#### REFUGEE HEALTH FACT SHEET

# Refugee Health Assessment in General Practice – check list

## **New Arrival Refugee Health Assessment**

It is recommended that all people (adults and children) from refugee background, have a comprehensive post-arrival health assessment; ideally within 28 days, but otherwise as soon as possible after arrival.

## **Health Undertakings:**

- Identified by IOM during visa medical screening.
- Required for a variety of conditions including TB, Hepatitis B, HIV.
- Home Affairs arrange follow up soon after arrival.

## Pre- arrival screening:

- Everyone has a medical assessment to obtain a visa.
- Some people have pre-departure screening (within 72 hours of departure.
- Pre-departure screening may include immunisation, malaria testing, predeparture albendazole.

#### **Documentation:**

• The patient may have medical records including pre-arrival screening reports issued by the Depart of Immigration.

## Interpreters:

- All doctors providing Medicare services can access free interpreters through the free Translating and Interpreting Service (TIS National).
- Medical practitioners can register on the TIS National website. <a href="https://www.tisnational.gov.au/">https://www.tisnational.gov.au/</a>
- Free phone interpreting is available 24 hours a day, 7 days a week and on-site (face-to-face) interpreting is available during business hours.
- Some Allied health practitioners can also access TIS.

FOR IMMEDIATE TELEPHONE INTERPRETERS: DOCTORS' PRIORITY LINE 1300 655 070

## Medicare eligibility for health assessment item numbers:

The health assessment, Item numbers **701,703,705,707** are available to people who have been in Australia for less than 12 months, with the following visas:

- Subclass 200 (Refugee); Subclass 201 (In-country special humanitarian);
  Subclass 202 (Global Special Humanitarian); Subclass 203 (Emergency Rescue);
  Subclass 204 (Women at Risk).
- Subclass 070 (Refugee Pending Bridging); Subclass 695 (Return Pending)
- **Subclass 786** (Temporary Humanitarian Concern)
- Subclass 866 (Protection)

A humanitarian entrant should be able to provide confirmation of their visa status and date of arrival or residence (date of visa granted) by one of the following documents:

- a travel card known as a Document for Travel to Australia (DFTTA).
- a travel document including a Passport, a Titre de Voyage or a Certificate of Identity.
- a Visa Evidence Card identified by the numbers PLO56 or M56
- a Permanent Resident Evidence Immi Card



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Medical practitioners may telephone the Department of Human Services (Medicare) on 132 011, with the patient present, to check eligibility.

#### The Australasian Society of Infectious Disease (ASID) and RHEANA

<u>'Recommendations for a Comprehensive Post-Arrival Health Assessment for People from Refugee-like Backgrounds' should be followed for health screening and management.</u>

## Components of the health assessment for people from refugee background:

- Patient consent should be obtained and documented.
- Refugee Health Assessment Template
- The health assessment includes investigation for infectious diseases, chronic conditions, and nutritional / vitamin deficiencies.
- Medical history, including physical, psychological, and social functioning.
- Full examination including height, weight, BMI, skin, dental, evidence of torture or other injuries.
- Assessment of vision and hearing.
- Investigations vary with country of origin, age, gender, and current health issues.
- Preventive health screening and education as per RACGP guidelines (this may be done at a separate appointment).
- Management plan.

## Recommended screening investigations for everyone:

- FBC, E/LFT
- Iron studies, B12, Vitamin D
- Schistosomiasis & Strongyloidiasis Serology
- Hep BsAg, Hep BsAby, Hep BcAby, Hep C Aby

## Age, country, or symptom specific screening:

- Malaria: dependent on country of origin (there is Malaria in some areas of Afghanistan)
- HIV if > 15yo,
- Unaccompanied minors: HIV, syphilis serology
- Varicella serology if >14yo
- Faecal Examination for parasites: all children; only in adults with no pre-departure albendazole; investigation of eosinophilia
- Faecal H pylori Ag: if symptomatic or a family history of gastric cancer.
- STI Screen if at risk (http://www.sti.guidelines.org.au/)
  - Syphilis and HIV serology
  - Urine PCR chlamydia/gonorrhoea

### **GP Management Plan:**

- A refugee health assessment should include a comprehensive management plan covering physical, psychological and social issues.
- Include immunisation catch up and TB screening referral.
- Should be developed in collaboration with the patient.
- A copy of the plan should be offered to the patient

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#### **Immunisation**

- All adults and children require an immunisation assessment and catch-up plan.
- COVID booster vaccination should be arranged as soon as possible.
- Some people have had COVID vaccines that are not recognised in Australia, so will need a primary course.
- Patients with a Health Care Card can be referred to the <u>New Arrival Refugee Immunisation</u> (NARI) clinic at Playford community clinics.
- If a patient has immunisation records, catch-up according to Australian Standards Vaccination Schedule
- If a patient does not have immunisation records, assume unimmunised and recommend full catch-up immunisation
- Catch-up immunisations | Australian Government Department of Health and Aged Care
- Catch-up Calculator | The Australian Immunisation Handbook (health.gov.au)

#### **Mental Health:**

- Survivors of Torture and Trauma Rehabilitation Services (STTARS) 8206 8900
- PHN Central Referral Unit
- For acute presentations contact Mental Health Triage 131465

#### **Tuberculosis:**

- Refer all clients for to <u>SA TB Services</u> for TB screening.
- Phone: 7117 2967 Fax: E: health.rahthoracicmedicine@sa.gov.au

#### **Children:**

- Refer all children under 5 to CYH for developmental screening 1300 733 606
- <u>CAMHS</u> provide mental health counselling and support for children and adolescents.
- See the Royal Children's Hospital Melbourne webpage for useful links

#### Dental:

- South Australian Dental Services Community Dental Services
- Lift the Lip is a SADS early intervention program for 0-5 years.

#### Women's Health:

- Most women will not have had any preventive health screening.
- Consider self-inserted CST and referral for mammogram as indicated.
- Contraception should be discussed as appropriate.
- If there are concerns about FGM/C then contact Refugee Health Service.

## For clinical advice and information regarding patient management

Refugee Health Service 21 Market Street Adelaide

T: 82373900

E: health.adminmhs@sa.gov.au

www.sahealth.sa.gov.au

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