

# Healthy Ageing in Public Housing Project

## Final evaluation – Executive Summary

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### Background

In Victoria there are 62, 779 households accommodated in public housing with approximately 46% of residents being over the age of 55 (DHS, 2016). Disadvantaged populations have higher levels of disease risk factors and there is a well-documented lower use of preventative health services than people who experience socioeconomic advantage (ABS, 2010). Additionally, environmental conditions of public housing can compound and contribute to ongoing health problems with approximately 30% of public housing residents in Melbourne concerned that their living conditions are impacting on their health and safety (Bandt & Sandell, 2015). Typically residents in public housing reach a crisis point before accessing medical services thus a proactive and preventative approach is vital for this population (Merri Health, 2014). Assertive outreach for this community, while it may take additional resources, breaks down these barriers to much needed preventative health services and builds relationships between the outreach staff, the residents and builds a sense of community.

### The Project

The Department of Health and Human Services have engaged Merri Health (formerly Merri Community Health Services), in partnership with Inner North West Primary Care Partnership (INWPCP), to further develop referral pathways and an assertive outreach model that connects community allied health and nursing services with older persons 50+, including Aboriginal and Torres Strait Islander and Culturally and Linguistically Diverse communities.

The project has used the findings from the 2013 Healthy Ageing Demonstration Project (HADP) and resulting 2014 Referral Pathways Project as a platform to strengthen access for people 50+ living in public housing to community health services supports. The project has sought to simultaneously strengthen links between existing services in an effort not to duplicate roles, work on organisational and system improvements and embed system practices so that these can be sustained. The model includes a close working partnership with Merri Outreach and Support Services (MOSS) and Baptistcare using assertive outreach to enhance access to Merri Health services; streamlining referrals into Merri Health for the target population, developing resources for consumers and agencies and implemented organisational improvements to enhance sustainability.

The project will explore opportunities to extend aspects of this model to agencies in Darebin and Moonee Valley and will share findings at a regional forum in phase 2 and 3 respectively.

### The evaluation

The purpose of this evaluation is analyse the results to date of the Healthy Ageing in Public Housing project and the forum event which was used as a platform to share the Merri Health model with the North and West Metro Region. This evaluation captures both quantitative and qualitative data pertaining to the entire project and its future sustainable directions. Recommendations are based on project partner interviews and analysis of the data from service access datasets.

### Evaluation methods

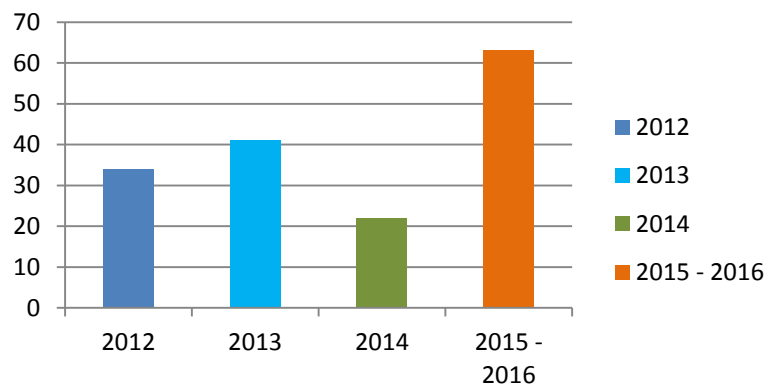
- Analysis of Merri Health service access datasets (MERI)
- Spreadsheet records from outreach events
- Steering committee meeting minutes and presentations
- Qualitative interviews with Merri Health staff and steering committee members
- Outreach Activity Sheets
- Forum evaluation and feedback

## Findings at a glance

To date Merri Health have attended a total of 7 outreach events at six housing estates with future plans to continue assertive outreach events every 5 weeks until December 2016. This project has built on previous projects and incorporates retrospective data for the purpose of tracking these developments. The improvements in numbers are in part due to enhanced identification of target group in service access.

- There has been a steep increase in the number of the target group receiving services at Merri Health, increasing from 22 people in 2014 /2015 to 63 people in 2015 /2016. Figure 1 demonstrates the value of both the 2013 Healthy Ageing Demonstration project (light blue) and the Healthy Ageing in Public Housing project (orange).

**Figure 1: Public Housing Clients 50+ engaged with Merri Health (by year).**



- The average person seen in public housing per month went up from an average of 2.69 in the previous 3 year data collection to an average of 4.33 in the 3 month pilot evaluation to 7 per month in the most recent 9 month snapshot.
- Most referrals that were made by steering committee members into Merri Health had a shorter time to appointment average of 5.5 days (as opposed to 19.5 days). Most clients on the MERI data set were seen within the 4 week time frame except for one or two clients.
- The streamlined service access was the key benefit to steering committee members. All partners reported on the importance of this streamlined access for improving agency and consumer trust in a service.
- One partner agency's referrals into Merri Health increased 4 fold in the second quarter and 5 fold in the third quarter.
- According to qualitative reports the most commonly requested appointments at outreach events were dental, optometry and occupational therapy for the purpose of modification within a home.
- The forum event successfully brought agencies together from the NWMR to discuss strategies to engage marginalised groups

## Key Recommendations

- Continue to record and track referrals for the target group to monitor the post-project effects.
- Consider a more formal agreement between partner agencies to embed relationships at an organisational level
- Incorporating dental services if possible into priority access for public housing clients if the resources are available.
- Implement case conferencing among partner agencies
- Some partners suggested staying at one location for 3 -4 times in a row to build a rapport with the community at the public housing estates.
- Explore avenues to further promote project and share evaluation findings
- Explore opportunities to be part of a broader network of service providers to enhance engagement across NWMR.