# Impact of COVID-19 on Refugee Resettlement: The NZ Refugee Quota Programme

- The NZ Refugee Quota Programme was temporarily paused from end March 2020 to early Feb 2021 due to New Zealand's COVID-19 response strategy.
- During this period MBIE and other government agencies were looking at ways to safely resume the Quota Programme



### **Emergency Cases**

 On September 11 2020, the movement of Emergency Cases was approved.

 Total of 57 Emergency Cases before Quota refugee programme resumed in early Feb2021



## **Emergency Cases**

- No formal refugee quota programme
- Supports include
  - case officer
  - Transition Nurse
- Local GP clinic support for medical care
- Resettlement community care



## **Emergency Cases**

#### These cases will settle in:

- Auckland
- Hamilton
- Palmerston North
- Wellington
- Christchurch



### Resumption of Refugee Quota Programme



- Ministerial sign off Early Feb
- small groups of refugee families started arriving for resettlement from mid-February 2021.
- arrival dates for cohorts are staggered to ensure that spaces at managed isolation facilities are available.

### Refugee Health Liaison Team



 Support the health and wellbeing of the client throughout their resettlement journey.

#### By:

- Working alongside INZ to prepare for intake,
- Working with offshore and onshore health services to plan ongoing care for clients

## **Offshore Health Reports**



#### Offshore Health Report

Given/First Name:
Family/Last Name:
Date of Birth:
Gender:
NHI:
Language/s spoken:
Preferred language:
Translator required:
Country of Birth:
Country of Departure:
Eligibility for Healthcare in New Zealand:
NZ Permanent Resident

#### Ongoing concerns/Issues:

- 1. Former Refugee
- 2.

#### Medical/Surgical History:

1. Issues Information

#### Women's Health History;

1. Issues

(Obstetric history, gynaecological history, family planning)

#### Men's Health History:

1. Issues Information

#### Children's Health History;

Birth History Information

Developmental Milestones

Information

Diet

Information

#### Family history:

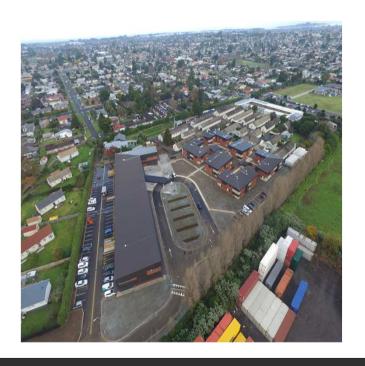
Always complete. If nil documented write Nil known family history

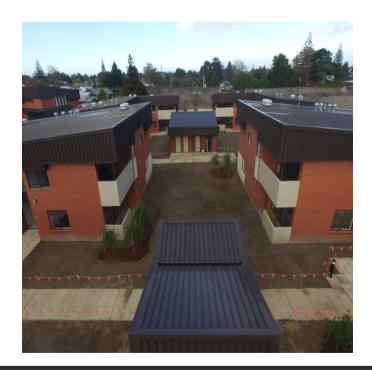
 Every refugee will have an offshore health report summarising the available pertinent offshore health information



### Mangere Refugee Resettlement Process

 Mangere Refugee Resettlement Centre new name - Te Āhuru Mōwai Aotearoa: "A safe haven in Aotearoa")





### Resettlement programme



- New Programme is 5 weeks
- AUT
- Health
- WINZ
- Settlement agencies
- Prepared for community

#### Health service at Te Āhuru Mōwai o Aotearoa



#### **Mangere Refugee Health service**

- Monday to Friday service
- 40 hours week
- After hours referred to local after hours GP or Middlemore ED dependant on need
- Triage/walk in service
- Booked appointments
- Interpreter service for all consults
- Catch up vaccinations as required
- Pharmacy education/medication administration



#### **Mangere Refugee Health service Objectives**

Maintain, improve and restore health of Quota Refugees



## **Interpreter Services**

Every consumer has the right to effective communication in a form, language, and manner that enables the consumer to understand the information provided. Where necessary and reasonably practicable, this includes the right to a competent interpreter.

# **Interpreter Services**







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# The MBIE Language Assistance Website is:

https://www.mbie.govt.nz/cross-government-functions/language-assistance-services/.

## **RHLT Summary**

- Starts offshore
- No direct patient contact
- Information gathering of care/treatment already received recommend offshore
- Facilitating immunisations offshore(linked to IMAC website) including ensure relevant documentation in English
- Suggesting lab test/follow up to offshore physicians as per indicated through offshore assessments

#### **RHLT Summary**

- Handing over information found in offshore assessment to MIF team, Onshore health team, Resettlement team, and other Tertiary health providers if required
- TB screening and onward referrals as indicated by screening
- implementation of Parasite screening/treatment

### **Arrival in NZ**





### Summary of what RHLT and MRHS do

MRHS starts when come into NZ stops at resettlement area

- Direct patient contact
- Starts when refugees arrive in MIF
- Confirming information gathered and building on from history
- Providing remaining vaccinations as required for catch up schedule, imputing information to correlate to NIR
- Taking the follow up test and providing the follow up treatment as required
- RHLT provides oversight not physical treatment
- MRHS provides physical treatment and assessments

#### **Summary of what MRHS do**

- Completing the screening that was unable to be achieved offshore
- Referring to mental health and psychological onsite services
- Gynaecological assessment
- Sexual health service
- Management of intestinal parasite if not completed
- Cervical screening
- Breast Screening
- Bowel Screening
- Dental Care
- Optometry
- Ongoing care/treatment for chronic issues



#### **Summary of what MRHS do**

- Referrals to resettlement agencies as required
- Health literacy on:
  - NZ health system and how to navigate it
  - Dental care
  - Optometry
  - Pharmacy
  - Maternity
  - Emergency departments
  - Community services card and incidental cost in health
- Health education, role modelling what primary health service look like in the community, so that they are realistic in their expectations of what health care looks like in the resettlement areas and how to access it.

# **Contact Details**



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#### Resettlement area

- Continue to provide health care and Health literacy to refugee
- Follow up on any referrals that has been made
- Continue with catch up immunisation is required
- Continue to provide support to the refugee to be able to independently navigate the health system so that their needs are meet











## **Questions?**

