Jefferson’s Center for Refugee Health: A Model of Community Collaboration

Jefferson’s Center for Refugee Health (CRH) aims to deliver compassionate, comprehensive, and longitudinal health care for refugees who have resettled in Philadelphia, PA while also supporting educational and research activities that help to advocate for refugees. The CRH delivers clinical care within Jefferson Family Medicine Associates (JFMA), an urban, ambulatory, primary care practice housed in the Department of Family and Community Medicine at Thomas Jefferson University. In 2007, JFMA partnered with the Nationalities Service Center (a local immigrant and refugee social, legal, and educational support organization) to pilot a refugee health clinic. Serving 75 refugees in its first six months of operation, the CRH has grown over the past seven years to provide initial health assessments and ongoing primary care to 1,500 refugees from 26 different countries, including Bhutan, Burma, Iraq and Eritrea. Currently, the CRH cares for one-third of the approximately 750 refugees resettled in Philadelphia annually.

The CRH provides a full range of medical services from initial medical screenings to pediatric, adolescent, adult, obstetric/gynecological, geriatric, and inpatient care. To meet the needs of the growing population of refugees resettled locally, the clinic now takes place twice each week and includes sessions dedicated to women’s health and home visits. The CRH places particular attention on providing a timely domestic medical examination for newly arrived refugees to improve health and familiarize refugees with the healthcare system in the United States.

The CRH educates family medicine residents to provide culturally-humble evidence-based care for this socio-medically complex population. Marc Altshuler, MD, Director of the CRH and an Associate Professor within the Department of Family and Community Medicine, supervises clinical care for refugee patients including their initial medical screenings, follow-up visits, and coordination with specialists. He also serves as the faculty advisor for Jefferson’s Refugee Health Partners, an interdisciplinary organization led by medical students to advocate for the health and well-being of refugee communities. Family medicine residents and fellows often serve as preceptors at the free bimonthly clinics organized by Refugee Health Partners in the community. CRH encourages an interprofessional framework by fostering involvement and collaboration between students of medicine, pharmacy, social work and public health. This experience provides students with the opportunity to expand their competencies as well as to learn how to work effectively within an integrated healthcare team. Members of the team gain exposure to conditions less commonly seen in Philadelphia (such as malaria and schistosomiasis) as well as different presentations and patient experiences of common conditions including hypertension, diabetes, and hepatitis. Importantly, these students directly contribute to improved access and quality of care provided to refugees.

The CRH has performed quantitative and qualitative studies to strengthen surveillance, improve quality, and inform chronic care management among newly-arrived refugees. These studies have focused on chronic disease, communicable disease, women’s health, geriatric care, mental health, immunizations and pediatric growth. Findings from the research provide data needed to advocate for increased local programs, evidence-based policies and practices, and improved screening abroad. Results have been disseminated in six peer-reviewed manuscripts and over 40 conference posters and presentations. The CRH model has been replicated at five other academic primary care centers and a federally-qualified health center.

In addition to care, education, and research, the CRH also advocates for refugees, asylees, and other immigrant populations at the local, state and federal levels. Together, the CRH, partner clinics, and three refugee resettlement agencies founded the Philadelphia Refugee Health Collaborative to enhance local capacity to support refugee resettlement. The collaborative has improved access to medical screenings and ongoing quality healthcare for all refugees, and in doing so it has contributed to more successful resettlement and less traumatic acculturation. Timely access to medical care translates to timely entrance to schools and the workforce as part of cultural integration. The CRH personnel consult for other practices and states to promulgate the integrated core model, which includes initial screening directly transitioned into longitudinal care. Since 2011, the CRH and Philadelphia Refugee Health Collaborative have hosted site visits from the Office of Refugee Resettlement, the Centers for Disease Control and Prevention, and the International Organization for Migration. The CRH used these opportunities to share experiences and offer evidence based suggestions to improve access, quality, and efficiency. One recent success was obtaining funding from the state to support a dedicated position within the Philadelphia Department of Public Health to improve tracking and treatment of tuberculosis.

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In the future, the CRH plans to continue delivering quality care to refugees while offering research and advocacy opportunities for members of the community and health professionals across disciplines. The partnership between the CRH and Nationalities Service Center has facilitated the identification of community needs, while allowing for ongoing adaptation as the demographics of the population change and as new disparities are recognized. Meanwhile, the CRH along with the Philadelphia Refugee Health Collaborative are making strides to establish and provide coordinated care for the refugees of Philadelphia with the eventual goal of improved healthcare outcomes for refugees across the United States. The CRH continues to look for additional partners to forward the goal of improving access to quality healthcare while preparing providers across the disciplines to participate in these activities.

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