



Global Health June 2011

Client Identity Arrangements for the New Electronic Processes (eHealth)

As part of ongoing business improvement, Global Health is reviewing client identity arrangements for the new electronic processes (eHealth).

Current identity checking arrangements for eHealth cases

As you know all Panel members have a responsibility to ensure that the person who presents for an immigration examination is the actual applicant. Section 11 (page 18) of the current *Instructions for Medical and Radiological Examination of Australian Visa Applicants* explains the identification procedures for Australian visa applicants. In regard to eHealth, section 11.6 refers:

‘Online Health (eHealth): For all eVisa cases, and all Online Health examinations, applicants must use an original passport for identification’.

In addition to the Instructions, we want to advise of two other acceptable identity options for **eHealth cases only**:

- National Identity Card and certified copy of passport
- National Identity Card and two other forms of documentation that confirm identity and place of residence; this refers to another form of photographic ID (such as a driver's licence) and a copy of a document that links the person to their current address (such as utilities notice etc).

Please remember that only new and original national identity cards incorporating a current photograph, full name, date of birth and signature can be submitted — photocopies are **not** acceptable. A signed photocopy of the national identity card, certified by the panel member, must be attached to forms 26/160, as well as a note made on the photocopy of the reasons for its use. For cases such as China, only new identity cards that were introduced in 2004 are acceptable.

Not all national identity cards can be accepted. National identity cards from the following countries are not acceptable forms of identification due to inadequate security features:

- Afghanistan
- Cambodia
- Indonesia
- Republic of South Africa, and
- Taiwan.

For these locations and for locations where a national identity card is not available, a valid original passport is the only acceptable form of identification.

Children under the age of 15

For eHealth cases where the original passport is not available - a certified copy of passport, another form of photo ID (school card) and a birth certificate is required for children under the age of 15.

Please be advised that this is not stated in the panel doctor guidelines so we would deem this as being an exemption in such circumstances.

eHealth – Where Can I Get More Information?

For help to process eHealth records, visit the Panel Doctors Gateway where you will find a step-by-step guide to the new changes and an example of a health examination list.

See: www.immi.gov.au/gateways/panel_doctors/

For further enquiries please contact Health Strategies Section

Email: health.strategies@immi.gov.au

In this issue

Client Identity Arrangements for the New Electronic Processes (eHealth)	1
eHealth – Where Can I Get More Information	1
Panel Locums	2
Changes to Contact Details	2
Where to Send Australian Visa Medicals	2
Update on TB Testing	2

Panel Locums

Panel locums can perform immigration medical examinations on an ongoing basis to provide coverage during periods of extended leave or high demand.

The documentation required is the same as a permanent panel appointment.

The panel member should provide four weeks notice to Global Health (GH) so that the application of a locum may be approved.

It is the panel member's responsibility to ensure that the nominated locum doctor has the qualifications, experience, knowledge and skills to perform the immigration medical examinations.

Once the panel member returns from leave, the locum doctor is required to cease conducting immigration medical examinations.

Changes to Contact Details

It is important that you advise GH on any changes to your contact details.

If you are moving, changing telephone / fax numbers or your email address, please advise GH.

Email: Health.Operations.Centre@immi.gov.au

GH will update the panel doctor website where required.

If a panel member intends to relocate they must inform GH to seek approval for appointment at the new location.

Where to Send Australian Visa Medicals

To determine the correct destination of medical results:

1. Check if the name of an overseas Australian Immigration office (Embassy/Consulate-General/High Commission) is on the Forms 26/160 or in a letter requesting the examinations – if so, send the results to this address.
2. If no overseas Australian Immigration office address is on the Forms 26/160 or in a letter, check the link below to confirm the correct destination of medical results.

See: www.immi.gov.au/gateways/panel_doctors/conducting_medicals/where_to_send_australian_visa_medical_results/

Update on Tuberculosis (TB) Testing

Our June 2010 newsletter outlined the requirement for Drug Susceptibility Testing (DST) for all sputum cultures in the context of increasing global rates of MDR-TB and XDR-TB.

Detection of active TB remains pivotal to immigrant health screening. As a reminder, it is a legislative requirement that entrants to Australia be free of TB. Once clients have successfully completed a full course of treatment, they will be permitted to enter Australia, and in most cases further follow-up will be arranged at a chest clinic. Global Health arranges for client's medical records to be sent to chest clinics in Australia.

Many high burden TB countries have, historically, diagnosed TB on clinical grounds only. Laboratories which perform sputum culture, species identification and DST are not always readily accessible. The process of sputum culture itself is highly specialised and requires significant technical expertise.

Patients with active TB can be asymptomatic, with the only sign being an abnormal CXR finding. Collection of sputum in this cohort, especially in the immigration health screening context, can be challenging.

For both these reasons, GH, in conjunction with our country partners, is in the process of identifying laboratories which have specific expertise in sputum collection, and in processing samples to the highest possible standards. If such laboratories have been identified in your country, you will be asked to refer clients needing further investigation to one of these approved facilities. This could be at some distance from your own clinic and we understand that it may not always be the most convenient laboratory for clients.

Nevertheless, accurate detection and appropriate treatment of active TB is vital.

Adherence to TB treatment regimens is extremely important. There are many reasons why patients may not always be fully compliant and therefore Directly Observed Therapy (DOT) should be provided where at all possible. Many countries have excellent National TB programs which follow DOT. Secondly, some panel locations have introduced their own DOT programs either as stand-alone centres or in conjunction with National TB programs. We would encourage you to familiarise yourself with the facilities available in your region.

These measures, we believe, will help reduce the incidence of drug resistance across the world, and, from an individual's point of view, have the added benefit of ensuring that they receive the best possible treatment for TB.

Thank you for your cooperation. Further information can be found at our website.

See: www.immi.gov.au/gateways/panel_doctors/