

**Clinical Reference Group Meeting 3/2016 Minutes**

**Thursday 9<sup>th</sup> June 2016**

**6:00 – 7:30pm**

**The Boardroom, Monash School of Rural Health - Latrobe Valley  
Latrobe Regional Hospital and via Zoom video (VC)/teleconference (TC)**

**Attendees:** Associate Professor Joseph Tam (Chair), Dr Fred Edwards, Dr Ryan Hoy (TC), Associate Professor Paul Lee, Ms Angela Scully, Professor Andrew Tonkin (TC)

**Ex Officio:** Professor Judi Walker (VC)

**Observers:** Dr Jill Blackman (VC), Dr Matthew Carroll, Ms Susan Denny

**Apologies:** Professor Michael Abramson, Dr Jo McCubbin, Dr Ian Webb, Clinical Associate Professor Alistair Wright, Dr David Monash

**1. Welcome and introductions**

Associate Professor Joseph Tam opened the meeting and welcomed those in attendance. The group look forward welcoming Dr David Monash new member from Sale.

**2. Notes from second meeting held 12 November 2015**

The notes from the second meeting were accepted by the group as a true and accurate summary.

**3. Study Status Report**

Dr Jill Blackman gave an overview of the progress of the various streams of the Hazelwood Health Study to date, as per the Study Status Report. Key points included:

- The Adult Survey stream is now actively recruiting participants in Morwell and Sale with a detailed marketing campaign underway. Jill noted that the Adult Survey has opted to use a \$20 shopping voucher to reimburse participants for their time – with the vouchers only redeemable at local businesses.
- The Early Life Follow- Up (ELF) infant health study is about one third of the way through the first round of data collection.
- The Older People research stream has completed data collection and is writing up the findings.
- The Schools Study stream has completed the first round of data collection and is working on analysing the data.

Discussion with the group members included the need to build links with the Gippsland Primary Health Network by presenting details of the study activities and findings to GP practice and educational meetings. It was agreed that the PHN would be an ideal

organisation to disseminate study information using their fortnightly newsletter, especially in light of data extraction tools they are developing. One of the local GPs indicated that he would endeavour to trial the survey with his patients.

There was some discussion regarding the initial analysis of ambulance attendance data which has been accessed through the Hazelinks data linkage and extraction component of the study with Jill noting that preliminary findings were expected within the next couple of months and would be provided to the Clinical Reference Group for comment.

**Action:** *Susan Denny to follow up regarding increased connections with the PHN and further promotion of the study in GP practices.*

#### **4. Study website**

Dr Matthew Carroll gave group members a brief update on the study website which had been extensively modified. Major changes include highlighting the Adult Survey on the home page and on a dedicated research stream page including the development of detailed frequently asked questions. The website also highlights engagement activities with the community including the efforts of the Recruitment and Engagement Coordinator to connect with community members at markets and other events. Members were encouraged to review the website.

#### **5. Implementation of Recommendations – Mine Fire Inquiry**

Discussion incorporated into item 6 below

#### **6. Process for Release of Study Findings to the Community and Professional Organisations**

It was noted that the ongoing work within the study to develop a process for the release of study findings was closely linked to the recommendations from the re-opened Hazelwood Mine Fire Inquiry so items 5 and 6 were considered jointly.

The need for a clear process for release of findings to the community was highlighted by the Hazelwood Mine Fire Inquiry and is one of the issues being considered by the review of the study which Deloitte Access Economics has been commissioned to undertake.

Professor Walker noted that work on the dissemination process had been underway prior to the announcement of the review and, given the importance of dissemination and the fact that the Deloitte review report was not expected for some months, the study team felt it was important to continue to development.

Professor Walker provided members with an outline of the proposed dissemination guidelines including the guiding principles, the roles and responsibilities of the study, and the multiple ways that information can be disseminated including community briefings, fact sheets, media releases, and clinical briefings.

CRG members provided valuable feedback on the proposed approach, highlighting a number of important areas including:

- Reinforcing the need to connect with existing organisations and groups to better spread the findings
- Endorsing the need to disseminate findings in multiple ways including in the academic and policy space as well as targeted summaries for clinicians and local community members. In particular, it was suggested documents targeted at the local community should be developed with the input from community members such as the representatives on the Community Advisory Community to ensure local uptake
- The importance of working with the local media was reinforced as they are seen as trusted sources of information. As was the need to make use of social media streams.

The CRG discussed other matters relating to the recommendations of the Hazelwood Mine Fire Inquiry including the implementation of the Health Innovation Zone and Health Assembly and potential changes to the governance arrangements for the Hazelwood Health Study. Judi noted that a task force has been established to implement the Health Innovation Zone and that a number of high level discussions had taken place and that an independent chair was expected to be appointed shortly.

## **7. Other business**

- Professor Andrew Tonkin noted that the Cardiovascular Stream will be meeting to start fleshing out the protocols for the stream operations once the Adult Survey is completed and a sub-cohort has been selected.
- Dr Jill Blackman asked members to let the team know if there are any meetings or activities taking place that the study could connect into. One suggested possibility was connecting into the Consumers' Health Forum.