

Vancouver Refugee Medicine Website

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Abstract

The creation of a website compiling comprehensive refugee medicine resources would enhance health care delivery to the local refugee population by better equipping clinicians involved in their care.

Introduction

Approximately 1800 new refugees are seen at Bridge Refugee Clinic in Vancouver each year. These patients are seen for six to eighteen months and then transferred to community physicians.

Medical care of these patients is challenging due to issues of language, culture, unique medical diagnoses and non-standard medical coverage. Transfer of patients to community physicians is difficult for the same reasons, as well as lack of awareness of the refugee clinic.

This project aims to create a website to enhance delivery of health care to refugees across the Lower Mainland by providing one-stop access to comprehensive refugee medicine resources to Bridge Clinic physicians, nurses, locums, students and community physicians.

The website would include:

- medical guidelines
- translated patient handouts
- community resources
- information on medical and pharmacologic coverage
- cultural background information

The goal is to improve the quality of patient care, facilitate transition of refugees from Bridge Clinic to community physicians by making pertinent information readily available to receiving physicians, and to raise the profile of Bridge Clinic and refugee medicine.

The website would address these current problems:

- resources are fragmented and difficult to access
- other refugee health websites are not Canadian, and serve a different demographic
- Bridge Refugee Clinic has no online presence
- potential locums and community physicians are intimidated by refugee medicine

Detail of website sections

1. Medical Guidelines

for common diagnoses in refugee medicine
(combination of material written by Bridge Refugee Clinic clinicians and links to other resources)

- PTSD
- HIV/AIDS
- TB
- Hepatitis B/C
- screening
- thalassemia
- G6PD deficiency
- sickle cell anemia
- parasite treatment
- Vitamin D deficiency

2. Translated patient handouts

- database searchable by language (including 'illiterate') and topic

3. Community resources

- database searchable by language, city and service
 - counseling
 - physiotherapists accepting IFH
 - dentists accepting IFH or offering reduced rates
 - recreation centres with reduced rates for refugees
 - school-based resources
 - nutritionists

4. Overview of refugees and medical coverage

- define convention refugees and refugee claimants
- detail coverage through Interim Federal Health and Medical Services Plan
- link to medications covered by IFH
- detail process of applying to IFH for Prior Approval for medications not covered
- detail and link to application for Pharmacare for patients with MSP
- detail and link to Plan G for patients who cannot afford psychiatric medications

5. Cultural background information

- cultural issues specific to different people groups are detailed
- link to WHO maps, CIC documents

Methods

1. Hire website design company
2. Set up website so that information can be entered/edited by a third party
3. Residents/medical students to gather/write information.
4. Complete the sections of the website as detailed above.
5. Pilot test: trial of website by Bridge Clinic staff.
6. Edit website.
7. Re-pilot and edit iteratively until no further edits suggested by Bridge Clinic staff.
8. Pilot test with 20-30 family physicians in the community.
9. Edit as necessary.
10. Present to medical community/public.

Timeline: Six months from hiring of website design company to pilot testing. Three months from pilot testing to presentation to medical community at large.

Evaluation

The success of the website will be measured in several ways:

- number of hits to website
- rate at which Bridge Clinic patients are transferred to community physicians