



LAZARUS
COMMUNITY CENTRE | GEELONG



Developing an In-Reach Nursing Operating Model for Lazarus Community Centre



Acknowledgements

Lazarus Community Centre

Lazarus Community Centre plays an incredible role in caring for people in our community. Specific thanks to:

- Jade Hamilton, former General Manager
- Stephanie Davie, Board Chair
- Lazarus Board
- The staff, volunteers and clients for their conversations and feedback

Committee for Geelong

The catalyst for success, Committee for Geelong, a remarkable group of people working towards Geelong's future.

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Members of parliament

Thank you for your generosity of time, guidance and sharing your experiences.

- Christine Couzens
- Ella George
- Dr Sarah Mansfield

Community partners

The community based and not-for-profit sector is filled with a passionate and purpose driven group of people and we thank every one who generously gave up their time to have a conversation and share their learnings with us.

- Ambulance Victoria Operational Community Engagement
- Barwon Health Drugs and Alcohol Service
- Barwon Health Homeless Outreach Psychiatric Service
- Bolton Clarke
- Neami National
- Ozanam House
- Salvation Army Project 614
- Salvation Army Homelessness Persons Program – Barwon region
- Victoria Police Geelong
- Western Victoria Primary Health Network
- Youth Services Advocacy Support

Participant organisations

Thank you for sponsoring and supporting us to participate in the 2024 Leaders for Geelong program and deliver this vital project.

- Deakin University
- GMHBA Limited
- National Disability Insurance Agency (NDIA)
- Vietnamese People of Geelong
- WorkSafe Victoria

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Leadership Portfolio Partners



Leadership Portfolio Scholarship Providers





Lazarus Community Centre and the 2024 Leaders for Geelong Lazarus project team acknowledge Djilang is Wadawurrung country.

We acknowledge these lands and waterways have been cared for by the Wadawurrung people of the Kulin Nation for thousands of years.

Thank you to Aunties Corrina Eccles and Marsha Uppill for their time educating our team on the challenges people in our region face in relation to equity and equality.

It is our hope that an in-reach nursing service at Lazarus can continue this care for anyone in our community who seeks it.

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Foreword

Christine Couzens MLA, Member for Geelong and Parliamentary Secretary to First Peoples

We know that people are doing it tough due to cost-of-living pressures. Whilst we have introduced a range of measures to ease the burden, there is a lot more to do given the growing demand.

I want to acknowledge and thank services such as Lazarus, who volunteer their support to assist some of the most vulnerable people in our Geelong community.

I particularly want to congratulate the Leaders for Geelong Lazarus Community Centre Project members for their commitment to this significant project, which focuses on an in-reach nursing service, building on the work undertaken last year.

After extensive consultation with healthcare providers, community services and Police, it was agreed that an in-reach nursing service at Lazarus would be a valuable addition to the important work undertaken at the Lazarus Centre.

Prevention and early intervention are key factors for good health outcomes for individuals and, of course, the broader health network. We know that the Lazarus Community Centre are seeing people who are not accessing health care for a range of reasons.

We know that to deliver that healthcare directly into the Lazarus community, in an inclusive and supportive environment, will make a significant difference in addressing health care needs.

I am very much aware of the challenges faced by many members of our community who lack access to suitable housing and appropriate health care. These are fundamental needs for everyone.

We absolutely have a responsibility to work toward equality, accessibility, and inclusion.

Geelong continues to be a resilient and vibrant community, but it is important to acknowledge that there are individuals who still face disparities in access and equity.

I congratulate and thank all who have participated in this project, in particular the Leaders for Geelong Lazarus Community Centre Project members and the people of the Lazarus community.

Foreword

Dr Sarah Mansfield MLC for Western VIC

As economic inequality and the housing crisis continue to worsen, including in our region, services like the Lazarus Community Centre are facing unprecedented demand.

The growing complexity of clients seeking support has been recognised by the Lazarus Community Centre through a broadening of services offered and strengthening of partnerships with other organisations.

Last year, participants in the Leaders for Geelong Program assisted with this through a project that mapped needs of clients and potential links with key services throughout Geelong.

It is wonderful to see this year's Leaders for Geelong participants build on that project, by diving deeper into the identified need for in-reach healthcare for clients accessing Lazarus. Having previously worked at a similar organisation I can attest to the value of this - it removes barriers to accessing healthcare for clients, both practical and institutional.

It was a pleasure to meet with this year's participants and see first hand how they worked together to leverage their individual talents and networks, producing an operating model for an in-reach nursing service. This will be of significant value to the Lazarus Community Centre in progressing their goal of delivering such a service, and ultimately lead to real-world benefits for people who have in so many ways been left behind.

Ella George MLA Member for Lara

For many years, the Lazarus Community Centre has supported members of our community experiencing homelessness and social isolation.

As homelessness increases in our region, and the cost of living impacts more people, an increasing number of people have turned to Lazarus for support in recent months. The 2024 Leaders for Geelong Lazarus Project Team recognises the crucial need for specialist support, including healthcare, to reduce the barriers that homeless people may face when seeking support and to deliver timely and appropriate care.

This report sets out a practical way in which the Lazarus Community Centre can provide an in-reach nursing service for its clients, leading to better health outcomes for their clients by seeking to address health concerns at an earlier stage, and reducing the burden on our health system through early intervention.

I commend the Project Team for their excellent report, developing a clear plan to provide an in-reach nursing service, and for the empathetic and sensitive way in which they conducted their project. I am confident this work will benefit all those who seek support at Lazarus.

Our project team



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Executive summary



Continuing the work of the 2023 Committee for Geelong Lazarus project group, the 2024 cohort was asked to research, develop and deliver an operating model for a pilot in-reach nursing service at Lazarus Community Centre (Lazarus).

An in-reach nursing service at Lazarus would provide accessible primary healthcare support and early intervention, benefiting both individuals and the broader healthcare network. The provision of this service would address minor health issues early, preventing them from escalating into more serious problems, and thereby potentially alleviate the pressure on Geelong's already stretched acute health services.

The project team undertook a literature review of 20 different research papers that focused on the plight of homelessness and access to healthcare more broadly. A theme emerging from the research identified the benefits of specialised healthcare models, particularly those targeting primary healthcare and early intervention within in-reach nursing care.

Engagement with eleven key stakeholders across Geelong and Melbourne and 15 staff, volunteers and clients of Lazarus reinforced the potential benefit of an in-reach nursing service. In principle support for a service running out of Lazarus was evident from all organisations the team consulted.

A genuine desire to provide trauma informed support to people who are homeless or at risk of

homelessness in the Geelong community was a strong focus.

The literature review and consultations with existing providers and the team at Lazarus informed the development of a detailed in-reach nursing service operating model. The operating model provides a guide to enable Lazarus to embark upon a pilot of the in-reach nursing service to run from their newly refurbished premises on the site of the old Geelong goal.

The integration of an in-reach nursing service at Lazarus has the potential to transform the approach to healthcare and outcomes for at-risk individuals in Geelong.

Stakeholder discussions, sector research and engagement with staff, volunteers and clients of Lazarus identified overwhelmingly that an informal, flexible, trauma-informed nursing service delivered in-reach, where a client feels safe and has an existing social connection, would be the most effective model for Lazarus. Our Operating Model provides a guide for Lazarus to pilot a sustainable in-reach nursing service.

Furthermore, our findings suggest that addressing barriers to healthcare accessibility through an in-reach model can promote not only physical health, but overall wellbeing. An initial six month pilot, collaboration with existing services, and continuous evaluation will be essential to ensure a sustainable and impactful program is delivered, and one that meets the evolving needs of the homeless and at-risk community in Geelong.

Lazarus Community Centre

Lazarus Community Centre aims to

Provide a safe and welcoming place for people to meet and be supported as valued members of our community.

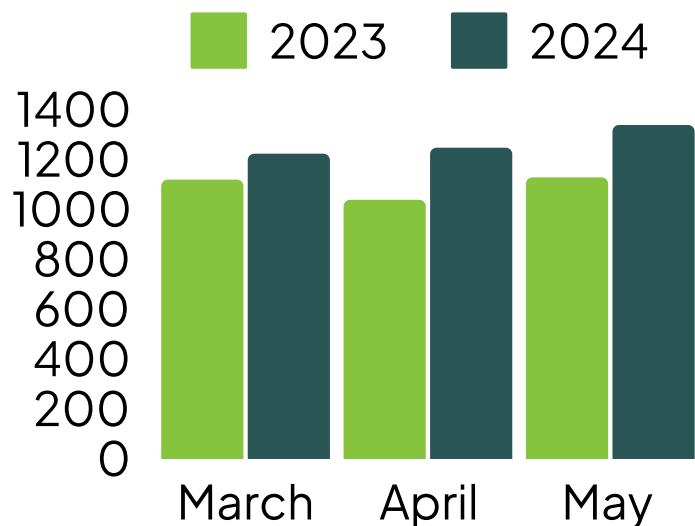
Lazarus is a safe place for homeless and at-risk individuals in the Geelong region, with part of its magic stemming from a 'no questions asked' culture. It is a place that offers warmth, comfort, community, connection, and a sense of belonging and purpose in a non-judgmental environment. Lazarus currently provides access to essential services including meals, basic clothing, toiletries, laundry facilities and showers.

Due to increased living costs and the current housing crisis, the number of clients attending Lazarus has grown over the past 18 months.

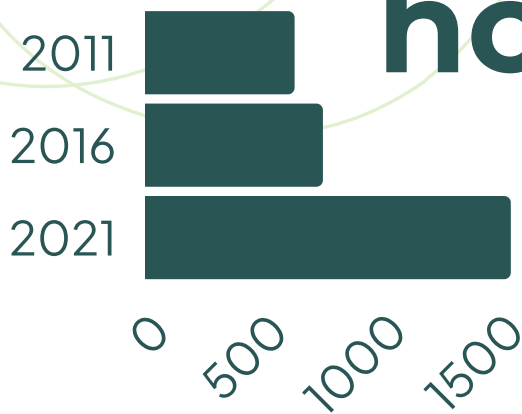
In the 12 months up to May 2024, Lazarus supported over 1,300 clients compared to 1,100 clients the same time last year. This increase in client numbers brings an increase in the complexity of individual client circumstances and requirements, including people needing specialised support such as healthcare.



Client visit growth



Impacts of homelessness



Number of people experiencing homelessness:
City of Greater Geelong LGA census data

Homeless people living in high income countries have mortality rates around ten times that of the general population.
- Medical Journal of Australia (2018)

Primary health care to this population could improve health and reduce costs. Nurses have a key role in the provision of available, approachable, and affordable care.
- Roche et al (2018)

Between 2016 and 2021, the number of people experiencing homelessness doubled in the Greater Geelong region.
- Give Where You Live (2024)

“Couple of times I was not feeling well and kept putting it off. If a nurse was here, I’d say - could you please check me up? Just little things people put off.” - Lazarus Client (2024)

“Homelessness does not discriminate. People who have jobs are finding themselves without a home; families without a place to sleep; and people having to navigate a broken system for the very first time.” - Jade Hamilton



Impacts of homelessness



There has been an observable increase in homelessness across Australia in recent years. Between 2017 and 2021, the Australian Bureau of Statistics (ABS) Census identified that homelessness more than doubled in some parts of Victoria. The Geelong region experienced a 100% increase in people experiencing homelessness (ABS, 2021).

This correlates with reports that Lazarus Community Centre experienced an increase of up to 60% in demand for food and housing assistance over a 12 month period (Council to Homeless Persons, 2023).

Homelessness, or being at-risk of homelessness, does not always mean those who are sleeping rough.

Homelessness results from complex, interrelated and cascading events, such as domestic violence, no/inadequate income, illiteracy, unemployment, physical/ mental health concerns, and consequences of lifestyle issues such as gambling, alcohol and drug addiction. (Gordon et al, Appropriate and Acceptable Health Assessments for People Experiencing Homelessness, 2022).

For many experiencing hardship or homelessness, a hospital emergency department is the “first, and often only, resource for accessing health care”. (Caring for Homeless Populations in the ED: A Quick Guide EMRA).

“Safety, security, and warmth are fundamental human basic needs; and without them, every aspect of an individual’s life is impacted.”
- Jade Hamilton





Transience, trust and accountability

The transient nature of homelessness and the at-risk community is a significant barrier that prevents individuals from attending medical appointments. Minor ailments such as sores, bites, grazes or burns often escalate into serious medical concerns.

Supporting people 'where they're at'

Many clients, including those with access to housing, have difficulty or are reluctant to engage with traditional healthcare services due to unfamiliarity or mistrust.

Lazarus serves as a safe haven where clients can feel respected and empowered to seek assistance without the constraints of unfamiliar locations or appointment times and the perceived stigma of attending a doctor's waiting room.

Lazarus Community Centre staff and volunteers have observed that many of their

clients face barriers in accessing basic health care which, when left untreated, lead to acute symptoms that often require emergency treatment in hospital.

Located in the Old Geelong Gaol, with an expanded site footprint beginning in August 2024, it is the wish of the Lazarus Board to expand the Centre's offerings to meet clients where they are, and to look for opportunities to provide wrap-around care and services at the new building.

Project background

In 2023, Lazarus Community Centre commissioned a Leaders for Geelong project to undertake research to understand client needs and best practice approaches for drop-in service models.

The project team delivered a foundational evidenced based report and presented six recommendations to inform the design, implementation, and sustainability of an expanded drop-in service model at Lazarus.

The report concluded that a comprehensive coordinated wrap-around support model with strong partnerships across a range of services would be possible at Lazarus.



2024 Project

The 2024 project focused on recommendation 1 of the 2023 report:

“To map local health and social services and stakeholders aligned to the needs of Lazarus participants to identify potential partnerships and collaborations.”

The team identified a core problem to be solved:

“A lack of identified, client-centered early intervention health services for clients of Lazarus.”

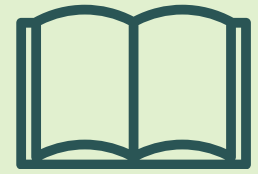
This year’s project focus was to establish a sustainable and scalable operating model for an initial 6-month pilot of an in-reach nursing service at Lazarus. The goal of the in-reach nursing service is to meet individuals where they are already accessing services, to provide timely, accessible support and early intervention before health conditions escalate.

Approach

Our program logic outlined our practical approach for successful delivery of the project. We focused on 3 key activities:

<p>Discovery - Understanding better practice models</p>	<ul style="list-style-type: none"> • Literature review, analysis and experiential learning • Understanding the services provided by other 'like' organisations including Salvation Army Project 614 and Ozanam House in Melbourne
<p>Partnerships and Collaboration</p>	<ul style="list-style-type: none"> • Engage with in-reach health and social services stakeholders • Connecting with potential and identified partners • Consult with Lazarus Board, clients, volunteers and staff
<p>Develop a pilot in-reach nursing operating model</p>	<ul style="list-style-type: none"> • Propose a pilot in-reach nursing service operating model that is tailored to Lazarus' needs and upholds Lazarus' culture and values • Create client journey maps* and personas* to demonstrate what the model will deliver • Provide an evaluation model* for the pilot in-reach nursing service • Identify recommendations <p>*These elements are not presented in the report but are included with the operating model shared with Lazarus Community Centre.</p>

Discovery



Literature review

During the discovery phase of the project a literature review of 20 research papers and articles was conducted. These papers explored the definition of homelessness and the challenges of those who are at-risk, homeless, and transient. An emerging theme was that the support and healthcare of these individuals was a complex and dynamic problem.

Our research concentrated on in-reach nursing models, noting this delivery model was most successful given that it provided early intervention primary healthcare within a setting where clients were already comfortably accessing services.

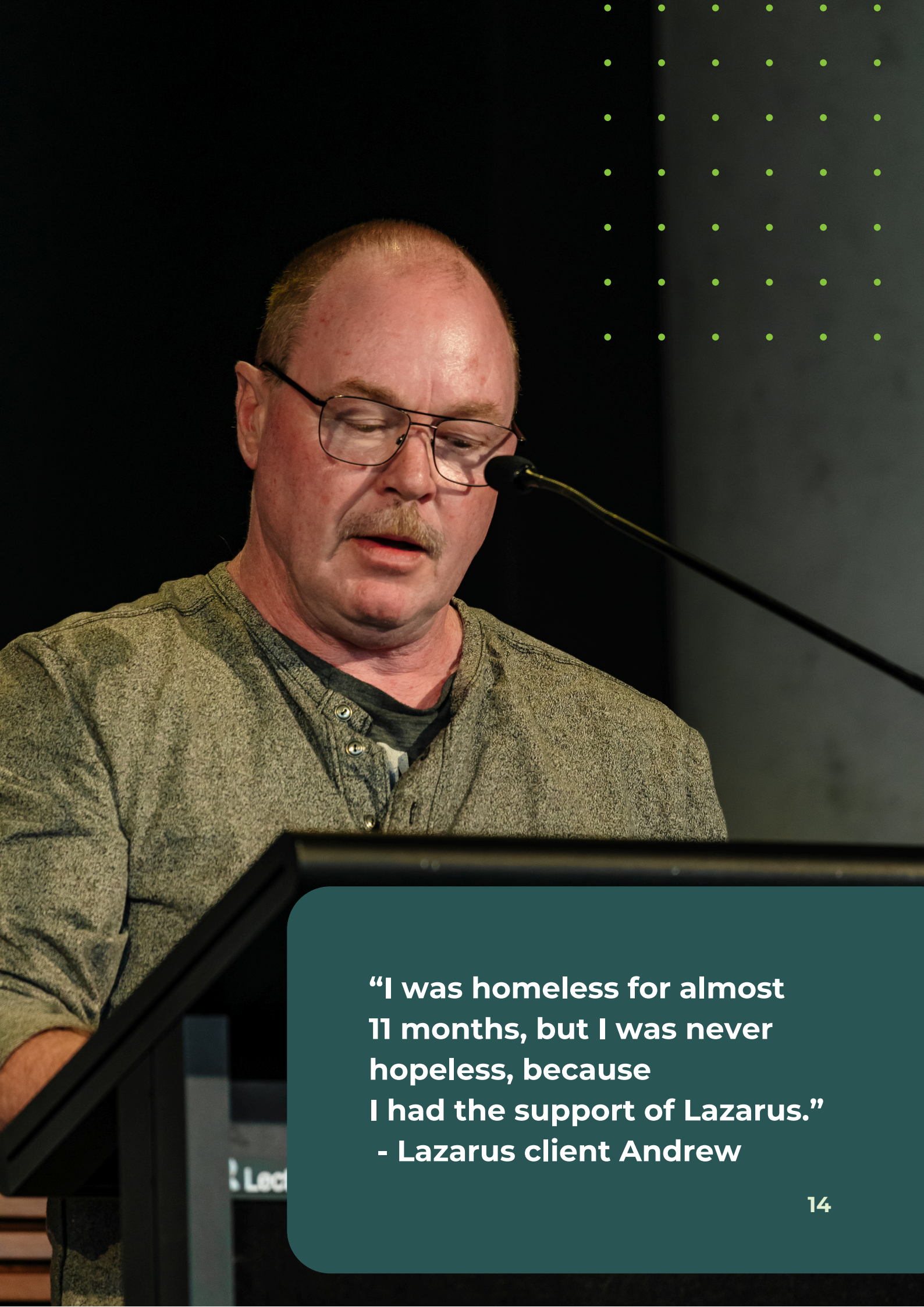
What is homelessness?

Homelessness is not defined simply by identifying a group of people in our community without sustainable places to live. It is not only the absence of shelter but also encapsulates a range of complex vulnerabilities, including a risk of homelessness, social isolation of people living alone, physical health issues, mental illness and disability.

How does being homeless impact engagement with healthcare services?

- People experiencing homelessness are at a higher risk of chronic diseases, infections, and mental health disorders (Australian Institute of Health and Welfare, 2024).
- People experiencing homelessness or social isolation also encounter challenges identifying the need for and accessing healthcare services due to stigma, lack of transportation, and the transient nature of their lives. This was prevalent in the Commonwealth Parliamentary Inquiry into Homelessness submission (June 2020) by Bolton Clarke where it was identified that “being homeless decreases the likelihood of accessing appropriate care due to complex need, exclusion from services based on program criteria or inflexible methods of service delivery’. Additionally, public (and professional) perception of homelessness can be a significant barrier to seeking services.
- Within the literature, those experiencing homelessness reported being labelled, stigmatised, and not being treated as individuals with unique needs when trying to access health and social care. Many mainstream services lack an understanding of homelessness, and do not recognise the notion of extreme exclusion as a form of homelessness.
- Research also identified the frequent use and over reliance on public GP services, and at times public hospital presentations were the first source of support. Building a warm referral to a local GP (potentially a private GP who is prepared to offer a Bulk Billing service) came highly recommended as ‘access to GPs willing to work with complex clients and who are flexible and non-judgmental are essential.” (Commonwealth Parliamentary Inquiry into Homelessness, 2021)
- Homeless persons have multiple, often complex, health care needs (Stenius-Ayoade et al., 2017, Nikoo et al., 2015, Queen et al., 2017 in Roche et al., 2018) and often use acute health services at high rates (Moore and Rosenheck, 2017). The provision of primary health care to this population has the potential to improve health and reduce costs (Mitchell et al., 2017 in Roche et al., 2018)
- Nurses have a key role in the organisation and provision of available, approachable, and affordable care (Savage et al., 2008, Khanassov et al., 2016 in Roche et al., 2018).

The complete literature review and key findings are included in the operating model.



**“I was homeless for almost 11 months, but I was never hopeless, because I had the support of Lazarus.”
- Lazarus client Andrew**

Similar service providers

In Geelong, several organisations including Lazarus Community Centre, provide essential services to the homeless and socially isolated population. Services include; emergency accommodation, food relief, case management, social connection and mental health support.

However, gaps still exist, with many traditional healthcare services not tailored to meet the unique needs of at-risk individuals who may require access to timely and flexible medical care.

The Project Team identified two organisations with similar functions and operating models that Lazarus could refer to in order to replicate aspects of their service delivery. The organisations were Salvation Army 614 and Ozanam House. Particular attention was given to their healthcare models, including their in-reach nursing service delivery.

Salvation Army 614 (in conjunction with St Vincents Hospital) – service provider visit

An initiative between the Salvation Army and St Vincents Hospital initially started as a three-year pilot funded by St Vincents Health Australia's Inclusive Health Program in 2018. This in-reach/out-reach program, primarily ran out of the Magpie Nest Café and was delivered by nursing staff from Bolton Clarke, operating 4 days a week. The service concluded at the end of the pilot.

In April 2024 the Victorian Premier announced a Statewide Action Plan to Save Lives and Reduce Drug Harm. The plan includes a Community Health Hub which is a partnership with Co-health and will deliver a wrap around service at Salvation Army 614 providing medical, nursing and mental health supports.

The Salvation Army Melbourne Project 614 (Project 614) consists of a team of staff and volunteers based in the City of Melbourne, who are passionate about working with those living on the city fringes experiencing homelessness and similar vulnerabilities. The team aim to address homelessness, or risks associated with homelessness, mental health concerns, addiction, and social poverty.

Connecting with hundreds of people each day, the program works to achieve positive outcomes for clients.

At the heart of the service is the Magpie Nest Café which is a welcoming community café run with table service. It provides free breakfast, lunch and dinner, as well as support to people from all walks of life, especially those living on the margins of society. People can also access clothing and bedding and do their own laundry.

The Café's primary purpose is about building relationships. Melbourne's Project 614 offers crisis support and intervention, information, practical assistance and importantly, ongoing support for people in crisis.

The Project 614 Community Hub gathers a range of allied services to use the space. Services involved in the Community Hub include Ambulance Victoria, Hearing Australia, Salvation Army Greenlight, St Vincent's Hospital Melbourne and Victoria Police Proactive Policing Unit. Project 614 also have staff available from Centrelink and National Disability Insurance Agency to assist clients.

Similar service providers

Ozanam House – service provider visit

Ozanam House accommodation and Homelessness Resource Centre provides flexible accommodation options as well as health and wellbeing services in North Melbourne for people experiencing homelessness.

The Homelessness Resource Centre is a purpose-built service that provides a health platform, support services, café, meal program and activities for people aged 18 years and over. It also provides showers and laundry facilities.

The team of staff, volunteers and peer support workers provide safe and supportive health and wellbeing programs.

The Centre delivers a range of allied health services including an optometry and dentistry clinic, volunteer GP clinic and a nurse clinic provided by Bolton Clarke Homeless Persons Program. It also includes other programs such as:

- alcohol and other drugs
- women's program
- visiting Centrelink service
- visiting legal service.

The role of in-reach nursing services

In-reach nursing service models in operation throughout Victoria integrate healthcare professionals directly within community centres.

This makes healthcare more accessible to service users in an environment they are familiar with and where they have built social connection and a trusting relationship with an organisation. With the complex needs of those experiencing homelessness and other at-risk individuals, access to immediate care, preventive health education, and chronic disease management is vital.

Using this model, Lazarus could be a tangible conduit between vulnerable members of society and primary healthcare.

Key benefits of in-reach nursing services:

- **Accessibility:** Providing medical care on-site eliminates barriers related to transportation and health literacy.
- **Holistic care:** In-reach services can address physical, mental health and disability needs through a model of integrated service delivery and a diverse referral network.
- **Trust building:** Nurses who work consistently within the same environment can develop trusting relationships with clients, encouraging them to engage and reengage in ongoing healthcare.
- **Alleviates burden on acute services:** primary care options alleviate burdens on acute healthcare services such as emergency departments and ambulance services.

Benefits of an in-reach nursing service at Lazarus Community Centre

The success of co-located in-reach nursing services at Salvation 614 and Ozanam House, and the various research articles cited in our literature review support the notion that an in-reach nursing service at Lazarus Community Centre would deliver the following core benefits for vulnerable people across the Geelong region:

Advantage	Explanation
Treat small wounds before they become serious health concerns	<ul style="list-style-type: none"> • Enables clients to seek treatment for small wounds (burns, bites, etc) before they develop into more serious conditions requiring extensive clinical treatment and long recovery times. • Reduces the burden of more acute concerns on other healthcare services including emergency departments and ambulance services.
Offers easy access for transient people	<ul style="list-style-type: none"> • Clients have access to healthcare when and where they need it. • Prevents lengthy delays for appointments and transportation requirements. • Provides referral to other services clients may need for example mental health, podiatry, GP.
Provides care in a safe setting	<ul style="list-style-type: none"> • Provides care in a familiar setting where people feel safe. • Fosters trust and positive relationships between clients and caregivers. • Reduce any mistrust that homeless and at-risk people can have of clinical settings.
Access to free service	<ul style="list-style-type: none"> • Clients can access a service without being out of pocket. • Removes additional out of pocket costs such as travel and material aid.
Improves health literacy	<ul style="list-style-type: none"> • Clients can access health and education programs.

Partnerships and collaborations



The project team met with nine different organisations that currently work with homeless people and those at risk of homelessness in Geelong. The meetings aimed to:

- gain an understanding of the services,
- explore opportunities to establish referral and support pathways and
- inform the organisations of the intent to pilot an in-reach nursing service at Lazarus.

All keenly understood the challenges homeless people experience in our area and identified that this service was a missing link in the overall service provision offered in Geelong.

The team also appreciated the time provided by Christine Couzens MP, Dr Sarah Mansfield and Ella George who all expressed a genuine passion and interest in the work done at Lazarus.

Lazarus staff and volunteers

Lazarus staff and volunteers were interviewed during the discovery phase of the project. The vast majority of those interviewed supported the idea of an in-reach nursing service.

From the staff and clients interviewed, the vast majority supported the idea of an in-reach nurse. They identified that clients often present with relatively superficial wounds such as cuts, bruises and burns and that these presentations could be more appropriately dealt with by a qualified nurse.

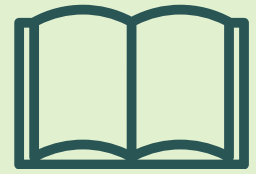
An in-reach nurse could also assess a client's general health (blood pressure check,

temperature, etc.) and identify any other areas of concern.

The project team interviewed a small number of Lazarus clients (14% of the daily clientele) who supported the introduction of nursing support on site at Lazarus. Presently, clients indicated they try to manage their own health care independently or simply 'go to the hospital.' An onsite nurse could effectively eliminate the risk and costs associated with such an approach on both the individual and at the societal level.

Consultations

Bolton Clarke



Formerly the Royal District Nursing Service Vic

Bolton Clarke supply aged care, in home support and homeless outreach nursing services.

Bolton Clarke's Homeless Persons Program (HPP) was established in 1977. It aims to promote the health of individuals and families experiencing homelessness, or at risk of homelessness, by developing an understanding of homelessness and health issues which may be physical, mental, or psychosocial. It also aims to develop an understanding of the current responses to homelessness and health in Australia.

The program is underpinned by The Social Model of Health and Primary Health care principles- the structure inequalities known as Social Determinants of Health which in our society impact upon people's life path. As a result, people experiencing homelessness are disadvantaged.

The team provide a primary health care response (outreach) to people on the streets, in parks, at food programs, low-cost hotels, boarding houses, caravan parks or living in crisis accommodation.

The program offers professional nursing care and support.

It can help locate organisations that can assist with housing and meals, or legal and financial aid.

Bolton Clarke nurses deliver outreach as well as being embedded in co-locations across Melbourne.

Bolton Clarke Homeless Persons Program work collaboratively with multiple community organisations including: Co-health, The Salvation Army, Launch Housing, NEAMI, McAuley House, Jesuit Social Services, Hope Street, Anglicare, IPC Health, Community Care Connections, Vincent Care Ozanam House, Community care Frankston and Southern Peninsula Community Services.

In the Southwest Barwon region Bolton Clarke has one nurse delivering outreach services to people who are homeless or are at risk of homelessness.

Key insights:

This information has helped to inform how a pilot in-reach nursing service could be delivered at Lazarus Community Centre and has been embedded in the Operating Model design.

Consultations

Neami National



Neami National provide mental health and wellbeing services to help people improve their quality of life in ways that are important to them.

Neami's integrated support works to prevent homelessness by helping people find and keep long-term and safe housing. They provide an assertive outreach program and housing support service that work together to meet a person's needs.

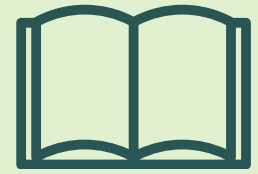
The Neami Towards Home+ Geelong program provides intensive support for people who are currently rough sleeping in the Geelong area. The service is delivered by a multidisciplinary team.

A Neami nurse provides nursing support under the Towards Home Plus outreach service at Neami Geelong.

Key insights:

Neami Towards Home+ is an important outreach service assisting rough sleepers and homeless in the Geelong region.

We see an in-reach nursing service delivered at Lazarus complementing the existing out-reach service delivered by Neami.



Consultations

Barwon Health

Barwon Health

Barwon Health, the largest healthcare provider in the Barwon South West region, was identified early by the project team—and reaffirmed during the Project Governance Panel review—as a crucial partner for the success and sustainability of the in-reach nursing service at Lazarus

The project team engaged with Executive Director and Chief Strategy and Planning Officer Anna Burgess, along with Director of Community Health Programs Christopher McCormick.

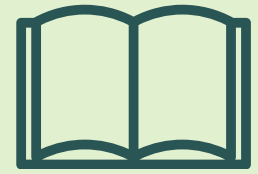
Both leaders expressed strong support for the initiative and have generously offered their expertise and resources to ensure the pilot program's successful implementation once the building project is complete.

Understanding the services provided by various areas of Barwon Health and engaging them with an in-reach nursing service at Lazarus enables a warm handover of clients to receive more complex support that is outside the remit of the in-reach nursing service.

Key insight:

As a key recommendation of this project, a comprehensive report on the pilot program will be provided to Barwon Health to solidify this essential partnership.

Consultations



Barwon Health Homeless Outreach Psychiatric Service

The Barwon Health Homeless Outreach Psychiatric Service provides support for people with a severe mental illness who are homeless or at risk of homelessness.

Services include outreach and consultation for case managed clients of Barwon Health, aged 16 to 65, as well as secondary consultation and assessment for the Barwon housing and homeless support service.

Key insights:

There is an opportunity to establish more formal referral pathways through existing triage processes.

This will contribute to the success of the pilot-in reach nursing service.

Barwon Health Drugs and Alcohol Service

Barwon Health Drugs and Alcohol Service is a community-based service for people living in the Barwon region. It has two main areas of service provision.

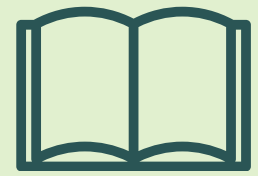
- Alcohol and Other Drug Treatment which includes counselling, non-residential drug withdrawal support.
- Harm Reduction Services (HRS) which aim to reduce the harm associated with the use of alcohol and drugs. This includes Needle Syringe Program, education and training to consumers, friends, and families about how to recognize and respond to opioid overdose. The HRS has several project arms which aim to reduce the likelihood of overdose in the region. They focus on developing partnerships, capacity building and community development initiatives.

Key insights:

The Barwon Health Drug and Alcohol Harm Reduction Service provision is an important service provided in the Geelong Community.

Prior to COVID it offered outreach at Lazarus Community Centre and delivered training and education to Lazarus volunteers and staff. Exploring the opportunity to reestablish a partnership with the service will support the delivery of an expanded in-reach service.

Consultations



Western Victoria Primary Health Network

Western Victoria Primary Health Network (WVPHN) was established in July 2015 by the Commonwealth Government to work with the primary care sector to improve health outcomes for our communities. They are one of 31 Primary Health Networks in Australia and one of six in Victoria. WVPHN is a not-for-profit, membership-based organisation that support the delivery of patient-focused primary care services to people across our region including people experiencing or at risk of homelessness.

WVPHN has recently finalised a co-design process to develop support solutions for delivering primary healthcare services to people experiencing or at risk of homelessness across western Victoria. The Homelessness Access Program: Creating new bridges to primary healthcare to help address current service gaps.

As part of their research to design the Homelessness Access Program and published in the WVPHN Needs Assessment 2023 update, WVPHN identified the City of Greater Geelong has the highest number of people experiencing homelessness in the WVPHN region.

In April 2024, the Commonwealth Department of Health and Aged Care released a grant opportunity to support primary care access for

people experiencing homelessness and those at risk of homelessness.

The Homelessness Access Program will commission pilot programs across Western Victoria designed to support people experiencing homelessness or at risk of homelessness by improving access to primary care services and removing barriers and reducing stigma.

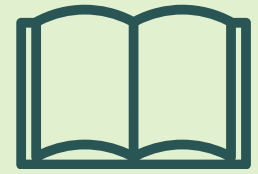
In early August 2024 WVPHN announced a new health clinic will be trialed in central Ballarat from late 2024 specifically for people experiencing or at risk of homelessness. The service aims to help break down barriers and improve access to health care and well-being. WVPHN appointed Ballarat Community Health to coordinate the clinic in partnership with Uniting VICTAS. The clinic will be based at Breezeway, the multidisciplinary hub run by Uniting Care. Various services will be provided including podiatry services, mental health support and access to a nurse to provide services for health and wellbeing needs.

A critical feature of the service model is to establish a multidisciplinary approach to improve access to primary care services. To successfully deliver this, it is imperative that community services supporting this vulnerable group collaborate and integrate services.

Key insights:

As an established community-based support service for Geelong people who are homeless or at risk of homelessness Lazarus is an important stakeholder to successfully deliver a multidisciplinary hub by removing barriers to accessing a range of primary care services. The pilot in-reach nursing program aligns to this service model. Findings and lessons learned from the Ballarat model can inform service delivery at Lazarus.

Consultations



Ambulance Victoria Operational Community Engagement

Ambulance Victoria Community and Consumer Engagement services connect with the Victorian community through a range of innovative and targeted campaigns.

They design and deliver engagement and education programs across Melbourne Metro and regional and rural Victoria to build community resilience and improve health outcomes for all Victorians. These include education about CPR and accessing community defibrillators and building awareness about alternate care pathways like the virtual Emergency Department or Primary Health Network clinics.

They establish and maintain positive relationships with key stakeholders and partners to enhance the understanding of the role of Ambulance Victoria in the community.

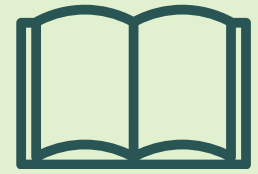
Key insights:

We recognize that there are barriers to accessing mainstream services for vulnerable people.

Establishing a relationship and partnership with the Barwon Southwest Ambulance Victoria Community Engagement team is important for the success of the pilot in-reach nursing service at Lazarus.

There is also an opportunity for Ambulance Victoria to attend Lazarus and provide training and build awareness about their role and alternate care pathways and to educate local Ambulance Victoria staff and paramedics about the services provided at Lazarus.

Consultations



The Salvation Army

Homelessness Persons Program – Barwon region

The Salvation Army provides a range of homelessness services specific to adults and families, including accompanying children.

This includes accommodation, case management services, advocacy, limited financial assistance, counselling and meals, as well as connection and referral to other specialist services.

For the Barwon region the Salvation Army is the entry point for adults. Meli is the service supporting youth and Wathaurong support First Nations people.

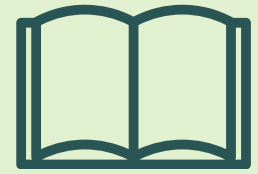
Depending on the support a person needs they may be referred to access different forms of accommodation.

Key insights:

Whilst the Salvation Army and Lazarus Community Centre provide a different service offer, they both support mutual clients. Establishing a close partnership and referral process between each service will be important to the success of the pilot in reach nursing program at Lazarus.

The Salvation Army have also identified a need for a primary care response for clients in the region. They support the intention to have a service available to clients where they are already accessing services, rather than needing formal engagement with medical clinics or hospitals and have offered to support an in-reach pilot with the compilation of referral data.

Consultations



Youth Support and Advocacy Service

Youth Support and Advocacy Services (YSAS) has various services around Victoria. Geelong is host to a residential withdrawal service for young people aged 12 – 25 years of age who are withdrawing from problematic use of drug/alcohol.

It is a mixed gender facility, and clients often suffer from coexisting mental health conditions, some also are navigating homelessness or are at risk of being homeless.

Partnership and collaboration with local agencies, especially key agencies dealing with homeless, is part of the YSAS post withdrawal treatment plan.

Key insight:
YSAS provided insights into their processes and procedures, particularly managing risk which have been captured in our operating model and recommendations.

Victoria Police Geelong

The Geelong police have a dedicated Homelessness portfolio currently carried by Paul H Simpson.

Geelong police and Lazarus currently share an informal support arrangement. They communicate frequently and appropriately support Lazarus in escalating situations.

Outside of Lazarus and other support centres, Geelong police assist many vulnerable people including 'rough sleepers' and link them to appropriate services in Geelong.

Geelong police are partnering with Barwon Health's Emergency Mental Health Service via the Pacer Unit which is based at the Geelong Police Station. A Mental Health Clinician and a police officer attend to mental health emergencies.

Key insight:
Geelong police will continue to support Lazarus during the pilot and potential implementation stage. In future, connection with the Pacer Unit, sharing de-identified information among agencies will be a great asset to inform insights for stakeholders.

Understanding the client



Mapping the environment and journey

Using information gathered from consultation with Lazarus clients, volunteers, staff and local stakeholders, we applied a human-centered approach to understand the client experience and ecosystem they need to navigate.

The detailed information is provided in the operating model shared with Lazarus Community Centre including:

- Lazarus client personas
- Future state client journey map
- Mapping of client ecosystem





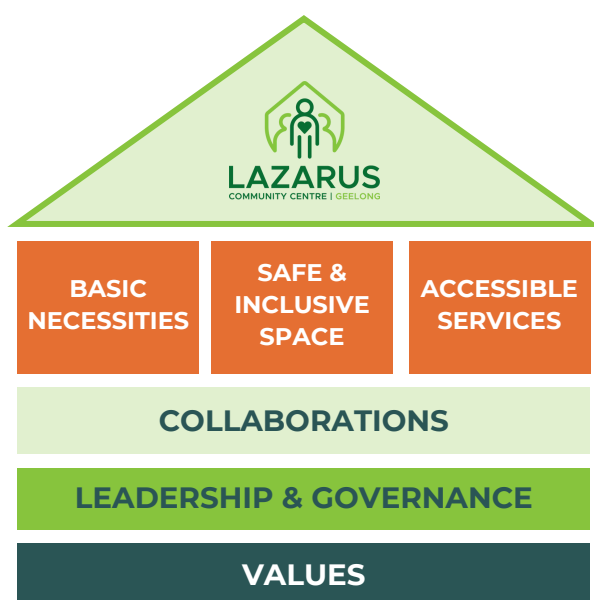
**‘It’s not up to a client to engage with us, we need to engage with the client, making ourselves present in the space and slowly developing a rapport of trust.’
- Rachel Cutler, Bolton Clarke**



An in-reach nursing operating model

The operating model was developed to enable Lazarus to pilot an in-reach nursing service. It is informed by lessons learned through the discovery phase, literature review, model assessment and consultations.

The model defines key considerations and actions required to successfully implement an in-reach nursing service. The key considerations include:



- Governance and operating procedures
- Flexible workforce
- Funding options
- Community partnerships
- Risks and mitigation strategies
- Location and equipment required to create a safe space to deliver the service
- Nursing service scope and operations.

The detailed in-reach operating model, evaluation framework and supporting document has been provided to Lazarus to support the implementation of the pilot program.

THREE PILLARS CRUCIAL TO THE SUCCESSFUL OPERATIONS OF ACCESSIBLE SERVICES AT LAZARUS

PILLAR 1: HAPPY PEOPLE

With the introduction of a pilot in-reach nursing service it is important to involve clients, volunteers, staff and stakeholders on the change journey.

PILLAR 2: WORKING TOGETHER

Strong, long-term partnerships with other organisations is essential for establishing robust, warm, and direct referrals that minimise waiting times and access barriers.

PILLAR 3: PLANNING FOR THE FUTURE

Strategic foresight and adaptability is essential to securing Lazarus' impactful legacy and in preparing for future challenges faced by the homeless and at-risk population.

Recommendations

The following recommendations are based on the understanding of Lazarus's operational environment and the implementation of the in-reach nursing program.

Short term recommendations:

No.	Action
1	<p>Lazarus implement the nursing service pilot</p> <ul style="list-style-type: none">• Using the Operating Model, plan to implement a 6 month pilot in-reach nursing service at Lazarus Community Centre.• Build on the warm referral pathways established as part of the research and consultations with local stakeholders.
2	<p>Evaluate pilot</p> <ul style="list-style-type: none">• Build on the existing evaluation framework and identify metrics to provide evidence for future scalability/expansion.• At the conclusion of the pilot identify elements of the service that performed well and areas where improvements need to be made.• Utilise data collection offered by Salvation Army to inform referrals to presentation statistics (evidence building).
3	<p>Establish recurrent funding arrangement to operate nursing service</p> <ul style="list-style-type: none">• Explore the opportunity to partner with Bolton Clark, subject to Home and Community Care Program Victoria (HACC) funding outcomes currently under assessment, to continue nursing service or other similar service support organisations such as Barwon Health.

Recommendations

Longer term recommendations:

No.	Action
4	<p>Continue to formalize local health partnerships</p> <ul style="list-style-type: none">Continue conversations with Barwon Health to support Lazarus with the provision of primary healthcare nurses and allied health resources. This includes sharing the detailed report and operating model.
5	<p>Continue to pursue opportunities to engage with WVPHN and homeless peoples support networks</p> <ul style="list-style-type: none">Existing networks operating in the Barwon area may offer many more opportunities for Lazarus to engage with other organisations to deliver either additional services or source support for the continued operation of existing services.
6	<p>Explore opportunities for other in-reach support services to operate from Lazarus</p> <ul style="list-style-type: none">Explore opportunities to deliver additional services from within the Lazarus Centre, including diabetes education service and podiatry and continue the optometry service provided by OneSight Foundation.
7	<p>Monitor medical services, political landscape and other changes in services in the Geelong region.</p> <ul style="list-style-type: none">Identify emerging opportunities to support the in-reach allied health services that could be delivered at Lazarus.

Other opportunities:

8	<p>Expansion of volunteering models – corporate and individuals</p> <ul style="list-style-type: none">As outlined by 2023 Leaders for Geelong Report implementing a corporate volunteering program would be key factor in the success of other drop-in support services.Implementing a corporate volunteering program at Lazarus would support an expanded in reach service model and has potential to be a future Leaders for Geelong project.
9	<p>Continue to foster existing relationships to drive unified support and collaboration in the region.</p> <ul style="list-style-type: none">Consider engagement with the Geelong Zero project, a community led initiative supported by Neami National.



**“We need to stop band-aiding homelessness and look for longer term solutions”
– MP Christine Couzens**

Challenges

The team wish to acknowledge how generous community partners, and the Lazarus team and clients have been with their time and information. The project team notes the following challenges and limitations identified during the journey:

Project Champion turnover-
unanticipated departure of Project
Champion, Lazarus Community Centre
General Manager

- The team proactively approached the Board to identify a new Project Champion and to establish and build a relationship and their understanding of the existing project. The team maintained strong communication including progress updates and involved the Project Champion where appropriate in stakeholder discussions to support a sustainable relationship with potential partners and networks.

Staff and Volunteer engagement

- Lazarus underwent a period of uncertainty with the departure of the General Manager and the pending building works (due to start before the end of the 2024 calendar year).
- Being mindful of the current and additional impact of prospective change on staff, volunteers and clients, team members approached any conversation regarding this pilot in-reach nursing service with sensitivity.

Collaboration amongst existing
providers and stakeholders

- Willingness to collaborate and share information across interconnected stakeholder groups was identified during our consultations. This project facilitated a greater understanding of each service providers' strengths and experiences and identified further opportunities to collaborate.
- The project team commends the planned service mapping activity to be commissioned by the WVPHN, to further clarify existing services and opportunities to collaborate.



Limitations

Engagement of stakeholders limited due to timing of project deliverables

- As the team connected with more service providers, we were made aware of additional organisations that could support the service provision and particularly the broader use of in-reach nursing services in their organisations within the Geelong Community. The warm referral pathway identifies service providers, and the team acknowledges that this network could be expanded.

Managing Expectations and Sustainable Service Delivery

- The mention of an In-Reach Nurse meant many things to many different stakeholders. In our interactions with all involved, we were clear to identify that the service provided by the in-reach nurse would be limited to first aid wound care, general health assessments and education and warm referrals.
- Similarly, the risk of the service becoming over utilised was considered and is identified as a risk to be managed as part of the pilot program. The recommendations also identify using the Bolton Clarke statistical information gathering to inform future service delivery of this model.

Limited Examples of Existing Model of Service

- Limited models of existing service delivery of this nature were identified during our exploration.
- Significant time and fiscal investment is required to build a similar service at Lazarus.

The team have delivered an operating model that scales back that model to suit the needs and capability of Lazarus Community Centre.





Team reflection

With varied backgrounds, the project team each brought unique lived experiences of either working with, or supporting members of our community who are at-risk.

Having the opportunity to participate in the Leaders for Geelong program was not only about our professional development – it was also about learning more about the Geelong region and giving back to the community. Whilst we were aware Geelong was experiencing a spike in homelessness, people being at risk of homelessness, and facing other increasing disadvantages, we had limited appreciation of the extent of the situation.

Learning about Lazarus and other organisations that support homeless or at-risk people has been such a powerful and moving experience. It has inspired us to help drive change and better support people in need. During the course of the project, we have been able to raise awareness about Lazarus and the current service gaps in the region to support the homeless and those who are at risk with their multi-layered needs.

This is just the beginning of a long journey. In Geelong, it is clear there is a collective vision to help improve the lives of the vulnerable, but there is a real opportunity to adopt an integrated approach by strengthening connections and partnerships across the different services.

We are truly blessed to have the opportunity to work with such a multi-disciplinary, talented, inspiring, fun and diverse project team. We have put in many hours of work, leaned on each other's strengths, challenged ourselves and each other and supported one another to develop our leadership skills.

Most importantly, from the beginning we made a strong connection and shared a collective vision that has remained at the core throughout our project.

Conclusion

By addressing the barriers to healthcare access faced by this vulnerable population, the in-reach nursing service can prevent minor health issues from escalating.

The development of an operating model for a pilot in-reach nursing service at Lazarus Community Centre holds significant potential to transform health and wellbeing outcomes for at-risk individuals in the Geelong region.

Through extensive research, consultations, and partnerships with key stakeholders, the project team has identified the critical need for accessible primary healthcare support and early intervention for homeless and at-risk individuals.

The operating model that we have prepared for Lazarus provides a roadmap to implement and evaluate a pilot in-reach nursing service, with recommendations for sustainability and future expansion.

By addressing the barriers to healthcare access and stigma faced by this vulnerable population, the in-reach nursing service can prevent minor health issues from escalating, alleviate pressure on acute health services, and ultimately improve the overall well-being of individuals in need.

The commitment, collaboration, and dedication of the project team, stakeholders, and community partners has laid a solid foundation for the success of this vital initiative to ultimately inform a future wrap around allied health service.



Glossary of terms



The following definitions are used within the context of Lazarus Community Centre report and operating model.

- At-risk: Individuals who are at risk of homelessness, losing their accommodation, or requiring other support and services due to any risk factors or triggers.
- Evaluation framework: The parameters and criteria used to review and assess other in-reach service models.
- In-reach: a visiting service provided from a location or service context which is most suitable and safe for participants. This may avoid the need for a person to travel to access that service and reduces the risk of acute presentations.
- Lazarus' people: 'People' at Lazarus includes:
 - Clients
 - Board members
 - Centre manager
 - Hired/paid duty managers or 2ICs
 - Volunteers
 - Visiting services and clinicians
 - Stakeholders and partners
- Operating model: A documented representation of how Lazarus can deliver a pilot in-reach nursing service.
- Supportive resources include:
 - Infrastructure
 - Financial
 - People
 - Technology
- Warm referral: A facilitated referral that supports a client to navigate the service system. A warm referral extends beyond a letter of introduction or providing instructions and may include the provider calling on behalf of the client or providing information to the service with the client's consent. It entails the originating service provider making contact with intended service provider to introduce a client and provide information about the client's circumstances, needs and recommendations for support to facilitate the transition of services to a more appropriate system of service. This means the client only needs to tell their story once and reduces the pressure on them to keep explaining and justifying their needs.

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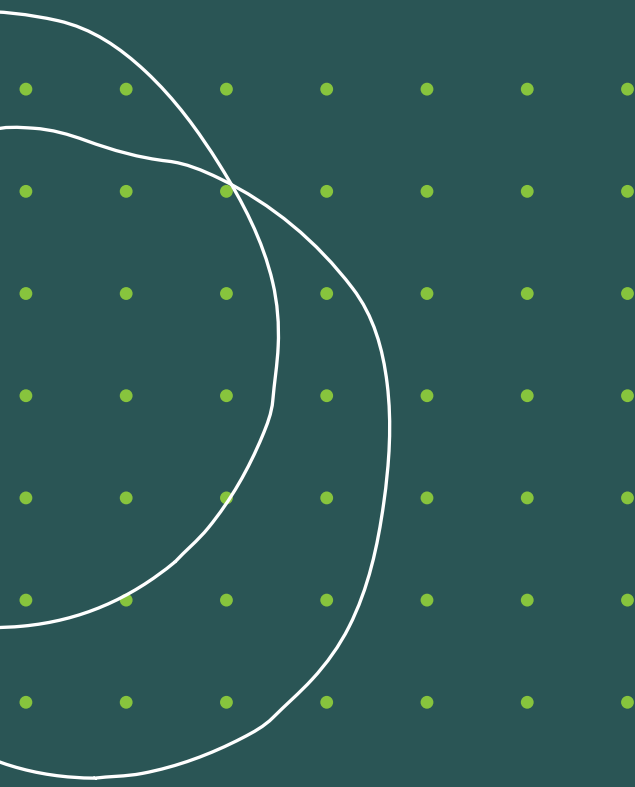
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LAZARUS
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**2024 Leaders for Geelong
Developing an In-Reach
Nursing Operating Model for
Lazarus Community Centre**

