



General Practice and Allied Health Engagement

Summary of Key Insights

2025/2026

phn
EASTERN MELBOURNE

An Australian Government Initiative



Purpose and context

Eastern Melbourne Primary Health Network recently conducted a survey of primary care providers in the catchment. This document summarises what we heard, and provides an overview of what we're planning next.

About Eastern Melbourne Primary Health Network

The Australian Government established Primary Health Networks (PHNs) to improve the efficiency and effectiveness of health services for people and improve the coordination of health services. Specifically, PHNs:

- **Coordinate** and integrate local health services in collaboration with Local Health Networks (LHNs) to improve quality of care, people's experience and efficient use of resources
- **Commission** primary care services to address population health needs and gaps in service delivery and to improve access and equity
- **Capability build** and provide practice support to primary care providers to support quality care delivery.

Eastern Melbourne PHN (EMPHN) works as a coordinator, commissioner and capability builder across eastern and northeastern Melbourne. Our Strategic Plan (2025-28) sets out three overarching strategic priorities:

- 1 **Drive equitable access and outcomes for communities**
- 2 **Connect our partners and communities to enable integration and change**
- 3 **Leverage insights to improve outcomes, drive value and demonstrate impact**

About our engagement with General Practice and Allied Health

This document summarises the key insights from our recent engagement with local general practice and allied health representatives. The engagement was aimed at informing our understanding of primary care needs and priorities, as well as informing the design of our future interventions to build the capability of primary care providers in the region.

The engagement activities included:

- **A General Practice and Allied Health Needs and Engagement Survey.** This was the third time we've run this survey, having conducted in previously in 2019 and 2023. The General Practice Survey received 363 responses, while the Allied Health Survey received 243 responses.
- **An Allied Health Workshop** to unpack the survey findings. With 47 participants, the workshop focused on discussion around the themes of partnership with EMPHN, collaboration with general practice, and system pressures.
- **A General Practice Workshop** to unpack survey findings. With 23 participants, this workshop focused on discussion around multidisciplinary teams, workforce capacity and capability, engagement with aged care, and partnership with EMPHN.

What we heard: Key themes

Feedback gathered through the survey and workshops provided insights across a number of key themes.

Multidisciplinary teams (MDTs)

- Most survey respondents recognised the benefits of MDTs, noting the potential to deliver better patient outcomes and increase workforce capacity
- Interest in adopting MDTs is also strong, with 80% of GPs interested in implementation
- Many barriers were also noted, including limited access to partners, inadequate remuneration, and funding models that do not support MDT implementation

AI

- There is a generally positive reception to AI-integration, with 22% of GP survey respondents being regular users and 28% occasional users
- Nearly half (49%) of respondents identified as being familiar AI users, and the most common use was scribing support (30%)
- Users found AI most valuable for administrative tasks, but were more skeptical of its use in clinical decision-making

Capability development

- Respondents noted workforce capacity as an ongoing challenge
- Generally, respondents valued the capability and quality improvement support and resources provided by EMPHN, although many GPs and Allied Health respondents indicated they weren't aware of the available resources
- Key motivators for participation in quality improvement activities included compensation for time, flexible delivery formats, business benefits, a clear case for change, and convenient scheduling

Mental health

- Respondents identified opportunity factors, such as access to local services (90%) and specialist support/advice (88%), as the most influential in their ability to deliver mental health care services
- Capability factors (e.g., adequate training in mental health assessment, 82%) and motivation factors (e.g., appropriate remuneration, 79%) were also noted as influencing the ability of providers to support patients with mental health needs

Engaging with aged care

- Half (50%) of GPs reported that they visit aged care, representing a decline from 58% in 2023
- Respondents raised a number of barriers, including financial unsustainability, lack of professional reward, and poor work life balance
- Respondents also noted low uptake of telehealth as a barrier, with only 27% of respondents using telehealth with aged care residents

Palliative care and advanced care planning

- Most GPs (84%) and just over half of Practice Nurses (51%), as well as some Practice Managers (19%) reported that they are involved in supporting patients with palliative care and/or advanced care planning
- Respondents reported that the most common prompt (around 3 out of 4) for these discussions are patients and families themselves, rather than their GPs

Medicare Urgent Care Centres

- Most respondents indicated that they are aware of and refer patients to Urgent Care Centres
- Referrals to UCCs tends to be done by PNs (where 86% refer to UCCs) rather than GPs (where 57% refer to UCCs)
- Only 50% of GPs receive patient discharge summaries within 24-48 hours, while the majority wait several days or longer
- Most discharge reports (75%) are delivered electronically

GP-hospital interface

- Issues noted include discharge summary delays, incomplete clinical reports, difficulties accessing information, and general communication barriers
- Respondents noted that although most Local Health Networks deliver patient discharge summaries within four days, for some this can take five days or more
- Timeliness also varied for each Local Health Network, with some summaries being delivered within 24 hours while others can take over a week

What we heard: Allied Health

Feedback provided by allied health survey respondents and workshop participants highlighted a number of key insights and opportunities specific to allied health for further consideration by EMPHN.

Streamlining and enhancing interoperability of systems

- Survey respondents and workshop participants noted the challenges presented by different providers using different systems, and having to work with multiple platforms that don't integrate well
- This also means that there is no single source of truth for referrals, services or providers
- Fragmented systems also creates inefficiencies in navigating systems and coordinating care for patients
- Participants highlighted opportunities to promote and support uptake of existing platforms, service directories and single-entry points for trusted referrals and service navigation information

Strengthening visibility and integration of allied health

- Survey respondents and workshop participants emphasised that there is a lack of awareness of allied health services and referral pathways among general practices and other providers
- This contributes to a sense among allied health providers that they are under-represented at a system level, as well as creating barriers for better integration and multidisciplinary care
- Participants highlighted opportunities to advocate for the inclusion of allied health providers in existing directories, to support visibility of provider specialties, to increase GP awareness of allied health professions, and increase opportunities for allied health input into planning, design and advisory structures

Promoting awareness and connection between providers

- Survey respondents and workshop participants indicated that relationships between general practice and allied health are usually ad hoc and informal, with limited structured opportunities for collaboration
- It was noted that communication is sometimes perceived to be one-directional, with challenges contacting practices and unclear referral expectations
- Participants also, however, expressed enthusiasm for opportunities to work more closely together as part of multidisciplinary teams
- This presents opportunities to provide targeted networking and engagement opportunities, support practices to identify appropriate providers quickly and confidently, and focus on strengthening shared care relationships and patient outcomes

Delivering targeted and practical supports

- Survey results highlighted improvements in satisfaction with support and education provided by EMPHN
- Among some respondents, awareness of the availability of supports and resources was limited
- Participants highlighted opportunities for EMPHN to deliver targeted and practical supports and increase visibility of EMPHN programs, including through targeted connection and networking opportunities, joint GP-allied health sessions, and delivery of AI training to reduce the administrative burden.

What we heard: General Practice

Feedback provided by general practice survey respondents and workshop participants highlighted a number of key insights and opportunities specific to general practice for further consideration by EMPHN.

Implementing multidisciplinary teams

- Survey respondents emphasised the value of multidisciplinary care, citing the potential to better support patient outcomes while increasing workforce capacity
- They also, however, identified a number of resource, funding and connectivity barriers
- Workshop participants highlighted potential opportunities for greater support to strengthen provider networks and care coordination
- This included, for example, facilitating networking and communities of practice, streamlining referral pathways, and exploring opportunities to better connect and embed commissioned services within primary care

Capability and quality improvement

- While survey respondents generally valued the capability and quality improvement support provided by EMPHN, many GPs indicated they weren't aware of the available resources
- They also expressed a desire for more role-specific content to enhance relevance and value, including more tailored information and supports that meets the needs of the whole practice team. In addition to Practice Managers who are currently the primary users, this would include:
 - Practice administrative staff
 - Practice Nurses
 - GPs
- Respondents also identified opportunities to deliver capability building through a mix of interventions including workshops, seminars, in-person visits, and networking opportunities

Engaging with aged care

- Respondents identified barriers to visiting residential aged care homes (RACHs), including financial unsustainability, lack of professional reward, poor work life balance, and low telehealth uptake
- Workshop participants identified opportunities to improve engagement with aged care, such as:
 - Delivering targeted training and education for general practices and RACHs
 - Partnering with RACHs to increase appropriate telehealth utilization
 - Strengthening information sharing and care coordination between GPs and RACHs
 - Coordinating GP visits through dedicated clinic days to improve efficiency and support financial sustainability

Partnership with EMPHN

- Participants viewed EMPHN positively, particularly for providing accessible support across quality improvement, digital health and practice engagement
- Participants noted that EMPHN's support is most valued when it is accessible, responsive and directly engages with practices, prompting consideration of how EMPHN can further sustain and deepen its partnerships with general practices
- Practices are seeking EMPHN to play a more active convening role across the healthcare system, highlighting EMPHN as a key enabler of collaboration, leveraging its position to connect GPs, allied health providers, and specialists in ways that individual practices cannot.

What next: Partnership with EMPHN

Survey and workshop feedback also provided insights around how providers want to work with EMPHN, and what a more active partnership could look like in future. We are eager to continue exploring this with you to define our future engagement approach.

What we heard	What this means for us
 In general, survey respondents reported high levels of satisfaction with EMPHN performance and the supports and education provided, representing an improvement on prior years.	• Feedback highlights that general practices and allied health providers want an active partnership with us that is based on relationships and is tailored to individual practice and provider needs • We've also heard that our support and engagement should consider the whole practice, including administrative, management and clinical staff • General practices and allied health providers are eager for us to play a role as a system connector, building connections, streamlining pathways, and enabling collaboration and shared care for patients • We've also heard that we should add value without duplicating effort, and focus on where we can deliver benefits to practices and allied health providers • Feedback also highlights a desire for greater advocacy on behalf of primary care providers – while PHNs are not advocates, there is an opportunity for EMPHN to communicate and promote the role and impact of primary care and allied health providers in our catchment.
 At the same time, however, respondents indicated a desire for a more active and relationship-based partnership with EMPHN. This includes the desire for more collaborative and tailored engagement, rather than standardised offerings.	
 Participants noted that GPs and practices receive information and advice from various sources. Thus, it is also important for EMPHN to consider how they may leverage local connections and knowledge to add unique value, rather than duplicating existing resources.	
 Feedback also highlighted the desire for support related to ongoing changes such as AI, as well as for greater advocacy and promotion of the important role of allied health and general practice in the health system	Where to from here? We are continuing to explore how to best incorporate the feedback we've received, and what this means for how we work with you in the future. This includes considering: ○ How we can most effectively partner with practices and providers to enable quality improvement and collaboration that addresses the needs of our region ○ How we can support multidisciplinary working and shared care, including through integration with our commissioned services ○ How we can effectively play the role of system connector to enable greater collaboration and integration of care. As we continue to progress this thinking, there will be more opportunities for you to help shape our future engagement approach.

