



# A shared approach to Health Needs Assessments

From pilot to precedent: A blueprint for scalable, evidence-informed population health planning across PHN regions.

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## The opportunity

In 2024, two Primary Health Networks (PHNs) – North Western Melbourne and Eastern Melbourne – partnered to deliver evidence-based Health Needs Assessments (HNAs).

The project applied the [NWMPHN HNA Framework](#) across both regions to deliver consistent, data-driven and locally relevant insights for 2025–2028.

All 31 PHNs are required to complete (HNAs) every three years to support ongoing primary healthcare improvement across their regions. However, the methods and depth of analysis vary significantly across jurisdictions.

Recognising the opportunity for greater consistency and impact, NWMPHN and EMPHN partnered to:

- **align methodologies** to enable consistent, high-quality population health planning
- **enhance innovation and efficiency** through shared knowledge, tools, and resources
- develop a **comprehensive, evidence-informed resource** to guide planning and decision making.

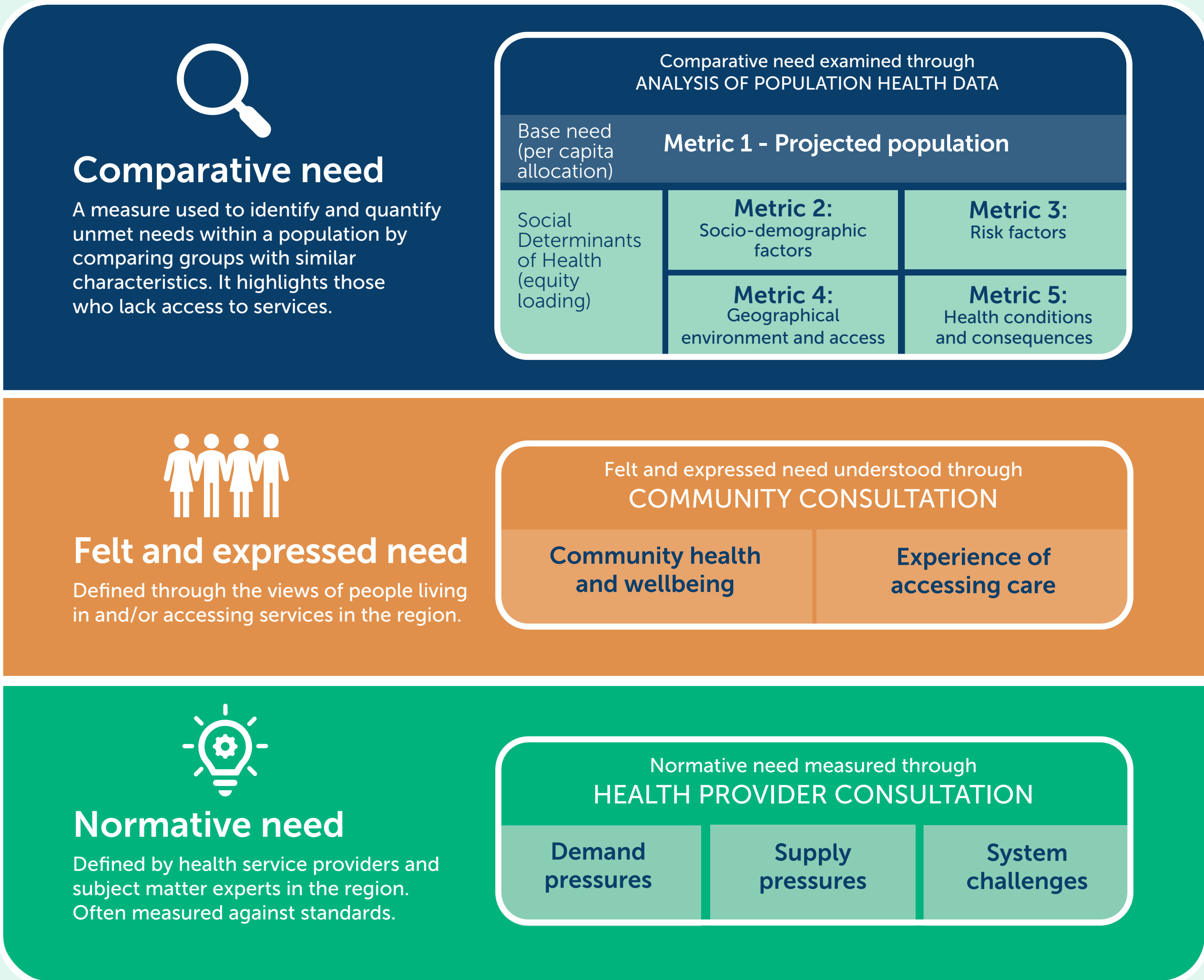
Together, these two PHNs represent **52% of the Victorian** and **13.2% of the Australian population** (PHIDU, 2023).

A shared approach creates greater opportunities for identifying, prioritising and addressing health needs across a large, diverse population, enabling collaborative, coordinated approaches to strengthen accessible health services and improve community health and wellbeing.

## Method

The NWMPHN HNA Framework uses a mixed-methods approach, including a method to quantify need using the social determinants of health, to define and understand population health and service provider needs.

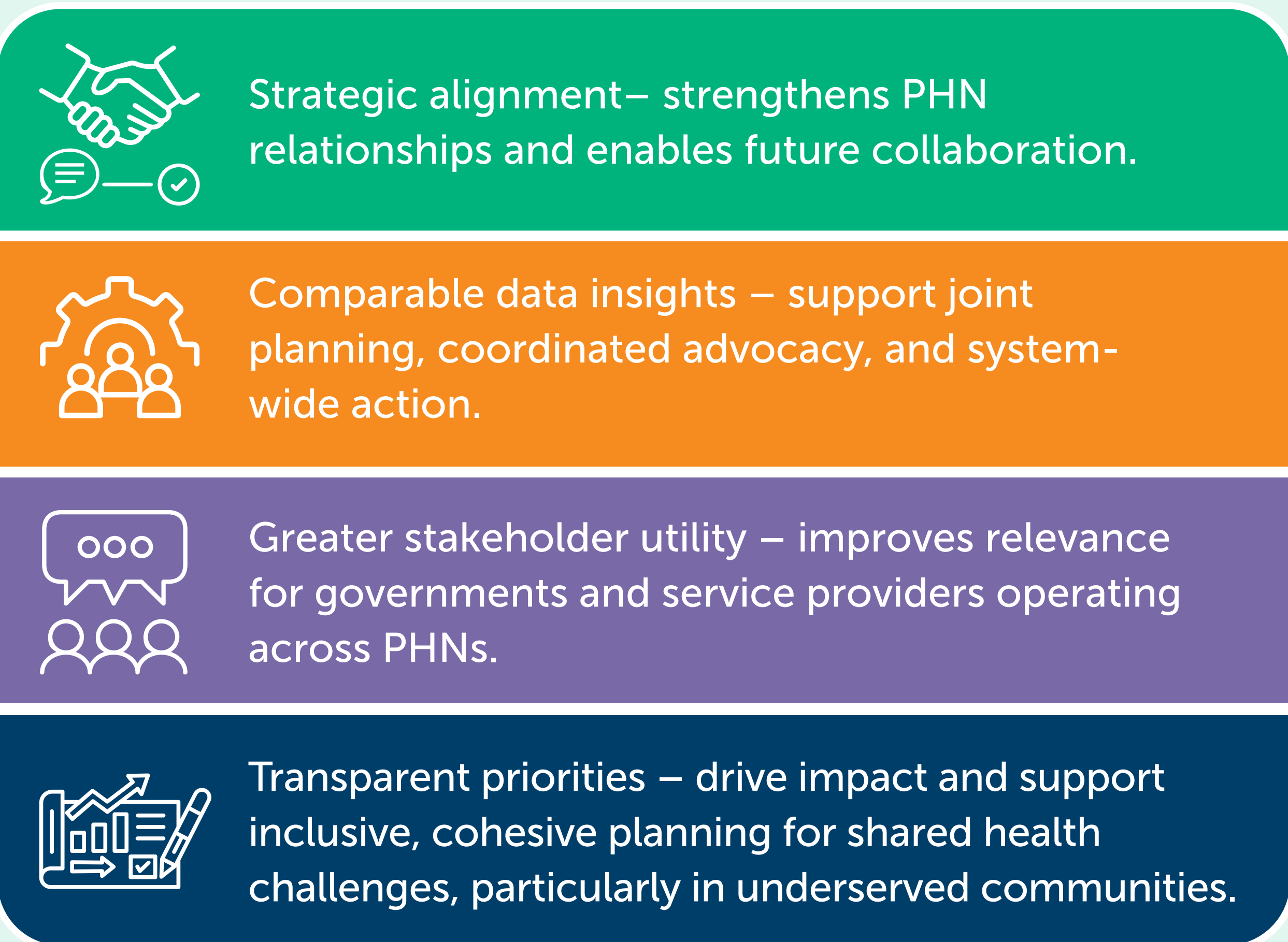
The NWMPHN HNA Framework uses many sources of quantitative and qualitative data to identify and prioritise need.



## A national blueprint

This shared approach sets a strategic precedent for PHNs, demonstrating how standardised HNA methodologies across regions can deliver high-quality, locally relevant insights at scale. It offers a blueprint for nationally consistent, evidence-informed population health planning.

Key benefits include:



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## Prioritisation

The final stage of the HNA focused on identifying priority health and service needs to inform strategic planning and commissioning. This involved triangulating evidence and working with subject matter experts to systematically prioritise needs across streams aligned to PHN commissioning areas.

## What we learned

Delivering regional HNAs is complex. This joint initiative highlights key enablers that support effective cross-PHN collaboration and can inform future efforts.

- Shared governance through a joint Project Advisory Group enabled cross-PHN leadership, alignment and accountability.
- Collaborative engagement with internal and external stakeholders during data synthesis workshops strengthened data interpretation and prioritisation of findings.
- Adopting new tools and technologies such as code-based data analysis and Github for task and version control enhanced reproducibility, quality assurance, and analytical rigour.
- Co-develop community engagement tools designed for consistency but adaptable to local contexts across each region.
- Defined roles and dedicated resources, including centralised project management, enabled effective coordination and delivery.
- Sufficient time allocation for joint data interpretation, QA, review and approval processes.
- Targeted communications supported the visibility and dissemination of findings with key internal and external stakeholders.

