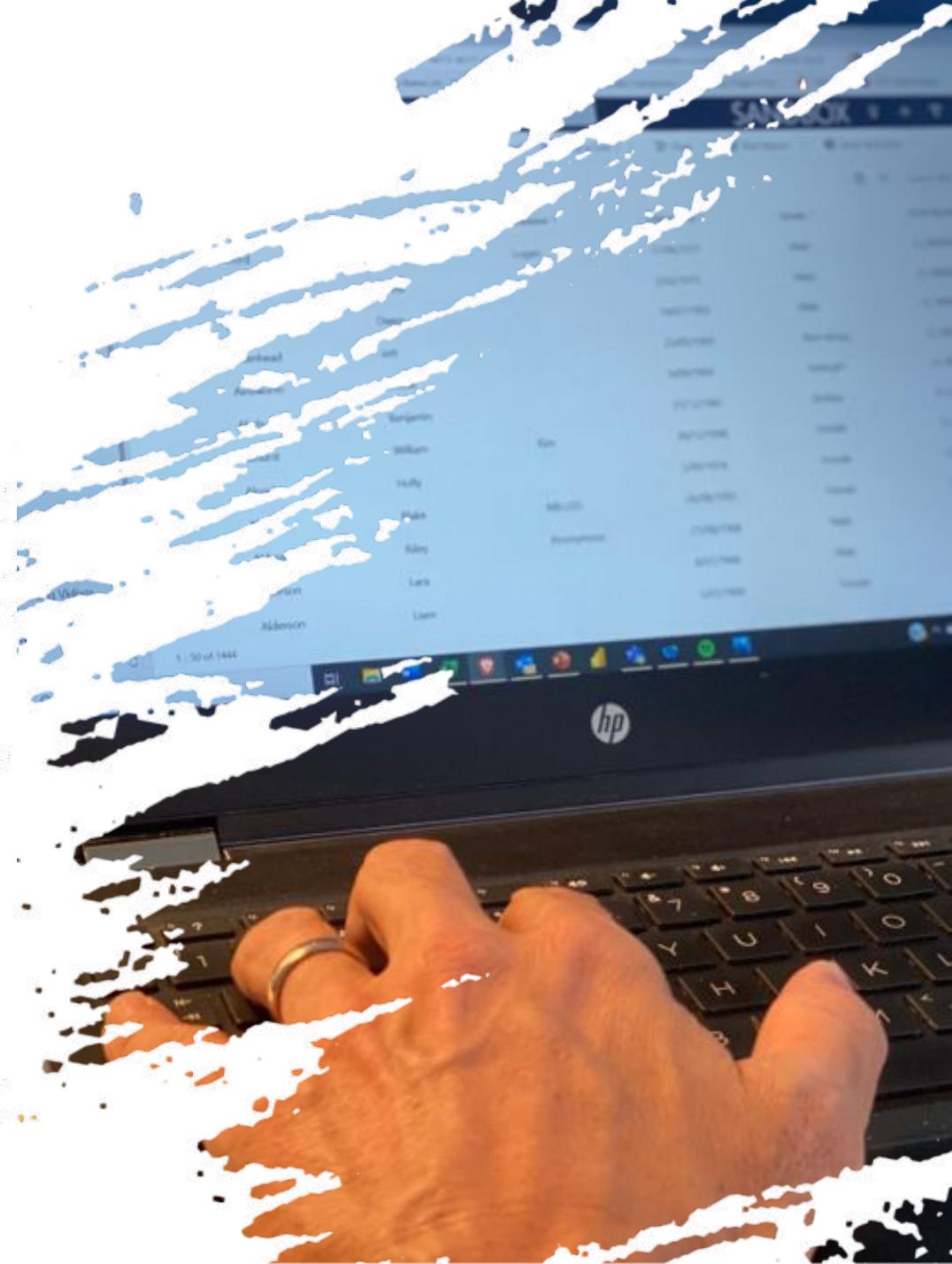


**End  
Street  
Sleeping  
Collaboration**

**Using the power of Information,  
Technology and Networks to improve  
service quality and safety**

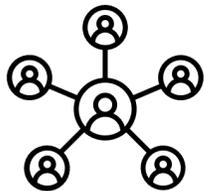


# It's time to think and work differently

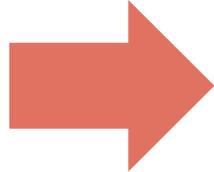
- Legacy IT systems focus on administration not outcomes
- Information is undervalued because it's siloed, inconsistently collected and often out of date
- Bureaucratic structures treat complex, multi-faceted issues with single focus responses
- This results in duplication of effort, inefficient work practices, impacts safety and ultimately leads to poor client/patient outcomes

# ESSC's approach to end homelessness in NSW

Shared: Vision, Goals, Information, Commitment



Collect and use person by person information to better co-ordinate supports



Create local collaborative structures to improve service responses

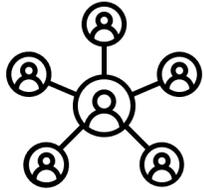


Turn off the taps by using evidence and learnings to drive continuous learning and systems change

# The keys to successful implementation



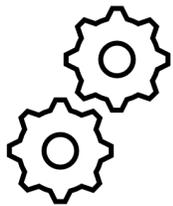
Expanded on the 'By Name List' and built a case coordination system which is 'real-time' and accessible to all organisations



Recognise the importance of having health, justice, community organisations at the table and part of the service network

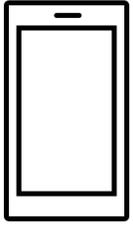


Utilise a consistent, medically reviewed, lived-experience and practitioner informed survey to gather client/patient information

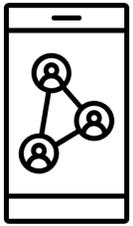


Services understand that they are part of a larger process and that their participation and information are vital to the smooth functioning of that process

# How this improves service quality & safety



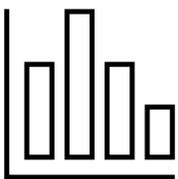
A clinician using the 'By Name List' has immediate access a person's (self reported) medical and mental health conditions, as well as flags for risk of self harm, harm to others, and non-use of medication



A person's record provides details of other services, including health services that they are being supported by. This streamlines information gathering, reduces the need to relive past trauma, assists with continuity of care

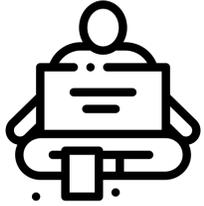


Patient/client care and support are better matched with their needs in the immediate and longer-term which leads to improved health and housing outcomes



As the database grows in number of records and longitudinally it is being used to inform and advocate for system and service design changes, and can be used for research purposes

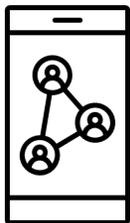
# The By Name List and collaboration in practice



People who are admitted to the Concord and Royal Prince Alfred Hospitals mental health units are seen by a Social Worker on admission and screened for their housing status



The Social Worker checks the 'By Name List' to see if the person has a record. Relevant physical and mental health information is accessed as well as the flags for risk of harm and medication use/misuse



The Social Worker creates a case note on the 'By Name List', emails this information to the person's homelessness case worker (using a link from the By Name List) and then liaises with the case worker until the patient/client is discharged

# A quick look at the 'By Name List'

End Street Sleeping Collaboration BNL 2.0 Search SANDBOX

Show Chart + New Delete Refresh Email a Link Flow Run Report Excel Templates

Client By-Name List Edit columns Edit filters Search this view

Last Name	First Name	Nickname	Date of Birth	Gender	Client Number	Created On
Douglas	Beau		14/07/1980		CL-00001598	14/07/2022 10:4...
Nunez	Julian		13/11/1989		CL-00001597	14/07/2022 10:4...
Dixon	Kelly		30/01/1990	Female	CL-00001596	14/07/2022 10:3...
Stewart	Sam		5/08/1988	Male	CL-00001595	11/07/2022 1:09 ...
test	workflow		1/01/1970	Male	CL-00001592	11/07/2022 9:48 ...
Test	Flow		1/01/1970		CL-00001591	7/07/2022 4:43 P...
Sagan	Peter		6/05/1997		CL-00001590	5/07/2022 9:52 A...
test	smoke		1/01/1970	Female	CL-00001589	4/07/2022 11:39 ...
Smith	Matthew	Matt	30/01/1981	Male	CL-00001588	22/06/2022 1:36 ...
Smith	Chris		10/08/1980		CL-00001587	10/06/2022 1:28 ...

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