From Policy to Practice: Local Solutions to Ensuring a Welcoming Community

March 27, 2013, 8:00 a.m. - 3:00 p.m.
Best Western Plus Lamplighter Inn & Conference Centre

Visit immigration.london.ca/LMLIP
Follow us on Twitter @LMLIP
Immigrant Access to Health Care
MUN MED GATEWAY PROJECT

Medical Education and Social Accountability
Refugee Arrivals in St. John’s

“Friends of Refugees”- 1979
Association For New Canadians- early 1980’s

<table>
<thead>
<tr>
<th>Year</th>
<th>Number</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td>156</td>
<td>Majority are GARs, very few claimants</td>
</tr>
<tr>
<td>2009</td>
<td>138</td>
<td></td>
</tr>
<tr>
<td>2010</td>
<td>157</td>
<td></td>
</tr>
<tr>
<td>2011</td>
<td>143</td>
<td></td>
</tr>
<tr>
<td>2012</td>
<td>104</td>
<td></td>
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</tbody>
</table>
How We Got Started

- Refugee Health morning 2005 (Clinical Skills, Health Ethics & Humanities course)
- Monica Kidd and Yoella Teplitsky, Med I students
- “How can we help?”
- ANC involvement
- MUN Faculty of Medicine-Dean’s support
- College of Physicians and Surgeons approval
Community Partners
How we work

- Recruitment of med students
- Orientation program – Morning in Refugee Health and half day formal orientation
  - Med student coordinators
- Project coordinator- PT , funded by Faculty of Medicine
  - Advisory committee
Advisory Committee

Coordinator
3 faculty advisors, 2 student coordinators
ANC social worker and health worker
Global health coordinator
Monthly meetings
Med Student Recruitment & Involvement

First and second year students

Student coordinator champions
Tuesday Afternoons
Tuesday Afternoons

- ANC Language school and public health nurse office
- Patients seen within 2-3 weeks arrival
- Patients, interpreters, Gateway coordinator, students, ANC health worker, PHN, physician faculty advisor
- Greetings
- Medical histories, paired 1st and 2nd year students, interpreter
- History format
Tuesday afternoons

- Physical screening (since spring 2011):
  - Audiogram, ear exam
  - Visual screening, eye exam
  - Height, weight, BP
  - Growth charts for children
  - Oral/dental exam
  - Other exam as needed
  - TB skin tests (since March 2012)
  - Saying goodbye
Documentation & Database
Tuesday afternoons

- Supervision-physician faculty advisor & public health nurse
- Referrals as needed-dentist, audiology, optometry, dietician pediatrics, ENT, plastic surgery
- Matching with family doctor
- Appointments organized by ANC
Table 1. The numbers of volunteers, interviews, and screenings, stratified by year.

<table>
<thead>
<tr>
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<tbody>
<tr>
<td><strong>Volunteer involvement</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total volunteers</td>
<td>39</td>
<td>43</td>
<td>55</td>
<td>91</td>
<td>129</td>
</tr>
<tr>
<td>Volunteers in interviews</td>
<td>35 (90)</td>
<td>32 (74)</td>
<td>49 (89)</td>
<td>77 (85)</td>
<td>97 (75)</td>
</tr>
<tr>
<td>Volunteers in the SHF</td>
<td>N/A</td>
<td>N/A</td>
<td>6 (11)</td>
<td>14 (15)</td>
<td>9 (7)</td>
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<tr>
<td>Volunteers in screenings</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>25 (19)</td>
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<tr>
<td><strong>Interviews</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td>Interview sessions</td>
<td>11</td>
<td>13</td>
<td>16</td>
<td>45</td>
<td>44</td>
</tr>
<tr>
<td>Patients seen</td>
<td>21</td>
<td>26</td>
<td>60</td>
<td>107</td>
<td>90</td>
</tr>
<tr>
<td><strong>Screenings</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Screening sessions</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>16</td>
</tr>
<tr>
<td>Patients screened</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>49</td>
</tr>
</tbody>
</table>
Table 2. Referrals and physician matches

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</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>2009</td>
<td>2010</td>
<td></td>
</tr>
<tr>
<td>Patients referred to</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>38</td>
<td>N/A</td>
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<tr>
<td>specialists</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>patients matched (%)</td>
<td>15 (71)</td>
<td>21 (81)</td>
<td>60 (100)</td>
<td>107 (100)</td>
<td>90 (100)</td>
</tr>
<tr>
<td>Physicians involved</td>
<td>6</td>
<td>5</td>
<td>10</td>
<td>10</td>
<td>15</td>
</tr>
<tr>
<td>Translators involved</td>
<td>Unknown</td>
<td>Unknown</td>
<td>18</td>
<td>40</td>
<td>34</td>
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</tbody>
</table>

b Early referrals of patients in urgent need of specialist services such as optometry, ophthalmology, dental care, audiology, dietician, social work, surgery, and so on (initiated in 2011).
Projects – Car Seat and Vitamin D programs
Projects

- Dental kits
- TB screening
- Annual Holiday Festival
- Health fairs
- Arts display
- Coats For Kids
- Prom project
- Teen immunization day
Family medicine residents & Gateway

- Video- Refugee Health Care
  
  http://www.youtube.com/watch?v=NCaqB-K4cRE

- Refugee Well Woman Project
Key elements

Support from Faculty of Medicine & ANC

- Committed medical students
- Training for med students
- Partnerships
- Paid Gateway coordinator
- Student coordinators (2)
- Advisory committee
- Faculty advisors with specific areas of responsibility
- Consent, boundaries, faculty expertise in medical ethics and cultural diversity
- Secure database and documentation
- Recruitment family doctors in community
- Funding & fundraising
- Policies and procedures
- Annual report
Challenges

- Recruitment family physicians
- Recruitment optometrists, dentists
- Transportation
- Interpreters
Future directions

- Gateway Rounds for students and residents
- More involvement residents
- Professional development for community family doctors
- Health navigator
- Second visit
- Community partners?

- http://www.med.mun.ca/MunMedGateway
Acknowledgements

- Dr. Vicki Esses and London & Middlesex LIP
- Barbara Albrechtsons (public health nurse)
- Drs. Shree Mulay and Gerard Farrell (faculty advisors)
- Kate Duff (Gateway coordinator)
- ANC partners
- Our medical students!!
Newcomer Health Project

Dr. Bhayana, Dr. Loubani and Dr. Lovesey
London Cross Cultural Learner Centre
Schulich School of Medicine and Dentistry
London Intercommunity Health Centre

Presenter: Jennifer Williamson, BA, MSW, RSW
LMLIP Community Event: March 27, 2013
Introduction and History

- Newcomer Health Project was started by Dr. Bhooma Bhayana in conjunction with the Schulich School of Medicine and Dentistry and Cross Cultural Learner Centre in 2008
- Welcomed additions of Dr. Lovesey and Dr. Loubani
- GARs receive health assessments, referrals and follow ups when applicable
- High and complex needs of newly arrived Government Assisted Refugees
• Clinics are booked based on physician availability and intake of GARs
• Initial health needs are identified by NATs/IMEs
• Clinical space on the third floor of CCLC (Jeremiah’s House Reception Centre) until Dec. 2012
• NHP Project is in the process of transitioning to LIHC
• Funding: In-kind, OHIP/IFH billing and small project funds (NHP Western)
• Annual recruitment of Western medical student volunteers
Role of Physicians

- Supervise 1\textsuperscript{st} year medical students and/or complete health assessments
- Expertise in refugee health
- Physical exams
- Order appropriate investigations, medications and referrals
- Review test results
- Provide follow up when needed
- Assistance in annual training
Role of London Intercommunity Health Centre

- Project coordination and development
- In-Kind (clinical home of records, clinical space, diagnostics, supplies, staff time, administration, intake into primarily health of some NHP clients)
- Review results and follow up when needed (connect with physicians, CCLC and clients)
Roles of Students

- NP Executives – 2nd year medical students
- Medical history taking – patient interviews
  - Conducted in pairs
  - Conducted through an interpreter
  - Physician supervised
  - Tests, medications etc. can be ordered
- Other NHP initiatives
  - Working groups – examples: Newcomer Resource Group, Passport project
  - Health promotion, film and speakers series, flu shot clinics in the past
Role of CCLC

Project Coordinator
- Identify individuals needing to be seen
- Liaison with physicians, medical students, CCLC staff and LIHC to arrange clinics
- Book and are billed for interpreters
- Administration
- Follow up with assigned CSS caseworkers (i.e. assistance with referrals, advocacy etc.)
- Assist with annual training and process meetings
- Outreach and promotion when needed
NHP Statistics 2011

- Multiple Needs: 18
- Nothing Listed: 67
- Blood Pressure: 12
- Vision: 17
- Neurological: 10
- Inactive TB: 6
- Pregnancy: 4
- Nonspecific: 7
- Hearing: 4
- Respiratory & Mobility: 4
- Mental Health: 4
- Hematuria/Prot: 2
- Diabetes: 2
- Joint: 1
Country of Origin

- Bhutan: 52
- Nepal: 28
- Iraq: 28
- Iran: 2
- Somalia: 1
- Ethiopia: 1
Mother Tongue

Nepali: 80
Arabic: 25
Somali: 1
Assyrian: 2
Kurdish: 3
Amharic: 1
NHP Statistics 2012

- Nothing Listed: 26
- Diabetes: 2
- Cancer: 1
- Connective Tissue Disorder: 1
- Developmental: 4
- Epilepsy: 3
- Heart/Lung: 1
- HIV: 5
- Impaired Hearing: 17
- Impaired Vision: 13
- Inactive TB: 8
- Mental Health: 9
- Nervous System: 4
- Osteoarthritis: 2
- Nonspecific Abnormal Results: 3
- Pregnancy: 3
Multiple Health Needs

1. 25
2. 16
3. 7
4. 2
Country of Origin

- Afghanistan: 1
- Bhutan: 39
- Iraq: 10
- United Arab Emirates: 1
- Uzbekistan: 1
Previous Living Conditions

- Rural: 10
- Refugee: 30
- Urban: 12
Frequency of Clinics

<table>
<thead>
<tr>
<th>Month</th>
<th>Frequency</th>
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<tbody>
<tr>
<td>Jan.</td>
<td>2</td>
</tr>
<tr>
<td>Feb.</td>
<td>1</td>
</tr>
<tr>
<td>Mar.</td>
<td>2</td>
</tr>
<tr>
<td>Apr.</td>
<td>1</td>
</tr>
<tr>
<td>May</td>
<td>1</td>
</tr>
<tr>
<td>June</td>
<td>2</td>
</tr>
<tr>
<td>July</td>
<td>1</td>
</tr>
<tr>
<td>Aug.</td>
<td>1</td>
</tr>
<tr>
<td>Sept.</td>
<td>2</td>
</tr>
<tr>
<td>Oct.</td>
<td>1</td>
</tr>
<tr>
<td>Nov.</td>
<td>1</td>
</tr>
<tr>
<td>Dec.</td>
<td>1</td>
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Benefits and Outcomes

- Access, primer and bridge to Canadian Health care system
- Develop cultural competence (students)
- Local response to community need
- Multidisciplinary model, partnership building and collaboration
- Improved health for GARs
- Increased awareness of refugee health
• For more information please contact Jennifer Williamson at Cross Cultural Learner Centre, 519 432 -1133 ext. 281 or jwilliamson@lcclc.org
The Newcomer Health Project
Alexandra Farag and Sonika Kainth
Newcomer Health Project

Who we are
- Over 90 Western Medical Students

What we do
- Clinics, Talks, Advocacy, Fundraising, Other

Where we work
- The London Cross Cultural Learner Centre, Preceptors Clinics, at Western University

Who we serve
- Government Assisted Refugees, Other Newcomers
Newcomer Health Project

- Clinics
  - Intake histories
  - Flu shot clinics

- Talks
  - Film screenings
  - Working with Newcomers

- Advocacy
  - Cards for Kenney
  - I Care Campaign

- Other
  - Health passport
  - Fundraising
  - Education
  - Community projects
Clinics

Comprehensive History
- Organized by Jennifer Williamson

Flu Shot Clinic
- 6 students
- Assisting Dr. Bayhana
Talks

Film Screenings
- Monsieur Lazhar

Physician Talks
- Global health at home

Working with Newcomers
- How to work with an interpreter
- PTSD
Other

Health Passport Project
- Development of health passport for Bhutanese Refugees
- With CCLC

Fundraising
- Ride for Refuge

Educational Opportunities
- Summer Institute in Refugee Health
- North American Refugee Health Conference

Resource Planning Committee
- Participate in community projects
Thank You!

Preceptors:
• Jenn Williamson
• Dr. Bhayana
• Dr. Loubani
• Dr. Lovesey

Community Partners:
• London Cross Cultural Learner Centre
• Middlesex London Health Unit

Funding Sources:
• The Hippocratic Council
Acting Together to Meet a Need

A Community response to newcomer health issues
The Newcomer Resource Group

Who are we?

• A group of community service providers, health care professionals and students who joined together to respond to unmet health care needs of refugees and refugee claimants in our community

• The group is led by Middlesex-London Health Unit
The Newcomer Resource Group

Group members:

- Dr. Huma Alam
- Dr. Soofia Kazi
- Life Resource Centre
- London Cross Cultural Learner Centre
- London InterCommunity Health Centre
- London & Middlesex Local Immigration Partnership
- Middlesex-London Health Unit
- South London Neighbourhood Resource Centre
- Western University Medical Students and Health Sciences Students
- Other key community partners
Why do we exist?

• Significant changes to health care coverage through the Interim Federal Health Program as of July 1, 2012 prompted some physicians and community service providers to come together and discuss how we could respond to those changes

• Several ideas were “floated”

• Conclusion was that providing current and accurate information in a quick and easy to access format would support professionals to support their clients
Deciding on what action to take

What would be a practical “hands-on” way to address unmet health care needs of refugees given our limitations as a group?

• We wanted to be able to respond relatively quickly

• We did not have the resources to provide direct medical care

• We knew that advocacy efforts were already underway
Process of Development

Step-by-step:

✓ Determine which services are no longer covered
✓ Compile a list of organizations that offer these or similar services for no/low cost
✓ Exclude programs covered by OHIP or OW
✓ Contact each program to confirm details such as contact details, eligibility criteria, cost, interpretation
✓ Compile information into resource listing or “map”
✓ Hold focus groups of community service providers and physicians re: usefulness and also need for accompanying booklet
The Result

• A resource map “Resources for Newcomers with No Health Coverage”

• An accompanying booklet for additional detail
The Result

- This resource is intended for use by health professionals and community service providers (no direct distribution to clients)
- Contents include health-related services for newcomers with limited or no health coverage (do not require OHIP)
- Services are free or very low cost
- It is not a resource for basic needs—that information is already available through the “Help Yourself Through Hard Times” booklet at www.info.london.on.ca
What happens next?

• Resource is current as of December 2012

• Plans are for an annual update with the support of medical students

• Online version will be available shortly

• Hard copies of the resource are available by contacting the Middlesex-London Health Unit, 519-850-2280

• For more information about the resource, or to provide feedback, contact the Health Equity Line at Middlesex-London Health Unit, 519-663-5317, ext. 3033
Benefits

• Sharing of individual experiences from work with refugee clients increased collective knowledge about existing resources and services

• Learning about resources that were previously unknown to the professional so that individual knowledge was expanded

• Access to available services and resources by clients will be easier as a result of increased knowledge and understanding of professionals that are making referrals
Benefits

• Working together strengthened existing and potential future collaboration between agencies and between individual contacts

• We hope that this example of a collaborative response may trigger more and other efforts to address other gaps in service as well as emerging needs of newcomer clients
Welcome to the London InterCommunity Health Centre

- Health Equity and Access
- March 27, 2013
Our Health Centre

- One of approximately 75 CHCs in the province
- Established in 1989 to provide care for isolated seniors, particularly those from multicultural backgrounds
- Expanded to include all persons experiencing specific barriers to accessing health and social services and a medical clinic was added
- Currently located at two east London locations: Dundas St. (at Adelaide) & Highbury Ave (at Huron)
Mission

“We provide inclusive and equitable health and social services to those who experience barriers to care, and we foster the active participation of individuals and the communities that we serve.”
Vision

“Building opportunities for healthy and inclusive communities.”
Our Team

- Our team of 80 staff includes family doctors, nurses, nurse practitioners, social workers, dietitians, mental health specialists, psychology and psychiatry services, community health workers/youth outreach workers and WrapAround Facilitators.
- Funded by the Ministry of Health and Long Term Care with additional resources from United Way, City of London, Ministry of Children and Youth Services, Ministry of Community & Social Services, Ministry of Health Promotion, Ontario Trillium Foundation and the Government of Canada.
## 2010/11 Statistics

<table>
<thead>
<tr>
<th>Our Community</th>
<th>Our Numbers</th>
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<tbody>
<tr>
<td>Active Clients</td>
<td>4808</td>
</tr>
<tr>
<td>Anonymous HIV Tests</td>
<td>900+</td>
</tr>
<tr>
<td>Client Encounters</td>
<td>30,028</td>
</tr>
<tr>
<td>Countries of Origin (of clients)</td>
<td>109</td>
</tr>
<tr>
<td>Languages Spoken (by clients)</td>
<td>48</td>
</tr>
<tr>
<td>Volunteers</td>
<td>250+</td>
</tr>
<tr>
<td>Staff</td>
<td>80</td>
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</table>
Programs & Services

- Anonymous HIV Testing
- Children’s Nutrition & Learning Project
- Chronic Disease Self-Management
- Community Engagement & Neighbourhood Development (NELCE)
- Community Kitchen
- Diabetes Self-Management
- Ethno-racial Youth Mentoring Program
Programs & Services (2)

- Health Outreach for People who are Homeless
- Hepatitis C Care Team
- Men’s Discussion Group
- Primary Health Care Services
- Senior’s Drop-in Program & Friendly Visiting
- Senior’s Tai Chi
- Seniors’ WrapAround
- Women of the World
- Women Creating Community
- Youth Outreach Workers
Context

- Understanding the role in our Health Centre:
  - Who do we serve?
  - Significant mental health concerns
  - Complex physical health issues/lack of primary care
  - Newcomers with multifaceted settlement and psycho-social issues
Contact Information

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mcornwell@lihc.on.ca