Welcome to our first multicultural program newsletter!

The Queensland Health Multicultural Program commenced in July 2006 with Ann Garred, Marina Chand and myself as the team members. With the establishment of the Queensland Health Interpreter Service, we grew to six positions with Libby Sterling, Ita Szymanska and Masoud Ali Akbari joining the team. The team has been working very hard in the past two years, with the help of many people in the community and districts advising us along the way. We have also had the expertise of a number of Queensland Health staff and very experienced workers in multicultural health working with us in the Program in temporary capacities. These included Louise Goodyear, Ana Maria Allimant Hollas, Sarah Grealy, Irene Opper, Gail Hsylop, Margaret Siffer, Lorella Piazzetta, Ruth Rowan, Sandy Hilder, Linda Henniker, Diana Nocente, Shelley Kulperger, Angela Wakefield, Jenny Burton and Steven Santillan.

In our first two years, the Program prioritised the establishment of two statewide services:
- the Queensland Health Interpreter Service
- Refugee Health Queensland (statewide refugee health service).

Read more about these services in this newsletter.

The team also developed a five year strategic plan for multicultural health which is endorsed by Queensland Health and is currently being implemented.

I am pleased to present our first newsletter and to provide you with information about some of the projects and activities of the Program. The last page of our newsletter puts a face to the people doing the hard work in the Program – what a great bunch. If you would like more information about the projects or activities of the Program, please contact us through the contact details below.

We look forward to achieving more great things to improve the health and wellbeing of culturally and linguistically diverse Queenslanders.

Ellen Hawes
Manager, Queensland Health Multicultural program

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Refugee Health Queensland

Refugee Health Queensland, a statewide Refugee initial assessment service has started operation throughout the State and is funded through the Queensland Health Multicultural Program.

The service provides refugees, especially humanitarian entrants and asylum seekers with:
- standard initial health assessments, including public health screening and catch-up vaccination
- coordination of short term health management with additional support for complex cases, and
- supported referral to existing services for continuing care, in particular, general practitioners.

Priority is given to those who are within the first six months of settlement and asylum seekers.

Service model

The model is a ‘hub and spoke’ model. The Mater Health Services conducts the service for Queensland Health. The hub has a small statewide team to do planning, coordination, education, support and quality monitoring, as well as conduct the clinic in Brisbane south. The QIRCH Clinic has integrated into the Brisbane south clinic as the extended care team for complex health cases. Ashley MacPherson is the Statewide Coordinator and Dr Megan Evans the half-time Medical Officer at the hub. The ‘spoke’ services provide direct clinical care services to the client group in their local area and are supported by the hub.

The service locations are:

1. **North Brisbane**: enhancement of the refugee health assessment clinic at Zillmere Community Centre
2. **Logan**: enhancement of the refugee health clinic at Logan Community Health Centre
3. **Toowoomba**: enhancement of the nursing capacity at Kobi House, Toowoomba Health Service
4. **Cairns**: a mobile refugee health nurse based at the General Practice Cairns Division is working with local general practitioners and other practice staff
5. **Townsville**: a refugee health nurse based at the James Cook University is working with local general practitioners and other practice staff

An Advisory Committee has been set up by the hub staff to advise Refugee Health Queensland on implementation issues.

Dengue Response in FNQ – multicultural approach

As part of the emergency response to the Dengue outbreak in FNQ the Dengue Team acknowledged the diverse multicultural communities residing in the outbreak areas and the importance of communicating the message in a variety of languages. Dengue information for householder was translated into the 15 most commonly requested languages through the Queensland Health Interpreter Service (Japanese Hmong, Korean, Thai, Chinese (Traditional & Simplified), Italian, Vietnamese, French, Kinyarwanda, Swahili, Kirundi, Arabic and Nepalese).

The second most commonly requested language in FNQ is Auslan (Australian Sign Language). To provide a visual message for Deaf and hard of hearing residents who communicate using sign language the Dengue TV promotional campaign was interpreted into Auslan by an accredited Auslan Interpreter and provided to Deaf Communities in Cairns, Mossman, Mackay and Townsville.

Dengue Response teams were supplied with interpreter service materials (language identification cards), emergency interpreter contact details and guidelines for working with telephone interpreters. On determining that a household does not speak or understand English – a mix of translated information and telephone interpreters will be used to communicate essential Dengue information to the household.

As part of the coordinated multicultural approach interpreter service providers were also informed of the dengue outbreak and the possible increase in requests for unplanned telephone Interpreters.
Greetings from the three Interpreter Services Quality Officers – Libby, Diana and Ita.

Our data shows that interpreter engagement across Queensland has increased on average by 94% in the first 12 months since the new service arrangements commenced in November 2007. Some districts have experienced a significant increase in the use of interpreters, for example, use in Cairns and Hinterland Health Service District has increased by 207% (the largest increase in Queensland) and in Townsville by 84%.

Projections indicate that those figures are likely to continue to increase into 2009. Increases can be partly attributed to awareness raising and training programs. Overall satisfaction with the training was rated at 6.4 out of a possible 7 indicating very high satisfaction with the training.

ISIS training sessions will continue to be provided throughout 2009. Please contact your District Interpreter Service Coordinator for details.

The third phase of Queensland Health’s Statewide interpreter service, the Interpreter Service Information System (ISIS) was rolled out on 24 November 2008 and as at mid April 2009, 20,681 requests for interpreters have been entered into ISIS. Subsequently, 20,251 bookings have been created across the State.

As West Moreton was one of the first districts to commence using ISIS, first requests had been entered by this district for interpreting jobs at Ipswich Hospital.

The 100th request belongs to the Urology Clinic (Outpatients) at the Princess Alexandra Hospital and request number 500 was entered into ISIS by RBWH staff in the Women’s and Newborn Services (Maternity Outpatients) for a lucky Vietnamese patient, whilst the 5,000th request was for a Vietnamese interpreter in the General Outpatient’s Department of the Princess Alexandra Hospital.

The 10,000th request was entered by Community Health at Coorparoo (Southside HSD) for a Kirundi interpreter whereas the 10,000th booking was made for a Tigrinya interpreter for the Ante-Natal Clinic at the Mater Mothers Public Hospital.

The 20,000th request was entered by the Ante Natal clinic at Ipswich Hospital for a Vietnamese interpreter – congratulations! And the 20000th booking was created by Southside District for a Burmese interpreter. To date, over 3500 staff from Northern, Central and Southern Districts have registered to use ISIS and a large percentage of those staff have attended one of the many training sessions provided by the District Interpreter Service Coordinators and the Interpreter Quality Officers.

Almost 30 staff have been trained as Coordinators or back-up Coordinators, and are now providing a fantastic service for their Districts. They have been allocating all those requests to bookings with the Statewide provider ONCALL, and various other interpreter providers. Coordinators in each District also continue to provide ISIS training sessions on a regular basis. It is therefore, evident that the huge success of the Statewide Interpreter Service has been largely due, not only to great promotion, but also the excellent work provided by all of our District Interpreter Service Coordinators.

2009 Highlight For North Queensland

A video conference interpreting pilot is commencing in February 2009 (Cairns, Townsville, Mackay and Gold Coast). The pilot is a joint project between Queensland Health Multicultural Program and Statewide Telehealth Services. The aim of the pilot is to develop and trial procedures for providing sign language (Auslan) and spoken language interpreting via use of video conference equipment as a viable alternative when on-site interpreters are unavailable. On successful completion of the pilot, the service will be available statewide through the Queensland Health Interpreter Service using QHealth’s extensive video conference network. For more information contact Libby Sterling (PISQO – Northern).
Translating and Interpreting Service (TIS)
Free interpreting services to pharmacies across Australia

On 8 December 2008, the Parliamentary Secretary for Multicultural Affairs and Settlement Services, Laurie Ferguson announced that free telephone interpreting services would be extended to pharmacies across Australia on an ongoing basis.

The Department of Immigration and Citizenship, through the Translating and Interpreting Service (TIS National) and the assistance of the Pharmacy Guild of Australia, recently conducted a pilot extension of free telephone interpreting services.

For six months, 331 participating pharmacies were provided with unlimited access to telephone interpreting services, 24 hours a day.

The pilot showed that pharmacies using the service found it to be a valuable tool when communicating with non-English speakers and would use it again.

The need for this service is highlighted by the health care needs of recent refugee arrivals and elderly former migrants

'The tendency to revert to a first language as experienced by some older Australians, who have acquired English as a second language, is one of the greatest issues facing our ageing population. This was demonstrated by the heavy usage of the TIS services by post-war aged European Communities throughout the duration of the pilot,' Mr Ferguson said.

'Interpreting services are crucial for the proper distribution and usage of prescription medicines by non-English speaking Australians.


If you have any questions about this form, please call the TIS National Client Liaison and Promotions team on 1300 655 820.

Further information about TIS National can be found at www.immi.gov.au/tis or by calling the above number.

'Pharmacies who participated in the pilot used interpreting services more frequently and reported improved outcomes in terms of client understanding of medications.'

The service has been welcomed by other stakeholders, such as refugee health nurses and settlement services providers, for its value in addressing some of the challenges in providing effective health care to non-English speakers.

Registered pharmacies around Australia will be able to access the service 24 hours a day, seven days a week.

Pacific Islander Health

Pacific Islander communities were prioritised by the Queensland Government in 2008/09 as one population group that government departments should specifically consider in their work. A project has begun to determine the priority health needs of four Pacific Islander and Maori communities and to develop strategies to address these.

Hanamenn Hunt and Marina Chand are working together with bilingual community workers from the in-scope communities:

Mary Wellington – PNG community (Cairns)
Thomas Polume – PNG community (South East Queensland)
Felise Tautalasoo (Lemalu) – Samoan community
Gary Hook – Maori community
Laisa Barton – Fijian community
Indra Birbal – Fiji-Indian community

The project is expected to be completed by December 2009.
Workplace Diversity

In December 2008, three new project officers – Shelley Kulperger, Lorella Piazzetta and Ruth Rowan – joined the Queensland Health (QH) Multicultural Program to develop the new Productive Diversity Strategy.

The Productive Diversity (CALD) Strategy includes the following four projects:

1. Diverse Teams Training Project:- Working in a Diverse Workplace and Managing a Diverse Workplace. These two training packages will be developed, piloted and evaluated by the end of June.

2. CALD Retention Research project:- to identify issues around retention of overseas qualified clinical staff, both medical and nursing.

3. Sustainable Training Strategy:- develop a strategy for the sustainable implementation, monitoring and evaluation of QH communication training including cross cultural communication skills.

4. The Cultural Capability Strategy - CALD:- aims to define what 'cultural capability' means for the organisation and what skills, knowledge and behaviour should be evident in QH for the delivery of safe services.

Progress to date:
- The Productive Diversity Steering Committee meets monthly to provide advice and direction;
- A literature review on retention issues with cultural and linguistically diverse staff is underway;
- A draft Cultural Capability Strategy has been developed for consultation;
- Five pilot sites have been determined to conduct pilot training on working in and managing cultural diverse work teams; and
- The Diverse teams training module for managers was delivered in draft form to selected stakeholders and feedback is being incorporated into the training.

Queensland Health Multicultural Program Website

The Queensland Health Multicultural Program (QHMP) website has been active since February 2007, and has become a significant resource for the community.

The website is a resource for everyone in the community, as well as Queensland Health staff and health professionals, to use freely and easily. It provides information from health/illness topics (e.g. asthma, diabetes, and nutrition), health services, interpreter services and activities and events.

In 2008, the website has gained a lot of interest and has steadily increased its usage (Graph 1) and still is increasing every month. With the increase, the website was ranked 5 out of 187 websites available on the Queensland Health internet website. (Source data collected from 2008 statistics.)

The QHMP website is currently undergoing an evaluation process, in which all external users and staff can complete an online survey and comment on the website on its usability and appropriateness of resources. The survey is also translated into the top 5 languages for 2008, these languages are:

- Chinese
- Hindi
- Vietnamese
- Arabic
- Kurdish – Kurmanji & Sorani

The evaluation process is to help improve the website for the community, QH staff, and health professionals. The online survey can be found, at the following address: http://www.health.qld.gov.au/multicultural/default.asp.

As well as the evaluation, the website is undergoing a major redevelopment, to make the website more appealing, ease of use, and to ensure that there are no broken links. The evaluation will guide the ongoing development of the website.
We’ve Moved

The Queensland Health Multicultural Program (QHMP) has moved into their new premises.

The QHMP is now located the new location of 15 Butterfield Street, Herston Qld 4006, across the road from the main entrance of the Royal Brisbane Hospital.

The QHMP team is located on the 3rd floor along with the other units of the Division of the Chief Health Officer.

Please note that the QHMP’s new postal address is:

PO Box 2368, Fortitude Valley BC 4006.

Data Project Update

The Multicultural Data Project is comprised of four key areas of work:

- Establishing a data working party to guide, support and advocate for adequate multicultural data collection, analysis and reporting.
- Collating health data to produce a series of factsheets presenting the health status and chronic disease risk factors experienced by Indian, Italian and Vietnamese communities.
- Liaising with Departmental staff to ensure outpatient and other statewide datasets (eg. oral, mental and sexual health services) are inclusive of minimum standards relating to culturally and linguistically diverse (CALD) clients.
- Developing a plan for the inclusion of CALD clients in Queensland Health’s patient satisfaction and experience surveys.

The data working party was established in December 2008 and held the first of its monthly meetings in February 2009.

Membership includes representatives from the Ethnic Communities Council of Queensland (ECCO), Population Health Queensland and the Health Statistics Centre. There have been three meetings to date and real commitment and progress has already been achieved. Analysis (country of birth specific) is currently being undertaken of the Queensland Hospital Admitted Patient Data Collection (including avoidable admissions) and the 2004-2005 National Health Survey. This work is being undertaken by members of the working party and will inform the health status factsheets.

Work is progressing a little more slowly in other areas. Preliminary meetings have taken place with Cancer Screening Services Branch, and a meeting was held recently between the Multicultural Program staff and the Centre for Healthcare Improvement, to discuss the inclusion of CALD clients in patient satisfaction and experience surveys. There remains a good deal of work to be done in these areas, but the first steps have been taken to move forward.

The Queensland Health Multicultural Program

From Left to right

Missing in action

Libby Sterling Angela Wakefield

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