Recommendations



Ukom



INVESTIGATION FOLLOWING THE TRAGIC DROWNING IN TROMSØ

Recommendations

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Recommendations for the central authorities

The scope of application for NHIB is the health and social care service and our recommendations are aimed at this sector. The recommendations from this investigation are addressed to the Norwegian Ministry of Health and Social Care as the administrator of the Norwegian Health and Social Care Act (77) and the Norwegian Public Health Act (70).

NHIB recommends that the Norwegian Ministry of Health and Social Care, as the sector administrator, facilitates all local authorities being able to fulfil their obligations pursuant to the Norwegian Health and Social Care Act (77) and the Norwegian Public Health Act (70) in respect of everyone who is granted residence in Norway with family reunification.

This means that the national authorities should:

- systematically inform local authorities of refugees who are granted residence with family reunification
- set down requirements concerning health and social care expertise for the introduction programme
- allow for refugees' participation in the introduction programme to be adapted to the individual's state of health and care situation
- assess clearer standardisation in the field of migrant health.

Facts

The Norwegian Health and Social Care Act (77) has the following purpose, cf. Section 1-1:

- to prevent, treat and facilitate coping with disease, injury, suffering and disability,
- to promote social security and better living conditions for the disadvantaged, to contribute to people being valued equally and gender equality and to prevent social problems,
- to ensure that each individual has the opportunity to live and dwell independently and to have an active, meaningful existence in fellowship with others,
- to ensure the quality and equality of the services offered,
- to ensure coordination and that the services offered are accessible
- to patients and health care users and to ensure that the services offered are adapted to the individual's needs,
- to ensure that the services offered are organised in such a way that respects the individual's integrity and dignity, and
- to contribute towards the best possible use of resources.

Section 4 of the Norwegian Public Health Act

Section 4 of the Norwegian Public Health Act (70) formulates the responsibility of the local authorities as follows: The municipality shall promote the population's health and well-being, as well as good social and environmental conditions; contribute to the prevention of mental and somatic illnesses, disorders or injuries; contribute to reducing social inequalities in health and contribute to the protection of the population against factors that may have a negative impact on health.

Useful tools in local authorities' work with refugees

We have found that the useful tools that have been developed are used only to a limited extent. In this context, we would particularly like to mention:

- The national guide to health services for refugees, asylum seekers and reunited families (36). In this guide, the Norwegian Directorate of Health provides, among other things, specific recommendations relating to the content of the services.

- The guide booklet "Familiegjenforening i eksil- Forebygging gjennom familiesamtaler" (Family reunification in exile - Prevention through family meetings) (14). The Norwegian Directorate of Integration and Diversity recommends that the services use this booklet. The booklet was developed by RVTS Midt in collaboration with the refugee health team in the Municipality of Trondheim, the Department of Psychology at the University of Oslo and the Department of Social Work and Health Sciences at the Norwegian University of Science and Technology.

- Ti gode grep i introduksjonsprogrammet (Ten helpful steps for the introduction programme). The Norwegian Association of Local and Regional Authorities has drawn up advice to increase the chances of success (42).

NHIB recommends raising these questions as part of the local authorities' improvement efforts.

The regulations relating to management and quality improvement (78) aim to contribute towards professionally sound health and social care services, quality improvement and increased patient and user safety. A guide (79) has been developed for the regulations and describes how organisations can work on improvements.

Our assessment is that this methodology can be useful even if the risk areas are cross-sectoral. The investigation has highlighted the fact that interaction between all local authority services is important in order to meet the needs of refugees.

As part of continuous improvement work, the services may use these questions to identify their own risk areas:

- How do we ensure an overview of who is granted residence with family reunification so that they are allocated suitable housing and immediate follow-up?
- What procedures do we have in place to provide information about the right to independent residency in Norway, particularly in relation to derived refugee status?
- How do we ensure that refugees understand the information we provide about our welfare services, including the child welfare services?
- How do we help reunited families so that they can find services and support when they need them?
- How do we ensure adequate expertise in migrant health in all services that deal with refugees?
- How do we ensure that preventive health and social care services are available to refugees as part of the introduction programme?
- How do we ensure a flexible transition from the refugee health service to the regular health service?
- How do we ensure systematic interaction and flexible understanding of roles among everyone who provides services to refugees so that, together, we can identify those who are struggling?
- How can we benefit from external expert communities?
- How do we ensure proper collaboration with voluntary organisations?

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