

# Finding the gap: Using notifications data to connect individuals to hepatitis C care



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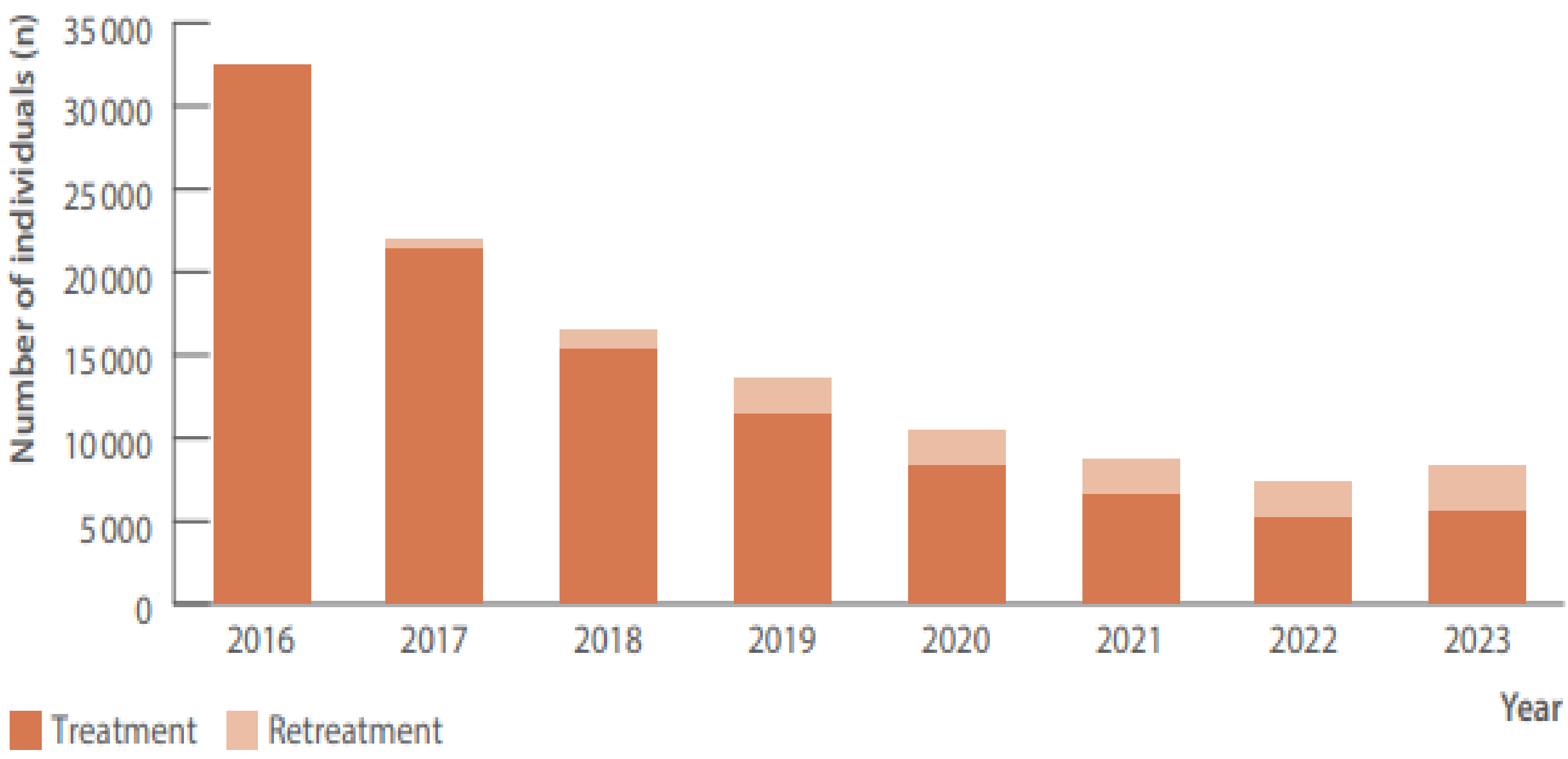
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## Background: stalling DAA treatment rates

We need to do more to find and support remaining cases.  
As Australia approaches its 2030 hepatitis C (HCV) elimination target and cases become harder to find, it will become increasingly important to enhance health pathways to ensure all historical and new diagnoses are linked to care and treatment.

## Our approach: leverage notification data

We have access to powerful data – can we use it as an opportunity to connect people to treatment?  
Connect C aims to foster the sustainable use of HCV notifications data held by health departments to link those diagnosed with HCV to treatment.  
We prioritise building linkages between stakeholders through in-person and online forums: health departments, community organisations, and healthcare and laboratory service stakeholders.  
We aim to inform community-accepted care models initiated from HCV notifications data.

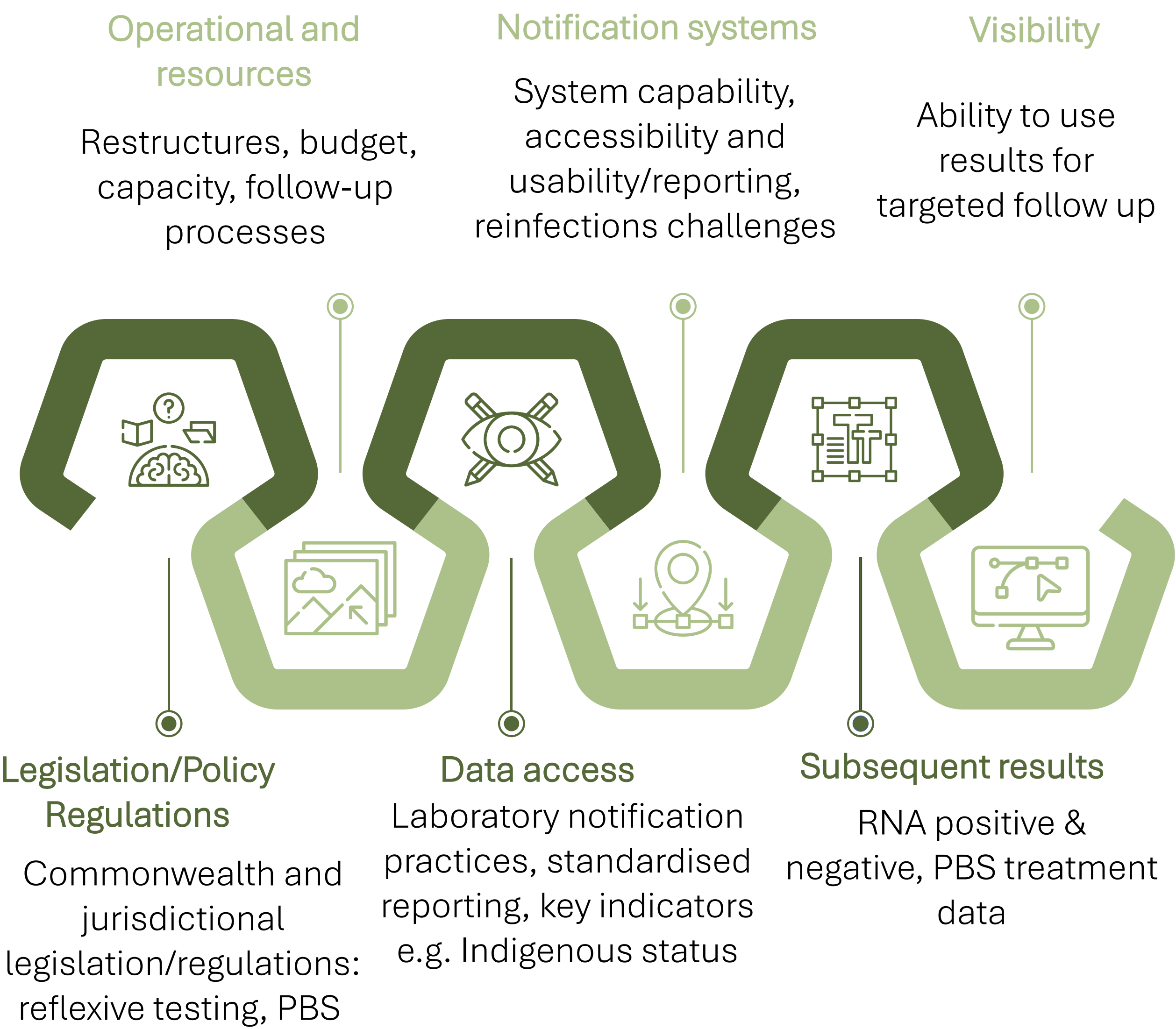


**Figure 1:** Total estimated number of individuals initiating DAA treatment (including retreatment), PBS database, March 2016–December 2023  
Source: Burnet Institute and Kirby Institute. Australia’s progress towards hepatitis C elimination: annual report 2024. Melbourne: Burnet Institute; 2024.

## Shared Voices, Shared Vision

We spoke to departments of health, community health organisations, people with lived experience, local public health units and peak bodies.

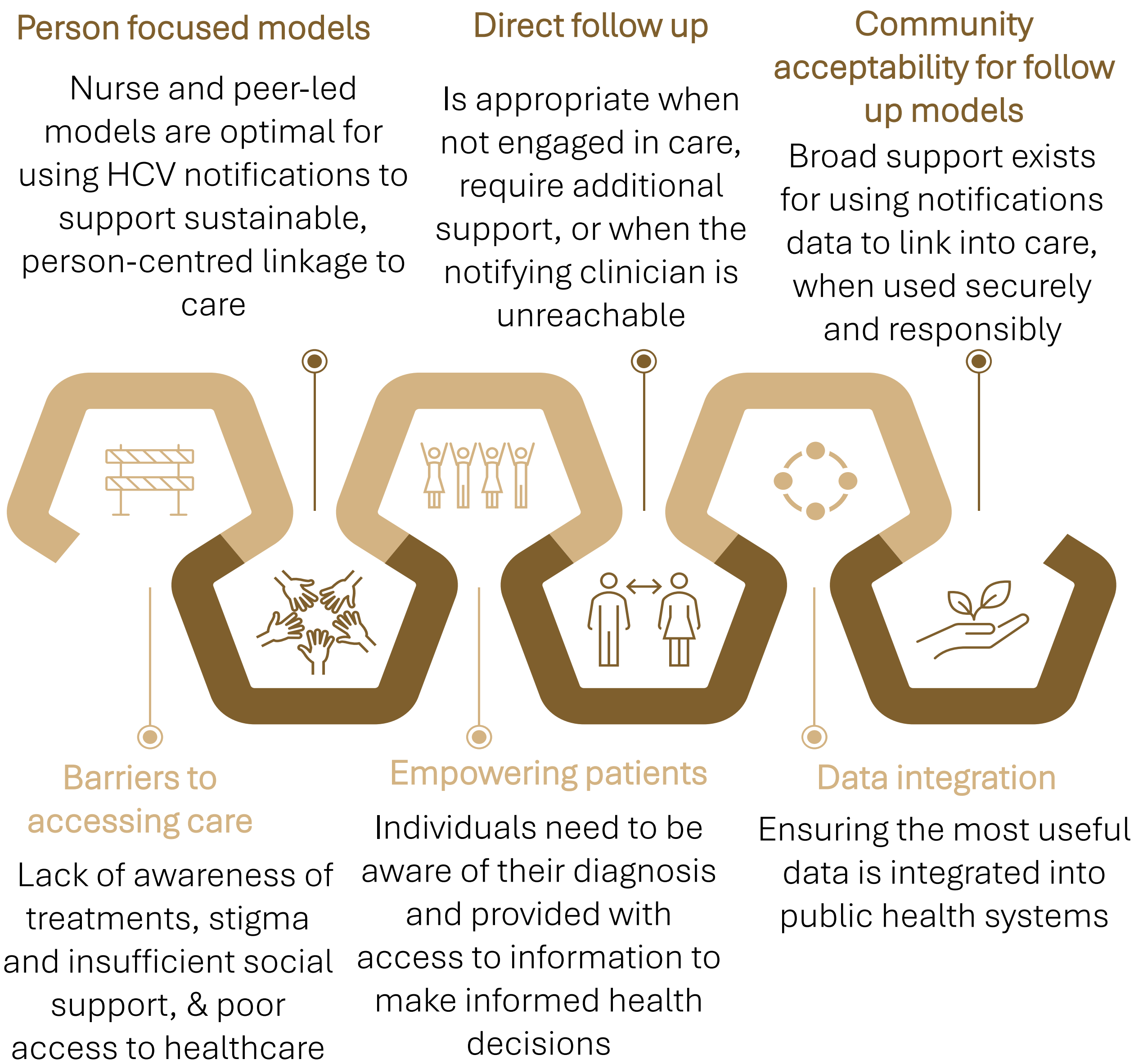
### Consultations: key insights



### Connect C in action

- System capacity**  
Working with jurisdictions to improve system capacity to access, process and share data
- Follow-up process**  
Exploring how the public health system can better prioritise follow up, record cascade outcomes, and perform enhanced surveillance
- Data visibility**  
Making notifications identifiable in health surveillance system to facilitate follow up
- Access to negative RNA results**  
Enhancing access to and use of negative RNA results to be able to prioritise cases for follow up
- Community links**  
Conducting community consultations to develop a person-centric approach to care pathways
- Advocacy for data access**  
Leading advocacy efforts for access to reflexive testing and PBS data access and linkage

### Workshops: key insights



## The road ahead: Still a lot of work to do

- Legislative interpretation and regulatory updates**  
To allow for appropriate data sharing and access to test results
  - System capabilities and resources**  
To allow for efficient use of data to prioritise follow ups and track cascade of care
  - Diagnostic definitions and pathology processes**  
To ensure all necessary data is captured and reported
  - Data availability and visibility**  
Data sharing between key databases to allow access to information to guide follow up
- The ideal follow up approach is:**
- ✓ Driven by collaboration within the sector
  - ✓ Grounded in existing services, strengths, relationships and local knowledge
  - ✓ Community-led, valuing peer support and clinical expertise
  - ✓ Person-centred, culturally safe and responsive
  - ✓ Efficient, prioritised and data-powered

## Connect C’s next steps

- Continue collaboration with jurisdictions to improve systems for better data access, follow-up, and hepatitis C care reporting.
- Build on the strong ongoing commitment across the sector to work together to eliminate hepatitis C, despite limited resources, using notifications data to implement models to link people into care.
- Continue to share ideas and models through Connect C, promoting change and collaboration between jurisdictions.
- We will continue facilitating collaboration and knowledge sharing to strengthen partnerships and drive innovation, with a national sharing event planned for the end of the year.