

LATROBE HEALTH INNOVATION ZONE EARLY DETECTION AND SCREENING INCLUDING TOBACCO INITIATIVE:

Evaluation Summary

The Hazelwood Mine fire (2014) brought the health of the Latrobe Valley into the spotlight. Following the inquiry into the fire, nine key areas related to early detection and screening including smoking cessation formed the scope of the Initiative which was part of the broader Innovation Zone work. An outcome evaluation of the whole Latrobe Health Innovation Zone is here: https://www.health.vic.gov.au/publications/latrobe-health-innovation-zone-final-evaluation

Aim: Support people to prevent illness before it occurs, detect illness early and ensure that those who need treatment and support services can access them locally, across three themes:

- 1. Smoking cessation
- 2. Population based cancer screening (breast, bowel and cervical)
- 3. Risk assessment and opportunistic screening

People in the Latrobe Valley are more likely to:



Experience disadvantage compared to the Australian population (28%, 10% Aus)



Smoke (22%, 16% Vic)



Consume alcohol at levels likely to increase lifetime harm (64%, 60% Vic)



Experience avoidable death from heart related issues, cancer, chronic obstructive pulmonary disease and diabetes compared to Victoria

KEY EVALUATION AREAS AND FINDINGS

IMPACT

Smoking cessation

- No significant changes in smoking rates were seen between 2017 and 2020 (noting limitations in data to detect any change)
- It is likely that factors beyond the Initiative contributed to smoking rates

Cancer screening

- The Initiative did not significantly affect breast or bowel screening in Latrobe (2017-20)
- It exceeded the objective of increasing breast cancer screening in women aged 70-74 up to the state average (2018-19)
- Cervical smear rates in general practice increased in 2021-22 compared to previous years, noting this may not correspond to increased cervical screening rates

Opportunistic screening

- · Smoking status and alcohol consumption were well captured by GPs
- Referrals to Quitline and Life! increased when ongoing training or prompts were provided



KEY EVALUATION AREAS AND FINDINGS

EFFECTIVENESS

- Activities/projects specifically targeting vulnerable populations had increased participation rates compared to non-targeted programs
- Good uptake of the Smoking Cessation Education program by **Health Professionals**

EFFICIENCY

- The cost of the Initiative was \$4.4 million over 5.5 years.
- Average cost per activity / project of approximately \$64,000
- The largest cost category was staff salaries and wages (40% of total costs); remaining 60% spent on the three themes of the Initiative (approximately 20% per theme)



tailored for Aboriginal and Torres Strait Islander people

APPROPRIATENESS

- Appropriate accountability and governance was provided by the Project Control Group
- Off the shelf training products appeared less popular among health professionals than those that were specifically tailored

SUSTAINABILITY

- Health Pathways developed to aid GP referrals received numerous views and remain an ongoing resource for Health Professionals
- · Barriers to sustainability were a lack of sustainable funding models and a lack of demonstration of value for money

HIGHLIGHTS

- Activities that were co-designed with community had good participation rates
- Social media was a wide-reaching medium when cross promoted by relevant stakeholders and was an effective way to promote campaign messaging

FUTURE PROGRAMS

- Consider and plan for recurrent education/prompts: targeting behaviour change among health professionals
- Include dedicated programs for vulnerable people: LGBTQI+, culturally and linguistically diverse & Aboriginal and Torres Strait Islander people