

Transitioning to a place-based model of public health management for Hepatitis B & C in South East Melbourne, Australia

South East Public Health Unit

Melbourne, Australia

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- 2022: Hepatitis B and C case follow-up transferred from the Victorian Department of Health to the newly-established Local Public Health Units
- Viral hepatitis (B and C) are highly prevalent in culturally and linguistically diverse (CALD) migrant communities across the South East Public Health Unit (SEPHU) catchment
- People who have newly arrived often face many challenges when accessing the Australian healthcare system and optimising links into care is crucial.
- 2023: The South East Public Health Unit (SEPHU) initiated a pilot program embedding a dedicated Cultural Liaison Officer (CLO) into our Public Health Officer team
 - To improve health outcomes of those with viral hepatitis on a Health Undertaking
 - Deliver tailored case management
 - Develop resources for better public engagement with health services
- We plan to evaluate the impact of the CLO on Hepatitis management health outcomes and data completion
- **The aim of this research was to establish a baseline by evaluating the impact of transferring Hepatitis B and C follow-up to the South East Public Health Unit**



PICO		Rationale
Population	Hepatitis B and C notifications from testing related to visa applications with an address within the SEPHU catchment	<ul style="list-style-type: none"> • Proxy for migrant populations, at greater risk of both: <ul style="list-style-type: none"> • Living with chronic viral hepatitis, and • Not being fully engaged by Australia's healthcare system.
Intervention	Transfer of follow up of Hepatitis B and C notifications to SEPHU.	Management of Hepatitis B and C was transferred in August-September 2022.
Comparison	Compared between pre- and post-transfer periods. Pre-transfer: 1/1/2017 – 1/9/2022 Post-transfer: 2/9/2022 – 1/11/2023	To gain a baseline understanding of the impact of transferring hepatitis follow-up management to SEPHU.
Outcomes	Data collection completeness Public health actions	Important to improve linkages into care and prevent onward transmission.

Note: as part of the transfer of case follow-up from the Department of Health to Local Public Health Units new fields were added to PHESS to capture enhanced data collection – this has been accounted for in our analysis.

Metric	Pre-transfer	Post-transfer	Pertains to	Chi-squared value
Data recorded on whether person was linked into care at time of notification	71/243 (29.3%)	110/111 (98.5%)	Data completion	176.2, P<0.001
Followed up until they were linked into care (of those not previously receiving care)	8.0%	50.0%	Public health actions	12.9, P<0.001
Contacts recommended to have a hepatitis B vaccination	5.7%	34.9%	Public health actions	160.0, P<0.001

- To assess the impact of the CLO in improving health outcomes of those diagnosed with viral hepatitis on visa screening
 - Engagement and linkage to care
 - Semi-structured interviews to evaluate experience
- Develop resources to improve engagement with health services

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- **Patients with hepatitis B and C**
- **Local health care providers**
- **Victorian Government Department of Health**
 - Victorian Medical Research Acceleration Fund
 - Nasra Higgins
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