

Latest update: 16 February 2026

Community Frequently Asked Questions

1. What has been announced?

The Boards of Alexandra District Health and Eastern Health have formally recommended a voluntary amalgamation to strengthen access to care closer to home for the Alexandra and district community.

A comprehensive business case has found the voluntary amalgamation would create a more sustainable local health service and support the delivery of more connected care across the rural–metropolitan catchment by strengthening the established partnership that is already benefiting local patients and staff.

The recommendation has now been provided to the Secretary of the Department of Health and the Minister for Health for consideration. No changes will occur unless the Minister approves the recommendation.

2. Why are the Boards of Alexandra District Health and Eastern Health recommending that both services voluntarily amalgamate?

The Boards of both health services have determined that a voluntary amalgamation provides the strongest platform to protect and enhance local healthcare for the Alexandra and district community, while responding to growing and changing health needs, and ensuring long-term sustainability of local healthcare.

The business case shows that the district experiences higher rates of chronic disease and mental ill-health than the Victorian average, an ageing population, constrained access to primary and specialist care, and high reliance on metropolitan services. At the same time, the small scale of Alexandra District Health limits its ability to expand services, attract and retain workforce, and invest in contemporary clinical governance and digital systems.

The business case found that a voluntary amalgamation between Alexandra District Health and Eastern Health would mean more care and services being delivered in Alexandra, new opportunities for staff to train, develop and share expertise across rural and metro settings and a more sustainable future.

For Eastern Health, it would deepen regional partnerships, ease pressure on hospitals and share specialist knowledge and services with Alexandra and district communities.

Together, the Boards have determined that voluntary amalgamation would create a stronger, more connected system of care for the community.

3. Why are the Boards of Alexandra District Health and Eastern Health recommending a voluntary amalgamation now?

The Boards of Alexandra District Health and Eastern Health have recommended a voluntary amalgamation to address both current pressures and future needs, and to enable more care to be delivered locally in Alexandra

Health needs in the district are already increasing and becoming more complex, driven by an ageing population, higher rates of chronic disease and mental ill-health, workforce shortages and rising system costs. The business case confirms that maintaining the status quo would limit Alexandra District Health's ability to respond to these challenges over time.

The Boards also considered that the existing partnership between Alexandra District Health and Eastern Health is already delivering tangible benefits for patients and staff, including local oncology services, dialysis planning, shared workforce and training initiatives, and coordinated care.

Importantly, the business case identifies service expansions, such as additional specialist clinics (general medicine, geriatrics and paediatrics), low-complexity surgery services, a three-day dialysis service and improved access to X-ray and diagnostics, that can be delivered by building on this partnership. Proceeding now allows these benefits to be implemented and embedded in a coordinated and sustainable way.

4. How has the timing of this proposal considered the recent impact of the Longwood fire on the community?

The Boards recognise that the Longwood fire has placed additional strain on individuals, families and services across the Alexandra district, and that recovery will take time.

In this context, the Boards believe it is important to ensure local health services are strong, resilient and well supported – not only to meet immediate needs, but to support community health and wellbeing over the longer term.

The recent fire highlighted the value of the existing partnership between the health services, with Eastern Health providing support to Alexandra District Health during a period of heightened demand across the district.

The recommendation to voluntarily amalgamate is about strengthening the foundations of local healthcare, building on a partnership that is already supporting the community through shared staff, specialist input and coordinated care during periods of increased demand.

A voluntary amalgamation would formalise and strengthen that support, so it is available when it is needed most.

5. What would a voluntary amalgamation look like?

If approved by the Minister, Alexandra District Health and Eastern Health would form a single health service under one Board appointed by the Minister for Health, which would include a current Alexandra District Health Board member possessing the requisite skills.

The amalgamated health service would have one CEO who is supported by local leadership at Alexandra District Health.

The new amalgamated entity would be called Eastern Health, but Alexandra District Health would keep its name. At a time to be determined by the Board of the amalgamated health service, Alexandra District Health would formally be referred to as a campus of Eastern Health, retaining its name: Eastern Health – Alexandra District Health.

Locally raised funds and donations would continue to be used to support local services, and the Alexandra District Health Community Engagement Committee would advise the amalgamated Board.

The intent is to strengthen and expand what is already available locally, while maintaining a strong local presence.

6. Would Alexandra District Health retain its name if the Minister approves a voluntary amalgamation?

Yes. The recommendation includes clear safeguards to protect Alexandra District Health's name.

The new amalgamated entity would be called Eastern Health, but Alexandra District Health would keep its name. At a time to be determined by the Board of the amalgamated health service, Alexandra District Health would formally be referred to as a campus of Eastern Health, retaining its name: Eastern Health – Alexandra District Health.

Local leadership would remain in place, locally raised funds and donations would continue to be used to support local services, and the Alexandra District Health Community Engagement Committee would advise the amalgamated Board.

7. What would a voluntary amalgamation mean for local services?

If a voluntary amalgamation were approved by the Minister, both health services would continue to provide care to their local communities. The aim is to strengthen and expand what is already available, not to reduce services.

Importantly, the business case identifies service expansions at Alexandra District Health, such as additional specialist clinics (general medicine, geriatrics and paediatrics), low-complexity surgery services, a three-day dialysis service and improved access to X-ray and diagnostics, that can be delivered by building on this partnership.

8. What are the benefits of a voluntary amalgamation for the community?

The business case identifies specific benefits for patients and community that would be delivered through a voluntary amalgamation, including:

- **Expanded local access to specialist care**, with new and increased specialist clinics delivered at Alexandra District Health, including general medicine, geriatrics and paediatrics – reducing the need for patients to travel long distances for routine specialist review.
- **Increased low-complexity surgery services** to better utilise existing beds and theatre capacity to safely deliver more care locally.
- **A three-chair dialysis service at Alexandra District Health**, operating as part of Eastern Health’s renal hub-and-satellite model.
- **Improved access to imaging (X-ray) and diagnostic services**, addressing current service gaps that limit the ability to deliver and coordinate care locally.
- **Clearer, more integrated care pathways**, supported by unified clinical governance and, over time, shared patient information systems – making it easier for patients to move between local and metropolitan services when escalation or specialist care is required.

9. What are the benefits of a voluntary amalgamation for staff?

The business case identifies specific benefits for staff that would be delivered through a voluntary amalgamation, including:

- **Stronger workforce sustainability**, supported by stronger career pathways across rural and metropolitan settings.

- Access for Alexandra District Health staff to Eastern Health to the full learning management system and staff scholarship programs.
- The commencement of an allied health graduate program from 2027.
- Opportunities for postgraduate education and specialist supervision, and exploration of rural generalist and registrar rotation models.
- More sustainable use of shared systems and support services, helping Alexandra District Health staff focus resources on frontline care. This includes extending Eastern Health's financial and health information systems to support ADH, simplifying policies and processes, and strengthening long-term service viability while maintaining a strong local presence.

Importantly, the recommendation includes clear safeguards to protect local identity, leadership and community involvement.

All staff would transfer to the amalgamated health service on existing pay, location and employment conditions.

10. Did the Boards of Alexandra District Health and Eastern Health engage with staff, stakeholders and the community before recommending a voluntary amalgamation?

Yes. The Boards of both health services undertook a structured engagement process with staff, patients, stakeholders and community members during the exploration phase.

Feedback from this process informed the business case and highlighted strong support for sustainable local healthcare, alongside clear expectations about protecting local identity, maintaining services and ensuring local voices continue to be heard. The key themes that emerged from the engagement can be found on www.connectingcare.net or via this [link](#).

11. How would a voluntary amalgamation affect where and how I access care?

If approved by the Minister for Health, a voluntary amalgamation between Alexandra District Health and Eastern Health would help more people access care closer to home, not further away.

Local services at Alexandra District Health would continue to operate, with opportunities over time to expand specialist clinics, diagnostics and treatment locally. Where care cannot be safely delivered locally, stronger and more integrated pathways with Eastern Health would support smoother, more coordinated access to metropolitan services when needed.

12. What are the potential local economic and employment impacts of the proposed voluntary amalgamation?

A voluntary amalgamation is focused on strengthening local healthcare and the services offered to the community. By supporting service sustainability and potential service growth, if more services are brought local, this would mean more jobs and more training opportunities for staff of both Alexandra District Health and Eastern Health.

All staff would transfer to the amalgamated health service on existing pay, location and employment conditions.

13. Will there be any changes to health services now?

No changes will occur unless the Minister for Health approves the Boards of Alexandra District Health and Eastern Health's recommendation to voluntarily amalgamate.

14. What is a business case?

A business case is a structured and evidence-based analysis that helps an organisation make an informed decision about its future. It outlines the benefits being sought, explores possible options for achieving them, and weighs up the costs, risks and outcomes of each.

For Alexandra District Health and Eastern Health, the business case was developed after the staff, patient, stakeholder and community engagement period. It considered what the Boards heard from staff, stakeholders, patients and the community, as well as financial, service and workforce analysis, to identify the best way to strengthen local health care for the long term.

15. Who developed the business case?

The Boards of Alexandra District Health and Eastern Health were jointly responsible for developing the business case. Each Board independently considered the findings and decided whether to endorse the recommendation of the business case.

16. What were the options considered in the business case?

The business case considered maintaining current arrangements through the Local Health Service Network and compared this with voluntary amalgamation. The Boards assessed each option against service, workforce, financial and community outcomes.

17. What factors were considered when assessing the options?

The Boards of both Alexandra District Health and Eastern Health considered the feedback from the staff, patient, stakeholder and community engagement process, financial and service analysis and the long-term needs of both communities. The core factors included:

- Increasing access to services and care closer to home
- Improving integration of services for better experiences
- Addressing inequity
- Improving the sustainability of the workforce
- Improving the quality and safety of care
- Making best use of the systems resources
- Improving access to research and related activity; and
- Protecting local identity, including local fundraising and community engagement mechanisms

The Boards of both services shared a public summary of staff, community and stakeholder feedback, which highlighted the key themes that emerged from the engagement and informed the business case. The summary can be found on connectingcare.net or via this [link](#).

18. Is the business case a public document?

While the formal business case contains commercial-in-confidence information and can't be released publicly, we have released a public version as we know there is a high level of interest in our community. It is available at www.connectingcare.net.

Following the community engagement period, a summary of staff, community and stakeholder feedback was made publicly available. This document highlighted the key themes that emerged from the engagement. The summary can be found on www.connectingcare.net or via this [link](#).

19. Did the Boards of Alexandra District Health and Eastern Health consider feedback from staff, stakeholders and the community before recommending a voluntary amalgamation?

Yes. The feedback from the engagement process informed the business case and highlighted strong support for sustainable local healthcare, alongside clear expectations about protecting Alexandra District Health’s local identity, maintaining services and ensuring local voices continue to be heard.

The Boards shared a public summary of staff, community and stakeholder feedback, which highlighted the key themes that emerged from the engagement. The summary can be found on www.connectingcare.net or via this [link](#).

20. How will services remain responsive to local needs?

If the Minister were to approve a voluntary amalgamation, both health services would continue to provide care to their local communities and community feedback, and engagement structures will continue to inform service planning. The goal would be to strengthen and expand what is already available.

21. What potential service enhancements could benefit the Alexandra and district community from a voluntary amalgamation between Alexandra District Health and Eastern Health?

A voluntary amalgamation would bring Alexandra District Health and Eastern Health together by choice, as equal partners, to strengthen and build on what already works well. Alexandra District Health would continue to operate with its own name, staff and fundraising, with every dollar raised locally staying local. Core services such as urgent care, inpatient care and community health would remain in place.

What would change is the scope and reliability of services delivered locally. The business case identifies opportunities including:

- **Expanded local access to specialist care**, with new and increased specialist clinics delivered at Alexandra District Health, including general medicine, geriatrics and paediatrics – reducing the need for patients to travel long distances for routine specialist review.
- **Increased low-complexity surgery services** to better utilise existing beds and theatre capacity to safely deliver more care locally.
- **A three-chair dialysis service at Alexandra District Health**, operating as part of Eastern Health’s renal hub-and-satellite model.

- **Improved access to imaging (X-ray) and diagnostic services**, addressing current service gaps that limit the ability to deliver and coordinate care locally.
- **Stronger workforce sustainability**, supported by expanded training and career pathways across rural and metropolitan settings, including access to Eastern Health training programs, commencement of an allied health graduate program from 2027, extension of learning management and scholarship programs, and opportunities for postgraduate education and specialist supervision.

Together, these enhancements are intended to strengthen local services, support staff, and ensure high-quality care continues to be delivered close to home for the Alexandra and district community, while protecting local identity, leadership and community involvement.

22. How would governance arrangements ensure appropriate local representation if the voluntary amalgamation proceeds?

If approved by the Minister, Alexandra District Health and Eastern Health would form a single health service under one Board appointed by the Minister for Health, which would include a current Alexandra District Health Board member possessing the requisite skills.

The amalgamated health service would have one CEO who is supported by local leadership at Alexandra District Health.

Locally raised funds and donations would continue to be used to support local services, and the Alexandra District Health Community Engagement Committee would advise the amalgamated Board.

23. How would Alexandra District Health’s rural identity be respected and reflected in a voluntary amalgamation with Eastern Health?

A strong local identity is central to Alexandra District Health and protecting this is a core principle of the recommendation. This includes ensuring local voices continue to shape decisions, celebrating the role of our staff and volunteers, recognising the importance of community fundraising and traditions, maintaining community engagement structures and ensuring all locally raised funds remain local.

The new amalgamated entity would be called Eastern Health, but Alexandra District Health would keep its name. At a time to be determined by the Board of the amalgamated health service, Alexandra District Health would formally be referred to as a campus of Eastern Health, retaining its name: **Eastern Health – Alexandra District Health**.

Local leadership would remain in place, locally raised funds and donations would continue to be used to support local services, and the Alexandra District Health Community Engagement Committee would advise the amalgamated Board.

24. How was feedback from the exploration of a voluntary amalgamation reported back to staff, stakeholders and the community?

The Boards of both services considered the feedback provided by staff, patients and the community and it informed the business case. A summary of staff, community and stakeholder feedback was made publicly available, which highlighted the key themes that emerged from the engagement.

The feedback informed the business case and highlighted strong support for sustainable local healthcare, alongside clear expectations about protecting Alexandra District Health's local identity, maintaining services and ensuring local voices continue to be heard.

The key themes that emerged from the engagement can be found on www.connectingcare.net or via this [link](#).

25. Were the Murrindindi Shire Council survey results taken into consideration by the Boards of Alexandra District Health and Eastern Health?

Yes. Feedback from the Murrindindi Shire Council engagement activities, along with other community input, was considered as part of the broader engagement and informed the business case and the Board's formal recommendation to voluntarily amalgamate.

26. Whose idea was the voluntary amalgamation?

The decision to explore a voluntary amalgamation was initiated by the Alexandra District Health Board as part of its ongoing consideration of how best to strengthen local healthcare and ensure long-term sustainability for the community. Recently, both health services have successfully partnered on a range of initiatives, including local oncology and infusion services and shared training programs, which have already delivered real benefits for patients and staff.

The recent Longwood fire highlighted the value of the existing partnership between the health services, with Eastern Health providing support to Alexandra District Health during a period of heightened demand across the district.

Building on that foundation, the Boards jointly agreed to explore whether a formal voluntary amalgamation could deliver even greater community benefits. This process is entirely Board-led and voluntary and will only proceed if the Minister for Health approves the recommendation of both Boards to proceed with a voluntary amalgamation.

27. What are the changing health needs of the community?

The business case highlights that the Alexandra District Health catchment has an ageing population, higher prevalence of chronic disease and mental ill-health, limited access to primary care, and increasing demand for coordinated, community-based care. These trends require more integrated and sustainable models of care.

28. If a voluntary amalgamation is approved, when could the new entity be operational?

The proposal is now in the next stage of the process, and there is no set timing for the potential commencement of a new entity. If the proposal is approved by the Minister for Health, any transition would be staged and carefully managed to ensure continuity of care, workforce stability and patient safety. No changes would occur unless approval is granted, and services would continue to operate as usual during any transition period.

29. When will a decision be made?

The timing of any decision is a matter for the Minister for Health following consideration of the business case and advice from the Department of Health.

30. What happens now?

The Boards of Alexandra District Health and Eastern Health have formally recommended a voluntary amalgamation to strengthen access to care closer to home for the Alexandra and district community.

The recommendation has been provided to the Secretary of the Victorian Department of Health and the Minister for Health for consideration and approval, in line with the *Health Services Act 1988*.

No changes will occur unless the Minister for Health approves the proposal. In the meantime, it is business as usual. Alexandra District Health and Eastern Health's focus remains on delivering safe, high-quality care for their communities and continuing to work together through their existing

partnership.

31. What happens if the Minister does not approve the recommendation?

If the Minister does not approve the recommendation, Alexandra District Health and Eastern Health will continue to work together through their existing partnerships within the Local Health Service Network.

32. How does this recommendation relate to the East Metro and Murrindindi Local Health Service Network and with other services in the network?

The recommendation builds on the existing East Metro and Murrindindi Local Health Service Network. Alexandra District Health and Eastern Health are already partners within this network, and a voluntary amalgamation would provide a more formal and accountable structure to support long-term planning and delivery.

We will continue to have a strong, ongoing partnership with St Vincent's, Yea and District Memorial Hospital and Darlingford Upper Goulburn Nursing Home, including through our Network.

33. Can I still provide feedback?

The Boards have reached their recommendation and moved into the approval phase. Community members can continue to share feedback through existing Alexandra District Health and Eastern Health channels. More information on providing feedback can be found on www.connectingcare.net.

34. Where can I find updates?

The Boards of both Alexandra District Health and Eastern Health are providing updates on this process via both services' dedicated communications channels and on www.connectingcare.net.