

# Ensuring Access to Services for Marginalised Groups

Clare Amies


Western Region Health Centre

[clarea@wrhc.com.au](mailto:clarea@wrhc.com.au)



# Why prioritise certain groups?

- WRHC Philosophy
- Provide a range of services/a community resource
- Access to health services is a basic human right
- Understanding the local community
- Who we prioritise? and why?



# The health and wellbeing of people living with a serious mental illness

- Morbidity
- Chronic disease
- Oral health
- Homelessness
- Social isolation
- Long term unemployment
- Family breakdown

# Responding to people living with serious mental illness

- Provider of PDRS services
- Complexity of needs
- Responsive
- Access when they need the service
- More and more people being discharged from AMHS
- Need for access to GP's whilst GP's need support to see the client group



# What we did?

- Opportunity with SWAMH and WRHC
- Worked in partnership
  - Consumers
  - AMHS
  - GP's
- Collaboration
- Staff training
- Reduced barriers





# Response to New Arrivals

- Local demographics
- Knowledge of needs and complexity
- History of services
- Partnership
- Local services viewed as a resource



# The health and wellbeing of new arrivals/refugees

- Chronic disease
- Trauma
- Social isolation
- Connectedness to community
- Unfamiliar living situation



# What we did?

- Partnered with local groups
- Gained understanding for communities about what was important to them.
- Community leadership/ ownership
- Realistic about deliverables
- Reach out as well as services in house
- Local Division of GP





# Lessons Learnt

- Understand the local need
- Organisational structures to enable staff
- Training for staff
- Client input at the beginning
- Understand the flow on affect
- Change management strategy long term
- Build on Partnerships
- Continuous Improvement