

# State-wide Meeting

March 2025

# victorian refugee health network

## Acknowledgement of Country



#### Agenda | 2:00pm – 4:00pm Chaired by: Tracey Cabrie

Time	Agenda item	Speaker
2:10pm	National Policy Update	<b>Rebecca Eckard</b> Refugee Council of Australia
2:30pm	Settlement Service Update	Gerard Murren AMES
2:45pm	Victorian Settlement Data	Samina Hassan Victorian Refugee Health Network
2:55pm	Rural and Regional Update	Kaye Graves Rural and Regional Working Group Representative
3.10pm	Break (10 mins)	
	3:20pm Urgent Care Services in Victoria Spotlight on Urgent Care Centre in South-East	Cheryl Schneider Department of Health
3:20pm		<b>Zoe Cresswell</b> South Eastern Melbourne PHN
3:40pm	Local measles outbreak in Victoria	<b>Dr. Linny Phuong</b> Paediatric Infectious Diseases Physician Founder & Board Director- The Water Well Project
3.50pm	Closing	Tracey Cabrie



# **National Policy Update**

27 March 2025

Rebecca Eckard Refugee Council of Australia

# **Key issues and updates**

# **1. Federal Budget**

# 2. Humanitarian crises arrivals

# 3. Immigration detention and new laws

4. Offshore processing

5. Fast track processing & SRSS

# **Federal Budget**



- Health-related allocations but refugee-specific programs limited (Health in My Language extended)
- Funding to address social cohesion and critical support for multicultural communities
- Offshore processing spending has blown out to \$13.35 billion, with arrangements and associated costs to force people released from immigration detention to go to Nauru not yet included
- Despite forced displacement globally at unprecedented levels, Australia's Refugee and Humanitarian Program will remain at 20,000 places, the level set in 2023-24
- Overseas aid and development spending not additional or cut but shifted to Indo-Pacific region in recognition of loss of US funding

# **Arrivals from humanitarian crises**



- **Ukraine**: Government inviting people from Ukraine on Temporary Humanitarian Concern (786) visas to apply for a Resolution of Status (RoS) permanent visa
  - As at 14 February: 2,381 individuals have been offered the RoS; 2,188 have accepted and there have been 600 grants.
- **Palestinians and Israelis**: Government seeking expressions of interest and making offers of a 3-year Temporary Humanitarian Concern (786) visa (449 visa required first)
  - 2,180 Palestinian travel doc holders; 1,000+ granted 786
  - Contact Refugee Legal
  - Can support people with health needs to minimise Medicare gap
- People from other crises (Sudan, Myanmar, Lebanon) not able to access
- Work underway developing principles and a policy framework for Australia's response to humanitarian crises: driven by Australian civil society and diaspora communities

# Immigration detention and new laws



In response to several High Court decisions, the Parliament passed three laws last year. The Australian Government, with immunity to guard against cases, now has the power:

- To pay undisclosed third countries to take non-citizens, including recognised refugees with Australian citizen family members, without any safeguards to prevent any harm, detention or return to persecution;
- To imprison people who will not return to countries where they fear for their lives;
- To **create travel bans** on citizens trying to visit Australia for study, business, tourism or to see family, in an effort to pressure their governments into accepting forced returns;
- To reverse refugees' protection findings in order to remove them from Australia, and
- To **seize mobile phones** and conduct unwarranted searches on people in immigration detention.

NZYQ cohort growing but people released from correctional facilities onto Bridging Visa R rather than returning to immigration detention

# **Solutions for refugees in offshore processing**

- ~1,030 people remain 95 in Nauru (arrivals in 2023 & 2024), 39 in PNG (plus 45 partners & children), <900 people remain who were transferred to Australia for medical reasons</li>
- Insufficient resettlement options available (>700 places), and concern about people exiting community detention and "engagement"
- NZ arrangement closed, as people must travel to NZ by 30/6/2025
- Concern about latest legislation and potential use among this group

PNG:

- > Situation in PNG deteriorated further and concerns about support to be provided
- Support via PNG Immigration officers to be provided but no consideration of medical evacuation

# Fast track processing and SRSS



- Minister is considering fast track cohort limited to:
  - People who arrived as unaccompanied children
  - People who arrived pre-2010
  - > People for whom there may be a potential change in country circumstance
  - People who arrived as children (including their parents)
  - Partner visa bar lifts also occurring
- Concerns about Ministerial Intervention applications and loss of work rights (and connected **loss of Medicare** access)
- New Medical Certificate form 1567
- Agencies putting forward recommendations now in relation to people in crisis, including urgent health needs

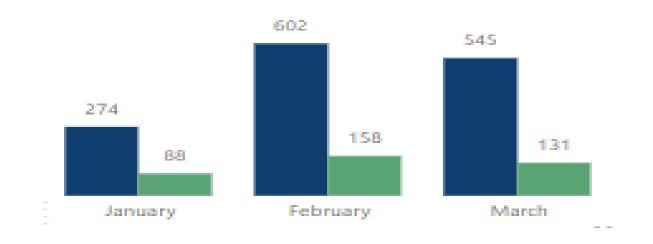


# **Questions?**

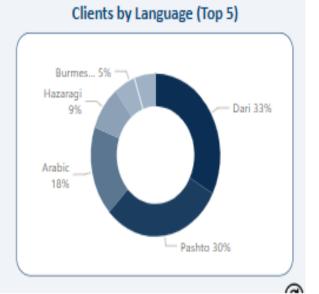
### Humanitarian Settlement Program (HSP)



### Data 2025



Clients by Country of Birth (Top 5)





**AMES** Australia

### **Settlement Updates**

 Government of Pakistan's Illegal Foreigners Repatriation Plan

• Financial Year 2024/25

• Temporary Humanitarian Stay pathway for Palestinian nationals outside Australia

• Send referrals to <u>settlement@ames.net.au</u>



### **Health Needs On Arrival**

• Increase of arrivals with 'Critical Medical Issues' (CMI)

• Limited notice of arrivals with CMI

• Access to GP's (especially those that accept Medicare eligibility letter)

• Urgent Care Clinics



## Victorian Settlement Data



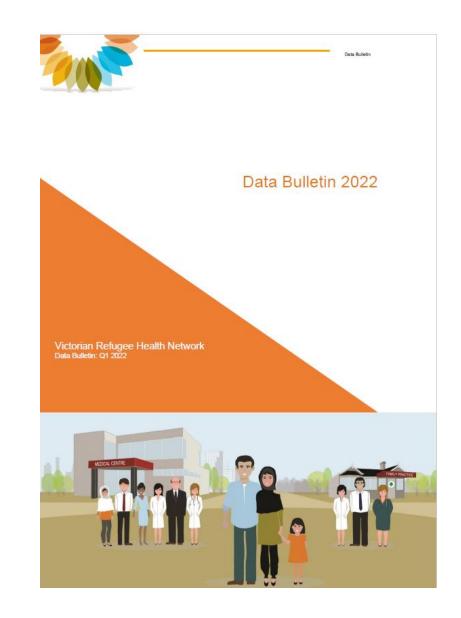
### **VRHN** Data Bulletin

The Victorian Refugee Health Network publishes a Data Bulletin every quarter that outlines settlement data for Victoria:



https://refugeehealthnetwork.org.au/resourcesreferrals-2/? sft tool for clinician=settlement-data

refugeehealth@foundationhouse.org.au



### Settlement Data in Victoria

Visa Subclass		Details	
200	Refugee Visa		
201	In Country Special Humanitarian	<ul> <li>Permanent Stay</li> <li>With these visas you can move to Australia if you are subject to persecution in your home county.</li> </ul>	
203	Emergency Rescue	These visas allow you and your family to live, work and study indefinitely in Australia	
204	Women at Risk		
202	Global Special Humanitarian visa	<ul> <li>Permanent Stay</li> <li>With this visa you can move to Australia if you face substantial discrimination or human rights abuses and have a proposer and stay in Australia with your immediate family.</li> </ul>	
851	Resolution of Status (RoS) visa	<ul> <li>Permanent Stay</li> <li>Visa that allows for the permanent resolution of status for certain visa holders, including TPV and SHEV holders who arrived in Australia before 14 February 2023</li> </ul>	
866	Protection Visa	<ul> <li>Permanent Stay</li> <li>This visa is for people who arrived in Australia on a valid visa and want to seek asylum. It lets you stay in Australia permanently, if you engage Australia's protection obligations and meet all other requirements for the grant of the visa.</li> </ul>	

\* This data does not include those on Bridging visas or temporary protection visas (TPV, SHEV, 449, 786)



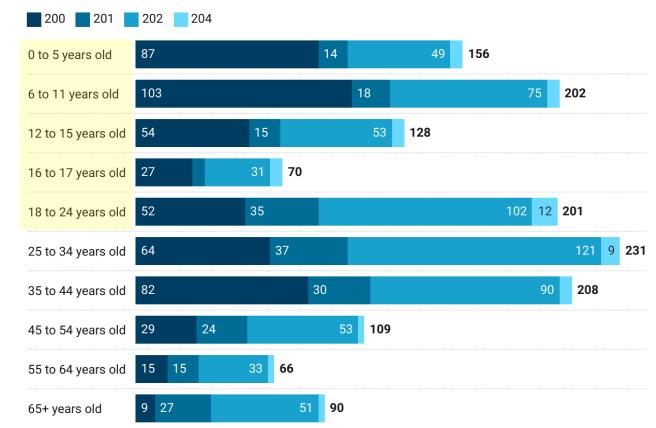
### Humanitarian Entrants in Victoria: Q4 (Oct, Nov, Dec) 2024

**1,331 humanitarian entrants** arrived in Australia in the fourth quarter of 2024 and currently reside in Victoria (as of 4 Oct 2024)

Approximately **51.8%** of this cohort or humanitarian entrants were under the age of 25 years old.

# Number of people who arrived in Australia in the fourth quarter of 2024 and currently reside in Victoria according to age group.

Visa subclasses (200 series) with a Date of Arrival between 01/10/2024 and 31/12/2024 and are currently recorded as residing in Victoria as at 04/01/2025



\* These figures are approximations as any cells that have been suppressed were changed to a numerical value to present data in this map.

Chart: Victorian Refugee Health Network • Source: Department of Home Affairs Settlement Database • Created with Datawrapper

#### Humanitarian Entrants in Victoria: 1 Jan – 31 Dec 2024

# 6,609 humanitarian entrants arrived in 2024 who are recorded as residing in Victoria (as of 4 Jan 2024)

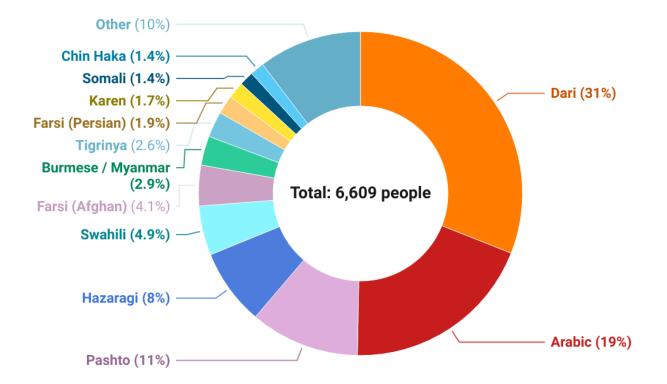
For reference: In 2023, 5,352 humanitarian entrants arrived who were recorded as residing in Victoria

Ethnicity	Number of people	Country of Birth	Number of people	Languages spoken
Hazara (Afghan)	1,443	Afghanistan	3,089	Dari
Pashtun (Afghan)	725	Syrian Arab Republic	669	Arabic
Tajik	647	Myanmar	503	Pashto
Arab (NFD)	561	Iraq	310	Hazaragi
Chin	396	Iran	299	Swahili
Afghan	328	Congo, Dem Republic Of The	231	Farsi (Afghan)
Congo	262	Pakistan	212	Burmese / Myanmar
Unknown	263	Malaysia	202	Tigrinya
Syrian	193	Eritrea	156	Farsi (Persian)
Karen (Burma)	152	Thailand	126	Not stated

\* This data does not include those on Bridging visas or temporary protection visas (TPV, SHEV, 449, 786).

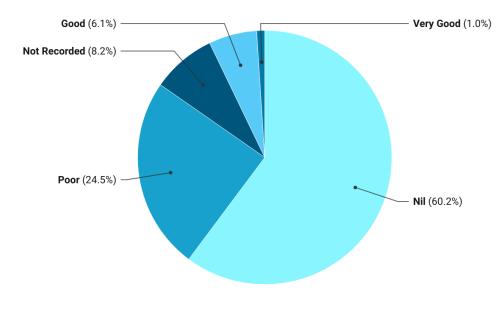
# Main Language Spoken for those who arrived in the past year: Top 20

People on Visa subclass (200 series, 866) who arrived in Australia between 01/01/2024 and 31/12/2024, and are currently recorded as residing in Victoria as at 04/01/2025



English Proficiency of people in Victoria with visa subclass (200 series & 866) who have arrived in Australia in the past year

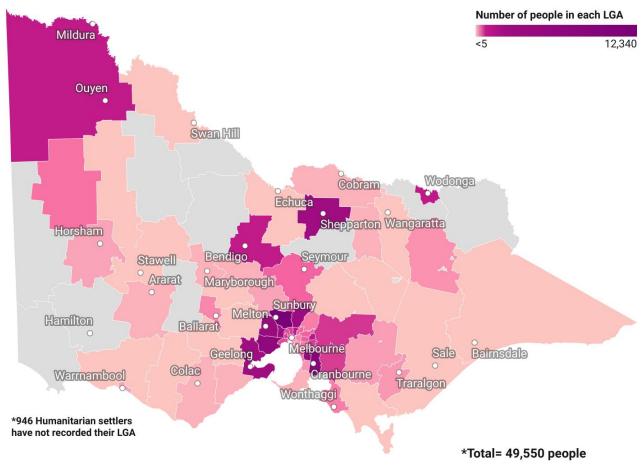
Humanitarian settlers with a Date of Arrival between 01/01/2024 and 31/12/2024 and are currently recorded as residing in Victoria as at 04/01/2025



\* These figures are approximations as any cells that have been suppressed (<5) were changed to a numerical value (3) to present data in this map.

### Humanitarian Entrants in Victoria: Past 10 years

Humanitarian settlers (200 visa series and 866) with a Date of Arrival between 01/01/2015 and 31/12/2024 and are currently recorded as residing in Victoria as at 04/01/2025.



\* These figures are approximations as any cells that have been suppressed were changed to a numerical value to present data in this map.

Map: Victorian Refugee Health Network • Source: Australian Government- Settlement Database • Map data: ABS • Created with Datawrapper

Local Government Area	Number of arrivals (Subclass 200s, 866)
Hume	12,362
Casey	6,912
Wyndham	5,205
Greater Dandenong	4,178
Melton	2,917
Whittlesea	2,396
Brimbank	2,141
Greater Geelong	1,409
Maroondah	1,270
Greater Shepparton	1,072
Greater Bendigo	949
Not Recorded	946
Yarra Ranges	769
Melbourne	676



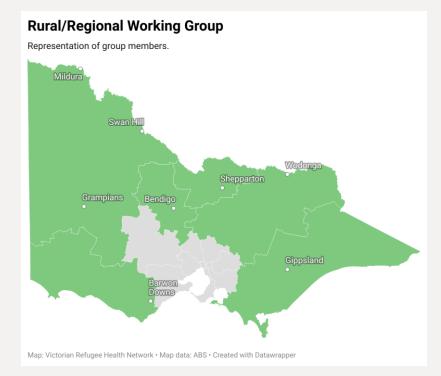
#### Rural/Regional Working Group March 2025

# victorian refugee health network

# **Rural/Regional Working Group**

#### **Overview:**

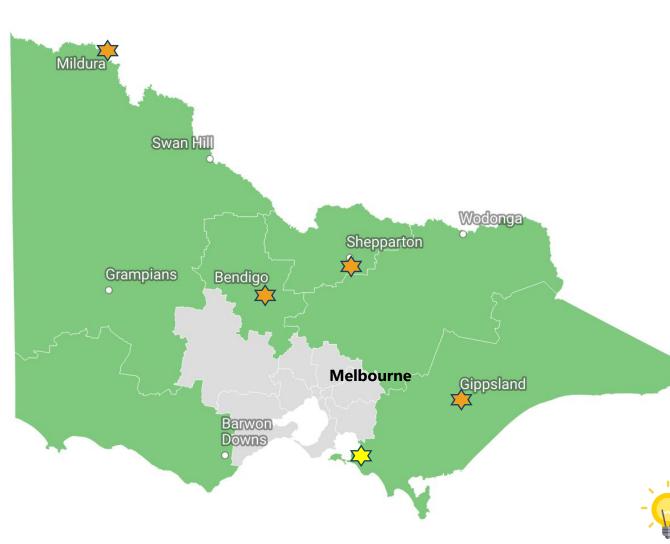
With a high number of people settling in rural/regional areas, it is important to monitor, capture and have regular updates on health access issues for areas outside metropolitan areas. This year, the Network has established a Rural and Regional working group to ensure there is adequate representation in these Statewide Meetings on matters from across the State.



**Top 3 topics:** 

- 1. Transportation
- 2. GP access
- 3. Good news story: Increasing oral health access in Bendigo

### **Transport to medical appointments**



Location	Distance to Melbourne	Round-trip to/from Melbourne
Shepparton	200 km	4 - 6 hours
Mildura	550 km	12 – 14 hours
Gippsland	250 km	6 – 8 hours
Bendigo	160 km	4 – 6 hours



Two health clinicians often accompany clients to their appointments.

# The Network is working to connect with major metro hospitals to advocate for:

- More telehealth appointments
- Mid-day appointments (Early morning appointments require leaving as early as 4am)
- Interpreters booked and considerations for if appointments are running late

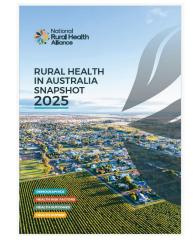
## **GP** access

# Rural and regional areas face significant challenges in:

- Availability of bulk-billed GPs
- Access to GPs that utilise interpreters
- Attending medical appointments (transportation, waiting lists, clarity with follow up appointments)



Metropolitan areas have more **GPs providing** primary care (115.2 FTE per 100,000 population)<sup>viii</sup> compared to *Regional Centres* (109.9), *Small Rural Towns* (78.2), *Remote Communities* (68.1) and *Very Remote Communities* (70.7). The highest distribution is found in *Medium Rural Towns* (127).<sup>53</sup>



#### Recent report: Rural Health in Australia Snapshot 2025



**18,405 people** in *Remote* and *Very Remote* Australia have **no access to primary healthcare services** within an hours drive time from their home (one way) – a significant improvement from the 44,930 reported in 2022.<sup>49</sup>



The consequence of poorer access to primary health care in rural Australia is higher rates of potentially **preventable hospitalisations** in all areas outside of *Major Cities*. The rate is **2-3 times as high** in *Remote* and *Very Remote* areas.<sup>20</sup>

## **Dental care**

Collaboration with Smile Squad, Bendigo Community Health Services and Bendigo Health Community Dental Service

"Our clients need support – language support, support to get here and support understanding what a dentist is. We're able to provide that support, and Bendigo Health is able to provide the service."

Working with Karen interpreters and bilingual staff to schedule appointments and provide appointment reminders, **53 people were able to receive dental checks**, clearing a backlog of 16-18 months of a waitlist.







#### **Urgent Care Options**

Cheryl Schneider Manager, Virtual Primary Care Department of Health

27 March 2025

### **Urgent Care Options**



#### **Nurse-on-Call**

For when you want to speak to someone over the phone or are unsure if you should seek medical help. This free helpline is available 24 hours a day, 7 days a week. You will be connected to a registered nurse for immediate, expert health advice.



#### Virtual Emergency Care

For urgent care from home or anywhere. This free 24/7 service connects you to an Emergency doctor or nurse from your computer or mobile. For Virtual Emergency Care, video call Victorian Virtual Emergency Department.



#### **Urgent Care Clinics**

Open 7 days, early to late, 29 clinics across Victoria. No appointment or GP referral needed to see an urgent care doctor or nurse. For urgent care now, walk-in to a Medicare Urgent Care Clinic or a Priority Primary Care Clinic.

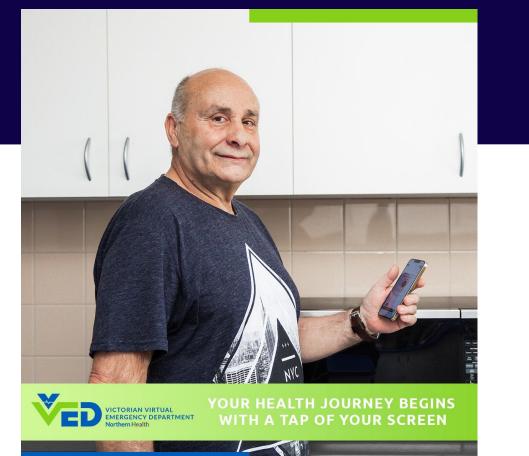


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# URGENT CARE CLINICS VICTORIA

• Walk-in/free urgent care but non life-threatening

• No Medicare Card required

• When you visit, you'll be seen by an urgent care doctor or nurse



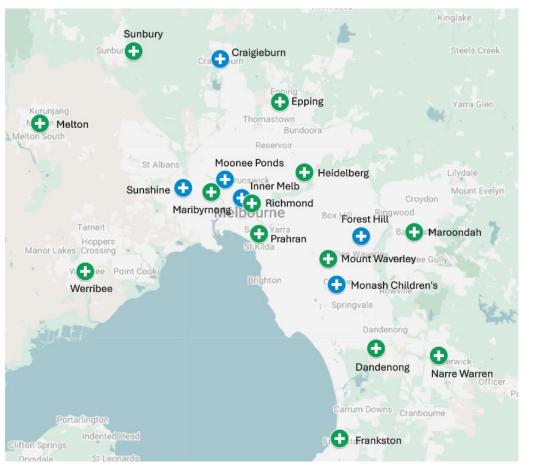
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### **Overview of UCC program**

- Quick overview of the program
  - 29 clinics opened across the state since Sept 2022
  - Extended Hours/7 days a week
    - This may differ in the rural areas
  - Approx. 770,000 patient visits, since opening
  - 55.5% of patients would have attended a local ED if the service was not available
  - MBS ineligible patients 5.98% (39,926 patients)
    - Asylum Seekers, International Students &/or travellers



### **Metro UCC's**

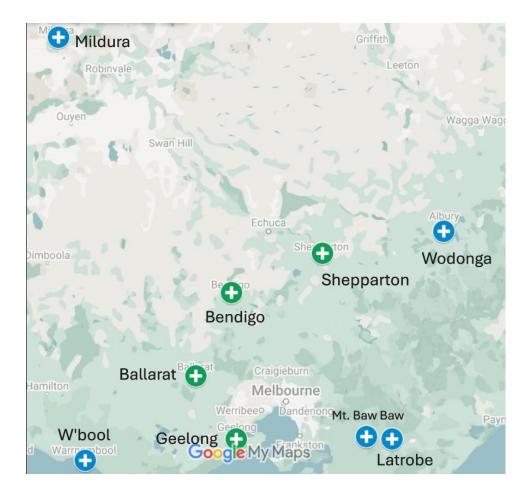


Inner Melb	Heidelberg
Richmond	Forest Hill
Moonee Ponds	Mt Waverley
Maribyrnong	Monash Childrens
Sunshine	RCH
Sunbury	Maroondah
Craigieburn	Prahran
Werribee	Frankston
Melton	Narre Warren
Epping	Dandenong



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#### **Rural UCC's**



Mildura	Wodonga
Ballarat	Geelong
Bendigo	Mt Baw Baw
Shepparton	LaTrobe (Moe)
Warrnambool	



#### When to visit...

# Injury or illness that can't wait for a *regular GP appointment but not life-threatening*

#### This may include:

Minor Infections	Insect bites and rashes
Minor fractures, sprains, sport injuries	Minor eye and ear problems
Neck, back pain	Respiratory illness
STI's	Gastroenteritis
Minor cuts	Mild burns

#### Excludes:

Chest pain or tightness	Ongoing fever in infants	
Uncontrollable breathing	Poisoning	



## **Dandenong Medicare UCC**

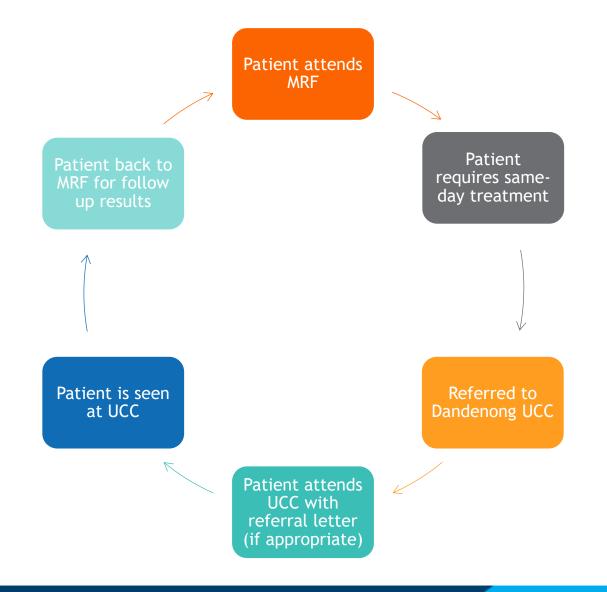
Opened in Dec 2022 & partnered with Monash Dandenong

- Common presentations of referrals from Monash Refugee Health
  - o Pain
  - Respiratory
  - o GIT Issues
  - Wounds/Lacerations/Injuries
- MBS ineligible patients make up 7% of presentations to Dandenong

### **Referral Pathway into UCC**



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#### Wins for the cohort in the South East

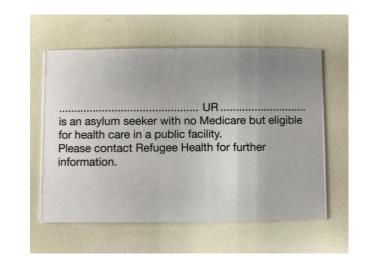
- Patients are self-referring to UCC
  - The clinic is deemed safe and welcoming to all
  - Increased understanding of the urgent care clinic in the local communities
- Patients are referred back to Monash Refugee Health for ongoing care
- MHRH regularly attend Local Working Groups
  - AV, partnered Health Service and provider of UCC
  - Stay up-to date with new arrivals data



## Challenges

#### • Identifying patients from MRH or those who are self-referring





- Billing of diagnostics e.g. pathology and radiology
  - UCC clinicians note on request slips to bulk bill
- Understanding most Refugees will have a Medicare Card
- Asylum Seekers/Humanitarian Visa holders do not have a Medicare Card



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#### Resources

Monash Health Refugee Health & Wellbeing

Jacquie McBride (Manager): Jacquie.mcbride@monashhealth.org

• SEMPHN (South Eastern Melbourne Primary Health Network)

Zoe Cresswell (Program Officer): zoe.cresswell@semphn.org.au or ucc@semphn.org.au

- <u>Better Health Channel</u> UCC specific
- <u>Victorian Urgent Care Services</u>
  - UCC's
  - Virtual Emergency Department
  - Nurse on Call



#### Measles, Misinformation & Multicultural Communities

Dr Linny Kimly Phuong

Founder of The Water Well Project & Paediatric Infectious Diseases Physician

# spots wikipedia.org/wiki/Koplik%27s oplik

file/0035/179693/Rashes-ir

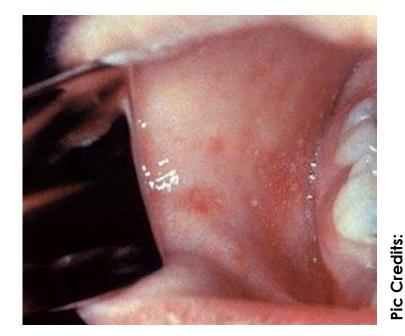
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Children-

## Measles

- Highly contagious
- Symptoms:
  - Generalised maculopapular rash
  - Fever at time of onset of rash
  - Cough or coryza or conjunctivitis or Koplik spots
- Potential complications
- Incubation-average 10 days (7-18 days)
- Infectious period- 24 hours prior to onset of prodromal symptoms until 4 days after onset of rash
- Vaccine preventable- MMR given at 12 and 18 months\*
  - \*From 6 months, if at risk, incl. travel to endemic country





#### Top 10 countries with measles outbreaks

Country	Number of Cases																				
Yemen	7,584	7,584							Australian data												
Pakistan	6,661	Notific			ceived 2012				2016	2017	2018	2019	2020	2021	2022	2023	<u>−</u> (	2025			
India	6,532	ACT	1	21	0	1	7	2	2	2	3	2	0	0	0	1	1	0			
Thailand	6,224	NSW NT QLD	25 2 14	90 5 18	170 2 4	34 0 52	67 52 72	9 0 21	18 0 15	30 2 8	19 0 14	62 31 74	11 0 6	0	0		18	17			
Ethiopia	4,596	SA	2	4	6	52 16 0	16	4	11	1	2	4	0	0	0	3	6	1			
Romania	4,478	VIC	15	39	11	41	77	30	39	21	26	58	4	0	6	4	17	13			
Afghanistan	4,358	Total	70	194	199	158	339	74	99	81	103	284	25	0	7	26	57	35			
Indonesia	3,346												iseas	e Sur	veillc	ance	Syste	m			
Kyrgyzstan	2,966	2,966						As at 26/03/2025 https://nindss.health.gov.au/pbi-dashboard/													
Viet Nam	1,835																				

Source: World Health Organization

Data as at Mar 2025- CDC global measles data:

https://www.cdc.gov/global-measles-vaccination/data-research/globalmeasles-outbreaks/index.html



#### Pic Credits:

NSW Health- https://www.health.nsw.gov.au/Infectious/measles/Pages/measles-awareness-for-backpackers-poster.aspx Dept of Health Victoria- https://www.health.vic.gov.au/infectious-diseases/measles North Western Melbourne PHN- https://nwmphn.org.au/for-community/campaigns/immunise-melbourne/ The Guardian- https://www.theguardian.com/society/gallery/2015/feb/04/measles-prevention-posters-world-in-pictures?CMP=gu\_com











The Water Well Project





#### www.thewaterwellproject.org

PO Box 6218 Vermont South VIC 3133 ABN 38 177 188 057 | ACN 626 808 811



thewaterwellproject drlinnykp



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- Topics you would like covered in future meetings
- Speaker opportunities



victorian refugee health network

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