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Preface

A look back at 2017...

Welcome to our first annual report. Safetynet was established in 2009 by health and social care personnel working in the homeless sector who wanted people on the margins of society to actually get the healthcare they needed. Since then, thanks to their efforts and the support of statutory bodies, access to healthcare has improved.

Nevertheless, global insecurity and recession has produced challenges to society's ability to achieve access to healthcare for all members. Health and social care providers servicing vulnerable groups have had to be very resourceful and flexible in times where needs increased.

In 2016 Safetynet Primary Care expanded its remit as a networking organisation to also provide health services for those on the margins without access to care. In 2017, in line with our remit to provide these services where and while a gap exists in the health system, the Safetynet In Reach Primary Care Team was established. The other significant service established in 2017 was the Mobile Health and Screening Unit. This Unit complete with Mobile X-ray, GP and nurses contributed to health service capacity to allow realisation of the Irish commitment to provide asylum to those fleeing the Syrian Conflict.

Safetynet frontline staff have developed a culture and standard of care that is flexible, innovative, inclusive and most importantly of a high quality. In their first year Safetynet teams have developed a model of healthcare that treats people where they are, removes barriers to healthcare and promotes integration with mainstream services. With the ongoing support of our main funder and partner, the HSE Social Inclusion, we aim to improve integration of healthcare for those on the margins of society to ensure that those in most need of care get it.

Yours etc.,

Dr Fiona O'Reilly (PhD) General Manager

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Safetynet is a registered charity (No. CHY19388) Company Ltd by guarantee Registered No. 471026



Introduction

Safetynet Primary Care is a medical charity that delivers quality care to those marginalised in society without access to healthcare, including homeless people, drug users and migrants. We also facilitate a network of health services working with homeless people to ensure a coordinated approach and promote best practice.

Our Vision

Everyone has access to healthcare regardless of means, circumstance, race or creed.

Our Mission

To enable access to appropriate acceptable quality healthcare to those marginalized in society.

Our Approach

We try to think outside the box to implement services that adapt to the patient rather than expecting the patient to fit with the system.

We do not judge people or blame them for their health conditions. We see homelessness as an unhealthy state and do what we can to assist moving out of it. We respect the choices of our patients and work tirelessly to assist them in achieving health and happiness.

Principles

Quality: Everyone who accesses our services can expect a high standard of care.

Transparency: We are honest and open in all of our activities with all stakeholders.

Self-Efficacy: We promote and encourage all who use our services to take care of their own health.

Inclusion: We ensure that our services are low threshold and user-friendly, removing barriers so that those most in need of care are most likely to get it.

Flexible: We aim to adapt our services to fit the person rather than the other way around.

Responsive: We respond to emerging needs in a timely and flexible manner.

Respect: We treat all service users with dignity and respect. **Advocate:** We use our interactions with patients to advocate for their rights and entitlements.

Achievements in 2017

Achievements in 2017

- Establishment of the In-Reach Primary Care team.
- Establishment of the Mobile Health and Screening Unit.
- Initiation of health assessments for Syrian refugees onsite at Emergency Reception and Orientation Centres (EROC).
- First Irish Mobile Infectious Disease Screening Service for vulnerable groups in Galway
- New Mobile Health Unit launched by the Minister for Health
- A joint evaluation conducted by Safetynet and Dublin Simon reading to the launch of a new and improved service specifically targeted to rough sleepers without access to healthcare.
- Mobile Health Unit extended to an extra day of services with Housing First
- Network event of the year: "Irish Street Medicine Symposium"
- Expanded direct service provision capacity and infrastructure
- Increase in number of affiliated services joining the Electronic Patient Record System for coordinated care of homeless and other marginalised groups
- 5690 consultations in Safetynet & Safetynet affiliated Services in 2017

Safetynet Network

Service

The network aims to improve healthcare for homeless and marginalised people through collaboration and coordination. It connects organisations/services treating homeless people to an electronic medical record system.

Members of the Safetynet Network:

- Ana Liffey Drug Project Dublin
- Granby Medical Quay (GMQ)
- Depaul Ireland

- The Capuchin Clinic
- Dublin Simon Community
- Merchants Quay Ireland Health Promotion
- Cork Adult Homeless Integrated Service
- HSE Programme for the Homeless
- Safetynet In-Reach and Outreach teams
- Safetynet Direct Services
- The Partnership for Health Equity Clinics, Limerick
- Galway Simon
- The Salvation Army

2017 Achievements

Network workshop: Safetynet affiliates and services met to share information about the different services and working together.

Nurses Focus Group: Facilitated nurses focus group with HSE Social Inclusion to look at the barriers to access to healthcare for homeless people.

Nurses Workshop: topics included suicide and self-harm for nurses working in the sector.

Irish Street Medicine Symposium:

A successful 2 day conference was hosted by Safetynet and the UCD Medical Science Department for a growing community of health and social care workers, academics, policy makers and planners working together to improve health outcomes for the most vulnerable in our society.

The electronic medical record system expanded to 43 site licenses across 9 medical service providers.

Safetynet Primary Care Services

In Reach

Weekly clinics in emergency accommodation for homeless people

Outreach

Mobile Health Unit With GP and nursing for Dublin homeless

Mobile Assessment

Mobile health and Screening Health integration

Open Access Clinic

Cathederal clinic Roma Clinic Limerick Clinic

The In Reach Primary Care Team

Service

In 2017 the Safetynet In Reach team provided Primary Care clinics in the following emergency hostels:

Location	Consultations	Service Provider
Bru	474	Depaul
Carman Hall	117	Simon Community
Ellis Quay	365	PMV
Haven House	81	Crosscare
Little Britain Street	311	Depaul
Mendicity	57	Mendicity Institute
Oak House	39	Simon Community
Richmond Road	225	PMVT

Staff

The In Reach team consists of GPs, a Clinical Nurse Manager (Mental Health), a Registered General Nurse, a Clinic Support Worker and Administrator.

Data/Numbers

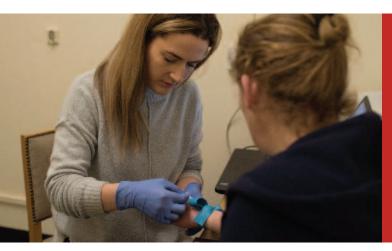
1,669 total consultations.

Purpose

To provide Primary Healthcare to homeless people in emergency accommodations and to remove the barriers in accessing secondary care. To link people into mainstream Primary Care services when possible. To provide follow-up care for patients identified on the mobile health unit, and case management for patients with mental illness and addiction.

2017 Achievements

- Establishment of the Safetynet Primary Care In Reach team.
- Provided weekly clinics in 7 emergency accommodations for homeless people.
- Conducted an influenza vaccination campaign: 240 service users vaccinated.
- Naloxone training provided for service users and staff in emergency accommodations.
- Life-saving naloxone is regularly administered by the team.
- The In Reach team was key to establishing regular multidisciplinary and multi-agency monthly mental health management meetings.



Patient feedback

"When I am sick they make me better, when I am ill they make me better, they don't refuse me and they know me well. I am not as sick as I used to be."

- 25 year old female in emergency accommodation

"They have helped and supported me. Some days you just can't get out, so it's great that they come here to me."

- 42 year old female in emergency accommodation

"The staff have been so kind, and during hard times they don't look down at me, and they got me back on track."

-25 year old male in emergency accommodation

The Outreach Health Service

Service

The Mobile Health Unit (MHU)

This service brings Primary care to rough sleepers out of hours with the Dublin Simon Community and the Housing First Intake team.

Staff

GPs and GP registrars from some of the Dublin based GP Training Programmes and a Safetynet Nurse and Outreach Workers

Data/Numbers

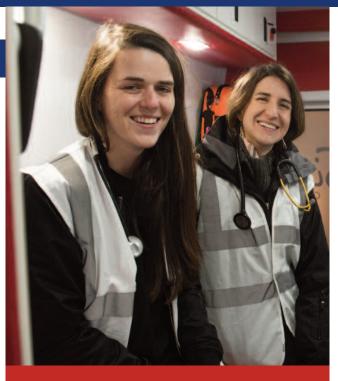
The number of clients seen during a shift is usually 4 - 6. This is an outreach service, focused specifically on patients who do not seem to be engaging with any of our other services.

Purpose

To bring healthcare to rough sleepers or other homeless people without access to health services. To link rough sleepers to appropriate health services and remove health related barriers to exiting homelessness.

2017 Achievements

- Joint evaluation and reconfiguration by Safetynet and Dublin Simon.
- Improved care and continuity through the addition of a Safetynet Nurse.
- Monday night addition The MHU now operates on a Monday night, visiting the Housing First Intake team clients in the greater Dublin area.
- Needle exchange is provided on Tuesday and Thursday by the Dublin Simon rough sleeper team.



David was in his sixties living in a tent when the mobile health unit first visited him. He had osteomyelitis in his leg and was wearing an orthopaedic boot. He had refused emergency accommodation as he wished to have his own room. He drank alcohol daily. After several visits the Safetynet nurse built a good relationship with him. He agreed to attend an out patient's appointment the nurse had secured. Eventually he agreed to a referral to the Dublin Simon Detox Unit where he successfully engaged in the programme and is currently in recovery and in temporary accommodation.

Mobile Health and Screening Unit

Service

The Mobile Health and Screening Unit (MHSU) is a health team working from a mobile clinic equipped with an X-ray and consultation room.

Staff

GP, nurses, project manager and a driver. Radiology reporting and networking of the mobile Xray unit provided by Radiology department at St. James Hospital. Radiographers provided by Global Diagnostics. Administrative support to the Family Reunification Health Assessment by Crosscare.

Data/Numbers

The MHSU screened or assessed 577 persons from at-risk populations which were Syrian refugees entering the country, homeless people in Galway, and people living in direct provision in Limerick

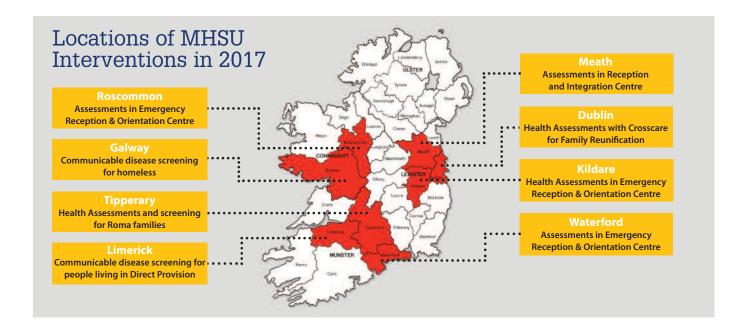
Of the Syrian refugees assessed, 44% had a medical condition and 10% had mental health issues. All had comprehensive health assessments and were integrated into the local health system with local GP providing ongoing healthcare.

Purpose

To provide health screening and assessment for vulnerable migrants and other at risk groups and to refer for ongoing treatment and care. The unit adds capacity to current health services and reduces threats from communicable diseases. It facilitates integration of marginalised populations to mainstream services.

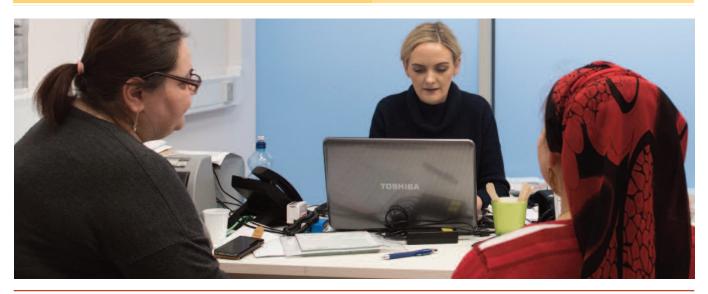
2017 Achievements

- Health assessments and screening for Syrian refugees at the first point of contact with the healthcare system.
- Following assessments, people were appropriately integrated into the local healthcare system.
- At-risk groups were vaccinated for Hepatitis B, screened for HIV, Hepatitis C and other blood-borne viruses.
- The first Irish mobile X Ray Unit operationalised.
- Responded to crisis situations around the country assessing and integrated vulnerable people not linked to services as requested by the HSE.
- Established assessment and screening program with Crosscare for migrants with no access to screening or healthcare.



Open Access Clinics

Service	Achievements
Roma Clinic Tallaght: GP clinic in a primary care centre in Tallaght Partner: Tallaght Roma Integration Project (TRIP). Staffed by: A GP and interpreter clinic support worker Roma Clinic: 1430 consultations for 372 Individuals	 Practice improvements implemented including provision of continuity of care with the same GP and interpreter. Referral pathways with other health services to ensure patients access blood testing, X-rays, and vaccinations.
Cathedral Clinic: Provides general medical services to migrants without access to medical care Partners: Crosscare Migrant Project & North Dublin GP training programme Staffed by: Two GP Registrars from the North Dublin GP training programme with clinical supervision by a Safetynet GP	 Improved Clinical governance and operational support Increase in numbers of clients attending the clinic 276 visits by 140 individual visitors from at least 36 countries 258 were without medical cards
Limerick Low Threshold Service: Two clinics for homeless people and drug users developed by the Partnership for Health Equity (PHE) and became a Safetynet service in January 2018. Partners: Ana Liffey and St. Vincent de Paul at Ozanam House and the Gables Fairgreen in Limmerick. Staffed by: A Safetynet GP with support from partner organisation	



Our Finances

Safetynet receives funding from: HSE Social Inclusion and Donations. The Mobile Health Unit was purchased with funds provided by the National Lottery. Dormant Accounts funding was made available for the establishment of the Mobile Health and Screening Unit. Funding from the Irish Hospital Consultants and The Tony Ryan Foundation contributed to services in 2017.

Safetynet Goals for 2018

In-reach:

- Consolidate the In-reach team and its approach as a gold standard for primary care for the target group
- Ensure delivery of appropriate and quality primary care to homeless people accessing supported temporary accommodation
- Ensure the In-reach team is operating in STAs most requiring these services
- Develop links with mainstream and secondary services and other networks of services.

Outreach:

- Ensure rough sleepers have access to healthcare
- Ensure coordinated and standardised mobile healthcare delivery
- Increase nursing capacity on the Unit
- Engagement and continued and coordinated care.

Open Access:

• Develop standard protocols

- Define model of delivery and necessary supports
- Define relationship with mainstream and secondary care.

Mobile Unit:

- Establish a programme of ID screening among at-risk groups including vulnerable migrants and homeless populations
- Continue health assessments and integration with IRPP and RIA for resettled refugees
- Conduct research and disseminate our findings among relevant stakeholders to influence resource allocation and policy affecting our target groups
- · Achieve sustainability beyond dormant account funding.

The Network:

- Define a strong network of services providing healthcare to homeless and vulnerable groups
- Develop a cohesive voice on health among these services
- Develop a mechanism to capture best practices, innovation and improve quality among network members.

Governance

Board of Directors

Safetynet Primary Care Board Members:

Frank Munnelly,

Brian Melaugh,

Kevin Kenny,

Dr Cliona Ni Chealaigh,

Sile Kelly,

Frank Mills,

Company Secretary: Nicola Keogh.

Clinical Governance Subcommittee members:

Dr Cliona Ni Cheallaigh SJH,

Dr Bridge Casey DCU,

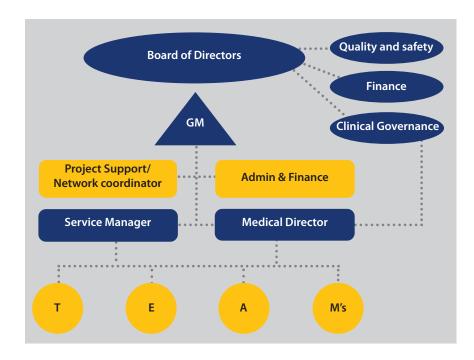
CNM Jess Sears Depaul,

Dr Kieran Harkin Inchicore Family Practice,

Dr Fionnuala Ni Ainle MMUH,

Dr Mel Bates NorthDoc.

Dr Austin O'Carroll Mountjoy Street Family Practice.





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