



NETWORKING HEALTH VICTORIA
Networked health is better health

LGA Innovations CVU November 2015

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Program consultant: Immunisation
Program funded by DHHS

What is innovation?

- Innovation is crucial for continued success
- Innovation can be a catalyst for growth
- Innovation does not mean inventing
- Innovation can mean adapting to changes in your environment.

State of play in Victoria

- Statistics: childhood coverage around 91%
- Conscientious Objectors: < 2%
- LGAs immunise approx 45% of children in Victoria
- No job no Play }
➤ No job no Pay } **Motivating some into action.
Vaccine hesitancy issues?**
- Leaves the truly vulnerable
- All LGAs working hard
- This is a snapshot of some innovative work being done with vulnerable groups.
- Learning from these experiences
- In an era of rate capping innovation is needed.

Vulnerable Groups

- Aboriginal and Torres Strait Islander children
- Refugees and Asylum Seekers,
- Homeless people
- Children in Out of Home Care
- Other less defined community groups

- There is a higher proportion of Aboriginal and Torres Strait Islander children in this group
- DHHS (Rosie Morey) and others meet to discuss issues and plan for immunisation surrounding these children
- Many issues
- Also more likely to be absent from secondary school which effects their adolescent vaccine uptake

NEWS | 3

out Fears for a new 'lost generation'

■ Daniel Flitton

A sharp increase in the rate of Indigenous children in Victoria being taken from their families has prompted fears of a "lost generation" with broken cultural ties.



HOME AND AWAY

Proportion of Indigenous children in statutory care compared with non-Indigenous children

Victoria	Northern Territory	Western Australia
12x	8x	15x

Number of Indigenous children in statutory care in Victoria **1308**

Aboriginal and Torres Strait Islanders as % of Aust. child population **4.8%**

% Aboriginal and Torres Strait Islanders child population in statutory care **34%**

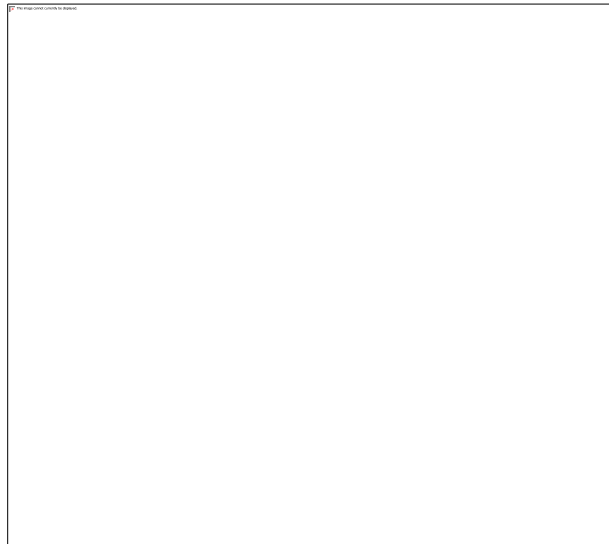
- This group is not as easily defined
- Often
 - lower socio economic circumstances
 - Fractured family life
 - Young parents
 - Single parent families
- Strategies surrounding other vulnerable groups could be applied to assist these children in our community.

Aboriginal and Torres Strait Islander: City of Whittlesea

- The Aboriginal community is one of the fastest growing communities within the City of Whittlesea.
- The 4th highest Aboriginal population in Metropolitan Melbourne.
- Victoria's Aboriginal immunisation coverage sits between 79-89%.
- Very poor attendance rates by Aboriginal people at Council public sessions.
- Bubup Wilam has become an important part of our community; Council signed a 50 year lease in 2014 with the Centre at the annual Reconciliation dinner.
- New and incoming families to the Centre all the time.
- Funding via a Sanofi grant (although planning was in place much earlier)

Pulling it together

- ▶ A small team was set-up; Tanya Perrin, Louise Johnson and Tracie Yuill, to meet with the staff at Bubup Wilam to discuss the project.



The Bubup Wilam Children

61 children attending the Centre

➤ In the beginning ...

- 16 overdue
- 8 near due 2015
- 17 due 2016 or 2017
- 7 not on ACIR (status unknown)
- 1 on ACIR but no history
- 12 fully completed childhood schedule

• 3 months in ...

- 0 overdue
- 5 near due 2015
- 21 due 2016 or 2017
- 7 not on ACIR (status unknown)
- 1 Conscientious Obj.
- 27 fully completed childhood schedule

Parents and Teachers

- 15 parents and teachers have been immunised with influenza and/or boostrix.
- Continued opportunity to educate and update parents and teachers via the immunisation sessions and continued communication

What's next?



- To continue to monitor the immunisation status of Bubup Wilam children and hold immunisation sessions when required.
- To provide resources and materials for teachers and parents to educate them on vaccines available to the Aboriginal community.
- To engage an Aboriginal author and illustrator to write a children's story book, with input from the children, to educate them on vaccines and harmful diseases.

Refugee children and Asylum Seekers in City of Greater Dandenong

- A review of Refugee immunisation services was conducted with Foundation House as a result of some of the issues in this LGA (as well as across the state)
- Highest intake of refugees and asylum seekers in Victoria
- Enormous cultural diversity, over 130 different languages are spoken.
- Often no documentation
- Varied levels of health literacy.
- Navigating the Australian health system

NPELS: Noble Park English Language School

- City of GD has been committed to immunising all at NPELS for many decades
- Catch up all children attending the school not only adolescent program
- Refugee Nurse Immuniser employed to work with the school
 - Catch up schedules formulated
 - Documentation collated
 - Accessing GPs
- Details on the system so able to receive reminders

Committed to two initiatives

- Implementation of SMS system for reminders and distribution of information
- Develop culturally appropriate video 'Immunisation in Australia' an overview for people from CALD backgrounds. (almost complete)
- Funding from DHHS Regional Immunisation Initiatives



- Reminders for all parents of infants/children
- Vaccination reminder for parents of adolescents
- Instant and cheaper than mail outs
- Higher stability of contact information, many families no longer have land lines
- Links to translated information can be included
- Apps available to assist with translation from English
 - Not validated
- Messages need to be brief and uncomplicated
 - Useful for low literacy
 - CALD

- ACIR does not have capacity for mobile numbers.
- Only accessing families who have had contact with CofGD
- Difficult to evaluate effectiveness with specific groups.
 - Anecdotally many more secondary students attending public sessions for catch doses. Parents often show admin staff the text they have received.
- Not able to identify refugee status from ACIR
 - A positive as texts sent to all.

Homeless people in Barwon

- Geelong Region has an estimated homeless population of 600+ people.
- 2014: Pilot program
- Generosity of volunteer staff and vaccine funded by Barwon Health
- 65 homeless people vaccinated, some of whom met criteria for funded flu and many that didn't.
- 2015 goal to vaccinate 400 homeless people. Successful grant application from Sanofi
- Influenza and expand to include Pertussis containing vaccine. Discussion around pneumococcal vaccine as well.

- Christ Church Community Meals Program
- Safe, non threatening environment
- Many different ages and included families, pregnant women, the elderly with chronic complex conditions.
- Identified the need to expand service to include Salvo connect and other networks.
- Possible saving of costs as preventing influenza spreading among this group could decrease hospitalisations and the need for other medical services.
- There are many barriers to this group accessing vaccines one being no access to health records to ascertain vaccine status of any vaccines.

- Barwon Health Immunisation Team
- Mental health services, drugs and alcohol services, police, prison services, HMAC (homeless males advisory service)
- Salvo connect and Christ Church Community Meal Service
- Barwon child, youth and family services also being consulted.

BUSINESS REVIEW

NEWS OPINION **BUSINESS REVIEW** NATIONAL AFFAIRS SPORT LIFE TECHNOLOGY

S&P ASX 200
-0.95% 5226.40

AUD/USD
+0.23% 0.72

S&P 500
-0.12% 2086.59

NIKKEI 225
+0.22% 19924.30

FTS
-0.41%

Israeli scientist Avi Hasson says collaboration key to innovation

THE AUSTRALIAN | NOVEMBER 24, 2015 12:00AM



SAVE



Glenda Koppel

- Collaboration is vital, communication essential
- As seen with these examples working with many not just those who provide immunisation services
- Many regions have well established immunisation reference groups.
 - Could others be included?
 - MCHNs, settlement services, AMSs,
- Utilising technology to inform, remind and recall.
 - Presently, SMS, Apps
 - Future, E-health records (right!) ?

Acknowledgments

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