

THE NORTH WEST ARRIVALS FROM UKRAINE (12 MONTHS AFTER ARRIVAL) HEALTH NEEDS ASSESSMENT



Photo credit: City of Sanctuary

SUMMARY OF RECOMENDATIONS

Completed by Office of Health Improvement & Disparities (North West)

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RECOMENDATIONS REPORT

This is the recommendations report of the Health Needs Assessment. In addition to this, the following materials are available;

- Summary report
- Full technical report including tables, diagrams, bibliography and appendices
- Full PowerPoint slide deck

Acknowledgements

Thank you to all who have contributed to the needs assessment by completing surveys, taking part in focus groups, providing professional advice, insight, and support.

Particular thanks to;

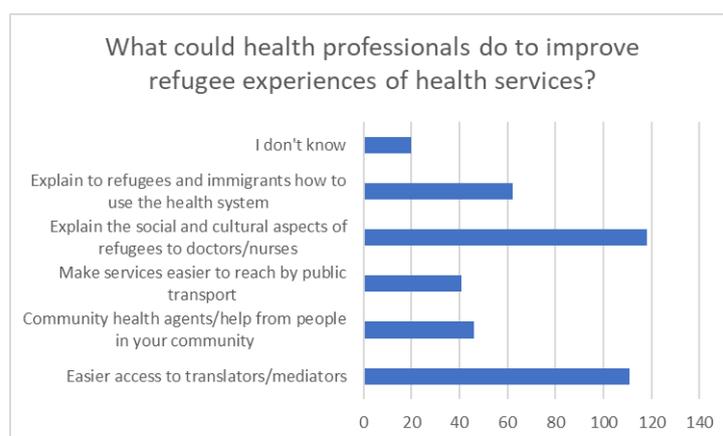
- Association of Ukrainians in Great Britain
- Chorley & District Support for Ukraine
- DHSC Ukraine Team
- Kalyna Ukrainian Community
- North West Strategic Migration Partnership
- Norwegian Institute of Public Health
- OHID Health Inclusion Team
- Lancashire Refugee Integration Team
- Dr Aaron Poppleton
- UKHSA Library Services
- WeAct (UNICEF Europe & European Region Scouts)

And especially to all the Ukrainians who have supported this work at a time of distress and concern for them personally.

Recommendations

The findings of this Health Needs Assessment are drawn from the insights of a sample of key informants and refugees. It should be noted that those refugees from Ukraine who have arrived here are substantially better educated and likely more affluent than the average Ukrainian and as such are accustomed to accessing immediate and private health care in their home country.

Below are a series of tables making recommendations in relation to access to health care, health care, child health, wider determinants and information for refugees. Ukrainian refugees who completed the survey to inform this assessment were asked what could be done to help them in relation to their health. The results can be seen in the chart below.

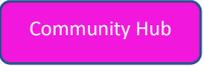


This HNA does not include any specific recommendation in relation to dental health or managing chronic diseases, despite there being a level of stated concern regarding some conditions. As these are predominantly related to access to service provision, it is recommended that commissioners and providers prioritise the access to treatment recommendations. A review of the dental health and chronic conditions should then be carried out to re-assess the situation and prioritise new actions if necessary, at this stage.

Listed below are a number of recommendations which may be adopted to address the needs raised in this HNA. It is recognised that at the time of writing public sector organisations are experiencing substantial financial pressures resulting from the pandemic, cost-of-living crisis, inflationary pressures, the impact or recent increased numbers of migrant populations and other factors, which in turn may in turn impact on the ability to deliver due to reduced budget, resource and capacity. Additionally, it is recognised that migration is a sensitive and often politically charged topic. Prioritisation carried out taking into consideration; scale of impact, ease and speed of delivery, affordability and resources availability. The higher priority recommendations are therefore **in blue text** in order to guide readers and inform decision makers in their prioritisation at this time.

Although some of the recommendations are already in place to address other migrant groups, there is a need to adapt the methodology in order to accommodate Ukrainian refugees. Equally, some recommendations are already taking place in some areas, but is not universally available across the region. Sharing lessons from areas with most experience in supporting migrant populations across the region has the potential to help all refugees in the North West.

Access to Health Services

Issue	Recommendation	Responsible organisation
Ukrainian refugees reporting that staff in clinical settings are not aware of their entitlements.	Refresh NHS frontline staff understanding of OHID’s migrant health Guide which provides practical advice for healthcare workers including specific guidance on the health needs of migrants from Ukraine, how the NHS works and their entitlements to healthcare, how to comprehensively assess new migrant patients and ensure continuity and alignment with the UK immunisation schedule for routine and COVID-19 immunisations.	   (Workforce Training and Education)
Low, but at times excessive, and inappropriate use of health services by Ukrainian refugees.	Fill knowledge gaps by easing access to linguistically and culturally translated NHS guidance, including via community social media such as Telegram and Viber chats.	 
Ukrainian refugees report navigating access to public services as complicated and difficult to understand	Identify and train community ‘champions’ to support Ukrainians’ engagement with health, social, and educational services.	  
Continuing cultural and linguistic barriers accessing and during consultations	Increase use of medical translation services and introduce Ukrainian Care buddies to accompany refugees to appointments	 
	Ensure free ESOL and other English language courses are available to refugees. Additional ESOL funding is available, and all Ukraine refugees are entitled to use this provision immediately.	 
Ukrainian refugee understanding of medical terminology in English is limited	Support in registering with and requesting interpreter services for NHS Talking Therapies/social prescribing.	
Differing cultural approach to mental health in Ukraine. Language differences creating an additional barrier Cultural differences	Online mental health options, such as private video consultations with Ukrainian- and Russian-speaking professionals, Ukrainian self-directed counselling via chatbot, and social media support groups	
	Research benefits, methodology and impact of digital solutions for treatment of refugees. Funding may be available from the NIHR Digital health inclusion and inequalities.	 
	Signposting to local cultural, community, and church groups for practical and wellbeing	

	support. These groups are often accepted, empowering, and manage subthreshold mental health symptoms.	 
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Health Service

<u>Issue</u>	<u>Recommendation</u>	<u>Responsible organisation</u>
Refugees from Ukraine report low levels of cultural awareness regarding the needs and experiences of refugees, and differing expectations of refugees amongst frontline NHS staff	Encourage and protect time to complete existing Cultural Competency Training available on e-Learning for Health. Supported by production of specific cultural information flashcards regarding Ukrainians.	 
	Research effective methods of cultural competency training in a clinical setting. A strong candidate for a funding source for this work would be the NIHR to address the research question: "What interventions are effective in increasing the health and wellbeing of asylum seekers and refugees in the UK?"	 
No current capacity to flag patients as refugees and potentially vulnerable on Health Information Systems	Commission and use health Information Systems which record the refugee status of patients	  
Communication skills and consultation models used within UK general practice were largely designed for a culturally homogeneous British society. Ukrainians have established health beliefs, experiences, and expectations that may clash with standard communication approaches.	Through clinical supervision opportunities ensure that Clinicians understand they should not perceive differences as criticism or confrontation, but as an opportunity to pragmatically discuss UK health system norms and find a mutually agreeable management strategy. Flexibility or possibly even reimagination of the consultation may be required to build this trustful and open dialogue.	
Low COVID vaccination rates amongst Ukrainian population	COVID vaccination needs to be offered to all with a strong communications package.	 

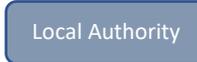
High rates treatment resistant TB in Ukraine	All refugees arriving in the UK should be screened for TB (given the high prevalence of latent TB and MDR-TB). This will ensure early treatment. Current airport screening is probably not sufficient to achieve this.	UKHSA Port Health
High rates of HIV in Ukraine	GPs should offer HIV testing and consider Hepatitis C screening in high-risk groups to ensure early treatment.	UKHSA PCN
High rates of Sexually infectious diseases in Ukraine	Sexual Health screening at initial GP appointment	PCN
Low breast cancer screening rates in Ukraine	Offer breast cancer screening to women on registration at GP	ICB NHS England
Poor pregnancy outcomes post trauma	Rapid referral to NHS maternity services	PCN
Mild to severe mental health needs experienced by refugees as a consequence of trauma induced by the war.	Adopt a trauma-informed care approach. GP practices can provide a safe environment for disclosure, as well as compassionate guidance on support and treatment options.	PCN Prev HEE
Trauma experienced by healthcare workers supporting Ukrainians own trauma.	Trauma-informed care should also consider the clinician's own needs and how they can be met to ensure ongoing emotional capacity. Resources, including the CALMER Framework, have been developed to support integration of 'trauma-informed practice'.	PCN

Child Health

<u>Issue</u>	<u>Recommendation</u>	<u>Responsible organisation</u>
Low childhood vaccination rates in Ukraine	Screen for and offer protection against polio, diphtheria (DPT ideally) and measles and should be prioritised since they are easily transmitted and associated with serious outcomes. Rotavirus vaccination of children and tetanus	PCN UKHSA

	and COVID vaccination for pregnant women are important.	
Low rates of flu and COVID vaccines in children	COVID and flu vaccination needs to be offered to all with a strong communications package.	 
Ukrainians arriving in areas which are not accustomed to accommodating migrants. Consequently, low levels of experience amongst GPs etc.	Primary Care practitioners to complete The Royal College of Paediatrics & Child Health training course on How to Manage Refugee Child Health. This course covers the clinical risk assessment and multidisciplinary approach to the holistic management of accompanied and unaccompanied refugee and asylum-seeking children.	

Wider Determinants

<u>Issue</u>	<u>Recommendation</u>	<u>Responsible organisation</u>
Difficulties in securing adequate employment to be self-sustaining	Compile and share a database of vacancies and employers recruiting potentially short-term staff for highly educated staff with moderate levels of English.	
Insufficient housing and accommodation available following the end of an initial sponsorship, either with a new host or in their own rented property	Develop and promote local positive Host recruitment campaigns	 
	Research the benefits gained by hosts of refugees. These can be used to promote hosting opportunities to others. A strong candidate for a funding source for this work would be the NIHR to address the research question: “What interventions are effective in increasing the health and wellbeing of asylum seekers and refugees in the UK?”	  
	Develop and promote schemes to support refugees to find affordable housing.	 

	Work with private landlords to identify appropriate accommodation close to employers, especially in more affluent areas. Longer term, access and utilise Housing and Homelessness funding available from DLUHC (this includes a total fund of £500 million for English councils to buy 4,000 homes plus £150 million to assist LAs prevent homelessness)	Local Authority
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Information for Refugees

<u>Issue</u>	<u>Recommendation</u>	<u>Responsible organisation</u>
There is a need to support the rapid cultural adaptation of children to understand how things operate in the UK, and to help other children support child refugees feel as if they are welcome	<p>Widen distribution of the 'Hello (Privit)' book published by the Sanctuary Foundation</p> <p>Raise awareness of the Save the Children 4-minute film about child refugees. Amongst teachers and youth workers.</p> <p>Fully utilise HF-U educational funding for school age children (Early Years £3,000, Primary £6,580, Secondary £8,755)</p>	<p>VCSE</p> <p>Youth Groups</p> <p>School</p>
All adult refugees must feel welcome and able to navigate the public service systems as soon as possible on arrival.	Provide information in an easy-to-read form when visa is issued and again on arrival, both in English and Ukrainian.	<p>Home Office</p> <p>DLUHC</p> <p>Local Authority</p>
	Identify and train community 'champions' to support Ukrainians' engagement with health, social, and educational services.	<p>Local Authority</p> <p>ICB</p> <p>PCN</p>
	Replicate 'Hello' book for adults	<p>RSMP</p> <p>VCSE</p> <p>DLUHC</p>

	<p>Research effectiveness of community champions. A strong candidate for a funding source for this work would be the NIHR to address the research question: “What interventions are effective in increasing the health and wellbeing of asylum seekers and refugees in the UK?”</p>	<p>OHID</p> <p>Universities</p>
<p>The majority of arrivals from Ukraine have reported that they are separated from their family. This separation in a foreign country can contribute to loneliness</p>	<p>Develop Community Support groups and provide meeting places such as libraries and church halls.</p>	<p>Local Authority</p> <p>VCSE</p>
<p>Poor understanding of universal requirements of refugees by first time hosts and no information provided regarding individual circumstances and visa/arrival complications.</p>	<p>Provide pre-application support and as much information as possible to hosts/families. The lessons learned and non-emergency nature enables this to be more achievable after a year of the scheme</p>	<p>Local Authority</p> <p>Community Hub</p>
	<p>Ensure early identification of issues and better joined up work with UKVI on arrival dates;</p>	<p>RSMP</p>
<p>Cumbria Council is being disbanded and two new councils formed, this may require further understanding locally.</p>	<p>Assess the full report and establish if there is a need to review any elements as a consequence of recent changes. Considering the relatively low numbers, it is unlikely it will be meaningful to carry out any analysis at a smaller geographic area.</p>	<p>Cumberland Council Westmorland & Furness Council</p> <p>OHID</p>

List of Abbreviations and Acronyms

Abbreviation/Acronym		Abbreviation/Acronym	Full text
AUGB	Association of Ukrainians in Great Britain	DWP	Department of Work & Pensions
ICB/P/S	Integrated Care Board/Partnership/System	HEE	Health Education England
LGA	Local Government Association	OHID	Office for Health Improvement and Disparities
NW RSMP	North West Regional Strategic Migration Partnership	PCN	Primary Care Network
UKHSA	UK Health Security Agency	VCSE	Voluntary, Community and Social Enterprise