

OUTREACH PROGRAM IMPROVES HEALTH ASSESSMENTS FOR PATIENTS WITH REFUGEE BACKGROUNDS

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TRAINED facilitators using structured action plans helped general practitioners to optimise health care for patients from refugee backgrounds, lifting the proportion of patients who received health assessments during their first year in Australia by almost 10%, according to research published today by the *Medical Journal of Australia*.

Australian guidelines recommend that all refugees be offered health assessments by GPs soon after they arrive in the country, however many people with refugee backgrounds have problems with access to high quality health and social care.

Researchers led by Professor Grant Russell, Professor of Primary Care Research at Monash University, designed a program which sent trained facilitators (seconded from local health services) into 31 GP clinics from areas of Sydney and Melbourne with high levels of refugee resettlement. Each clinic received three visits and worked with facilitators on structured action plans to help optimise routines of refugee care. Data from 14 633 refugee patients were used in the trial.

"The intervention was associated with an increase in the proportion of patients with Medicare-billed health assessments during the preceding 6 months, from 19.1% to 27.3%," Russell and colleagues reported.

"The impact of the intervention was greater in smaller practices, practices with larger proportions of patients from refugee backgrounds, recent training in refugee healthcare, or higher baseline provision of health assessments for such patients.

"There was no impact on refugee status recording, interpreter use increased modestly, and reported difficulties in refugee-specific referrals to social, settlement and dental services were reduced."

Russell and colleagues wrote that it was unclear whether a more intense intervention would improve outcomes in GP clinics with less experience in refugee health care, or whether a degree of interest and/or familiarity was a prerequisite for benefit.

"Cost effectiveness analyses of interventions such as [this trial] would help clarify the value of investments by health authorities in similar primary care refugee health care improvement initiatives," they wrote.



"Our findings support the value of outreach facilitation strategies for linking local refugee health services and Australian general practices."

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