



# Immigrant health service 2013

Department of General Medicine

## Background

2013 saw further changes in Australian policy related to refugees and asylum seekers. The August 2012 'Report of the Expert Panel on Asylum Seekers' led to an increase in the annual Humanitarian intake (to 20,000 people – which was delivered over the 2012-13 year), additional family sponsorship places for people of refugee-background, reintroduction of offshore processing, the introduction of a 'no advantage' principle (interpreted as loss of work rights), and increased use of community detention.

Despite these changes, the number of people arriving by boat and seeking asylum continued to increase, with large numbers of people (including families) subsequently released into the community on bridging visas (BV) through the first half of 2013, and reduced time spent in held detention. Medicare access for people on BVs was announced in January 2013, which improved service access for this group.

In July 2013, there was a major policy shift, with the announcement that 'people arriving without a valid visa will not be resettled in Australia', with memorandums signed between Australia and Nauru, and Australia and Papua New Guinea resulting offshore detention, with plans for processing and resettlement in these countries. The change of federal government in September led to a reduction in the annual Humanitarian intake (back to 13,750 places), an attempted re-introduction of temporary protection visas, and delays in visa processing, resulting in few people being released from detention and large numbers of bridging visas expiring, resulting in loss of Medicare. A 'Code of Conduct' for asylum seekers was introduced in December 2013.

By the end of 2013 in Victoria, there were over 17,000 new arrivals of refugee/asylum seeker background during the year, including 4118 offshore program Humanitarian entrants, an estimated 9000 BV holders, including 2439 interstate asylum seeker transfers, just over 400 people in held detention, 1389 people in community detention, and additional plane arrivals (numbers not known, 1400 attending Asylum Seekers Resource Centre). The complexity in visa status, entitlements, service access, work rights and the impact of the detention environment have been challenging for health care and service provision, however the Victorian government has been a leader in refugee health policy in Australia and announced significant funding in the 2013.

In 2013, the most frequent source countries for the different were:

- Offshore program - Iraq, Afghanistan, Burma, Iran, Bhutan<sup>1</sup>
- Protection visa grants (onshore arrivals granted permanent protection) – Afghanistan, Iran, Pakistan, Stateless, Sri Lanka<sup>2</sup>
- Bridging visa holders – Iran, Sri Lanka, Afghanistan<sup>3</sup>
- Immigration detention – Iran, Sri Lanka, Vietnam, Afghanistan<sup>4</sup>

In the RCH Immigrant health service, we saw increasing numbers of asylum seeker children and adolescents, including children in Community and Held Detention. Patient complexity has increased markedly, and mental health issues are prominent. We saw the impact of detention on children and families first-hand, we saw children who have missed months of schooling in Australia, we have seen increased uncertainty in families with recent federal policy changes, and lapsing bridging visas. We have, and will continue, to advocate for our patients.

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<sup>1</sup> Department of Immigration and Border Protection. Settlement Reporting Facility: Humanitarian entrants by Country of Birth. Available at: <http://www.immi.gov.au/living-in-australia/delivering-assistance/settlement-reporting-facility/>

<sup>2</sup> Department of Immigration and Citizenship. Annual Report 2012-2013. Available at: <http://www.immi.gov.au/about/reports/annual/2012-13/pdf/report-on-performance.pdf>

<sup>3</sup> Victorian Refugee Health Network – personal communication

<sup>4</sup> Department of Immigration and Border Protection. Immigration Detention Statistics. Available at: <http://www.immi.gov.au/About/Pages/about-immigration-detention.aspx?heading=immigration-detention-and-community-statistics>

## Key Achievements in 2013

- 1003 episodes clinical contact and 41 clinical consultations –
- 42 education sessions to over 2000 participants, inc. 6 conference presentations
- Implementation of CAREHR – electronic health record into clinic practice
- 5 peer reviewed publications, 1 book chapter, 3 other publications
- Comprehensive update of [RCH Immigrant Health website](#)
  - 4 new guidelines, 10 updated pages/guidelines
- 2 fact sheets – Vitamin D and Rickets
- [Refugee research clearing house](#) – updated - 180 new articles added
- Improved collaboration with detention health services, including development of RCH 'Care of Children in Detention' procedure
- Participation/consultation in asylum seeker triage model North-West Region
- Implementation fortnightly Mental Health secondary consultation meetings
- Ongoing mentoring program for medical students, pilot migrant health program MD3, collaboration with University of Melbourne
- Chair Victorian Refugee Health Network
- Advisory group to Victorian Refugee Health and Wellbeing Action plan
- Development of [easidose](#) – web-based picture prescribing aid
- Medical student elective and work with Asylum Seekers Research Centre
- Development of parenting education materials for AMES case workers to deliver to newly arrived community groups

## Service model

The immigrant health service includes a weekly outpatient clinic, inpatient and outpatient consultations, telephone and email advice, and affiliations with the tuberculosis service, and the Western Region Health Centre vitamin D service. The clinic provides both post-arrival health screening and tertiary consultation service on refugee health issues. In 2013 we commenced use of the CAREHR electronic health record, developed [easidose](#), ensured we had weekly audit meetings after clinic, and started a secondary consultation system with the RCH Integrated Mental Health Service and the RCH Education Institute.

## Key points - clinic demographics

- **Clinic attendance rates were 89%** (764 attendances of 858 bookings)
- There were **764 patient attendances in the IHC in 2013, including 151 new patient bookings**. There were a further **407** patient contact episodes, predominantly by the Fellows, Dr Daniel Engelman and Dr Vanessa Clifford, at both the Western Region Health Centre and the TB Clinic.
- We saw children and young people from **35 countries of birth**, most commonly Iran, Ethiopia, Burma, Somalia, Sudan, and Australian born children of refugee background families
- We saw families speaking **38 languages**, most commonly Somali (154), the Burmese languages (Karen, Chin dialects, Burmese, 139), Farsi (81), Arabic (67), and Dinka (59)

- **Interpreters were required for 68% of consultations**, which was similar to 2012.

## Staff

<b>Position</b>	<b>Staff member</b>	<b>EFT</b>
Clinic coordinator	Helen Milton	0.4
Medical lead	Georgie Paxton	0.3
Consultants	Georgie Paxton	Fee for service
	Andrea Smith	
	Colette Reveley	
Fellow	Daniel Engelman	0.4 (+ 0.1 WRHC)
Fellow	Vanessa Clifford	0.2
Dental therapist	Tatiana Polizzi	0.1
Community worker	Nagaha Idris	0.05
Research nurse	Katrina Sangster	0.2
Volunteers	Kirsten Gordon	Volunteer
	Yolanda Majano	Volunteer

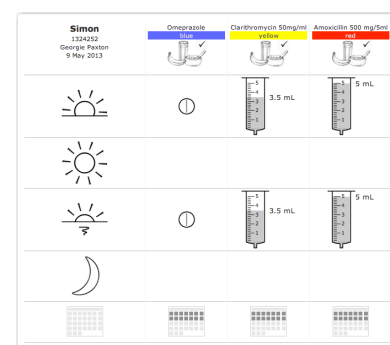
## Affiliated services/work

- Tuberculosis clinic: Dr Daniel Engelman/ Dr Vanessa Clifford
- Western Region Health Centre: Dr Daniel Engelman/Dr David Tickell/Dr Jane Standish
- Darebin Community Health Centre: Dr Margie Fulton
- Craigieburn Community Health Centre: Dr Jo Fraser
- Dandenong Hospital Refugee Health Clinic: Dr Danni Bao

## Clinical care

**Mental health secondary consultation** – Dealing with mental health presentations has been an ongoing, and increasing challenge. After a prolonged period of discussion we are pleased to have commenced this collaboration with our mental health colleagues, starting from April 2013. Each fortnight, we present cases, and receive advice and input from a consultant psychiatrist, and psychologist with a special interest in trauma. This is supported by the RCH Education Institute, in the form of direct support by a teacher. This has already been incredibly valuable, and we are already seeing increased access for our clients to Mental Health Services, as well as improved communication. We regard this as a significant achievement.

**Easidose** – Department of Health has supported the development of Easidose [www.easidose.com](http://www.easidose.com) – a web-based prescribing aid, addressing language and literacy barriers. Easidose enables picture based dosing instruction, it is available for any clinician, and it has broad applicability for many patient groups. Patient feedback has been very positive.



**CAReHR** – RCH Immigrant health commenced use of CAReHR for clinical care in May 2013, CAReHR is a clinician configurable electronic health record, with dual clinical/research functionality. It allows clinicians to define problem forms to streamline clinical care and prescribing, and provides printed summaries and basic translated problem lists for patient held records. CAReHR is part of the Refugee Clinical hub – linking primary and specialist care in refugee health, and has recently been linked to CDMnet allowing information to be shared across

the care team. We are currently in a stage of ongoing development, finalising and adjustment of CAREHR based on real-time clinical use. The Refugee Clinical hub has been developed in collaboration with University of Melbourne, Royal Children's Hospital, Melbourne Health, Monash Health, Barwon Health, Arcitecta, and Precedence Health, funded by the Windermere Foundation, IBES at University of Melbourne, and the Department of State Development, Business and Innovation. We have been fortunate to receive additional support through the Health Innovations Reform Council to support the integrated care and telehealth components of the clinical hub.

**Care of asylum seekers** – In 2013 we responded to the influx of large numbers of asylum seeker children proactively, through direct clinical care and the timely introduction of the secondary mental health consultation model, and also by strengthening partnerships with relevant services and involvement in the triage system. We are building links with the Asylum Seeker Resource Centre, International Health and Medical Services (IHMS), and the relevant case management and settlement agencies. We have provided input into the asylum seeker triage model in the North West region. We have updated our hospital's procedure '[Care of children in detention](#)' with the support of our Hospital Executive and Legal teams, and in liaison with IHMS. We are currently providing education to our Emergency Department staff at different levels, as a key initial point of contact for asylum seeker children and adolescents. This was extended to outpatient staff in the second half of the year.

**Staff wellbeing** – We have seen increasing numbers of complex patients with mental health issues, and we continue to hear disclosures of torture and human rights abuses. The clinic audit meetings and mental health consult meeting have been a useful to discuss these cases. In 2013 we organised a professional development session for IHC staff from Dr Conrad Aikin (Foundation House) on handling trauma disclosures – this was a valuable resource, and we hope to pursue further sessions in 2014.

## Education/presentations

**In 2012, we delivered 42 education sessions to over 2000 health providers**, on a diverse range of topics (DE 20, GP 18, joint 2). This figure includes:

- **6 invited conference presentations** (GP)
- **32 external presentations** (DE, GP)
- Ongoing delivery of the **targeted education module for Maternal and Child Nurses** (developed in 2012), delivered across a further 4 metropolitan and regional LGAs, and a presentation to the undergraduate MCH nursing students at **Deakin** University)
- **Ongoing provision of mentoring for Western Clinical School medical students and support for MD3 pilot program in migrant health** (DE, GP) - following the 2012 initiation of a mentoring program where the medical students mentor refugee youth (collaboration with Yarra Police, YMCA Victoria and University of Melbourne)
- **Provision of medical student elective** in collaboration with the Asylum Seekers Research Centre.

## Research

**Updating - Australian Refugee Research Clearing House (DE, VC, GP)** see: [http://rch.org.au/immigranthealth/research.cfm?doc\\_id=15303](http://rch.org.au/immigranthealth/research.cfm?doc_id=15303)

## Publications

- Clifford V, Rhodes AR, Paxton GA. Learning difficulties or learning English difficulties. J Paediatr Child Health 18 Oct 2013. DOI: 10.1111/jpc.12396

- Colucci E, Minas H, Szwarc J, Partesana T, Guerra C and Paxton G. In or out? Barriers and facilitators to refugee background young people accessing mental health services, service providers' views. *Accepted for publication Transcultural Psychiatry, July 2013*
- Paxton GA, Teale GR, Nowson CA, Mason RS, McGrath JJ, Thompson MJ, Siafarikas A, Rodda CP and Munns CF. Vitamin D and health in pregnancy, infants, children and adolescents in Australia and New Zealand: a position statement. *Med J Aust* 2013; 198 (3): 142-143. doi:10.5694/mja11.11592
- Osteoporosis Australia Summit. Building Healthy Bones Throughout Life: An evidence-informed strategy to prevent osteoporosis in Australia. *Med J Aust. MJA Open* 2013; 2 Suppl 1: 1. doi:10.5694/mjao12.11363
- Jimenez G, Alex G, Paxton G, Connell T, Hardikar W. (2013) B Alert: Hepatitis B virus infection in children in Victoria. *J Paediatr Child Health* 49(3): E213-216

## Other publications

- **Refugee child health.** Victorian Association of Maternal and Child Health Nurses (VAMCH) bulletin. Submitted September 2013. Distributed to all MCH nurses in Victoria.
- **Collaboration through technology for refugees.** Pulse IT [http://www.pulseitmagazine.com.au/index.php?option=com\\_content&view=article&id=1634:collaboration-through-technology-for-people-of-refugee-background&catid=16:australian-ehealth&Itemid=327](http://www.pulseitmagazine.com.au/index.php?option=com_content&view=article&id=1634:collaboration-through-technology-for-people-of-refugee-background&catid=16:australian-ehealth&Itemid=327)
- **Book chapter:** Paxton G. Immigrant health. Royal Children's Hospital Paediatric Handbook, 9<sup>th</sup> edition, *submitted May 2013*
- **Evaluation Burmese childhood TB program:** 11-20 Aug 2013: DE participated in the World Health Organisation consultation on the Child Tuberculosis Programme in Burma, and co-authored a report of this evaluation with Professor Steve Graham.

## Ongoing research

- **Evaluation of CAREHR** (GP)– Mixed methods, evaluation and systems development (Department of Business and Innovation funding - BEIP project grant and Windermere Foundation fellowship funding, collaboration with Royal Melbourne, Dandenong and Geelong Hospitals)
- **Health Innovations Reform Council funding to develop patient and doctor portals for CAREHR** (December 2013)
- **TB screening in a community cohort of Karen refugees in Victoria** (GP, KS)
- **NHMRC grant submission 2013**– (AI) - The Childhood Resilience Study: building evidence for reducing health inequalities across the life course. Successful: \$1,030,579.10.
- **Work with Healthy Mothers Healthy Families Research Group**, Population Health, Murdoch Children's Research Institute Theme funding – Victorian Perinatal Data Collection application to examine outcomes for women from Humanitarian Source Countries
- **Supervision medical anthropology student** – ethnographic study of the literature on child asylum seekers
- **Ethics application** – evaluation medical student migrant health program - ongoing
- **Oral health** – paper for re-submission
- **Evaluation Maternal and Child Health self identified learning needs in refugee health**
- **UNSW collaboration:** Child development and settlement: a longitudinal study of risk and protective factors for refugee children during their first three years in Australia. NHMRC application for 2014

## Website

Located here: [http://rch.org.au/immigranthealth/index.cfm?doc\\_id=10575](http://rch.org.au/immigranthealth/index.cfm?doc_id=10575) around 3000 hits/year

- New guideline published – [Syphilis screening](#)
- New guideline published – [Low B12](#)
- New guideline published – [Schistosomiasis](#)
- New guidelines drafted and under review – Strongyloidiasis, growth and nutrition, STI screening
- Updates/revisions – Initial Assessment, Overview of Health Issues, Tuberculosis Screening, Vitamin D, Hepatitis B, Educational assessment, Asylum Seekers, Recent policy changes (on a weekly basis!)
- Updates - [Translated resources](#), [Other resources](#)

**New RCH Clinical practice guideline:** [vitamin D](#) (Statewide guideline) including [photoboard](#)

**New RCH procedure:** [Care of Children in Detention](#)

**New RCH factsheets:** Vitamin D and Rickets (completed August 2013, awaiting publication)

## Meetings and committees

- **40 meetings** attended by GP and DE on refugee health issues through 2013
- GP has taken on **Chair Victorian Refugee Health Network** in 2013
- GP is now a member of the **RCH cultural diversity committee**
- Both DE and GP have attended the **Mental Health cultural diversity working group** through the year
- **Meeting with staff from Auditor General Office** on access to services, including language services for CALD and refugee-background children

## Policy work

- Co-opted member **Physical and Mental Health (P&MH) Sub Committee to the Interim Joint Advisory Committee for Nauru Regional Processing Arrangements** Department of Immigration and Border Protection, Dec 2013 (GP)
- **Victorian Department of Health, Refugee and asylum seeker health action plan**, May, Jul and Nov 2013 (GP)
  - Chair Meeting with Minister Health, Hon David Davis, May 2013
  - \$22.3 million in refugee health funding announced in June 2013 Victorian budget, including increased recurrent funding for refugee health fellows
  - Chair Meeting with Minister Health, Hon David Davis, Dec 2013
- **Royal Australasian College of Physicians (RACP) College Policy and Advocacy Council**, Nov 2013 (GP)
- **RCH Care of children in Detention procedure** – Sept 2013 (GP, DE)
- **RACP - Contribution to College interim statement on refugee health**, article in the Conversation and various media releases, Sep 2013 (GP)
- **Ministerial Council on Asylum Seekers in Detention (MCASID) attendance**, Aug 2013 (GP)
- **Meeting: Children in detention, convened by Chilout**, Canberra, Aug 2013 (GP)
- **Requested advice by CCOPM** – response sent and disseminated by CCOPM, Jun 2013 (GP)
- **Follow-up Refugee Health Network of Australia submission to 10<sup>th</sup> edition Immunisation handbook** and invited panel presentation to NCIRS immunisation workshop Sydney, Aug 2013 (GP)
- **Participation in planning for Auditor General Office work on service access and interpreting access**, Aug 2013 (GP)

- **Female circumcision** – contribution RACP submission National Summit, Mar 2013 (GP)
- **Multi-jurisdictional working group on Refugee and asylum seeker health**, Feb, May 2013 (GP)
- **RACP - Refugee Child Health – Policy Update. Scope Document submitted** (GP invited lead, DE working group), Mar 2013 (GP). Start delayed by RACP process, further applications submitted (GP, DE)

## **Future directions - 2014**

- Evaluation of easidose
- Evaluation of Schistosoma management
- Establishing a defined medical student elective program – in collaboration with the University of Melbourne, Asylum Seekers Resource centre and Foundation House.
- Providing education to other emergency departments – to facilitate acute care of asylum seekers and bridging visa holders and update clinicians working with this group
- RACP policy statement on health of refugee and asylum seeker children
- Extending paediatric fellow across both RCH and Monash Health in 2014
- Developing outreach models to English Language Schools in 2014 – possible collaboration with CCCH
- Examining flexible models of outreach care to outer metropolitan Melbourne (EACH) and regional Victoria (Shepparton)
- Developing pathways for specialist assessment for all unaccompanied minors in Victoria
- Working with AMES and Red Cross to provide caseworker education in 2014.

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