

# QEC and Tweddle voluntary merger exploration

## What partners and referrers said

The boards of Queen Elizabeth Centre (QEC) and Tweddle Child and Family Health Service (Tweddle) have been exploring a potential merger. Both organisations wanted to know if merging could strengthen care for babies, children and families in the early years.

As part of the merger exploration, partners and referrers were asked to share their views. This document summarises what they said. Summaries of what staff, families and community members said are also available on the QEC and Tweddle websites.

### Who participated

From 24 February to 31 March 2026, QEC and Tweddle consulted with 378 people about a possible merger. This included employees, families, community members, partners, referrers, government representatives and peak bodies. Feedback was gathered through surveys, focus groups, interviews, team discussions and roundtable sessions.

**35**

Partners and referrers participated across 17 activities including interviews and roundtable discussions

**60**

Partner and referrer representatives completed the community survey

### Organisations represented

Maternal and child health representatives	Aboriginal organisations	Community health organisations
Early parenting centres (EPCs)	Disability advocacy organisations	Research institutions
Peak bodies	Family services organisations	Government

## What we heard across all groups

Across all groups, there was broad and consistent support for the merger. Many participants expressed genuine optimism about what a merged organisation could achieve. They were also clear on what must be protected through the process and what would need to be carefully managed if a merger proceeds. Themes were consistent across QEC and Tweddle participants.

What we heard	What it means for the merger
Broad support across all groups	Employees, families, partners, government and sector peers see the merger as an opportunity
Better access for families	A merged organisation can improve how families find, access and navigate support
Build on what works	Families, employees and partners want to protect quality of care, trusted relationships and local community connection
Sector leadership opportunity	A merged organisation is well placed to provide consistent clinical guidance and support to the growing EPC network
A stronger workforce	Greater scale creates broader career pathways, shared professional development and stronger communities of practice

## Strong support among partners and referrers

Partners and referrers were broadly supportive of the merger. Partners and referrers often focused on the broader system benefits of a merger, including improved access, stronger system coordination and greater sector influence.

A consistent theme across partner and referrer sessions was that the merger presents an opportunity for growth and expanded impact. They expected a merged organisation to do more, reach more families and offer more.

A small group of partners questioned whether a deeper partnership model could achieve similar benefits without the complexity and risk of a full merger.

"There has been a lot of talk about it internally. People generally saw it as an opportunity to think about a consistent joined-up service."

**Partner and referrer**

"I feel like these two organisations probably do align really, really well in terms of what they stand for but also the way they do work."

**Partner and referrer**

## Easier access and navigation for families

Improving how families find and access early parenting support was the most consistent theme across all partner and referrer sessions. Partners and referrers described the current system as fragmented and difficult to navigate. They said families and referrers navigate two separate organisations with different intake processes, catchment areas and information about service availability. The absence of a clear and consistent referral entry point was considered a longstanding barrier for the sector.

Partners and referrers described longer wait times, greater travel distances and fewer service options for families in Melbourne's west, regional Victoria and in communities with greater vulnerability. Regional families and referrers noted that limited placements mean families who need urgent support are sometimes referred to Melbourne, which is not always viable.

“From a service provision point of view, for our people who are referring to these services, I think it’s a no-brainer – it just makes it less fragmented and will be a far easier environment for those things to be facilitated.

**Partner and referrer**

Partners and referrers noted that many families do not become aware of QEC or Tweddle until they are already at crisis point, often through word of mouth or informal referral pathways. The current names of both organisations do not signal what services are available, limiting how families and community members understand what support is on offer.

Discharge communication back to referrers was also named as a gap. Maternal and child health (MCH) nurses and child protection workers noted that EPCs do not routinely communicate outcomes back to referring workers, leaving families with a disconnected service experience.

“No communication – we don’t get the outcomes of their stay at an early parenting centre. That really needs strengthening.”

**Partner and referrer**

## A stronger leadership role for the EPC sector

Seventy per cent of community survey respondents rated sector leadership and influence as very important. However, partners and referrers were the most vocal about sector leadership as a strategic opportunity. This came through most strongly in qualitative sessions with people who work alongside QEC and Tweddle and see the broader early parenting system from the outside.

Victoria's early parenting sector has grown significantly in recent years, with new EPCs now operating across the state. Partners and referrers noted there was currently no organisation well placed to provide consistent clinical guidance, practice standards and workforce support across that network. A merged QEC and Tweddle could fill that role in a way neither organisation can alone.

Partners were clear that leadership should not mean centralising expertise. Instead, a merged organisation should support other EPCs, share knowledge and co-design guidance and practice standards with the sector.

**70%** Rated sector leadership and influence as very important

"It's a really strong opportunity to be the quality and safety stewards of the sector. What we've seen in them working in a partnership model has supported the whole sector to develop consistent guidelines, consistent practice standards."

**Partner and referrer**

## **A stronger evidence base for early parenting services**

Strengthening research, training and education was rated very important by 79% of community survey respondents.

Research partners and peak bodies named EPC research as fragmented and under-resourced. Neither organisation has the scale to build a sustained evidence base for the sector. A merged organisation could attract multi-site research partnerships, generate better quality data and build the first evidence base for EPC practice in Australia.

Research partnerships already exist between both organisations and research institutions. A merged organisation would be better placed to sustain and grow those partnerships and to lead a coordinated research agenda across the EPC sector.

**79%** Rated strengthening research, training and education as very important

"Research in EPCs has been really fragmented and opportunistic. There's a real opportunity to develop a research program across the EPC sector."

**Partner and referrer**

## **Cultural safety must remain a priority**

Aboriginal organisations were clear that a merger does not resolve the fundamental challenge of making mainstream EPC services safe and accessible for Aboriginal families. That challenge exists regardless of organisational structure.

What a merged organisation could do is be a strong ally, supporting Aboriginal community-controlled organisations to build their own capacity and advocating alongside them for Aboriginal-led EPC services.

Aboriginal organisations were also specific about practical changes that could improve cultural safety now, regardless of whether a merger proceeds. This included:

- trauma-informed intake processes accessible to families with low literacy or limited phone access
- culturally appropriate physical environments
- discharge planning that actively connects families to culturally specific services
- Aboriginal employees embedded in day-to-day service delivery.

"It's a great opportunity for them to work in true partnership with us so we can develop our own EPC."

**Partner and referrer - ACCO**

## **Risks and concerns to manage carefully**

While support for the merger was strong, partners and referrers named specific things that will need to be managed carefully if a merger proceeds.

Partners and referrers were clear that the merged organisation must actively embed its expertise across the sector rather than centralise it.

Families, partners and employees all raised the risk that the administrative and operational demands of integration could absorb organisational attention at the expense of service quality and continuity.

Partners and referrers named the importance of both organisations remaining genuinely connected to local communities as the organisation grows. Bigger and more viable should not mean more distant from the communities being served.

"Rural, regional, remote communities miss out all the time and sometimes you can just get stuck in providing your service in metro areas. If this intent is to be a merger to bring the strength of the two organisations together to be a service for the whole of the state, then you need to be fair dinkum about how you do that."

**Partner and referrer**

## **How this feedback will be used**

Partners and referrers generously gave their time and expertise to this process. All responses were anonymous and confidential.

Their contribution helped both boards consider the benefits, opportunities and concerns associated with a merger. It was considered alongside financial, legal and operational advice and due diligence.

The consultation findings have also been provided to the Minister for Health, who has final approval on whether a merger proceeds.

If a merger is approved, the consultation findings will help inform how it is planned and delivered.