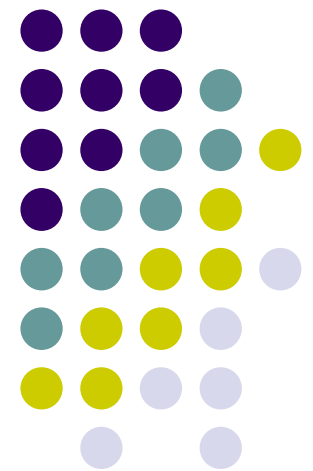


Street to Home Service



Kerry Dawson

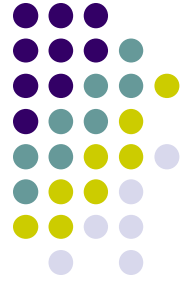
Clinical Services Coordinator

Street to Home Team



- 7 day outreach service
- 0730hrs until 1700hrs
- Team consists of:
 - Clinical Services Co-ordinator
 - Multidisciplinary team consisting of Senior Social workers, Aboriginal Health Workers, Occupational Therapist, Clinical Nurses and visiting Psychiatry.
 - Administration staff

STREET TO HOME ~ SERVICE MODEL



INTAKE AND ASSESSMENT
• Streetwork
• Duty System



CASE MANAGEMENT TEAM

Rough Sleeping



Transitional Accommodation



Stable Accommodation



Assertive, persistent and intensive engagement, coordinated service response



Long term stabilisation

INTAKE AND ASSESSMENT PROCESS

Streetwork
Duty System



Sleeping Rough



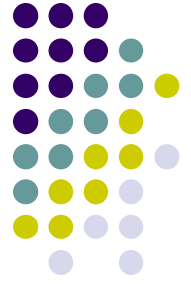
Planned Service Response
Repeated, persistent
contact client / agencies



- Respond/Locate/Engage
- Assessment: multiple needs:
 - Accommodation
 - Health
 - Social
- Client Risk Assessment
- Linkage to accommodation & other services
- Referral (internal & external)
- Assertive, persistent & intensive engagement
- Opportunistic engagement through other agencies



Who we engage with (Other Services)



- Housing SA and other accommodation services
- Sefton Park Primary Health Service
- Mental Health Services / DASSA / Disability SA / Corrections /SAPOL
- NGO's
- Adelaide City Council and Metropolitan Councils
- Youth Services/Aged Services
- Local Traders

Engagement Process (How we make it work)



- Case Management
- Regular contact with services
- Building relationships with agencies/workers (shared clients)
- Understanding roles and shared goals
- Contingency plans i.e. flexibility of service involvement “planning for the unplanned”
- Case conferences

“Housing First Principal”



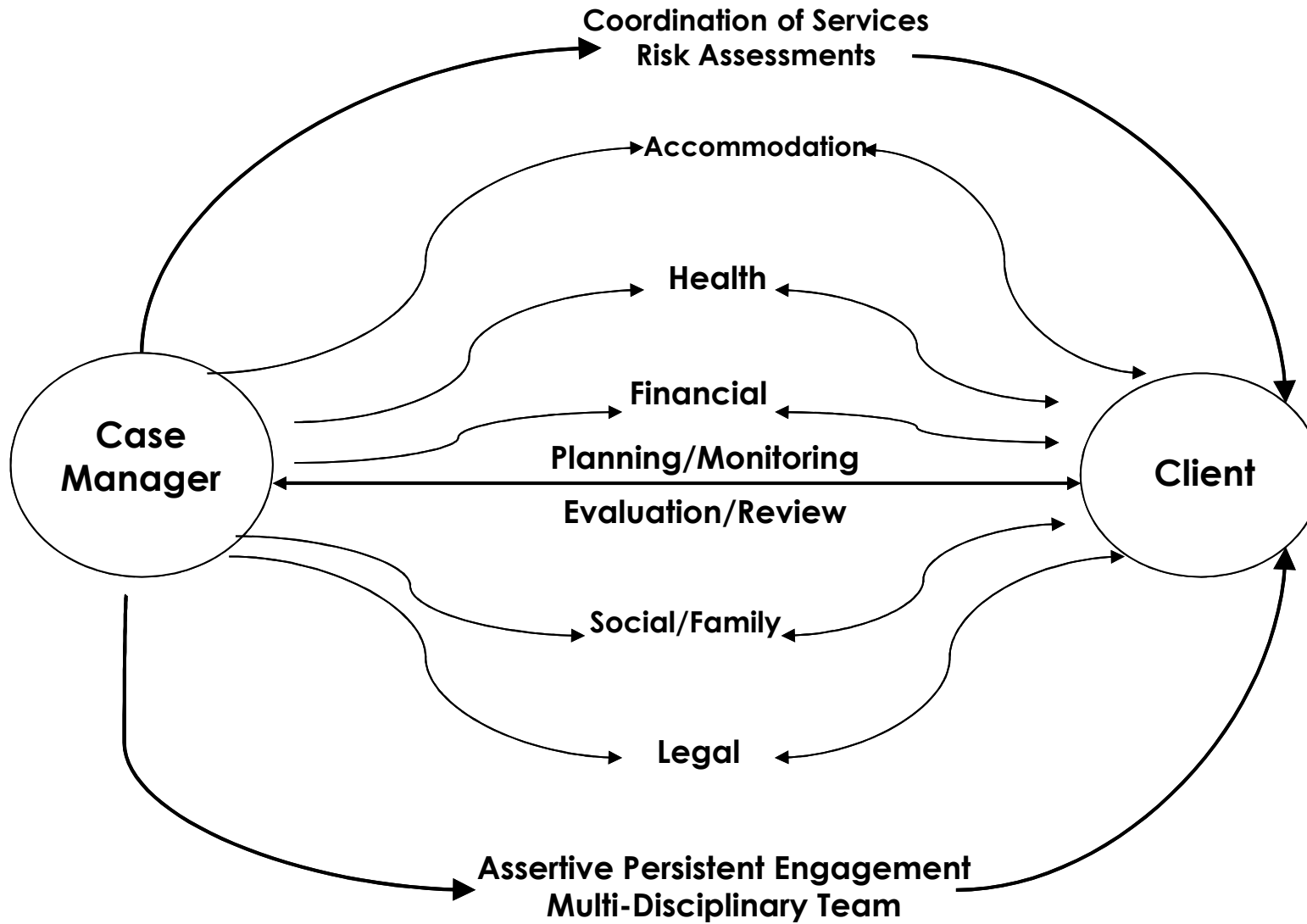
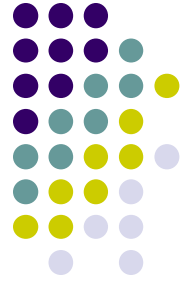
Accommodation

- Emergency Accommodation
- Hotel/Motel
- Boarding Houses/Hostels
- Caravan Parks
- Community Housing

HSA → private secure tenure with intensive supports wrapped around

- MH Services / DASSA / Disability SA
- ENU
- NGO's
- RDNS
- GP's
- Community Centres
- Recreational Groups
- Libraries
- Etc.

CASE MANAGEMENT TEAM CASE MANAGEMENT APPROACH



| CURRENT PRESENTATION ISSUES | GOALS/PLANNING AND ASSOCIATED TASKS | RESPONSIBLE PERSON / AGENCY | TIMEFRAME/ REVIEW DATE AND OUTCOME |
|---|---|---|--|
| Other | | | |
| Financial <i>'Sally' appears to be able to prioritise her budget and payment of rent, however prioritises alcohol consumption over other necessary goods (eg food).</i> | 'Sally's' budgeting skills to be assessed and monitored | Street to Home 'Sally' | October 06 |
| Legal <i>'Sally' has outstanding court matters relating to non-compliance with restraining order and property damage. 'Sally' sees Correctional Officer regularly re bail. 'Sally' demonstrates a high level anxiety re this issue (and the possibility of incarceration) and she often seeks to make this the focus of conversation. 'Sally' is not eligible for Court Diversion as she wishes to plead not guilty. 'Sally' has a Legal Aid solicitor.</i> | 'Sally' to meet the requirements of her bail conditions and maintain contact with Correctional Services Officer 'Sally' to be supported in attending magistrates court as required | 'Sally' Correctional Services Legal Aid Street to Home | Ongoing until court matters finalised. |
| Social Supports <i>'Sally' has minimal social supports, and although has engaged in some activities offered by Catherine House, has not shown any ongoing commitment/interest.</i> | 'Sally's' social interests to be explored regarding involvement in ongoing social activities. | 'Sally' Street to Home Red Cross | November 06 |
| Disability <i>'Sally' has been assessed as having a borderline IQ however is not eligible for IDSC services, due to her mental health issues. 'Sally's' intellectual functioning needs to be further explored to determine the level of supports necessary for the provision of successful long term housing.</i> | 'Sally's' independent living skills to be assessed 'Sally' to receive supports around her disability as identified to be necessary – Consider ENU Package of Care | Street to Home 'Sally' ?MACHA | October 06 Ongoing |
| Risk Management Plan <i>In the event that longer term accommodation/case planning is unsuccessful, a Case Conference will be held to review all service involvement and further assessment made re 'Sally's' levels of need.</i> | 'Sally's' needs/strengths to be reviewed Case Conference to be reviewed | All services involved 'Sally' | As necessary |

OTHER AGENCIES INVOLVED

| ORGANISATION | ROLE / FUNCTION | CONTACT NAME | CONTACT NUMBER | COMMENTS |
|-----------------------|----------------------------|--------------|----------------|---|
| Correctional Services | Bail Supervision | | | Fortnightly contact |
| Catherine House | Accommodation (short term) | | | |
| EACIS | Occasional assessment | | | Have provided recent intermittent assessment to review mental health status |
| Red Cross | Social Support | | | |
| Legal Aid (Elizabeth) | Court Matters | | | Sally to meet with Legal Aid the week prior to each appearance |
| MACHA | Funded Through ENU | | | Funded up to 6 hours per week |

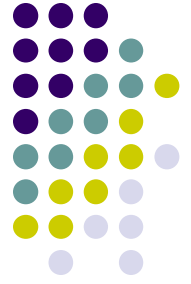
COMMENTS / SUMMARY

'Sally' is a client who presents as quiet and withdrawn, but can also express significant anger and frustration at times. 'Sally' has a long but sporadic history of involvement within the mental health system and a mild level of intellectual disability, however has not been given the opportunity to engage with any service in a longer term manner. Consequently her level of functioning and well being appears to have deteriorated at times, reflective of service level involvement or her living arrangement. Future planning for 'Sally' needs to include an intensive assessment and support process in order to identify the best housing option for 'Sally' long term. Recognition of 'Sally's' strengths needs to be encouraged, as 'Sally' appears to be reluctant to embrace her skills as identified by others. It is also necessary to identify the involvement of a service that can maintain long term service involvement in order to successfully break the cycle of homelessness and escalation of mental health/alcohol issues and promote a stable lifestyle and accommodation option for 'Sally' successfully.

Signature of Case Manager: _____ **Designation:** _____ **Date:** ____

Signature of Secondary worker: _____ **Designation:** _____ **Date:** _____

Summary



- Assertive, persistent, supportive engagement
- Client needs/strengths coordination
- Pre and ongoing tenancy support
- Ongoing assessment
- Consolidating Relationship (Client focus)
- Advocacy/Liaison
- Linking with services
- Transitional Accommodation and/or planning for Long term accommodation
- Stabilisation
- Referral to external agency for lead case management / support role
- Reconnection with community