



The Royal
Children's
Hospital
Melbourne

Immigrant health service 2019

Department of General Medicine

Key achievements in 2019

Clinical care

1595 direct care episodes and over 300 additional consultations; including work at the Royal Children's Hospital (RCH) and outreach to northern, western and eastern Melbourne.

- **Joint medical and mental health service delivery** – embedding psychiatry and mental health nursing within our service, also with support from supervised psychology interns.
- **More than 50 offshore health alert cases** - coordinating transfer with the settlement health coordinators (SHC)
- **Supporting primary care** –regular consultation for GPs, nurses, case managers, SHC and refugee health nurses (RHN), also introducing regular teleconferences with rural RHN.

Outward-facing and linked service delivery - ongoing delivery of refugee health care at:

- EACH Community Health Centre in Ringwood.
- CoHealth (Footscray) and PANCH Your Community Health (Preston).
- RCH Tuberculosis service linking patients to immigrant health where required.

Education

- **31 education sessions delivered to ~1300 people**, including 13 external presentations and 2 conferences
- **Website resources** - 1 new guideline - Critical health alerts, 15 updated guidelines.

Capacity building and service improvement

Collaboration with RCH emergency department (ED) - 7 education sessions, 4 meetings with ED leadership team, work around billing, documenting asylum seeker status, accessing interpreters, responding to offshore health alerts, sourcing health information for patients, and updating the ED clinical practice guideline.

Victorian children's services – updated web resources, education, and collaboration with RHN, refugee minor program, SHC and RCH vulnerable child coordinators about process improvement.

Disability – contributed to RCH planning around triage of developmental referrals, education sessions for disability providers, updated web resources, and ongoing participation in the AMES disability action group.

Offshore health alerts – updated web resources, provided education sessions, developed procedure for medical handover for children with health alerts with RCH ED, collaborated with SHC regarding care pathways.

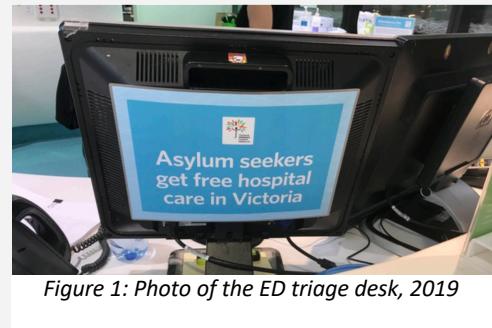


Figure 1: Photo of the ED triage desk, 2019

Research

- **Publications** - 2 peer reviewed publications, 2 manuscripts re-submitted, 2 conference abstracts submitted.
- **Ongoing work** on the health of asylum seeker children, RCH administrative data, and nursing experience of working with interpreters.
- **Research clearing house** updated – more than 200 new articles added.

Policy

- **Settlement** – submission to the Australian Government review into Integration, Employment and Settlement Outcomes for Refugees and Humanitarian Entrants.
- **Immunisation** - ongoing work on PRIME (Program for Refugee Immunisation, Monitoring and Education) through the evaluation reference group and program reporting.
- **Measles outbreak** - participation in CMO and Immunisation Department roundtable on measles.
- **Mental health** – contributed to the Melbourne Children's submission to the Royal Commission into Victoria's Mental Health System and drafted the submission from the Victorian Refugee Health Network (VRHN).

- **Countering terrorism and violent extremism** - session for Department of Home Affairs (DHA) on child development.
- **Early childhood development** drafted the VRHN submission to the Victorian Parliamentary Inquiry on Early childhood engagement with CALD communities.
- **Immigration policy** - contributions to the Royal Australasian College of Physicians (RACP) and VRHN submission to the Medevac Repeal Bill.
- **Roundtable with Michele Bachelet**, United Nations High Commissioner for Human Rights.

Working groups, advisory roles, networks

We attended more than 65 additional meetings in 2019, as well as our regular meetings, which included:

Hospital

- RCH Cultural Diversity Working Group and Cultural Diversity in Mental Health group.

State

- Rural Refugee Health Nurse teleconference - newly created.
- Children's Working Group (SHC, refugee minor program, primary school nurses) – newly created.
- Victorian Refugee Health Network and Executive Group, Asylum Seeker Working Group, Disability Action Group.
- Victorian Tuberculosis Advisory Committee.
- Department of Health and Human Services Immunisation Evaluation Reference Group.

National

- Refugee Health Network of Australia (RHeNA).
- Australian paediatric refugee health working group.
- Home Affairs Independent Medical Advisor Panel (HAIMAP), Department of Home Affairs (GP).

Background

As a service, we continue to see increasing numbers of children with complex medical needs and/or complex disability, and an increasing volume of children with behavioural, learning and developmental issues who require multidisciplinary input. We have continued to see children with rare and often untreated neurological conditions arriving from overseas, and complex developmental and mental health presentations have been ongoing and notable concern in the children and families exposed to immigration detention. A considerable part of our work this year has involved caring for patients with multi-faceted child protection and family violence issues, which has required extensive liaison with Child Protection, Family Services, and other RCH departments.

Completion of post-arrival screening and catch-up immunisation remains a core aspect of our work. Both our recent audits of Syrian/Iraqi cohorts (published) and asylum seeker children (unpublished) have confirmed less than 5% of children currently have adequate health screening in primary care - which is consistent with our clinical experience over recent years. Similarly, there are large gaps in catch-up vaccination for children and young people in primary care, which is congruent with the findings of PRIME (Program for Refugee Immunisation Monitoring and Evaluation).

Countries of origin continue to change, and we have seen increasing numbers of children from African source countries again. Department of Home Affairs (DHA) data show that in 2018-19, the most frequent countries of birth for those granted Humanitarian visas were Iraq, Democratic Republic of Congo, Myanmar, Syria and Afghanistan.

Policy changes influencing our work in 2019 included:

- Transfer of the last remaining refugee and asylum seeker children off Nauru
- The introduction, and subsequent repeal, of the Medevac Bill in Federal Parliament
- The Australian federal election in May 2019, with impact on the health of our asylum seeker cohorts
- Changes to US settlement policy for those who have been on Nauru or Manus Island, with applications accepted from those transferred to Australia for medical care

- Changes to the Humanitarian Programme and settlement strategies - with plans to increase regional and rural settlement for newly arrived refugees
- Ongoing review and reductions to the Status Resolution Support Services (SRSS) Program for asylum seekers. SRSS provides access to casework, income support and counselling. From 2017, SRSS access was reduced, in 2018 access requirements were further tightened, and in 2019 the budget for the SRSS program was reduced again
- The Victorian Government 2019-2020 Budget announcement of \$3 million to address increasing destitution and vulnerability among asylum seekers
- Completion of the rollout of the National Disability Insurance Service (NDIS) across Victoria, and establishment of the Victorian Government NDIS Implementation Taskforce
- Commissions and inquiries, including the Royal Commission into Victoria's Mental Health System, the Australian Government independent review into Integration, Employment and Settlement Outcomes for Refugees and Humanitarian Entrants ('The Shergold Inquiry'), and the Victorian Inquiry on Early childhood engagement of culturally and linguistically diverse (CALD) communities.

Our focus through 2019 has continued to be clinical care, education, capacity building and collaboration, research and policy work to promote the health of children and families who are of refugee background or seeking asylum.

Service model

The RCH immigrant health service includes a weekly outpatient clinic, inpatient and outpatient consultations, and telephone and email advice. We provide post-arrival health (including dental) screening and immunisation catch-up where needed, and a tertiary consultation service for physical, developmental and mental health issues. We have weekly clinical meetings – with medical case discussions alternating with mental health secondary consultations. We liaise regularly with case workers, settlement services, schools, refugee health nurses and primary care practitioners, allied health services and mental health practitioners to support patient care.

In 2019 we have continued **combined medical and mental health services**, with child psychiatry and mental health nursing alongside paediatric care. From the mid-2019 we have had additional support from two psychology graduates, supervised by the Department of Psychology (by Dr Alice Morgan). This has enabled access to cognitive assessments and cognitive behavioural therapy.

Outward facing care and linked service delivery – in 2019 we have worked closely with the SHC (Natalie Henry, Jacinta Bongiorno, Sarah Christensen and Janan Allouche) based in the northern and western areas of Melbourne to coordinate care for newly arriving children with offshore health alerts or health issues identified on arrival. Our team also provides specialist paediatric refugee health services in the west (CoHealth in West Footscray), east (EACH Community Health Service in Ringwood) and the north (PANCH Your Community Health service) of Melbourne. The Craigieburn clinic has now fully transitioned to leadership by the Northern Hospital.

Staff

In 2019, the immigrant health team included three medical consultant roles, a consultant psychiatrist and two 0.5 EFT fellow positions. Fellow EFT reduced in 2019 (from 1.5 EFT in 2018 to 1.0 EFT in 2019) with the end of block funding for the Syrian Iraqi cohort. As the medical workforce year runs February - January, the 2018 fellows, and Dr Tram Nguyen (psychiatry) were still working in January 2019. Staff details are shown in the following table.

We would like to formally acknowledge the work of our volunteers, Jennifer, Anokhi and Mandy, who provide invaluable assistance to our families, and also acknowledge our interpreting colleagues, whose tireless work enables clinical care.

This year we had another **two babies born to immigrant health staff** – congratulations to Katrina and Yoko on their new arrivals, which brings our total to 23 babies born to staff since 2005.

Position	Staff member	EFT (<i>Total 2.75</i>)
Clinic coordinator	Helen Milton HM	0.5
Medical lead	Georgie Paxton GP	0.5
Psychiatrist	Tram Nguyen TN (until Feb) Tiba Maloof TM (Feb onward)	0.1 0.1
Consultants	Andrea Smith AS Hamish Graham HG Shidan Tosif ST	0.1 0.05 (shared role) 0.05 (shared role)
Fellows	Marianne (Maz) Safe MS Ingrid Laemmle-Ruff ILR	0.5 0.5
Mental health nurse	Toni Mansfield TMA	0.1
Dental therapist	Tatiana Polizzi TP	0.1
Community worker	Nagaha Idris	0.05
Research nurse	Katrina Sangster KS	0.2
Teacher	Jane Barker	RCH Education Institute
Psychology graduates	Grace McMahon Aruni Subhasinge	RCH Psychology RCH Psychology
Volunteers	Mandy Tan Jennifer Kendrick Anokhi Patel	Volunteer Service Volunteer Service Volunteer Service

Affiliated services

- RCH Tuberculosis clinic:** Hamish Graham, Shidan Tosif, Ingrid Laemmle-Ruff (also Professors Steve Graham and Sarah Ranganathan)
- Cohealth, West Footscray:** Marianne Safe, Jane Standish, Alicia Quach
- EACH Social and Community Health, Ringwood East:** Shidan Tosif
- PANCH Your Community Health Service, Preston:** Siobhan Mullane, Ingrid Laemmle-Ruff

Clinical care

In 2019 areas of clinical focus included offshore health alerts, asylum seeker healthcare, child protection issues, disability, developmental assessment, care coordination, mental health review and completion of post-arrival screening. We continue to see increasing clinical complexity and have facilitated a number of direct hospital admissions and sub-specialist reviews on arrival to Australia.

In 2019, we provided **1595 direct clinical care episodes for our patients:**

- RCH Immigrant health clinic – 872 attendances for 425 patients, including 137 new patients
- RCH Immigrant health psychiatry and mental health nursing - 111 attendances for 34 patients
- RCH Tuberculosis clinic – 214 attendances including 188 new patients
- CoHealth Footscray clinic (fortnightly) – 230 attendances
- EACH outreach clinic (2-3 monthly) – 40 attendances
- PANCH outreach clinic (monthly) - 128 attendances

Clinic	Attendances - fellows	Attendances - consultants
RCH Immigrant health	345 (MS, ILR, YA)	527 (GP, AS, ST/HG) 111 (TN, TM, TMA)
Mental health		
RCH TB Clinic	81 (ILR)	133 (HG, ST)
CoHealth	230 (MS)	-
EACH outreach clinic	-	40 (ST)
PANCH outreach clinic	128 (ILR)	-
Total		1595

Demographics - RCH Immigrant health clinic

- Clinic attendance rates were 84% (872 attendances of 1044 bookings for medical staff)
- We saw children and young people from 33 countries of birth, most commonly from Iran, Syria, Iraq, Ethiopia, Thailand, Malaysia, Democratic Republic of Congo, Eritrea, Myanmar and Australian-born children from refugee and asylum seeker background families
- We saw families speaking 32 languages, most commonly English, Arabic, Persian, Burmese languages (Karen, Chin dialects, Burmese), Tamil and Tigrinya
- Interpreters assisted with 82% of consultations – consistent with 2018 figures (83%) and increased from 2016 (76%). Interpreting requirements have been high over the last 6 years, after a nadir of 68% in 2013.

Other clinical activities

We have provided more than **300 additional clinical consultations** during 2019

- **Hospital inpatient/outpatient consultations** for **28 patients**, and consultations related to billing for **18 patients**
- **Mental health consultations – 105 secondary consultations** within the team's mental health meetings
- **Phone and email consultations and advice** - medical, nursing, allied health or case managers – more than **70 patients**
- **Teleconference consultation with rural Refugee Health Nurses – 11 patients** discussed (over 2 teleconferences)
- **Offshore health queries** – assisting with advice, care planning and pathways upon arrival for **more than 50 patients**
- **Individual patient teleconferences or care team meetings** – approximately **25 patients**

Current clinical issues

Asylum seeker health

We provide care for children seeking asylum, including children in the community on bridging visas, those in community detention, and once again in 2019, for a very small number of children in held (onshore) immigration detention. This cohort includes children who arrived in Australia more than 6 years ago, children/young people who have spent years in the offshore processing system, and children born to parents who have experienced prolonged detention. The protracted and ongoing duration of uncertainty has had profound adverse impact on these children and families.

Ongoing restrictions to SRSS and increasing strain on support services have had significant impacts on some of our most vulnerable families, resulting in severe mental health, financial and housing stress. Additional support pathways have been pursued through external providers, and advocacy for these families continues.

Changes to the US settlement process for people who have been on Nauru (or Manus Island) were announced in late 2019, we spent considerable time liaising with relevant support agencies, developing communication plans, and contacting all families to provide support and to inform them of these changes.

Offshore health alerts

Existing health issues may be flagged during offshore health assessments via DHA issued health alerts, or allocation of a health undertaking (HU, requiring post-arrival medical review). In addition, the Victorian SHC review offshore health records, and liaise with refugee fellows for advice regarding ongoing referral and linkage to care where needed. Consultation and facilitating care for refugee children with offshore health alerts required extensive liaison with settlement agencies, SHC, primary care providers, RCH ED and internal sub-speciality teams. We provided advice for more than 50 children with offshore health alerts, organised timely clinical review after arrival, and facilitated links to tertiary care where appropriate. We would like to acknowledge the outstanding work of the SHC, and the value of these roles in reducing risk, and improving post-arrival care.

Disability services and access to NDIS

The NDIS has now been rolled out across Victoria. Ongoing challenges for our patient cohort include:

- **Eligibility:** Eligibility requirements for early childhood early intervention (ECEI) and NDIS services exclude asylum seekers and those on temporary visas (including Temporary Protection Visas (TPV) and Safe Haven Enterprise Visas (SHEV)) and Bridging Visas. Whilst the Victorian government has continued support for ECEI for these groups in children <7 years, the process is complex, and access has been very difficult. There is no disability service access outside schooling for older children or adolescents in this group.
- **Accessibility:** The NDIS requires familiarity with Australian systems and a level of health literacy and self-advocacy in order to access and utilise supports. Our cohort often have competing interests at settlement, limited familiarity with Australian service systems, and limited capacity to advocate effectively. There have been considerable delays in service commencement for many of our patients over 2019, particularly in the west and outer north.
- **Diagnostic assessments:** Whilst ECEI services do not require a diagnosis for service provision, a diagnosis is required upon transition to the NDIS aged 7 years and older. Long waitlists for publicly funded formal assessments and strict diagnostic criteria can limit access to NDIS funding for our patients with complex disability.

We also note considerable challenges accessing early childhood and disability supports outside the NDIS, including challenges accessing community allied health, mental health assessment and therapy, and difficulties obtaining support for transport and equipment needs.

Child protection

We provided care in 2019 for an increasing number of children with complex child protection issues, including children in out-of-home care. This involved extensive background work liaising with relevant agencies, participating in multi-disciplinary meetings, providing documentation, seeking supervision and building partnerships with both internal and external providers. Key partners included RCH social work, the RCH Vulnerable Child health Coordinators, mental health services (internal and external), Victoria Child Protection Services, and the Child Wellbeing Section, Department of Immigration (DHA). We are particularly grateful for the expertise and advice of consultant paediatrician Dr Andrea Smith within our team, given her expertise in this area.

Education

In 2019, we delivered **31 education sessions** to around **1300 participants** from health, education, and community organisations on a diverse range of topics. This figure includes **13 external presentations** and **2 conference presentations**. We provided sessions for medical students, doctors in training, graduate nurses, and diverse vocational groups (clinical, caseworkers, education and community) in the northern and western regions of Melbourne.

Education sessions, talks and conferences 2019

- 22/02/2019 **Pathology conference** (GP, 70 attendees)
- 29/03/2019 University of Melbourne Master of Advanced Nursing education session (ILR, 7 attendees)
- 20/03/2019 RCH Centre for Community Child Health (CCCH) - Fellow education (MS, 15 attendees)
- 20/03/2019 RCH CCCH Fellow education, English as an additional language (GP, 15 attendees)
- 02/04/2019 Crossing Borders information session (Geelong) (MS, 50 attendees)
- 11/04/2019 **Chief Medical Officer, Immunisation Department - Measles outbreak workshop** (GP, 25 attendees)
- 02/05/2019 RCH JRMO education session (ILR, 25 attendees)
- 02/05/2019 RCH ED nursing education session (GP, MS, 18 attendees)
- 02/05/2019 RCH specialist clinic staff education session (ILR, GP 3 attendees)
- 30/05/2019 RCH ED nursing education session repeat (GP, MS, 16 attendees)
- 06/06/2019 Global Health seminar (GP, 35 attendees)
- 20/06/2019 **Melbourne Children's Global Health Forum** (GP, 50 attendees)
- 24/06/2019 **Melbourne MD student conference panel discussion** (GP, 600 attendees)

27/06/2019 RCH ED front of house workshop (MS GP, 12 attendees)
27/06/2019 Refugee Health Program - Child and adolescent health training day session (GP MS, 20 attendees)
04/07/2019 RCH specialist clinic staff education session repeat (ILR, 50 attendees)
09/07/2019 AFPHM exam candidate's session (ILR, 5 attendees)
10/07/2019 RCH ED registrar education session (MS, 18 attendees)
11/07/2019 DHHS Water pump session (public health physician group) (ILR, 12 attendees)
06/08/2019 RCH ED clerical staff education session (MS, 12 attendees)
02/09/2019 Sunshine Hospital Refugee health study day presentation (ILR, 30 attendees)
12/09/2019 Monash University Global Studies student interviews (ILR, 3 attendees)
17/09/2019 RCH Autism multidisciplinary assessment clinic staff education session (GP, MS, 8 attendees)
17/09/2019 Visiting primary school children - group information session (MS, 14 attendees)
09/10/2019 RCH ED registrar education session (MS, 15 attendees)
09/10/2019 **RCH Advanced Trainee Research Symposium** (MS, 40 attendees)
30/10/2019 RCH Graduate Nurse Program study day session (KS, 47 attendees)
01/11/2019 Countering terrorism and violent extremism, Canberra (GP, 15 attendees)
06/11/2019 RCH ED fellow and nursing staff education session (MS, 9 attendees)
21/11/2019 PRIME ERG - summary of findings (GP, 25 attendees)
27/11/2019 RCH Graduate Nurse Program (Group B) study day session (KS, 27 attendees)

Capacity building

Linking with other services

We have continued building capacity among community- and hospital-based health providers, with a focus on the RCH ED in 2019. These activities have included:

- **Liaison with primary care** - we have provided regular advice and consultation to GPs, nurses and other primary care health practitioners. We have included a service information letter on our website for distribution to primary care providers (see <https://www.rch.org.au/uploadedFiles/Main/Content/immigranthealth/IH-Provider%20Letter%20Sep%202019%20final.pdf>)
- **Collaboration with the Victorian Settlement Health Coordinators** - we have worked closely with the SHC, with a focus on offshore health alerts and complex recent arrivals (see above)
- **Engagement with the Refugee Health Program** - we have had engagement with RHP through individual patient consultation, higher-level dialogue with the program's leadership team, and provision of dedicated education and training for refugee health nurses. From November 2019, we have commenced monthly teleconferences with rural-based RHN to offer a further avenue for consultation and advice.
- **New collaborations with Victorian children's services** - we have collaborated with partner agencies caring for refugee children, particularly the refugee minor program, primary school nurses and the Department of Education. In October 2019, we commenced quarterly meetings, bringing a number of these groups together to further streamline and coordinate referrals and facilitate care pathways.
- **Close work with Cabrini Hub** - we work closely with Cabrini Hub who provide care for many of the parents of our patients and have valued the open collaboration and communication.
- **Craigieburn paediatric refugee health clinic** - after this service transition to the Northern Hospital 2019, we continued regular communication to support coordination of patient care and management of referrals.
- **Hosting external practitioners within the immigrant health service**, including medical students and psychology graduates.
- **Online resources** - We have continued to update our online policy summaries, clinical practice guidelines, resource links and presentation slides for use by other local and national services. We regularly receive feedback regarding the wide use of these online resources.

Health services improvement within RCH

- We provided 17 education sessions at RCH; to ED staff, medical staff at all levels, allied health, nursing, mental health and administrative staff.
- We continued to provide support for the RCH finance department, to avoid inappropriate billing of asylum seeker patients, and provided input into RCH policy on non-Medicare eligible patients. Refugee fellows continued to act as the contact point for billing queries around asylum seeker status, with at least 18 consultations over 2019.
- We have built professional links with the RCH vulnerable child health coordinators, to improve internal processes for supporting care for vulnerable children within our service.
- We provided input (through discussion, formal meetings and documentation) into RCH planning around developmental and behavioural referrals - providing advice regarding key considerations and priorities for refugee and asylum seeker children.
- We contributed to the RCH formal hospital accreditation process through meetings, documentation and facilitating a tour of our service.
- We are investigating options to support emotional wellbeing within our team, particularly around debriefing.



Emergency Department

With Maz Safe working in both the RCH ED and immigrant health, 2019 provided a valuable opportunity to improve collaboration between the departments, and to increase the profile of immigrant health within the ED. Maz undertook a number of key activities, including 7 education sessions (with medical, nursing, and administrative staff) and 4 additional meetings with the ED leadership team. Core areas of work included:

- **Billing:** Clarification of billing and administrative processes, particularly for asylum seeker patients presenting to ED. Processes around billing were streamlined with triage, and the Finance Department. Resources on asylum seeker identification were updated and provided for ED staff, and a poster was designed, printed and displayed at triage, with sign off on this communication from RCH Finance, and the Cultural Diversity Committee. We also worked to improve clarity and consistency of asylum seeker status documentation within the electronic medical record (EMR).
- **Interpreter access:** We provided education on working with interpreters to ED staff, clarified RCH processes regarding interpreter funding and access, and encouraged ED staff to request and utilise interpreters after hours.
- **Offshore health alerts:** Consulted with ED senior management, SHC and settlement services around processes for medical handover for offshore health alerts. Developed and refined internal processes for RCH ED receiving medical handover for offshore health alerts, and where appropriate, facilitating medical review after arrival. Internal process guideline refined and developed into online guideline (see https://www.rch.org.au/immigranthealth/clinical/Critical_health_alerts/), and EMR note template for health alerts refined.
- **Immigrant health ED clinical practice guideline (CPG):** Updated online CPG, with focus on emergency presentations relevant to immigrant health, in collaboration the RCH clinical practice guidelines team (due to be uploaded shortly)
- **Health literacy:** Sourced plain-language translated information regarding the Australian health care system and accessing healthcare – to be available in the ED setting.

Figure 1: Photo of the ED triage desk, 2019

We look forward to continued collaboration between our services, and Ingrid will be working in RCH ED in the second half of 2020.

Research and learning

Peer reviewed publications

Volkman T, Graham H, Laemmle-Ruff I, Tosif S, Tebruegge M, Ranganathan S, Curtis N. Interpretation and management of discordant tuberculin skin test and interferon-gamma release assays results in children. *J Paediatr Child Health*. 2019 Feb;55(2):247-248.

Submitted for publication

- **Volkman T, Clifford V, Paxton GA.** Schistosoma serology after treatment of Schistosoma infection in resettled refugee children. *Manuscript submitted to Tropical Medicine and Infectious Diseases, revised and re-submitted mid 2019*
- Douglas P, **Paxton G**, Wickramage K, Ahmed I, Jan A, Perera S, Hui C, Walker P and Zenner D. Migrant health assessments: shifting from instruments of exclusion towards public health good and improved outcomes for migrants. *Manuscript submitted to BMJ, revised and re-submitted Sept 2019.*

Other

- Research clearing house - provides a systematic collection of Australian refugee health-related research. More than 200 new peer-reviewed articles were identified and added in 2019 (ILR). The research clearing house is updated annually.
- Book chapter - Immigrant Health, RCH Paediatric Handbook 10th edition (GP)
- Abstract accepted - **PRIME - access, equity and innovation in immunisation for refugee background communities.** Public Health Association of Australia conference 2020.

Ongoing areas of research

- Australian immigration detention and child health - a retrospective audit (ST, team); multiple team planning meetings, refinement of data fields, data review and cross-checking, additional cases collated, files reviewed for data entry, manuscript in preparation
- Further work reviewing immunisation catch up in Victoria, and PRIME (GP)
- Tuberculosis screening in the Karen cohorts in Western Melbourne – 10-year experience (KS, Ross Drewe, GP)
- Language services – analysis of administrative data (Karen Kiang – 2017 fellow)
- Language services – experiences of nursing staff (KS): ethics approval, data collection completed
- Pre-migration immigrant health screening (focus on LTBI screening in children) – with Burnet Institute (ILR)

Professional development and training

We undertook a number of professional development activities this year, including:

- Autism Diagnostic Observation Schedule – 2nd Edition, 2-day training program undertaken by whole immigrant health team, taught by Mindful Centre for Training and Research in Developmental Health, University of Melbourne. This also included additional training regarding autism assessment in children with a history of significant trauma and attachment issues. Autism Basics training also facilitated for fellows. (March 2019)
- Attended the 2nd Australia and New Zealand Refugee Trauma Recovery in Resettlement Conference (May 2019, GP)
- Participated in additional EMR Training (Immigrant Health Training Workshop – GP, AS, ILR, MS, and EMR programmer's workshop, GP)
- Shidan Tosif also submitted his PhD thesis, and Ingrid Laemmle-Ruff completed her RACP Australian Faculty of Public Health examinations

Committees, advisory roles, meetings

In addition to our regular immigrant health meetings (see below), we have **attended or convened more than 65 additional meetings** with partner organisations to discuss service delivery, collaborations, policy issues and other

aspects of refugee and asylum seeker health. Areas of focus in 2019 included; improving RCH processes around access for refugees and asylum seeker patients (particularly the emergency department and developmental assessment services); meeting with state and federal Department of Health partners around key components of healthcare for migrants; improving access to disability supports within NDIS and community health; streamlining processes for referrals for children with health issues flagged pre-departure (in conjunction with AMES and settlement health coordinators); supporting our asylum seeker cohort affected by the US settlement process; and continuing to engage with partner agencies to improve coordination of care across the sector.

Regular immigrant health meetings

- Weekly supervision meeting with fellows
- Fortnightly clinical audit meeting – medical team
- Fortnightly mental health secondary consultations: medical team, mental health staff, Dr Alice Morgan (RCH Psychology Department), Jane Barker (RCH Education Institute)
- Weekly research planning meeting - KS and GP
- Bi-monthly service planning meeting – GP and Kirsten Noakes (General Medicine Operations Manager)

Committees, reference groups and working groups

- Refugee Health Network of Australia (RHeANA) (GP) - bimonthly meetings
- VRHN and Executive Group, Asylum Seeker Working Group - quarterly meetings
- DHHS Immunisation Evaluation Reference Group (GP) - quarterly meetings
- Australian paediatric refugee health working group (all) – bimonthly meetings
- AMES Disability Action Group (ILR) - quarterly meetings
- Victorian Forced Marriage Network (fellows) – quarterly meetings
- Outer Northern Refugee Health Network (fellows) - quarterly meetings
- Victorian Tuberculosis Advisory Committee (HG) - quarterly meetings
- RCH Cultural Diversity Working Group (fellows) – quarterly meetings
- RCH Cultural Diversity in Mental Health Committee (fellows) - quarterly meetings
- Regional Refugee Health Nurses teleconference (GP, fellow) – monthly teleconference, newly organised in November 2019
- Victorian children's services catch up – RCH immigrant health, refugee minor program, primary school nurses and settlement health coordinators – quarterly meetings, newly set up October 2019

Summary of meetings

- 09/01/2019 Consult Humanitarian outcomes - **Peter Shergold, Kerrin Benson, Margaret Piper (GP)**
- 17/01/2019 PRIME- External evaluation of Immunisation Project (GP, ST)
- 07/02/2019 VRHN Executive (GP)
- 11/02/2019 RCH Cultural Diversity Working Group (MS)
- 14/02/2019 Outer Northern Refugee Health Network (ILR)
- 26/02/2019 Victorian Forced Marriage Network (MS)
- 07/03/2019 VRHN Asylum Seekers Working Group (GP)
- 07/03/2019 VRHN Disability Action Group (ILR)
- 07/03/2019 VRHN Statewide meeting (GP, ILR)
- 14/03/2019 PRIME Evaluation Reference Group (GP)
- 16/03/2019 ED staff - to form immigrant health working group (MS)
- 27/03/2019 Australian paediatric refugee health working group teleconference (GP)
- 29/03/2019 RHeANA teleconference (GP)
- 01/04/2019 ED deputy director and clerical manager (MS)
- 04/04/2019 RCH Accreditors (GP)
- 05/04/2019 DHHS immunisation Section and Chief Medical Officer (GP)

- 10/04/2019 Refugee Health Program, meeting with managers: Sue Casey and Kath Desmyth (GP)
- 11/04/2019 Chief Medical Officer, Immunisation Department - Measles outbreak workshop (GP)**
- 30/04/2019 Mental Health Roundtable in preparation for the VRHN submission to the Royal Commission (GP)
- 02/05/2019 Australian paediatric refugee health working group teleconference
- 03/05/2019 PRIME - Feedback on interim report of external evaluation (GP)
- 14/05/2019 PRIME - Teleconference (GP)
- 16/05/2019 PRIME Evaluation Reference Group meeting, DHHS (GP)
- 20/05/2019 EMR Training Workshop - Immigrant Health (all)
- 21/05/2019 RHeANA teleconference (GP)
- 23/05/2019 Department of Home Affairs Canberra meeting (GP)**
- 27/05/2019 DHHS Child Protection Chief Practitioner meeting (GP)
- 03/06/2019 CALD mental health (ILR)
- 04/06/2019 **Jack Brockhoff Child health and wellbeing advisory group (GP)**
- 05/06/2019 ED staff and Chief Financial Officer re processes for Medicare ineligible patients (GP, MS)
- 06/06/2019 VRHN Executive (GP)
- 07/06/2019 PRIME - external evaluation of Immunisation Project (GP)
- 11/06/2019 **Craig Riviere and Penny Stanton, DHA Canberra Child wellbeing (GP)**
- 13/06/2019 Refugee fellows meeting, DHHS (ILR, GP)
- 23/07/2019 RHeANA teleconference (GP)
- 25/07/2019 PRIME Evaluation Reference Group meeting (GP)
- 01/08/2019 VRHN Disability action group, VRHN (ILR)
- 01/08/2019 VRHN Asylum seeker working group, VRHN (GP)
- 01/08/2019 VRHN Statewide meeting (GP, ILR)
- 08/08/2019 PRIME Teleconference meeting external evaluation (GP)
- 09/08/2019 Australian paediatric refugee health working group teleconference
- 02/09/2019 CALD mental health (MS)
- 02/09/2019 RCH Stepped care project (GP)
- 03/09/2019 Refugee Council of Australia meeting (GP)
- 03/09/2019 RHeANA teleconference (GP)
- 09/09/2019 Catch-up with SHC (GP, ILR, MS)
- 10/09/2019 Teleconference US settlement process (GP)
- 07/10/2019 Roundtable with Michele Bachelet (United Nations High Commissioner for Human Rights) (GP)**
- 10/10/2019 PRIME - Planning meeting, Immunisation Section, DHHS (GP)
- 15/10/2019 VRHN - planning for early childhood submission with VFST (GP)
- 21/10/2019 Victorian children's services - primary school nurses, refugee minor program, SHC (GP, MS)
- 11/11/2019 RHN regional zoom teleconference (GP, MS, ILR)
- 14/11/2019 Refugee fellows meeting, Dept Health and Human Services (ILR, MS, GP)
- 21/11/2019 PRIME Evaluation Reference Group, DHHS (GP)
- 21/11/2019 Humanitarian and Settlement Division, Immigration and Settlement Services Group, DHA (GP)**
- 22/11/2019 Comcare (GP)
- 26/11/2019 RHeANA teleconference (GP)
- 28/11/2019 VRHN Asylum seekers working group (GP)
- 28/11/2019 VRHN Statewide meeting (GP)
- 02/12/2019 RHN regional zoom teleconference (GP, MS)
- 02/12/2019 CALD mental health (ILR)

- 02/12/2019 **United States (US) resettlement program VFST (GP)**
- 03/12/2019 Stepped care project RCH (GP)
- 04/12/2019 **Meeting with US settlement services, VFST (GP)**
- 05/12/2019 Meeting with ED Director re: process issues (MS)
- 13/12/2019 RCH General Medicine Planning Day (GP)
- 17/12/2019 Comcare (GP)

Policy

We remain involved in policy work at local, State and Commonwealth levels, including through the committees and working groups listed above. Specific areas of policy focus in 2019 included:

Settlement

- Drafted submission to the Australian Government Independent commissioned review into Integration, Employment and Settlement Outcomes for Refugees and Humanitarian Entrants ('the Shergold Inquiry'), highlighting key priorities for refugee children, adolescents and families (submitted 21 January 2019, GP).

Mental health

- Contributed to the Melbourne Children's Campus submission to the Royal Commission into Victoria's Mental Health System (July 2019, GP)
- Drafted the VRHN submission to Royal Commission into Victoria's Mental Health System (July 2019, GP)
- Participation in the RCH review of mental health services (Nov 2019, GP).

Broader immigration policy

- Contributed to the RACP submission on the Medevac Repeal Bill (Aug 2019, GP)
- Contributed to the VRHN submission on the Medevac Repeal Bill (Aug 2019, GP)
- Appointment on Home Affairs Independent Medical Advisors Panel (HAIMAP) for DHA, with one official meeting (Nov 2019, GP).

Early childhood development

- Drafted the VRHN submission to the Victorian Inquiry on Early childhood engagement of culturally and linguistically diverse (CALD) communities (Oct 2019, GP), with presentation to the Inquiry on 25 Nov 2019
- Ongoing with liaison with relevant state and Commonwealth services to improve early childhood outcomes for refugee-background children (including settlement agencies, Child Wellbeing Section DHA, Child protection services, Refugee minors program and Early intervention services).

Immunisation

PRIME continued in 2019, with the support of additional DHHS funding. We participated in and chaired (GP) the Evaluation Reference Group, and collaborated with DHHS on a number of immunisation related issues, including:

- Immunisation catch-up communications materials, and fact sheet updates for case workers and immunisation providers
- Updated RCH immigrant health guideline: Catch-up immunisation
https://www.rch.org.au/immigranthealth/clinical/Catchup_immunisation_in_refugees/
- Planning regarding associated research options, and submission of two research abstracts to conferences
- Project reporting - commenced in late 2019 and completed in early 2020.

Other

- Malaria: Liaison with DHA on malaria notifications and monitoring of offshore malaria alerts

- Lead: Liaison with Victorian DHHS regarding screening for elevated lead levels and Statewide trends

Web-based guidelines

New webpages

- Critical Health Alerts outlining process of offshore health alerts (applied to some children with critical health issues flagged at offshore health assessment), and RCH processes for care coordination and medical handover on arrival in Australia (GP, MS, DM)
- Contribution to updates of RCH clinical practice guidelines:
 - Immigrant health Clinical Practice Guideline (MS)
 - Vit D deficiency guideline (GP)

Updated webpages

- Initial assessment
- Birth date issues
- Immunisation catch-up
- Asylum seekers
- Developmental assessment
- Education assessment
- Refugee policy and timeline (multiple updates over year – January, June, August, October and December 2019)
- Other resources
- Interpreters
- Status resolution support services (SRSS)
- Immigrant health clinical resources
- Talks - Refugee health background information and demographics slides (June 2019)
- Research clearing house (January 2019)

Future directions

- Ongoing advocacy for improved post-arrival screening processes across Victoria, including access to tuberculosis screening tests and catch-up immunisation
- Increasing coordination of care and supports for children of refugee-background settling in rural areas, including resources and consultation pathways for rural-based health care providers
- Refining processes for referral, review and care coordination for children with significant disability, including optimising early intervention and NDIS (or equivalent) engagement and service provision for our cohort
- Adapting to changes to migration intake, including increasing numbers of plane arrivals seeking asylum, and changing demographics (for example, predicted intakes from South America)
- To continue to support health and well-being for asylum seeker children, in particular those exposed to immigration detention, and to advocate for policies that consider the complex needs of these children and families
- Continuing to refine and improve internal aspects of our service, including the clinical spaces and supports for emotional wellbeing within our team.

On behalf of RCH Immigrant health - thank-you to our patients and their families for working with our service and helping us understand more about migration, settlement, health and healthcare; and a special thanks to Helen Milton, our wonderful clinic coordinator. We are indebted to our interpreting colleagues and acknowledge their skills, professionalism, support and essential contribution to our work. We are grateful to the Department of General Medicine, RCH Mental Health, and to the DHHS who provide our funding, and to the RCH Executive for their ongoing support.

*Georgie Paxton, Ingrid Laemmle-Ruff, Marianne Safe
January 2020*