

Guidance for Intensive GP Support to Patients on Refugee Resettlement Schemes. V2 April 2022

1. Introduction

There are now several Refugee Resettlement Schemes operating in Oxfordshire that are funded by the Home Office. These are the UK Resettlement Scheme (UKRS) the Afghan Relocations and Assistance Policy and the Afghan Citizens Resettlement Scheme (ARAP/ACRS). **Please note there is no need for practices to 'sign up' to this Guidance/Service Specification.** Practices are contacted on an individual family basis depending on their resettlement address. Families are supported by District Councils and their contracted support services to assist with resettlement.

All patients in the cohort should be provided with all essential, additional and enhanced services as usual, and use all the standard processes and referral systems for any new patient. However, it is recognised that these patients may require an intensive initial assessment as soon as possible following registration and may need immediate treatment and referral to secondary or community services because of health issues relating to their particular experiences and circumstances. Individual GP practices will be contacted once the address of potential new arrivals is known.

2. Service Scope

Practices providing this service would be expected to assess the physical and mental health of all patients as soon as possible following registration (and ideally within 5 working days of arrival) and provide appropriate treatment and/or support as required. For those families arriving directly from overseas Migration Health Assessments completed by the International Organisation for Migration (IOM) will be provided to the practice prior to the arrival of the patient and the GP should note any patients that have been flagged as needing immediate specialist referral. Some families arriving via ARAP/ACRS may be accommodated in temporary 'bridging hotels' in the UK, and therefore already registered as NHS patients. They may have already received a health assessment.

These key elements should be included in the initial assessment:

- Take a full medical history, using a qualified interpreter.
- Assess current health status and address immediate concerns.
- Arrange tests for other conditions such as Hepatitis B, C Tuberculosis and HIV if deemed necessary.
- Take a history of vaccinations, and give appropriate vaccinations where required.
- Take maternity history. Cervical smears and family planning advice should be offered to women if appropriate. Men may also require family planning advice.
- Assess a family's nutritional needs particularly malnourished children and vitamin deficiencies.
- Assess psychological wellbeing and follow agreed referral routes. This may be a particular issue for this category of patients.

- Consideration should be given to referral to services providing health promotion advice and support, in particular healthy weight and smoking cessation.

Medication should be presented as simply as possible. This may mean using a single day dose regime instead of a more frequent regime. Health professionals should be confident that the patients understand how to use their medication, and that of their children if they are to administer it.

3. Monitoring and Review

The practice should flag patients using SNOMED SCTID 446654005 and SCTID 171420007

The practice will be required to confirm to the CCG that patients have been registered. For this purpose, the VPR or ARAP/ACRS number will be used in place of the NHS number and include the number of patients registered in each family and date of arrival/registration with the practice. This confirmation is available to the Home Office for audit purposes and to enable the CCG to draw down funding for payments to practices.

4. Accessibility, language interpretation and cultural sensitivity

Health professionals and other key staff (e.g. receptionists and administrators) need to have an understanding of any relevant language, cultural, social and other issues relating to the patients covered by this service.

There may be a variety of languages used within the country of origin. It is important to ensure effective communication about their healthcare. The practice should ensure that qualified interpreters from the CCG-commissioned service are made available for consultations and procedures in the practice (rather than family members, friends or staff and volunteers from voluntary organisations supporting the patient as they are not qualified or covered by insurance). For longer consultations and those where multiple members of the family are being assessed, practices are encouraged to use the face to face interpreting service, but otherwise the telephone language interpreting service should be the first option. Sensitivity should be exercised in selecting an interpreter with regard to factors such as gender and political or cultural background and this should be discussed when booking the interpreter.

Using your Client ID Number you can access the below interpreting services free of charge for appointments with members of the practice.

Telephone and Face to Face Foreign Language Interpreting 0800 587 9320

The practice should provide information in a format that the patient understands, including provision of translated materials to enable them to fully understand their healthcare and to give informed consent to any treatment. Funding for translation costs is included in the fee for this service.

Patients should be informed that all health information is confidential as there may be particular concerns about providing sensitive personal information.

As far as possible, practices should offer same sex consultations if cultural sensitivities or the preference of the patient indicate this.

5. Payment

Participating practices will be paid £600 per individual patient registered under this scheme. This is a one-off payment in recognition of the additional clinical, administrative and communication needs of the patients concerned. Payment of the full amount will be made directly to practices following confirmation of registration and arrival. Practices can confirm that the patients have been registered using the template attached at Appendix 1, or may choose to send an invoice with the same information. Please do not use the standard invoicing system but send confirmation to linda.adhana@nhs.net for processing of payments. The CCG sends in quarterly claims to the Home Office and will pay practices on receipt of this payment.

Appendix 1: Template for Refugee Resettlement Scheme returns from GP practices

Please use the template or format below to provide proof of registration for families on the UK Resettlement Scheme or ARAP/ACRS for the Home Office funding. There is no need to invoice the CCG in addition. **Please copy this information onto the practice's headed letter paper, sign and send a scanned pdf copy to linda.adhana@nhs.net**

Refugee Resettlement Scheme returns from GP practices

GP Practice Name	
GP Practice Code	
Family 1 VPR/VCR or ARAP/ACRS Number	
Number of people in the family registered at the GP Practice	
Date of registration/arrival	

Family 2 VPR/VCR or ARAP/ACRS Number	
Number of people in the family registered at the GP Practice	
Date of registration/arrival	

Family 3 VPR/VCR or ARAP/ACRS Number	
Number of people in the family registered at the GP Practice	
Date of registration	

Name and job title :

Signature :

Date :

Appendix 2 Additional Information

The resettled refugees are given Humanitarian Protection status or Refugee Status, with permission to work and access public funds and services, including all NHS healthcare. Families are supported by District Councils and their contracted support services, and will be a point of contact for the GP practice.

Health needs will be met from mainstream services, including GPs Health Visitors, Dentistry and any specialist medical provision required from hospitals or mental health services. This will be planned for following an initial health assessment. There is a two stage process to assessing likely healthcare needs:

Stage One Pre Arrival : Once a family is identified by UNHCR for resettlement the International Organisation for Migration (IOM) carry out a medical assessment in country, to ensure that the family are fit to travel, as well as to identify potential health needs on arrival in the UK. Or information will be obtained via the bridging hotel in the UK where possible for ARAP/ACRS families. The Local Authority (in Oxfordshire the District Councils) is informed of potential new arrivals. At this stage the OCCG is required to confirm that health needs can be met locally. The CCG also liaises with GP Practices to identify a suitable practice for the families, in order to register them with the GP and arrange the first appointments. Relevant health services are also informed via the lead contacts in certain circumstances, however all referrals should be via normal routes. Other services such as Social Care/Safeguarding and Education are also involved pre and post arrival.

Stage Two Post Arrival : Initial orientation and support is provided by Third Sector organisations commissioned by the District Councils. This includes support to access healthcare. GP practices undertake a detailed medical assessment to ensure all necessary referrals are made to services, and liaison with those services is via standard referral systems, and not via OCCG. The Home Office provides a per capita payment for healthcare for the first year of a family's arrival. After the first year of a family's arrival, costs will be covered by the Oxfordshire healthcare system in the usual way for residents. A one off payment of £600 per person is paid to GP practices.

Specific Health Issues to Consider for Refugees

- Help with registering with general practitioners, dentists and opticians and information about the health care system as refugees will be unfamiliar with UK health care and how things work, and expectations may be different.
- Being aware of cultural factors and cultural adaptation to life in Oxfordshire. Gender issues can be significant, and women in particular may prefer to see a female health professional, and female interpreter.
- Country specific health issues – communicable and non-communicable disease.

- Physical and mental health problems arising from past experiences of conflict; for example, bombing and shelling, torture and abuse, war related injuries and psychological trauma, family disappearances and family separation, human rights abuses. There may be a need for specialist provision of practitioners experienced in trauma related mental health problems.
- Care of pregnant women, child health, family planning, vaccinations. Primary care services often break down in situations of armed conflict.
- Impact on health of poverty and poor living conditions as refugees. Consider nutritional status, anaemia and other vitamin deficiencies, helminth infections.
- The importance of organisations that can provide advocacy and social support, in particular organisations that support refugees.
- Language interpreting. It is important to use qualified interpreters provided by the OCCG commissioned service. Family members, friends and volunteer organisations should not be used.
- Allowing time and confidential space to discuss traumatic events.

Useful Organisations

Asylum Welcome Oxford (cover Oxfordshire)

Provide support and advice for asylum seekers and refugees.

<http://www.asylum-welcome.org/>

Asylum Welcome offers information, advice and practical support to asylum seekers, refugees and vulnerable migrants living in Oxfordshire.

Refugee Resource Oxford (cover Oxfordshire)

Aims to relieve distress, improve well-being and facilitate the integration of refugees, asylum seekers and vulnerable migrants by providing psychological, social and practical support. <http://www.refugeeresource.org/>

- Specialist counselling and psychotherapy
- Mentoring
- Women's Services
- Services for men
- Advice and advocacy
- Employment and Education Support
- Training and Consultancy

Freedom from Torture (National)

- Trauma based psychological therapy and practical support for men, women and children (Services are available in the UK, from Centres in London, Manchester, Birmingham, Newcastle and Glasgow.)

<https://www.freedomfromtorture.org/>

British Red Cross International Family Tracing Service

Restoring contact between family members separated as a result of conflicts and disasters, including tracing service and sending Red Cross messages.

<http://www.redcross.org.uk/What-we-do/Finding-missing-family/International-family-tracing>

Useful Resources**Public Health England Migrant Health Guide**

The guide covers a range of topics from assessing health of new patients from overseas, country specific information, health topics for communicable disease, and non-communicable disease, NHS entitlements for migrants.

<https://www.gov.uk/topic/health-protection/migrant-health-guide>

Country specific health information

Please remember Refugees may have been residing for some time in other countries so any significant health issues within those countries should also be considered.

TravelHealthPro is the website commissioned by Public Health England, comprising the travel health resources of the [National Travel Health Network and Centre \(NaTHNaC\)](#).

<http://travelhealthpro.org.uk/about-us/>