



NHS Long Term Plan Focus Group

Regional Refugee Forum (NE) April 2019

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Background

NHS England and NHS Improvement funded the Healthwatch network to carry out engagement with communities across the country to establish how the Long-Term Plan (LTP) should be implemented locally. Local Healthwatch teams worked together to find out what local people think, and this information was shared with the NHS to help develop the plan for our area. Information was gathered by utilising NHS Long Term Plan surveys and focus groups.

Healthwatch South Tees (the operating name for Healthwatch Middlesbrough and Healthwatch Redcar and Cleveland) held focus groups in line with their agreed demographic focus areas for 2019-2020 which included:

- BAME (Black, Asian and Minority Ethnic)
- Older people
- Young People

Within Middlesbrough we concentrated on the BAME community who participated in two separate focus groups. For one of these we targeted the asylum-seeking community. In 2015, the Middlesbrough population had the highest proportion of asylum seekers in England, at 1 per 186 people. It is likely that asylum seekers who have remained in Middlesbrough may have limited knowledge of health and social care services, and potentially limited English language skills, which could create barriers to support.

Working with this community will provide opportunities to identify specific issues and developing relationships will help provide information on where asylum seekers are falling through gaps in the provision of health and social care.

Asylum Seeker Focus Group

This focus group was held at Newport Hub with members of the Regional Refugee Forum's Health Working Group. All members of the group were either going or had been through the asylum seeker application process.

The focus group discussions were mainly centred around mental health, although some other general health and social care issues were raised.

It was evident from this group that the issues experienced were directly linked to the asylum seeker process and because of this the issues discussed are specific to this group of people.

Methodology

The discussion format for the focus group followed the requirements of the NHS compilation of information within the three categories given below.

- Assessment, diagnosis and treatment
- Provision of ongoing care and support
- Prevention and/or early intervention

Under each of the above areas we explored

- What works well
- What could be improved
- Solutions (or ideas for improvement)

Main findings

Access, assessment, diagnosis and treatment

- Health and care services for asylum seekers and refugees can only be delivered effectively if asylum seekers feel that they are able to disclose their conditions with the confidence that this will not have a detrimental effect on their asylum application.
- A greater understanding from healthcare professionals of the cultural issues associated with certain conditions which can affect peoples' decisions to seek treatment, together with an increased level of compassion and understanding.
- Greater provision of services outside of statutory NHS services. Asylum seekers who have been supported by voluntary or charitable organisations, who can overcome language barriers and signpost, are more likely to be engaged in services.
- Digital applications could improve awareness and access to services. At present, there are considerable differences in access to information. Development of an app to support asylum seekers could improve access to and understanding of services.

Provision of ongoing care and support treatment

- On-going support for long-term conditions, especially mental health. Recognition of the increased likelihood of mental health problems amongst asylum seekers by health professionals.
- Appropriate access to mental health services is poor, especially for those with severe mental health problems.

Prevention and/or early intervention

- Asylum seekers should receive a mental health assessment on registering with GP practices.
- A greater understanding amongst health professionals of what asylum seekers are entitled to. Lack of understanding on both sides can lead to them not seeking treatment or treatment being refused.
- A greater use of technology to increase awareness for both asylum seekers and health and care professionals on rights and entitlements.

Summary

Asylum seekers and refugees have very specific issues due to their status. As a result of the complex and unique challenges they face they are at a higher risk of developing mental health problems. The asylum seeker application process, which was described as 'hostile' causes many to suffer mentally, especially as the process can be very long if appeals are made. Financial hardship is a huge factor also in being able to attend or make appointments.

Asylum seekers and refugees are reluctant to access services as they have serious concerns that medical information could be used to inform immigration enforcement legislation. Therefore, those with serious conditions, infectious diseases and poor mental health are unlikely to disclose this information and seek treatment.

Asylum seekers do not know what they are entitled to and are not given enough information on the function of services and how to access them. There is also a lack of awareness amongst health professionals of what people seeking asylum are entitled to and can lead to people being turned away from services or not receiving medication.

Next Steps

The NHS Long Term Plan consultation has provided us with valuable information that can inform our local priorities. Our next steps in line with the key findings include:

- Seek clarification of the confidentiality of NHS information on the asylum-seeking process and share with relevant parties.
- Raise awareness of eligibility for care and entitlements to asylum seekers, key support professionals and healthcare providers.
- Share consultation findings and recommendations with relevant parties in relation to how digital solutions can address language barriers and ensure everyone has access to the same health and social care information.
- Continue to engage with a variety of stakeholders and communities to ensure their voices are heard and provide a coordinated approach to improving access to information.

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