

Young People's Health Service

Centre for Adolescent Health

An evaluation of Clinical street outreach in Melbourne's CBD 2009

Written by Donna Eade

Young People's Health Service (YPHS)

**Executive Summary of the evaluation report of clinical street
outreach in Melbourne's CBD**

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This evaluation was written by Donna Eade, Clinical Nurse Consultant on behalf of the Young People's Health Service, Centre for Adolescent Health, Royal Children's Hospital.

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Particular thanks however go to all the young people and service providers who agreed to participate in the clinical street outreach evaluation. Without their input, this evaluation would not have been possible. From the information gathered from this evaluation, YPHS hopes to provide a primary health care outreach service that better meets the needs of young Victorians at risk of or experiencing homelessness.

1. Executive summary of clinical street outreach evaluation

This evaluation intends to provide a more substantial evidence base in support of clinical outreach interventions being provided by primary healthcare services. Whilst extensive research is available on the role and outcomes of outreach services provided by alcohol and other drug workers there is little, if any, that considers the value of clinical street outreach provided by nurses.

The development of this clinical street outreach evaluation took place in November 2008. The implementation phase of the evaluation questionnaire occurred over a six week period, and responses were then collated. A total of thirty nine (n=39) people completed the evaluation, eleven (n=11) were service providers and twenty eight (n = 28) were young people between the ages of twelve and twenty five.

1.1 Key findings

- Clinical street outreach was both *highly regarded* and considered to be an *essential* element of both the YPHS and YSAS service delivery by all participants in the clinical street outreach evaluation

- Clinical street outreach is fundamental to *informing* young people about the service and then offering a *supportive link* to young people who might not otherwise access or know about YPHS, YSAS and Frontyard
“If I had known about Frontyard and YPHS when I was fifteen I would have found help then, and maybe my life would be different”, (Twenty year old mother with alcohol and other drug issues

- Clinical street outreach is of value for its *immediacy*, or being *in the moment*, and is therefore ideal for providing opportunistic interventions that align with the ‘here and now’ behaviour that is characteristic of adolescent development

- Service providers and young people *do not* consider helping young people to get to appointments to be a benefit of clinical street outreach. Rather, clinical street outreach was identified by respondents as *indirectly prompting* young people to attend appointments
“Just seeing an outreach worker can prompt going to an appointment”, (Young person)

- Clinical outreach provides an opportunity to establish *rapport* on the young person's terms. Young participants emphasised that *rapport* is *central* to them accessing services. Consequently this approach may help a young person to be *proactive* rather than reactive when accessing health care services
"I am not likely to go to a new service without meeting a worker first", (Young person)
- Young people, particularly those who are marginalised, experience difficulty in learning about inner city services. It is therefore not surprising that young people and service providers identify clinical street outreach service providers as a source of information and support
(Clinical street outreach)... "provides us with help and assistance," (Young person)
- The opportunity to engage with the clinical street outreach worker often provides the *incentive* for a young person to follow-up their health care needs

1.2 Key Recommendations

Themes and suggestions made by participants of this clinical street outreach evaluation generate the proposed recommendations on how clinical street outreach in Melbourne's CBD may be improved to better meet the needs of young marginalised people.

- That YPHS explore strategies to changing clinical street outreach *hours* to after-hours and weekends
- When implementing clinical street outreach staff wear an *identifiable item* such as a t-shirt or a backpack that is recognisable but *not too obvious*
- That *lanyards do not* clearly identify what outreach service is being offered
- To display signage such as a *noticeboard* at Flinders Street and Southern Cross railway stations promoting all of the available youth services in

Melbourne's CBD. This could advertise the clinical street outreach route and times as well as locations visited

- That the clinical street outreach team create an *email list* of relevant service providers and email these contacts with an outline of the proposed clinical street *outreach route* the day before each clinical street outreach

- That clinical street outreach be undertaken at the *same time* and at the same locations, each fortnight

That a *clinical refuge outreach evaluation* be undertaken to further substantiate the value of clinical outreach delivery as a component of primary health care.

It is hoped that this evaluation will encourage other health care service providers working with young people to conduct their own evaluation and advance the evidence for effective strategies that reach young people who are marginalised.