

# NEEDS ASSESSMENT

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## SUMMARY

2025-26 to 2027-28

Prepared for the Australian Government Department of Health and Aged Care



Leadership



Collaboration



Respect



Accountability



Innovation

Murray PHN acknowledges its catchment crosses over many unceded First Nations Countries following the Dhelkunya Yaluk (Healing River).

We pay our respects and give thanks to the Ancestors, Elders and Young People for their nurturing, protection and caregiving of these sacred lands and waterways, acknowledging their continuation of cultural, spiritual and educational practices.

We are grateful for the sharing of Country and the renewal that Country gives us.

We acknowledge and express our sorrow that this sharing has come at a personal, spiritual and cultural cost to the wellbeing of First Nations Peoples.

We commit to addressing the injustices of colonisation across our catchment, and to listening to the wisdom of First Nations communities who hold the knowledge to enable healing.

We extend that respect to all Aboriginal and Torres Strait Islander Peoples.

*We aspire to be an anti-racist organisation, embedding cultural humility as a daily practice, to improve health outcomes and health equity in our communities. We recognise cultural humility as a life-long commitment to self-reflection, personal growth and redressing power imbalances in our society.*

## **Recognition of lived experience**

We recognise the individual and collective contributions of people with a lived and/or living experience of health issues, and their families, loved ones and supporters.

It is through listening to and acting on the voices of people with lived experience, those who provide services, those who fund services, and most importantly, those who use services that we will find the expertise we need to move towards the health system that Australia needs.

Every person's story we hear, and every experience shared, helps to develop our understanding of the system that is required to best meet the needs of people who live with or care for someone with health concerns.

## **Contributors and attribution**

Murray PHN would like to extend sincere thanks to the many contributors to this Needs Assessment including the members of the Community and Clinical Advisory Councils, Medical Advisors and to local healthcare consumers, professionals, community members and other stakeholders. We also acknowledge the contributions of Murray PHN staff who were involved in the planning, data collection, analysis and reporting, as well as consultants Impact Co and First Nations Co.

The recommended citation for this report is:

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Murray PHN, Dja Dja Wurrung (Bendigo), Victoria. Retrieved from <https://murrayphn.org.au/about-us/key-documents/>

## Executive summary

The Needs Assessment 2025-2026 to 2027-2028 details the outcomes of a comprehensive process of identifying and understanding the health and service needs across the Murray PHN catchment. The Needs Assessment is a key deliverable for all PHNs to the Department of Health and Aged Care (DoHAC), due in November 2024 to inform the Activity Work Plan (AWP) cycle. The report was prepared using the PHN Program Needs Assessment Policy Guide (2021), PHN Needs Assessment Completion Guide (2021) and the PHN Needs Assessment template (2024).

The Needs Assessment was developed through an iterative multi-phase process involving scoping, health needs analysis, stakeholder consultations, service mapping, literature review, prioritisation of key issues, validation of findings and continuous quality improvement. Data were collected from stakeholder consultations focused on priority areas groups of chronic disease, after hours care, mental health and alcohol and other drugs (AOD), multicultural health and homelessness. A specific First Nations health and service needs analysis was completed recognising the unique rights and experiences of First Nations Peoples and the Culturally Safe and anti-racist approaches needed to improve primary healthcare access and outcomes, including self-determination approaches and models of care focused on social and emotional wellbeing, and a holistic definition of health and healing. Additional validation processes identified further health and service needs to be included, which were: disaster and emergency preparedness, family violence, access to primary healthcare in residential aged care, testing and vaccination. These emerging priorities were incorporated into the final report through further consultations, data collection and analyses.

- The health and service needs are detailed, along with supporting evidence, to provide a trustworthy source of current information on issues impacting communities in the catchment
- The report highlights key opportunities for commissioning with ACCHOs, general practices, public hospitals, residential aged care homes, allied health providers, multicultural organisations, housing, homelessness, family violence services and community health services
- The outcomes of the health and service needs analysis demonstrates a stronger focus on health equity is needed to ensure universal access to comprehensive primary healthcare that is timely and addresses a broad range of health and social issues
- Partnerships are required to achieve the expected outcomes, with general practices and primary healthcare providers, ACCHOs, Public Health Units, Health Service Partnerships and governments
- There is an important role for PHNs in systems development, coordination and capacity building through stakeholder engagement and market stewardship, to enable more value for investment from healthcare funding and integrated models with primary, secondary and tertiary care, and with mental health and AOD services
- The report underscores the necessity of sustainable funding models to support holistic and integrated care that responds to local health and service needs, which is underpinned by workforce capacity building, focusing on digital literacy and Cultural Safety
- Expanding outreach and telehealth services is also highlighted as a critical strategy to reduce barriers to care in underserved rural areas and with priority groups.

The report provides an evidence-based strategic roadmap for targeted commissioning, coordination and capacity building activity that will strengthen primary healthcare and improve health outcomes for all communities in the Murray PHN catchment.

# Murray PHN needs on a page

## HEALTH NEEDS

	Strong First Nations children and youth
	Strong Spirit, Strong Elders, Strong Community
	Chronic conditions and multimorbidity
	People with disability
	People who are experiencing homelessness and/or at risk
	Health needs of multicultural populations
	Mental health and AOD
	People impacted by socioeconomic disadvantage
	Disasters and community emergency preparedness

## SERVICE NEEDS

	Access to ACCHO-led holistic primary healthcare
	Culturally safe mainstream services
	Care for rural people with complex chronic conditions
	Mental health and AOD services
	First Nations-led mental health and AOD services
	Access to interpreters and language supports
	Strengthening the rural workforce
	Digital health capacity building
	Service navigation supports
	Primary healthcare for people experiencing homelessness
	Accessible primary healthcare in communities and residential aged care

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