



Government of **Western Australia**  
Department of **Health**  
Chief Allied Health Office

# Chief Allied Health Office homeless health action plan 2022–2025

### **Acknowledgement of Country and People**

Department of Health acknowledges the Aboriginal people of the many traditional lands and language groups of Western Australia. It acknowledges the wisdom of Aboriginal Elders both past and present and pays respect to Aboriginal communities of today.

### **Using the term Aboriginal**

Within Western Australia, the term Aboriginal is used in preference to Aboriginal and Torres Strait Islander, in recognition that Aboriginal people are the original inhabitants of Western Australia. Aboriginal and Torres Strait Islander may be referred to in the national context and Indigenous may be referred to in the international context. No disrespect is intended to our Torres Strait Islander colleagues and community.

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# Executive summary

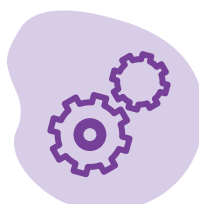
The *Chief Allied Health Office homeless health action plan 2022–2025* outlines the actions being undertaken by the Chief Allied Health Office (CAHO) with the aim to improve health care access, equity and quality for people experiencing homelessness.

The plan's key streams and actions were developed from a systematic process:

- analysis of WA Government strategies, reviews, and policies relevant to homelessness and health
- formation in 2020 of the interagency Department of Health Homelessness Advisory Committee to provide oversight
- option identification by the Home2Health research team led by Professor Lisa Wood
- in 2021, the identified options were weighted by key health stakeholder organisations
- options with the collective highest rank were recommended for early action by the Advisory Committee.



**Stream 1  
Equity**



**Stream 2  
Integration**



**Stream 3  
Engagement**



**Stream 4  
Information**



**Stream 5  
Workforce development**

**Table 1. Actions and outcomes for each stream**

<b>Stream 1 Equity</b>	<b>Stream 2 Integration</b>	<b>Stream 3 Engagement</b>	<b>Stream 4 Information</b>	<b>Stream 5 Workforce development</b>
<p>Support access to primary and preventative health care</p> <p>Reduce hospital discharges to homelessness</p> <p>Reduce non-attendance to outpatient clinics, day procedures and community health service</p>	<p>Access to targeted support for unmet needs</p> <p>Accessible and integrated primary care</p> <p>Align and coordinate services and funders to avoid duplication</p>	<p>Coordinate critical elements of homeless health responses</p> <p>Engage on housing and accommodation issues</p>	<p>Identify who is homeless in the WA health system</p> <p>Data, research and evaluation to show 'what works'</p>	<p>Build workforce capacity to better respond to homelessness</p>
<p><b>Outcomes from stream 1:</b></p> <ul style="list-style-type: none"> <li>• Early engagement</li> <li>• Reaching people who are sleeping rough</li> <li>• Reducing avoidable emergency department presentations and ambulance transports</li> </ul>	<p><b>Outcomes from stream 2:</b></p> <ul style="list-style-type: none"> <li>• Targeted services and better health support access</li> <li>• Service efficiency and increased access</li> </ul>	<p><b>Outcomes from stream 3:</b></p> <ul style="list-style-type: none"> <li>• Shared responsibilities and collaborative problem solving</li> <li>• WA Health policies meet the needs of stakeholders</li> </ul>	<p><b>Outcomes from stream 4:</b></p> <ul style="list-style-type: none"> <li>• Improved transitions between care settings</li> <li>• Better use of data to improve services</li> </ul>	<p><b>Outcomes from stream 5:</b></p> <ul style="list-style-type: none"> <li>• Person-centred, and culturally safe and responsive services</li> <li>• Improved identification and referral of people in need</li> <li>• Better health care experience for patients and staff</li> </ul>

# Introduction

The 2021 Australian Census estimated that more than 9,700 people experience homelessness in Western Australia (WA) on any given night. WA had the highest proportion of people living in improvised dwellings, tents, or rough sleeping (23.8 per cent).<sup>1</sup> The state continues to experience increases in people accessing specialist homelessness services with a 39 per cent increase in WA since 2017.<sup>2</sup>

People experiencing or at risk of homelessness have high levels of social and economic disadvantage and they are among the most marginalised people in society.<sup>3</sup> Health systems can support people experiencing homelessness by increasing access to quality health care services that meet individual needs in welcoming and safe environments. Rather than leaving the responsibility for accessing services solely with the individuals.

Given the high rate of homelessness for Aboriginal people in WA, CAHO acknowledge and emphasise the importance of embedding culturally appropriate and trauma-informed principles when implementing any of the actions from this plan. Culturally responsive practice is the responsibility of all health care professionals to ensure that clients feel safe.

Due to the varied and complex needs of individuals experiencing homelessness, a comprehensive health response across a variety of settings, underpinned by integration and collaboration, is crucial. There are several key elements for consideration when planning or delivering services to address homeless health needs. Services need to be:

- available in a broad range of settings and they should work collaboratively (e.g. street outreach, step up step down mental health services, specialist homeless teams in hospitals)
- provided by multidisciplinary teams to address and support the varying needs of people experiencing homelessness (e.g. general practitioners, nurses, various allied health professionals including social workers)
- based on research and evidence to ensure that the needs of the people they are supporting are being met
- based on Housing First principles, including permanent, suitable and safe housing, which are fundamental to achieving improved health outcomes.<sup>4</sup>

The key types of health services that constitute emerging best practice for health-led approaches in response to homelessness are shown in Figure 1.

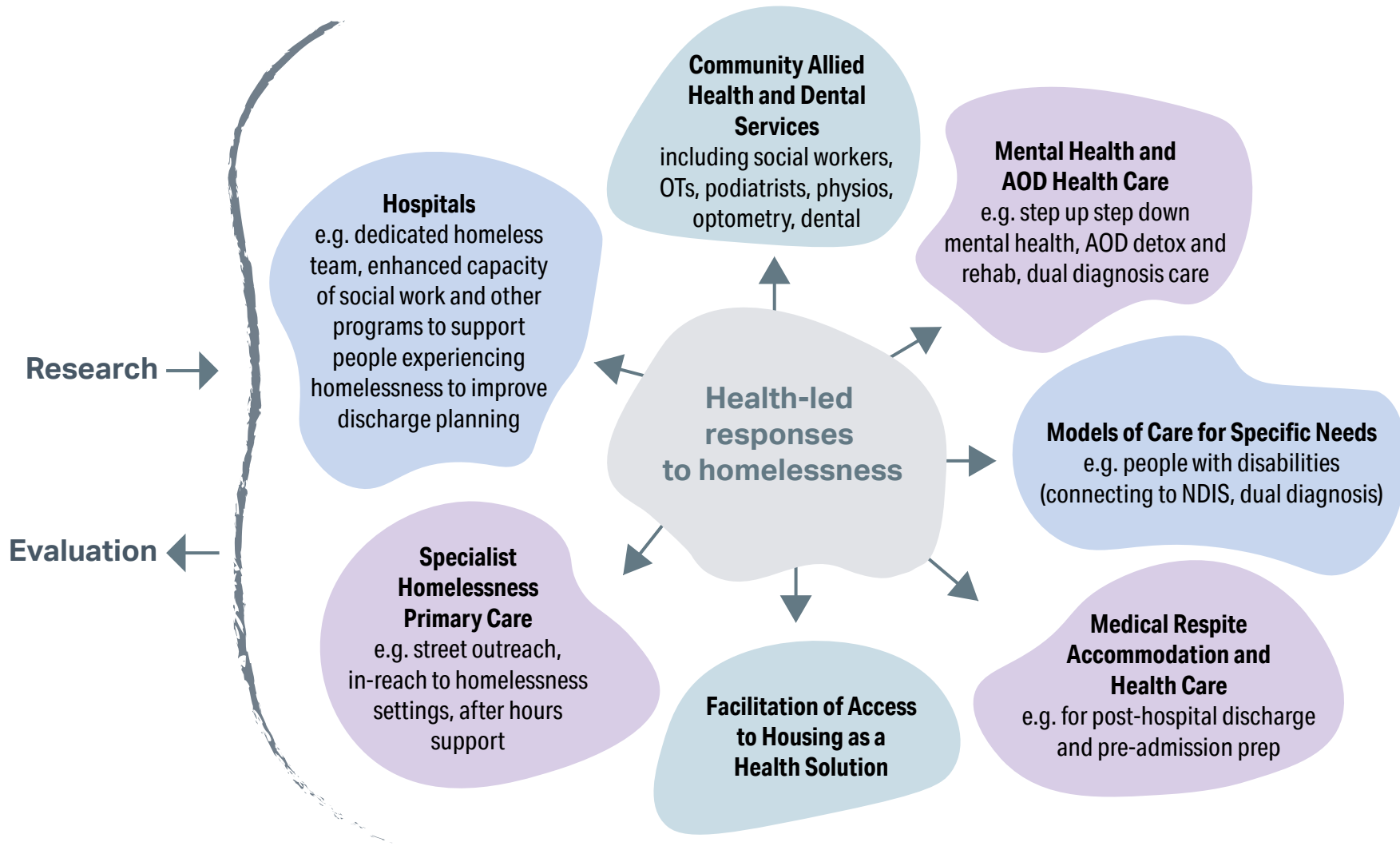
1 Australian Bureau of Statistics. (2021). Estimating Homelessness: Census. ABS. <https://www.abs.gov.au/statistics/people/housing/estimating-homelessness-census/2021>

2 Flatau P, Lester L, Kyron M, Lai C, Li M. (2022). Ending Homelessness in Western Australian 2022, Perth: The University of Western Australia. <https://doi.org/10.25916/ns0d-0q24>

3 [Homelessness and homelessness services - Australian Institute of Health and Welfare \(aihw.gov.au\)](https://www.aihw.gov.au)

4 Adapted from Wood L, Sutherland G, Quinn D, Vallesi S. (2021). Unwell without a home: preventing the revolving door of homelessness and health issues. Report to Department of Health: Homelessness Options Paper. Perth, University of Western Australia.

**Figure 1: Services and emerging best practice approaches to improve the health of people experiencing homelessness<sup>5</sup>**



<sup>5</sup> Adapted from Wood L, Sutherland G, Quinn D, Vallesi S. (2021). Unwell without a home: preventing the revolving door of homelessness and health issues. Report to Department of Health: Homelessness Options Paper. Perth, University of Western Australia.

The *CAHO homeless health action plan 2022–2025* outlines the actions being taken by the Chief Allied Health Office (CAHO), Department of Health, to improve health care access, equity and quality for people experiencing homelessness in WA.

The *CAHO homeless health action plan 2022–2025* informs WA Health policy development. Stakeholders include the individuals and organisations who support implementation of the actions, and those who will benefit from the actions:

- people currently experiencing homelessness, at risk of homelessness, or formerly homeless, with a focus on people who are sleeping rough
- organisations providing health care to people experiencing homelessness and those who advocate on their behalf
- policy developers and those involved in policy implementation relevant to people experiencing or at risk of homelessness.

Since 2020, CAHO has been managing the homeless health portfolio for the Department of Health. Key focus areas include:

- evidence-based health care
- improved access to primary and secondary health care
- data management
- collection of outcomes
- effective investment of funds applicable to all areas of WA
- stakeholder engagement and collaborative partnerships.

The *CAHO homeless health action plan 2022–2025* describes a coordinated strategic response to homeless health across funding, service delivery and policy by identifying clear outcomes, indicators, and data collections to track actions, priorities and initiatives. As well as strengthening existing access to services, this first action plan will provide further information to inform policy development in this area.

### Focus on 5 streams

- Stream 1 – Equity: Promote equity of health care access, service delivery and homeless health programs managed by CAHO with a focus on rough sleeping.
- Stream 2 – Integration: Promote access to integrated models of homeless health services in areas of WA where there is unmet need.
- Stream 3 – Engagement: Support collaborative interagency partnerships and stakeholder engagement.
- Stream 4 – Information: Improve data and information management within the WA health system and support the meaningful use of data to improve services.
- Stream 5 – Workforce development: Staff development and building workforce capacity to identify and respond to homelessness.

**Navigating this document:** This document outlines the strategic context (Figure 2) for homeless health, the process for scoping options, and identified options (Figure 3). Table 1 lists actions and outcomes, Table 2 lists outputs, and Tables 3–5 sort actions by timelines. Figure 4 outlines how the *CAHO homeless health action plan 2022–2025* will help to connect people experiencing homelessness with timely, safe and appropriate health care services.

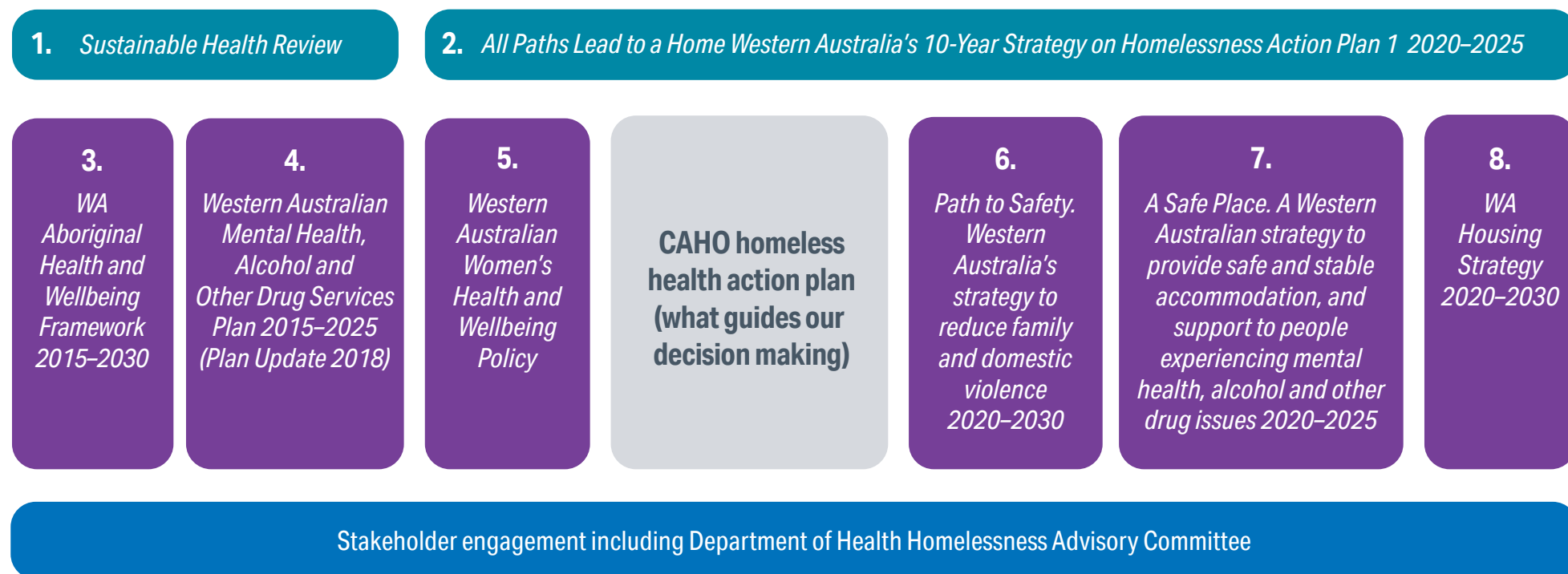


# Strategic context

WA Government strategies, reviews, and policies relevant to homelessness and health underpin the *CAHO homeless health action plan 2022–2025* (Figure 2). As outlined below, the action plan is intended to support the priorities of the *Sustainable Health Review Final Report* (SHR), and *All Paths Lead to a Home Western Australia's 10-Year Strategy on Homelessness (2020–2030)*, and other WA Government strategy documents with a focus on people who are rough sleeping.

The SHR delivery is a committed project of reform focusing on prevention, delivering equity in health outcomes and bringing care closer to home. Aligning to state strategic priorities and legislation ensures a coordinated response relevant to the needs of Western Australians. CAHO will advocate for the health needs of people experiencing homelessness through activities linked with the *CAHO homeless health action plan 2022–2025*.

**Figure 2. Strategic context informing *CAHO homeless health action plan 2022-2025***



## Developing the *CAHO homeless health action plan 2022-2025*

Key documents informing the development of the *CAHO homeless health action plan 2022-2025* include:

### 1. ***Sustainable Health Review***

Government of Western Australia, Department of Health

The Final Report was released in April 2019 providing 8 Enduring Strategies and 30 Recommendations for action by the State Government. The CAHO Homeless Health Action Plan especially supports SHR Strategy 4: Person-centred, equitable, seamless access; and Recommendation 13: Implement models of care in the community for groups of people with complex conditions who are frequent presenters to hospital.

### 2. ***All Paths Lead to a Home Western Australia's 10-Year Strategy on Homelessness Action Plan 1 2020-2025***

Government of Western Australia, Department of Communities

The WA 10-Year Strategy on Homelessness launched in 2019 had an accompanying Action Plan 1 2020-2025 released in 2020. The action plan provides a framework for the WA Government to work with the community services sector and the wider community to prevent and respond to homelessness over 5 years. The *CAHO homeless health action plan 2022-2025* supports the following WA 10-Year Strategy on Homelessness Action Plan priorities: Building a No Wrong Door system (including visibility of services, secure data sharing), Low-barrier responses (including culturally safe environments, and removing restrictive rules and barriers), Ending rough sleeping (including assertive outreach, and staff education to reduce exits into homelessness), and Innovation (including responsive and relevant services).

The strong relationship between homelessness and poor health means that health cannot be viewed in isolation – both the causal pathways and the barriers and enablers to improving health for this vulnerable population group lie vested in socially determined factors ranging from trauma, housing, social isolation, early life experiences and addiction. The *CAHO homeless health action plan 2022-2025* has been informed by the following frameworks, plans and policies to support the needs of particularly vulnerable groups of people experiencing homelessness:

### 3. ***WA Aboriginal Health and Wellbeing Framework 2015-2030***

Government of Western Australia, Department of Health

An evaluation undertaken in 2020 facilitated a formal assessment of the impacts and merits of the framework over its first 5 years of implementation. The *CAHO homeless health action plan 2022-2025* aligns to the 11 priorities that emerged from the evaluation process, with a focus on the strategic directions of prevention and early intervention, a culturally respectful and non-discriminatory health system, and equitable and timely access to the best quality and safe care.

### 4. ***Western Australian Mental Health, Alcohol and Other Drug Services Plan 2015-2025 (Plan Update 2018)***

Government of Western Australia, Mental Health Commission

The plan was released in December 2015 and outlines the optimal mix and level of mental health and alcohol and other drugs (AOD) services required to meet the needs of Western Australians until the end of 2025. The 2018 update outlines key achievements and challenges since the plan was released. The *CAHO homeless health action plan 2022-2025* has been informed by the plan update and aligns to the areas of reform agenda, governance, accountability and reporting, and optimal service mix.

**5. Western Australian Women's Health and Wellbeing Policy**

Government of Western Australia, Department of Health

The policy provides a strategic, coordinated and gender-responsive approach by the WA health system and its partners. The *CAHO homeless health action plan 2022–2025* aligns to the actions within Priority area B: Health and wellbeing impacts of gender-based violence, and Priority area D: Mental health and wellbeing.

**6. Path to Safety. Western Australia's strategy to reduce family and domestic violence 2020–2030**

Government of Western Australia, Department of Communities

Launched in 2020, the Path to Safety sets out a clear whole-of-government and community plan for reducing and responding to the issue of family and domestic violence over the next decade. The *CAHO homeless health action plan 2022–2025* is informed by the priority actions set out in this strategy.

**7. A Safe Place. A Western Australian strategy to provide safe and stable accommodation, and support to people experiencing mental health, alcohol and other drug issues 2020–2025**

Government of Western Australia, Mental Health Commission

The strategy provides an overarching framework to guide stakeholders in the development of appropriate accommodation and support for people with mental health and AOD issues. The *CAHO homeless health action plan 2022–2025* aligns to the strategy key focus areas of strategic, collaborative partnerships, contemporary housing and support models, and standardised data and relevant research.

**8. WA Housing Strategy 2020–2030**

Government of Western Australia, Department of Communities

The WA Housing Strategy 2020-2030 is a call to action for all sectors to work together to improve housing choices and access to suitable and affordable homes – particularly for the most vulnerable. The *CAHO homeless health action plan 2022–2025* aligns to the strategies of build capacity, capability and collaboration across our sectors, support equity and accessibility to create an inclusive WA, and connect people to housing information.

## Department of Health Homelessness Advisory Committee

The Department of Health Homelessness Advisory Committee was established in 2020 to oversee and develop the coordinated response to people experiencing homelessness. This interagency collaboration included representatives from the Department of Health, Department of Communities, Mental Health Commission, health service providers including WA Country Health Service, and Home2Health.

## Scoping options to meet homeless health needs

In 2020, with oversight from the advisory committee, CAHO engaged the Home2Health research team led by Professor Lisa Wood to assist in identifying options for effective investment of resources to support achievement of the WA 10-Year Strategy on Homelessness, SHR and other key State Government priorities.

The Home2Health research team conducted a literature review and desktop scan of services, analysis of quantitative data from hospitals, and qualitative interviews with service providers in the health sector and people with a lived experience. Figure 3 shows the options grouped thematically into 9 areas.

## Translating options into an action plan

In 2021, options were ranked by key health stakeholders including organisations represented on the advisory committee. Options were weighted according to the level of priority (high, medium, low) and the timeframe (short-term, medium-term, long-term). Options with the collective highest rank were recommended for early action by the advisory committee.

Based on the ranked options, key streams for action and timeframes for achievement of the actions were developed (Tables 3, 4 and 5). Table 2 outlines the intended outputs for the action plan. The *CAHO homeless health action plan 2022–2025* informs the homeless health sector and the public of the actions being undertaken to support people experiencing homelessness who require health care.

Figure 3. Overview of options for WA health system<sup>6</sup>



<sup>6</sup> Adapted from Wood L, Sutherland G, Quinn D, Vallesi S. (2021). Unwell without a home: preventing the revolving door of homelessness and health issues. Report to Department of Health: Homelessness Options Paper. Perth, University of Western Australia.

**Table 2. Intended outputs for the action plan**

Stream 1 – Equity	Stream 2 – Integration	Stream 3 – Engagement	Stream 4 – Information	Stream 5 – Workforce development
<p><b>Outputs from stream 1:</b></p> <ul style="list-style-type: none"> <li>• Coordinated coverage of Perth metropolitan areas</li> <li>• Effective investment of resources</li> <li>• Coordinated contract management</li> </ul>	<p><b>Outputs from stream 2:</b></p> <ul style="list-style-type: none"> <li>• Models of integrated health care tailored to WA needs</li> <li>• Evidence for integrated models circulated to the homelessness sector</li> </ul>	<p><b>Outputs from stream 3:</b></p> <ul style="list-style-type: none"> <li>• Access to feedback from people with lived experience</li> <li>• Collaborative decision making across housing and health sectors</li> </ul>	<p><b>Outputs from stream 4:</b></p> <ul style="list-style-type: none"> <li>• Enhanced data collection system</li> <li>• Better identification and response to vulnerable groups needing health supports</li> </ul>	<p><b>Outputs from stream 5:</b></p> <ul style="list-style-type: none"> <li>• Access to health workforce training modules</li> <li>• Access to information on available services</li> <li>• Linked and collaborative referral arrangements</li> </ul>

**Table 3. Focus on delivery and access 2022–2023**

Stream 1 – Equity	Stream 2 – Integration	Stream 3 – Engagement	Stream 4 – Information	Stream 5 – Workforce development
<p><b>Supporting access to primary and preventative health care:</b></p> <p>Contract management to:</p> <ul style="list-style-type: none"> <li>• 360 Street Doctor</li> <li>• Black Swan Health – Street Doctor</li> <li>• Homeless Healthcare mobile clinics to drop-in centres and Street Health case workers</li> </ul> <p><b>Reducing hospital discharges back to homelessness:</b></p> <p>Evaluation of the Homeless Discharge Facilitation Fund trial to inform future</p>	<p><b>Access to targeted support for unmet needs and Accessible and integrated primary care:</b></p> <p>Commonwealth Health Innovation Fund (HIF) grant – Comprehensive health care for people experiencing homelessness project to trial a primary health care 'one-stop shop'</p> <ul style="list-style-type: none"> <li>• Phase 1 HIF Project – research an integrated service delivery model including wide and diverse stakeholder consultation</li> <li>• Phase 2 HIF Project – trialling an integrated service model</li> </ul>	<p><b>Engaging on housing and accommodation issues:</b></p> <ul style="list-style-type: none"> <li>• Liaise with Department of Communities and Mental Health Commission regarding accommodation to enable opportunities for health care, such as when visiting Perth for medical reasons</li> <li>• Obtain Department of Communities advice regarding the All Paths Lead to a Home – WA's 10 year Homelessness Strategy, consistent with a Housing First and No Wrong Door approach</li> </ul> <p><b>Coordinating critical elements of homeless health responses and Alignment and coordination of services and funders to avoid duplication:</b></p> <p>Department of Health representation on relevant working groups and forums</p>	<p><b>Identifying who is homeless in the WA health system:</b></p> <p>Clarify the definition of homelessness being used across WA Health</p> <p><b>Data, research and evaluation to show 'what works':</b></p> <ul style="list-style-type: none"> <li>• Review the trends in hospital use by homeless patients in WA every two years</li> <li>• Engage in formal evaluation of pilot programs, Department of Health funded programs, and ongoing research to support decision making</li> </ul>	<p><b>Build workforce capacity to better respond to homelessness:</b></p> <ul style="list-style-type: none"> <li>• Scope existing workforce training modules and training packages to determine current content around homelessness</li> <li>• Advocate for sharing of information relating to available services and digital information hubs</li> </ul>

**Table 4. Focus on data 2023–2024**

Stream 1 – Equity	Stream 2 – Integration	Stream 3 – Engagement	Stream 4 – Information	Stream 5 – Workforce development
<p><b>Reducing non-attendance to outpatient clinics, day procedures and community health services:</b></p> <ul style="list-style-type: none"> <li>Promote discretionary brokerage funds for hospital social workers to support access to health appointments (e.g. travel costs)</li> <li>Promote effective assertive outreach to find people and get them to appointments</li> </ul> <p><b>Supporting access to primary and preventative health care:</b></p> <p>Contract management to</p> <ul style="list-style-type: none"> <li>360 Street Doctor</li> <li>Black Swan Health – Street Doctor</li> <li>Homeless Healthcare</li> </ul>	<p><b>Access to targeted support for unmet needs:</b></p> <p>Adaption of existing Mental Health Homeless Pathways to other public mental health settings</p> <p><b>Access to targeted support for unmet needs and Accessible and integrated primary care:</b></p> <p>Phase 2 HIF Project – continue trial of delivering integrated service delivery model</p>	<p><b>Engaging on housing and accommodation issues:</b></p> <p>Health service provider management to engage with the Mental Health Commission regarding ‘A Safe Place’</p> <p><b>Coordinating critical elements of homeless health responses and Alignment and coordination of services and funders to avoid duplication:</b></p> <p>Department of Health representation on relevant working groups and forums</p>	<p><b>Identifying who is homeless in the WA health system:</b></p> <ul style="list-style-type: none"> <li>WA Health data collection plan for homeless patients, including use of ‘No Fixed Address’</li> <li>Implementation of use along with other priority population identifiers, e.g. disability</li> </ul> <p><b>Data, research and evaluation to show ‘what works’:</b></p> <p>WA Health consistent approaches to:</p> <ul style="list-style-type: none"> <li>Definition of homelessness</li> <li>Collection of robust meaningful information</li> </ul>	<p><b>Build workforce capacity to better respond to homelessness:</b></p> <p>Ensure access to education opportunities to improve core principles including:</p> <ul style="list-style-type: none"> <li>Person-centred to meet diverse needs</li> <li>Trauma-informed</li> <li>Culturally informed</li> <li>Inclusive recovery models</li> <li>Care across the lifespan</li> <li>Strengths-based and client empowerment</li> <li>Social determinants focused</li> </ul>

**Table 5. Focus on workforce 2024–2025**

Stream 1 – Equity	Stream 2 – Integration	Stream 3 – Engagement	Stream 4 – Information	Stream 5 – Workforce development
<p><b>Supporting access to primary and preventative health care:</b></p> <p>Contract management to:</p> <ul style="list-style-type: none"> <li>• 360 Street Doctor</li> <li>• Black Swan Health – Street Doctor</li> <li>• Homeless Healthcare</li> </ul> <p>Consider programs in country WA.</p>	<p><b>Access to targeted support for unmet needs:</b></p> <p>Advocate for people with co-occurring alcohol and other drug (AOD) issues, and a more flexible service for AOD detox that can respond to the barriers identified, and that is linked to discharge accommodation and GP support</p> <p><b>Access to targeted support for unmet needs and Accessible and integrated primary care:</b></p> <p>Evaluation of Phase 1 and Phase 2 of HIF Project and integrated service delivery model</p>	<p><b>Coordinating critical elements of homeless health responses:</b></p> <p>Develop guidelines on how to involve people with lived experience of homelessness in the design and delivery of homeless health related services</p> <p><b>Coordinating critical elements of homeless health responses and Alignment and coordination of services and funders to avoid duplication:</b></p> <p>Department of Health representation on relevant working groups and forums</p>	<p><b>Data, research and evaluation to show ‘what works’:</b></p> <ul style="list-style-type: none"> <li>• Monitor and report on WA Health data annually to stakeholders</li> <li>• Measure service provision and impact within WA Health</li> </ul>	<p><b>Build workforce capacity to better respond to homelessness:</b></p> <p>Training module on:</p> <ul style="list-style-type: none"> <li>• WA Health data collection plan</li> <li>• Improve identification of people who are homeless or at risk of homelessness</li> <li>• Improve referral and linking to health care services</li> </ul>

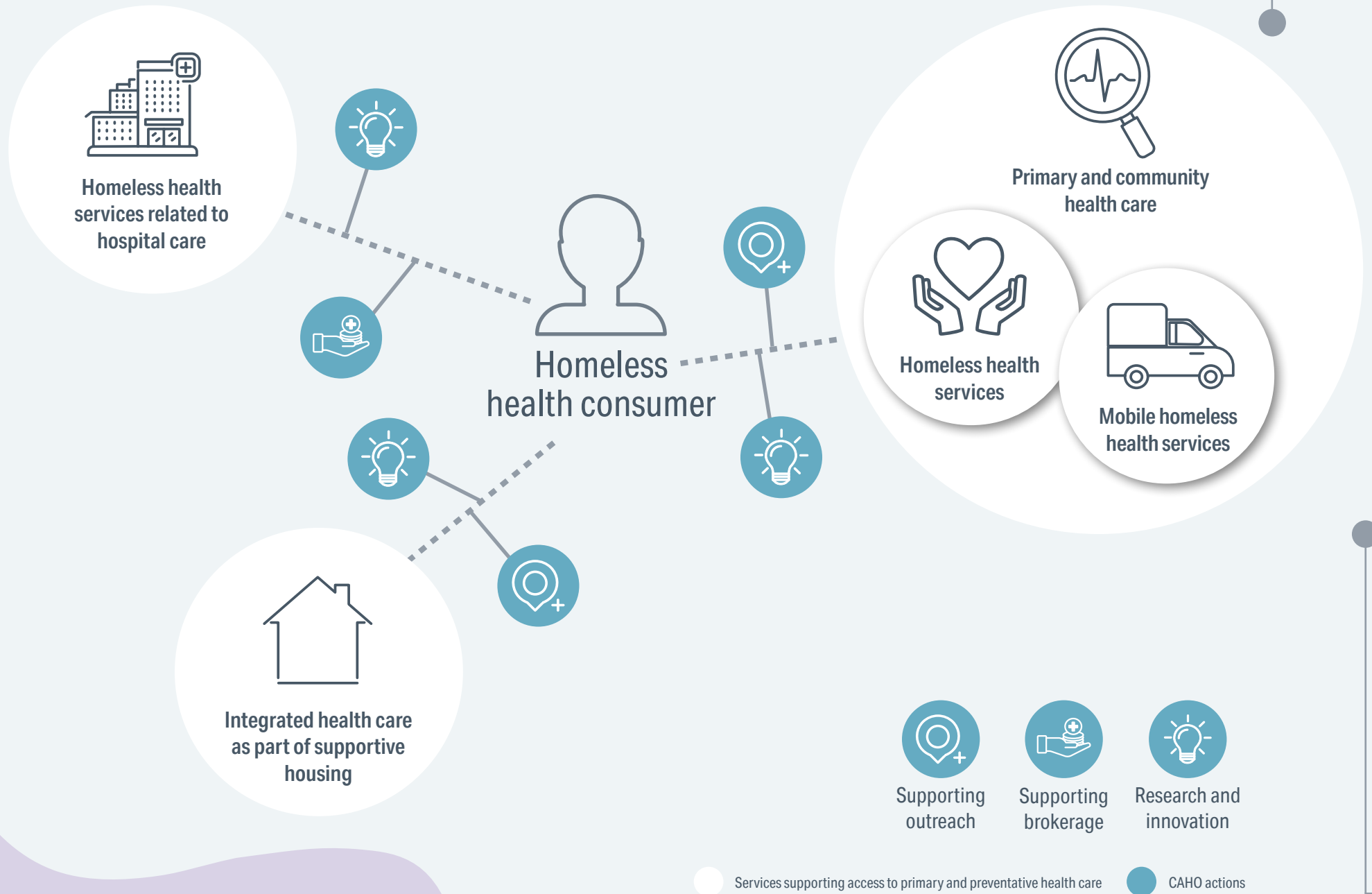


# Supporting access to primary and preventative health care

The objective underpinning the *CAHO homeless health action plan 2022–2025* is to provide a coordinated strategic response to homeless health across funding, service delivery and policy.

Figure 4 shows how CAHO managed programs are helping to connect people experiencing homelessness with timely, safe and appropriate health care services. CAHO is focused on connecting people experiencing homelessness with existing services and providing evidence and advocacy around innovative models of homeless health services.

**Figure 4. Services supporting access to primary and preventative health care**



## Services supporting access to primary and preventative health care

### Homeless health services related to hospital care

This icon represents:

- Hospital in-reach such as the Royal Perth Hospital Homeless Team which is a collaboration between Royal Perth Hospital and Homeless Healthcare General Practice
- General hospital settings where people experiencing homelessness may attend for tertiary, specialist or emergency care as well as outpatient clinics.

### Homeless health services

This icon depicts homeless health services. These are services that specifically provide care to people experiencing or at risk of homelessness and include:

- Homeless Healthcare hub and St Patrick's Health Clinic
- Medical Respite Centre
- Hospital-based programs such as the Royal Perth Hospital Homeless Team and Mental Health Homeless Pathways currently operating across the Royal Perth Bentley Group.

### Mobile homeless health services

This icon represents homeless health services that are mobile and includes:

- On the street, at drop-in centres, shelters and short-stay accommodation including short-term supported housing, emergency accommodation, temporary accommodation
- Homeless Healthcare Mobile GP
- Homeless Healthcare Street Health outreach service
- Street Doctor provided by 360 Health + Community
- Street Doctor provided by Black Swan Health.

### Primary and community health care

This icon represents:

- Primary health care services including general practitioners, practice nurses, retail pharmacists and a range of other allied health professionals
- Community health care services including government and non-government organisations such as mental health and alcohol and other drug services, and Aboriginal Community Controlled Organisations.

## Integrated health care as part of supportive housing

This icon depicts supportive housing models in Perth that support access to primary and preventative health care. For example, the community housing provided by St Patrick's, as well as the East Perth and Mandurah Common Ground developments being led by the Department of Communities, anticipated to be operational from 2025.

### CAHO actions

#### Supporting brokerage

Hospital social work units provide practical support to people experiencing homelessness presenting to hospitals. The Homeless Discharge Facilitation Fund is being piloted to support the brokerage role, to purchase accommodation and necessities such as medication and transport for people experiencing homelessness.

#### Supporting outreach

Primary care outreach models can be used to help people to attend health care. Outreach services are delivered in non-traditional settings, such as on the street, accommodation or drop-in centres. Assertive outreach is recognised as critical for health care access for people experiencing homelessness. Black Swan Health – Street Doctor, 360 Street Doctor, Homeless Healthcare Mobile GP and Street Health services support people in Perth who are street present, are not engaging with medical services in the community, and offer homeless people easier access to services in convenient locations. CAHO supports these outreach services across Perth.

#### Research and innovation

Initiatives to inform decision making and policy development based on research and evidence will be supported as part of the action plan including:

- Enhancing the WA Health data collection system to better identify vulnerable groups that need support and use this data to enhance services including better quality transitions between care settings
- Building workforce capacity to better respond to homelessness including access to health workforce training, information on available services, and improving collaborative referral arrangements
- Designing models of integrated homeless primary health care tailored to WA needs that are suitable for use within supportive housing, and other community-based support services. As part of a Commonwealth Health Innovation Fund (HIF) grant stakeholder consultation has informed the trial of core components of integrated service delivery models for Perth in 2023–2024.

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