Healthy Homes and Neighbourhoods
Integrated Care Initiative

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“Most of the problems encountered by children and families are multi-faceted and cannot be addressed by one intervention or agency alone… multiple interventions need to be ‘joined up’ and co-ordinated in order to be effective.”

Issues

- Families with trans-generational disadvantage and psychological trauma
- Complexity of family needs
- Poor engagement by families with services
- Poor engagement by services with families
- Interventions usually of short duration
- Barriers to cross-agency collaboration
- Needs of adult family members often not addressed
Engagement strategies

- Reviewing service design
- Better engaging with the community
- Practical strategies
- Investing in quality staff
- Changes in practice
- Establishing coordinated and integrated models of service provision
Mechanisms to turn activities into outcomes

Willingness to share status and power

Trust between the provider and client/family

Provider confidence and comfort

Self-reliance of clients/families
Healthy Homes and Neighbourhoods

Core activities:

- Identification of vulnerable families and pathways to care
- Care coordination
- Place-based collaboration in Redfern/Waterloo and Canterbury LGA
- General Practice engagement, capacity building and linkage
- Family Health Improvement
- Healthy Homes and Neighbourhoods Network and Partnerships
- Evaluation
## GOVERNANCE STRUCTURES AND PROCESSES

- District Partnership Committee
- Healthy Homes Steering Committee

### Healthy Homes Care Coordination Trial
- Identify families
- Link services
- Sustain review

### General Practice Linkage
- Engage
- Support
- Training

### City of Sydney - South Trial
- Local hub
- Co-location of services
- Community needs assessment

### Canterbury LGA Trial
- Local hub
- Co-location of services
- Community needs assessment

### Capability Projects
- HealthTracker
- Patchwork tool
- Care coordination app
- EMR Algorithm

### Family Health Improvement
- Key messages
- Website
- Social media

## STRENGTHENING SECTOR CAPABILITY

### Healthy Homes and Neighbourhoods Network

#### System Change
- Professional trust and knowledge
- Identification & risk stratification
- Informed consent policies
- Shared intake & communication systems
- Shared standards of collaboration

#### Capability Building
- Translation research
- Trauma & family partnership skills
- HealthPathways development
- Shared standards of collaboration
Core Partners

- Family & Community Services (Housing, Child Protection, Early Intervention, Disability)
- CESPHN
- SDN Children’s Services – Brighter Futures
- The Infants’ Home Ashfield – Child and Family Services
- Barnardos – Family Referral Service
- The Benevolent Society – Child and Family Services
- Jannawi Family Centre
- SLHD (Community Health, Mental Health, Drug Health)
- Education
- Juvenile Justice and Police
- Local Government
IDENTIFYING VULNERABLE FAMILIES AND PATHWAYS TO CARE
<table>
<thead>
<tr>
<th>Category</th>
<th>Services/Programs</th>
</tr>
</thead>
</table>
| Safe Start systems                           | - Royal Prince Alfred and Canterbury Hospitals  
- Other LHDs                          |
| Primary health care providers                | - SydneyHealthPathways  
- Referrals to staff specialist clinics |
| Hospitals                                    | - Emergency Department  
- Inpatient and outpatient services  |
| Mental Health and Drug Health Services       | - Utilise current systems for identifying children of parents with mental illness or dual diagnosis |
| SLHD Child and Family Health Services        | - Paediatric/nursing/counselling vulnerable family clinics  
- Sustained Health Home Visiting |
| FACS/SLHD Perinatal Family Conferencing      | - Lakemba, Burwood and Central Sydney CSCs |
| FACS – Community Services                    | - Barnardos Family Referral Service  
- Brighter Futures                          |
| Partner agencies                             | - Learning and Support Teams                                                     |
| Schools                                      |                                                                                 |
Healthy Homes and Neighbourhoods

CARE COORDINATION
Core HHAN staff: Clinical Nurse Consultants and Social Workers

- Wrap-around model
- Family Group Conferencing
- Case review with medical officer (Community Paediatrics)
- Patchwork
- Care coordination app
- Save time
- Build networks
- Collaborate better
Care Coordination Case Study

- James b. 1985
  - Lives 4+ hours out of Sydney
- Mary
  - Lives 4+ hours out of Sydney
- Margaret
  - Little information known
- John b. 2009
  - Born outside SLHD
  - Little information known
- Ross
  - No information known
What did HHAN do?

- Allocated to HHAN CNC and Social Worker.
- Met with James who is willing to engage in program and is worried about his health (whilst located in Redfern).
- Gathered information from eMR, Brighter Futures, FACS.
- Liaised with Brighter Futures to establish roles and responsibilities of workers - HHAN to support adult needs.
- Liaison with AMS, GP, HIV services, Social Work counselling.
- Facilitated case conference with James, John, HHAN CNC, HHAN Social Worker, Brighter Futures case worker, Community Paediatrician, Connecting Care CNC. Identified goals for both James and John and actions.
- Referred to services (diabetes, HIV, chronic disease) and supported attendance.
- Facilitated family conference with Grandmother.

“This is the first time that anyone has focussed on fixing my health so I can become a better parent”
Further action…

- Investigate installation of a system for James to alert emergency services – less pressure on John.
- Support Brighter Futures to explore respite options with wider family network.
- Link all service providers into Patchwork, and support family and service providers to use care coordination app.
- Stay in touch with James and John.
“Yesterday went really well with James and we have finally gotten his health needs on the agenda, thank you to Healthy Homes!” (Brighter Futures Caseworker)

“Having HHAN talk to ‘Mum about Mum’ has given me the space to focus on the children”

“HHAN gives a health perspective”

“Our roles with families are now very clear”

“HHAN staff are well respected and able to advocate to other services and get them involved, particularly with mental health services which we sometimes struggle with”

“HHAN has great networks within Health, it’s a localised service”
Healthy Homes and Neighbourhoods

PLACE-BASED COLLABORATION
Socioeconomic index of relative disadvantage by statistical area level 1 and suburb

Geospatial Mapping of Disadvantage

OBJECTIVE: To take a spatial epidemiology approach to identifying the geographical distribution of the “most vulnerable” families with intergenerational cycles of disadvantage and trauma in SLHD by:

– Identifying indicators of disadvantage and mapping them within SLHD
– Identifying clusters of disadvantage
– Analysing potential pockets or “hot spots” of extreme or complex disadvantage via layered analysis of individual indicators of disadvantage
## Included indicators of disadvantage

<table>
<thead>
<tr>
<th>2011 ABS Census</th>
<th>SLHD Clinical Data (Midwives data)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. High proportion of the population identifying as Aboriginal or Torres Strait Islander</td>
<td>1. High rates of teen mothers</td>
</tr>
<tr>
<td>2. Low rates of year 12 attainment</td>
<td>2. High rates of pregnant women without partners (sole mothers)</td>
</tr>
<tr>
<td>3. Low median weekly household income</td>
<td>3. High rates of smoking during pregnancy</td>
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<tr>
<td>4. High proportion of people reporting speaking English not well or not at all</td>
<td>4. High rates pregnant women with a high antenatal Edinburgh depression score (≥10)</td>
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<td>5. High proportion of people requiring assistance with activities of daily living (disability)</td>
<td>5. High rates of pregnant women reporting domestic violence (have either been hit or hurt by their partner, or report being frightened of their partner)</td>
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<td>6. High proportion of one-parent families</td>
<td>6. High rates of pregnant women reporting a history of child abuse</td>
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<td>7. Large proportion of households with no access to a car</td>
<td>7. High rates of families known to Family and Community Services</td>
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<tr>
<td>8. Large proportion of housing consisting of state housing</td>
<td>8. High rates of pregnant women who have other children in out-of-home care</td>
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<td>9. Large proportion of households with no internet access</td>
<td>9. High rates of women who report consuming alcohol during pregnancy</td>
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<tr>
<td>11. Low labour force participation rates</td>
<td>11. High rates of pregnant women with delayed antenatal care (first visit at ≥20 weeks)</td>
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FAMILY DISADVANTAGE

Number of times the SA1 was located in a hotspot for an indicator of disadvantage
Applications and implications
Redfern/Waterloo Plan

- Co-location at RedLink
- Engaging directly with community and local services
- HHAN staff presence at community events
- Identifying community needs
- Providing care coordination from RedLink site
Method

- Database of GPs working in SLHD area
- Practice visits – GP information pack
- GP Questionnaire:
  - Identify barriers and facilitators for GPs to work well with vulnerable children and their families
  - Measure frequency of utilisation of Medicare Item Numbers
  - Training needs assessment
  - HHAN Partner support in design and delivery of education: CESPHN; SLHD Child Protection; SLHD Community Paediatrics.
Next Step – E Learning

- Trainees want an online education module
- Greater reach to time-poor practitioners, and also rural remote and global practitioners
- Use a UK developed template to build E Learning modules
- “Healthy Homes and Neighbourhoods” affiliated General Practices
Healthy Homes and Neighbourhoods

FAMILY HEALTH IMPROVEMENT
Key Health Messages

- Love, Talk, Sing, Read, Play
- Deadly Tots
Social Media Strategies

- **Evidence for local use:**
  - **Social media scoping project 2014, South Western Sydney Local Health District** - 299 parents residing in SWSLHD completed survey
  
  - **Result:** 98% parents had internet access, 95% used social media, 93% thought that getting health and parenting information on social media was useful

- **Mobile phone apps**
- **Website:**
  - Mobilised website
  - Blog page
- **Facebook posts to promote**
Examples of current development of social media strategies

- Deadly Tots phone app
- Love Talk Sing Read Play phone app
- Love Talk Sing Read Play mobilised website
Interagency Partnership Committee

Healthy Homes Network

Healthy Homes Steering Committee

System Projects
- Shared Training
- Shared Business Models
- Shared IT Systems
- Health Literacy
- Pathways

Healthy Homes Clinical Group

Trial Care Coordination

Healthy Homes Network

Place-Based Initiatives South Sydney & Canterbury

Collective Program Management Group (CPMG)

Local Interagency

Local Services & Community Engagement

Trial co-located Care Coordination

Local Activity
- Local hubs
- Neighbourhood Support
- Healthy Neighbourhoods
- Community groups

Family Focused Activity
- Family Case Conference
- Family “Wrap Around”
- Peer Education

NSW Government
Health Sydney Local Health District
“Real collaboration is authentic working together across organisational boundaries toward common goals.”

Healthy Homes and Neighbourhoods

EVALUATION FRAMEWORK
Evaluation Framework - Methodology

- Realist (Sayer 2000; Pawson and Tilley 1997)
- Explanatory Theory Building (Eastwood 2011)
- Realist Synthesis of Child Health Programs (Garg et al, 2014; Grace 2015; Tyler et al 2015)
- HHAN Theory of Change (2014)
- Longitudinal Emergent Realist Mixed Method Design
- Focus on Context, Mechanisms, Outcomes
Evaluation Framework - Methods

- **Family- Longitudinal Emergent Mixed Method**
  - Family- CMO Case Studies
  - Patient- Reported Measures – Health Tracker

- **Partnership- Mixed Method Social Network Analysis**

- **Spatio-temporal Studies**
  - AEDI, Naplan

- **KPI Reporting**

- **Place-based**
  - Concept Mapping
  - Mental Health Needs Analysis
  - Mixed Method Social Network Analysis

- **Sub Component Evaluations**
  - Patchwork
  - General Practice
  - Wrap around
  - Family Group Conference
  - Phone Apps
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