
CONFERENCE ABSTRACT

An Urban Partnership for Inner Sydney Social Inclusion, Health and Well-being

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Inner City Sydney, the catchment area of St Vincent's Health Networks (SVHN) Inner City Health Programme, is populated by people who represent the highest and lowest social deciles in Australia. In common with other inner city environments around the world, the latter are characterised by high levels of homelessness, addictions and mental illness. Challenges for health and social services to coordinate care and meet the needs of vulnerable people of this demographic is complicated by surges of population relating to the central business district, tourists, backpackers, thrill seekers and those with nefarious intent.

The catchment area is well served by a number of excellent general practices and non-government organisations. However as a result of the interweaving psychosocial factors and a lack of formal service coordination between community managed organisations and SVHNs Specialist Services, Housing and Family and Community Services, the SVHN Emergency Department has the highest number of mental health and drug and alcohol presentations, the highest throughput of patients through the lowest number of mental health beds and the lowest average length of stay in the state of New South Wales. Given these presentations are increasing at between 2-4% per year and the health and social care resource base is being reduced, a situation is evolving which is unsustainable in terms of consumer safety and quality of life.

To address these issues an initiative to establish an integrated care network, the Inner Sydney Urban Partnership for Health and Well-being (UP) is being developed to jointly assess need, plan and integrate service delivery (especially physical health with psychosocial care), share and increase the resource base, research and evaluate developments and promote person centred, recovery oriented care.

The process and challenges of developing the Partnership is described and explored referencing the engagement of providers, consumers and carers, a radical vision for transforming the ethos and practical realities of the existing system, the contextual challenges extant in Australia's and NSW policy and funding framework (including the Roadmap for Mental Health Reform, National Disability Insurance Scheme and Activity Based Funding) and progress made to date with developments.

Finally consideration is given to how the Urban Partnership is positioned with regard to other international integrated care initiatives and the 4th wave of deinstitutionalisation.

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Keywords: integration; psychiatric; addiction; homelessness; recovery
