Immigrant health service 2011

Department of General Medicine
Background

Australia accepts 13,750 Humanitarian entrants annually, around 3,700 of this group settle in Victoria. Key changes in the demographics of Humanitarian entry over 2011 include: an increased proportion of Humanitarian visas granted to onshore claimants (asylum seekers), with a corresponding decrease in offshore claimants (notably the sponsored 202 visa group) and the use of community detention as an alternative form of mandatory detention. The 4 most frequent countries of origin for offshore Humanitarian entrants were Iraq, Burma, Afghanistan and Bhutan. Countries of origin for people in detention included Afghanistan, Iran and Sri Lanka. Around half the Humanitarian intake is aged < 25 years.

Key achievements in 2011

- 1108 patient contact episodes
- 3 publications, 1 accepted for publication, 2 others submitted (includes national position statement on vitamin D in infants, children, adolescents and pregnancy), 3 book chapters in press
- 3 policy submissions (hepatitis B immunisation and vitamin D)
- Involvement in development of guidelines for screening Minors in Detention (DIAC)
- 5 invited conference presentations
- Involvement in advisory committee for Department of Health 10 year Refugee Health and Wellbeing Action Plan, and State/National refugee health networks
- $448,000 in research funding (electronic health record, based at University of Melbourne Department of Medicine)
- 31 Education sessions
- Two new clinical guidelines, revision of website/8 guidelines (3000 hits/year)
- Revision of Victorian high dose vitamin D guidelines
- Commencement of teacher in clinic
- Streamlined referrals to Royal Dental Hospital, with excellent patient feedback
- Pharmacy audit of quality and safety issues in prescribing
- Increased links with service providers for asylum seekers and minors in community detention, and service provision for these groups
- Development of electronic health record for specialist outpatient care
Service model

The Immigrant health service includes a weekly outpatient clinic, inpatient consultations, telephone and email advice, and affiliations with the Victorian paediatric tuberculosis service, the Department of Gastroenterology and Clinical Nutrition, and the Western Region Health Centre Vitamin D service.

Post arrival refugee health screening now usually occurs in primary care, supported by the Refugee Health Nurses located across Victoria. The RCH Immigrant health clinic has transitioned to acting as a tertiary consultation service for refugee children/young people. In 2011, the RCH Immigrant health clinic saw a shift in demographics, with greater numbers of asylum seekers, increased case complexity, and an ongoing focus on cross-cultural educational and developmental assessment.

Staff

<table>
<thead>
<tr>
<th>Position</th>
<th>Staff member</th>
<th>EFT</th>
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</thead>
<tbody>
<tr>
<td>Clinic coordinator</td>
<td>Helen Milton</td>
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<tr>
<td>Medical lead</td>
<td>Georgie Paxton</td>
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<td>FFS consultant</td>
<td>Georgie Paxton</td>
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<tr>
<td>FFS consultant</td>
<td>Andy Smith</td>
<td>varies</td>
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<tr>
<td>FFS consultant</td>
<td>Steve Graham/Dave Burgner</td>
<td>varies</td>
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<tr>
<td>Fellow</td>
<td>Melanie Thompson</td>
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<tr>
<td>Registrar(s)</td>
<td>Liz Bannister/Kate McCloskey</td>
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<tr>
<td>Dental therapist</td>
<td>Tatiana Polizzi</td>
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<tr>
<td>Community worker</td>
<td>Nagaha Idris</td>
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<td>Volunteers</td>
<td>Elly Woudstra, others</td>
<td>weekly</td>
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<tr>
<td>Research nurse</td>
<td>Katrina Sangster</td>
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<tr>
<td>Teacher</td>
<td>Barbara Emblin</td>
<td>0.2</td>
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Key points - clinic demographics

- Clinic attendance rates have remained stable at 85%
- There were 758 patient attendances in the Immigrant health clinic in 2011. There were a further 350 patient contacts, predominantly by the fellow, Dr Melanie Thompson, at both the Western Region Health Centre and the TB clinic. There were 39 additional patient consultations (direct and by phone/email).
- We saw children/young people from 31 countries, most commonly Sudan, Somalia, Burma, Ethiopia, Kenya
- We saw families speaking 30 languages, most commonly Somali, Arabic, Dinka, Karen and Chin
- Interpreters were required for 63% of consultations, an increase from 2010

Affiliated services/work

- Tuberculosis clinic: Dr Melanie Thompson
- Western Region Health Centre refugee clinic: Dr Melanie Thompson/Dr Dave Tickell
- Darebin Community Health Centre: Dr Kate Thomson
• Craigieburn Community Health Centre: Dr Jo Fraser
• Dandenong Hospital Refugee Health Clinic: Dr Danni Bao
• Royal Melbourne Hospital/University of Melbourne Department of Medicine (Windermere Fellowship): Dr Georgie Paxton

Education/presentations
• 31 education sessions in total (21 GP, 12 MT, 2 combined)
  • 5 conference presentations (GP)
  • 19 external presentations
  • 3 regional presentations
  • 7 internal sessions (CCCH, FRACP, Nursing, Cultural diversity committee, Immunisation)

Research grants
• Department of Industry, Innovation and Regional Development, BEIP round 2. Refugee health clinical hub – a model for integrated clinical care. $448,000, cash and in kind $1,013,000

Publications and policy submissions
• Hepatitis B immunisation in refugee Victorians – Department of Health, Victoria, December 2011
• Vitamin D and bone health in children – Osteoporosis Australia, Sydney, October 2011. Submission for national white paper on vitamin D and bone health
• Vitamin D and bone health in pregnancy - Osteoporosis Australia, Sydney, October 2011. Submission for national white paper on vitamin D and bone health


Website

• 10,000 hits in 3 years to May 2011
• New guideline: Helicobacter pylori,
• New guideline: Birth date issues
• Major revisions of guidelines: Vitamin D, Immunisation, Initial health assessment, Vitamin A, Tuberculosis screening,
• Revisions/updating other guidelines/webpages

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