
Culturally and Linguistically Diverse Communities Health Advisory Group

Meeting: 12 March 2024

The Culturally and Linguistically Diverse (CALD) Communities Health Advisory Group (Advisory Group) held its 4th meeting on 12 March 2024.

DISCUSSION AND CONSIDERATION

The Department of Health and Aged Care (department) welcomed members to the first meeting of 2024.

The department shared information on the key preventive health initiatives underway, delivering on the *National Preventive Health Strategy 2021-2030*, tobacco and vaping reforms and women health initiatives.

The Health and Social Care Unit (HSCU), Monash University provided an overview of the findings from the review of COVID-19 engagement activities, which informed the co-design of the COVID-19 Vaccine Engagement Strategy for implementation. HSCU presented on the development of the co-designed *Enhanced Communications for CALD Communities – Prevention and Management of Chronic Conditions campaign* focused on promotion of cancer screening.

The department presented on its work to improve the quality and uptake of annual health assessments (AHAs) for people with intellectual disability. The Advisory Group discussed ways to improve access to these AHAs for people from CALD backgrounds. Members recommended simple processes and communications about AHAs, including eligibility. Opportunities to make these assessments more accessible and tailored for people from different backgrounds, through general practice software, were also discussed.

An overview and outcomes of the Deloitte's Rapid Review of the 2023 COVID-19 Booster rollout for at-risk cohorts was discussed including next steps. A summary of the [National COVID-19 Vaccine Program recommendations](#) was provided.

The Therapeutic Goods Administration discussed with members, and sought feedback, on the review of processes to improve ethnicity data collection in vaccine pharmacovigilance, related to adverse events following immunisation (AEFI) reports. Members suggested the collection of data, including ethnicity, should be the responsibility of a health care provider. Through personable conversations with providers, patients are more likely to understand why collecting this data is important. Members raised the use of linked data from general practice software and highlighted the need for consistency of ethnicity data fields across platforms. Limitations with general practice software, including lack of ethnicity data fields and variable terminology was raised as a barrier.

The department provided an update on CALD COVID-19 Vaccination trends. Members were presented with possible CALD population health data projects for analysis using the Person Level Integrated Data Asset from those proposed by members for work in 2024.

The Advisory Group considered the draft 2024 Work plan, including engagement opportunities in the areas of preventive health, access to health support services, and health system capacity and were invited to provide feedback out-of-session to the Secretariat to inform the final work plan.

NEXT STEPS

The Advisory Group will hold its next meeting on 19 June 2024.

See [Culturally and Linguistically Diverse Communities Health Advisory Group](#) and [terms of reference](#) for more information.