

## specialist services

### ermha barwon

Ermha Barwon provides tailored support packages to people with dual disabilities. The degree to which we support each client varies and is based on our clients' needs and aspirations. Each package is individually designed in consultation with the Victorian Department of Human Services together with key stakeholders, including the support recipient and their carer.

### linx outreach

Linx Outreach has two services – Moderate Support and the Acquired Brain Injury (ABI) program. The Moderate Support program designs and delivers tailored support for people who require a high level of assistance to maintain stable housing and achieve their recovery goals. Ermha's ABI clients, as well as having an acquired brain injury, also experience difficulties related to, for example, physical health, housing and employment. Linx Outreach support staff engage other services to assist clients as they develop skills that help them recover and live independently in the community.

### pathways connect

Pathways connect identifies and promotes better housing and health outcomes for people with complex needs who are leaving psychiatric inpatient settings or who are homeless or at risk of homelessness. Pathways Connect is made up of two programs, Community Connections and Mental Health Pathways. Community Connections uses an assertive outreach approach to identify people who are experiencing a mental illness or who have complex unmet needs, and who are homeless or living in insecure accommodation. Mental Health Pathways works with people who are current in-patients at Southern Health's Dandenong, Casey and Monash psychiatric hospitals, and who are at risk of homelessness when discharged.

### pathways connect 50 plus

Pathways Connect 50 Plus provides case-managed support to clients who are 50 years and over who require monitoring of their health and wellbeing as well as support to access and maintain public housing. This program has been specifically designed for older people who are about to enter direct tenure public housing through the priority segments of the Office of Housing Segmented Waiting List. The Program also supports current Office of Housing residents. The aim of the program is to assist clients to maintain stable, long-term housing, improve clients' health and wellbeing, encourage and support clients to make decisions regarding their use of services, and manage their health and welfare needs.

### pathways support and connect

Pathways Support and Connect provides support to maintain SRS (Supported Residential Service) viability and to promote the wellbeing of SRS residents. Pathways Support and Connect assists residents who require a greater level of care and encourages stronger ties between SRS's and other services of benefit to residents. Pathways Support and Connect workers identify SRS residents who have unmet health needs, require complex care and/or whose behaviour causes instability within the SRS. Support workers also assist SRS proprietors to better manage residents' needs.

### recovery packages

Recovery Packages provide medium to long term support for people who are experiencing a mental illness and who have an Individual Support Package. Individual Support Packages are provided to clients who have multiple or complex needs and who are currently receiving assistance from the Victorian Department of Human Services (DHS). Recovery Packages provide a wraparound service that comprises individualised support, case management and crisis response. This tailored, comprehensive approach seeks to identify clients' support needs early and address them effectively.

### STEPS care coordination

STEPS Care Coordinators assist to establish and monitor care teams that support clients with a severe mental illness and high and complex needs. Care Coordination can assist care teams by providing service system connections, support and oversight. Steps Care Coordinators actively engage local service providers in the development and delivery of the various elements of the individual's support plan. The Care Coordinator actively participates in service coordination across programs to resolve systemic issues and identify more effective ways of meeting client needs.

### STEPS intensive home based outreach support (IHBOS)

STEPS IHBOS is designed to provide comprehensive, wrap around packages of support to clients with high and complex needs, and to create partnerships between clinical and community services to improve client outcomes. IHBOS provides everyday support to clients to develop and improve practical skills such as assisting with grocery shopping and meal planning. Staff support clients to access specialist assistance and to maintain and retain accommodation and independence in their communities. We assist clients to better understand their illness and their treatment options.