping the plan.

An important milestone has been the implementation of our Reflect Reconciliation Action Plan. It provides a meaningful framework for MHPN to consider our role in improving mental health outcomes for Aboriginal and Torres Strait Islander communities. This is an ongoing journey, and the plan will continue to guide our programs, partnerships and approach.

Collaboration remains central to MHPN's work. This year we entered a multi-year partnership with Comcare and renewed a contract to enter our 8th year with Emerging Minds. We also welcomed a new partnership with Equally Well, which has seen us deliver 2 podcasts, 1 webinar and create 2 new networks, strengthening our shared commitment to supporting practitioners, while modelling effective collaboration.

To better meet the needs of busy practitioners, we introduced a new webinar format to make our content more engaging and accessible. Alongside this, the Quality Assurance Framework developed by the Quality Assurance and Clinical Expertise Committee has ensured that our programs maintain quality, rigour, and relevance. Further to that, the Evaluation Committee published a study

with Latrobe University, demonstrating and reinforcing the value of the National Networks Program in its ability to support and sustain the mental health workforce across Australia.

I would like to acknowledge the generous support of Chris Gibbs, MHPN's inaugural CEO. Chris was deeply supportive throughout the leadership transition and encouraged me to guide MHPN with confidence. His passing was a significant loss to our community, and his legacy continues to shape our work.

Finally, I want to thank all those who contribute to MHPN's success: webinar panellists, podcast guests, volunteer coordinators, our dedicated staff, and the Board and Chair for their guidance and support throughout the year. Your expertise and commitment bring our programs to life and support health professionals across Australia.

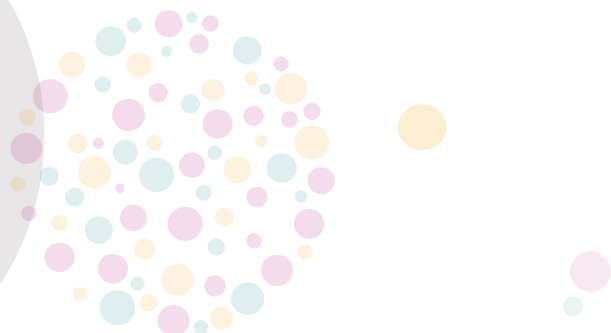
Dr Daisy Brooke
CEO



Above: The MHPN team

“Building on a strong foundation, it sets our direction for the future and reflects our ongoing commitment to supporting multidisciplinary collaboration and professional development in mental healthcare.”

~ DR DAISY BROOKE
CEO



In Memoriam

Chris Gibbs,
MHPN's Inaugural CEO



A Legacy of Vision, Leadership and Lasting Impact

It is with sadness and enduring gratitude that we pay tribute to Chris Gibbs, MHPN's inaugural CEO, who passed away following a short illness in July 2025. His contribution to mental health in Australia, and to MHPN in particular, was both considerable and meaningful. Chris guided and shaped MHPN from its inception in 2008 through to his retirement in March 2024.

Chris brought to MHPN a wealth of experience garnered from holding significant leadership roles in the Victorian mental health sector. As MHPN's CEO he provided not only strategic insight, but importantly a firm belief in the idea that mental health professionals from different disciplines could – and should – work more collaboratively, and that doing so would ultimately benefit mental health consumers. With this belief guiding its primary focus, what started as Chris often described as “a great idea”, evolved to become a national program of enduring relevance and value.


Under his stewardship, MHPN initially delivered over 1,000 workshops that connected key mental health practitioners in their local areas. The workshop phase then successfully evolved to become a platform for a national program which to this day continues to support practitioners to work across disciplines more effectively, in their local area, as well as more broadly.

He oversaw the expansion of MHPN's reach in 2010 by championing what at the time was a highly innovative webinar program. His support of the evolution of the Online Professional Development Program saw it grow to incorporate webinars, virtual conferences and podcasts.


Chris's strength in forging meaningful, enduring partnerships was a hallmark of this leadership and a cornerstone of MHPN's success. His management of relationships with a range of stakeholders, including the Department of Health, Disability and Ageing, and successive Board members from the RACGP, APS, ACMHN and the RANZCP allowed MHPN to respond to evolving needs and secure continued government funding throughout his tenure.

As we reflect on Chris's legacy at MHPN, we remember a leader who created something truly enduring. He led with humility, integrity, kindness and generosity of spirit. A respected colleague, mentor, and friend to many within MHPN and the wider mental health sector, his professional and personal impact on others will be felt by many for years to come.

We mourn his loss and extend our heartfelt condolences to his family, friends, and all who had the privilege of knowing him.



His contribution to mental health in Australia, and to MHPN in particular, was both considerable and meaningful.



[Chris] led with humility, integrity, kindness and generosity of spirit.



Achievements 2024–2025

NETWORKS



375

NETWORKS
SUPPORTED



123

IN RURAL AND
REGIONAL AREAS



209

SPECIFIC INTEREST
NETWORKS



1,048

MEETINGS HELD



7,885

NETWORK
MEMBERS



11,915

MEETING
ATTENDANCES



501

NETWORK COORDINATORS

WEBINARS



15

WEBINARS
PRODUCED



13,344

TOTAL
ATTENDEES



36,839

WEBINAR RECORDING VIEWS
(COMPLETE LIBRARY)

Achievements 2024-2025

PODCASTS



24
EPISODES
PRODUCED



22,781
LISTENS ACROSS
ALL EPISODES



153,079
TOTAL LISTENS



4.6 out of **5**
AVERAGE STAR RATINGS

ONLINE CONNECTIONS



17,238
FACEBOOK
PAGE FOLLOWERS



136,358
LINKEDIN
CONNECTIONS



59,020
MHPN MEMBER
ACCOUNTS



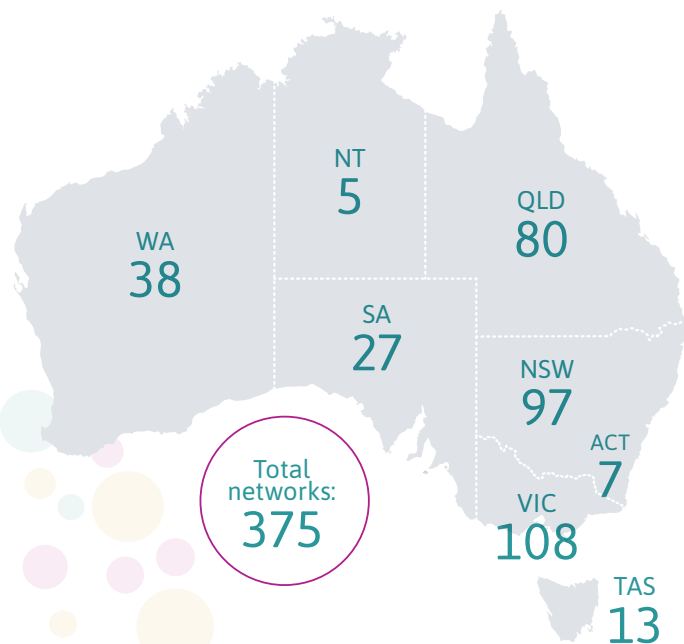
National Networks Program



With steady growth in 2024–25, the National Networks Program reached a new milestone, supporting 375 networks across Australia. The program’s continued engagement demonstrates its value as a vital platform for multidisciplinary connection.

With 1,048 meetings held and almost 12,000 attendances, the program’s increased participation highlights the demand for opportunities where mental health professionals can collaborate, get peer support, and strengthen their practice.

NETWORKS BY STATE AND TERRITORY



NEW MHPN NETWORKS

The networks team successfully established 57 new networks across Australia this year. Our new networks are diverse in location and focus, but they share the common commitment to improve multidisciplinary mental health care.

New Networks of Note:

Equally Well Communities of Practice –

Clinicians in Mental and Physical Health Network, and the Older Persons Mental and Physical Health Network

Kununurra Mental Health Professional Network

– Very remote community

Bellarine Psychology Group Mental Health

Network – A closed group that met 18 times in 24–25 FY

Lived and Living Experience practitioners’

network – Online specialised network

Spotlight on: New Networks

Partnership Network | Equally Well Networks

Building on a successful partnership delivering webinars and podcasts, MHPN has worked with Equally Well to establish two dedicated networks focused on the intersection of physical and mental health.

The Clinicians in Mental and Physical Health Network, coordinated by nurse practitioner, Trudy Brown, brings together professionals

committed to improving access to physical health care for people living with mental illness. This network, alongside the Older Persons Mental and Physical Health Network, are connecting and upskilling practitioners to improve the life expectancy and quality of life for people living with a mental health condition.

Online PMDD Peer Supervision Network

Pre-menstrual Dysphoric Disorder (PMDD) is a complex condition that demands collaborative and compassionate care. Launched in September 2024, the Online PMDD Peer Supervision Network, coordinated by Clinical Psychologist Aimee Oliveri, provides a national platform for mental health professionals to deepen their knowledge in this specialised field of interest.

Each meeting promotes active participation and the exchange of relevant clinical insights, with a strong focus on case studies, emerging treatment modalities and the latest research.

This collaborative setting enables members to share knowledge, discuss solutions, and build strategies for better care delivery.

The network brings together general practitioners, psychiatrists, psychologists, and allied health professionals, strengthening their collective ability to provide holistic, person-centred care.

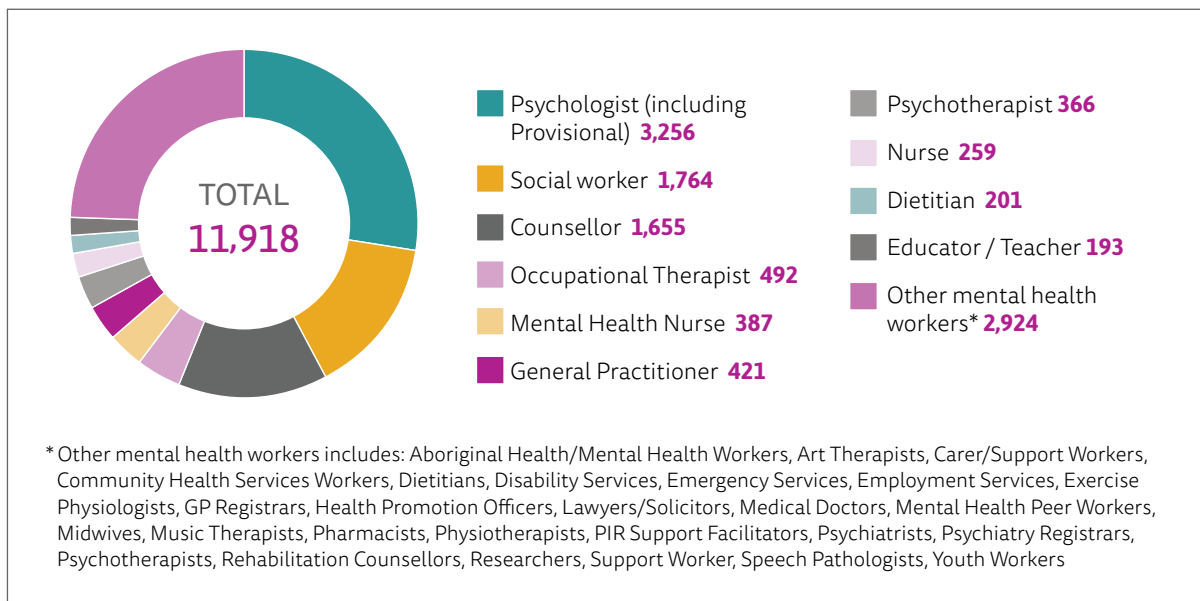
With a multidisciplinary approach, members gain valuable insights into working collaboratively with consumers experiencing PMDD while reinforcing integrated care models.



South East Regional Victoria (SERV) Creative Arts Network

MULTIDISCIPLINARY NETWORKS

In 2024–25, the National Networks Program once again attracted strong multidisciplinary attendance, with more than 35 professions represented nationwide. Psychologists, social workers, and counsellors remained the professions with the greatest level of attendance, while growing participation from other disciplines reflects the program’s increasing reach and value across the sector.



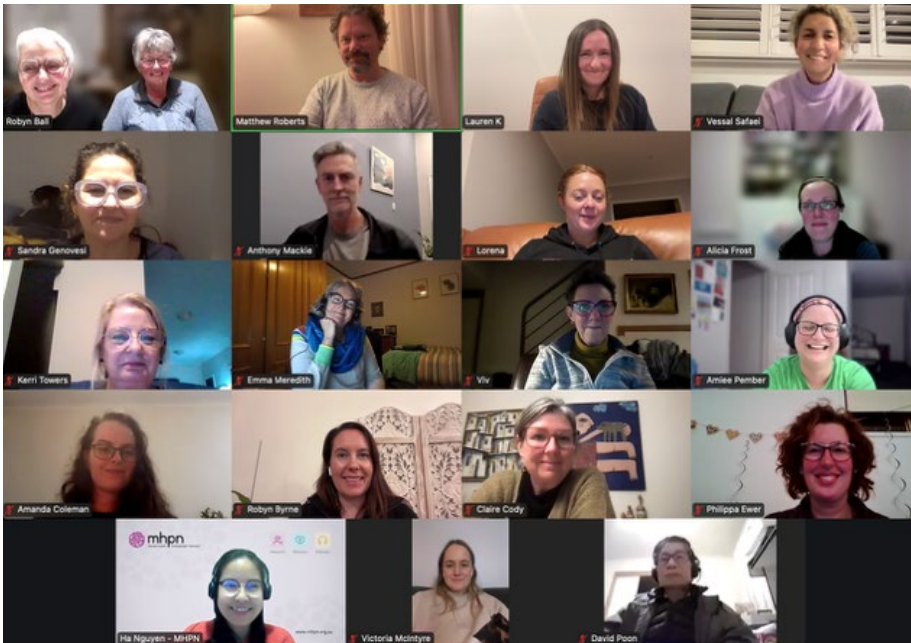
COORDINATORS AT THE HEART OF NETWORK SUCCESS

The National Networks Program was made stronger this year thanks to the efforts of our 501 volunteer Network Coordinators. Their dedication is central to the program's success, ensuring that multidisciplinary mental health care continues to thrive.



MHPN's Board and staff deeply value their contribution, recognising the essential role Network Coordinators play in bringing professionals together and fostering collaboration across the mental health community.

During this financial year, MHPN held dedicated coordinator events to provide more opportunities for coordinators to connect with their peers, share ideas and resources, and design meaningful and impactful network activities together. This was a new initiative introduced during the year and has received both steady attendance and good feedback.



Above left: Adelaide ADHD Network

Above: Inner Melbourne Clinicians Network

Left: Kew Perinatal Network

CELEBRATING MILESTONES OF NETWORK COORDINATORS

Each year, MHPN proudly celebrates Coordinators who have devoted more than 10 years of voluntary service. We acknowledge three Coordinators: Ruth Dunn, Janet Alexander and Joy Humphreys, who reached the milestone this year and thank them for their time, energy, and passion for sustaining their networks to support better outcomes for professionals and their communities.



PEER SUPPORT A CONSISTENT PRIORITY

Year on year, peer support remains the primary reason networks meet. This was once again clear in both meeting activity and attendance figures, continuing a steady four-year trend.

Most popular activity by attendance:

	Meeting topic	Attendances
1	Peer support	1,977
2	Treatment and intervention focus	1,922
3	Eating disorders	893
4	Trauma	855
5	Perinatal and infant	675

Most popular activity by number of meetings:

	Meeting topic	Meetings
1	Peer support	309
2	Treatment and intervention focus	140
3	Trauma	57
4	Networking	55
5	Eating disorders	52

Network Insights

Victoria Park Network

Established in 2024 in the inner suburbs of Perth, the Victoria Park Network has built a vibrant, supportive community of mental health and primary care practitioners.

Network Coordinator and Clinical Counsellor, Dr. Genevieve Armson describes the network as a “warm and collaborative space where local mental health professionals from diverse backgrounds come together to learn, share and grow.”

With broad interests across mental health topics, the Victoria Park Network connects a diverse range of practitioners, allowing members to better understand the unique contributions and scope of practice of their fellow professionals.

“It’s made possible by a dedicated group of volunteers whose support helps foster genuine connection and enhanced care for our community,” Genevieve added.



Network Meeting Highlights

Queensland Transcultural Network

In 2024-25, the Queensland Transcultural Network hosted a hybrid meeting featuring Dr Dinesh Palipana OAM, Queensland’s first quadriplegic medical intern and an advocate for equity in healthcare.



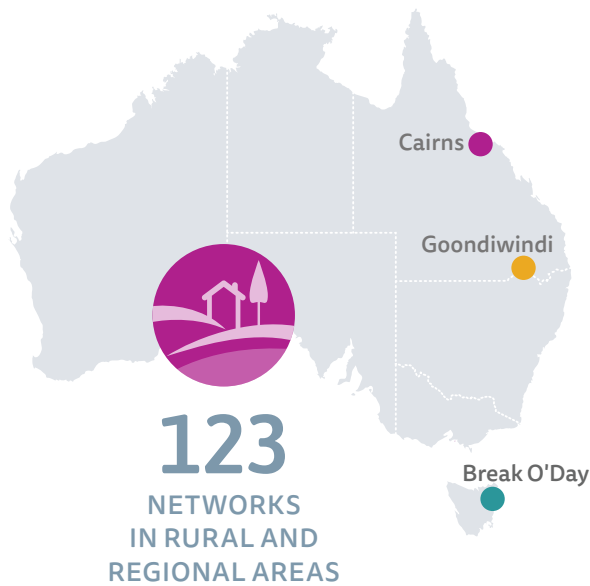
In his presentation, “To become who I am, I let go of who I was,” Dr Palipana reflected on his journey as a multicultural medical professional, sharing valuable insights into the intersections of disability, culture, and mental health.

These insights prompted attendees to discuss what true accessibility and cultural safety mean in practice, prompting reflection around inclusive service delivery and the importance of collaborative multidisciplinary care.

The meeting afforded practitioners the opportunity to drive towards a more inclusive and collaborative mental health system that delivers better outcomes for multicultural communities.

NETWORKS STRENGTHEN CONNECTIONS IN REGIONAL COMMUNITIES

For mental health professionals working in regional and remote areas, professional isolation and limited access to resources remain ongoing challenges. Networks play a vital role in addressing these challenges by providing opportunities for peer support and multidisciplinary collaboration. By fostering these connections, our regional and remote networks help strengthen mental health services and enhance professional development across Australia's diverse regions.



Cairns and Beaches Network

Known for its thoughtful and unique approach to meetings, the Cairns and Beaches Mental Health Professionals' Network hosted many activities in 2024-25 including a session on sound healing. Participants explored a review on the use of sound as a therapeutic practice sparking rich discussion and deep engagement among attendees.

Through these gatherings, mental health professionals are exploring innovative approaches to care, sharing knowledge and strengthening professional connections. These opportunities for connection in regional hubs will continue to advance local practice and improve outcomes for communities.



Goondiwindi Network

Since 2017, Katherine Johnstone, an accredited mental health social worker, has co-coordinated the Goondiwindi Network playing a pivotal role in creating a space where what can feel like “a scattered network of services” becomes a connected, multidisciplinary community.

The network’s meetings draw in a diverse range of members, including psychologists, GPs, social workers, nurses, and other allied health professionals. Together, they engage in case-based discussions, share resources, and learn from guest speakers on topics relevant to their regional context.

Katherine acknowledges the essential support provided by MHPN Project Officers, whose work ensures networks run smoothly and thrive, allowing her to

focus on what she says really matters: “fostering connections and sharing knowledge”.

Reflecting on her experience, Katherine says she feels “honoured to be part of this program and look[s] forward to continuing in this role for many years to come”.



Break O’Day Network

Over the past few years in the remote coastal region of Break O’Day, Tasmania, the local network has hosted more than 30 meetings, a testament to their ongoing commitment to connection and collaboration. Held at the local Neighbourhood House and made accessible online, these hybrid gatherings bring together a diverse mix of service providers for case discussions, service overviews, and open conversations about local challenges and opportunities.

Network Coordinator, Casey Musicka says “I have enjoyed my role as a Volunteer Coordinator for the MHPN in Break O’Day. I think it is such a vital role to offer professionals these opportunities.”

ONLINE MEETINGS MOST POPULAR

Of the 10 most attended meetings this year, nine were held online. Accessibility and broad reach of the virtual format enables practitioners from across Australia to participate, regardless of location.

Top 10 meetings by attendance

	Network Name	Meeting topic	No. of attendees
1	Brisbane Infant, Child, Youth and Family Mental Health Network	<i>Promoting Resilience, School Belonging and Positive Mental Health for Adolescents</i>	180
2	WA Young Adult and Adult ADHD Network	<i>ADHD in Females: Hormonal Impacts Across the Lifespan</i>	92
3	Online Victorian Emergency Workers and Mental Health Community of Practice	<i>Latest updates in PTSD treatment research</i>	70
4	Queensland Perinatal and Infant Mental Health Network	<i>Birth Related Trauma – An Australian perspective gained through listening to the voice of lived experience</i>	66
5	Online Victorian Emergency Workers and Mental Health Community of Practice	<i>Assessing and Managing Moral Injury in Emergency Service Workers</i>	64
6	Perth Complex Trauma	<i>EMDR and Complex Trauma</i>	62
7	Victoria Park Mental Health Network	<i>IFS: Meeting addictive processes with compassion</i>	61
8	Online Eating Disorders Network	<i>Tailoring BED treatment for people with ADHD</i>	53
9	Perth Complex Trauma	<i>BPD How to apply the principles of mentalization – based therapy in your practice</i>	53
10	Perth Eating Disorders	<i>Overrepresentation of autistic people in Eating Disorder services</i>	50

PUBLISHED:

Sustaining Australia's mental health workforce: personal and professional benefits of participation in the Mental Health Professionals' Network (MHPN) network program

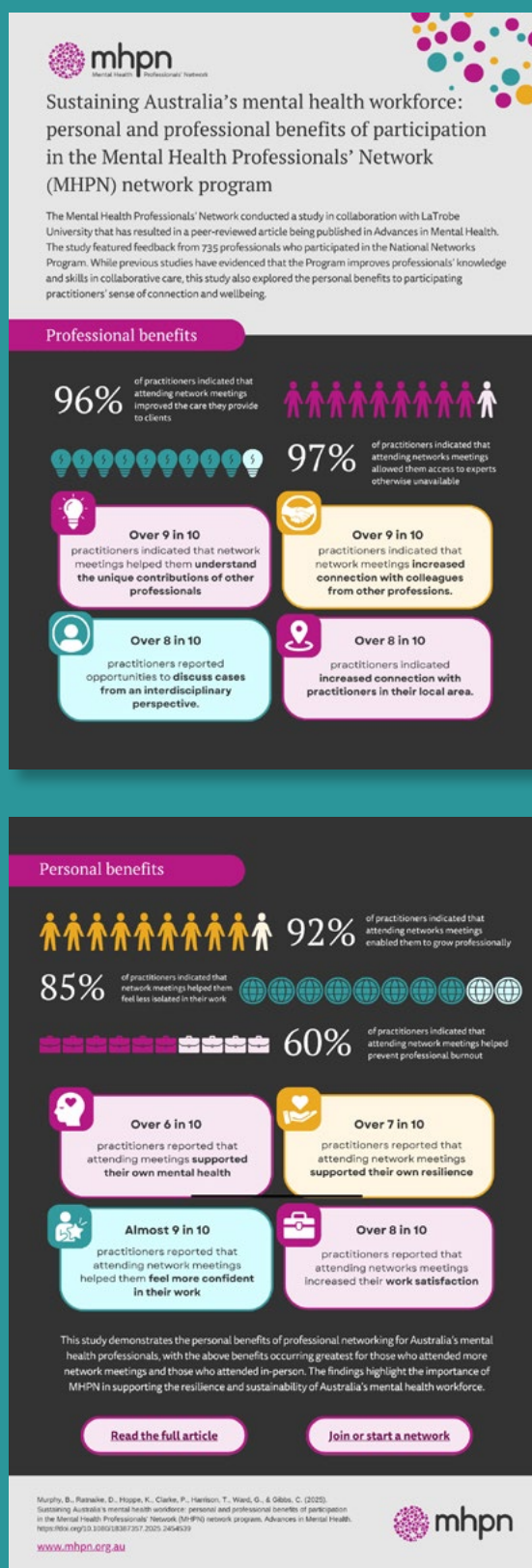
A journal article titled *Sustaining Australia's mental health workforce: personal and professional benefits of participation in the Mental Health Professionals' Network (MHPN) network program* was published following research conducted by La Trobe University in partnership with MHPN.

The study surveyed 735 health professionals providing mental health treatment and support. Results showed that participation in MHPN's National Networks Program delivered both professional and personal benefits, including reduced isolation, stronger collaboration, and improved delivery of care.

Key findings include:

- **88%** of practitioners reported that attending network meetings helped them feel more confident in their work
- **97%** reported that network meetings helped them understand the unique contributions of other professionals
- **92%** indicated that attending network meetings enabled them to grow professionally
- **96%** indicated that attending network meetings improved the care they provide to clients

The study reinforced the value of MHPN's National Networks Program in supporting and sustaining the mental health workforce across Australia.



Online Professional
Development

Podcast
Program



Building on its success from previous years, the MHPN Podcast Program continued to provide accessible, engaging content that promotes multidisciplinary collaborative care.

This year, the Program released 24 new episodes, bringing the total number of episodes to 96 since its launch. It continues to be a valuable professional development resource for busy mental health practitioners, reinforcing MHPN's commitment to supporting collaborative care through easy, accessible methods.

HIGHLIGHTS

As of 30 June 2025, we achieved a significant milestone with a total of 153,079 listens across all podcast episodes, including 22,781 for those released during this financial year.

Successful Partnership Series with ANZACATA

The Creative Arts Therapies series, produced in partnership with the Australian New Zealand and Asian Creative Arts Therapies Association (ANZACATA), featured four episodes hosted by Professor Mark Creamer. Each episode showcased conversations with practising arts therapists and academics, highlighting the diversity of settings and cohorts in which creative arts therapists work, as well as the evidence supporting the value and potential outcomes of creative arts therapy.

Top Performing Episodes

The most popular five episodes released during the year, based on listens within the first seven days of their release were:

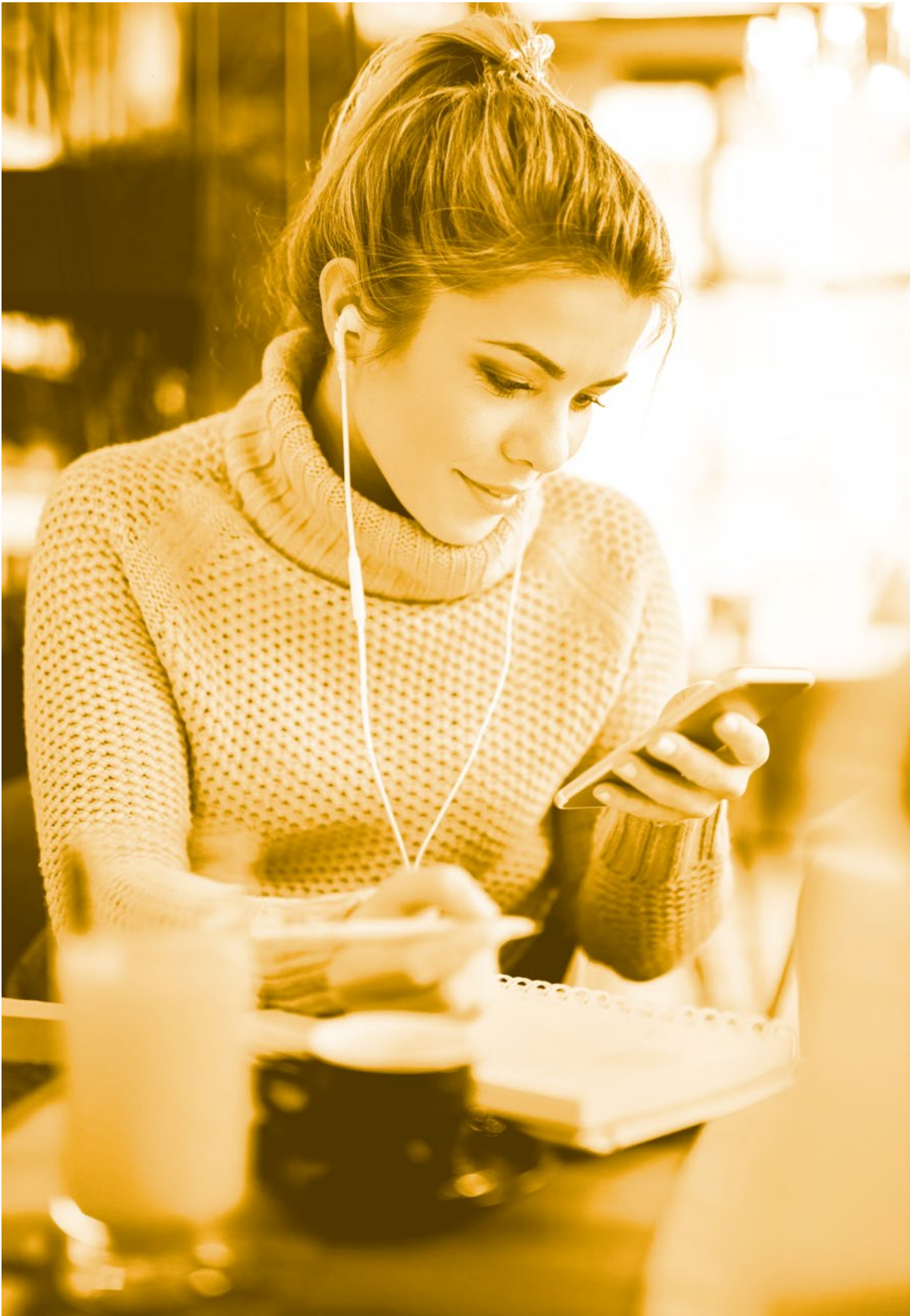
A Conversation About...

Schizophrenia, Quality of Life and Performing Arts

Creative Arts Therapy

The Nexus between Violence and Mental Health

Navigating Complexity in Mental Health through Systems Theory



Online Professional
Development

Webinar Program



The Online Professional Development Program introduced a refreshed webinar format this year, designed to highlight multidisciplinary practice and showcase real-life examples of collaborative care. This approach has enabled practitioners to explore complex clinical scenarios and observe effective teamwork in action.

A total of 15 professional development webinars were produced this year, collectively attracting 13,344 participants to live broadcasts and an additional 36,839 recording views in the Webinar Library.

KEY ACHIEVEMENTS

Successful Partnerships

Comcare, Emerging Minds, and Equally Well all delivered successful webinars and either began or continued long term partnerships.

Targeted Approach

MHPN webinars saw increased attendance from psychiatrists and mental health nurses by providing tailored and relevant content.

New Format

Emphasising multidisciplinary practice and real-life examples.

“The format has been very good as it represents a team approach and recognises the different skills. It also notes the complexity of clients and professionals who service them.”

~ PSYCHOLOGIST, NSW

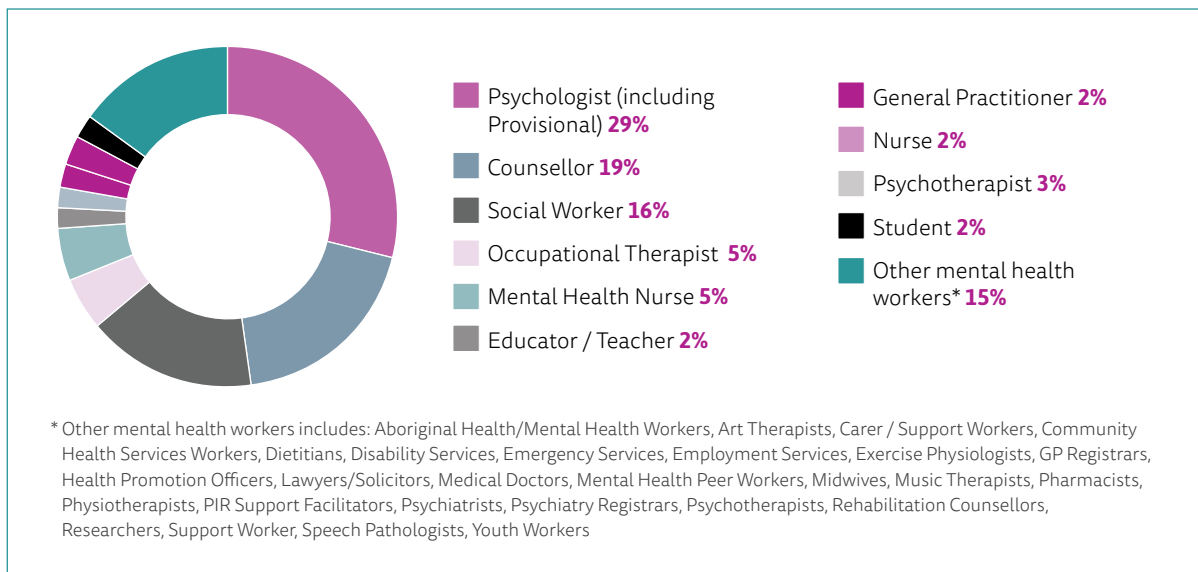
	Department of Health funded	Produced in partnership with MHPN
No. of webinars	7	8
Registrations	13,245	16,674
Attendees	6,429	6,915
Library recordings, webinars produced in 2024–25	6,452	4,356
Library recordings, total 226 webinars produced to June 30 2025	25,043	10,776



DEPARTMENT OF HEALTH, DISABILITY AND AGEING-FUNDED PROGRAM CONTENT

Date	Title	Attendees
23/7/2024	BPD: Multidisciplinary strategies to navigate feelings of rejection and fear of abandonment	1,383
9/9/2024	BPD: How to apply the principles of mentalization-based therapy in your practice	1,000
9/10/2024	BPD: Caring for the carers	468
31/03/2025	Improving your practice: Working across sectors	1,129
30/04/2025	Smoking cessation is everybody's business	558
21/05/2025	Yarning about the Social and Emotional Wellbeing of First Nations Women and Gender Diverse People	666
12/06/2025	Multidisciplinary mental health care for adults with a recent ADHD diagnosis	1,225

WEBINAR AUDIENCE BY PROFESSION



THREE MOST POPULAR WEBINARS PRODUCED THIS YEAR

The following webinars are all available for view and download in the webinar library at www.mhpn.org.au

1

BPD: Multidisciplinary strategies to navigate feelings of rejection and fear of abandonment

2,697
registrations

1,383
attendees

1,575
recording views

2,958
total reach

"I loved every panellist and facilitator's input. Each person's acknowledgement of each other was an excellent embodiment of respectful, therapeutic relationship-building and each were beacons of hope and light in this challenging clinical area. Thank you so very much for your inspiration. The combination of different backgrounds of the panellists, the lived experience and the immense wealth of knowledge that each panellist provided. The passion that each of the panellists has towards this specialist area was evident."

~ OCCUPATIONAL THERAPIST, NSW

2

BPD: How to apply the principles of mentalization-based therapy in your practice

2,175
registrations

1,000
attendees

1,933
recording views

2,933
total reach

"Very informative content, highly knowledgeable and engaging panellists, and effective facilitation."

~ SOCIAL WORKER, VIC

3

Understanding and responding to childhood suicidal ideation

3,462
registrations

1,528
attendees

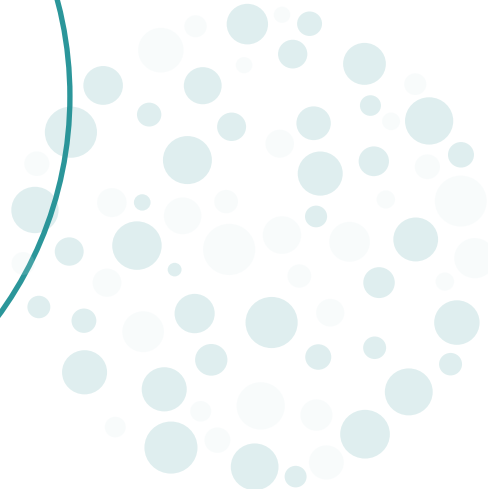
859
recording views

2,387
total reach

"[The panel] were all very different and individually highly valuable perspectives to shine a light on."

~ PSYCHOLOGIST, SA

Reconciliation Action Plan



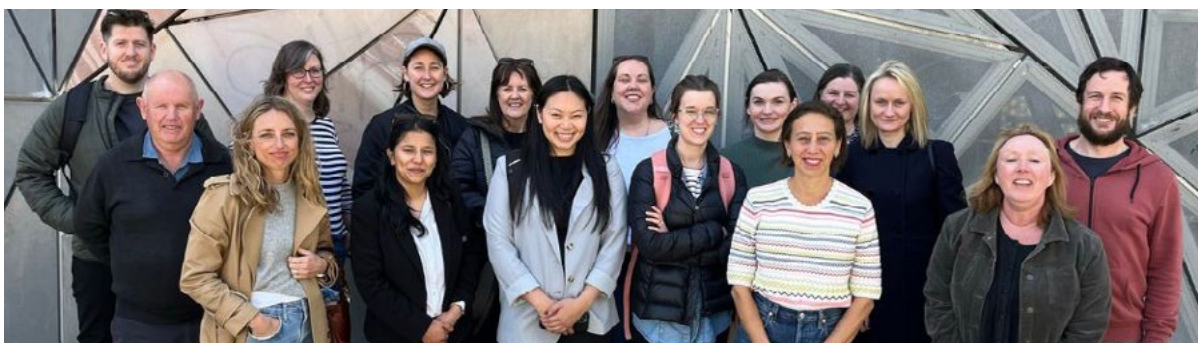
REFLECT RECONCILIATION ACTION PLAN

In July 2024, MHPN launched its first Reconciliation Action Plan. Our Reflect RAP is the start of a long-term commitment to listening, learning and strengthening our support for the social and emotional wellbeing of Aboriginal and Torres Strait Islander communities.

MHPN staff have taken part in a range of learning and reflection activities, including Cultural Safety Training and a guided walking tour at the Koorie Heritage Trust, and a session on Indigenous mental health with Professor Pat Dudgeon. To extend this learning, we also attended a reflective workshop facilitated by Dana Shen, Social Worker and Consultant.



By implementing our RAP, MHPN are working to better understand First Nations cultures and perspectives and to improve how we engage with Aboriginal and Torres Strait Islander people and organisations.

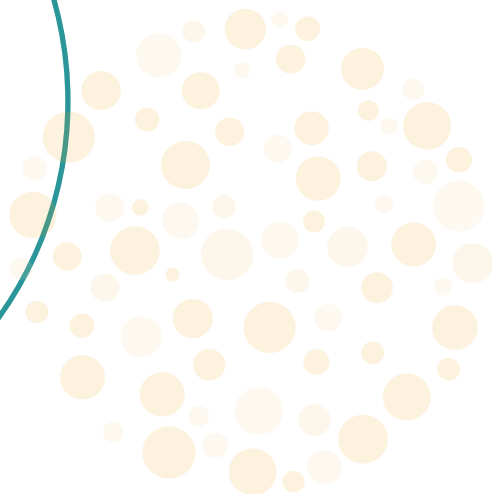




July 2024
to
July 2025

Mental Health Professionals' Network
**Reconciliation
Action Plan**
Reflect

Marketing and Communications



MHPN has strategically developed digital channels to effectively reach and engage mental health professionals, ensuring easy access to valuable content and updates. 2025 saw a targeted effort to grow our MHPN accounts, resulting in a 16% increase.

OUR CHANNELS INCLUDE:

MHPN Website: A key resource for news articles, program information, the gateway for accessing networks, and our extensive webinar and podcast libraries.

MHPN Connect: A monthly practitioner newsletter that keeps our audience fully across MHPN's activities.

Coordinator Connect: A tailored quarterly newsletter for Network Coordinators, essential for maintaining our connection with those leading our network programs.

Social Media: Active engagement on LinkedIn and Facebook to share updates and reach a broader audience.

MILESTONE NUMBER OF MHPN ACCOUNT HOLDERS

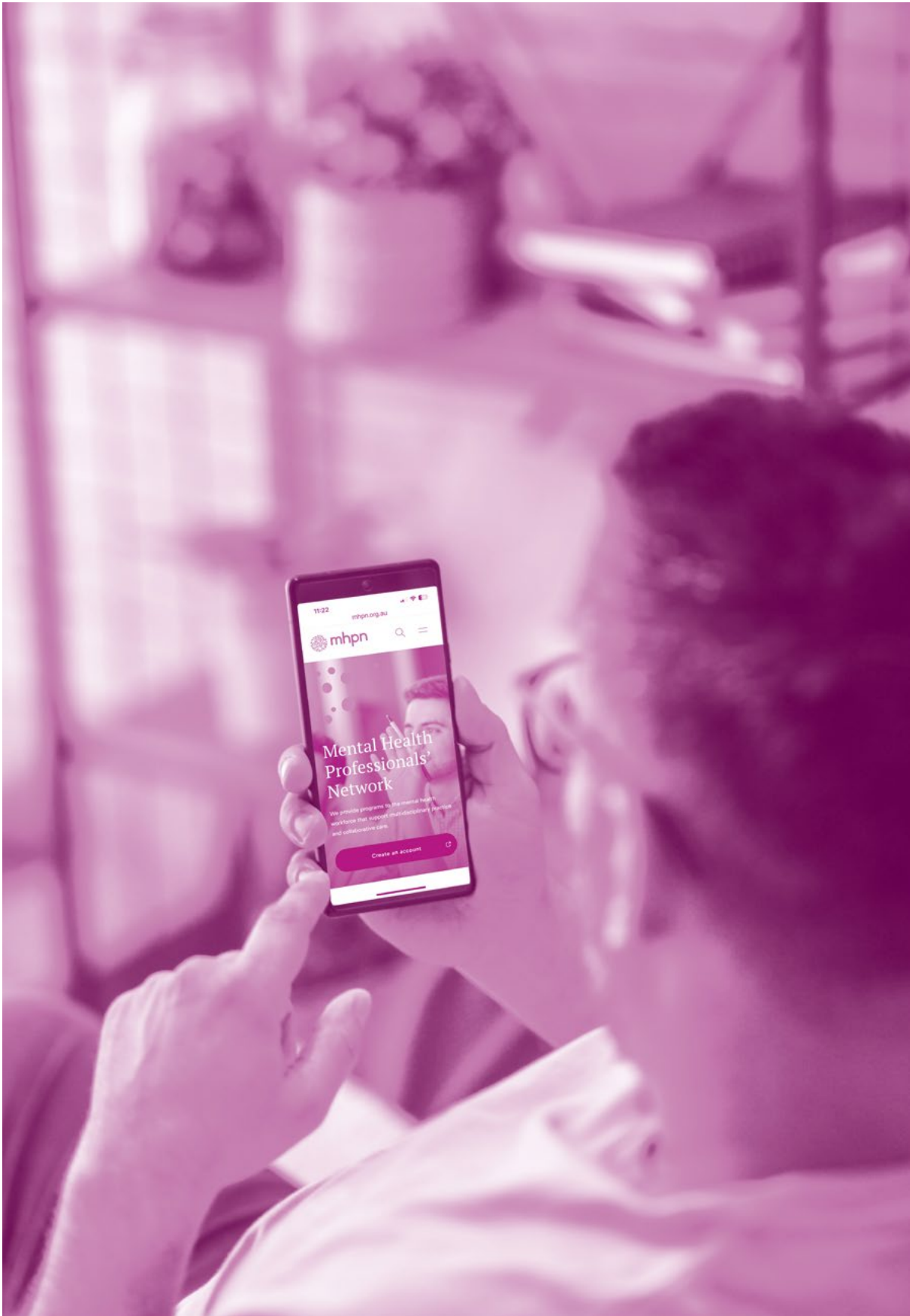
The MHPN Member account portal remains an essential resource for close to 60,000 practitioners. The custom platform allows members to register for program activities, access network meetings and directories and download CPD statements.

GROWING NUMBER OF LINKEDIN FOLLOWERS

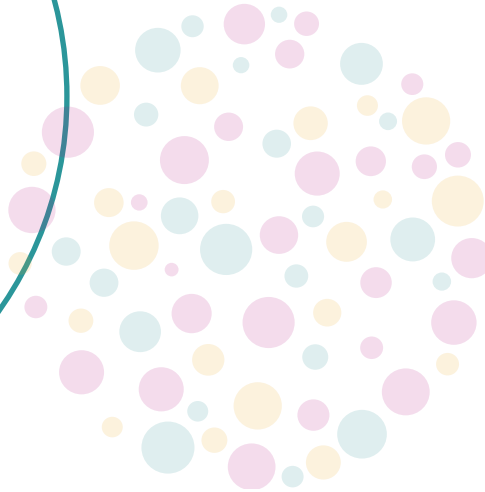
A steady growth of 5% in our LinkedIn community over the past financial year. This consistent growth demonstrates the value of our Networks and CPD opportunities to our professional community.

WEBSITE TRAFFIC GROWTH

After launching a new website in January 2024 to promote better engagement with practitioners; we saw a 9% increase in user traffic.



Partnerships



Long-term partnerships continue to deliver consistent results, bringing relevant topics to our programs and connecting with an engaged audience.

These strategic partnerships both strengthen MHPN's ability to provide high-quality professional development and model effective collaboration.

OCCUPATIONAL THERAPY AUSTRALIA (OTA)

MHPN was proud to sponsor the OTA Forum in November 2024, strengthening our partnership with Occupational Therapy Australia and supporting professional development for mental health occupational therapists. This sponsorship reflected our commitment to collaborating with peak bodies to extend the reach and impact of our programs.



Occupational
Therapy
Australia



Emerging Minds.

EMERGING MINDS

Now in its eighth year of partnership, Emerging Minds collaborates with MHPN to deliver six child-focused webinars annually, providing evidence-based guidance for practitioners working with children and families.



Australian Government
Comcare

COMCARE

A long-term partnership focused on workplace wellbeing, delivering programs that support mental health in organisational settings.



EQUALLY WELL

A new partnership this year, Equally Well highlights the intersection of physical and mental health. This strategic partnership saw the delivery of one live webinar, two podcasts and the creation of two Networks to promote integrated care approaches.

1 x CPD WEBINAR

Smoking Cessation is Everybody's Business

553 LIVE ATTENDEES

"The panellists were so knowledgeable, and the panel was very well coordinated so that all aspects were covered." ~ GP REGISTRAR

2 x PODCAST EPISODES

In the First Person...Improving the Physical Health of People Living with Mental Illness

A Conversation About... Building Engagement and Trust through Communication

"What an impactful conversation to listen and take-home crucial message for our day-to-day life. I am so thankful for the speakers to share their knowledge and experience to reach wider audiences like me. Grateful for a great project and mission that you two are involved." ~ PSYCHIATRIST

2 x MULTIDISCIPLINARY NETWORKS

The Clinicians in Mental and Physical Health Network

Older Persons Mental and Physical Health Network

Financial Report

for the year ended
30 June 2025

Mental Health Professionals' Network Ltd
ABN 67 131 543 229 (Incorporated in Victoria
as a company limited by guarantee)

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DIRECTORS' REPORT

The directors and officers present their report together with the financial report of Mental Health Professionals' Network Ltd ("the company") for the financial year ended 30 June 2025 and auditor's report thereon.

The financial report has been prepared in accordance with Australian Accounting Standards.

Directors

The names of the directors and officers in office at any time during or since the end of the year are:

Name of Director	Appointment	Resignation
John Rasa	5/7/2018	
Adrian Armitage	27/2/2023	
Zena Burgess	22/6/2021	
Jonathan Cullum	24/2/2025	
Vinita Godinho	23/2/2021	30/5/2025
Stephan Groombridge	22/8/2017	
Ty Halse	24/6/2025	
Sharon McGowan	28/4/2023	10/12/2024
Sonia Miller	24/10/2023	
Morton Rawlin	27/8/2019	
Jaya Reddy	27/4/2021	

The directors and officers have been in office since the start of the financial year to the date of this report unless otherwise stated.

Company Secretary

The following person held the position of company secretary during the financial year:

Name	Appointment
Trevor Donegan	31/7/2019

Results

The surplus of the company for the year amounted to \$95,951 (2024: \$6,319 deficit). Current year retained earnings surplus after accounting for all accumulated obligations carried forward totalled \$276,469 (2024: \$180,518).

Review of Operations

The company continued to engage in its principal activities, the results of which are disclosed in the attached financial statements. The company entered into a contract with the Department of Health and Aged Care on 25 August 2023 which extends the life of the project through to 30 November 2026.

Significant Changes in State of Affairs

There were no significant changes in the company's state of affairs during the financial year not otherwise disclosed in this report or the financial statements.

Company Objectives

The company has been established to promote the quality of patient care by:

- supporting and sustaining clinical interdisciplinary groups of mental health professionals working in the primary care sector across Australia, and
- development of a national interactive website that provides online professional development to practitioners working in community mental health.

Principal Activities

The principal activities of the Mental Health Professionals' Network Ltd during the financial year were:

- a) to provide mental health stakeholder support and a coordinated, collaborative forum for issues affecting the following four key professional groups – The Royal Australian and New Zealand College of Psychiatrists (RANZCP), The Royal Australian College of General Practitioners (RACGP), The Australian Psychological Society Ltd (APS) and The Australian College of Mental Health Nurses Inc (ACMHN); and
- b) to develop an integrated education and training package in support of collaborative care arrangements in the delivery of primary mental health care. This education and training package is aimed at the key professional groups who are involved in primary mental health care, namely: psychiatrists, general practitioners, psychologists, mental health nurses, paediatricians, occupational therapists and social workers.

No significant change in the nature of these activities occurred during the financial year.

Company Performance

Against the two major objectives, the company achieved the following:

- Against a target of developing, supporting, and maintaining 375 networks by 30 June 2025, a national platform of 375 interdisciplinary community mental health networks had been established and sustained, and
- The project delivered national online professional development of 7 agreed webinars to mental health practitioners across the country. In addition, 8 contracted webinars were provided, targeted to specific practitioner groups.

After Balance Date Events

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

Likely Developments

The directors believe that there are no likely developments that will significantly adversely affect the company in the coming year.

Environmental Issues

The company's operations are not regulated by any significant environmental regulation under a law of the Commonwealth or of a State or Territory.

Dividends Paid or Recommended

The constitution prohibits the payment of dividends to members of the company. No dividends were paid or declared since the start of the financial year. No recommendation for payment of dividends has been made.

Information on directors

AFFILIATE ASSOCIATE PROFESSOR JOHN RASA
BA, MHP, FCHSM LM, CHE, FAIM, MAICD, FAHRI

Special Responsibilities

- MHPN Chair
- Member of the MHPN Finance, Audit & Risk Committee

Experience

- Chair and Independent Director, HealthAbility Community Health Service
- Unit Chair Healthcare Financing and Healthcare Operations, School of Medicine, Faculty of Health, Deakin University
- Chief Fellowship Examiner (International and Alternative Pathway) Australasian College of Health Service Management

Former roles include:

- Deputy Chair, Latrobe Regional Hospital
- Chair and Board Director, Australasian College of Health Service Management
- Chair and Board Member, Box Hill Institute of TAFE
- Member of Victorian Department of Health and Human Services Emergency Access Reference Committee
- Member of Commonwealth Department of Social Services – Carer Gateway Advisory Group
- Chair, Victorian Chronic Disease Prevention Alliance
- CEO, Networking Health Victoria (2013-2016)
- CEO, General Practice Victoria (2010-2012)
- Project Manager, Department of Health Victoria (2004-2010)
- Chief General Manager, Acute Services, Eastern Health (2001-2004)
- CEO, Box Hill Hospital (1996–2001)

ADRIAN ARMITAGE

FGIA, MAICD, PG Dips Man (Fin & Mark), Law Society ACT LLB

Special Responsibilities

- Member of the MHPN Finance, Audit & Risk Committee. (Chair, from June 2025)

Experience

- Chief Executive Officer, Australian College Mental Health Nurses (ACMHN)
- ACT Health Professional Colleges Advisory Committee
- National Nurse and Midwife Health Service (NNMHS) Advisory Group
- Member – Expert Advisory Group for the National Initial Assessment and Referral for Mental Healthcare Project (IAR)
- Member – Nursing and Midwifery Strategic Reference Group (NMSRG)

- SaferCare Victoria – Clinical Supervision Education and Training Provider’s Forum
- ACMHN representative – The Coalition of National Nursing & Midwifery Organisations
- Director – Nursing and Midwifery Health Program Victoria
- Member of Mental Health Australia (MHA)
- Chair – Primary Care, Nursing and Midwifery Program (ACNP)
- Member of the Board, Equally Well
- Department of Health, Disability & Ageing – Advisory role for Primary Care Programme.

DR ZENA BURGESS

FAPS, FAICD

Experience

- Chief Executive Officer, The Australian Psychological Society
- Deputy Chair, Bully Zero
- Director, Diabetes Australia

JON CULLUM (from 24 February 2025)

BA, MA (Communications), CAE

Special Responsibilities

- Member of the MHPN Evaluation Committee

Experience

- Executive Manager, Membership, Events and Publications – The Royal Australian and New Zealand College of Psychiatrists (RANZCP)
- Senior Manager, Membership and Communications – RANZCP (2013–2015)
- Manager, Membership Services – RANZCP (2007–2013)
- Regional Recruitment Manager – RMIT University (2004– 2007)

VINITA GODINHO (to 30 May 2025)

MBA, PhD, GAICD

Special responsibilities (to 30 May 2025)

- Chair of the MHPN Finance, Audit & Risk Committee

Experience

- General Manager, Policy & Advocacy – The Australian Psychological Society (APS)
- Chief Executive Officer, Financial Resilience Australia
- Board Member, Glen Eira Adult Learning Centre

STEPHAN GROOMBRIDGE

BA (Hons)

Special responsibilities

- Chair of the MHPN Evaluation Committee

Experience

- Manager, eHealth & Quality Care – RACGP
- RACGP Manager for the Commonwealth funded General Practice Mental Health Standards Collaboration (GPMHSC)

TY HALSE (from 24 June 2025)

GAICD

Special responsibilities

- Member of the Finance, Audit & Risk Committee

Experience

- Chief Strategy & Transformation Officer – Australian Psychological Society

Former Roles include:

- Head of Business Transformation and Change Management – Royal Australasian College of Surgeons
- General Manager – Transformation, Marketing & Strategy – Catholic Super Fund
- Managing Director – Rates Direct

SHARON MCGOWAN (to 10 December 2024)

AM, MBA, GAICD, Gen Nurse Div1 (UK)

Experience

- Chief Executive Officer – Royal Australian and New Zealand College of Psychiatrists (RANZCP)
- Chair of the Australian Living Evidence Collaboration

ASSOCIATE PROFESSOR MORTON RAWLIN

BMed, MMedSci, FRACGP, FARGP, FACRRM, DipPractDerm, DipMedHyp, DipFP, DipBusAdmin, GAICD

Experience

- General Practitioner based in Melbourne
- Medical Director, Royal Flying Doctor Service, Victoria
- Chair, Rural Workforce Agency Victoria (RWAV)
- Member, Phoenix Foundation Education Advisory Committee
- Adjunct Associate Professor in General Practice at the University of Sydney
- Chair, General Practice Mental Health Standards Collaboration (GPMHSC)

SONIA MILLER

MBBS BSN-RN, GradDip MHN, NBV Psychiatric Nurse Endorsement, MHSc-MHN, ARPN, AHPRA Endorsed NP, ACA level 4 ARCAP

Special responsibilities

- Member of the MHPN Quality Assurance & Clinical Education Committee

Experience

- Nurse Practitioner – Psychiatry and Psychotherapist, Private Practice, Director of MHNP Consulting
- ADHD Senate Inquiry – led AMHCN submission and care pathway response to Senate Standing Committee on Community Affairs. Parliament House, 2023
- Member of Australian College of Mental Health Nurses (ACMHN), Certified Credentialed Mental Health Nurse
- Chair, ACMHN NP-MH Special Interest Group from 2014
- Member of Australian Counselling Association (ACA), Level 4 Clinical Psychotherapist, registered with the Australian Registration of Counsellors and Psychotherapist (ARCAP)
- Director – Nurse Midwife Health Program (Victoria)

DR JAYA PRAKASH REDDY BHAKTI REDDY

MBBS, MMed (Psy), PhD, FRANZCP

Special responsibilities

- Chair of the MHPN Quality Assurance & Clinical Education Committee

Experience

- General Adult Psychiatrist (Private Practice) at the Albert Road Clinic
- Fellow of the Royal Australian and New Zealand College of Psychiatrists (RANZCP)
- Senior Lecturer, Department of Psychiatry, University of Melbourne

- Director of self-owned company, Mind Connex Pty Ltd
- Full Member of the Australian ADHD Professionals Association (AADPA)
- Co-investigator of Industry sponsored Research Projects at the Albert Road Clinic
- Honorariums received from – Pharmaceutical Companies – (Shire /Takeda /Lundbeck /Servier / Janssen)

Directors' meetings including committee meetings

The number of meetings of directors (including meetings of the Committees of Directors) held during the year and the numbers of meetings attended by each Director were as follows:

	Directors meetings		Finance, Audit & Risk	
	Attended	Eligible to attend	Attended	Eligible to attend
J Rasa	5	5	6	6
A Armitage	3	5	5	6
Z Burgess	3	5	1	1
J Cullum	2	2	–	–
V Godinho	2	4	4	5
S Groombridge	4	5	–	–
T Halse	1	1	–	–
S McGowan	3	3	–	–
S Miller	5	5	–	–
M Rawlin	4	5	–	–
J Reddy	5	5	–	–

	Evaluation		Quality Assurance & Clinical Education	
	Attended	Eligible to attend	Attended	Eligible to attend
J Rasa	-	-	-	-
A Armitage	-	-	-	-
Z Burgess	-	-	-	-
J Cullum	-	-	-	-
V Godinho	-	-	-	-
S Groombridge	3	3	-	-
T Halse	-	-	-	-
S McGowan	-	-	-	-
S Miller	-	-	3	4
M Rawlin	-	-	-	-
J Reddy	-	-	4	4

Indemnification of officers

During or since the end of the year, the company has given indemnity or entered an agreement to indemnify or paid or agreed to pay insurance premiums in order to indemnify the directors of the company against legal liability which it may incur through the conduct of its activities or the provision of services.

Further disclosure required under section 300(9) of the *Corporations Act 2001* is prohibited under the terms of the contract.

Options

No options over unissued shares or interest in a company were granted during or since the end of the year and there were no options outstanding at the end of the year.

Indemnification of auditors

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

Auditor's Independence Declaration

A copy of the auditor's independence declaration is provided with this report.

Proceedings on behalf of the 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.

Members' guarantee

The company is incorporated under the *Corporations Act 2001* as a company limited by guarantee. If the company is wound up, the constitution states that each member is required to contribute a maximum of \$100 each towards meeting any outstanding debts and obligations of the company. At 30 June 2025, the number of members was 4 (2024:4). The combined total amount that members of the company are liable to contribute if the company is wound up is \$400 (2024: \$400)

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

John Rasa

John Rasa
Director

Dated: 20 October 2025, Melbourne

AUDITOR'S INDEPENDENCE DECLARATION



**MENTAL HEALTH PROFESSIONALS NETWORK LTD
ABN 67 131 543 229**

**AUDITOR'S INDEPENDENCE DECLARATION
TO THE DIRECTORS OF MENTAL HEALTH PROFESSIONALS NETWORK LTD**

In accordance with section 60-40 of the *Australian Charities and Not-for-profits Commission Act 2012*, I declare to the best of my knowledge and belief in relation to the audit of the financial report of the Mental Health Professional Network for the year ended 30 June 2025, there have been:

- no contraventions of the auditor independence requirements of the *Australian Charities and Not-for-profits Commission Act 2012* in relation to the audit; and
- no contraventions of the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants (including Independence Standards)* in relation to the audit.

N R BULL
Partner

Date: 21 October 2025

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Melbourne

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STATEMENT OF PROFIT OR LOSS AND OTHER COMPREHENSIVE INCOME FOR THE YEAR ENDED 30 JUNE 2025

	Notes	2025 \$	2024 \$
Revenue	4	2,803,582	2,746,261
Less: expenses			
Administrative expenses		(118,753)	(128,718)
Depreciation	6	(2,994)	(8,724)
Employee benefits	6	(1,927,575)	(1,870,204)
Information Technology		(125,704)	(270,451)
Network expenses		(115,317)	(86,832)
Non-grant webinar expenses	5	(75,848)	(55,467)
Occupancy		(175,199)	(167,881)
Online support expenses		(107,634)	(112,511)
Other expenses		(58,607)	(51,792)
		(2,707,631)	(2,752,580)
Surplus / (deficit) before income tax expense		95,951	(6,319)
Income tax expense		–	–
Net surplus / (deficit) from continuing operations		95,951	(6,319)
Other comprehensive income / (loss) for the year		–	–
Total comprehensive income / (loss)		95,951	(6,319)

The accompanying notes form part of these financial statements.

STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2025

	Notes	2025 \$	2024 \$
CURRENT ASSETS			
Cash and cash equivalents	7	268,740	384,939
Receivables	8	240,773	124,059
TOTAL CURRENT ASSETS		509,513	508,998
NON-CURRENT ASSETS			
Plant and equipment	9	1,334	1,224
TOTAL NON-CURRENT ASSETS		1,334	1,224
TOTAL ASSETS		510,847	510,222
CURRENT LIABILITIES			
Payables	10	138,687	200,699
Provisions	11	93,317	121,530
TOTAL CURRENT LIABILITIES		232,004	322,229
NON-CURRENT LIABILITIES			
Provisions	11	2,374	7,475
TOTAL NON-CURRENT LIABILITIES		2,374	7,475
TOTAL LIABILITIES		234,378	329,704
NET ASSETS		276,469	180,518
EQUITY			
Accumulated surplus	12	276,469	180,518
TOTAL EQUITY		276,469	180,518

The accompanying notes form part of these financial statements.

STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDED 30 JUNE 2025

	Notes	2025 \$	2024 \$
Balance as at 1 July		180,518	186,837
Surplus / (deficit) for the year		95,951	(6,319)
Total comprehensive income / (loss) for the year		95,951	(6,319)
Balance as at 30 June		276,469	180,518

STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30 JUNE 2025

CASH FLOWS FROM OPERATING ACTIVITIES

Grant receipts		2,847,034	2,808,030
Other revenue		166,790	108,608
Payments to suppliers and employees		(3,058,948)	(2,911,655)
Interest received		32,029	29,776
Net cash (used in) / provided by operating activities		(13,095)	34,759

CASH FLOWS FROM INVESTING ACTIVITIES

Cash outflow to Term deposit		(100,000)	(100,000)
Purchase of plant and equipment		(3,104)	(1,997)
Net cash used in investing activities		(103,104)	(101,997)

Net decrease in cash held

		(116,199)	(67,238)
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Reconciliation of cash

Cash at the beginning of the financial year		384,939	452,177
Net decrease in cash held		(116,199)	(67,238)
Cash at end of financial year	7	268,740	384,939

The accompanying notes form part of these financial statements.

NOTES TO FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2025

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The financial report is a general-purpose financial report that has been prepared in accordance with the *Australian Charities and Not-for-profits Commission Act 2012* and Australian Accounting Standards Reduced Disclosure Requirements, Interpretations and other applicable authoritative pronouncements of the Australian Accounting Standards Board.

The financial report was approved by the directors as at the date of the directors' report.

The financial report is for the company Mental Health Professionals' Network Limited as an individual company. Mental Health Professionals' Network Limited is a company limited by guarantee, incorporated and domiciled in Australia. Mental Health Professionals' Network is a not-for-profit company for the purpose of preparing financial statements.

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

(a) Basis of preparation of the financial report

Historical Cost Convention

The financial report has been prepared under the historical cost convention, as modified by revaluations to fair value for certain classes of assets as described in the accounting policies.

(b) Going Concern

The financial report has been prepared on a going concern basis, meaning the company is expected to continue its normal business operations and will be able to realise its assets and settle its liabilities in the ordinary course of business. The company earned a surplus from ordinary activities of \$95,951 (2024: \$6,319 deficit) during the year ended 30 June 2025, and as at that date the company's total assets exceeded total liabilities by \$276,469 (2024: \$180,518).

However, the company is dependent on the ongoing grant funding from the Commonwealth Department of Health and Aged Care. The Company entered into a contract on 25 August 2023 which extends the life of the project funding through to 30 November 2026. Should the Company be unsuccessful in securing funds beyond 30 June 2026, the Directors intend to scale down its operations but continue to provide elements of its principal activities to the extent it has the resources to do so.

The Directors believe that they will be successful in obtaining the funding required to ensure the Company can continue operations for the foreseeable future based on the matters outlined above and, therefore, they are confident that the going concern basis on which the financial statements have been prepared is appropriate. However, should the Company be unsuccessful in securing grant funding, there is a material uncertainty that may cast significant doubt on the Company's ability to continue as a going concern and therefore the Company may be required to realise assets at different amounts to those recorded in the Statement of Financial Position and settle liabilities other than in the ordinary course of business.

(c) Revenue

Grant revenue is recognised in the statement of comprehensive income when it is controlled. When there are conditions attached to grant revenue relating to the use of those grants for specific purposes it is recognised in the statement of financial position as a liability until such conditions are met or services provided.

Webinar revenue is recognised upon delivery of the webinars to customers.

Interest revenue is recognised when it becomes receivable on a proportional basis taking into account the interest rates applicable to financial assets.

Other revenue is recognised where the right to receive the revenue has been established.

All revenue is stated net of goods and services tax (GST).

(d) Cash and cash equivalents

Cash and cash equivalents include cash on hand and a bank's short-term deposits with an original maturity of three months or less held at call with financial institutions and bank overdrafts.

(e) Unexpended grants

The company receives grant monies to fund projects either for contracted periods of time or for specific projects irrespective of the period of time required to complete those projects. It is the policy of the company to treat grant monies as unexpended grants in the statement of financial position where the company is contractually obliged to provide the services in a subsequent financial period to when the grant is received or in the case of specific project grants where the project has not been completed.

(f) Goods and services tax (GST)

Revenues, expenses and purchased assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the 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 statement of financial position are shown as inclusive of GST.

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

(g) Employee benefits

(i) Short-term employee benefit obligations

Liabilities arising in respect of wages and salaries, annual leave and any other employee benefits (other than termination benefits) expected to be settled wholly before twelve months after the end of the annual reporting period are measured at the (undiscounted) amounts based on remuneration rates which are expected to be paid when the liability is settled. The expected cost of short-term employee benefits in the form of compensated absences such as annual leave is recognised in the provision for employee benefits. All other short-term employee benefit obligations are presented as payables in the statement of financial position.

(ii) Long-term employee benefit obligations

The provision for other long-term employee benefits, including obligations for long service leave and annual leave, which are not expected to be settled wholly before twelve months after the end of the reporting period, are measured at the present value of the estimated future cash outflow to be made in respect of the services provided by employees up to the reporting date. Expected future payments incorporate anticipated future wage and

salary levels, durations of service and employee turnover, and are discounted at rates determined by reference to market yields at the end of the reporting period on high quality corporate bonds that have maturity dates that approximate the terms of the obligations. Any re-measurements for changes in assumptions of obligations for other long-term employee benefits are recognised in profit or loss in the periods in which the change occurs.

Other long-term employee benefit obligations are presented as current liabilities in the statement of financial position if the company does not have an unconditional right to defer settlement for at least twelve months after the reporting date, regardless of when the actual settlement is expected to occur. All other long-term employee benefit obligations are presented as non-current liabilities in the statement of financial position.

(h) Income tax

No provision for income tax has been raised as the company is exempt from income tax under Division 50 of the *Income Tax Assessment Act 1997*.

(i) Financial instruments

Initial recognition and measurement

Financial assets and financial liabilities are recognised when the company becomes a party to the contractual provisions of the instrument. For financial assets, this is equivalent to the date that the company commits itself to either the purchase or sale of the asset (i.e., trade date accounting is adopted).

Financial instruments are initially measured at fair value adjusted for transaction costs, except where the instrument is classified as fair value through profit or loss, in which case transaction costs are immediately recognised as expenses in profit or loss.

Classification of financial assets

Financial assets recognised by the company are subsequently measured in their entirety at either amortised cost or fair value, subject to their classification and whether the company irrevocably designates the financial asset on initial recognition at fair value through other comprehensive income (FVtOCI) in accordance with the relevant criteria in AASB 9.

Financial assets not irrevocably designated on initial recognition at FVtOCI are classified as subsequently measured at amortised cost, FVtOCI or fair value through profit or loss (FVtPL) on the basis of both:

- (a) the company's business model for managing the financial assets; and
- (b) the contractual cash flow characteristics of the financial asset.

Classification of financial liabilities

Financial liabilities classified as held for trading, contingent consideration payable by the company for the acquisition of a business, and financial liabilities designated at FVtPL, are subsequently measured at fair value.

All other financial liabilities recognised by the company are subsequently measured at amortised cost.

Trade and other receivables

Consistent with both the company's business model for managing the financial assets and the contractual cash flow characteristics of the assets, trade and other receivables are subsequently measured at amortised cost.

(j) Plant and equipment

Each class of plant and equipment is carried at cost less, where applicable, any accumulated depreciation and any accumulated impairment costs.

The carrying amount of plant and equipment is reviewed annually by directors 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 which will be received from the assets employment and subsequent disposal. The expected net cash flows have been discounted to present values in determining recoverable amounts.

Depreciation

The depreciable amount of all fixed assets is depreciated over their estimated useful lives commencing from the time the asset is held ready for use.

The following table indicates the expected useful lives of non-current assets on which the depreciation charges are based:

Class of fixed assets	Useful lives	Depreciation basis
Office equipment	4 years	Straight Line

(k) Comparatives

Where necessary, comparative figures have been reclassified and repositioned for consistency with the current financial year disclosures.

NOTE 2: INCOME TAX

The company, a charitable institution, is endorsed to access the following concessions:

- Income Tax exemption under Subdivision 50-B of the *Income Assessment Act 1997*,
- GST concessions under Division 176 of *A New Tax System (Goods and Services) Act 1999* and,
- FBT rebate under section 123E of the *Fringe Benefits Tax Assessment Act 1986*.

NOTE 3: ECONOMIC DEPENDENCY

The company is reliant on grant funding from the Commonwealth Government.

At the date of this report, the company has a contract with the Commonwealth Department of Health and Aged Care for grant funding from 1 July 2023 to 30 November 2026.

NOTE 4: REVENUE & OTHER INCOME

	2025 \$	2024 \$
(a) Revenue from operating activities		
– Government grants	2,588,213	2,552,755
– Non-grant webinars	163,436	165,836
– Other Non-grant income	15,000	–
(b) Revenue from non-operating activities		
– Interest revenue	36,933	27,670
	2,803,582	2,746,261

NOTE 5: NON-GRANT OPERATIONS

Webinars and other O.P.D.:

– Revenue	178,436	165,836
– Employee benefits	(61,144)	(58,609)
– Other expenses	(75,848)	(55,467)
Net contribution to non-grant operations	41,444	51,760

NOTE 6: OPERATING SURPLUS / (DEFICIT)

Deficit has been determined after:

Expenses:

Depreciation	2,994	8,724
Employee benefits:		
– Salaries and wages	1,736,959	1,706,268
– Superannuation	190,616	163,936
	1,927,575	1,870,204

NOTE 7: CASH AND CASH EQUIVALENTS

Cash at bank	268,740	384,939
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2025
\$

2024
\$

NOTE 8: RECEIVABLES

Current

Accrued income	5,771	866
Term Deposit over 3-month term	200,000	100,000
Other receivables	35,002	23,193
	240,773	124,059

NOTE 9: PLANT AND EQUIPMENT

Office Equipment at cost	32,822	42,312
Less accumulated depreciation	(31,488)	(41,088)
	1,334	1,224

Movement in carrying amounts

Movement in the carrying amount for each class of plant and equipment between the beginning and the end of the current financial year is set out below:

Office Equipment

Carrying amount at beginning	1,224	7,951
Additions	3,104	1,997
Depreciation expense	(2,994)	(8,724)
Closing amount	1,334	1,224

NOTE 10: PAYABLES

Current

Unsecured Liabilities

– Trade creditors	25,502	29,274
– Income received in advance	–	15,000
– Other payables	97,348	138,714
Amounts payable to members	15,837	17,711
	138,687	200,699

2025
\$

2024
\$

NOTE 11: PROVISIONS

Current

Employee benefits

- Annual leave	54,800	72,774
- Long service leave	38,517	48,756
	93,317	121,530

Non-Current

Employee benefits

- Long service leave	2,374	7,475
	95,691	129,005

NOTE 12: ACCUMULATED SURPLUS

Accumulated surplus at beginning of financial year	180,518	186,837
Net surplus / (deficit) attributable to members of the company	95,951	(6,319)
	276,469	180,518

NOTE 13: MEMBERS' GUARANTEE

The company is incorporated under the Corporations Act 2001 as a company limited by guarantee. If the company is wound up, the constitution states that each member is required to contribute a maximum of \$100 each towards meeting any outstanding debts and obligations of the company. At 30 June 2025, the number of members was four. The combined total amount that members of the company are liable to contribute if the company is wound up is \$400.

NOTE 14: KEY MANAGEMENT PERSONNEL COMPENSATION

Key Management Personnel (KMP) are those persons having authority and responsibility for planning, directing and controlling the activities of the company, directly or indirectly, including any Director of that Company. KMP has been taken to comprise the Directors and the members of the Executive Management responsible for the day to day financial and operational management of MHPN.

(i) Names of Directors in office during or since the end of the year were:

Name of Director	Appointment	Date of Resignation
John Rasa	5/7/2018	
Adrian Armitage	27/2/2023	
Zena Burgess	22/6/2021	
Jonathan Cullum	24/2/2025	
Vinita Godinho	23/2/2021	30/5/2025
Stephan Groombridge	22/8/2017	
Ty Halse	24/6/2025	
Sharon McGowan	28/4/2023	10/12/2024
Sonia Miller	24/10/2023	
Morton Rawlin	27/8/2019	
Jaya Reddy	27/4/2021	

(ii) Names of Executives:

D Brooke	Chief Executive Officer	
K Hoppe	Manager, Communications, Marketing & Partnerships	(to 4/4/2025)
K Ravi	Head of Communications, Marketing & Partnerships	(from 7/4/2025)
R Heaton	Head of Networks	(from 16/9/2024)
N Bisogni	Head of Online Professional Development	(from 28/10/2024)

Compensation of KMP

Aggregated compensation of KMP was as follows:

	2025 \$	2024 \$
Short-term employee benefits	666,658	442,747
	666,658	442,747

2025
\$

2024
\$

NOTE 15: AUDITOR'S REMUNERATION

Amounts received or due and receivable by Pitcher Partners for:

– audit services	26,500	25,200
– other	1,200	2,740
	27,700	27,940

NOTE 16: RELATED PARTIES

Transactions between related parties are on normal commercial terms and conditions no more favourable than those available to other parties unless otherwise stated.

The aggregate amount payable to related parties by the company at balance date is; payable to APS – \$15,837 (2024: \$15,236) and RANZCP – \$Nil (2024: \$2,475).

The aggregate amount receivable from related parties by the company at balance date is Nil (2024: Nil).

Transactions with related parties:

Provision of services from members

ACMHN	12,356	6,934
APS	186,373	179,427
RACGP	3,329	3,300
RANZCP	4,950	4,950
	207,008	194,611

NOTE 17: CAPITAL AND LEASING COMMITMENTS

Operating lease commitments

Non-cancellable operating leases contracted for but not capitalised in the future statements:

Payable:

– no later than one year	5,808	600
– Later than one year but not later than 5 years	968	–
	6,776	600

Photocopier for a 20-month period with an option to extend at the end. Payments are paid monthly in arrears.

NOTE 18: EVENTS SUBSEQUENT TO REPORTING DATE

There has been no matter or circumstance, which has arisen since 30 June 2025 that has significantly affected or may significantly affect:

- (a) The operations, in financial years subsequent to 30 June 2025, of the company, or

- (b) The results of those operations, or
- (c) The state of affairs, in financial years subsequent to 30 June 2025, of the company.

NOTE 19: COMPANY DETAILS

Melbourne Vic 3000. ABN 67 131 543 229.

DIRECTORS' DECLARATION

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The directors declare that the financial statements and notes set out on pages 11 to 24 are in accordance with Australian Charities and Not-for-profits Commission Act 2012; and

- a) Comply with Australian Accounting Standards – Reduced Disclosure Requirements and the Australian Charities and Not-for-profits Commission Regulation 2013; and
- b) Give a true and fair view of the financial position of the entity as at 30 June 2025 and of its performance for the year ended on that date.

In the directors' opinion there are reasonable grounds to believe that Mental Health Professionals' Network Ltd will be able to pay its debts as and when they become due and payable.

This declaration is made in accordance with a resolution of the Board of Directors.

John Rasa

John Rasa
Director

Dated: 20 October 2025, Melbourne

INDEPENDENT AUDITOR'S REPORT



**MENTAL HEALTH PROFESSIONALS NETWORK LTD
ABN 67 131 543 229**

**INDEPENDENT AUDITOR'S REPORT
TO THE MEMBERS OF MENTAL HEALTH PROFESSIONALS NETWORK LTD**

Report on the Audit of the Financial Report

Opinion

We have audited the financial report of Mental Health Professionals Network Ltd, "the Company", which comprises the statement of financial position as at 30 June 2025, the statement of profit or loss and other comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, and the directors' declaration.

In our opinion, the accompanying financial report of Mental Health Professionals Network Ltd, is 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 Company's financial position as at 30 June 2025 and of its financial performance for the year then ended; and
- (b) complying with Australian Accounting Standards - Reduced Disclosure Requirements and Division 60 of the *Australian Charities and Not-for-profits Commission Regulation 2022*.

Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of our report. We are independent of the Company in accordance with the *Australian Charities and Not-for-profits Commission Act 2012* ("ACNC Act") and the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants* in "the Code" that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

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INDEPENDENT AUDITOR'S REPORT (CONTINUED)



**MENTAL HEALTH PROFESSIONALS NETWORK LTD
ABN 67 131 543 229**

**INDEPENDENT AUDITOR'S REPORT
TO THE MEMBERS OF MENTAL HEALTH PROFESSIONALS NETWORK LTD**

Material Uncertainty related to Going Concern

We draw attention to Note 1b in the financial report, which indicates that as 30 June 2025, the Company's current assets exceed its total liabilities by \$276,469 (2024 \$180,518). We note that the company is dependent on the ongoing grant funding from the Commonwealth Department of Health and Aged Care. The Company entered into a contract on 25 August 2023 which extends the life of the project funding through to 30 November 2026. Should the Company be unsuccessful in securing funds beyond 30 June 2026, the Directors intends to scale down its operations but continue to provide elements of its principal activities to the extent it has the resources to do so. As stated in Note 1b these events or conditions, along with other matters as set forth in Note 1b, indicate that a material uncertainty exists that may cast significant doubt on the Company's ability to continue as a going concern. Our opinion is not modified in respect of this matter.

Other Information

The directors are responsible for the other information. The other information comprises the information included in the Company's annual report for the year ended 30 June 2025, but does not include the financial report and our auditor's report thereon.

Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated.

If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Responsibilities of Management and Those Charged with Governance for the Financial Report

Management is responsible for the preparation and fair presentation of the financial report in accordance with the financial reporting requirements of the ACNC Act and for such internal control as management determines is necessary to enable the preparation and fair presentation of a financial report that is free from material misstatement, whether due to fraud or error.

In preparing the financial report, management is responsible for assessing the Company's ability to continue as a going concern, disclosing, as applicable, matters relating to going concern and using the going

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INDEPENDENT AUDITOR'S REPORT (CONTINUED)



**MENTAL HEALTH PROFESSIONALS NETWORK LTD
ABN 67 131 543 229**

**INDEPENDENT AUDITOR'S REPORT
TO THE MEMBERS OF MENTAL HEALTH PROFESSIONALS NETWORK LTD**

concern basis of accounting unless management either intends to liquidate the Company or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Company's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Report

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

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

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Company's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the directors.

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INDEPENDENT AUDITOR'S REPORT (CONTINUED)



MENTAL HEALTH PROFESSIONALS NETWORK LTD
ABN 67 131 543 229

**INDEPENDENT AUDITOR'S REPORT
TO THE MEMBERS OF MENTAL HEALTH PROFESSIONALS NETWORK LTD**

- Conclude on the appropriateness of the directors' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Company's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Company to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.

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

N R BULL
Partner
Date 21 October 2025

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Mental Health Professionals' Network

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