

**SOUTH EASTERN SYDNEY LOCAL HEALTH DISTRICT
Homelessness Action Plan Implementation Working Party
Homelessness Implementation Plan 2012 – June 2016
PUBLIC**

PURPOSE OF THE HOMELESSNESS IMPLEMENTATION PLAN

Current from July 2012 to June 2016, the Homelessness Implementation Plan is drawn from the SESLHD Homelessness Health Program priorities and the Homelessness Action Plan Implementation Working Party Terms of Reference. It guides the activities of the Working Party, and is available to inform SESLHD planning processes. Along with the Terms of Reference, the Plan forms the basis for the evaluation of Working Party outcomes.

ROLE OF THE HOMELESSNESS ACTION PLAN IMPLEMENTATION WORKING PARTY

The Homelessness Action Plan Implementation Working Party facilitates a formal point of leadership, coordination and support for initiatives aiming to improve Homelessness Health outcomes and contribute to the reduction of homelessness within SESLHD. The Working Party responds to SESLHD responsibilities under the NSW Government Homelessness Action Plan 2009-2014, the Coastal Sydney Regional Homelessness Action Plan (see Appendix 1), and other homelessness related NSW Government, NSW Health and SESLHD commitments, initiatives and other intersectoral activities.

BACKGROUND

The NSW Homelessness Action Plan sets the direction for state-wide reform of the homelessness service sector to improve outcomes for people subject to homelessness. The NSW Government seeks to realign existing effort, increasing the service system focus on prevention and long-term accommodation and support, rather than crisis intervention. Related to the strategic directions, the vision and goals are identified as follows:

- People never become homeless (prevention)
- People who are homeless don't become entrenched in the system (responding effectively, early intervention)
- People who have been homeless don't become homeless again (breaking the cycle, long term support and accommodation)

The Coastal Sydney Regional Homelessness Action Plan includes SESLHD, and is the key mechanism for the local implementation of the broad directions and intent of the NSW Homelessness Action Plan. Supported by some funded projects, SESLHD contributes to the implementation of this Plan, which identifies key target groups and priority areas for action.

With a vision of improving homelessness health outcomes and contributing to the reduction of homelessness, the goal of the SESLHD Homelessness Health Program is to strengthen the capacity of health services to offer an effective and efficient response to homelessness. Activities are drawn from the following identified priority areas for action:

1. Improved access to health services
2. Supported partnership and intersectoral initiatives within health and the homelessness sector
3. Supported 'no exits to homelessness' approach to health service delivery
4. Improved access to and utilisation of homelessness data and evidence based responses to homelessness
5. Effective management of the Homelessness Health Program and its resources

THE SOUTH EASTERN SYDNEY LOCAL HEALTH DISTRICT HOMELESSNESS IMPLEMENTATION PLAN 2012-2016

Vision: Improve homelessness health outcomes, and contribute to the reduction of homelessness

Goal: Strengthen the capacity of health services to offer an effective and efficient homelessness response.

Priority Areas for Action:

- 1) Improved Access to Health Services,
- 2) Supported Partnership and Intersectoral Initiatives within Health and the Homelessness Sector,
- 3) Supported 'no exits to homelessness' Approach to Health Service Delivery
- 4) Improved Access to and Utilisation of Homelessness Data and Evidence Based Responses to Homelessness

The SESLHD Homelessness Action Plan Implementation Working Party will determine the implementation time frames for the objectives and strategies.

Objectives	Strategies
Priority Area for Action 1. Improved Access to Health Services	
a Improved access to health services	<ul style="list-style-type: none"> • Identify opportunities to develop and provide effective, flexible tailored models of health service delivery (e.g. supported in-reach and outreach approaches for rough sleepers and Specialist Homelessness Service clients) • Identify barriers (e.g. systemic issues and gaps) to access to health services, implement identified strategies and evaluate their outcomes
b Improved coordinated health service delivery	<ul style="list-style-type: none"> • Establish and develop formal clinical processes to facilitate communication and care planning between SESLHD services (e.g. community based services, Mental Health, Drug and Alcohol, Emergency Departments, Acute care services) • Establish and develop formal clinical processes to facilitate communication and care planning between SESLHD and external health services (e.g. GP Practices, Specialist Homelessness Service based clinics, St Vincent's Hospital, Justice Health)
Priority Area for Action 2. Supported Partnership and Intersectoral Initiatives within Health and the Homelessness Sector	
a Participation of SESLHD on key homelessness related forums	<ul style="list-style-type: none"> • Participate in relevant homelessness related forums (e.g. SESLHD HAPIWP, Coastal Sydney Regional Homelessness Committee)
b Strengthened internal and external partnerships	<ul style="list-style-type: none"> • Develop and implement strategies that facilitate collaboration within and between SESLHD and external services (e.g. client assessment, care planning, co-case management mechanisms; shared in-service programs) • Collaboration with new health structures (e.g. Medicare Locals, the Mental Health Commission, Health Education & Training Institute [HETI], Bureau of Health Information [BHI], Agency for Clinical Innovation [ACI], and Clinical Excellence Commission [CEC]).

THE SOUTH EASTERN SYDNEY LOCAL HEALTH DISTRICT HOMELESSNESS IMPLEMENTATION PLAN 2012-2016

Objectives		Strategies
c	Provision of effective health responses that are consistent with SESLHD homelessness related responsibilities	<ul style="list-style-type: none"> • Clarify SESLHD responsibilities in relation to identified initiatives and activities (e.g. under NSW Government, NSW Health and SESLHD commitments, initiatives and intersectoral activities) • Contribute to identified strategies and processes that support the SESLHD response to identified responsibilities and health commitments (e.g. NSW Government Protocol for Homeless People in Public Places, Framework for Multi-Agency Client Transition Planning, Homelessness Action Plan Projects, Going Home Staying Home Initiative) • Support health led National Partnership Agreement on Homelessness funded projects (e.g. SESLHD Inner City Youth at Risk Project, SVH Way2Home and Coordinated Exit Planning from Emergency Department Projects) • Contribute to other health related National Partnership Agreement on Homelessness funded projects led by other agencies • Identify barriers (e.g. systemic issues and gaps) to effective health responses, implement identified strategies and evaluate their outcomes
Priority Area for Action 3. Supported 'no exits to homelessness' Approach to Health Service Delivery		
a	Increased SESLHD participation in intersectoral care planning and service provision processes	<ul style="list-style-type: none"> • Seek to establish and develop formal clinical processes to facilitate participation in care planning and provision with intersectoral service providers (e.g. Justice Health, Housing NSW, Specialist Homelessness Services) • Participate in intersectoral care planning, service provision, care coordination and case management forums and processes (e.g. NSW Government Housing and Mental Health Agreement, Joint Care Planning) • Identify barriers (e.g. systemic issues and gaps) and strategies to participation in intersectoral care planning and service provision processes, implement identified strategies and evaluate their outcomes
b	Increased referral pathways options for people subject to homelessness	<ul style="list-style-type: none"> • Identify, develop and promote available referral pathways

THE SOUTH EASTERN SYDNEY LOCAL HEALTH DISTRICT HOMELESSNESS IMPLEMENTATION PLAN 2012-2016

Objectives	Strategies
Priority Area for Action 4. Improved Access to and Utilisation of Homelessness Data and Evidence Based Responses to Homelessness	
a Improved identification of people subject to homelessness accessing SESLHD	<ul style="list-style-type: none"> • Identify and document client homelessness status (e.g. on routine clinical assessment, registration processes) • Include homelessness as a client diagnosis (e.g. primary and secondary homelessness)
b Improve the access to reliable SESLHD Homelessness Health data	<ul style="list-style-type: none"> • Identify opportunities to improve access to reliable homelessness health data within Information Systems, including review of available fields and codes and local data processes such as consistent data entry practices (e.g. Complete PAS/iPM codes for 'Type of Usual Accommodation'; Adopt the two ICD-10 diagnostic codes for homelessness as standard codes used by PAS/iPM coders [Z59.0 and Z59.1]) • Advocate for the inclusion of Homelessness into Activity Based Funding processes (e.g. include as a diagnosis, such as a DRG criteria of 'social conditions') • Advocate for the inclusion of homelessness in new or updated Health Information Systems, and various NSW Health Population reports • Identify barriers (e.g. systemic issues and gaps) to the access to reliable SESLHD Homelessness Health data, implement identified strategies and evaluate outcomes
c Information is used to achieve strategic priorities	<ul style="list-style-type: none"> • Promote available Homelessness related data, projects and reports (including SHSs, SESLHD, SVH, Medicare Locals and related projects) • Undertake the 2013 Homelessness Health Data Project, promote findings, and consider report recommendations • Translate the homelessness evidence base into practice to improve health service delivery

PROCESS FOR REVIEW OF THE HOMELESSNESS IMPLEMENTATION PLAN

The Homelessness Implementation Plan will be updated at each Working Party Meeting. In early 2016 the achievements of the objectives will be discussed and reviewed, and a new Homelessness Implementation Plan developed.

**South Eastern Sydney Local Health District
Homelessness Action Plan Implementation Working Party Implementation Plan**

APPENDIX 1

**NSW HOMELESSNESS ACTION PLAN 2009-2014 RESPONSIBILITIES
MOST RELEVANT TO SESLHD**

YEAR 1 PROJECTS ^{1,2}	
Health Led	Lead Agency
Coordinated Exit Planning from Emergency Departments	St Vincent's Hospital
The Assertive Outreach Health Team	St Vincent's Hospital
Inner City Youth At Risk Project – Inner Sydney	SESLHD
Homelessness Intervention Project - Inner Sydney	Housing NSW
YEAR 2 PROJECTS ²	
Aboriginal Assertive Outreach Service	Housing NSW
Aboriginal Advocacy and Tenancy Support Service	Housing NSW
Inner City Integrated Services Project (Housing First)	Community Services/Housing NSW
Sydney Inner City Drift	Community Services
Boarding House Outreach Project	Community Services
STATEWIDE HEALTH LED ACTIVITIES ¹	
Strategic Direction 1: Preventing Homelessness	
Goal: People never become homeless	
Priority 2: Transition and maintain people exiting statutory care/correctional and health facilities into appropriate long term accommodation	
Strategies:	
<ul style="list-style-type: none"> • Develop discharge plans at the point of entry that support a policy of 'no exits to homelessness' • Train staff involved in discharge planning • Develop a protocol with Dept of Corrective Services to improve mental health services for people leaving custody – (Justice Health) 	
STATEWIDE HEALTH LED ACTIVITIES WITH HEALTH AS A PARTNER ¹	
Strategic Direction 1: Preventing Homelessness	
Goal: People never become homeless	
<ul style="list-style-type: none"> • Priority 1: Prevent eviction from all kinds of tenure • Priority 2: Transition and maintain people exiting statutory care/correctional and health facilities into appropriate long-term accommodation • Priority 3: Provide safe, appropriate long-term accommodation and/or support to people experiencing domestic and family violence, relationship and family breakdown and at key transition points 	
Strategic Direction 2: Responding Effectively to Homelessness	
Goal: People who are homeless don't become entrenched in the system	
<ul style="list-style-type: none"> • Priority 4: Improve identification of and responses to homelessness by mainstream and specialist support services • Priority 5: Deliver integrated service responses • Priority 7: Transition people who are homeless to appropriate long-term accommodation and support 	
Strategic Direction 3: Breaking the Cycle	
Goal: People who have been homeless do not become homeless again	
<ul style="list-style-type: none"> • Priority 8: Provide models of accommodation with support that are suitable for different target groups • Priority 10: Promote partnerships between all levels of government, business, consumers and the not-for-profit sector • Priority 11: Improve and better utilise homelessness data and evidence-based responses to homelessness 	
COASTAL SYDNEY KEY TARGET GROUPS²	
Aboriginal homeless, Chronically homeless and rough sleepers particularly in the inner city, People living in boarding houses, Single females and females with children who are homeless	
COASTAL SYDNEY PRIORITY AREAS FOR ACTION²	
Strengthen responses to Aboriginal homelessness, Long-term housing with support, Prevention and early intervention, Service integration and accessibility, Data and planning	

References

¹ NSW Government (2009). A Way Home: Reducing Homelessness in NSW. NSW Homelessness Action Plan 2009-2014.

² NSW Government (2010). Regional Homelessness Action Plan 2010-2014, Coastal Sydney.