LATROBE HEALTH ADVOCATE

QUARTERLY UPDATE

October- December 2023



Latrobe Health **Advocate**



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A MESSAGE FROM

Latrobe Health Advocate



I'm happy to share with you our latest report for the last three months of 2023, from October to December. In this report, we share what our community members have been saying. During this time, people in Latrobe were mostly talking about Access to Services. This made up about one-third of all the conversations with me.

Older community members who had lived in the Latrobe Valley for a long time felt that access to services, particularly health services, was much better in the past when there was an emphasis on providing local facilities in smaller towns. These feelings of exclusion from health services in smaller towns extended to difficulties in getting access to cash and banking services, and in the closure of local food stores. Although many community members thought that services were probably around, they found it hard to locate them.

Other Issues raised in Latrobe were the impact of social isolation on mental health. Community members advised that local mental health services have advised them of six-month waiting lists to access services and that these delays were exacerbating other health issues. Other community members reported that local mental health services have not returned their calls requesting appointments.

Safety fears were frequently raised, especially in relation to public transport. Community members reported experiences of people drinking on trains resulting in frightening behaviour that required reports to police. Older community members and people with disabilities were especially impacted by disruptive behaviour on public transport and reduced their social engagement as a result. People with disabilities reported being assaulted on a bus.

During this quarter, we have observed changes in relation to how services are designed and funding allocated, how organisations work together collaboratively and how community voice is valued.

Life Skills Victoria's self-advocacy group is working with the Gippsland Disability Advocacy Institute and New Wave to develop a service model that ensures that the group receiving the service are the ones that run it.

Federation University's Physiotherapy Virtual Care Clinic is changing access to healthcare delivery. The virtual physiotherapy clinic responds to community needs and enhances student training within a collaborative partnership. With the support of the Latrobe Health Assembly, people who do not have digital connectivity in their homes can access the services from community locations.

Amongst other activity, we have been advocating for continuity of aged care services, provision of gender affirming care in Gippsland and provision of information to people about services that are available.

I continue to hear from communities who share their goals, barriers, and suggestions and how they want to be engaged by governments and services across Latrobe.

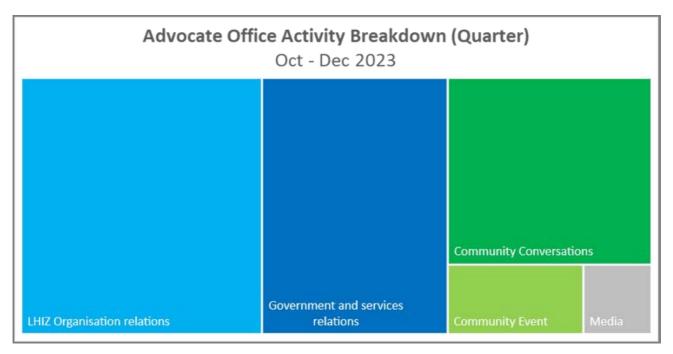
If you have any questions about the report or the information provided, please contact my office for further details or go to our website www.lhadvocate.vic.gov.au





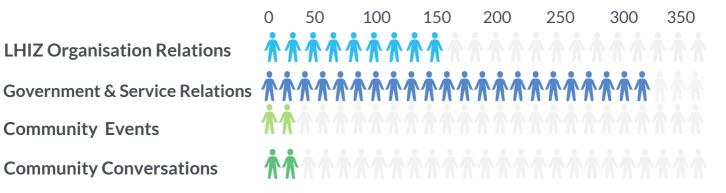
QUARTERLY BREAKDOWN

OFFICE ACTIVITIES

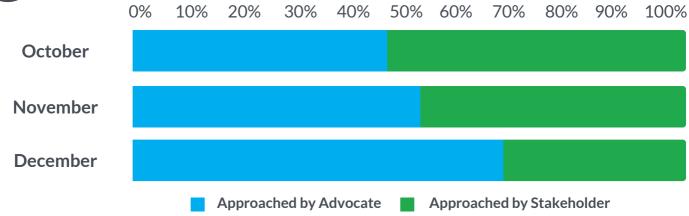


NUMBER OF PEOPLE

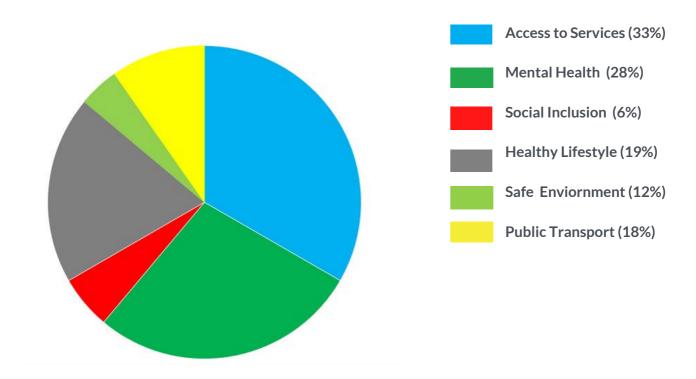
LHIZ Organisation Relations Community Events Community Conversations







COMMUNITY ASPIRATIONS





















COMMUNITY ASPIRATIONS

Access to Services



33%

This quarter, the Latrobe communities' primary aspiration was Access to Services, making up 33% of the community conversations with the Advocate.

The difficulty accessing services, particularly mental health and alcohol and drug services, was raised in several community conversations. Young people who had lost friends to suicide wanted a more proactive service that would follow up with young people at times of high risk, for example when a parent dies. The difficulty of booking appointments at times of stress and awaiting callbacks and referrals that do not always happen was raised by carers as creating feelings of helplessness. The lack of in-person follow-up after acute hospital presentations was seen as a significant issue in supporting people who are self-harming or threatening suicide. The relationship between inadequate mental health support and self-medication through illicit drugs and alcohol was raised by community members across the age spectrum. The effect of this on feelings of safety, particularly on and around public transport, was also raised as a growing concern. Several community members raised that knowing about the availability of services was an issue, one adult advised they only found out about local community alcohol and drug services through the judicial system.

Older community members who had lived in the Latrobe Valley for a long time felt that access to services, particularly health services, was much better in the past when there was an emphasis on providing local facilities in smaller towns. These feelings of exclusion from health services in smaller towns extended to difficulties in getting access to cash and banking services, and in the closure of local food stores. Although many community members thought that services were probably around, they found it hard to locate them.

COMMUNITY ASPIRATIONS CONT...

Several community members were frustrated by their experience with local GPs. The most common complaint being that they don't listen. Many community members felt that GPs are quick to end consultations with a prescription and a repeat appointment. One community member advised that after three weeks of pain and several GP visits he was only referred for an Xray that diagnosed his broken back after he became annoyed and insisted on a radiology referral. A young woman with a severe chronic illness advised that the high turnover of GPs was negatively impacting her mental health. Another woman with severe chronic illnesses contacted the Advocate to find respite palliative care to cope with the impacts of her illnesses. As a regular attendee of medical appointments, it is disappointing that her GP had not considered the mental health impacts of her chronic illnesses and discussed the community support available.

The office of the Latrobe Health Advocate is communicating with health services and organisations in Latrobe, advocating for:

- Communication of the local services available through multiple channels to reduce requirement for people to search the internet for information.
- Provision of pathways for urgent mental health support that minimise barriers to access.
- A mechanism to provide feedback on GP listening skills and information on the mental health and wellbeing services available in the community.
- Gaps in referring patients with chronic diseases to community-based support services by local GPs and specialists to be considered as part of the implementation and evaluation of the Chronic Disease Plan.

COMMUNITY VOICE

11/,

"It is the impact of privatisation."

"Each town had its own health centre (which have since closed down) and now people have to come into Moe or Morwell."

"There is more Police activity that moves people on, but that is just a bandaid response."

"Worry stops me from doing things."



OTHER ISSUES RAISED



Community members of all ages felt there is not enough emphasis on engaging young people in purposeful activity. While some young community members praised the new Morwell skate park, YSAS, Ladder, Latrobe Flexible Learning Options (FLO) and Gotcha (Gippsland Outdoor Therapy and Youth Adventures) as helpful they felt that these were often not advertised or were booked out. This feeling of isolation was also expressed by older retired community members who lamented the lack of social connection options and the closure of community facilities, for example, the hall in Newborough that closed during COVID and hasn't reopened. All age groups were keen to have access to transport for trips and excursions.

The impact of social isolation on mental health was frequently raised. Community members advised that local mental health services have advised them of six-month waiting lists to access services and that these delays were exacerbating other health issues. Other community members reported that local mental health services have not returned their calls requesting appointments.

Safety fears were frequently raised, especially concerning public transport. Community members reported experiences of people drinking on trains resulting in frightening behaviour that required reports to police. Older community members and people with disabilities were especially impacted by disruptive behaviour on public transport and reduced their social engagement as a result. People with disabilities reported being assaulted on a bus.

Community members without cars were frustrated about difficulties of accessing shopping centers and medical clinics. Older community members reported the difficulty of saving enough money from their aged pension to purchase a scooter to provide access to local facilities with the cost-of-living pressures they were facing. These members advised a mix of help from Centrelink to deal with government paperwork, while some reported extraordinarily high levels of assistance others felt ignored and unsupported.

Community members raised the need for more community gardens and other locations that provide access to inexpensive locally-grown produce. The lack of public drinking taps was also raised. While many community members were keen to embrace a healthier lifestyle, financial constraints, lack of safe and accessible transport and difficulties in accessing mental health and other support services were all constraints to achieving a healthy lifestyle.

The office of the Latrobe Health Advocate is communicating with health services and organisations in Latrobe, advocating for:

- •Mechanisms to incorporate more interventions into the Social Prescribing model.
- •Calmer community spaces that promote engagement and social interaction.

SYSTEMS CHANGE

The Advocate sees better systems of health and wellbeing driven by six elements:

Habits of thought - deeply held beliefs and assumptions and taken-for-granted ways of operating that influence **BETTER MENTAL MODELS** how we think, what we do and how we talk. The distribution of decision-making power, authority INTEGRATION OF COMMUNITY and both formal and informal influence among **VOICE** individuals and organisations. Quality connections and communication occurring **BETTER RELATIONSHIPS** among actors in the system, especially among those with differing histories and viewpoints. How money, people, knowledge, information and other assets such as infrastructure are allocated **BETTER SUPPORTS** and distributed. Espoused activities of institutions, coalitions, networks, and other entities targeted to improving social and **BETTER SERVICES** environmental progress. Also, within the entity, the procedures, guidelines or informal shared habits that comprise their work. Government, institutional and organisational rules, regulations, and priorities that guide the entity's own **BETTER POLICY** and others' actions.

OBSERVATIONS OF SYSTEM CHANGE

BETTER MENTAL MODELS

- The work being undertaken by the Latrobe Health Assembly, Latrobe Community Health Service (LCHS), and the Department of Health (DH) to incorporate the current Assembly-funded 'Community health nurses in schools' program into a DH 2023 budget initiative to improve support to vulnerable young people in schools evidence that new ways of thinking about program development are happening. By incorporating local community experience a more flexible prevention-focused model is being developed.
- The Assembly and LCHS have responded flexibly to the DH program development process by extending the testing of their early years model until the end of 2025 with Assembly funding. This outcome is a great example of collaboration amongst all parties, flexibility in funding, and an allin response to local community experience.

BETTER RELATIONSHIPS

- New partnerships have been established between Gippsland Women's Health, the energy industry, and Gippsland regional leaders to address the issue of violence.
- The 'On the Buses' engagement with the Latrobe Health Assembly, the Advocate and the Latrobe Valley Authority to hear community voices, influence others about engagement and determine individual and collective advocacy demonstrates a collaborative approach.
- Flexible and integrated responses between Maryvale Private Hospital and Latrobe Regional Health to provide options for end-of-life palliative care evidences the value of a partnership approach.
- Latrobe Valley Authority (LVA) establishing a
 working group to develop initiatives to improve
 community understanding of energy and energy
 transition demonstrates the commitment of the
 government to ensure the community understands
 the energy transition.
- Partnerships between community groups, businesses, and the Department of Education and Training (DET) to provide support for children experiencing barriers to their engagement with education have resulted in improved educational engagement from vulnerable children.

BETTER SERVICES

- Changes to the NDIS Local Area Coordination (LAC) services provided by the Latrobe Community Health Service have improved access for people with disabilities to non-NDIS community-based services. This has been achieved through more work upfront with clients and community partners. Community connections and community links now form a key part of NDIS plans.
- Life Skills Victoria's self-advocacy group is working with the Gippsland Disability Advocacy Institute and New Wave to develop a service model that ensures that the groups receiving the service are the ones that run it.
- Federation University's Physiotherapy Virtual Care Clinic is changing access to healthcare delivery. The virtual physiotherapy clinic responds to community needs and enhances student training within a collaborative partnership. With the support of the Latrobe Health Assembly, people who do not have digital connectivity in their homes are able to access the services from community locations.

BETTER SUPPORTS

 The Gippsland Primary Health Network (GPHN) is establishing a new program responding to family violence and sexual violence that is commissioning trauma informed mental health supports and specific mental health supports focussed on anxiety and depression

INTEGRATION OF COMMUNITY VOICE

 The Victorian Rural Workforce Agency, Gippsland Health Workforce Stakeholder Group is undertaking a project to incorporate community experience alongside data and health professional information to understand health workforce needs.



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