

Outer Northern Refugee Health Network

Strategic Plan 2018-2021

The Outer Northern Refugee Health Network (ONRHN)

Background

The ONRHN is a network of service providers, community members and local organisations working to facilitate social inclusion and access to health and community services for refugees in Melbourne's outer north. Please note where the term 'refugee' is used in this document it also includes 'asylum seekers'.

Established in December 2015, the ONRHN arose in response to the longstanding need for a planned partnership approach to the development of strategic action in addressing the complex whole-of person and family needs of local refugee communities. The ONRHN is now comprised of around 40 member organisations committed to providing high quality health and social support to refugees.

During its first three years of operation the ONRHN has been successful in:

- Bringing together key stakeholders who work with refugees
- Sharing knowledge about refugee health and community support needs
- Improving access to services for refugees
- Developing an ONRHN Service Directory
- Developing the Data Bulletin Working Group to share key refugee data

Purpose

The ONRHN provides a regular forum to discuss whole-of-person refugee issues and identify and implement multi-sectoral strategies in order to improve the health and wellbeing of refugees and asylum seekers in the outer northern catchment of metropolitan Melbourne.

Scope

The ONRHN addresses the needs of both refugee and asylum seeker communities.

The 1951 Convention Relating to the Status of Refugees (and its 1967 Protocol), to which Australia is a signatory, defines a refugee¹ as:

Any person who owing to a well founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his/her nationality and is unable, or owing to such fear, is unwilling to avail himself/herself of the protection of that country.

An asylum seeker is a person who is seeking protection as a refugee and is still waiting to have his/her claim assessed². All refugees were previously Asylum Seekers.

The ONRHN catchment area includes the Local Government Areas of Hume and Whittlesea.

Objectives

- Enhance the capacity and skill of health, wellbeing and social support providers meet the needs of refugee and asylum seeker communities across the catchment

¹ Refugee Council of Australia. Accessed July 2018 from;
https://www.refugeecouncil.org.au/docs/news&events/RW_Background_Information.pdf

² Refugee Council of Australia. (Op Cit)

- Strategically identify and contribute to other adjoining services and planning platforms and responses to refugee health issues
- Inform and collaboratively support quality coordinated care for refugees in a range of health and wellbeing jurisdictions across the local catchment
- Advise on best practice policy changes to issues that impact on the lived experience of refugees and asylum seeker communities
- Secure and maintain effective local partnerships in the co-design, delivery and evaluation of coordinated care services from Prevention through to Tertiary care
- Assess needs/identifying gaps in refugee and asylum health care provision in the catchment
- Evaluate outcomes of all strategies as listed in the Outer Northern Refugee Health Action Plan including partnership performance.

Partnership principles

1. Improved overall health wellbeing outcomes for our refugee and asylum seeker community is the shared responsibility by all public and private service providers
2. A shared focus on the importance of coordinated care for our communities at the individual and system level
3. Regular transparent communication and consultation
4. An understanding and respect for each party's responsibilities and legitimacy in the whole care and support service system, especially as it relates to their respective strategic plans and funding agreements
5. Working in a collaborative manner that is consistent with our own values, principles and objectives especially around trust, communication and respect.

Social Model of Health

The ONRHN references the Social Model of Health to conceptualise its purpose and practice.

The Social Model of Health attempts to address broader influences on health (e.g. social, cultural, environmental and economic), rather than focus on disease or ill health. It is a community based response which highlights preventing illness and promoting health through policies, education and social participation opportunities³.

VicHealth have suggested the Social Model of Health⁴:

- Addresses the broader determinants of health
- Involves inter-sectoral collaboration
- Acts to reduce social inequities
- Empowers individuals and communities
- Acts to enable access to health care.

³ Rogers, N. (2016). Health theories and Frameworks. National Youth Homelessness Conference (Dubbo, Australia)

⁴ VicHealth – Defining health promotion. Accessed July 2018 from: <https://www.vichealth.vic.gov.au/media-and-resources/vce-resources/defining-health-promotion>

Strategic planning process

Given the value of the ONRHN in improving responses to refugees, and the ongoing need for these services in the community it was timely for the ONRHN to develop a strategic plan to assist member organisations to prioritise their joint activities over the next three years (2018-2021).

Lirata Consulting (www.lirata.com) was engaged to assist in gathering data, facilitating the strategic planning process and drafting the plan.

Data gathering

The following activities were undertaken to inform the strategic planning process and decision making:

- A review of current policy directions by commonwealth and state governments
- Consideration of the Victorian refugee and asylum seeker health action plan (2014-2018)
- Consideration of the current HWPCP strategic plan
- A review of the demographic and health data of recently arrived refugees to the ONRHN catchment area
- Two surveys of ONRHN stakeholders:
 - A Community Member survey which received 22 responses
 - A Service Provider survey which received 33 responses.

This information was analysed and collated in the *ONRHN Strategic Planning – Context for Participants* document which is available [here](#)

Strategic planning workshop and plan development

Twenty-one (21) people attended a four hour strategic planning workshop on Thursday 12th July 2018.

Representatives from state and local government, acute, primary and community health services, and community support providers attended. There was also representation from providers of universal services as well as those working specifically with refugees and asylum seekers.

Prior to the workshop participants were provided with a contextual document outlining current government priorities and policies, recent health and demographic data of refugees in the catchment area, and survey results from local community members and service providers. This information was designed to assist participants in prioritising key strategic activities for the next three years.

At the workshop information and data from the contextual document was reviewed before participants openly discussed and prioritised four (4) strategic priorities. Smaller groups then helped to refine specific key actions and activities under each area.

Following the workshop and development of the draft plan, the HWPCP and the ONRHN Reference Group further refined the plan actions and activities.

Strategic Plan 2018 – 2021

Purpose

Provide a regular forum to discuss whole-of-person refugee issues and identify and implement multi-sectoral strategies in order to improve the health and wellbeing of refugees and asylum seekers in the outer northern catchment of metropolitan Melbourne

Principles

1. Improved overall health and wellbeing outcomes for our refugee and asylum seeker community is the shared responsibility by all public and private service providers
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1 Improve service access & navigation

Improve access to and navigation of health and community services for refugees and asylum seekers

- Market the existing ONRHN service directory
- Access and analyse data for refugees
- Identify and refine existing service maps
- Develop strategies for sharing information with newly arrived refugees

2 Build service system capacity

Build the collaborative capacity of health and community services to effectively assist refugees and asylum seekers

- Build capacity to support refugees by identifying new resources
- Prepare for future refugee intakes
- Identify and share key knowledge and resources for refugees

3 Support social inclusion

Develop social inclusion approaches that improve refugee and asylum seeker community participation and acceptance

- Identify key social inclusion priorities through refugee consultations
- Provide advice and input into government policy
- Align priorities with existing social inclusion strategies

4 Strengthen the Network

Strengthen the Network through enhancing its governance, membership and profile

- Enhance ONRHN accountability measures
- Clarify and expand ONRHN membership
- Build links with state-wide networks
- Document and communicate the value and work of the ONRHN

Strategic priorities

Strategic priority 1: Improve access to and navigation of health and community services for refugees

ACTION	ACTIVITIES	RESPONSIBILITY	TIMELINE	SUCCESS MEASURE
1.1 Market the existing ONRHN service directory to promote available services	1.1.1 Evaluate use and uptake of the Refugee and Asylum Seeker Service Directory (RASSD)	ONRHN Project Coordinator HWPCP	2018	A service directory evaluation is completed which identifies activities to improve RASSD uptake
	1.1.2 Investigate loading the RASSD onto other platforms and identify the best platforms to target. Specifically focus on the National Health Directory as one platform	HWPCP	2018	Within 3 months the RASSD is uploaded onto at least one suitable communication platform
	1.1.3 Present information about the Service Directory, including key services, resources and pathways at health and community network meetings based on evaluation data	ONRHN Project Coordinator	2019 - 2021	A ONRHN endorsed representative presents information at 4 networks, forums or community events per year where the RASSD is discussed and shared
1.2 Access and analyse data for refugee service presentations	1.2.1 Develop a method to identify the number of refugee service presentations across different service types, including both universal and specific services. (Seek data from relevant government departments and local service providers where available)	ONRHN Project Coordinator	2020	A method is developed to collect and analyse refugee service presentation data across different service types

ACTION	ACTIVITIES	RESPONSIBILITY	TIMELINE	SUCCESS MEASURE
	1.2.2 Present information about refugees at health and community networks. Use data under activity 1.2.1 to target appropriate networks	ONRHN Project Coordinator	2020-2021	Data is used to target appropriate networks, forums or events and these have been clearly listed
	1.2.3 Have service providers consult refugees on the main barriers to accessing services, including the service types that are most difficult to access. Develop a strategy to respond to these barriers	HWPCP ONRHN service providers	2019	<ul style="list-style-type: none"> • HWPCP provide resources to support service providers in consultations • Service providers provide a brief report on the consultations • Brief reports are collated into a consolidated document by the ONRHN
1.3 Identify and refine existing service maps and health pathways documentation	1.3.1 Identify, refine and update 5 priority 'service pathways' to help specific worker roles navigate better access to services for refugees across the ONRHN catchment	ONRHN Working Group	2019-2020	<ul style="list-style-type: none"> • Available 'service pathways' resources are identified and sourced from relevant government departments and/or Primary Health Networks • ONRHN specific 'service pathways' infographics are refined and shared • Service pathways' infographics are promoted and shared with relevant service providers
	1.3.2 Identify gaps for developing further referral pathways.			<ul style="list-style-type: none"> • Gaps are identified and further map development priorities progressed
1.4 Develop strategies for sharing information about available programs and resources with specific newly arrived communities	1.4.1 Assist local organisations to identify and share program and resources information with newly arrived communities. Draw on existing activities to do this	ONRHN Working Group	2019-2020	<ul style="list-style-type: none"> • Three new strategies are developed to provide key program and resources information to newly arrived refugee groups • All information is shared in the primary language of these newly arrived groups

Strategic priority 2: Build the capacity of health and community services to effectively assist refugees

ACTION	ACTIVITIES	RESPONSIBILITY	TIMELINE	SUCCESS MEASURE
2.1 Build ONRHN member capacity to support refugees by seeking additional resources	2.1.1 Identify key refugee needs with specific attention to areas of high unmet need	ONRHN	2018	Five priority needs are identified for refugees across the ONRHN catchment
	2.1.2 Advocate for resources to better meet identified needs	ONRHN Project Coordinator ONRHN service providers	2018-2021	Three successful funding applications are made to meet an identified priority need
2.2 Prepare for future refugee intakes In partnership with government	2.2.1 Work with government to identify likely future refugee intakes to the ONRHN catchment and prepare services to meet these needs	CEO HWPCP Senior ONRHN members	2018-2019	<ul style="list-style-type: none"> Organise and attend a meeting with government Develop an agreement to collaborate (Statement of Intent)
2.3 Identify and share key knowledge and resources to build ONRHN capability to work with refugees	2.3.1 Gather, analyse and share accurate data on the location that refugees settle	HWPCP Data Bulletin	2018	The HWPCP Data bulletin is shared quarterly
	2.3.2 ONRHN members share information, knowledge or skills related to refugees with other network members	ONRHN members	2018	Member updates are completed at each meeting and remain a standard agenda item at ONRHN meetings

ACTION	ACTIVITIES	RESPONSIBILITY	TIMELINE	SUCCESS MEASURE
	2.3.3 Based on regular feedback the ONRHN will identify and facilitate presentations at each meeting	ONRHN Project Coordinator	2019 - 2021	Three 20 minute presentations at ONRHN meetings occur at 75% of meetings between January 2019 – August 2021
	2.3.4 Create a brief evaluation tool which can be completed following each presentation. Analyse evaluations and make improvements to presentations where possible	ONRHN Project Coordinator	2019-2021	<ul style="list-style-type: none"> • A brief evaluation tool is developed • Evaluations completed and analysed following each ONRHN meeting • Improvements are made to presentations where possible

Strategic priority 3: Develop social inclusion approaches that improve refugee community participation and acceptance

ACTION	ACTIVITIES	RESPONSIBILITY	TIMELINE	SUCCESS MEASURE
3.1 Consult with distinct refugee communities to identify key social inclusion and community participation priorities	3.1.1 Gather data on key advocacy and social inclusion priorities for refugees: <ul style="list-style-type: none"> • Help service providers to complete a community member survey during Refugee Week • Identify available existing data from local councils and other available sources 	ONRHN	2018-2019	<ul style="list-style-type: none"> • A community member survey is developed for used by service providers at their stalls and other events during Refugee Week • Community member survey data is gathered and analysed, and key advocacy and social inclusion activities are identified
	3.1.2 Use the community member survey and other available data to develop key advocacy messages about refugees for the local community	ONRHN	2019	Develop and share key messages within the ONRHN catchment identified through the community member survey and other data sources
	3.1.3 Use the community member survey and previous findings to develop key social inclusion and community participation activities for refugees	ONRHN	2019-2021	Develop and implement key social inclusion strategies identified through the community member survey and other data sources
3.2 Provide advice and input into government policy and strategic directions related to refugees	3.2.1 Develop mechanisms for refugee voices to be heard in discussions about services and policies affecting them. Provide opportunities for people with lived experience to advocate for refugee needs and provide opportunities for input into government policy, including Federal, state and local governments	ONRHN People with lived experience	2018-2021	<ul style="list-style-type: none"> • Key advice is shared in wider networks, and where possible with both state and federal governments • People with lived experience participate in the development and/or sharing of key messages

ACTION	ACTIVITIES	RESPONSIBILITY	TIMELINE	SUCCESS MEASURE
3.3 Identify and align activities with existing social inclusion strategies and plans for refugees in their local communities	3.3.1 Develop and implement a general induction pack with consistent messaging (that service providers can add to) to welcome and resource new arrivals to the ONRHN catchment	ONRHN Project Coordinator	2019-2021	<ul style="list-style-type: none"> • A general induction pack with key consistent messaging is developed for new refugees • The induction pack is widely used by service providers in the ONRHN catchment
	3.3.2 Continue working with local councils to promote policies of welcome and support for refugees and asylum seekers		2019-2021	<ul style="list-style-type: none"> • Local council representatives regularly attend ONRHN meetings

Strategic priority 4: Strengthen the Network through enhancing its governance, membership and profile

ACTION	ACTIVITY	RESPONSIBILITY	TIMELINE	SUCCESS MEASURE
4.1 Further enhance accountability measures for the ONRHN	4.1.1 Share annual ONRHN meeting times at the start of each year	ONRHN Project Coordinator	2019-2021	A calendar of ONRHN meeting dates, times and venues is distributed in January each year
	4.1.2 Send ONRHN draft agenda with opportunity to add items two weeks prior to next meeting	ONRHN Project Coordinator	2018-2021	Draft agendas are shared within two weeks of the next meeting 80% of the time
	4.1.3 Provide minutes (and actions) within two weeks following each ONRHN meeting	ONRHN Project Coordinator	2018-2021	Meeting minutes and actions are shared within two weeks following ONRHN meetings 80% of the time
	4.1.4 Use ONRHN sub-committees to progress 3 specific activities with clear key performance indicators and measurement methods	ONRHN Project Coordinator ONRHN members	2018-2021	A set of measurable indicators is developed and documented for the ONRHN in their first meeting each year
4.2 Clarify and expand ONRHN membership	4.2.1 Review ONRHN membership with a view to targeted participation from government, primary and community health providers, community service providers, consumer representative and other relevant local groups and organisations	ONRHN Project Coordinator	2018-2021	The ONRHN membership includes some representation from state and local government; primary and community health providers, community service providers, and a consumer representative
	4.2.2 Ensure there is appropriate representation across service providers from both the Hume and Whittlesea LGA's	ONRHN Project Coordinator	2018-2021	At least 30% of ONRHN members come from each LGA
	4.2.3 Strategically hold ONRHN meetings in geographic locations that allow for maximum participation. Consider holding meetings at service	ONRHN Project Coordinator	2019-2021	At least 50% of ONRHN member agencies attend at least four out of six meetings annually

ACTION	ACTIVITY	RESPONSIBILITY	TIMELINE	SUCCESS MEASURE
	provider offices and rotating meetings across geographies			
4.3 Build links with other networks and state wide services	4.3.1 Strategically attend other local and state wide networks to share ONRHN stories, gather relevant information and build relationships	ONRHN Project Coordinator	2019-2021	Identify and attend at least 4 local and state wide network meetings to share stories, gather information and build relationships
4.4 Document and communicate the value and work of the ONRHN	4.4.1 Undertake a process to identify whether the ONRHN is the most appropriate title for the network. Make a change to the name of the network if this would better describe the work or the target group of the network	ONRHN Project Coordinator	2018	Facilitate a dedicated session during an ONRHN meeting to discuss and decide on the most appropriate name for the network based on a set of agreed principles
	4.4.2 Actively promote the concept of a <i>Social Model of Health</i> to help members understand that the ONRHN considers health as more than the absence of disease and inclusive of all activities which foster health and wellbeing	ONRHN Project Coordinator ONRHN members	2018-2021	Facilitate a discussion in ONRHN meetings at twice each year which highlights how the ONRHN uses social health models to enhance social inclusion, prevent illness and promote health.
	4.4.3 Develop a website for the ONRHN which can be used as a resource to build understanding about the work of the network and is a place for key resources (e.g. Service Directory; Infographics)	ONRHN Project Coordinator	2019	<ul style="list-style-type: none"> The ONRHN has an operating website by October 2019. The website includes key information about the ONRHN and resources for both service providers and community members
	4.4.4 Assess the suitability of the <i>Incept Program Evaluation Framework</i> to standardise ONRHN projects	ONRHN Project Coordinator	2018	<ul style="list-style-type: none"> Feasibility of the Incept Program Evaluation Framework is undertaken.

ACTION	ACTIVITY	RESPONSIBILITY	TIMELINE	SUCCESS MEASURE
				<ul style="list-style-type: none"><li data-bbox="1527 225 2101 331">• If suitable, the Incept Program Evaluation Framework is adopted for standard use in ONRHN projects
