2018 Annual Progress Report

Refugee Health and Wellbeing: A policy and action plan for Queensland 2017-2020
A message from the Chair

It is an honour and a pleasure as the Chair of the Refugee Health Partnership Advisory Group Queensland to present the first annual report under the Refugee Health and Wellbeing; A Policy and Action plan for Queensland 2017-2020. The policy and action plan articulates a shared vision and purpose for refugee health to facilitate a state-wide and integrated partnership approach to health care.

The policy and action plan aligns with Queensland’s Multicultural Policy and is identified as an action for Queensland Health in the Queensland Multicultural Action Plan 2016-17 to 2018-19. The report outlines progress against 65 actions under 7 priority areas and incorporates achievements from across Hospital and Health Services, Primary Health Networks, primary care, settlement services, refugee specific organisations and other non-government organisations.

A key achievement has been the establishment of Refugee Health Network Qld a main driver of collaboration, communication and resource development across the state. Other achievements include two Refugee Health Show Cases to bring all stakeholders together and two state-wide Refugee Health Nurse face to face meetings. The Network through working groups and the Clinical Advisory Group Queensland have contributed significantly to improved referral pathways, translated resources for oral health and addressed emerging issues with accessing health information under the new Humanitarian Settlement Program.

The Policy and Action Plan is testimony to the collaboration and commitment of not only Queensland Government but all the key sectors in metropolitan, rural and regional areas and the ongoing input of the Refugee Health Advisory Group (“G11”).

It is encouraging to see such great outcomes in a relatively short space of time. I am confident that the Network members and all key partners will continue to deliver on the Policy and Action Plan’s vision that all people from refugee backgrounds calling Queensland home have access to the right care, at the right time and in the right place to ensure they have the best possible health and wellbeing.

Donata Sackey
Chair, Refugee Health Partnership Advisory Group Queensland &
Director, Mater Refugee Health Services
### Annual Report

**Progress against the Refugee Health and Wellbeing policy & action plan for Queensland (2017-2020)**

This report outlines the progress in the activities outlined in the Refugee Health and Wellbeing policy and action plan for the time period April 2017 to March 2018. The report has been prepared by the Refugee Health Network Queensland team with input from the partner organisations who are leading the activities outlined in the plan.

**Action 1: Communicate and collaborate with colleagues**

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<tr>
<td>1.1</td>
<td>Establish links and collaborate with primary healthcare providers, settlement services, community services and specialist services (including refugee health services) in order to support a partnership approach to coordinate care for refugees across all settlement areas.</td>
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| 1.1.1    | Strategies to promote partnerships are identified and opportunities to develop collaborative approaches are in place. For example, links are made with PHN National Interest Group on Refugee Health, contributions are made to Health Pathways, formalisation of regional networks of RHNQ and working groups of RH PAGQ. | June 2017 RH PAGQ Network team | Complete.  
- Regions and working groups are formalised and connected to RH-PAGQ  
- The Department of Health funded and co-delivered the April 2017 and March 2018 statewide Refugee Health and Wellbeing Showcases. These events attracted participants across Queensland representing Queensland Health, government and non-government service providers, peak organisations and community members.  
- The Showcase was a success and received positive feedback from participants. Another Showcase is planned for 2019 in partnership with RHNQ.  
- RHNQ team is an active member of National PHN Communities of Practice and connections to health pathways established. |
| 1.1.2    | Links are established with HHS Boards and PHNs to communicate issues, highlight initiatives and facilitate collaboration | December 2017 RH PAGQ Network team | Complete.  
- Key staff have been identified in each PHN and HHS in settlement areas and are connected to network via RH-PAGQ. |
| 1.1.3    | Links are established with the Queensland Clinical Senate to communicate issues highlight initiatives and facilitate collaboration | June 2018 RH PAGQ Network team | In progress.  
- Network presented at Qld youth clinical network forum in Nov 2017 |
1.2 All health planning and service development evidences enhanced responses to people from refugee backgrounds.

1.2.1 Develop, distribute and promote information and resources that details key considerations that should be factored into all PHN and state government health service planning, to ensure the needs of people from refugee backgrounds are effectively incorporated in service development & commissioning.

June 2018
RH PAGQ Network team

In progress.
- MHWG completed [considerations for PHNs](#) in 2017

1.3 Develop models of care that embrace a partnership approach as identified in ‘Coordinated Primary Health Care for Refugees’ as a Best Practice Framework.

1.3.1 Models of care are documented, implemented and evaluated.

December 2019
CAG Mater UQ CICI
To be addressed 2018-2019

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Action 2: Establish the statewide refugee health and wellbeing network

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<tr>
<td>2.1</td>
<td>Establish, maintain and support the RHNQ as a central point of contact and to facilitate the development of relationships and partnerships across stakeholders.</td>
<td>April 2017 Network team</td>
<td>Complete.</td>
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<td></td>
<td>2.1.1 A structure for the RHNQ is established and appropriate branding and promotion developed and implemented.</td>
<td>April 2017 Network team</td>
<td>Structure for RHNQ established: <a href="#">www.refugeehealthnetworkqld.org.au/wp-content/uploads/2014/05/Visual-Guide-A5-1.jpg</a></td>
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<td></td>
<td>2.1.2 The Network website and mailing list is established and maintained. New website to include resources currently on materonline refugee health website</td>
<td>June 2017 Network team</td>
<td>Complete.</td>
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<td>2.1.3 Regular communications are maintained with all Network members</td>
<td>Ongoing Network team</td>
<td>Commenced, on track.</td>
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<td>2.1.4 Quarterly meetings are held with all Network members. One meeting per year to be face-to-face.</td>
<td>2017-2020 Network team</td>
<td>Commenced, on track.</td>
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<td>2.1.5 Whole of state face to face in April 2017 &amp; 2018</td>
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| 2.1.5  | RHNQ represents Queensland on RHeaNA and provides Network members with opportunities to engage in national discussions | Ongoing | Commenced, on track.  
- Active participants in advocacy work with RHeaNA to resolve emerging health issue in accessing health information under new Humanitarian Settlement Program  
- Updates provided in e-news |
| 2.1.6  | RHNQ facilitates the identification of resources gaps and advocates to the appropriate stakeholder for their development. | Ongoing | Commenced, on track  
- Resources gaps identified and developed. E.g. Translated Oral health resources. |

2.2 Establish a strategic RH PAGQ.

| 2.2.1  | The RH PAGQ is established and reflects representation from:  
- PHNs  
- Refugee health services (including QPASTT)  
- Settlement services  
- Representatives of regional refugee health networks  
- Mental health/wellbeing services (child and adult)  
- HHSs across the state, including interpreter services  
- Queensland Health clinical networks  
- State and Australian Government departments  
- Refugee Health Clinical leads  
- Academics  
- Non-government organisations | April 2017 | Complete  
| 2.2.2  | The RH PAGQ Terms of Reference are developed and supported by members | | Complete  
| 2.2.3  | The RH PAGQ meets quarterly. | Ongoing | Commenced, on track  
- Meetings held quarterly in 2017 |
| 2.2.4  | The RH PAGQ works with regional networks and working groups to identify issues and determine solutions | Ongoing | Commenced, on track  
- Reported on Quarterly at RH PAGQ meetings. |
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| 2.3 Support the RHNQ regional networks. | 2.3.1 Regional networks are identified, defined and established. | June 2017 | Complete.  
- Key representatives identified in settlement regions |
| | 2.3.2 Terms of Reference for regional networks are established and a mechanism to feed into RHNQ is implemented. | | Complete.  
- Regions operate as per local needs. All have representation at RH-PAGQ (network overview) |
| 2.4 RHNs develop local health strategies. | 2.4.1 Settlement services, PHNs, local health services and NGOs input to RHNs to develop local health strategies that reflect the principles and priority areas for action in Refugee Health and Wellbeing: A policy and action plan for Queensland 2017–2020 and match local needs. | June 2018 | Commenced and on track.  
- Regional Networks are supported to develop local health strategies that will fit local context while reflecting principles and priority areas of the plan. Completed activity in the reporting period included:  
  - Development of health pathway for Toowoomba,  
  - Darling Downs/MDA RHN service delivery commenced August 2017 and West Moreton/Access Community Services RHN service delivery commenced October 2017.  
  - Previous to the commencement of the RHN nurse position in partnership with DDWM PHN, MDA, ACCESS and GP Practices, there were minimal linkage with newly arrived to general practice, nil GP MBS refugee health assessments, nil engagement with service providers, and minimal referral to Allied Health Professionals. From August to December 2017, there was an increase in Newly arrived people from a refugee background in Toowoomba region, linked early with an appropriate refugee friendly GP, are having health assessments completed are receiving dietary advice, increased immunisation including advice and understanding, increased understanding and access to medications, increased dental checks, increased hearing checks, increased vision checks, increased preventative health checks and participation in cancer screening programs (Breast, Bowel, Cervical). (Eg. 122 newly arrived were linked with a medical practice, 435 interactions between Refugee Health Nurse and newly arrived clients)  
  - Torres and Cape HHS developed a refugee process in consultation with the Australian Border Force in Weipa. This process includes steps to contact an interpreter. |
| 2.5 Working groups are established under RH PAGQ to focus on specific health issues. | 2.5.1 Establish a chronic disease working group. | June 2017 | Not complete - Change reflecting current needs. See 2.5.3 |
| | 2.5.2 Strengthen the reach of the existing OHWG and MHWG to mobilise resources and ensure a continuation of care. | June 2018 | Existing working groups expanded. |
| | 2.5.3 Establish additional working groups as identified needs and issues are raised at RH PAGQ. | Ongoing | Commenced, on track - New groups commenced:  
- Oral Health  
- Refugee Neuro Developmental Intervention and Cognitive Assessment-Subgroup  
- Interpreter  
- Research and Evaluation |
**Action 3: Modify usual practices to meet the health and wellbeing needs of refugees**

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<td>3.1</td>
<td>Encourage ongoing training to address needs around cultural issues.</td>
<td>Ongoing PHNs</td>
<td>Commenced, on track. Education sessions for Primary Health care providers completed: <a href="http://www.refugeehealthnetworkqld.org.au/past-education/">www.refugeehealthnetworkqld.org.au/past-education/</a></td>
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| 3.1.1 | The Network team supports PHNs to deliver appropriate training for primary healthcare providers. For example, ‘Working with people of refugee/CALD background’ workshops. | 2017-2019 QH | In progress. Multiple HHSs have dedicated training for cultural awareness and working with interpreters. For example:  
- Metro South HHS developed an Online Cultural Diversity module  
- South West HHS ensures the cultural capability of staff through a mandatory cultural capability program. A CALD Consumer Access Procedure is also in place.  
- Gold Coast HHS launched an online Multicultural Mental Health training package. This is available to all Gold Coast HHS staff.  
- Sunshine Coast HHS has an ‘Interpreter services’ procedure, which is available to all staff on the Queensland Health intranet. Its mandatory training requirements include cultural diversity training.  
- Cairns and Hinterland HHS Interpreter Services provides training to staff on cultural diversity and using interpreters. |
| 3.1.2 | Queensland Health to ensure the cultural capability of staff by providing opportunities for training in cultural awareness and working with interpreters.  
This is also an action item for Queensland Health in the Queensland Multicultural Action Plan. | |  
- Darling Downs HHS clinical and administrative staff, including staff from the Toowoomba Health Service Refugee Health Assessment clinic attended “Working effectively with people from CALD backgrounds” training.  
- Children’s Health Queensland HHS Multicultural Mental Health Coordinators delivered training on:  
  - Working with young people and their families of CALD background (18 sessions) and working with interpreters (seven sessions) attended by 410 people from various sectors.  
  - Infant, Child, Youth and Family Seminar Series around the importance of language and working with interpreters (120 attendees).  
  - Cultural awareness training for Child and Youth Mental Health Service (CYMHS) administration officers to provide appropriate administrative support to their teams (for example, booking interpreters, frontline communication with CALD consumers).  
- Metro South HHS delivered 126 face-to-face cultural training opportunities at staff orientation sessions (3,433 staff), and 33 tailored face-to-face training sessions for 406 staff members across Metro South HHS facilities and services. |
### Action: Develop refugee-specific health and wellbeing resources, referral pathways and training materials.

<p>| 3.3.1 | Refugees mental health referral pathway, developed by the MHWG, is shared across HHSs and accessible on ‘Health Pathways’ platform. | June 2017 MHWG | Complete. - Metro South - however, new version to be developed to reflect program changes. |
| 3.3.2 | Additional refugee health pathways are developed and published on ‘Health Pathways’ including links to clinical guidelines and referral options to support initial health Assessments and ongoing care. | June 2018 Network team | In progress. - Metro South HHS spot on health, health pathways: <a href="http://www.metrosouth.health.qld.gov.au/spotonhealth-healthpathways">www.metrosouth.health.qld.gov.au/spotonhealth-healthpathways</a> - West Moreton HHS is reviewing its Refugee Mental Health services due to increased demand and identified need. Guidelines and pathways will be developed as new models of service delivery are explored to address community need. |
| 3.3.3 | Clinical resources and administrative resources are made available to primary care providers online | June 2017 Network team | Complete. - Refugee friendly general practices are supported with resources and appropriate linkages, to assist them in the delivery of effective, efficient and good quality refugee health care. <a href="http://www.refugeehealthnetworkqld.org.au/resources/">www.refugeehealthnetworkqld.org.au/resources/</a> - Gold Coast HHS updated the General Practitioners Language List and list of psychologists speaking languages other than English. This was made available online to primary care providers. In progress. - Children’s Health Queensland HHS CYMHS has developed and translated clinical resources. Children’s Health Queensland CYMHS will upload these to its website when available. |</p>
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| 3.3.4  | Information resources about new developments are created, reviewed, updated, distributed and promoted. | Ongoing Network team | Commenced, on track.  
- Asylum seeker [health access](#)  
- Network website keeps [Asylum Seeker page](#) up to date  
- Gold Coast HHS distributed new translated information resources to all Multicultural Mental Health and Specialist Services and shared with primary care providers. |
| 3.3.5  | Resources are developed and distributed in response to need and as requested. | Ongoing Network team | Commenced, on track  
- Community information provided about emerging community in Toowoomba [Yazidi](#) |

**HHS Activities completed for the reporting period include:**

- Metro North HHS developed a [breast screening resource](#) specifically for CALD communities within Metro North area. It is available in 12 languages.
- Gold Coast HHS completed a literature review on How to work effectively with refugee children/youth and their families who present with complex trauma and promoted and distributed it to the community.
- Metro South HHS has developed printed resources, water bottles and posters to promote the message to refugees that tap water is safe to drink.
- Metro South HHS, in partnership with public health services, developed and disseminated a range of information on measles.

**In progress.**

- Children’s Health Queensland HHS CYMHS has identified and translated useful information for patients and carers, including medication booklets and information on their rights and responsibilities.
- Children’s Health Queensland HHS CYMHS has established a Multicultural Champions Network. Multicultural Mental Health Coordinators monitor needs and can reach out to a statewide network and Queensland Transcultural Mental Health Centre to identify resources.
- Metro South HHS developing videos & health lunchbox resources to improve health literacy.

| 3.4    | A responsive health workforce is developed to reflect the needs of services and cultural mix of the Queensland population. | 2017-2019 DoH | Completed activities for the reporting period include:  
- Metro North HHS established and recruited a Cultural Diversity Coordinator to reflect and identify the health needs of CALD communities of Metro North HHS.  
- Metro South HHS has dedicated multicultural roles, including:  
  - Three Multicultural Nurse Navigators (Logan, Queen Elizabeth II Hospital, Princess Alexandra Hospital)  
  - Two Multicultural Liaison Officers at Logan Hospital  
  - Three Multicultural Resource and Training Officers  
  - Cultural Diversity Coordinator  
  - Two Multicultural Coordinators in Addictions and Mental Health Services  
  - Cultural Consultant roles in Addictions and Mental Health Services.  
- Metro South HHS demonstrates significant diversity, with approximately 18.25% of staff identifying as being from a non-English-speaking background. |
| 3.4.1  | A multicultural workforce is nurtured and promoted through identification of successful models of recruitment and maintenance of a sustainable multicultural workforce.  
*Delivering on the Public Service Commission’s 2022 foundation, non-English speaking background diversity targets for the Queensland Public Sector is an action item for the Department of Health in the Queensland Multicultural Action Plan.* | | |
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<td>• Children's Health Queensland HHS CYMHS partners with Queensland Transcultural Mental Health Centre to deliver training of the Building Resilience in Transcultural Australians Futures Adolescent Training Facilitator Program, and has engaged Queensland University of Technology to evaluate and enhance the Building Resilience in Transcultural Australians Futures program through ongoing research.</td>
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<td>• Sunshine Coast HHS’s Strategic Workforce Plan 2011-2021 has an aim and action item related to ensuring the participation of Aboriginal and Torres Strait Islander people and people from CALD backgrounds across all occupational streams.</td>
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<td>• Queensland Health’s Workforce Diversity and Inclusion Strategy 2017-2022 includes people from non-English speaking backgrounds as a priority group. The strategy takes an active approach toward increasing workforce diversity representation in the identified priority groups in line with the established workforce diversity employment targets by the year 2022</td>
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<td>3.4.2</td>
<td>Explore options for funding to enable resources to be shared across services and regions to help manage demand peaks</td>
<td>June 2018 Network team</td>
<td>Commenced, on track. • Successful partnership with MSRHS, BSPHN and Mater to manage additional Syrian/Iraqi arrivals in 2017.</td>
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<td>3.5</td>
<td>Oral health services in Queensland are responsive to the needs of people from refugee backgrounds.</td>
<td>June 2017 ROHWG</td>
<td>Complete. • Refugee OHWG established 2017 and is working with HHSs to develop clear pathways for access. This will be supported with documented access guidelines for refugees and asylum seekers. Activities in progress: • Metro South HHS Refugee Health Service has an integrated Oral Health Wellness Program. This provides oral health screening, triage, education and fluoride application to all people with a refugee background within 28 days of arrival. This work is a finalist in the 2018 Queensland Multicultural Awards. • West Moreton HHS is in the process of establishing health information sessions within Community Hubs, including on oral health. • Cairns and Hinterland HHS Oral Health works in partnership with Centacare Far North Queensland to provide oral healthcare for people from refugee backgrounds. Oral Health staff are currently undertaking a district wide roll out of cultural awareness training. • The Townsville HHS Refugee Health Nurse coordinated oral health referral process, consultations &amp; follow up appointments, achieving 85% targeted referrals by March 2018.</td>
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<td>3.5.1</td>
<td>Refugee OHWG is established to address barriers to access, including review of priority guidelines, consistent referral pathways into oral health services, and training and education of oral health staff.</td>
<td>June 2017 ROHWG</td>
<td>In progress. • Refugee OHWG is working with the Tzu Chi Foundation and Metro North HHS to host a dental fair to reduce wait times for people from refugee backgrounds to access to oral healthcare. • Central Queensland HHS is establishing networking with refugee groups within the Central Queensland district.</td>
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<tr>
<td>3.5.2</td>
<td>Refugee OHWG to work in partnership with government and non-government providers to address access issues including long waiting lists for refugees needing oral health treatment.</td>
<td>Ongoing ROHWG</td>
<td>In progress. • Refugee OHWG is working with the Tzu Chi Foundation and Metro North HHS to host a dental fair to reduce wait times for people from refugee backgrounds to access to oral healthcare. • Central Queensland HHS is establishing networking with refugee groups within the Central Queensland district.</td>
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### Action 4: Use professional interpreter services

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| 4.1    | 4.1.1 The benefits of using interpreters are promoted across all health settings. | Ongoing Network team & QH | In progress and on track.  
- Work commenced and interpreter working group being established in early 2018  
- Multiple HHSs promote the use of interpreter services through screensavers across facilities, in staff orientation, and including resources in handbooks located in work units/clinics.  
- Children’s Health Queensland HHS promotes the importance of quality interpreters in good healthcare delivery during clinical consultations, case review meetings and networking meetings.  
- Allied Health Interpreter Program piloted by DDWM PHN - 60 Professionals including Pharmacists, access to Translating & Interpreting Service (TIS) (July - Dec 2017)  
- Allied Health Interpreter Program implemented in Brisbane North & Brisbane South PHNs |
| 4.1    | 4.1.2 Queensland Health actively promotes the Queensland Language Services Policy and Guidelines. | Ongoing QH | In progress.  
- Children’s Health Queensland HHS includes the Language Services Policy and Guidelines in its Working with Interpreters training.  
- Children’s Health Queensland HHS provides interpreter cards for consumers and clinicians to:  
  - Lady Cilento Children’s Hospital Interpreter Services  
  - CYMHS Clinics.  
- Sunshine Coast HHSs intranet resources page links to the Qld Language Services Policy. |
| 4.1    | 4.1.3 Opportunities are provided for staff to be trained in working with interpreters. This is an action item for Queensland Health in the Queensland Multicultural Action Plan. | 2017-2019 QH | In progress.  
HHSs provide various opportunities for staff to be trained in working with interpreters. For example:  
- Darling Downs HHS has provided staff working in the Refugee Health Assessment Clinic with training in working with interpreters.  
- Children’s Health Queensland HHS CYMHS Multicultural Mental Health Coordinators have delivered three training sessions on ‘Working with Interpreters’ each calendar year since 2015 to CYMHS and non-CYMHS staff.  
- Gold Coast HHS offers staff training when they apply for access to the Interpreter Service Information System. Online training and resources are available through Learning on Line.  
- The Sunshine Coast HHS Interpreter Services coordinator provides one-on-one training and support to staff who request interpreter services.  
- Cairns and Hinterland HHS provides three ongoing training opportunities for cultural diversity and working with interpreters, and provides one-on-one training  
- Metro South HHS’s Multicultural Resource and Training Officer has provided training in working with interpreters to staff in the recently established Maternity Hubs |
4.1.4 Language information is included in clinical and administrative folders

Ongoing Network team

Complete.

- Information in hard copy folders and on website - reviewed and updated regularly

4.1.5 System issues related to barriers in interpreter use are monitored and solutions identified.

Ongoing Network team

Commenced, on track.

- Interpreter working group established in 2018

4.1.6 HHSs explore potential for shared investment and training packages focusing on interpreting for refugee patients in a health context.

Ongoing HHS

In progress

- The Cairns and Hinterland HHS Interpreter Services Coordinator is liaising with Refugee Health Program clinicians and Centacare Settlement Service to assist in providing interpreters to the Refugee Health program sessions

**Action 5: Engage with the community**

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| 5.1    | Invest in community engagement structures that increase skills and capacity of the community, respects and acknowledges the wisdom of the community and effectively taps into the community’s capacity to articulate its needs and views around health policy, health literacy and health service development. | Ongoing Network team & QH | Commenced, on track. HHSs are proactively engaging people from refugee backgrounds, for example:
- Darling Downs HHS is represented on local interagency committees that include representatives of refugee and migrant groups.
- Metro North HHS has formed a CALD community advisory group. Key refugee communities and organisations have been identified and consultation has begun for the development and delivery of services.
- Gold Coast HHS has developed the Consumer Advisory Group. Representatives from the community engage with the hospital on diversity, inclusion and health literacy matters that relate to people from a multicultural and refugee background.
- Cairns and Hinterland HHS invites people from refugee backgrounds to participate in network meetings and comment on health service provision.
- Advisory Group vacancys on Health services, peak bodies and PHNs are promoted through the Mater Group of 11 and community leaders to encourage participation (Eg: FECCA consumer and carer participation in multicultural mental health project, Brisbane South PHN Council membership)
- G11 participate in development of health services and resources (Eg: Brisbane South PHN Palliative Care shared care model consultation, ‘Care at End of Life Project’ - Department of Health)
- Metro South HHS leads activities under the Logan Community Health Action Plan. A project surveyed and conducted focus groups with refugees about nutrition & physical activity needs to inform development of health strategies. |
| 5.1.1  | People from refugee backgrounds are consulted in the development, delivery and evaluation of health services. | Ongoing Network team & QH | Commenced, on track. HHSs are proactively engaging people from refugee backgrounds, for example:
- Darling Downs HHS is represented on local interagency committees that include representatives of refugee and migrant groups.
- Metro North HHS has formed a CALD community advisory group. Key refugee communities and organisations have been identified and consultation has begun for the development and delivery of services.
- Gold Coast HHS has developed the Consumer Advisory Group. Representatives from the community engage with the hospital on diversity, inclusion and health literacy matters that relate to people from a multicultural and refugee background.
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- G11 participate in development of health services and resources (Eg: Brisbane South PHN Palliative Care shared care model consultation, ‘Care at End of Life Project’ - Department of Health)
- Metro South HHS leads activities under the Logan Community Health Action Plan. A project surveyed and conducted focus groups with refugees about nutrition & physical activity needs to inform development of health strategies. |
| 5.1.2  | Existing structures for community engagement (such as the Refugee Health Advisory Group of RH PAGQ known as G11) are sustained and expanded to reflect new communities. | Ongoing Mater UQ CICI | Completed and ongoing.
- Membership reviewed and amended as needed. A Hazara member was added to the group in July 2017. |
### Action 5.1.3
Opportunities for the community to engage formally with the Queensland Health Minister and Queensland Health senior staff are created. For example, through an annual Community Leaders Dinner.

**Timeframe & Lead:** Ongoing various

**Progress against Plan:**
- 2017, community representatives attended the QPASTT parliamentary lunch hosted by the Honourable Cameron Dick, MP, at the Parliamentary Annexe
- G11 members attended Metro South Health’s “Meet Greet” Dinner - an opportunity for senior staff and community leaders to meet and discuss issues affecting Multicultural communities. These have occurred in 2016 and 2017. Another is planned for 2018.

### Action 5.1.4
HHSs work with RHNQ to establish links and communicate opportunities for community consultation and consumer engagement activities in line with their consumer and community engagement requirements under the Hospital and Health Boards Act 2011 (Queensland).

**Timeframe & Lead:** Ongoing HHS

**Progress against Plan:**
- Metro North, Metro South, Townsville, Cairns and Toowoomba HHSs are represented on the Refugee Health Partnership Advisory Group and have established links with RHNQ.
- West Moreton HHS is a member of RHNQ and supports consumer engagement.
- The Townsville HHS Refugee Health Nurse attends quarterly meetings with the Townsville Multicultural Support Group.

### Action 6: Measure, collect, collate, monitor and innovate

#### Action 6.1
Support ongoing research to develop innovative models of care for people from refugee backgrounds across their lifespan to ensure the right care is provided at the right time and right place.

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<thead>
<tr>
<th>Action</th>
<th>Activity</th>
<th>Timeframe &amp; Lead</th>
<th>Progress against Plan</th>
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<tbody>
<tr>
<td>6.1.1</td>
<td>Contemporaneous reviews and evaluations of models of care inform further service development, including reviewing the models of care developed for other vulnerable population groups.</td>
<td>Ongoing Mater UQ CICI</td>
<td>Commenced, on track.</td>
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<td></td>
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<td></td>
<td>• Evaluating colocation models of care - ethics in progress</td>
</tr>
<tr>
<td>6.1.2</td>
<td>Research partnerships and joint research projects that focus on integrated models of care are undertaken and promoted through the RH PAGQ.</td>
<td>Ongoing</td>
<td>Commenced, on track.</td>
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<td>• NHMRC Partnership grant (QUT - lead organisation) submitted Dec 2017 - “An Integrated Primary Care Model for Chronic Disease Management for Refugee Communities”</td>
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<tr>
<td>6.1.3</td>
<td>Research that measures health outcomes in complex health areas (for example, attitudes to health, health literacy, chronic disease, disability and co-morbidity) is supported by the RH PAGQ.</td>
<td>Ongoing</td>
<td>Commenced, on track.</td>
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<td>• Commencing research “Will making a patient’s cultural and spiritual explanatory model of health more explicit improve the quality of the health encounter” using the peer-led research model.</td>
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<td>Action</td>
<td>Activity</td>
<td>Timeframe &amp; Lead</td>
<td>Progress Update</td>
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| 6.2    | 6.2.1    | Ongoing         | In progress. Regional Networks work in partnership to monitor needs of communities and where able to, align resources accordingly. Some examples include:  
- Darling Downs HHS & advisory group (representatives from DDWM PHN & MDA) reviewed & updated Toowoomba Health Pathway for recently arrived Humanitarian arrivals.  
- The Children’s Health Queensland HHS CYMHS Multicultural Mental Health program trialled a Refugee Outreach Assessment Clinic pilot project in partnership with the Mater Refugee Complex Care Clinic to improve access to mental health assessments and treatment for young people from refugee backgrounds.  
- Metro North HHS is finalising a needs analysis to scope the health needs of CALD communities in the Metro North HHS catchment area.  
- South West HHS has a Community Advisory Network, which considers a range of contributory factors that impact on the delivery of health services.  
- Townsville HHS is represented on the Regional Refugee Health Interest Group, with membership from Townsville Multicultural Support Group (settlement contractor) and Northern Australian Primary Health Network.  
- Metro South HHS Oral Health Service hosts a dental fair to support specific supported access to oral health checks and treatment. This is run in partnership with local refugee and multicultural organisations.  
- West Moreton HHS actively engages with the community to ensure service planning and models of care reflect community needs.  

Ensure best use is made of resources available to the local community to address health needs of refugees across the lifespan.  
Evaluate and monitor needs of local communities, options for models of care and implementation of services to ensure resources available are best used to suit local environments, communities and services. | Regional Health Networks |  |

| 6.3    | 6.3.1    | 2017-2019 QH | Completed activities include:  
- Metro North HHS:  
  - Embedded minimum data collection standards on CALD consumers and includes information on CALD indicators in Metro North training and Inclusive Engagement toolkit.  
  - Advocated for CALD inclusion in RiskMan as a statewide feedback system and provided rationale and explanatory notes for staff.  
- Metro South HHS has a data monitoring dashboard, which was developed for culturally diverse groups. It monitors a range of health service performance parameters and is used to identify gaps and challenges and to prioritise improvement initiatives required.  

Embed capacity to collect minimum data across all health facilities that indicates Country of Birth, preferred language, and whether an interpreter is required.  
Data indicates real usage of health services by refugees as evidenced by Country of Birth, preferred language and whether an interpreter is required.  
Improving data collections for culturally and linguistically diverse customers is an action for Queensland Health in the Queensland Multicultural Action Plan. | Regional Health Networks |  |

- Since the Consumer Integrated Mental Health Application commenced in 2008, Queensland Health has collected the required minimum data. Where available, data around parents’ Country of Birth and preferred language is also collected.  
- The Department of Health reports data on Country of Birth to the Australian Institute of Health and Welfare annually as part of the Community Mental Health Care and Residential Mental Health Care National Minimum Data Sets.  
- The Alcohol, Tobacco and Other Drug Services Information System collects mandatory data on Country of Birth, preferred language and whether an interpreter is required. These indicators are reported on annually to the Australian Institute of Health and Welfare.  
- The Department of Health has a ‘CALD consumers’ statewide Consumer Integrated Mental Health Application business process. This outlines the importance of accurately identifying CALD consumers and collecting the minimum mandatory indicators.  
- The Department of Health is investigating the feasibility of collecting ‘ethnicity’ data from consumers. | Regional Health Networks |  |
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<tbody>
<tr>
<td>6.3.2</td>
<td>The RH PAGQ works with HHSs to analyse minimum data sets that are informed by the best proxy data for refugee identification</td>
<td>2017-2019 RH PAGQ</td>
<td>To progress as data becomes available</td>
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<td>6.4</td>
<td>Trial the Organisational Cultural Responsiveness assessment scale (OCRAS) developed by Multicultural Mental Health Australia (MHIMA).</td>
<td>2017-2019 MHWG QH</td>
<td>In progress</td>
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<td></td>
<td>6.4.1 The MHIMA OCRAS tool is piloted with a: PHN site Queensland hospital site General Practice Mental HealthService PeakBody (for example, the Queensland Mental HealthAlliance).</td>
<td></td>
<td>• Children’s Health Queensland HHS Multicultural Mental Health Coordinators undertook the OCRAS in 2016 and is implementing its first action plan. • Gold Coast HHS Mental Health and Specialist Service is piloting the MHIMA OCRAS tool. • West Moreton has undertaken the MHIMA OCRAS tool as a generalist audit and to identify areas for improvement. Other pilots Delayed - due to MHIMA framework redevelopment and new host organisation not announced (successful tender yet to be released). Once new host organisation is known activity will be actioned</td>
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<td>6.5</td>
<td>Improve the collection of patient experience information from culturally and linguistically diverse patients, including people from refugee backgrounds.</td>
<td>June 2017 QH</td>
<td>In progress</td>
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<td></td>
<td>6.5.1 Investigate the feasibility of a dedicated patient experience survey and developing tailored engagement strategies for patients from diverse backgrounds (including people from refugee backgrounds) and their carers and families. This is an action for Queensland Health under the Queensland Multicultural Action Plan.</td>
<td></td>
<td>• The Department of Health provided funding to Mater Health Services to undertake a patient experience survey. • The Department of Health coordinates the annual collection of the Your Experience of Service survey across Queensland Public Mental Health Services. Since 2017, the Your Experience of Service survey has been translated and is available in 24 languages. Some HHSs supported this process. • The Carer Experience Survey has been translated to align with languages offered for the Your Experience of Service survey. This will be implemented across Queensland public mental health services in the 2018-19 financial year. • West Moreton HHS Maternity and Midwifery services has engaged with culturally diverse people to understand their maternity needs and expectations to enhance outcomes for mums and bubs.</td>
</tr>
<tr>
<td>6.6</td>
<td>Measure the ‘Health of Refugees in Queensland’ and evaluate the effectiveness of this policy and action plan.</td>
<td>June 2017 Mater UQ CICI</td>
<td>Committed</td>
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<td></td>
<td>6.6.1 A 2017 ‘Health of Refugees in Queensland’ report is developed, providing a baseline for evaluation.</td>
<td></td>
<td>• Data collection will now be 2018. Baseline data delayed due to timeline requiring evaluation planning and ethics approval. Ethics approval granted Feb 2018, awaiting governance approval before evaluation can progress</td>
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<td></td>
<td>6.6.2 A 2020 evaluation is undertaken to determine the effectiveness of this policy and action plan, with reference to the 2017 report findings.</td>
<td>2020 Mater UQ CICI</td>
<td>Plan in place</td>
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## Action 7: Deliver evidence based quality healthcare to people from refugee backgrounds

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<tr>
<th>Action</th>
<th>Activity</th>
<th>Timeframe &amp; Lead</th>
<th>Progress against Plan</th>
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<tbody>
<tr>
<td>7.1</td>
<td>7.1.1</td>
<td>Ongoing</td>
<td>In progress.</td>
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</table>
|        | Support and expand existing structures that promote clinical excellence in refugee health such as the CAG, clinical leads, and the St Vincent’s Refugee Health Fellows initiative. | CAG | - SEQ Clinical Advisory Group has been expanded (with video conference facilities) to be state-wide Clinical Advisory Group (CAG).  
- Toowoomba area has established a local CAG to support local area needs.  
Within HHSs:  
- Children’s Health Queensland HHS CYMHS has two full-time equivalent Multicultural Mental Health Coordinators who are senior allied health clinicians experienced in transcultural mental health.  
- Children’s Health Queensland HHS Multicultural Mental Health Coordinators have established a network of Multicultural Champions that meet quarterly to provide updates on CALD relevant issues (including refugee backgrounds).  
- Children’s Health Queensland HHS Multicultural Mental Health Coordinators are supported by management to prioritise clinical work where Multicultural Mental Health Coordinators share transcultural mental health knowledge, and build transcultural capabilities through professional development.  
- West Moreton HHS is establishing a local area Refugee Health Network. A planning meeting was held in April 2018. |
|        | 7.1.2    | Ongoing          | On track.             |
|        | The St Vincent’s Refugee Health Fellows scheme is maintained and expanded to include key clinical disciplines. That is, psychiatry, paediatrics and infectious diseases. | Network team | - Position maintained, currently 1 GP refugee health fellow supports the network 1 day per week. |
| 7.2    | 7.2.1    | Ongoing          | In progress.          |
|        | Primary care is supported effectively to provide ongoing care to people from refugee backgrounds and unnecessary hospital admissions are minimised. | PHNs | - PHNs are active members of RH PAGQ and delivering local initiatives to support primary care including provision of practice visits in collaboration with refugee health services and with clinical leads Eg, BSPHN Multicultural community of practice  
- Metro South HHS participates in a Logan Primary Care Group that meets every six weeks to identify opportunities, gaps and responses to supporting refugee ready primary care  
- Metro South HHS’s Refugee Health Service and the Brisbane South Primary Health Network provide structured primary care education and resourcing. Primary care nurses are offered observation placement in the Metro South Refugee Health Service to build knowledge, skills and capacity. |
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<tr>
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<tbody>
<tr>
<td>7.3</td>
<td>7.3.1 HHSs have access to the necessary information and resources to ensure that patients are cared for appropriately and unnecessary hospital admissions are minimised.</td>
<td>Ongoing HHSS</td>
<td>In progress</td>
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<td>- Children’s Health Queensland HHS CYMHS Multicultural Mental Health Coordinators run the Refugee Outreach Assessment Clinic in collaboration with the Mater Refugee Complex Care Clinic to improve access to mental healthcare for people from refugee backgrounds.</td>
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<td>- Children’s Health Queensland HHS CYMHS Multicultural Mental Health Coordinators have started drafting guidelines for their HHS on working with consumers and families of CALD backgrounds.</td>
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<td>- South West HHSs Strategic Plan 2018-2022 includes a strategic initiative to co-design locally relevant and culturally safe solutions to connect service delivery through strong partnerships.</td>
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<td>- Townsville HHS has supported Local Health Services to meet the need associated with increased arrivals through sharing advice, resources and professional links.</td>
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<td>(As per progress noted in actions 6.1 and 6.2).</td>
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<tr>
<td>7.4</td>
<td>Continually review and evaluate models of care.</td>
<td></td>
<td>(As per actions 6.1 and 6.2).</td>
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**Acronym glossary**

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Definition</th>
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<tr>
<td>CAG</td>
<td>Clinical Advisory Group</td>
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<tr>
<td>CALD</td>
<td>Culturally and Linguistically Diverse</td>
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<td>CYMHS</td>
<td>Child and Youth Mental Health Service</td>
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<tr>
<td>DOH</td>
<td>Queensland Department of Health</td>
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<tr>
<td>HHS</td>
<td>Hospital and Health Service</td>
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<tr>
<td>MHIMA</td>
<td>Multicultural Mental Health Australia</td>
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<tr>
<td>MHWG</td>
<td>Mental Health Working Group</td>
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<td>OCRAS</td>
<td>Organisational Cultural Responsiveness Assessment Scale</td>
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<td>OHWG</td>
<td>Oral Health Working Group</td>
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<td>PHN</td>
<td>Primary Health Network</td>
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<td>RHNQ</td>
<td>Refugee Health Network Queensland</td>
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<td>RH PAGQ</td>
<td>Refugee Health Partnership Advisory Group Queensland</td>
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<tr>
<td>ROHWG</td>
<td>Refugee Oral Health Working Group</td>
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<tr>
<td>UQ CICI</td>
<td>University of Queensland Centre for Integrated Care and Innovation</td>
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