

Victorian Refugee Health Network Primary Care Project

Engaging and Supporting General Practice



victorian refugee
health network

Project Update October 2015

Background

General practice¹ is crucial to the provision of on arrival and ongoing care for people from refugee backgrounds, including asylum seekers. There are many general practices in Victoria that have developed significant expertise in refugee health care, including clinical skills and organisational capacity. However, there are ongoing challenges in identifying sufficient general practices that are willing, able and confident to work with people from refugee backgrounds.

The number of people settling under the humanitarian program in Victoria will soon increase, providing assistance to more people fleeing the conflicts in Syria and Iraq. Humanitarian settlement will grow and move into new areas and, as new communities are established, general practices will provide crucial healthcare. A coordinated response is needed to build the capacity of general practice and to build a sustainable, consistent and responsive service sector.

The project has four key phases:



Phase One: Scoping, literature and consultations

Phase one included development of a background paper including mapping current and historical general practice capacity building work; preliminary consultation with key stakeholders, including service provider and community perspectives; and a review of the academic literature around practice based interventions to engage general practice in the improved delivery of health care to people from refugee backgrounds.

The project has received approval from the Victorian Foundation for Survivors of Torture Institutional Ethics Committee. Included in the ethics application was the proposal to conduct two surveys and targeted semi-structured interviews.

Survey One was been designed for people who work in refugee health and who have a capacity building role/who engage with general practices. This survey aimed to document existing approaches to general practice engagement, existing tools and resources and to identify the components of a framework for continuing improvement for general practice to improve the delivery of health care to people from refugee backgrounds.

¹ General Practices includes general practitioners, practice nurses, practice managers, allied health professionals and administrative staff.

Survey Two was designed for general practice staff to uncover appropriate strategies for engagement and the facilitation of practice change.

Semi-structured interviews are currently being conducted with key stakeholders including Refugee Health Fellows, Refugee Health Nurses, and those who work in general practice.

Please see the Primary Care Project webpage for further information about Phase One and for ongoing updates: <http://refugeehealthnetwork.org.au/engage/primary-health-care/>

Phase Two: Intervention and resource design

An Expression of Interest (EOI) was sent in June 2015 to six community health services in areas of humanitarian settlement. A partnership agreement was formed between the Victorian Refugee Health Network and EACH Social and Community Health Service and ISIS Primary Care.

The project team have now come together for a full day workshop to identify the team vision for the project and participate in a professional development session to inform effective approaches to general practice engagement. This session was facilitated by Dr Lisa Crossland and introduced the team to the co-creation approach and the principles of innovation that are effective in supporting change in general practice.

The project team have begun to conceptualise a *Refugee Health General Practice Engagement Approach (working title)*. This will include a semi-structured interview between practices and 'general practice facilitators'² to determine their values, motivators, drivers for change and prioritise areas for action.

A framework for continuing improvement in refugee healthcare is being developed to support facilitators to engage with practices and identify steps towards delivering good quality care. This will include core skills and systems for general practices working in refugee health, with appropriate indicators, and will support incremental, practice based change in a range of key thematic areas.

Next steps in the co-creation process

The project team will come together for a workshop in mid-November to further develop the framework for continuing improvement. In mid- November practice engagement will begin, general practice will be key partners in refining tools that identify drivers for change (practice values, needs, priorities) and how best to support practice change. An intensive development and trialling phases of the project will occur between November and May 2016, and this will be documented for ongoing evaluation. A mid-project summary will be released in February 2016 and a final project report will be launched for key stakeholders later in 2016.



² Practice facilitators are identified as those with a capacity building role in refugee health, and may be Refugee Health Nurses, Refugee Health Fellows, GP liaison workers or others.