The Queensland Government is committed to reducing hepatitis B virus transmission and improving the health outcomes of people living with chronic hepatitis B in Queensland.

This action plan acknowledges the current provision of quality hepatitis B prevention, testing and treatment services within Queensland Health, the private sector and community based organisations across Queensland.

The plan complements this ongoing work and will focus on:

- targeted best practice prevention activities
- increased access to testing for hepatitis B
- increased access to management and treatment for people living with chronic hepatitis B.

The success of these efforts depends not on reaching all people, but on reaching the right people through effective targeted interventions.


The Hon Cameron Dick MP
Minister for Health and
Minister for Ambulance Services

Foreword

Hepatitis B causes inflammation of the liver. Chronic infection can result in progressive liver inflammation leading to cirrhosis (scarring of the liver) and cancer.

Since 2008, notification of acute hepatitis B virus (HBV) infection has remained low and stable, with 43 cases reported in Queensland in 2015.

Notifications of unspecified HBV infections, most of which are chronic infections, have increased slightly with 1024 cases reported in Queensland in 2015.

The incidence of serious liver disease and cancer is linked to undiagnosed and untreated chronic hepatitis B.
<table>
<thead>
<tr>
<th><strong>GOAL</strong></th>
<th>To ensure that all people living with chronic hepatitis B are monitored and, where appropriate, receive treatment in accordance with best practice standards by 2021</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Outcome</strong></td>
<td>1. Implement a comprehensive approach to reduce hepatitis B transmission</td>
</tr>
<tr>
<td><strong>Target populations</strong></td>
<td>Culturally and linguistically diverse people, Aboriginal and Torres Strait Islander people, mothers living with hepatitis B and their babies, men who have sex with men and people who inject drugs.</td>
</tr>
<tr>
<td><strong>Key settings</strong></td>
<td>Community and primary healthcare settings</td>
</tr>
</tbody>
</table>
**Outcome 1. Implement a comprehensive approach to reduce hepatitis B transmission**

1.1 Ensure hepatitis B prevention programs target priority populations.
1.2 Promote and provide improved access to preventive equipment, including the full range of sterile injecting equipment.
1.3 Engage with community based organisations (CBOs) to increase hepatitis B awareness, knowledge and prevention skills through peer education and brief interventions.
1.4 Work with PHNs and HHSs to promote hepatitis B prevention interventions, including hepatitis B vaccination for all children and priority populations.
1.5 Ensure all babies born to hepatitis B positive mothers are given hepatitis B immunoglobulin within 12 hours of birth.
1.6 Ensure all Aboriginal and Torres Strait Islander people are offered hepatitis B vaccine if not fully vaccinated or immune.

**Outcome 2. Increase voluntary testing for hepatitis B**

2.1 Work with PHNs, CBOs and HHSs to promote and increase access to testing and early diagnosis of hepatitis B.
2.2 Address barriers to testing through targeted marketing activities, including direction to services, reducing stigma in the wider community and clinician engagement.
2.3 Support implementation of enhanced hepatitis B testing in targeted GP settings.
2.4 Examine how hepatitis B notification data and processes can be improved.

**Outcome 3. Improve monitoring of and increase treatment uptake by people with chronic hepatitis B**

3.1 Promote enhanced access to chronic hepatitis B monitoring and treatment, and support community based hepatitis B monitoring and treatment.
3.2 Continue to fund and support CBOs to improve chronic hepatitis B monitoring, treatment uptake and adherence to treatment.
3.3 Examine and improve models of treatment and care in the community by continuing existing specialist care through gastroenterology and infectious diseases clinics, while reviewing shared care arrangements between specialist clinics, GPs, nurse practitioners, CBOs and pharmacists.
3.4 Explore the development of options to improve the ongoing monitoring of people living with chronic hepatitis B.

**Outcome 4. Increase awareness of hepatitis B transmission and reduce stigma and discrimination related to hepatitis B**

4.1 Continue to fund and support the development and delivery of targeted strategies including:

- social marketing to educate and inform the population about hepatitis B including vaccination options
- information regarding the nature and natural history of hepatitis B infection
- the importance of testing for hepatitis B infection
- the importance of regular monitoring and treatment options.
## Outcome

1. **Implement a comprehensive approach to reduce hepatitis B transmission**

2. **Increase voluntary testing for hepatitis B**

3. **Improve monitoring of and increase treatment uptake by people with chronic hepatitis B**

4. **Increase awareness of hepatitis B transmission and reduce stigma and discrimination related to hepatitis B**

## Indicators

### 1. Implement a comprehensive approach to reduce hepatitis B transmission

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Source</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Achieve 95% childhood vaccination coverage at one year of age</td>
<td>Australian Immunisation Register</td>
<td>Annual</td>
</tr>
<tr>
<td>Amount of sterile injecting equipment provided</td>
<td>Queensland Needle and Syringe Program, Communicable Diseases Branch, Department of Health</td>
<td>Annual</td>
</tr>
<tr>
<td>The proportion of people who inject drugs who share injecting equipment</td>
<td>Australian NSP Survey, Kirby Institute</td>
<td>Annual</td>
</tr>
<tr>
<td>The proportion of men who have sex with men reporting that they are engaging in safer sexual practices</td>
<td>Gay Community Periodic Survey, Centre for Social Research in Health</td>
<td>Annual</td>
</tr>
</tbody>
</table>

### 2. Increase voluntary testing for hepatitis B

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Source</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>All PHNs promote the provision of hepatitis B testing and vaccination services</td>
<td>Survey of PHNs, Department of Health</td>
<td>Annual</td>
</tr>
<tr>
<td>Delivery of targeted hepatitis B awareness activities by funded service providers</td>
<td>Funded service provider reports, Department of Health</td>
<td>Annual</td>
</tr>
<tr>
<td>Weekly, year to date and annual reporting of hepatitis B notifications</td>
<td>Communicable Diseases Branch, Department of Health</td>
<td>Weekly</td>
</tr>
</tbody>
</table>

### 3. Improve monitoring of and increase treatment uptake by people with chronic hepatitis B

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Source</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>The proportion of people with chronic hepatitis B receiving yearly hepatitis B viral load testing</td>
<td>Commonwealth data</td>
<td>Annual</td>
</tr>
<tr>
<td>The proportion of people with chronic hepatitis B receiving treatment</td>
<td>Commonwealth data</td>
<td>Annual</td>
</tr>
<tr>
<td>All PHNs and HHSs have collaborative arrangements in place to ensure timely local access to chronic hepatitis B treatment</td>
<td>Survey of PHNs and HHSs, and Department of Health</td>
<td>Annual</td>
</tr>
</tbody>
</table>

### 4. Increase awareness of hepatitis B transmission and reduce stigma and discrimination related to hepatitis B

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Source</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of targeted campaigns undertaken to increase awareness of hepatitis B in specific settings or among specific populations</td>
<td>Funded service provider reports</td>
<td>Annual</td>
</tr>
</tbody>
</table>
Queensland Hepatitis B Action Plan 2016–2021

Published by the State of Queensland (Queensland Health), November 2016

This document is licensed under a Creative Commons Attribution 3.0 Australia licence.
© State of Queensland (Queensland Health) 2016
You are free to copy, communicate and adapt the work, as long as you attribute the State of Queensland (Queensland Health).

For more information contact:
Strategic Policy Unit, Department of Health,
GPO Box 48, Brisbane QLD 4001
strategicpolicy@health.qld.gov.au

Disclaimer:
The content presented in this publication is distributed by the Queensland Government as an information source only. The State of Queensland makes no statements, representations or warranties about the accuracy, completeness or reliability of any information contained in this publication. The State of Queensland disclaims all responsibility and all liability (including without limitation for liability in negligence) for all expenses, losses, damages and costs you might incur as a result of the information being inaccurate or incomplete in any way, and for any reason reliance was placed on such information.