



healthAbility

# Community health comes of age

**What our responses to  
COVID-19 showed us**

**Community Health continued to demonstrate its intrinsic value to our health system during the pandemic by being able to rapidly and flexibly fill system gaps as well as localise and personalise preventative and responsive care.**

**Additionally, we innovated and adapted these core services to ensure an appropriate service mix was delivered where, when and how customers needed during this crisis.**

**Leveraging our learning opens a range of service innovations and partnerships for the betterment of customers, communities and the entire health ecosystem going forward, especially in the realm of chronic illness.**

# What we did

Rapidly adapted to address community needs during the pandemic



## WELLBEING CALLS

Our specialist clinicians proactively reached out to the vulnerable in our community to provide holistic support.

Our unique knowledge of our community, deep existing partnerships and flexible services made this possible.



## COVID-19 CARE

True sector-wide collaboration with Hospitals, Primary Health Networks, GPs and other community health providers enabled seven day per week health, wellbeing and social services to those tested positive for COVID-19, outside the clinical setting, preventing further transmission.



## HIGH RISK ACCOMMODATION RESPONSE

Improved place based infection control and containment by establishing wellbeing, social and community engagement for this high-risk group, blending our local knowledge and services in partnership with other regional agencies.



## HEAD TO HELP MENTAL HEALTH

Based on our local knowledge, using our experience and working with our partner agencies, we established two additional full service sites and launched telehealth and remote mental health support to our diverse community.



## TESTING AND SCREENING

Partnered with Eastern health by providing our site to run testing clinics for different cohorts. This included healthcare workers, outbreak response and elective surgery screening. We also provided resources to support the high-rise towers and other hotspots.



## RAPIDLY SHIFTED TO TELEHEALTH

Quickly found new ways to flexibly deploy our clinicians and other staff alongside the safe operations of face to face services. For an extended period, we bulk billed or entirely waived fees.

# The capabilities we demonstrated

We delivered system wide benefits from local relationships, prevention, innovation and holistic care



## PLACE

We are deeply connected to our community and we know how to prevent and treat issues, in and outside the clinical setting, by applying local resources quickly and flexibly.



## PERSONALISATION

Our impact was demonstrated in our COVID-19 responses and hinges on how we personalise responses to each family. From health and wellbeing, to social and literacy, personalisation ensures the right service, where, when and how it is needed.



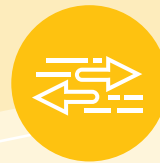
## PARTNERSHIP

Our deep relationships across the sector mean we can work with trust to quickly set up, deliver, and innovate as the need (and partnership) requires. This underpins our ability to work holistically and bring both medical and social models of care to each instance.



## POLICY

The alliance of community health, GP's, allied health and hospitals execute public health policy by applying a local lens. Community health fills the gaps that appear when applying this local lens to policy. Additionally, community health gathers evidence to evaluate and influence policy.



## PACE AND FLEXIBILITY

Community health is the flexible element in the health system. Its operating model, corporate structure and funding means it can flex to quickly meet needs. COVID-19 saw us demonstrate this at pace, based on the community health model of prevention and chronic care delivered flexibly.

# The value we deliver

Helping people in our communities to enjoy better and longer lives.



## CLEAR VALUE FOR MONEY

Hospital care is expensive and is about episodic treatment. Community Health's hybrid medical and social model is about prevention, ongoing and coordinated holistic care - without the overhead. The prevention and holistic economic case has been made and community health sits in this model.



## PREVENTING HOSPITAL AND ACUTE ADMISSIONS

There is significant acknowledgement that educating and treating people outside clinical settings, before and after acute care is needed, saves significant money and clinical capacity.



## THE HALO MULTIPLIER EFFECT

The Community Health model drives a positive ripple (multiplier) impact. This impact is felt immediately and for years to come. Better prevention and self-management is 'catchy'. For each positive activity a consumer takes on, it encourages others to do some of the same.



## SUPPORTING CHRONIC CONDITIONS

What we have learned can be cost effectively leveraged for chronic conditions like Frail Aged, Diabetes, Heart Health and Obesity and we are working with our local collaborators to do just that.



## FLEXIBLE FUNDING FOR AMPLIFIED OUTCOME

Flexible funding from multiple sources enables Community Health to not only fill gaps but also create synergies across the system that are more than the sum of the parts in delivering more and better outcomes.



## INNOVATING, LOCALISING AND PERSONALISING PARTNERSHIPS AND SERVICES

Community health's individual focus achieves broader public health outcomes and individual health goals by understanding local community's needs, co-designing services and modalities with partners and customers and rapidly and cost effectively implementing them.

# Our services



# About healthAbility

**healthAbility, as the name suggests, plays a unique and valuable role in the health system.**

We work to address the root causes of vulnerability, prevent disease and promote lifelong health outcomes for people in our community.

Our role supports people to self-manage long-term health conditions, such as diabetes and mental ill-health, with multidisciplinary teams delivering community-based programs in a comfortable non-acute setting.

We also support people, including older people and people with disability, to stay living at home longer and to live well in their community. A broad range of primary health services such as occupational therapy, physiotherapy and speech pathology, and in home and community care services, such as domestic assistance and personal care can be tailored to an individual's needs.

These individual's may be people who need:

- Help with a long-term physical condition to live better
- Help with mental ill-health to live better
- Support with disability to achieve their goals
- Help to stay at home longer because of age
- Support for their child or young person to achieve their potential
- Dental services

By responding to community need and working together with individuals, their families, support networks and other health services, people in our communities can enjoy better and longer lives.

## **Key information:**

- Service delivery across the Inner East, Outer East and North Eastern Melbourne Metropolitan areas with sites in Box Hill, Eltham and Boronia
- Services provided on site, at home and via Telehealth allowing continuity of care and flexibility
- Each year, over 10,000 people receive a primary health or community care service and over 14,000 receive dental care
- Our clients come from 110 different countries of birth with 64 different preferred languages and live in 332 different suburbs of Melbourne
- 44% are over 65 years old and 15% are NDIS participants



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**Others locations:** Boronia, Nunawading and Wellington Road, Box Hill

*At the time of the COVID-19 response the organisation operated as both Carrington Health and healthAbility, therefore the information in this report is inclusive of Carrington Health.*

*We acknowledge that the services we deliver are made possible by funding from the Federal and State Governments.*



healthAbility acknowledges the traditional custodians of the land on which we work, the Wurundjeri people of the Kulin Nation, and pay our respects to Elders and community members past, present and emerging.