**Title**

Caring for vulnerable patients with complex health and social needs: the client voice

Author and affiliations

Dr Nancy Sturman, Primary Care Clinical Unit, University of Queensland

Dr Don Matheson, Health Alliance, Brisbane North

**Background**

Clients with complex health and social needs tend to have poor social, organisational and coping skills, low health literacy and self-efficacy, and high rates of mental illness, substance use disorders, and trauma. They may present frequently to Emergency Departments, and to both specific interest and mainstream general practices.

**Aims**

The aim of this qualitative research was to understand client perspectives and experiences of health and social care, across both hospital and community sectors, with a view to identifying areas for improvement.

**Method**

Three focus groups were undertaken in 2017 with clients of a Homeless Men’s Hostel. Two focus groups were undertaken with GPs, practice nurses and nurse practitioners with relevant clinical experience. Focus groups were audio-recorded and transcribed for analysis. Initial coding and analysis was descriptive, and key themes emerged inductively.

**Results**

Clients reported presenting reluctantly to health services, often in the context of perceived emergencies including unbearable mental distress which was difficult to articulate effectively. They reported experiences of feeling “classed”, disbelieved and even assaulted in emergency departments. Participants reported variable expectations of, and experiences with, GPs. They appeared to be confused and frustrated by different approaches to prescribing across and within health sectors, especially for pain and anxiety, and reported adversarial encounters both in general practice and hospital sectors. Participants also reported appreciatively on positive experiences of healthcare and personal support in both sectors.

**Conclusion**

Clients appear to often navigate mainstream referral, attendance and follow-up pathways ineffectively. Care providers report fragmentation and duplication of services, and barriers to effective and timely communication between care providers. Cultural awareness training may assist care providers in responding to clients who are unwell or upset. Patient-centred goals of care may differ from conventional goals for mainstream patients, and may be valuable to articulate.