

Coordinated Hepatitis responses to Enhance the Cascade of Care by Optimising Existing Surveillance Systems (CHECCS) in Victoria



Our project supported diagnosing clinicians to provide care for Victorians living with hepatitis C through public health follow-up.

It enhanced care delivery for people newly diagnosed with hepatitis C, providing clinical resources and linkages into clinical support networks. It also embedded cascade of care data into the Victorian surveillance system, providing timely data regarding treatment and care uptake. Improved information gathered regarding demographics and risk factors will further support policy responses tailored for affected communities.

Outcomes

356



cases of newly diagnosed hepatitis C had care uptake measures gathered.

100



clinicians requested resources to support hepatitis C management.

28



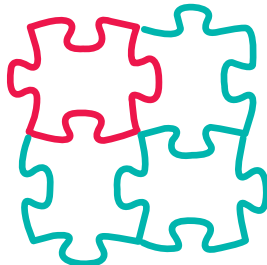
clinicians reported CHECCS led to engagement of patients not previously in care.

2.4

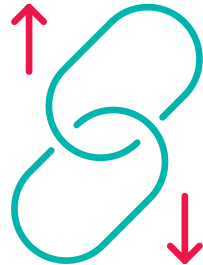


fold increase in risk factor data completeness compared to baseline.

The CHECCS follow-up protocol has been **integrated into best practice** for use by Victoria’s Local Public Health Units (LPHUs).



Strong links were established for diagnosing clinicians with Victoria’s Integrated Hepatitis C Nurses, helping bridge care gaps for marginalised patients.



Learnings



Diagnosis in hospital was identified as a key area of focus for **improving follow-up care**.

Sustaining the initiative



Continue **follow-up of people newly notified with hepatitis C**, and consider expansion to historical diagnoses.



Develop **pathways to assess** post-referral outcomes.



Enhance **system linkages** to allow access to laboratory testing data for improved efficiency and prioritisation.

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