Homefront - Supporting Homeless Patients After ED

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Summary

The Mater Homefront program is a partnership between Mater Hospital Brisbane, Mater at Home and

MICAH Projects. Funded through Queensland Health Connected Community Pathways and in operation since January 2023, the purpose of the program is to improve access to primary health

care and psycho-social supports in the community with the aim to reduce the burden on the

Emergency Department (ED). The needs of vulnerable patients presenting to the Mater Emergency Department are wide-ranging, they are rough sleeping or in unstable or unsuitable housing, many present with poorly managed mental and physical health conditions, alcohol and other drug concerns, domestic and family violence concerns, financial disadvantage and social isolation. For many, there is mistrust of health and social care systems and a history of abuse and trauma. Unfortunately, there is also an over-representation of First Nations Peoples within this cohort. It is essential for supports to be trauma informed, culturally sensitive and patient focused. The program is staffed by a full-time Social Worker, employed by Mater and embedded in the Mater Emergency Department. This Social Worker responds to all referrals for vulnerable patients identified with homelessness concerns and assesses and coordinates linkage to MICAH Projects, as well as responding to those who subsequently re-present to the ED. Internally, this Social Worker works closely with the Mater Adults Social Work Team, Emergency Department and Mater's Aboriginal and Torres Strait Islander Liaison Service. A Full time social worker embedded in Mater ED who:

- · responds to all referrals for vulnerable patients identified with homelessness concerns
- assesses and coordinates linkage to MICAH projects or other relevant community organisations
- follow up with patients who re-present to ED.

MICAH Projects is an established community provider which has long been supporting members of the community who are in crisis. MICAH Projects have extensive experience in the implementation of emergency department frequent presenter programs and inter-agency collaboration. The MICAH Projects Homefront team consists of a Clinical Nurse and two Support and Advocacy Workers. The team provide assertive outreach to clients following discharge, including nursing follow up, practical assistance to access primary health care, navigation and advocacy for housing access and support to engage with long term community services.

Key dates

Jan 2023

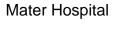
Key Contacts

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Aim

The overarching objective of the Mater Homefront program is to improve the health and wellbeing outcomes of vulnerable patients presenting to the Mater Emergency Department who are experiencing homelessness. Reduce the reliance on the ED for sub-acute or avoidable presentations that could be supported in the community setting.

Benefits

- · improved access to primary health care
- improved health outcomes and support for patients
- · increased self-efficiency and self-management of health conditions
- increased trust in healthcare system
- increased housing uptake
- a decrease in avoidable ED presentations once engaged in community support

Background

The Emergency Department can often be the de facto health care provider for many people who are experiencing homelessness and co-occurring health and psychosocial concerns. While acute health concerns can be addressed in this environment, the support that these vulnerable patients need extends beyond the Emergency Department, requiring an integrated care response across health and community sectors.

Evaluation and Results

A comprehensive evaluation was completed following the first nine months of operation of Mater Homefront, for the period January to September 2023. This examined patient uptake at Mater Hospital and the health, social and wellbeing outcomes following engagement with the MICAH Projects Homefront service. During the period January to September 2023, the Mater Homefront Social Worker based at Mater Hospital received 258 referrals for support. 217 (84%) were new referrals, with 41 (16%) (27 individual patients) occurrences of re-presenting patients over the ninemonth period.

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