



victorian refugee
health network

Engaging and supporting general practice in refugee health



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Acknowledgements

- Project team and co-authors
- Partner agencies
- Project Advisory Group
- General practices
- Survey and interview participants



Victorian Refugee Health Network

- Build the capacity of the Victorian health sector to respond to the needs of people from refugee backgrounds, including people seeking asylum.
- Support services to be more accessible to people from refugee backgrounds.
- Improve service coordination for recent arrivals and those with more complex needs.



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Background and project aims

- General practice are crucial for on arrival health assessment and ongoing care of people from refugee backgrounds
- Need more general practices who are able, willing and confident to work well with people from refugee backgrounds
- ***Aim: To develop and trial an approach to engaging and collaborating with general practice***



Scoping

“A GP who has understanding of the refugee experience [is valued], even if they are not from the same background”
(community liaison worker)

“If people know that an interpreter will be used in their appointment, they are more likely to go” (community liaison worker)

“It is always very difficult to know if change is occurring or sustained as we don’t get feedback from practices”
(service provider interview participant)



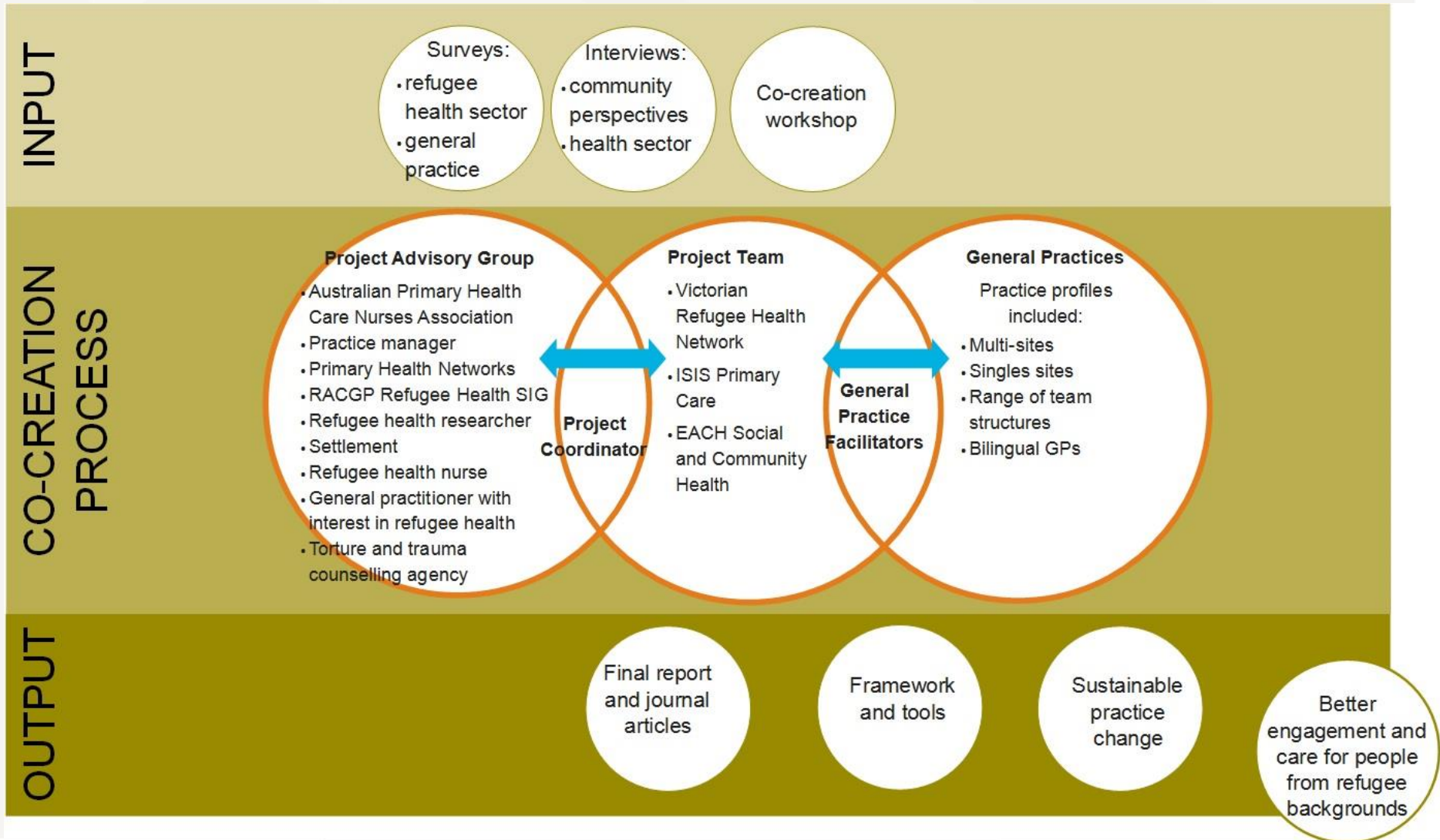
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Table 2.1: Consultation participants

Discussion group and interview participants	
AMES settlement community guides	7
Foundation House community liaison workers	7
Refugee Health Research Consortium	Approximately 10
Medicare Local program staff (including 1 GP liaison)	5*
Refugee Health Program – metro	3
Refugee Health Program – rural/regional	2
Refugee Health Program – statewide	1
Expert GPs/refugee health fellows	2
General practice engagement workers in other areas of health	2
Survey participants	
Refugee Health Program (survey pilot)	29
Refugee health sector	9
General practice staff	6
Total	83

* From 4 different Medicare Locals, including 2 rural MLs

Developing an approach and resources

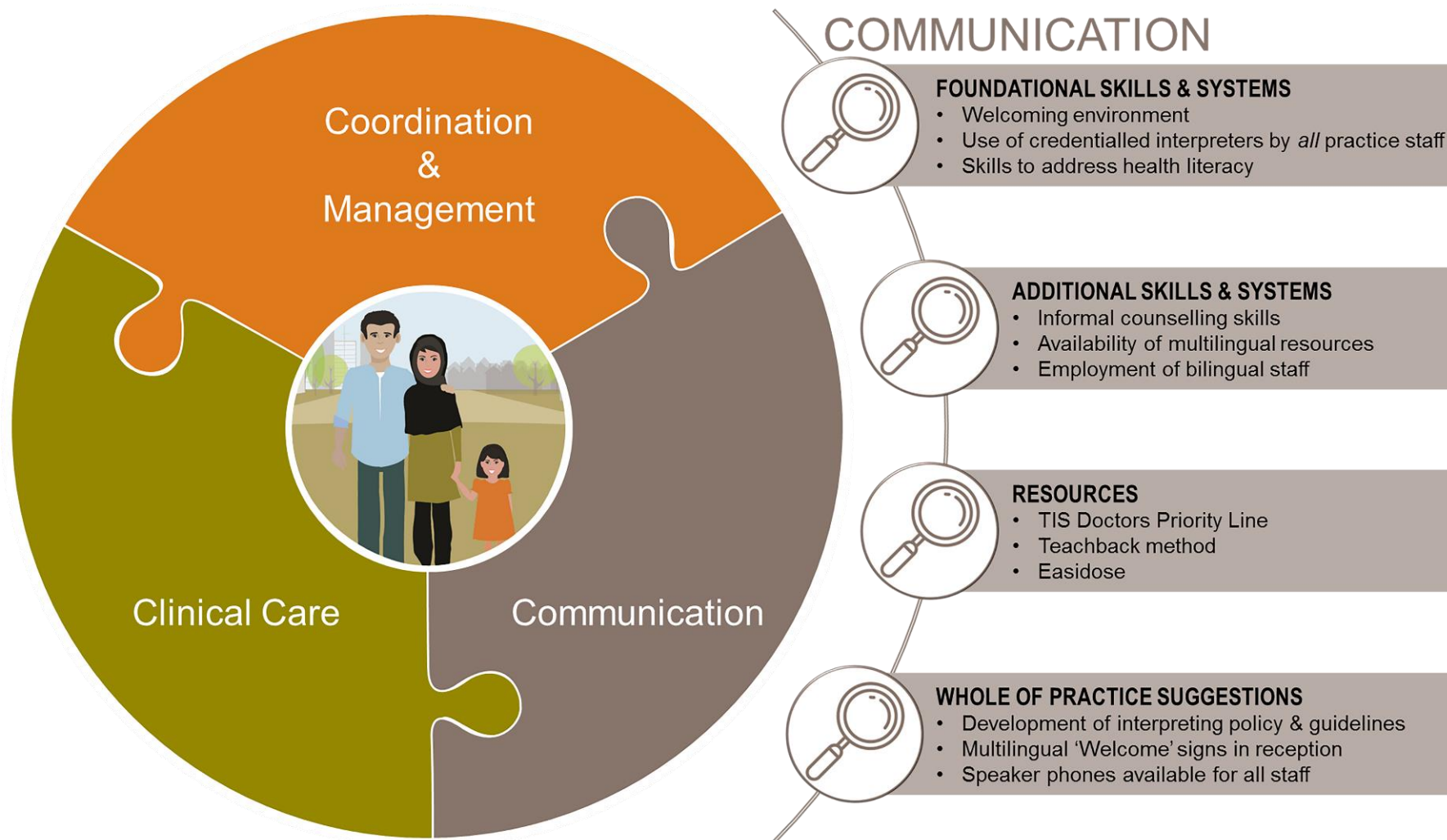


What does a GP's day look like



- How many patients?
- How many telephone calls or intranet messages?
- Rep visit(s)?
- Staff meeting over lunch?
- Meeting with practice nurses?
- Mail, email, pathology/radiology reports; faxes; requests and introductions, other correspondence?
- Meeting with Practice Manager for administration and planning?
- What else?

Framework for continuing improvement in refugee health



General practice engagement process



Summary of practice engagement

Table 5.1: Data from practice profiles

Practices engaged in the project	6
Practice profiles completed	6
Number of staff	14–106
Practices with allied health	5
Practices that see patients from refugee backgrounds	6
Practices that routinely use interpreters	5
Practices that were willing to use interpreters	6

Table 5.2: Staff who completed facilitated interviews

Total staff who participated	19
GPs	9
Practice managers	6
Practice nurses	3
CEO	1



Facilitator Interview Guide

When working with people from refugee backgrounds in your practice, what are the things that:

- **motivate you** / would motivate you
- you **value** most
- you find **challenging**



Key findings

- Utilising co-creation principles
- Relationships with practice staff
- Flexibility, time, skills and resources
- Engaging the whole-of-practice team



Final report

http://refugeehealthnetwork.org.au/wp-content/uploads/Report_2016_August_Primary-Care-Report_FINAL-REPORT.pdf

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