

**SACRED**  
**HEART**   
**MISSION**

**SERVICE MODEL**

**OUR VISION IS OF AN INCLUSIVE,  
FAIR AND COMPASSIONATE  
COMMUNITY WHICH ENABLES PEOPLE  
TO OVERCOME DISADVANTAGE AND  
REALISE THEIR  
FULL POTENTIAL.**

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# INTRODUCTION

Sacred Heart Mission works with people whose capacity to participate fully in community life is affected by deep, persistent disadvantage and social exclusion.

Our vision is of an inclusive, fair and compassionate community which enables people to overcome disadvantage and realise their full potential.

The Mission Service Model describes an integrated, specialist response for people who are experiencing a range of complex issues such as;

- *homelessness*
- *chronic health conditions*
- *mental illness*
- *long term unemployment*
- *social isolation*
- *substance abuse*
- *trauma*

It brings together over 30 years of specialist service delivery and the latest evidence for effective interventions to address long term homelessness and disadvantage.

The Mission understands that a complex interrelationship exists between trauma exposure, homelessness, mental health and social disadvantage.

To respond effectively, our work is characterised by reliability, trust, hope for change and perseverance. These qualities are the building blocks upon which our clients can work towards achieving their potential.

This document describes the key elements of The Mission's Service Model. The Client Consultation Group provided input into the preparation of this document.

Case studies and client comments are included throughout.

# SACRED HEART MISSION SERVICE MODEL

**Mission**

Building people's capacity to p  
underlying causes of de

**Service Users**

Our work assists people who are experi  
health conditions, mental illness, long te

**Values**

Welcome

Community

**Approach**

Individualised a

**Service Types**

Access

Identify

Engagement Hub

**Service Outcomes**

Sustained Housing

Health & Well-being

participate more fully in community life by addressing the deep, persistent disadvantage and social exclusion.

experiencing a range of complex issues, such as homelessness, chronic long-term unemployment, social isolation, substance abuse, and trauma.

**Challenge**

**Accountability**

**Innovation**

and Trauma Informed Practice Framework



Individualised Planned Support

On-going Support

Service Partnerships

**Independence**

**Social Participation**

**Economic Participation**

# SERVICE MODEL ELEMENTS

The key elements of The Mission's Service Model are:

## **Service Approach:**

A commitment to delivering trauma informed and individualised services that are supported by organisation wide practice frameworks and the development of a highly skilled workforce.

## **Service Types:**

Three distinct service types with clearly defined functions:

- *Engagement Hubs*
- *Individualised Planned Support*
- *Ongoing Support*

## **Service Processes:**

Consistent and integrated processes across the organisation that facilitate a seamless pathway for clients:

**Access > Identify > Plan > Service Response**

## **Service Outcomes:**

Client work that is outcomes driven and measured by an organisation wide Measurement and Evaluation (M&E) Framework.

## **Service Partnerships:**

The development of strategic partnerships that deliver individual outcomes and promote opportunities for organisational growth.



# SERVICE TYPES

The Mission offers a range of specialised programs which fall within three key service types:

## Engagement Hubs

The *Engagement Hub* services at *Sacred Heart Central* and the *Women's House* provide people with a safe space that is welcoming and supportive.

The *Engagement Hub* services provide access to the necessities of life – healthy food, a shower and laundry facilities, and medical assistance through our *GP Clinic*.

The *Hubs* also facilitate access to ongoing support through our Case Management services and/or referral to specialist services as required.

For clients with a limited social support network, *Engagement Hubs* provide a pathway out of social exclusion.

The *Hubs* are a place to build social connections and to link with professional service providers (such as lawyers, nurses and vets) or to range of health and wellbeing practitioners through our *Hands on Health Clinic*.

## Individualised Planned Support

*Individualised Planned Support* is an outcomes focused, time limited service response tailored to a client's situation.

In many cases, this will involve resolving a crisis situation such as addressing immediate homelessness and improving safety and wellbeing.

*Individualised Planned Support* is provided through our Case Management services at *Sacred Heart Central*, the *Women's House*, *Homefront* (Crisis Accommodation Service) and through the *Wellbeing and Activities Program*.

Intensive Case Management is provided through the *Women, Housing and Complex Needs Program* and the *Journey to Social Inclusion Project*.

## Ongoing Support

The Mission's Ongoing Support services provide a specialist service response for vulnerable members of the community, many of whom require a high level of support for an indefinite period.

Our *Home Care* service provides support for older residents to live independently in their own housing for as long as possible.

The *Rooming House Plus Program* and *Bethlehem Community* are supported residential services for people with complex needs including mental and physical health issues.

*Sacred Heart Community* provides a home for life in which older people can live in safety and rebuild social connections.

# SERVICE APPROACH

The Mission recognises that the existing service system can be rigid and difficult to navigate for people with multiple and complex needs.

Our approach is to provide an innovative and flexible service response that meets the unique needs of the individual.

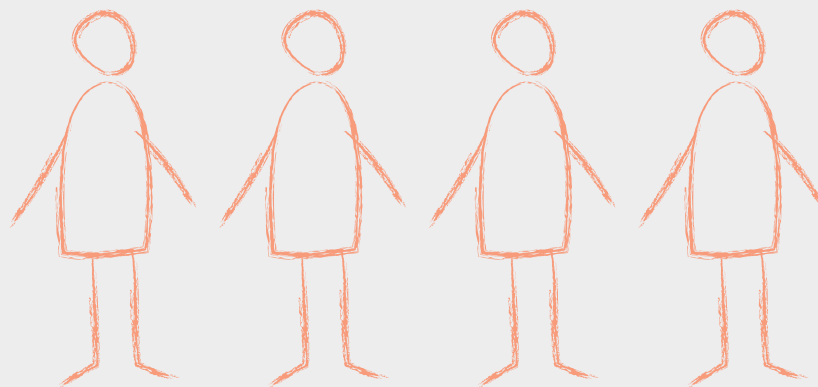
All support and interventions provided by The Mission are trauma informed, relationship based and individualised.

As a trauma informed organisation, we have a shared recognition of the impact of trauma, which informs and guides all of our interactions with the people who access our services. Staff, along with our volunteer workforce, are educated about the high incidence of trauma experienced by our client group and are provided with role appropriate training to ensure respectful responses to clients at all times.

In addition, client services staff undertake specialised training in Trauma Informed Care.

*Trauma-informed care is a strengths-based Framework that is grounded in an understanding of and responsiveness to the impact of trauma, that emphasizes physical, psychological and emotional safety for both providers and survivors, and that creates opportunities for survivors to rebuild a sense of control and empowerment*

*(Hopper, Bassuk & Oliver cited in O'Connell et. al, 2014).*



Comprehensive training and regular trauma informed supervision ensures that client services staff have a sound understanding of the impact of trauma and the skills to find innovative and creative responses to work effectively with this client group. Staff are also trained in self-awareness and strategies for self-care.

Trauma informed practice is attuned to the underlying drivers of people's reactions and has a focus on the development of more effective coping methods. Many of our clients have experienced loss and social disconnection throughout their lives.

Moreover, our clients' experiences of trauma are likely to have involved relationships characterised by serious abuses of power and boundary violations. This can significantly impact on a person's self-worth and the ability to trust others (including the service system) making it difficult for people to engage in support.

For this reason, trauma informed practice emphasises the importance of developing predictable and reliable client worker relationships and reinforces help seeking behaviour by attending to needs and concerns promptly.

## Frameworks

There are four key frameworks that support implementation of The Mission's Service Model.

The **Service Delivery Frameworks** describe how we work with clients to achieve their goals.

The **Service Improvement Frameworks** describe the feedback mechanisms by which we strive to continually improve our service delivery.

# SACRED HEART MISSION FRAMEWORKS

**Evidence Base**

Trauma and Homeless

**Service Delivery  
Frameworks**

**Outcomes**

Sustained  
Housing

Health and  
Well-being

**Service Improvement  
Frameworks**

SHM

SHM Mo

Business Research, J2SI, and Program Evaluations

SHM Service Model

SHM Practice Framework

Case Management Framework

Independence

Social  
Participation

Economic  
Participation

Client Participation Framework

Monitoring and Evaluation Framework

## FRAMEWORKS (CONTINUED)

### Practice Framework

This framework outlines best practice interventions for effective work with people experiencing multiple and complex needs. This document provides a detailed description of Trauma Informed Care and the key practice principles that underpin The Mission's work.

The Practice Framework draws on a range of evidence including the findings from two significant research projects initiated by The Mission. That is:

- *The Journey to Social Inclusion (2009– 2012); and,*
- *The Trauma and Homelessness Initiative (2014).*

### Case Management Framework

The Mission's Case Management Framework sets out a consistent process for supporting clients through the case management process, from engagement to exit from the service.

The framework emphasises the key elements of trauma informed practice at each stage of the case management process, along with clear guidelines on how to integrate client goal setting and outcomes measurement.



## Measurement and Evaluation Framework

The Mission has developed an organisation wide Measurement and Evaluation (M&E) Framework to facilitate a consistent approach for measuring the impact of our work.

The M&E Framework has been developed using a Program Logic methodology to describe The Mission's 'theory of change'. That is, how the activities undertaken in our programs and services lead to change for clients in the following areas:

- *Sustained Housing*
- *Health and Wellbeing*
- *Independence*
- *Social Participation*
- *Economic Participation*

These outcomes reflect that a multidimensional approach is required to support people to overcome deep and persistent disadvantage.

The capacity to obtain and sustain suitable housing is strongly influenced by a range of factors, including - physical and mental health, access to services, social connection, and the potential for meaningful contribution to society through social and economic participation.

Measuring client outcomes informs our practice and enables us to continually improve service delivery. Importantly, it also enables The Mission to demonstrate the impact of our services to the community and our funders; and to continue building an evidence base for effective responses that end long term homelessness and disadvantage.

## Client Participation Framework

The Client Participation Framework outlines the various client participation activities employed throughout The Mission.

These activities ensure that the views of our clients are represented in the planning and decision making processes that shape the way we deliver our services.

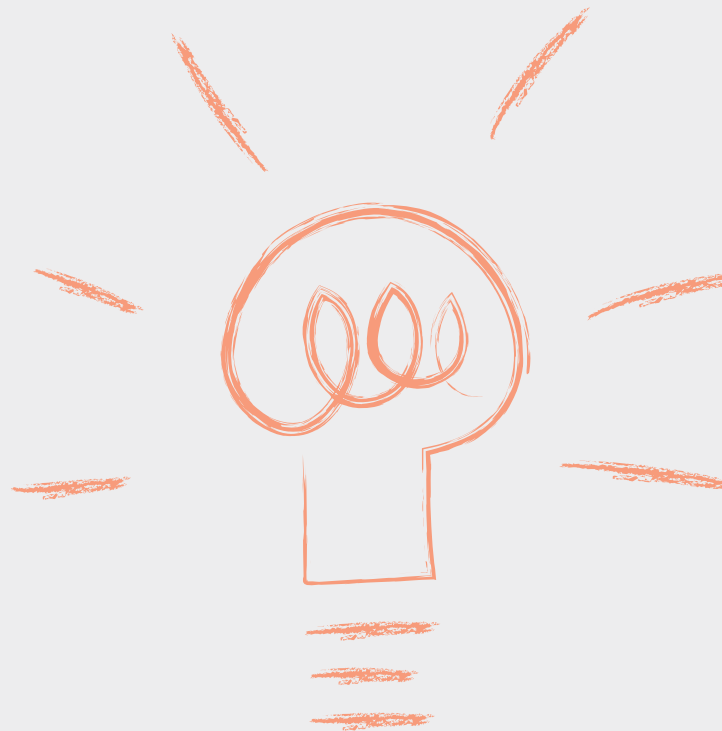
# PROCESSES

The Mission's Service Model promotes an integrated and consistent approach to service delivery across the organisation.

Integration across programs ensures clients receive the same service response irrespective of their point of access, and that they are not required to repeat their stories if they access more than one of The Mission's programs.

Service integration across The Mission's services is promoted by:

- *Obtaining organisation wide consent from clients requesting a formal service response. This involves asking clients whether they access any other of The Mission's services and explaining that information may be shared across program areas as part of their support plan.*
- *A strong team approach within and across program areas, with formal systems for sharing relevant information about clients.*
- *Establishing regular contact between key workers, when a client is accessing multiple Sacred Heart Mission services. This ensures a consistent approach and reduces duplication or 'over-servicing'. This may include the development of a Shared Response Plan.*
- *Having staff members in key roles focused on facilitating integration e.g. The ACHA (Assistance with Care and Housing for the Aged) role and the Mental Health Case Worker at Sacred Heart Central.*
- *Implementation of an integrated outcomes measurement framework with clear protocols for consistent data collection and reporting across program areas.*



Our Service Processes are aligned to the following key phases:

## **Access > Identify > Plan > Service Response**

### **Access**

People may initially engage with The Mission services via a referral from an external agency or through a centralised intake system. All clients who access The Mission services are informed about the full range of services offered by The Mission, which often results in internal referrals from one program to another.

In addition to traditional referral methods, the *Engagement Hub* model provides an important entry point for people who may initially be reluctant to engage in support.

A distrust of the service system is common for people who have been impacted by trauma exposure, mental health difficulties, social disadvantage, and the experience of homelessness.

The *Engagement Hubs* provide an opportunity for staff to 'assertively engage' with people over time, which may help to facilitate a referral into an *Individualised Planned* service response.

Assertive engagement involves building trust and rapport with people over time and explaining how they could benefit from The Mission's programs. Our aim is to make people feel safe, hopeful that their situation could be better, and confident that we will support them with this process.

Assertive engagement is also important for improving access into our *Ongoing Support* services. For example, considerable time is dedicated to meeting with prospective residents of *Sacred Heart Community* in order to explain what the service offers, build rapport and gain an understanding of their individual circumstances.

Developing a trusting relationship is essential if people are to make *Sacred Heart Community* their home. Obtaining a thorough understanding of a client's support needs helps to determine how any potential challenges will be managed from the outset.

## PROCESSES (CONTINUED)

### Identify

*Engagement Hub* services provide a unique opportunity for early intervention and prevention.

Client services staff members are skilled in undertaking an initial assessment of an individual's physical presentation and behaviours in order to identify people who may be in need of an immediate response. This may include a crisis response or a planned response, depending on the relationship with the client.

The Mission undertakes a comprehensive assessment of all clients who access a service response through our *Individual Planned Response* or *Ongoing Support* services.

The purpose of the assessment is to understand the client's current situation and to develop a support plan that will begin to address his or her needs. This includes a comprehensive assessment that considers the wide range of psychological, physical, cultural, spiritual and social factors related to wellbeing.

Residents of *Sacred Heart Community* also undergo a detailed medical assessment.

The assessment process includes the identification of a person's strengths as an important basis from which to plan realistic and achievable goals.

Working with complexity requires that we make an assessment of any potential risk factors (or other challenges) so that strategies can be put in place to manage risk and promote the best chance of success.

We also identify a client's social supports and consider how these connections can be strengthened.

The assessment process is clearly described in the Case Management Framework.

# **CASE STUDY**

## **LENA**

**LENA HAS A HISTORY OF COMPLEX MENTAL HEALTH AND SUBSTANCE ABUSE ISSUES.**

**OVER TIME, LENA HAS DEVELOPED A TRUSTING RELATIONSHIP WITH STAFF AT THE WOMEN'S HOUSE AND WILL PRESENT THERE WHEN SHE IS UNWELL.**

**LENA AND STAFF HAVE DEVELOPED A SHARED RESPONSE PLAN WITH THE ALFRED HOSPITAL HOPS TEAM, WHEREBY LENA CAN ACCESS THE SUPPORT SHE NEEDS AT THE WOMEN'S HOUSE, PREVENTING AN ADMISSION TO HOSPITAL.**

## PROCESSES (CONTINUED)

### Plan

Following a comprehensive assessment, a support plan is developed in collaboration with the client.

Trauma informed practice emphasises the need to set realistic, achievable goals that help to build confidence and momentum for further change.

At times, our clients are focused on resolving a crisis. At others times, they are driven by long term goals for the future.

Our plans reflect this variability and are responsive to the client's situation.

The plans we develop at The Mission are therefore:

- *Incremental and build towards a bigger picture or longer term outcomes for clients.*
- *Flexible and constantly being revised.*

The role of family and carers should be considered during the planning process, as guided by the client, and reviewed regularly because consent to involve family/carers may change over time.

We recognise that many of our clients have complex relationships with their family/carers and that sometimes these relationships can be exploitative. Therefore, our practice is to assess that the relationship is safe and supportive and to work with our clients to address any concerns.

### Service Response

The Mission provides a range of service responses to support the implementation of a client's individualised support plan.

The activities vary according to the service being accessed, ranging from direct service provision (such as medical care) through to service coordination and advocacy.

In all cases, our work is focused on building the capacity of the individual.

The activities of the various programs are clearly articulated in the Program Logic Model for each program area.

A key element of the Case Management response is Service Coordination. This involves assisting clients to engage with the necessary supports that enable them to sustain their housing, improve their health and wellbeing, and build capacity for independence and social participation.

Strong advocacy and support is often required to assist clients to gain access and engage with new services (or service relationships that may have broken down in the past).

To compliment the range of The Mission's service responses, The Mission is also able to offer a Pastoral Care response to address the spiritual needs of clients who request this service. Pastoral Care is a person-centred, holistic approach that works inclusively with all people regardless of religious affiliation.

# SERVICE PARTNERSHIPS

The Mission has numerous formal and informal service partnerships that assist us to address the multiple and complex needs experienced by our clients.

Building and sustaining service partnerships is essential to ensuring that vulnerable members of the community are provided with the best possible service response.

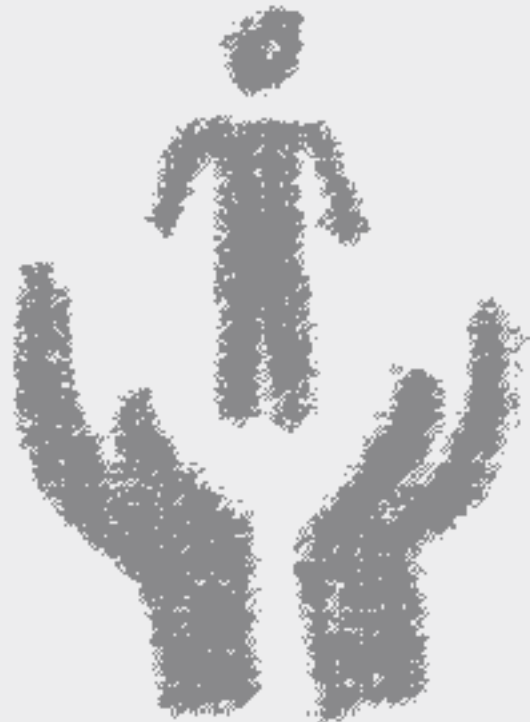
We do this by:

- *Proactively building service partnerships from the many effective and trusted working relationships that exist between The Mission's staff and other organisations.*
- *Taking a proactive approach to relationship management and formalising partnerships where possible.*
- *Ensuring we are actively represented in the appropriate service networks and maintaining an up to date database of these networks.*
- *Gaining the trust of external agencies through best practice referral protocols and collaborative practice including:*
  - Providing well written referrals with comprehensive information, including trauma informed strategies we know to be effective in working with the client;

- Following through to ensure that the client has engaged with the service; and,

- Developing clearly documented shared response plans across services.

- *Acknowledging the contribution of other services and inviting them to collaborate with us in trauma informed practice.*



# SERVICE OUTCOMES

The Mission collects a range of information from clients throughout their engagement with us, including information about the range of services they have accessed, and the level of satisfaction they report with the services they received.

We also invite clients to participate in measuring their individual social outcomes. This helps us to understand how our programs and services contribute to the changes in people's lives over time.

**"DOING THE OUTCOMES SURVEY WAS A GOOD WAY TO TALK ABOUT MY GOALS FROM THE START. IT HELPED ME UNDERSTAND WHAT MY GOALS ARE AND IT BOOSTED MY CONFIDENCE AS I COULD SEE THE PROGRESS I WAS MAKING".**

**- JENNY**

Collecting outcomes information is integrated into practice at The Mission through our Case Management Framework.

We use a simple survey tool to ask clients how they are tracking with regards to their housing, independence, mental and physical health, along with any goals they have set for themselves regarding social and economic participation.

This is a client led process that promotes the establishment of realistic goals. It provides a concrete measure of success when goals are achieved, as well as a tool for discussing any barriers to progress.

When integrating outcomes measurement into our practice, we need to:

- *Recognise that not all clients will be willing (or able) to participate in outcomes measurement.*
- *Understand that outcome goals will be very different for each client and use our client centered practice to assist the client to articulate goals that are meaningful and realistic (particularly within our service time frames).*
- *Use outcomes measurement and goal setting as an opportunity for clients to develop problem solving, goal setting and self-advocacy skills.*
- *Conceptualise outcomes along a spectrum and acknowledge, identify and record the subtle changes and progress clients make towards achieving outcomes (i.e. improvements in self-awareness).*
- *Acknowledge the connections between outcomes. Progress in particular outcome areas may need to occur before work on others can commence (i.e. sustained housing).*

## SERVICE OUTCOMES (CONTINUED)

### Sustained Housing

Assisting people to obtain and sustain housing is a key outcome of The Mission's services.

Our case management services assist people to find housing that is safe and appropriate. These services also play a critical role in preventing homelessness, by supporting and advocating for people whose tenancy may be at risk.

Once housed, The Mission's Case Management services provide ongoing support for people in order to prevent a return to homelessness. This involves ensuring the client has the necessary supports in place to maintain their housing and may include formal Transitional Housing support (for people on the Public Housing waitlist).

Our *Homefront* service is one of three services in Victoria that provides crisis accommodation for women who are experiencing homelessness. *Homefront* provides a specialist service response for women with complex needs, along with an outreach support model for women living in Transitional Housing.

The Mission's *Ongoing Support* services provide a specialist, long term housing response for vulnerable community members through the *Rooming House Plus Program* and *Bethlehem Community*.

Our *Home Care* program provides support that enables aged residents to live independently in their own home. Finally, *Sacred Heart Community* provides a specialist residential aged care service, including end of life care.

### Rapid Housing

The Mission is committed to finding an appropriate and 'rapid' housing response for people experiencing homelessness. The Mission aims to facilitate priority access into permanent housing for clients as quickly as possible.

Given the constraints of the system, The Mission considers that a 'rapid' housing response has occurred if the client has moved into permanent housing in less than six months.

In order to facilitate suitable housing outcomes, we:

- *Work with clients to help them understand the housing system and to identify realistic housing goals;*
- *Prepare high quality housing applications and refer our clients to a range of housing options as quickly as possible;*
- *Use our relationships and partnerships with housing services to get our clients prioritised and into housing quickly; and,*
- *Avoid exiting people from our residential services back to homelessness by proactively seeking alternatives.*

## SERVICE OUTCOMES (CONTINUED)

### Health and Wellbeing

Improved health and wellbeing is key outcome of all of The Mission's programs. In all cases, The Mission's services work to resolve a person's immediate crisis situation, provide access to the basic necessities of life, and do all that is possible to ensure that the person is physically safe.

Our services also assist people to work towards goals that lead to lasting improvements in health and wellbeing, such as:

- *Linking people to a regular General Practitioner.*
- *Assisting people to access specialist services for mental health or alcohol and other drug (AOD) treatment.*
- *Working with people to improve their capacity to recognise and manage symptoms of mental health.*
- *Working with people to improve their self-management of physical health concerns e.g. managing their own medication.*
- *Promoting harm minimisation strategies for people using alcohol and other drugs.*
- *Assisting people to live in a cleaner home.*
- *Providing high quality medical care for residents of Sacred Heart Community.*
- *Providing access to a range of healthcare treatments at our Hands on Health Clinic.*

### Independence

All of The Mission's services are focused on supporting recovery and maximising independence.

**"INDEPENDENCE IS ABOUT HAVING THE CONFIDENCE TO TRY NEW THINGS, MAKE BETTER CHOICES AND IMPROVING WITHOUT RELYING ON SERVICES".**

#### – MARK

Our work engages people to plan their personal and social goals, build their strength and capabilities, develop independence and ultimately achieve their potential.

We do this by:

- *Promoting self-belief, choice and control.*
- *Supporting clients to recognise when they require service support, and building their capacity to access the support they need.*
- *Attempting to ensure our clients avoid systems and situations that compromise their safety and independence (e.g. prison, involuntary hospital admissions and violent relationships).*
- *Moving people on from The Mission's services as quickly as possible whilst creating a relationship of trust whereby clients know that they can return to The Mission at any point in the future if required.*

# **CASE STUDY**

## **DONNA**

**DONNA WAS LIVING IN A TENT WHEN SHE FIRST ATTENDED THE WOMEN'S HOUSE.**

**DONNA WAS REFERRED INTO CRISIS ACCOMMODATION AT HOMEFRONT WHERE SHE WAS SUPPORTED TO OBTAIN ACCOMMODATION IN A COMMUNITY ROOMING HOUSE.**

**LIVING IN THE ROOMING HOUSE FOR OVER 6 YEARS WAS CHALLENGING AT TIMES, HOWEVER DONNA WAS ABLE TO SEEK THE SUPPORT OF STAFF AND FIND COMPANIONSHIP AT THE WOMEN'S HOUSE.**

## SERVICE OUTCOMES (CONTINUED)

### Social Participation

Participating in society and having people that you can rely on are key determinants of health and wellbeing and one of the most powerful predictors of a positive outcome following exposure to trauma.

Social inclusion involves feeling accepted within your local community and able to contribute to society in a meaningful way, through participation in mainstream activities and exercising basic rights (such as the right to vote).

For many of the people who access The Mission's services, the experience of homelessness and disadvantage has led to persistent social exclusion.

The *Engagement Hub* services play a key role in assisting people to overcome social isolation by helping them to access the services they need, connect with others and feel a part of the community.

**"WE ARE ALL IN THE SAME BOAT WHEN WE COME HERE. IT TAKES TIME TO BUILD THE CONFIDENCE TO ACCESS SERVICES OUTSIDE OF THE MISSION. WE MAY NEED ENCOURAGEMENT AND SUPPORT TO MAKE THIS TRANSITION".**

**– MANDY**

We recognise that a proactive approach is required to assist people to overcome barriers to social participation and move out of the service system as quickly as possible. We work with people to identify their goals for social participation and find ways to increase their sense of belonging in the community. What this means is different for each and every individual.

In some cases, it may be possible to work on reconnecting and restoring previous social connections and activities, including re-establishing contact with family members.

For others, the experience of homelessness involves re-locating to a new area and needing to form new social connections.

For people with histories of trauma, building social connections may be a slow and incremental process. There may be a need to focus on the development of communication skills and foundational psychosocial skills such as helpful thinking and managing emotions.

Support to develop these skills is essential if people are to build the self-confidence required in order to take the next steps in social participation such as attending a neighbourhood house or enrolling in a training program. For example, The Mission's Wellbeing and Activities Program is designed to assist people to develop practical living skills such as using public transport to access mainstream sport and recreational services.

# CASE STUDY

## ROBERT

**FOR MANY WEEKS, ROBERT REMAINED SILENT AND GUARDED BEHIND HIS 'HOODIE' AFTER MOVING INTO THE MISSION'S AGED CARE COMMUNITY.**

**BEFORE MOVING INTO THE HOSTEL, ROBERT HAD BEEN SOCIALLY ISOLATED FOR SEVERAL YEARS, UNABLE TO LEAVE HIS ROOMING HOUSE BEDROOM DUE TO POOR HEALTH.**

**IT TOOK TIME FOR ROBERT TO REBUILD CONFIDENCE AND SKILLS IN SOCIAL PARTICIPATION, BUT HE IS NOW COMFORTABLE SITTING AND CHATTING WITH THE GROUP.**

## SERVICE OUTCOMES (CONTINUED)

### Economic Participation

The experience of homelessness, poverty and addiction, present our clients with considerable financial challenges. These include having insufficient funds to meet the basic necessities of life, unmanageable levels of debt and poor credit histories, all of which are a major obstacle to securing housing.

Furthermore, the majority of The Mission's clients would meet the criteria for financial exclusion. Financial exclusion exists where individuals lack access to basic financial services such as a bank account and access to a small amount of credit from a mainstream provider to overcome an emergency (Connolly, 2014).

For this reason, we consider economic participation as existing along a spectrum that starts with building capacity for financial inclusion, moving through to participation in job readiness activities, education and training, volunteering and ultimately employment. We take a proactive approach to discussing goals for economic participation with clients, recognising that an individual's goals may sit anywhere along this spectrum.

We support our clients to develop financial agency and regain control over their financial situation by assisting them to:

- *Obtain their Centrelink entitlements.*
- *Access personal identification and set up bank accounts.*

- *Resolve debt and outstanding fines by liaising with agencies and advocating on behalf of the client*
- *Improve financial management skills (e.g. budgeting).*
- *Develop new skills that have the potential to save money (e.g. menu planning).*

**"SOME PEOPLE MAY NOT BE ABLE TO MANAGE EMPLOYMENT, BUT CAN CONTRIBUTE TO SOCIETY IN OTHER WAYS. WHAT IS IMPORTANT IS THAT PEOPLE ARE INVOLVED IN AN ACTIVITY THAT CREATES A SENSE OF ACHIEVEMENT AND SELF-WORTH".**

### – STEPHEN

The Mission can support a client's pathway to greater economic participation by assisting clients to:

- *Access activities that improve job readiness (e.g. preparing a resume).*
- *Engage in a pathway to employment program such as The Mission's Outlandish program.*
- *Engage in education, training or volunteering opportunities.*
- *Access employment services.*

# CONCLUSION

The Mission's Service Model provides a shared understanding of the way we work with clients and provides a clear framework to guide us in our mission to end homelessness and long term disadvantage.

The effectiveness of our service model will be evaluated through our Measurement and Evaluation Framework and adapted as required over time to ensure we continue to offer innovative and evidence based services.

## References

*Connolly C, Measuring Financial Exclusion in Australia, Centre for Social Impact (CSI) – University of New South Wales, 2014, for National Australia Bank.*

*O'Donnell, M., Varker, T., Cash, R., Armstrong, R., Di Censo, L., Zanatta, P., Murnane, A., Brophy, L., & Phelps, A. (2014). The Trauma and Homelessness Initiative. Report prepared by the Australian Centre for Posttraumatic Mental Health in collaboration with Sacred Heart Mission, Mind Australia, Inner South Community Health and VincentCare Victoria.*



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