

## Clinical Reference Group (CRG)

### Meeting 3/2017

Wednesday 15 November 2017 6:30 – 8:00pm

Boardroom

Monash School of Rural Health

Latrobe Regional Hospital campus and via videoconference

### Meeting Notes

#### 1. Welcome and Apologies

**In Attendance:** Dr Fred Edwards (Chair), Ms Jeannette Douglas, Dr Ryan Hoy (videoconference), Dr Jo McCubbin (videoconference), Dr Dion Stub (videoconference), and Dr Ian Webb

**Ex Officio:** Professor Michael Abramson (Principal Investigator – videoconference), and Professor Judi Walker (Principal Co-Investigator)

**Observer:** Mr Shaun Mallia (Communications and Engagement Adviser)

**Invited guest:** Dr Fay Johnston (Stream Lead, ELF – videoconference)

**Apologies:** Dr Jill Blackman, Associate Professor Paul Lee, Dr David Monash, Ms Angela Scully, and Associate Professor Alistair Wright

#### 2. Confirmation of draft meeting notes from meeting held 11 July 2017

The notes of the last meeting were endorsed as an accurate record. All Action items were completed.

**Action:** *Endorsed meeting notes to be uploaded to the Hazelwood Health Study website.*

#### 3. Study Status Report

Professors Walker and Abramson provided updates to the Status Report, and answered questions from members:

- The Latrobe Early Life Follow-up Stream finally has access to the Victorian Perinatal data and will proceed with data analysis.
- Dr Matthew Carroll has agreed to take on the role of Lead, Psychological Impact Stream for Years 4 – 5.

#### 4. Annual Report (verbal report)

The 3<sup>rd</sup> Annual Report is due to be submitted to DHHS on 16 November. It will include the Latrobe Early Life Follow-up Preliminary Report of findings describing the cohort and an initial assessment of possible associations between mine fire emissions and perinatal outcomes (see Item 6).

#### 5. Clinical Streams (verbal report)

Professor Abramson briefed the CRG on matters of clinical interest arising from ongoing respiratory clinical testing in Morwell and the early stages of cardiovascular assessments in Sale.

In Morwell 302 bookings have been made with 272 tests completed – half way to achieving the target for the respiratory stream in this wave.

In Sale, the preparation time was extended due to the unplanned departure of the Coordinator. Testing began on 26 October and 49 assessments have been completed to date

**Action:** *Professor Abramson to query whether there have been any instances of participants who do not nominate a GP and whether this has raised any issues for the study.*

**6. Early Life Follow-up Stream – Report: Description of the Latrobe ELF cohort and a preliminary assessment of possible associations between mine fire emissions and perinatal outcomes (not available for circulation at this stage)**

Dr Johnston joined the meeting via videoconference for this item.

The report has been completed and undergone internal review, including review and advice from members of the CRG, prior to submission to DHHS as part of the 3<sup>rd</sup> Annual Report. It presents the first findings from the survey completed by parents or carers of participating children, focussing on birth related outcomes. There were no alarming trends reported in these early findings with no associations between exposure to coal mine fire smoke and adverse birth outcomes were observed. More results from the survey will be presented in later reports.

Dr Johnston addressed a number of questions from members including the association between peak and mean exposure to PM<sub>2.5</sub> and perinatal outcomes in the cohort.

Further studies of perinatal outcomes are planned. These will include evaluation of birth outcomes in the cohort using improved personal exposure estimates, and a separate analysis of de-identified perinatal data for all children born in the Latrobe Valley.

CRG members concluded that some key messages from the findings to date included the importance of reducing maternal smoking, and the importance of social support beyond medical care for mothers. The data collected to date and analysis planned is considerable and will enhance, for example, GPHN's maternal and child health data.

**7. MBS and PBS Anonymous Data Extraction Report (not available for circulation at this stage)**

This report will be an important output from the Hazelinks research stream and is in draft form at this stage. The MBS and PBS data for the Latrobe Valley are being used to investigate whether increases in health service use or dispensing of prescription medicines for respiratory, cardiovascular or mental health conditions were associated with mine fire related PM<sub>2.5</sub> exposure. Early indications are that there is an association and full findings will be shared with the CRG after DHHS authorisation to release the report.

**8. Ministerial Advisory Committee/governance update**

Professor Abramson and Walker briefed the Ministerial Advisory Committee at their October meeting and discussed the Hazelwood Health Study's engagement with the MAC's term of reference.

They also met with Professor John Catford, the chair of the Latrobe Health Assembly, prior to their presentation to the Assembly on 14 November 2017.

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**9. Dissemination of Findings Timetable**

Members reviewed the timetable and noted that there should be a number for scholarly articles written in 2018 and they were invited to register interest as reviewers.

**10. Our Power documentary**

The Chair briefed the committee on a conversation with the Producers of this documentary.

**11. Annual Evaluation**

Members were encouraged to provide feedback about the CRG's terms of reference and performance. A brief survey will be emailed to members in due course.

**Action: Circulate Annual Evaluation form to all members**

**12. Other business**

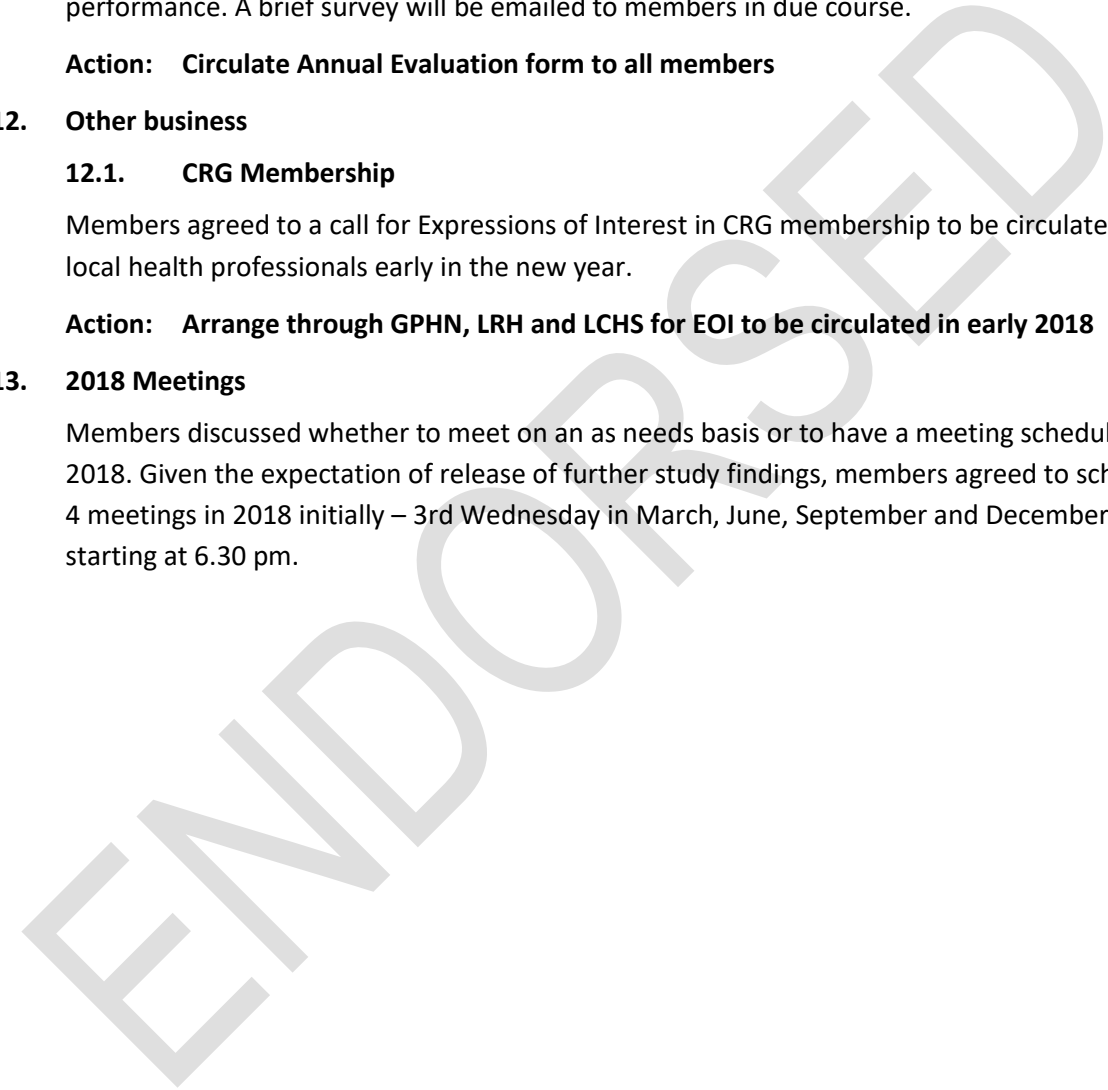
**12.1. CRG Membership**

Members agreed to a call for Expressions of Interest in CRG membership to be circulated to local health professionals early in the new year.

**Action: Arrange through GPHN, LRH and LCHS for EOI to be circulated in early 2018**

**13. 2018 Meetings**

Members discussed whether to meet on an as needs basis or to have a meeting schedule for 2018. Given the expectation of release of further study findings, members agreed to schedule 4 meetings in 2018 initially – 3rd Wednesday in March, June, September and December, starting at 6.30 pm.



## Hazelwood Health Study Clinical Reference Group

### Action Items – 2017

11 July 2017	1	<i>Endorsed meeting notes of previous meeting to be uploaded to the HHS website.</i>	KS	✓
11 July 2017	2	<i>CRG members to offer feedback on terms of reference by next meeting.</i>	All	✓
11 July 2017	3	<i>CRG members to forward suggestions for increasing the scope of membership.</i>	All	✓
11 July 2017	4	<i>CRG members to forward suggestions for cardiology reviewer.</i>	All	✓
11 July 2017	5	<i>GPHN to provide a list of local General Practitioners.</i>	JD	✓
11 July 2017	6	<i>Secretariat to circulate updated Explanatory Statements for review.</i>	KS	✓
15 November 2017	7	<i>Endorsed meeting notes of previous meeting to be uploaded to the HHS website.</i>	SM	✓
15 November 2017	8	<i>Professor Abramson to query whether there have been issues with participants not nominating a GP</i>	MA	✓
15 November 2017	9	<i>Circulate Annual Evaluation form to all members</i>	JW	✓
15 November 2017	10	<i>Arrange through GPHN, LRH and LCHS for CRG membership EOI to be circulated in early 2018</i>	SM	✓