



# SERVICE MODEL

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## INTRODUCTION

Sacred Heart Mission's (SHM) Service Model guides the work we do and how we do it, across our services and programs. Our framework brings together almost 40 years of specialist service delivery.

# OUR SERVICE MODEL FRAMEWORK

Sacred Heart Mission understands the complex interrelationship that exists between trauma exposure, homelessness, mental health and social disadvantage. We offer an integrated and trauma-informed response aimed at addressing the underlying causes of deep, persistent disadvantage and social exclusion.

## OUR VISION

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

## OUR CLIENTS

We support people who are experiencing a range of complex issues, which may include:

- Homelessness
- Chronic health conditions
- Disabilities
- Mental illness
- Long term unemployment
- Social isolation
- Substance use
- Trauma

## OUR APPROACH

We recognise that everyone's journey is unique and work to provide people with trauma-informed support that is effective and tailored to their individual needs

## OUR SERVICES

Clients can access services by drop-in at a hub or by referral

**Engagement Hubs**  
Sacred Heart Central  
Women's House  
Meals Program  
Health & Wellbeing services

Delivered in collaboration with service partners

**Individualised Planned Support**  
Flexible case management support  
Crisis Accommodation  
Women's Services

**A SAFE  
AND WELCOMING  
COMMUNITY**

**Ongoing Support**  
In-home support  
Aged Care & NDIS  
Accommodation with support

## OUTCOMES

**Sustained  
Housing**

**Health &  
Wellbeing**

**Independence**

**Social  
Participation**

**Economic  
Participation**



## OUR VISION

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



## OUR APPROACH

We understand that everyone's journey is unique, and we work to provide people with support that is effective and carefully tailored to their individual needs.

We acknowledge the high incidence of trauma experienced by the people accessing our services and understand that a complex relationship exists between the impact of trauma, homelessness, mental health, and social disadvantage. To provide an effective response, our interactions with people are guided by the principles of trauma informed practice.

In all cases, the objective is to create a relationship of trust whereby people know that they can receive a quality and responsive service that meets their needs.

## DIVERSITY AND INCLUSION

At SHM, we welcome and accept people as they are. We aim to provide safe, trusted and culturally appropriate services that respect the diversity and dignity of every individual.

Our values require us to question and challenge unjust social structures which may cause harm and disadvantage, and to advocate for those who do not have a voice in these conversations.

Structural violence and direct prejudice results in disproportionately higher rates of homelessness amongst Aboriginal and Torres Strait Islander people, those from refugee backgrounds including people seeking asylum, women escaping family violence and LGBTQI+ people. These can be diverse, distinct and at times intersecting communities.

People affected by structural disadvantages face substantial challenges in accessing the services they require, especially when their lives are also affected by homelessness. At Sacred Heart Mission we strive to improve access to our services and to make engagement with us as straightforward as possible.

We are committed to cultural safety for Aboriginal and Torres Strait Islander people and uphold this commitment through our Reconciliation Action Plan.

Our services for women are inclusive of all people who identify as women including cisgender and transgender women.

We work with the Culturally and Linguistically Diverse service system and engage interpreting services as required.

We seek to provide opportunities for people accessing our services to share their lived experience and participate in the ongoing improvement of our services.

Our Peer Workers have their own experience of being without a home and make an invaluable contribution to our work.

## OUR CLIENTS

We support people whose capacity to participate fully in community life is affected by deep, persistent disadvantage and social exclusion. Our core focus is to support people experiencing or at risk of long-term homelessness. We support people who are experiencing a range of complex issues, which may include:

- Homelessness
- Chronic health conditions
- Disabilities
- Mental illness
- Long term unemployment
- Social isolation
- Substance use
- Trauma





## OUR SERVICES

### PROVIDING A CONTINUUM OF CARE

Our Service Model is organised into three service types: Engagement Hubs, Individual Planned Support and Ongoing Support. These service types work together, using the approach we call the 'Continuum of Care,' to provide a consistent relationship-based response, with the level and duration of support based on an individual's unique needs.

We take the time to get to know the person and their individual circumstances, giving people time to build trust in us as individual workers and in the organisation as a whole. A relationship based on trust allows us to walk with people on their journey as they exit homelessness, sustain housing, and achieve their goals.

Using the 'Continuum of Care' approach, people have their support needs matched with a package of housing and support through a central process administered by the Prioritisation and Allocation Group (referred to as the PAG).

Our approach to ending homelessness is a lot more than providing a roof over someone's head. We take a proactive 'sustaining tenancies' approach, working with people to build safety, connection and belonging in their new community. Peer Workers play a key role in helping people to settle into their housing and form new connections.

### ENGAGEMENT HUBS

Our Engagement Hubs operate out of Sacred Heart Central and the Women's House. They 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. From our Engagement Hubs, we can link people into case management support; ongoing support; and specialist services like mental health, alcohol and other drugs, family violence, legal, and health services.

### INDIVIDUALISED PLANNED SUPPORT

Individualised Planned Support is provided through our crisis accommodation service Homefront, and our case management programs.

SHM's Case Management Framework guides our consistent and trauma informed practice. People are supported with an accessible, strengths-based intake and assessment process. Support planning and goal setting is outcomes focused and tailored to the individual and we facilitate internal and external referrals that support people to achieve their full potential.

## ON-GOING SUPPORT

Ongoing Support is part of our Continuum of Care, providing support for people living with disabilities, substance use, mental health conditions and ageing related needs, so that they can live to their full potential either independently in the community or in one of our supported accommodation residences.

In-home support is provided by Sacred Heart Local through consumer-driven Home Care, Community Housing Support or NDIS packages.

Supported Accommodation is provided at our Rooming House Plus Program, Bethlehem Services (for women) and Sacred Heart Community. At Sacred Heart Community we support the wellbeing of each person from the time they are referred through to the end of their life.

## COLLABORATION WITH SERVICE PARTNERS

To ensure our services wrap around the individual and respond to their individual needs we take a proactive approach to building collaborative relationships with our service partners.

Working in partnership, we ensure access to necessary services and reduce gaps in the system by not duplicating services or moving people from service provider to service provider.

Partnerships are managed closely through formal and informal agreements which are recorded and monitored on a relationship management register. All client services staff are orientated to the service system and understand what services are available for the people they work with.



# OUTCOMES

Our Service Model works towards five interrelated quality of life outcomes. Our Trauma Informed Client Support Planning and Outcomes Tool (TICSPOT) measures how people are tracking in relation to these outcomes at different points while they are receiving case management or support in our residential programs.

TICSPOT is designed to support goal planning throughout the case management process. Measuring outcomes provides feedback to the individual and their support worker on how they are tracking towards their goals and aspirations and provides evidence of the change people experience while receiving support over time. We use this evidence to help us understand how and to what extent our work translates into outcomes for the individual. This strengthens our practice and builds the evidence of our impact.

# FRAMEWORKS AND OTHER GUIDING DOCUMENTS

Key frameworks and other guiding documents with more details about how we realise our service model in our programs include those listed below.

- Continuum of Care procedures
- Case Management Framework
- Consumer Participation Framework
- Diversity and Inclusion Framework
- My Community My Way – Sacred Heart Community
- Service Model Monitoring and Evaluation Framework

## OUR SERVICE MODEL OUTCOMES ARE:



### Sustained Housing

We use a rapid housing approach to match people to appropriate housing and support. Once someone is housed, a proactive 'sustaining tenancy' approach ensures the person has the necessary support in place to maintain and sustain their housing.



### Health and Wellbeing

Our services work to resolve a person's immediate crisis, provide access to the necessities of life, ensure their safety, and assist people to work towards goals that lead to lasting improvements in their health and wellbeing.



### Independence

Our services are focused on supporting recovery and maximizing independence. The core principle of "independence" is choice and control. Our work engages people to plan their personal and social goals, build their strength and capabilities and achieve their potential.



### 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. We work with people to identify their goals for social participation and find ways to increase their sense of belonging and participation in the community.



### Economic Participation

Economic participation exists along a spectrum that starts with building capacity for financial inclusion, moving through to participation in education and training, volunteering, or employment. We take a proactive approach to discussing goals for economic participation with people, recognising that an individual's goals may sit anywhere along this spectrum.

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