

## **Companion House Health Services**

### **2020-2021 Budget Submission**

#### **1. Introduction**

Companion House works with survivors of torture and trauma who have sought safety in Australia from torture and human rights abuses, including war and persecution.

The Companion House primary health care service is a crucial support to the ACT health system, providing on arrival screening and care for refugees, coordinated health care for vulnerable people, access to specialists and allied health care and high quality long appointment GP and nursing care.

The service provides a means of ensuring that our patients with primary care problems do not default to Emergency Departments, those with primary care mental health care needs can be managed outside of ACT Mental Health and strongly supports the coordination of care across the ACT health system.

The Companion House counselling service works with survivors of torture and trauma, providing short or long term counselling and trauma therapies to refugees and asylum seekers across the age span. The service is a point of diversion from ACT Mental Health and supports the coordination of care of distressed people across the health system.

Our primary health care service works hard to meet the needs of our patients but we need more nursing and coordination hours to continue to provide services to new arrivals and patients with complex needs.

In addition, there are currently 80 distressed refugees and asylum seeker adults and 30 children on our counselling waiting lists and we are unable to meet demand and need for counselling services.

**Companion House's medical and counselling services are under pressure and are not always able to meet demand for service.**

**This submission calls for a modest increase in investment from ACT Government in Companion House health services from 2020-2021. We note there has been no increase (other than CPI and ERO) in our health services from ACT Government for 15 years.**

## **2. What are the drivers of pressure and unmet demand?**

There are a number of key drivers of pressure and unmet demand on our services.

Key drivers include:

**(a) Target population Growth:** We have seen target group population growth of 1980 people over the five year period 2013/4 to 2019/20 which has a steadily accumulative effect on service demand and capacity.

There is a growth in numbers of humanitarian entrants, SHEV holders and asylum seekers projected to continue to increase and for there to be about 380 new arrivals across 2019/20 and future years (as compared to 120 people in 2010).

**(b) Increased health complexity in refugee intake:** A 2012 Commonwealth policy change now allows chronically ill and disabled humanitarian entrant entry. This is a very welcome development. It has had an incremental effect on our medical service over last five years as we work with an always growing number of medically complex patients with higher number of disabilities, who will need our advocacy and support to be able to access, where appropriate, the NDIS.

**(c) Increased number of asylum seekers in the ACT community:** In 2010 there were about 70 asylum seekers, in 2019 there are about 200 asylum seekers in our community, sometimes without Medicare rights and with high levels of distress and medical need.

**(d) Increased complexity and decreasing value of Medicare revenue:** The decreasing value of Medicare revenue for Companion House (in common with all general practices in Australia which bulk bill) has increased pressure on the service and threatens sustainability.

**(e) Transition points for patients:** Companion House's primary health care service actively exits patients to appropriate bulk billed care for targeted patients ready for transition to mainstream general practice,. However, we find that about 35-40% of these patients bounce back to our service within 1 year due to frustrations with lack of interpreter use, lack of bulk billing or long appointments (where there is time for non-English speakers and people affected by trauma to adequately communicate).

### **3. How will increasing the capacity of Companion House's health service assist patients and the ACT Health system?**

#### **3.1 Primary health care services**

##### **(a) New arrivals**

Companion House can provide a quality service to all newly arriving refugees from the off shore humanitarian program with increased capacity. We currently run weekly new arrival clinics for this purpose but cannot continue this intensive service at the current level without increasing capacity.

Quality, comprehensive services for new arrivals have key benefits for the ACT community. Key benefits include:

- Public health benefits through timely health screening.
- Strong capacity and commitment to catch up immunisations for children resulting in better immunisation rates.
- Strong quality of care from experienced health professionals for patients with complex needs based on interpreter use, long appointments, strong peer review, training and support resulting in better health outcomes.
- Timely access for new arrivals to dental services, spectacle subsidy scheme and bulk billed imaging, free immunisations and pathology services through Companion House partnership agreements
- Care coordination from Companion House for external appointment in the ACT health system -through patient reminders, ensuring interpreters are booked, and coordination with providers.
- Integrated service with other key service types at Companion House including psychological services, maximize health outcomes.

##### **(b) Ongoing care for people with complex needs**

Companion House also has a strong role in ongoing care for patients with chronic health conditions and complex needs. Without further capacity we cannot continue to provide this for new patients, which will have a significant impact on patients and other services.

Companion House makes the following key service contributions:

- Companion House provides strong coordination of care for people with complex health needs and chronic conditions
- The service provides long appointments (minimum 30 minutes) and interpreter use to all patients, allowing good quality care of complex needs in a cross cultural context.
- Companion House administers our own on site monitoring and treatment service for our patients with hepatitis B. (Two senior GPs are authorised to prescribe hepatitis B antivirals).

*Companion House Assisting Survivors of Torture and Trauma*  
*October 2019*

- The service provides ongoing management and support for a group of highly vulnerable patients with complex mental health conditions who are unwilling to access mainstream services.
- Companion House works with the Islamic Medical Alliance (formed by a Companion House medical student) to allow timely and bulk billed referrals to any Companion House patient in need to private specialists in the network.
- Companion House is closely involved in the care of torture survivors and people from a refugee background who have disabilities, providing integrated primary care and casework services and advocating with Centrelink and disability services.

**(c) Asylum Seekers**

Companion House provides primary health care services to asylum seekers, regardless of if they have Medicare rights or not. We are usually providing services to between 20-40 patients without Medicare at any given point in time. Without this contribution from Companion House, this group of patients would only have hospital services to draw upon.

Asylum seekers with Medicare rights can also be highly vulnerable, with complex social issues and sometimes without income. Companion House provides bulk billed services to this group and also uses our partnerships in private and public systems to ensure patients can then access specialist and allied health service.

**(d) Immediate effects on health systems are if we are no longer able to take new patients:**

- Increased pressure on the public hospital Liver Clinic.
- increased pressure on public mental health services.
- higher number of unplanned admissions and attendances at emergency departments with patients with complex health conditions.
- greater burden on public systems to coordinate care for new arrivals and people with complex conditions.
- greater burden on public health systems to provide health care to asylum seekers.

**3.2 Counselling services**

Companion House provides counselling services not available elsewhere to people from a refugee background and asylum seekers. Services are flexible, cross culturally sensitive and trauma focused.

Services include therapeutic interventions for children delivered in ACT schools, four days a week, a service which has been delivered in partnership with schools for the last 22 years.

Companion House currently has 80 adults (referred from health services, community services and community) and 30 children (referred mainly from ACT schools) on our waiting lists. Increased capacity will allow Companion House to provide timely service to this group.

Our waiting lists are managed and triaged but some people will wait months for service. This impacts on the ACT Health system, particularly ACT Mental Health services and Emergency Departments, as people seek assistance elsewhere.

#### **4. Costings to increase capacity**

##### **Scenario 1 –cost \$195,384 –significant impact**

75 extra clinical and support staffing hours per fortnight in primary health care service \$104,860

70 extra counsellor hours per fortnight \$90,523

##### **Scenario 2 –cost \$130,814 –moderate impact**

50 extra clinical and support staffing hours per fortnight in primary health care service \$69,907

45 hours extra counsellor hours a fortnight \$60,349

##### **Scenario 3 –cost \$69,907 –some impact**

50 extra clinical and support staffing hours per fortnight in primary health care service \$69,907

#### **5. Further detail of current service provision and funding**

##### **5.1 Primary health care services**

Companion House's primary health care service provides services to approximately 740 patients each 6 month period. Service includes ongoing services for complex medical care and torture survivors and a new arrivals clinic for newly arrived refugees. The service also provides ongoing care to asylum seekers, regardless of if they have Medicare or not.

The service model rests on bulk billing for all patients, long appointments (average appointment time is 40 minutes), interpreter use, and coordination of health care, strong partnerships with other providers and primary care provided in strong coordination with other support services at Companion House.

The medical service has a strong role in ongoing care for patients with chronic health conditions and complex needs. This is particularly relevant to people with Hepatitis B and complex mental health conditions.

Our service also plays a strong role in family planning services for women from a refugee background who are very reluctant to access services elsewhere.

The service includes 8 GPs providing 15 half day GP sessions each week (ie 3 FTEs). There are also a number of visiting specialists. Two psychiatrists, one adult psychiatrist and one child psychiatrist, a dermatologist and physiotherapist all support GPs with regular sessional visits.

Practice nurses provide daily management and triage of the service and respond to many drop in patients and distressed people.

The service has a number of important partnership agreements with ACT Dental Service, Spectacle Subsidy Scheme, ACT Mental Health and pathology and screening providers. This results in timely access, bulk billed or free access to these critical services for vulnerable people.

The service is embedded in Companion House services and works closely with counsellors, caseworkers, migration agents and bicultural workers to meet our patients' needs.

## 5.2 Counselling services

The Companion House counselling service works with between 300-500 clients a year and is staffed by psychologists and social workers with strong trauma and cross cultural skills. The service provides a flexible mix of therapy types in line with current evidence base for trauma therapy.

The service works with adults and children, both onsite and offsite as is appropriate.

## 6. Quality Assurance

### 6.1 Primary health care

Companion House was successfully accredited against *RACGP Standards for General Practice* in March 2018 by external assessors. The service also underwent external evaluation as part of an ANU academic study in 2016 which concluded that the service was **“strongly endorsed by patients and health professionals alike” (Integrating Care Project ANU 2016)**. Our quality assessment data using targets and indicators demonstrates that we are meeting or exceeding targets set by the clinic for good quality primary care. For example, we can demonstrate that we:

\* provide good quality antenatal care

- 81% of eligible pregnant patients have their first antenatal visit within the first 12 weeks of pregnancy
- No pregnant patient commenced her antenatal care in the last trimester

\* provide good quality chronic disease care

- 90% of our patients with chronic hepatitis B have received routine monitoring within the last twelve months
- 85% of our patients with diabetes have received routine monitoring in the last twelve months
- 84% of adult patients with diagnosed helicobacter infection have had eradication treatment

\* undertake and follow up our on-arrival screening

- 91% of our patients with diagnosed strongyloides have had treatment
- 78% of our patients with diagnosed schistosomiasis have had treatment

## 6.2 Counselling services

Companion House was successfully accredited against the *National Standards for Mental Health Services* in 2016 and again 2019 by external assessors. Assessors from Quality, Innovation and Performance (QIP) in 2016 wrote that ***“Companion House is highly regarded in the sector as the organisation of choice in relation to asylum seekers and refugees as well as its cross cultural capability.”***

In 2019 assessors from the same organisation commented that ***“Companion House is a relatively small service that provides an extraordinary service to one of the most marginalised groups in our society - refugees and asylum seekers who have histories of profound trauma caused by war, dislocation, detention, torture and flight. ....Companion House has well-developed service delivery systems in place and its commitment to quality improvement is clear. ....With a strong positive organisational culture, staff are committed to ensuring the best outcomes for the people and community they service and are known for their can-do approach. The organisation is also recognised as an inclusive partner by government and community services”.***

Companion House is also an active member of the National Forum of Australian Services for Survivors of Torture and Trauma (FASSTT), participating in the national minimum data set, outcomes data project and clinical seminars, discussions and conferences.

## 7. Conclusion

Companion House provides quality health services to people from a refugee background and asylum seekers which lead to good health outcomes and decreases impact on other health services in the ACT.

Companion House has not revived a funding increase for our health services for 15 years, despite growing pressures and unmet demand. A review of service contribution and quality concludes that a further moderate investment from ACT government will lead to greater sustainability, long term capacity and better health outcomes.